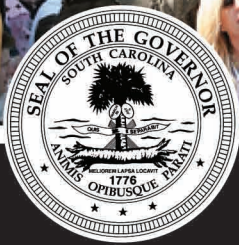


STATE OF SOUTH CAROLINA

Governor's Office of Executive Policy and Programs (OEPP)

Accountability Report

Fiscal Year 2007-2008



Accountability Report Transmittal Form

Agency Name: Governor's Office of Executive Policy and Programs (OEPP)

Date of Submission: September 19, 2008

Agency Director: Larry Barker, PhD – Director of Administration

Agency Contact Person: Larry Barker, PhD

Agency Contact's Telephone Number: 734-0560

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs

The Office of Executive Policy and Programs is comprised of thirteen offices along with the senior leaders and support staff. The content of this report will highlight the overall process of the Office of Executive Policy and Programs and the thirteen program offices within OEPP. Each Office's individual report is attached as an Appendices to this report.

The individual offices of OEPP are:

- Client Assistance Program (Appendix A)
- Continuum of Care (Appendix B)
- Correspondence (Appendix C)
- Crime Victims Ombudsman (Appendix D)
- Developmental Disabilities Council (Appendix E)
- Economic Opportunity (Appendix F)
- Foster Care Review Board (Appendix G)
- Guardian Ad Litem (Appendix H)
- Ombudsman's Office
Children's Affairs/Children's Case Resolution System (Appendix I)
- Small and Minority Business Assistance (Appendix J)
- State Office of Victim Assistance (Appendix K)
- Veterans Affairs (Appendix L)

**Governor's Office
Office of Executive Policy and
Programs (OEPP)**

**2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs**

Section I - Executive Summary

1. Stated Purpose, Mission, Vision and Values

1.1. Purpose:

The Office of Executive Policy and Programs (OEPP) provide administrative and financial services for the Governor's Office, including the Executive Control of State (ECOS) and the Governor's Mansion and Grounds. The eleven offices within OEPP provide a wide variety of essential constituent services to the residents of South Carolina. These essential services include providing assistance to abused and neglected children, children with emotional and behavioral problems, victims of crime, people with disabilities, veterans, small and minority businesses and others. The content of this report will highlight the overall process for OEPP; the eleven program's specific information is located in the Appendices.

1.2. Mission Statement – Office of Executive Policy and Programs

The mission of OEPP is to enhance the lives of the citizens of South Carolina by providing essential services through open and accountable government.

1.3. Vision

OEPP will become state government's leader in providing seamless services that will result in the highest level of customer satisfaction and public trust.

1.4. Values

OEPP's organizational values are to:

- Provide exceptional customer service
 - Promote open and accountable government
 - Operate efficiently with fiscally responsibility
 - Maintain a commitment to servant leadership
- ... *IT'S ABOUT SERVING PEOPLE!!!*

2. Major Achievements for FY 2006-2007

- 2.1. For the third year in a row, the annual financial audit of OEPP was completed with no findings or questioned costs.
- 2.2. Purchase and installed six rack-mountable servers with redundant power supply and raid backup to replace obsolete work stations.
- 2.3. Installed two hour backup batteries for all servers.
- 2.4. Implemented and updated anti-virus measures for intrusion detection and security.
- 2.5. Modernized finance printing process with high volume printers.
- 2.6. Implemented document capture, paper reduction, and monitoring capabilities in advance of the Systems, Applications, and Products in Data Processing (SAP) rollout.
- 2.7. Updated and centralized information backup and retention systems for all of OEPP.
- 2.8. Created an inventory tracking system for all IT resources within OEPP.

- 2.9. Redesigned the OEPP Intranet with new resources and merged with the oepp.sc.gov website to make resources remote offices of OEPP.
- 2.10. Prepared computer network for VPN (Virtual Private Network) for remote access by users in preparation for disaster recovery.
- 2.11. Developed new “Supervisor 101” curriculum to train all supervisors.
- 2.12. The OEPP employment recruiting services went live with the new “Neogov” online posting and employment application system. This has been extremely effective in increasing our applicant pools and significantly reducing paper in the process. During this fiscal year, as a result of the online system, we experienced an increase of over 205% in the number of applications received. As for reduction in paper, in the 06-07 fiscal year, we processed an average of 8,000 pages of paper applications, either by FAX, mail or walk-in delivery. Now, almost all of our applications are received online, eliminating paper and saving money for the agency.
- 2.13. Developed a new online exit interview process for employees terminating from the agency.
- 2.14. Developed a new informal employee recognition program called the OEPP “PEP Award.” “PEP” stands for Professionals Excelling in Performance.
- 2.15. Organized and conducted free health screenings available for all employees.
- 2.16. Offered Flu shots for our employees provided by Lexington Medical Center
- 2.17. The Budget and Control Board’s Office of Human Resources audited Governor’s Office of Human Resources. There were no findings or recommendations in the audit

3. Key Strategic Goals for Present and Future Years

OEPP’s overall goals address teamwork and accountability goals. These goals include:

- 3.1. To foster sense of teamwork within OEPP where offices and leaders offer support to each other and work together to provide quality services to the citizens of South Carolina.
- 3.2. To have all offices be fiscally and programmatically accountable (to the legislature and South Carolina citizens) for the services they provide.
- 3.3. Implement the requirements of the SCEIS deployment of the Systems, Applications, and Products in Data Processing (SAP) for the Governor’s Office.

Each office within OEPP has identified goals and key measures; they must report on the status and achievement of their goals. OEPP encourages the individual offices to continue to develop new goals on an ongoing basis as a means to promote continuous improvement

4. Key Strategic Challenges

- 4.1. Within OEPP’s Office of Administration, several barriers are changing into opportunities. Since each OEPP office has a distinct mission and purpose, offices are prone to work independently to achieve their mission and deliver services. Unfortunately, this structure does not create opportunities for teamwork among offices. This compartmentalization is viewed as a barrier; however, OEPP leadership has increased teamwork and support by having individual offices work together and sharing information and ideas. Additionally, the hiring of extremely skilled staff enables OEPP offices the ability to provide exceptional services to the citizen of South Carolina.

- 4.2. Previously each office has not been responsible for their individual financial accountability and budget. OEPP Administration has now reallocated the financial accountability to the individual offices thus giving each office the opportunity to manage their finances. With OEPP Office of Administration's support, leadership and administrative assistance, each office is now responsible for projecting financial needs, assessing where reductions could be made, etc. This provides an opportunity for each to be more responsible and accountable for their programs/services.
- 4.3. OEPP administrative staff are daily faced with the ever changing and diverse needs that are presented by trying to support eleven varied and different offices. While all offices have a common thread, their goals and reasons for existing are very different, and as a result, they have different needs as for as support, supervision and technological resources.
- 4.4. Limited financial resources to best operate programs and to deliver services to the citizens of South Carolina is a barrier. The increasing cost of providing services (in terms of both human resources and finances) and/or the static appropriations are often a barrier faced by OEPP.

5. How the accountability report is used to improve organizational performance

OEPP uses the annual accountability report to drive performance expectations and continuous improvement. As part of the accountability process, each office area is asked to provide goals for each fiscal year; these goals must reflect the OEPP's values. Because of the diversity of programs within OEPP, the accountability report helps senior leadership monitor and evaluate progress toward achieving OEPP's overall mission.

Section II - Organization Profile

The Governor's Office – Office of Executive Policy and Programs (OEPP) houses eleven distinctly different major program areas. Each office was created to serve the residents of South Carolina in key areas of interest and/or need – both as statutorily mandated or otherwise identified or required. The Office of Administration Services, including Finance, Human Resources, and Information Technology, forms the basis for administrative support for each program area.

1. **OEPP's main products and/or services and the primary methods by which these are delivered (See Table II.1.1)**
2. **OEPP's key customers segments and their key requirements/expectations (See Table II.1.1)**
3. **OEPP's key stakeholders(See Table II.1.1)**
4. **OEPP's key suppliers and partners(See Table II.1.1)**

Table II.1.1 – OEPP's Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
OEPP Administration	To provide support all offices in OEPP, including but not limited to: <ul style="list-style-type: none"> • Financial/accounting • Human resources • Information Technology 	OEPP offices: <ul style="list-style-type: none"> • Client Assistance Program • Continuum of Care • Correspondence • Crime Victims Office • Developmental Disabilities Council • Foster Care Review Board • Guardian ad Litem • Office of Economic Opportunity • Ombudsman's Office • Children's Affairs/Children's Case Resolution System • Small and Minority Business Assistance Office • State Office of Victim's Assistance • Veteran's Affairs • Citizens of South Carolina • Governor 	<ul style="list-style-type: none"> • Legislature • OEPP Offices • Governor

5. OEPP's operation locations

Most administrative offices within OEPP are located within the Edgar Brown or Wade Hampton Buildings within the Capital Complex in Columbia, SC. Several OEPP offices have regional or satellite locations that enable our services/ programs to be closer to our customers and to increase service availability. Please refer to each Office's individual reports to operation locations.

6. The number of OEPP employees

There are 281 employees within OEPP as of June 30, 2008. The breakdown of employee classifications is as follows:

195 Classified	19 Unclassified	3 Contract
7 Temporary	58 Temporary (Time Limited)	14 Temporary (Grant)

7. The regulatory environment under which your organization operates

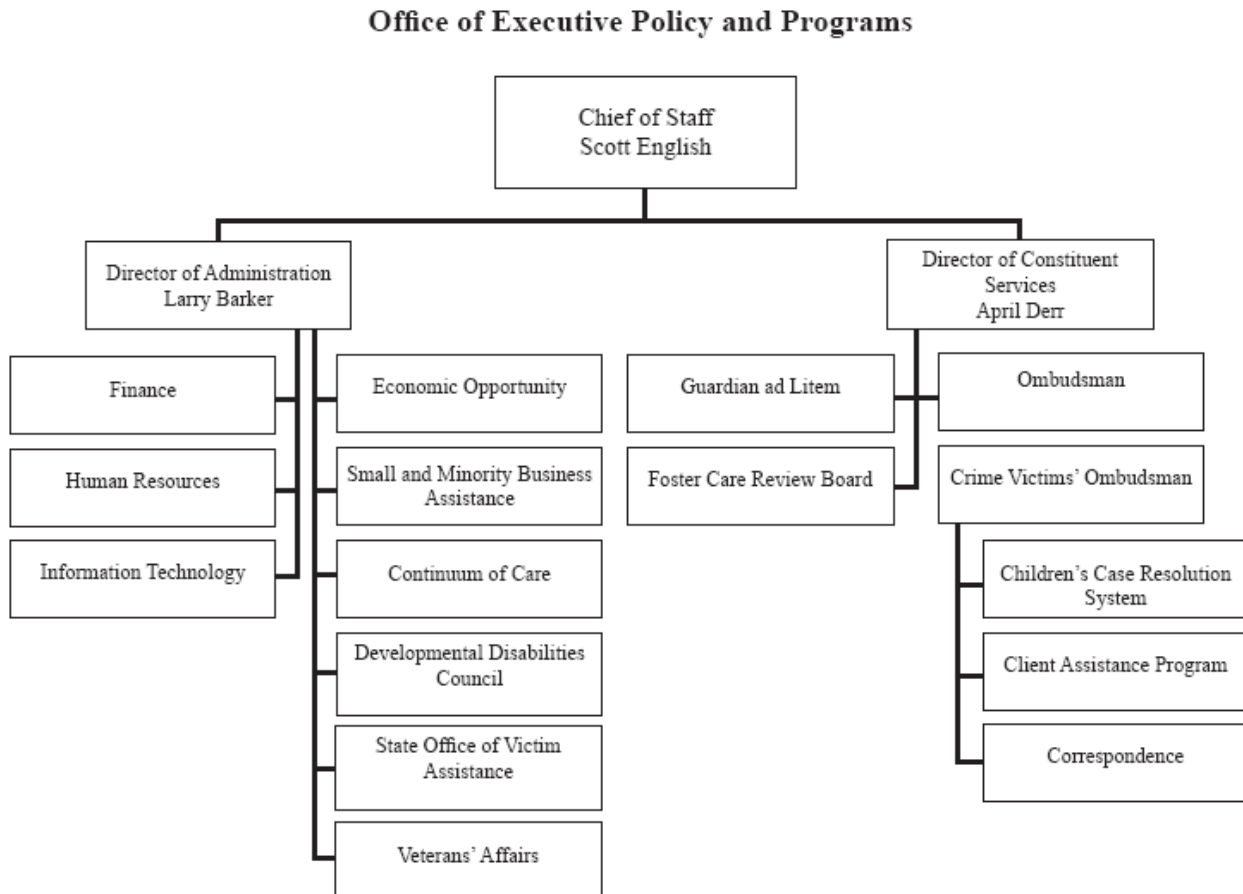
Various state and/or federal regulations, internal policies and procedure manuals govern OEPP offices/programs. Each office's report list of the various regulations applicable to the various OEPP offices.

8. OEPP's performance improvement systems

The mission, goals, and customers for the various OEPP offices require diverse methods for gathering information to improve performance. Please refer to each office's report for specific performance improvement systems. Overall, the methods used by the Office of Administration within OEPP include:

- 8.1. Ensured that all individuals hired in supervisory position undergo in-depth management training.
- 8.2. Purchased necessary equipment in advance of SAP implementation.
- 8.3. Held regular meetings with all OEPP office leaders. Staff meetings help increase communication among the offices; individual meetings with each office leader help provide feedback, monitoring of progress and accountability. The Director of Administration is available to all staff within OEPP.
- 8.4. Closely examined all processes within OEPP to prioritize budget requests and to advocate with the legislature for additional resources.
- 8.5. Modernized the IT infrastructure, enhanced IT security, and provided for disaster recovery.

9. OEPP's organizational structure



10. OEPP's Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	9,216,462	4,525,261	9,564,436	4,948,662	12,095,834	5,362,859
Other Operating	14,908,050	1,154,267	15,437,681	1,536,119	15,650,570	1,202,754
Special Items	809,405	800,215	998,741	942,144	776,315	776,315
Permanent Improvements						
Case Services	2,480,175	1,375,848	3,293,889	1,659,158	4,279,112	1,954,112
Distributions to Subdivisions	31,351,011	54,176	36,878,950	54,176	35,036,283	51,517
Fringe Benefits	2,687,631	1,355,512	2,928,183	1,541,328	3,646,748	1,431,890
Non-recurring						
Total	61,452,734	9,265,278	69,101,878	10,681,586	71,484,862	10,779,447

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills		
Capital Reserve Funds		
Bonds		

11. OEPP's Major Program Area Chart

Program	Major Program Area	FY 06-07			FY 07-08			Key Cross
Number	Purpose	Budget Expenditures			Budget Expenditures			References for
and Title	(Brief)							Financial Results*
Administration (including Finance/Accounting, IT and HR)	To Support the office of OEPP>	State:	1,176,550		State:	1,300,489		
		Federal:			Federal:	676,835		
		Other:	0		Other:	691		
		Total:	1,176,550		Total:	1,978,015		
		% of Total Budget:		2%	% of Total Budget:		3%	
Client Assistance Program	To Advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living programs in the State	State:	0		State:			See individual report
		Federal:	122,305		Federal:	126,741		
		Other:	0		Other:			
		Total:	122,305		Total:	126,741		
		% of Total Budget:		0%	% of Total Budget:		0%	
Continuum of Care	To provide case management services to children under the age of 21 (and their families) who have serious emotional challenges.	State:	3,785,742		State:	4,186,839		
		Federal:			Federal:			
		Other:	2,869,762		Other:	3,159,465		
		Total:	6,655,503		Total:	7,346,305		
		% of Total Budget:		11%	% of Total Budget:		11%	
Correspondence		State:	301,408		State:	302,698		
		Federal:			Federal:			
		Other:			Other:			
		Total:	301,408		Total:	302,698		
		% of Total Budget:		0%	% of Total Budget:		0%	
Crime Victims		State:	0		State:	4,776		
		Federal:	0		Federal:			
		Other:	160,881		Other:	138,237		
		Total:	160,881		Total:	143,012		
		% of Total Budget:		0%	% of Total Budget:		0%	
Developmental Disabilities Council		State:	119,120		State:	119,325		
		Federal:	792,072		Federal:	998,060		
		Other:			Other:			
		Total:	911,192		Total:	1,117,385		
		% of Total Budget:		1%	% of Total Budget:		2%	

Economic Opportunity (OEO)	State:	0	State:	
	Federal:	27,559,779	Federal:	34,843,717
	Other:	463,675	Other:	293,657
	Total:	28,023,454	Total:	35,137,374
	% of Total Budget:	46%	% of Total Budget:	51%
Foster Care Review Board	State:	632,700	State:	679,724
	Federal:		Federal:	0
	Other:	583,639	Other:	670,550
	Total:	1,216,339	Total:	1,350,273
	% of Total Budget:	2%	% of Total Budget:	2%
Guardian Ad Litem	State:	1,063,319	State:	1,536,729
	Federal:	8,771	Federal:	85,010
	Other:	2,145,876	Other:	2,307,273
	Total:	3,217,966	Total:	3,929,012
	% of Total Budget:	5%	% of Total Budget:	6%
Office of Children's Affairs/CCRS	State:	51,302	State:	59,170
	Federal:		Federal:	
	Other:		Other:	
	Total:	51,302	Total:	59,170
	% of Total Budget:	0%	% of Total Budget:	0%
Ombudsman	State:	192,230	State:	189,951
	Federal:	0	Federal:	
	Other:	0	Other:	
	Total:	192,230	Total:	189,951
	% of Total Budget:	0%	% of Total Budget:	0%
Small and Minority Business	State:	163,871	State:	142,593
	Federal:		Federal:	
	Other:	11,150	Other:	2,586
	Total:	175,021	Total:	145,179
	% of Total Budget:	0%	% of Total Budget:	0%
SOVA	State:	37,365	State:	41,892
	Federal:	3,643,988	Federal:	4,094,242
	Other:	10,311,897	Other:	10,039,460
	Total:	13,993,250	Total:	14,175,594
	% of Total Budget:	23%	% of Total Budget:	21%
Veterans	State:	857,456	State:	1,160,618
	Federal:	3,480,324	Federal:	912,499
	Other:	24,147	Other:	14,673
	Total:	4,361,926	Total:	2,087,790

		% of Total Budget:		7%	% of Total Budget:		3%	
Alliance for Women (Commission on Women)		State:	84,002		State:	14,638		
		Federal:			Federal:			
		Other:			Other:			
		Total:	84,002		Total:	14,638		
		% of Total Budget:		0%	% of Total Budget:		0%	
Remainder of		State:	800,215		State:	942,144		
Expenditures	Various fees	Federal:			Federal:			
	CCRS funds, Pass thru funds	Other:	9,190		Other:	56,597		
Special Items	SOVA special funds	Total:	809,405		Total:	998,741		
		% of Total Budget:		1%	% of Total Budget:		1%	
* Key Cross-References are a link to the Category 7 - Business Results. These References provide a Chart number that is included in the 7th section of this document.								

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

1. How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior;?

1.1. The diverse nature of the offices in OEPP dictates special approaches for setting and communicating direction. Depending on the office, short-term direction could be set by legislative and other customer needs or by the Directors of Administration or Constituent Services. The primary long-term direction for each office is set by enabling legislation and by the business and operating philosophy articulated by the Senior Leaders. OEPP communicates short and long-term direction and links office goals and performance measures to OEPP goals. To ensure compliance, understanding, and effective organizational communication, the Directors of Administration and Constituent Services conduct monthly staff meetings with Office Leaders, who in turn, communicate with staff.

1.2. The telephone, e-mail and open-door policies throughout OEPP further facilitate rapid communication. These methods permit a quick response to issues or concerns for OEPP's internal and external customers. OEPP senior leaders communicate, model and reinforce general and specific performance expectations. Employees and their supervisors include specific work objectives and performance expectations in each employee performance evaluation. Key values identified as important to the organization are integrity, accountability, customer services, innovation, leadership, and efficiency. The employee performance evaluation process incorporates individual employee performance expectations relating to these values. The *Employee Handbook* is given to all new OEPP employees contains guidelines for ethical behavior. Senior leaders follow these guidelines and expect compliance by all employees.

1.3. Because of the variety of programs offered by OEPP, empowerment and innovation are necessary and widely supported and encouraged. At the supervisory and managerial levels, Office Leaders have maximum flexibility to serve their customers quickly, effectively, and efficiently; they are encouraged to transfer empowerment to office staff. Employees are encouraged to organize work to best meet their needs and the needs of their office.

2. How do senior leaders establish and promote focus on customers and other stakeholders?

The goals and supporting strategies described in each office's Strategic Plan provide the primary direction and focus for customer services. In addition, the Office Leader's close communication with the Directors of Administration and Constituent Services ensures key customer needs and concerns are identified and addressed. The needs and concerns of constituents are identified in terms of current legislative and basic quality of life issues from input received from the citizen of South Carolina. This information is presented directly to the Senior Leaders so that they can review and formulate legislative policy.

3. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

The diverse nature of the offices in OEPP dictates special approaches for addressing the current and potential impact of our services. Communication with customers, stakeholders, and partners allows information to flow to the Governor and/or legislators.

4. How do senior leaders maintain fiscal, legal and regulatory accountability?

To ensure fiscal, legal and regulatory accountability the Directors of Administration and Constituent Services review and approve all budget expenditures. The OEPP Finance Office, which oversees all financial transactions with the agency, also maintains fiscal compliance.

5. What performance measures do senior leaders regularly review to inform them on needed actions?

Due to the diverse nature of OEPP offices, the Directors of Administration and Constituent Services rely on their Office Leaders to routinely review a variety of performance measures and reports regarding service efficiency and effectiveness. Each office maintains action plans and related performance measures to support OEPP's mission. (Please refer to the individual reports found in the Appendices.)

6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization? How do their personal actions reflect a commitment to the organizational values?

The primary mechanism used for providing feedback is the Employee Performance Management System (EPMS) process. At the senior level, feedback may be received through interaction with senior government officials. Additional feedback comes from employee satisfaction surveys, staff meetings, exit interviews, and individual dialogue with employees. By listening and reviewing feedback from staff and customers, senior leaders can make adjustments in internal process, directives, and action plans.

7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

Senior OEPP leaders help mentor staff, conduct team meetings to facilitate sharing of information and assist/support the Office Leader in future planning and advocating with the legislature.

8. How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives, and innovations?

OEPP performance improvement priorities are set and communicated through OEPP's mission, through legislative mandate, and through meetings between Senior Leaders.

9. How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders and employees contribute to improving these communities.

Senior leadership demonstrates their support of the community through personal actions. For example, senior leadership is very actively involved in numerous community organizations and events, such as church and community activities, serving in leadership roles for Volunteers in Action, participating in Make a Wish, Rotary Clubs, Community Mediation Center, Habitat for Humanity, and Palmetto Pride Forest Cleanup. Human Resources staff coordinates an agency-wide annual campaign for the United Way, Community Health Charities of SC and the Harvest Hope Food Bank. Senior leaders encourage staff to support charitable organizations throughout the year. Examples include sponsoring families at Christmas, volunteering with (community and state) emergency situations, etc. In addition, OEPP administration staff are members of work-related associations: SC Information Technology Directors Association, SC Government Webmasters, and the SC Joint Terrorism Task Force, International Personnel Management Association and the state grievance committee.

10. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organizations?

As Director of Administration, I take this responsibility very seriously. I believe in “management by walking around,” which brings me into contact with all employees on a daily basis. A smile, handshake, or question about how an ill loved one is doing goes a long way. Using positive tones and upbeat verbal and body language to greet and meet all employees seems to help with empowering and motivating the workforce. I feel it is also important to be at every recognition event, whether it be a birthday gathering or a retirement ceremony.

11. How do senior leaders actively support and strengthen the communities in which your organization operates. Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

Senior leaders determine areas of emphasis through looking at their core office mission and matching these with the emphasis. For example, Continuum of Care for Emotionally Disturbed Children provides services to children with mental disabilities. Therefore, it is appropriate for me, as Director of Administration, to belong to the National Alliance for the Mentally Ill to show my support for one of the major organizations serving this group of constituents. Other examples include belonging to the Rotary Club which serves the need of the local community. The directors of the various offices, and members of their staffs, are equally ardent in supporting organizations that support their constituencies.

**Section III – Elements of Malcolm Baldrige
Category 2: Strategic Planning**

The OEPP’s goals are broad and aimed at improving the infrastructure and supporting the individual office. Please refer to the Appendices for each office’s Strategic Planning Chart.

Table III.2.1 Strategic Planning Chart

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
See individual reports			

1. What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulator, societal and other potential risks, and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.

- 1.1. Each OEPP office’s strategic plans are developed using a variety of information including enabling legislation, key legislative, customer service issues, and feedback from representatives from each OEPP office. OEPP senior leaders are charged with creating and/or reviewing their established goals, objectives, strategies, and action plans and updating them accordingly. Available evaluation data are reviewed and updates are incorporated based on trends, information learned, or comments from stakeholders. As stated in the individual reports, OEPP offices involve staff, customers (clients) and stakeholders (sub-grantees, advocacy organizations) to help determine the best methods to provide services.
- 1.2. Senior leaders maintain a constant check and balance with regards to the various potential risks.
- 1.3. Senior leaders watch and plan for shifts in technology and customer preferences through continuous study of their specialty areas and through careful analysis of customer feedback and other trends.
- 1.4. The Human Resources Director has been instrumental in helping the other senior leaders in examining workforce capabilities and needs. As our in-house expert in this area, senior leaders learn from his guidance to keep a close watch on capabilities and needs.
- 1.5. All offices of OEPP have instituted contingency plans in case of emergencies. These include remote computer access as well as telecommuting.
- 1.6. A strategic plan must be developed with all contingencies in mind, i.e., drastic budget reductions. This call for the plans to be specific but flexible in these times of uncertainty.

2. How do your strategic objectives address the strategic challenges you identified in you Executive Summary?

Challenges are analyzed to determine the best methods to make realistic changes. Specific examples are giving the individual OEPP Office reports.

- 3. How do you develop and track action plans that address you key strategic objectives, and how do you allocate resources to ensure the accomplishment of you action plans**
Each OEPP office develops and tracks their action plan to address their specific key strategic objectives. Office leaders review these plans with the Directors of Administration or Constituent Services.
- 4. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?**
Overall OEPP objectives and action plans are communicated through scheduled staff meetings and individual face-to-face meetings. Performance measures are based on identified need and therefore vary between offices. Office Leaders have immediate access to the Governor's Directors to ensure communication and coordination. Each office's report outlines specific methods for communicating and deploying their strategic objectives, action plans and performance measures.
- 5. How do you measure progress on your action plans?**
OEPP offices use a variety of techniques that best meets each office's needs. Please see each office's report.
- 6. How do you evaluate and improve your strategic planning process?**
As part of increased accountability, OEPP Director of Administration reviews each office's strategic goals, outcomes, and process with the Office Leaders. When appropriate, the Office Leader's performance review is linked to achieving outcomes - particularly in regards to delivery of quality services and meeting federal and/or state reporting requirements.
- 7. If the agency's strategic plan is available to the public through the agency's internet homepage, please provide a website address for that plan.**
Please refer to the Appendices for the availability of each office's plan.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

- 1. How do you determine who your customers are and what their requirements are?**
OEPP's key customers and stakeholders are first and foremost the residents of South Carolina. The Governor, Legislators, state government agencies, and other agencies are also customers. Each office's customers and their requirements are listed in Section II within their individual report.
- 2. How do you keep your listening and learning methods current with changing customer/business needs and expectations?**
Due to the wide variety of services delivered by OEPP, each office has developed its own specific methods for identifying changing customer needs and expectations (see individual reports). Methods include meetings with customers, public hearings, advisory councils, customer satisfaction surveys, and written or other verbal communications. Publications, training, and national information also inform offices on the changing needs and expectations

on both a national and state level. In some incidences, changes in federal funding or state legislation affect needs and expectations. Significant trends or changes in customer service expectations and needs are discussed during management meetings or by OEPP internal committees, with service delivery excellence as a primary goal.

3. What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints

The offices of OEPP use various means to access customers. Please see their individual reports.

4. How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?

The primary method for obtaining data on customer satisfaction is through formal surveys sent to customers and/or stakeholders. OEPP and its offices also receive feedback from the Governor, Legislators, other agency directors and office leaders. In addition, each office within OEPP has developed measures for their key services and gauges customer satisfaction through focus groups, community meetings, or participation in interagency committees. Some OEPP offices with governing boards or councils also receive feedback regarding customer satisfaction during their regular meetings. OEPP uses this information to adjust service delivery as necessary.

5. How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Depending on the customer's needs, concerns or issues, service improvements are often initiated by an individual office or, at the other end of the spectrum, through new legislation. OEPP Director of Administration encourages each office to use customer feedback to improve services, to determine whether new procedures should be incorporated into standard procedures, to reassess and adapt working goals on an as-needed basis, and to set strategic goals on an annual basis.

6. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups.

Senior leadership within OEPP believes relationships are built and maintained through truly listening and understanding customer wants and needs. Strong customer communication links, flexibility, and accurate and timely service delivery also provide the primary keys for building positive relationships. OEPP offices serve a very diverse group of customers, ranging from persons with disabilities, military veterans, crime victims, abused and neglected children, to the economic and socially disadvantaged. The diverse needs of our customers require an exceptionally well-trained staff that cares about people.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

- 1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?**

In all offices, state and federal laws mandate certain information be obtained and reported in compliance with those laws. Several offices also have requirements issued by federal grantees, evaluation data, or required financial documents. Each office has described their processes within their individual report.

- 2. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?**

Due to the diversity of the OEPP offices, data comes in a variety of quantitative or qualitative data measures. Included in each office's report are specific methods of data analysis to support decision by each office.

- 3. What are your key measures, how do you review them, how do you keep them current with your needs and direction?**

Since responses to this item are specific for each office's key measures, please refer to the appendices.

- 4. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?**

OEPP decision-making uses information analysis based on both quantitative and qualitative data. Often qualitative data (such as written correspondence and feedback from both internal and external customers) is used in conjunction with quantitative data in the review of programs and procedures. One OEPP office provides legislative reports detailing customer concerns and preferences regarding health and education initiatives, legislative issues, and quality of life; this information helps drive the decision-making process by providing feedback on important issues. OEPP offices gather data as required by legislative mandates, statutory requirements, or funding sources.

- 5. How do you ensure data integrity, timeliness, accuracy, security and availability for decision making?**

All OEPP offices have guidelines in procurement, accounting, and human resources. They must safeguard client data according to HIPPA guidelines; the Information Technology department updated the security on GroupWise e-mail and updated all computers with secure operating systems. As with other practices, the Directors of Constituent and Administration allow each Office Leader to establish data integrity for their respective offices.

- 6. How do you translate organizational performance review findings into priorities for continuous improvement?**

Most action plans, objectives, performance measures and indicators are reviewed throughout the year and modified as needed. OEPP offices also use feedback (from internal staff, customers and stakeholders) to adjust overall office work and assignments; these findings

help Office Leaders focus on improving performance and keeping current with data and legislation, etc.

7. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

The collection, transfer and maintenance of accumulated employee knowledge are generally accomplished through the production of written procedural manuals, cross-training, and the duplication of material resources. Staff often support and help train new employees (formally as well as by training on-the-job). Some offices have implemented Business Rules to outline their processes; these Business Rules are a reference to ensure ongoing continuity when and if any particular employee, who is a part of a process, leaves the organization. Regular staff meetings also help collect and share knowledge. In addition, Human Resources maintains a current list of staff who can offer specialized trainings to others within the agency as needed.

The OEPP Director of Administration is involved with mentoring staff to develop skills to improve in performance. OEPP has a Standardized Operational Procedural Booklet that outline basic operational business needs throughout OEPP offices. Each office developed “contingency plans” (See Section III. 5. 8) that outline key office process; although designed for emergencies and when there is disruption to services, this process communicates knowledge, office practices, and information necessary operate and carry out the basic functions of each office.

**Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus**

1. How does management organize and measure work to enable your workforce to: 1) develop their full potential, aligned with the organization’s objectives, strategies, and action plans; and 2) promote cooperation, initiative, empowerment, innovation and your organizational culture?

1.1. OEPP employees receive opportunities to develop and exercise their full potential in support of the Governor's objectives through several formal and informal mechanisms. The formal method of developing and evaluating employees is through the Employee Performance Management System (EPMS). The employee and the supervisor develop a planning stage for each employee with input from both. This planning stage allows for individual development plans within the employee’s position. Additionally, a less formal approach is through training opportunities offered by the Governor’s Office, the State Budget and Control Board, the Cabinet Agency Training Consortium, other state agencies, and the private sector.

1.2. Other methods of motivating and encouraging employees are: 1) staff retreats and annual meetings, 2) newsletters and intranet postings that recognize staff’s work and personal achievements, 3) recognition from the Governor through performance awards, 4) allowing employees to implement cost-saving ideas (which create a feeling of accomplishment) and 5) encouraging employees to work on team projects which cut across office lines.

- 1.3. Human Resources organized and conducted the agency's state service recognition ceremony. Nineteen employees were recognized for their dedicated service to South Carolina by presenting certificates and pins. A drop-in for all employees to help promote staff cohesion and morale was provided after the ceremony. This unit also developed a new informal employee recognition program called the OEPP "PEP Award." "PEP" stands for Professionals Excelling in Performance. Employees can nominate another employee, or team, online for a PEP Award. Categories for nomination include: customer service, individual accomplishment, team accomplishment, leadership, or efficiency/cost savings for the agency. Nominated employees are recognized publicly for their accomplishments on the agency's intranet website.
- 1.4. Individual OEPP offices implement various processes to help develop and use employees while encouraging and promoting office initiatives. See individual reports -- some examples include: development of guidelines for caseload size, consultation schedules and paperwork deadlines—all of which help staff to manage work and meeting requirements. Another example is cross training of staff and key duties. Tasks are prioritized in relation to strategic goals and objectives and delegated based on individual knowledge and experience.

2. How do you achieve effective communications and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.

OEPP generally collects, transfers and maintains employee knowledge through the production of written procedural manuals, cross-training, and the duplication of material resources. Staff often support and help train new employees (formally as well as by training on-the-job). Some offices have implemented Business Rules to outline their processes; these Business Rules are a reference to ensure ongoing continuity when an employee leaves the organization. Regular staff meetings also help collect and share knowledge and best practices. Supervisors attend supervisor training with other supervisors from other divisions within the agency to aid in sharing best practices and to ensure a consistent message is communicated across the agency.

3. How does management recruit, hire, place and retain new employees? Describe any barriers that you may encounter.

Prior to posting a vacant position, management reviews and updates the position description to ensure requirements and duties are relevant and up to date. Vacant positions are placed by the divisions according to work load demands and organizational structure. Human Resources posts vacancies online using NeoGov and applications are received online. Some vacancies are posted for applications from current employees only in order to give opportunities for promotion from within which can be beneficial for employee morale and retention. Human Resources screens the applications for minimum criteria. Once management receives the applications online, they review applications for necessary and preferred qualifications and set up interviews. Interviews are typically conducted by a panel. The hiring manager, with input from the panel, selects a finalist for the position and submits the proposal to Human Resources and the Director of Administration for approvals and background checks. Human Resources makes official job offers once approvals are granted.

New employees go through an agency orientation programs in addition to significant training given by divisions for job and division related information and how their job ties to the mission. New employees are frequently assigned a mentor to aid in their learning process. In addition, detailed EPMS planning stages are used to provide clear goals and expectations. These measures help with retention by ensuring new staff have a full understanding of their role and the mission of their division. Management encourages employee growth through training opportunities. Whenever possible, management also encourages use of flexible work scheduling as a retention tool to help employees balance work and life issues.

4. How do you access your workforce capability and capacity needs, including skills, competencies, and staffing levels?

OEPP divisions have measures in place to track employee production and workload levels. These may include tracking applications for services or information in geographic regions or offices and case loads assigned to employees. In some cases, management also tracks billable service hours logged by employees. These measures help with assessing employee production rates and whether additional training or other reactions may be warranted. These measures are frequently evaluated by managers to monitor workload issues and employee productivity. Staffing decisions are made by these measures to ensure that workloads are as evenly and fairly distributed among employees as possible.

5. How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plan?

In OEPP an open-door policy exists whereby each employee has a direct supervisor to whom they can immediately go with questions or suggestions, allowing everyone to contribute to the overall work system. Employee feedback and suggestions regarding the management of specific programs are encouraged. Individual employee goals included in the EPMS are frequently linked to accomplishing action plans. These goals are included in the EPMS Planning Stage and supervisors and/or directors routinely work with the employee throughout the year to monitor the progress toward achieving those goals. Any training or coaching that may be needed to accomplish these goals is made available to employees as necessary, ensuring they have the tools needed to be successful.

The specific OEPP offices use staff meetings as one avenue for feedback - especially on organizational goals and the status of action plans. Individual supervisory sessions address employee performance. Offices report being flexible with schedules when pressing deadlines arise or extra help is needed in other offices.

6. How does your development and learning system for leaders address the following: a) development of personal leadership attributes b) development of organizational knowledge c) ethical practices d) your core competencies, strategic challenges, and accomplishment of action plan?

The Human Resources office developed new Supervisor 101 training curriculum for all OEPP supervisors. This new curriculum emphasizes the importance of documentation, consistency, ethics, accountability and fairness when performing duties as a supervisor. The curriculum specifically addresses the competencies of a good supervisor/manager and why

they are critical in building positive relationships with staff. The class also covers the challenges that managers face and how to overcome them. This training is necessary to ensure all supervisors are familiar with state HR processes/regulations as well as OEPP policies and to give supervisors an opportunity to voice their concerns or ask questions about the employee management process. Our supervisors are being taught methods for interviewing and hiring the best people, communicating and providing performance feedback, handling discipline issues, understanding harassment and workplace injury requirement, as well as preparing for the grievance process.

7. How do you identify and address key developmental training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation, and safety training?

The OEPP Human Resources office (HR) developed and conducted new supervisory training for supervisors in OEPP. A feedback session was held at the conclusion of this new class so that attendees could provide feedback regarding content, expectations/needs met, and suggestions. Feedback has been very positive.

HR also developed and conducts EPMS training for all employees as needed to help them understand the agency's EPMS system. HR also has information about the agency's EMPS system, and many other HR related topics, on the agency's intranet website for all employees to review.

To help emphasize diversity in the hiring process, HR invited the Human Affairs Commission to speak during a Directors' meeting to discuss the agency's EEO goals, why they are important, and how OEPP can make improvements in meeting the agency's EEO goals. Since this meeting, the agency saw an increase in our EEO goal attainment for this fiscal year.

In addition, HR arranged for representatives from LLR's OSHA Office to provide detailed safety training for all employees working at the new Veteran's Cemetery in Anderson which opened for operations during this fiscal year.

OEPP is committed to developing programs that foster individual growth for employees, to identifying staff for advancement, and to assisting in creating a diverse workforce. As for staff advancement, OEPP is committed to promoting from within whenever possible. In order to alert employees of job openings, job postings are sent out via email to all employees when vacancies occur. Employees who apply and meet the requirements will be given an interview.

Training needs are assessed through individual interactions between supervisors and employees and are detailed in the employee's planning stage. Linking the planning stage of the EPMS to specific training opportunities provides information on what types of training employees need. The Office of Human Resources reviews these documents and works to ensure that employees have access to the training identified in the planning stages. Some OEPP offices participate in the State Agency Training Consortium (which coordinates

general and specialized training for state agencies) increasing the availability and range of training available. Cross training is another avenue widely used by OEPP offices.

To meet specific office staff's needs, each OEPP Office Leader works with staff to arrange training opportunities for the unique needs of their staff. Some divisions have a very formal training plan. For example, the Continuum of Care provides a general orientation to their agency, a detailed case management curriculum, extensive instructional training (including competency evaluations), and one-on-one training on the job. Training is also conducted on performing clinical assessments which are used to measure client progress. The Office of Economic Opportunity assesses sub-grantee training needs through the monitoring process; subsequent improvements in sub-grantee processes and performance are used to assess the effectiveness of training. The Office of Veteran's Affairs uses national information/training and regional training provided by the regional offices of the VA Medical Centers.

8. How do you encourage on the job use of new knowledge and skills?

Employees are encouraged, whenever possible, to obtain skills or knowledge that will benefit them in their course of employment. Employees who have gained new knowledge or skills may be allowed additional flexibility to implement their new knowledge to create improvements or increase efficiency for their workplace. In some cases, a Director may request a pay increase to recognize an employee who has gained new skills or knowledge that will have a direct impact on the employee's job and the agency.

9. How does employee training contribute to the achievement of your action plan?

Training is made available to employees for various reasons, to include developing employee skills to better perform assigned tasks, learning new systems or processes in the workplace, motivating staff through personal development, and assisting employees in meeting goals outlined in their EPMS planning stage. Many divisions link individual employee goals to the division's action plan, and any necessary training is key toward achieving the action plan.

10. How do you evaluate the effectiveness of your workforce and leader training and development system?

Following the Supervisor 101 training class, a course assessment session was held so that supervisors who attended the class could provide input regarding content, expectations/needs met, and to offer any suggestions for improvements or additional content.

11. How do you motivate your workforce to develop and utilize their pull potential?

Whenever possible, OEPP encourages employees to seek out and participate in training opportunities related to topics such as job skills enhancement, personal development, latest trends and best practices sharing and cross-training. OEPP strives to create a positive atmosphere and encourages staff to demonstrate a good work ethic and proper attitude. OEPP recognizes staff individually or as teams for their accomplishments throughout the year with the agency's new online PEP (Professionals Excelling in Performance) Award program.

12. What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivations? How do you use

other measures such as employee retention and grievance? How do you use this information?

Employee well-being and satisfaction are addressed in various ways. Methods used to obtain employee feedback are informal meetings and online exit interviews with departing employees. Online exit interview results are analyzed for data on employee turnover and trends indicating reasons for separation are shared with each office as necessary. The employee grievance policy provides for mediation and appeal to the State Human Resources Director. No employee grievances were filed during this fiscal year. All Office leaders agree and encourage open communication and discussions. Employees are encouraged to go to Human Resources if there are concerns in the workplace that have not been addressed after notifying their chain of command. Human Resources maintains an open-door policy for all employees. OEPP works hard to cultivate a culture of service to the people of South Carolina as added incentive to promote retention and employee satisfaction. Our motto is “it’s about serving people” and we encourage all of our employees to keep this mission in mind every day as our motivation.

13. How do you manage effective career progression and effective succession planning for your entire workforce throughout the organizations?

OEPP is committed to developing programs that foster career progression for employees and to identifying staff for advancement. OEPP encourages promoting from within whenever possible. In order to alert employees of job openings, notices of job postings are sent out via email to all employees when vacancies occur. In accordance with OEPP’s Recruiting Policy, current employees who apply and meet the requirements will be given an interview.

In addition, OEPP encourages divisions to provide cross training for employees and to produce procedure manuals for various jobs to help ensure continuity in the event of a vacancy. OEPP also provides divisions with periodic updates regarding potential retirements within each area to assist divisions with preparing for knowledge transfer in the event of a retirement. When vacancies do occur, divisions perform a needs assessment to evaluate the best use of the position and whether other approaches may be appropriate, such as relocating the position to a more critical area, reclassifying the vacancy to meet more pressing needs, or leaving the position vacant and reassigning the duties to other staff.

14. How do you maintain a safe, secure and healthy work environment?

Hazard Communication policy is given to all employees at new hire orientation sessions. The Fire Marshal inspects office buildings that house agency staff, in accordance with regulations established by the Department of Labor, Licensing and Regulation. Wellness information and training sessions are posted routinely for employees. Health screenings at minimal cost are offered to employees. Free health workshops and distribution of health information are available.

Emergency and disaster preparedness is coordinated through OEPP’s Director of Administration, with staff on call to assist, if necessary. Each office is informed of evacuation procedures in the event of fire, etc., and there is a designated staff member who is instructed to take roll call in such events. Emergency and Disaster plans have been developed and are continually reviewed. New emergency preparedness topics discussed include flu pandemic and disaster relief coordination.

HR arranged for representatives from LLR's OSHA Office to provide detailed safety training for all employees working at the new Veteran's Cemetery in Anderson which opened for operations during this fiscal year.

Also, HR invited a representative from the Department of Vocational Rehabilitation to speak to OEPP directors about the services they offer employees through the Employee Assistance Program. This was done to ensure management is aware of the referral opportunities available for employees and to make use of them as necessary to help ensure the well-being of our employees.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

1. How do you determine and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?

OEPP's area of greatest expertise is in its personnel. Our employees are highly educated and professionals who receive very specific and in-depth training so they can complete the mission and action plans.

2. How do you determine and what are your key work processes that product, create, or add value for your customers and your organizations and how do they relate to your core competencies? How do you ensure these processes are used?

In the Office of Administration, key work processes are driven by the administrative needs of the various offices with OEPP. Please see individual offices' reports for information regarding their work processes.

3. How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

Senior leaders value the insight and knowledge of longer term employees but constantly study new ways to improve on existing systems. Leaders and employees attend continuing education in their respective fields to keep abreast of these changes. Strategies are set to incorporate these new changes and better ways of doing business into the day-to-day activities.

4. How does your day-to-day operation of these processes ensure meeting key performance requirements?

All day-to-day operations are evaluated against the various mission statements and regulatory environments.

5. How do you systematically evaluate and improve your key product and service related processes?

The key products and service related processes of all of the offices of OEPP are very complex and driven by strict regulatory and ethical standards that are set by organizations outside of this agency. Not only are there continuous checks in balances in place at ground level but employees at all levels regularly meet with supervisors to ensure that these high standards are maintained.

6. What your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?

Key support systems at the Office of Administration level include finance and accounting, information technology, and human resources. We are currently gearing up to change from the old GAFFRS programs to the SAP which, if all indications are correct, will radically change the way we do business. We will continue to monitor this closely. Additionally, this past year has been a landmark year for updating and modernizing our information technology. Although extremely technical and expensive, these upgrades will serve offices of OEPP for years and will meet the demands of future changes. Our Human Resources Office has continued to demonstrate that it has some of the finest employees in the state. Leaders and employees at all levels of OEPP now have confidence in an office to provide them with guidance and training on complex personnel and supervisory issues.

7. How does your organization determine the resources needed to meet current and projected budget and financial obligations?

Changes in budget and financial obligations are influenced by regulations; modifications in federal or state requirements; the need to adapt to stakeholders or customer's needs; and to enable offices to operate more competitively. The Accounting Office has several methods for identifying and projecting budget obligations. State funds are allocated but if additional resources are needed, a request is made during the budgeting process. Except for special proviso, OEPP works within the allocated budget. Projections are made for federal and other funds. Each office is responsible for monitoring spending and meeting their financial obligations. The Director of Administration carefully approves all spending to insure strict financial accountability and appropriate use of resources.

Section III – Elements of Malcolm Baldrige

Category 7: Results

The OEPP's goals are broad and aimed at improving the infrastructure and support provided to the individual offices; the results are found in the leadership and support given to each office within OEPP. Since each office is diverse results of their strategic goals are best provided by the individual offices.

1. What are your performance levels and trends for the key measures of mission accomplishment/product and service performance that are important to your customers? How do your results compare to those of comparable organizations?

Please refer to the Appendices for each office's Section III – Category 7 of their individual reports included in the Appendices.

2. What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compared to those of comparable organizations??

Please refer to the Appendices for each office's Section III – Category 7 of their individual reports included in the Appendices.

3. What are your performance levels for key measures of financial performance including measures of cost containment, as appropriate?

Audit reports for the past three years have had no finding or questioned costs.

4. What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

The Office of Human Resources has processes in place to track human resources trends and measure performance. Some examples of these performance measures include:

OEPP EMPLOYMENT PROCESSES:

FY 2007-2008		FY 2006-2007	
Job Vacancy Postings:	81	Job Vacancy Postings:	82
Applications Processed:	4,767	Applications Processed:	1,554
New Hires:	64	New Hires:	48
	(38 FTE, 15 Time Limited, 11 Temp Grant)		(34 FTE, 13 Time Limited, 1 Temp Grant)
Terminations:	53	Terminations:	45
	(40 FTE, 9 Time Limited, 4 Temp Grant)		(31 FTE, 11 Time Limited, 3 Temp Grant)
Turnover (FTE):	16%	Turnover (FTE):	13%

OEPP TERMINATION STATISTICS:

Primary reasons reported for termination of employment in exit interviews for FY 07-08:	
Career change:	21.5%
New job (outside state government):	21.5%
Family issues:	9%
New job (other state agency)	9%
Relocation:	9%
Working conditions:	9%
Retirement:	4%

Exit interviews revealed the following information about direct supervisors. The rating choices were (1) almost always, (2) sometimes, or (3) never:

Topic	Rating Average
Demonstrated fair/equal treatment:	1.26
Provided recognition on the job:	1.43
Developed cooperation and teamwork:	1.35
Encouraged/listened to suggestions:	1.48
Resolved complaints and problems:	1.45
Followed policies and procedures:	1.22
Provided clear performance expectations:	1.26
Provided feedback regarding my work:	1.23

Exit interviews revealed the following information about employment with the Governor's Office and the employee's Division. The rating choices were (1) Excellent, (2) Good, (3) Fair, or (4) Poor:

Topic	Rating Average
Cooperation within your office:	2.14
Communication within your office:	2.32
Communication within Governor's Office:	2.36
Work Environment:	1.95
Morale:	2.86
Potential for career growth:	3.41
Training opportunities:	2.59
Use of your skills/abilities:	2.05
Flexible schedule:	2.09
Work hours:	1.68
Compensation:	2.86
Benefits:	1.86

EEO/Diversity:

OEPP's Human Resources Office reports their Affirmative Action Plan goal attainment annually to the State Human Affairs Commission. OEPP is in the top 20% of all state agencies for goal attainment. The results for the last two reporting cycles are:

YEAR	GOAL ATTAINMENT	YEAR	GOAL ATTAINMENT
2007:	94.8%	2006:	92.7%

5. What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency, and work system performance? (These could include measures related to the following: product, service, and work system innovation

rates and improvement results; improvements to cycle time; supplier and partner performance, and results related to emergency drills or exercises?

Please refer to the Appendices for each office's Section III – Category 7 of their individual reports included in the Appendices.

6. What are your performance levels and trends for regulatory/legal compliance and community support?

Please refer to the Appendices for each office's Section III – Category 7 of their individual reports included in the Appendices.

OEPP – Client Assistance Program

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Client Assistance Program

Section I - Executive Summary

1. Stated Purpose, Mission, Vision, and Values

1.1 Purpose

The purpose of the SC Client Assistance Program (CAP) is to provide persons with mental and physical disabilities with information and assistance in securing services leading to employment and/or independent living.

1.2 Mission

The SC Client Assistance Program (CAP) mission is to advocate for clients and prospective clients with disabilities in South Carolina who are seeking or receiving services through the Vocational Rehabilitation Department, Commission for the Blind, and all Independent Living Programs funded under the Rehabilitation Act of 1973, as amended. This includes providing information on the rights under the Americans with Disabilities Act, Title I, as it relates to the Rehabilitation Act of 1973, as amended.

1.3 Vision

The vision of CAP is to ensure that persons with disabilities receive quality services with informed choices in an atmosphere of trust, and emphasis on being sensitive and responsive to the unique needs of individuals from diverse ethnic, racial and cultural backgrounds.

1.4 Values

CAP values the importance of striving towards positive and productive relationships with service providers, community programs, and state government agencies.

2. Major Achievements for FY 2007-2008

2.1 The CAP resolved 191 full cases without resorting to formal hearings or litigation.

2.2 The CAP provided outreach to 2402 persons with disabilities, agencies, groups, and programs throughout the state, on available services and benefits under the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act, Title I.

3. Key Strategic Goals for Present and Future Years

3.1 Advocate and resolve CAP cases at the lowest possible level in the alternative dispute resolution system.

3.2 Increase outreach efforts throughout the state for underserved adult populations of persons with disabilities in the state.

4. Key Strategic Challenges

- 4.1 Improved collaboration with service providers in provision of services for person with disabilities.
- 4.2 Transition to paperless system as much as possible.
- 4.3 Staff remains current with knowledge and training in increased complexities of clients with mental and physical disabilities.
- 4.4 Reduce public stigma that is often attached to persons with mental and physical disabilities.

5. How the accountability report is used to improve organizational performance

The accountability report allows the Client Assistance Program to review the vision, goals and performance for continued improvement areas in keeping with our CAP mission. It is an opportunity to monitor our progress throughout the year and review and revise ways to achieve set goals.

Section II – Organization Profile

1. Main products and/or services and the primary methods by which these are delivered

- 1.1 Alternative dispute resolution services provided through personal representation of the client.
- 1.2 Information and referral services provided by telephone and personal contact.
- 1.3 Outreach to underserved population groups with disabilities throughout the state are provided through public exhibitions and presentations.

2. Key customer groups and their key requirements/expectations

Key customers are persons with disabilities and their families, and other consumers who desire information about services and benefits under the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act, Title 1, and clients and client applicants who are disputing services provided by the state Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.

3. Key stakeholder groups

Key partners include the South Carolina Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs. This includes the Governor's Committee on Employment of People with Disabilities, and other statewide service organizations that serve the employment needs, and/or independent living needs of persons with disabilities.

4. Key Suppliers and Partners

Chart II.4-1 Client Assistance Program Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Client Assistance Program (CAP)	<p>Alternative dispute resolution services provided through personal representation of the client.</p> <p>Information and referral services provided by telephone and personal contact.</p> <p>Outreach to underserved population groups with disabilities throughout the state.</p>	<p>Persons with disabilities and their families, and other consumer who desire information about services and benefits under the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act, Title I.</p> <p>Clients and client applicants who are disputing services provided by the state Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.</p>	<p>South Carolina Vocational Rehabilitation Department</p> <p>Commission for the Blind</p> <p>Independent Living Programs</p> <p>Statewide service organizations that serve the employment needs, and/or independent living needs of persons with disabilities</p>

5. Operation location

The Client Assistance Program is located in Suite 447, Edgar Brown Building, 1205 Pendleton Street Columbia, South Carolina 29201

6. The number of employees, segmented by employee category

2 Classified 1 Temporary

7. The regulatory environment under which your organization operates

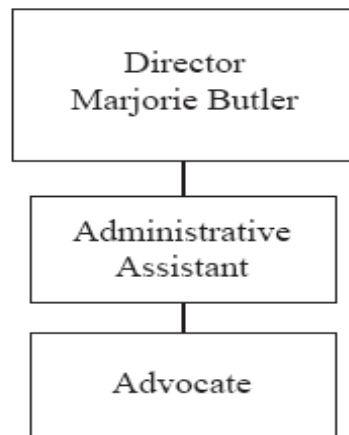
The Federal Rehabilitation Act of 1973, as amended.

8. Performance improvement systems

- 8.1 Review of client satisfaction surveys.
- 8.2 Performance review from mandated annual Federal CAP report.
- 8.3 Feedback from clients and stakeholders.

9. Organizational structure

Client Assistance Program



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$79,652		\$70,684		\$78,000	
Other Operating	\$23,120		\$34,932		\$49,251	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$19,533		\$21,125		\$27,749	
Non-recurring						
Total	\$122,305		\$126,741		\$155,000	

Other Expenditures

Sources of Funds	FY 05-06 Actual Expenditures	FY 06-07 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
Client Assistance Program	To Advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs in the state.	State		State		Chart III.7.1.1 Chart III.7.2.1
		Federal	122,305	Federal	\$126,741	
		Other		Other		
		Total	122,305	Total	\$126,741	
		% of budget:	0%	% of budget:	0%	

Section III – Elements of Malcolm Baldrige Criteria

Category 1 - Senior Leadership, Governance, and Social Responsibility

1. **How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?**
 - 1.1 Staff weekly meetings with open communication for direction and training.
 - 1.2 Provide staff training for professional development.
 - 1.3 Annual staff reviews with Employee Performance Management System (EPMS).
2. **How do senior leaders establish and promote focus on customers and other stakeholders?**
 - 2.1 Customer service and client confidentiality emphasized at all times.
 - 2.2 Review verbal and written client satisfaction surveys for program improvement.
 - 2.3 CAP staff training ensures that clients and consumers with disabilities are always treated with respect and dignity.
 - 2.4 Staff training on current agencies policies and laws relevant to serving persons with disabilities.
 - 2.5 Staff participates in national CAP Advocacy Listserve on the Internet to share current information and strategies with other CAP programs to better serve our customers.
3. **How does the organization address the current and potential impact on the public of its programs, services, facilities and operations, including associated risks?**
 - 3.1 Recorded timeliness of responding to client concerns and resolution.
 - 3.2 Customer satisfaction surveys.
 - 3.3 Feedback from agencies and programs serving persons with disabilities.
4. **How do senior leaders maintain fiscal, legal, and regulatory accountability?**

Through required annual federal reporting and audit systems.

- 5. What performance measures do senior leaders regularly review to inform them on needed actions?**
 - 5.1 Successful case resolutions at lowest alternative dispute resolution level without litigation.
 - 5.2 Productive collaboration with other service providing agencies and programs.
 - 5.3 Feedback from customer satisfaction surveys.
- 6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to organizational values?**
 - 6.1 Weekly staff meetings for client case reviews and information sharing.
 - 6.2 “Open Door” policy for open communication with staff.
 - 6.3 Staff review of customer satisfaction surveys for program improvement.
- 7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**
 - 7.1 Staff communication and mentoring.
 - 7.3 Provide training opportunities for professional development.
 - 7.4 Staff participation in decision making process for program improvements.
- 8. How do senior leaders create an environment for performance improvement, and the accomplishment of strategic objectives?**
 - 8.1 Staff sharing in decision making process.
 - 8.2 Conducting staff reviews of program goals.
 - 8.3 “Open Door” communication with staff.
 - 8.4 Quarterly performance reviews for staff.
- 9. How do senior leaders create an environment for organizational and workforce learning?**
 - 9.1 Participates in available web casts and teleconferences on ever changing complexities in serving persons with disabilities.
 - 9.2 Program and personal development training for staff.
 - 9.3 Staff keeps informed with available periodicals and other written information relating to person with disabilities.
- 10. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?**
 - 10.1 Staff meetings to exchange ideas, concerns, and accomplishments related to program goals.

10.2 Recognition for accomplishments reflected on annual employee performance report (EPMS).

11. How do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

11.1 Active participation in various advocacy organizations such as: the Governor's Committee on Employment of People with Disabilities, National Governor's Committee on Employment of People with Disabilities, Mayor's Committee on Persons With Disabilities, Disability Action Center Project Hope Advisory Board, SC Vocational Rehabilitation Business Applications Program, Midlands Interagency Human Services Network, SC Assistive Technology Advisory Board, SC Independent Living Council, SC Commission for the Blind, Association for Education and Rehabilitation of the Blind and Visually Impaired, SC Vocational Rehabilitation Department, and other disability related community organizations.

11.2 Staff participates in available community programs such as: Hadley School for the Blind, Vision Summit, Website Tester for Assistive Technology Project, and the SC Association of the Deaf.

Category 2 - Strategic Planning

1. What is your strategic planning process, including key participants, and how does it address: a) your organization's strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory social and other potential risks and consumer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; g) your ability to execute the strategic plan.

The CAP is designed and delivered as mandated by Federal Grantee. The Grantee requires submission of an annual federal report in a specific format. See Chart III.2.1 for the Strategic Planning Chart.

2. How do your strategic objectives address the strategic challenges you identified in your Executive Summary?

The CAP is designed and delivered as mandated by Federal Grantee. The Grantee requires submission of an annual federal report in a specific format. See Chart III.2.1 for the Strategic Planning Chart.

Chart III.2-1 Strategic Planning Chart for The Client Assistance Program

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Advocate and resolve cases at the lowest possible level in the alternative dispute resolution system.	Clients will receive appropriate services and become employed and/or live independently.	Case Management. Weekly case staffing. Gather and interpret data from client satisfaction surveys.	Chart III.7.1.1 Chart III.7.2.1
Increase outreach to traditionally underserved populations of persons with disabilities throughout the state.	More persons with disabilities will be able to access services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.	Exhibit and present at 9 conferences and/or groups for persons with disabilities. Visit 4 different One-Stop Navigators at WIA Employment One-Stops. Visit 6 Vocational Rehabilitation Department Evaluation Training Centers. Annual collaboration with other organizations for community Information/Job Resource Fair and events for persons with disabilities.	Chart III.7.1.1

3. How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?

- 3.1 Annual CAP Federal report is the best CAP tool to determine overall progress of program objectives.
- 3.2 CAP monthly staff meetings to track effectiveness of target projects.
- 3.3 Weekly case staffing to determine effective advocacy and client satisfaction.

4. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

- 4.1 Attend annual national CAP conference to acquire current knowledge related to serving persons with disabilities and effective measures for achieving program objectives.
- 4.2 Monthly staff meetings to review and discuss progress of program goals.

5. How do you measure progress on your action plans?

- 5.1 Feedback on continued professional and productive relationship with other agencies and programs.

5.2 Analysis of the data of the annual CAP Federal report is best instrument for yearly comparison on achievements.

6. How do you evaluate and improve your strategic planning process?

- 6.1 Annual CAP Federal report.
- 6.2 Review of client satisfaction surveys.
- 6.3 Input from the stakeholders.

7. If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide a website address for than plan.

CAP federal mandated services and objectives are outlined in www.oepp.sc.gov/cap.

Category 3 - Customer Focus

1. How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Persons with mental and physical disabilities, as defined under the Federal Rehabilitation Act of 1973, as amended.	The customers’ disabilities must be an impediment to competitive employment and/or living independently.
Persons in the state who have questions regarding services provided by the SC Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs, and persons with questions regarding the Americans with Disabilities Act, Title I.	Customers needing information and assistance regarding services provided by these agencies.

2. How do you keep your listening and learning methods current with changing customer/business needs and expectations?

- 2.1 Research current information outlined in periodicals relating to services and persons with disabilities.
- 2.2 Attend annual CAP conference and other trainings related to better serving persons with disabilities.
- 2.3 Participate in national CAP advocacy listserve on the internet to share current information and strategies to better serve our clients with disabilities.

3. What are your key consumer access mechanisms, and how do those access mechanisms enable customers to seek information, conduct business, and make complaints?

- 3.1 CAP brochure given to every applicant of the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.
- 3.2 Access through office visit, telephone contact, TTY machine for deaf and hard of hearing, CAP website, and e-mail.
- 3.3 Consumer and community organization referrals.

4. How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?

- 4.1 Review written client CAP satisfaction surveys to make any adjustments if necessary to the way we are providing services. We mailed 191 surveys and 82 were returned.
- 4.2 Review of annual Federal CAP report data.

5. How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

- 5.1 Review input from agency state plans and public hearings to determine need for any changes to be considered for better serving persons with disabilities.
- 5.2 Participate on committees and boards established to better serve persons with disabilities.
- 5.3 Listen and make changes.

6. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups.

- 6.1 Building positive and productive relationships with agencies and programs with open communication and feedback.
- 6.2 All clients are treated with respect, dignity, confidentiality, and sensitivity to their disability and issues of concern.

Category 4 - Measurement, Analysis and Knowledge Management

1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

- 1.1 Outlined by Federal Grantee.
- 1.2 Required annual CAP Federal Report.

2. How do you select, collect, align, and integrate data/information analysis to provide effective support for decision making throughout your organization?

Using data on a regular basis to analyze problem areas in serving clients with disabilities.

3. What are your key measures, how do you review them, how do you keep them current with your needs and direction?

- 3.1 Annual Federal CAP report based on mandated federal program requirements.
- 3.2 Successful case resolutions at lowest alternative dispute resolution level without litigation.
- 3.3 Outreach efforts to traditionally underserved populations with disabilities throughout the state.

4. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

Review yearly annual Federal CAP report information with mandated guidelines for program.

5. How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

5.1 Review yearly annual Federal CAP report information with mandated guidelines for programs.

5.2 Participate in national CAP advocacy listserv with CAP program directors in other states.

5.3 Attend mandated trainings by the Federal Grantee.

6. How do you translate organizational performance review findings into priorities for continuous improvement?

Federal guidelines mandated for provision of services to persons with disabilities.

7. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

7.1 Annual Federal CAP report.

7.2 Regular internal staff meetings.

Category 5 - Workforce

1. How does management organize and measure work to enable your workforce to: 1) to develop to their full potential, aligned with the organization's objectives, strategies, and action plans; and to 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

1.1 Weekly staff meetings with open communication and mentoring.

1.2 Attend available trainings for staff to enhance professional development.

1.3 Participation in regular meetings with other program directors.

2. How do you achieve effective communications and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.

2.1 Regular staff meetings with open communication allowing more effective team work.

2.2 Staff participation in teleconferences relating to CAP program and persons with disabilities.

2.3 Participation by staff in agency and program trainings relating to policy and programs serving persons with disabilities.

3. How does management recruit, hire, place and retain new employees? Describe any barriers that you may encounter.

3.1 Employee positions are filled through OEPP Office of Human Resources with vacant job position postings.

3.2 Federal grant award funding limits hiring additional employees.

- 4. How do you access your workforce capability and capacity needs, including skills, competencies, and staffing levels?**
 - 4.1 Staff participation in available training to enhance knowledge related to serving persons with disabilities which is part of our Federal mandate.
 - 4.2 Increased opportunities for professional development within the organization for staff.
- 5. How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plan?**
 - 5.1 Feedback from employees and management on EPMS allows for open discussion on organizational goals and employee performance relating to program goals.
 - 5.2 Feedback allows for professional staff development opportunities.
- 6. How does your development and learning system for leaders address the following: a) development of personal leadership attributes b) development of organizational knowledge c) ethical practices d) your core competencies, strategic challenges, and accomplishment of action plan?**
 - 6.1 Development of personal leadership attributes discussed in staff meetings where staff is encouraged to continue with educational and training opportunities for personal and leadership development.
 - 6.2 Staff meetings allows for open communication in all areas of program competencies and challenges.
- 7. How do you identify and address key developmental training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation, and safety training?**

Staff training opportunities offered through Human Resources, current computer/office applications, general staff meetings.
- 8. How do you encourage on the job use of new knowledge and skills?**

Staff discussions and sharing of new knowledge.
- 9. How does employee training contribute to the achievement of your action plan?**

Staff must have the educational background and expertise to deal with the specialized population for the CAP program.
- 10. How do you evaluate the effectiveness of your workforce and leader training and development system?**

Staff needs to demonstrate ability and expertise in everyday performance within the CAP program and working with CAP clients.
- 11. How do you motivate your workforce to develop and utilize their pull potential?**

Increased opportunities for professional development within the organization.

12. What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivations? How do you use other measures such as employee retention and grievance? How do you use this information?

12.1 Small staff allows for close working relationship and open line of communication.

12.2 Meetings with staff on performance review as needed.

13. How do you manage effective career progression and effective succession planning for your entire workforce throughout the organizations?

Staff continuing education to pursue future career goals.

14. How do you maintain a safe, secure and healthy work environment?

We maintain a safe and secure work environment by removing physical hazards and complying with all safety guidelines.

Category 6 - Process Management

1. How do you determine, and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plan?

Organization mission and competencies are outlined in guidelines from the Rehabilitation Service Administration for our federally mandated program with regulatory and policy-mandated requirements.

2. How do you determine and what are your key work processes that product, create, or add value for your customers and your organizations and how do they relate to your core competencies? How do you ensure these processes are used?

CAP program design and delivery is mandated by the Federal Grantee.

3. How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

Through participation in annual national CAP conference, training webcasts, Rehabilitation Service Administration memorandums, and Federal Grant guidelines.

4. How does your day-to-day operation of these processes ensure meeting key performance requirements?

4.1 Regulatory and policy-mandated requirements are provided by Federal Grantee and followed by staff.

4.2 All processes are closely monitored on a daily basis to ensure compliance.

5. How do you systematically evaluate and improve your key product and service related processes?

5.1 Case resolution for clients with disabilities at the lowest level of alternative dispute resolution.

5.2 Federal mandated annual reporting used for case reviews and program evaluation for improvements in serving clients with disabilities.

6. What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?

Federal program annual grantee allotment dictates projected budget spending.

7. How does your organization determine the resources needed to meet current and projected budget and financial obligations?

Federal program annual grantee allotment dictates projected budget spending.

Category 7 - Results

1. What are your performance levels and trends for the key measures of mission accomplishment/product and services performance that are important to your customers? How do your results compare to these of comparable organizations?

1.1 Tracking the number of CAP cases that were resolved at the lowest level in the alternative dispute resolution system without litigation.

1.2 Number of information and referral calls and visits for persons with disabilities.

Chart III.7.1.1 Performance Measures for the Client Assistance Program

Performance Measure	FY 05-06	FY 06-07	FY 07-08
Number of CAP Cases	176	190	191
Number of information and referral	2700	2900	3100
Number of outreach to underserved population groups throughout the state	1800	2056	2402

2. What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?

Chart III.7.2.1 Customer Satisfaction Results (All data based on feedback provided through surveys)

Performance Measure	FY 05-06	FY 06-07	FY 07-08
Goal: Clients will express satisfaction with the services they receive			
Number of clients expressing "Very Satisfied"	42	55	26
Number of clients expressing "Satisfied"	1	1	9
Number of clients expressing "Not Satisfied"	0	0	6
Number of clients stating that they would use CAP services again	43	57	36
Number of clients stating that they would not use CAP services again.	0	0	5

3. What are your performance levels for key measures of financial performance, including measure of cost containment, as appropriate?

Federal mandate determines our required program performance levels and auditing considerations. South Carolina CAP has not been audited in the past fifteen years, since becoming part of the Office of the Governor.

4. What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

Small staff allows for open discussions relating to workforce and annual performance reviews (EPMS).

5. What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency, and work system performance?

Performance levels are designated by the Federal Grantee and monitoring includes annual Federal reporting and on-site-reviews.

6. What are your performance levels and trends for regulatory/legal compliance and community support?

Performance levels are designated by the Federal Grantee and monitoring includes on-site reviews and annual reports.

OEPP – Continuum of Care

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Continuum of Care

Section I - Executive Summary

1. Organization stated purpose, mission, vision and values

1.1– 1.2 Purpose/Mission: The Continuum of Care's mission is "To ensure the development and delivery of appropriate services to children with severe emotional disturbance."

1.3 Vision: Continuum of Care's vision reads, "A system of care in South Carolina will ensure that all children with severe emotional disturbance will receive the services they need to maximize their functioning while in the least restrictive and most appropriate environment possible."

1.4 Values: Continuum's core values are that services will be: child centered, family focused, community-based, strength based and culturally competent.

2. Major Achievements for FY 2007-2008

- a) 99% of families who responded to a Continuum of Care survey felt they were involved in helping make treatment decisions for their child.
- b) The Continuum served 565 children during 2007-2008. 89 children/adolescents were accepted for full case management services, seven were readmitted for services, and 107 were discharged. This is a four (4%) increase in the number of children served.
- c) Documenting services can now be performed electronically. Many of the previous manual steps are now automated thus saving staff time, increasing availability of client data, and decreasing use of paper, all of which increases efficiency.
- d) Two achievements mentioned below have increased accessibility to families, offered quicker response time, and increased efficiencies in the Continuum service system, all of which had a positive impact on our agency and customers. The two areas are:
 1. Our approach to case management services changed. The Continuum implemented a team approach using Supervisors, Service Coordinators and Service Coordinator Assistants. This new method of service delivery allows responsibilities and duties to be shared among staff and increases the number of families being served by a team.
 2. Three satellite offices were opened; when feasible the offices were co-located with other state agencies. This makes the Continuum more geographically convenient and accessible to the families we serve.
- e) Through realignment of positions, implementation of the new team approach, reorganization of duties, and not filling administrative positions, the Continuum averages an annual cost savings of \$175,000.
- f) The training curriculum offered to new hires was redesigned. Now, more topics are offered and staff with expertise in specific areas are used as trainers.

3. Key Strategic Goals for Present and Future Years

During 2007-2008, the Continuum of Care worked toward achieving four key strategic goals.

- a. Ensure assessment, planning, and service coordination for severely emotionally disturbed youth.
- b. Ensure severely emotionally disturbed youth have access to a full array of community based and residential services.

- c. Increase the quality, effectiveness and efficiency of the system of care to enable emotionally disturbed children and their families to successfully transition into less intensive and developmentally appropriate service systems.
- d. Encourage Continuum staff to engage families of emotionally disturbed youth as leaders and active partners in their child's treatment - including the identification of services to address the child's and family's specific needs.

4. Key Strategic Challenges

- a) Changes in Federal regulations may affect the Continuum's ability to provide and receive Medicaid reimbursement for Targeted Case Management (TCM) services. These changes include the elimination of our ability to receive reimbursement for our ancillary case management services (i.e. services to children not yet accepted for service) and the loss of TCM billing when our children (approximately 11%) are placed in a Psychiatric Residential Treatment Facility. Both changes will greatly impact our funding and force the Continuum to make changes in service provision, examine the rate reimbursement formulas, and consider reconfiguring the way the TCM rate is established. (See Section III 6.7).
- b) Another challenge was ensuring the successful implementation of the new model of case management service delivery. When new approaches are implemented, the organization had to address unforeseen issues, ensure staff buy-in, and assess the impact on our customers.
- c) Previously the Federal government reinterpreted some regulations impacting select requirements for residential programs serving emotionally disturbed children. This resulted in a reduction in Federal Medicaid reimbursement for therapeutic residential services (see III 6.7) Effective January 1, 2009, Medicaid reimbursement will no longer be available for many of the therapeutic out-of-home residential services the Continuum uses. During 07-08, the Continuum averaged 21% of our children in one of these placements at a given time. This equates to increased spending in state funds when Federal funds are no longer available. This also impacts many of our stakeholders (private children's service providers).
- d) Service availability is a challenge faced by the Continuum of Care. The array of services available to meet the special needs of emotionally disturbed children is lacking –specifically specialized services, location of services, and preventative services. The “diagnostic” composition of our client population is also changing and evolving. Continuum staff are serving an increasing number (11%) of children with Pervasive Developmental Disorders (PDD), which heightens staff's need for specialized training to better serve these children. There is also a lack of existing resources/services available to serve these PDD children.
- e) The lack of timely data by third-party monitoring entities concerning treatment providers' compliance with regulatory issues is a challenge for the Continuum during this fiscal year. During the upcoming year, the challenge shifts since the third-party monitoring paid by a Department of Health and Human Service contractor will no longer provide any type of monitoring to the majority of service providers. This results in staff not having current data to make the best decisions when referring and purchasing services. The second challenge represents the state agencies having to develop, fund, and implement a new monitoring process to fill this void.

Uncertainty about future service changes to our organization and the impact of various initiatives (see challenges a- e) have been a barrier in formulating and implementing plans for necessary changes. Pending decisions made by funding sources influence how the Continuum will address issues and their related impact to our agency and services for our customers. As a result of previous cost-cutting measures and exploring and implementing the challenges listed above the Continuum will utilize carry forward funds from previous fiscal conservation

efforts to help operate during 2008-2009. However, the reductions in Federal reimbursements (Medicaid) as stated in (a) and (c) and the depletion of carry forward funds will require additional state appropriations in the future. Therefore, the Continuum will be requesting an increase in state appropriate funds during fiscal year 2009-2010.

5. How the accountability report is used to improve organizational performance

The Continuum of Care’s Office Director and Senior Managers use the annual accountability report to review performance expectations and plan for future improvements. The data results in section III- category 7 influence how future services are implemented and help us measure our effectiveness of services to our customers.

Section II - Organization Profile

- 1. Main products and/or services and the primary methods by which these are delivered**
- 2. Key customers groups and their key requirements/expectations**
- 3. Key stakeholders groups**
- 4. Key suppliers and partners**

Table II.1.1 – Continuum of Care Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders Groups	Key Suppliers and Partners
Continuum of Care (COC)	Case management for children with serious emotional challenges and their families. Through case management COC: 1. develops a plan of needed services 2. advocates for the child/family 3. assesses and coordinates services 4. offers information, training and support for the family 5. maintains contact with the child, family and treatment team	<ul style="list-style-type: none"> • Children/adolescents with serious emotional challenges who are clients of COC • Families of children/adolescents who are COC clients • Children and families who have made application for services • State Agencies and schools who serve emotionally challenged children • Service providers who serve emotionally challenged children. 	<ul style="list-style-type: none"> • In some instances, stakeholders are also partners. State agencies, schools, public and private (formal and informal) service providers all partner with COC to help provide services to our children and families. The Department of Health and Human Services is another partner.

5. Operation locations

The Continuum of Care’s (COC) administrative office is located in Columbia within the Edgar Brown Building. COC provides services statewide through four regional and five satellite offices. The regional offices are located in Columbia, Greenville, Florence and North Charleston. The satellite offices are in Aiken, Beaufort, Orangeburg, Aynor, and Greenwood.

6. The number of employees (segmented by employee category)

64 Classified	1 Unclassified
0 Temporary	8 Temporary Grant

The above information reflects the number of positions currently filled. As of June 30, 2008, the Continuum had 23 unfilled positions (12 classified and 11 temporary grant). Vacancies are filled as funding allows – with positions for staff directly working with children being our first priority.

7. The regulatory environment under which your organization operates

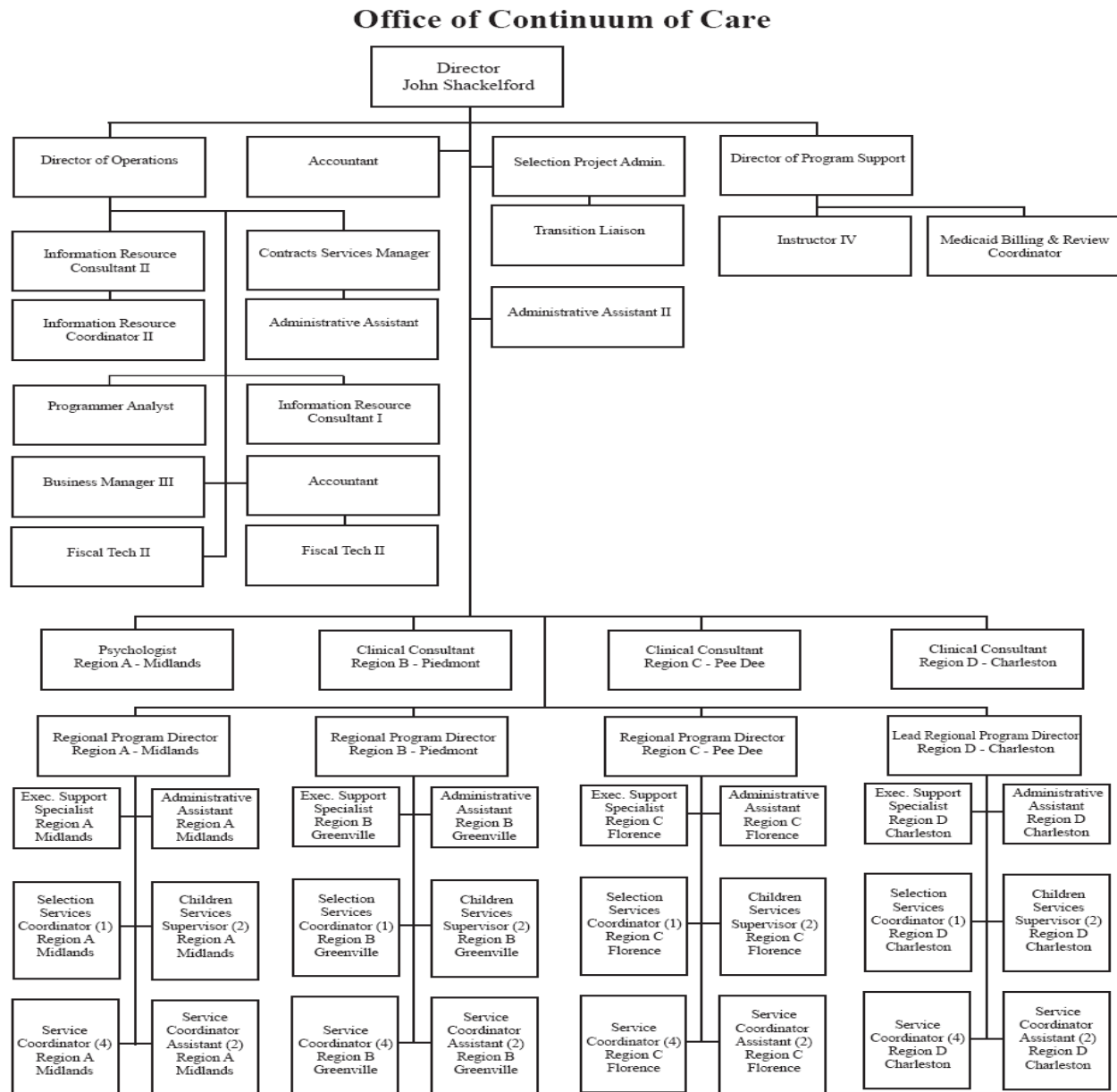
The Continuum of Care operates under legislative mandates, Federal and State Medicaid policies and regulations, and internal policies and procedures. The Continuum’s statutory authority is located in Article 23 Sections 20-7-5610 – 20-7-5670.

8. Performance improvement systems

The Continuum of Care has several ways of gathering feedback from our customers/stakeholders to improve performance.

- a) Hosting four statewide Family Forums (annually)
- b) Requesting information/comments via Family Feedback surveys
- c) Obtaining comments from Teacher Feedback surveys
- d) Holding regularly scheduled meetings to discuss budget issues, staff performance, process improvement and communication
- e) Tracking data on Continuum service provision
- f) Meetings with state agencies (minimum monthly) and providers (quarterly)

9. Organizational chart



10. Expenditures/Appropriations Chart

**Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations
OEPP – Office of the Continuum of Care**

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08- 09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 2,666,493	\$ 1,614,615	\$ 2,561,913	\$ 1,546,378	\$ 3,510,649	\$ 1,730,649
Other Operating	\$ 734,475	\$ 311,357	\$ 711,227	\$ 486,480	\$ 1,062,706	\$ 312,706
Special Items	\$	\$				
Permanent Improvements	\$	\$				
Case Services	\$ 2,473,175	\$ 1,375,848	\$ 3,280,889	\$ 1,659,158	\$3,854,112	\$ 1,954,112
Distributions to Subdivisions	\$	\$				
Fringe Benefits	\$ 781,359	\$ 483,921	\$ 792,276	\$ 494,824	\$ 1,006,408	\$ 432,662
Non-recurring	\$	\$				
Total	\$ 6,655,503	\$ 3,785,742	\$ 7,346,305	\$ 4,186,839	\$ 9,433,875	\$ 4,430,129

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Continuum of Care (COC)	To provide case management services to children under the age of 21 (and their families) who have serious emotional challenges.	State	3,785,741	State	4,186,839	See tables: 7.1.1 COC child functioning 7.1.2 COC child functioning-CAFAS 7.1.3 COC service availability/delivery 7.1.4 COC level of care restrictiveness 7.1.5 transition services 7.2.1 COC customer satisfaction 7.6.1 COC compliance with regulatory standards
		Federal		Federal		
		Other	2,869,762	Other	3,159,465	
		Total	6,655,503	Total	7,346,305	
		% of budget:		% of budget:		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership, Governance, and Social Responsibility

1.1 How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior?

The Continuum of Care uses various methods to communicate direction, priorities, expectations, values, behavior, etc.

- a) There are several meetings staff attend where decisions about policy, updates, service provision, etc. are discussed. 1) Monthly, Regional Program Directors meet to assess staff/customer needs and statewide policy development. 2) Supervisors meet monthly to discuss and resolve implementation barriers. 3) State office and regional staff involved in service delivery meet monthly to guarantee services and operations are aligned with the direction of the organization and the implementation of initiatives. 4) Quarterly meetings are held with the regional offices and the Director to communicate and address the agency's direction, system changes, and implementation of initiatives. 5) Weekly the Director and Senior Managers meet to assure issues are addressed with a coherent plan. 6) Clinical Consultants met monthly to ensure consistent service delivery to clients. 7) Monthly regional management team (consisting of all leaders) meets to ensure consistent implementation of organizational operational and fiscal policies.
- b) Quarterly, staff are informed on our agency's progress on outcomes; an Annual Organization Outcome Report is also published and distributed to staff and parents.
- c) An annual meeting, newsletters, frequent e-mails, etc. occur.
- d) Video conferencing is used to communicate immediate issues with managers, supervisors, and clinical staff.

1.2 How do senior leaders establish and promote focus on customers and other stakeholders?

- a) The Continuum of Care conducts various satisfaction surveys, parent training manuals, family forums and mails newsletters to families we serve.
- b) The Continuum participates in quarterly meetings with private providers to discuss relevant issues, policies, etc. related to services for emotionally disturbed children.
- c) Continuum staff meets monthly with other child serving and regulatory agencies to foster communication and collaboration concerning policies and services for emotionally disturbed children.
- d) Several documents are available in Spanish to allow greater outreach to the Hispanic community.

1.3 How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

- a) The Continuum of Care worked with the Department of Health and Human Services, other child serving and regulatory state agencies, and private providers to address changes in Federal funding and mandates.
- b) COC works with other child serving state agencies to discuss changes in policy and its impact on some of our stakeholders (private service providers). Service availability and improvement in the quality of services are the goals of interagency collaboration.
- c) The Continuum provides internal monitoring of our clients and select service providers. Monitoring the client's functioning and behavior allows us to continually assess safety

issues, as well as, the impact of the child's behavior on the community. The monitoring of select service providers allows staff to be more aware of the services COC children are receiving, the quality of those services, and the provider's compliance with standards – thus helping COC staff be aware of any potential impact and risks. During 07-08, the Continuum led an interagency effort to assess and plan future monitoring needs.

1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?

The Continuum of Care has several avenues to maintain accountability. These include:

- a) Conducting internal audits for the services the Continuum seeks Medicaid reimbursement (case management and wrap around services). These audits ensure the Continuum remains compliant with Medicaid contracts and program regulations. When necessary, corrective action is issued.
- b) Ensuring internal policies/procedures for maintaining and handling funds are followed.
- c) Reviewing monthly billing reports and budget projections to keep spending in line with available funds.

1.5 What key performance measures are regularly reviewed by senior leaders?

Senior Leaders review a variety of performance measures and progress made toward organizational goals and action plans. The performance measures address:

1. Client progress/functioning
2. Service availability
3. Customer satisfaction
4. Compliance with regulatory standards
5. Involving our client's families as active partners in the delivery of services

1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization including the head of the organizations, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?

The Continuum of Care Office Director, management, and regional staff communicate and provide feedback on individual, as well as, organizational items. By listening and reviewing feedback from staff and customers, senior leaders are able to make adjustments in internal processes, directives, and action plans. (Refer to 1.1)

1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

- Supervision for professional licensure is offered at no cost to the staff.
 - Management staff can mentor staff to help develop management and leadership skills.
- In addition, the new approach to case management (see Section I Accomplishments and Challenges b) allows more opportunities for advancement and secession planning.

1.8 How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?

The Continuum's Office Director, senior managers, and regional leaders review our established goals, strategies, action plans, evaluation measures and related outcomes. This review allows COC to continually be aware of the status of services and goal attainment.

1.9 How do senior leaders create an environment for organization and workforce learning?

Senior leaders challenge staff to explore new approaches to performing their jobs and encourage staff to attend training (as money allows) to improve and hone their skills and knowledge base, particularly training related to clinical and service delivery.

1.10 How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

See 1.7 and 1.8. In addition the agency implemented two new processes which required the engagement and empowerment of the entire organization. One project the management staff and others were very involved in developing the “team approach” to service delivery; this involved initial input from all levels of the organization and continuous feedback and changes made by management. The second project involved automating the documentation process which included feedback from staff; this process was managed and led by workers and required constant feedback. Staff who embraced the new processes are recognized; in addition, staff who receive positive comments from our consumers on various satisfaction surveys are also acknowledged.

1.11 How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce and the organization contribute to improving these communities.

- a) Staff are active participants and volunteers in community activities. Examples include: a member of the Sumter Community Concert Band and the Sumter Little Theater Orchestra, Girl Scouts, March of Dimes, American Red Cross, and various sororities. Staff volunteer with various shelters and group homes for abused and/or neglected children and adults, nursing homes, Habitat for Humanity, and a variety of church and school activities.
- b) Staff participates on various councils and boards – such as the Humanities Council, Greenville Safe Communities Board, Muscular Dystrophy Association, Pee Dee Community Action Partnership, Head Start Advisory Committee, Palmetto State Law Enforcement Association, Greenville County Transition Cooperative and the Youth Development Advisory Council.
- c) Continuum staff also participates on various work-related committees; examples include chairing committees for the Departments of Alcohol and other Drug Abuse Services, Health and Human Services, Mental Health and Social Services. Staff participates on interagency staffings (with schools, juvenile justice, social services, etc.) and helps sponsor various interagency group meetings.

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

- 2.1 What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory societal and other potential risks and consumer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.**

The Continuum of Care’s strategic planning process was established in 1998; the Continuum Office Director, two Senior Managers and four Regional Program Directors are key participants. Information and needs are communicated regularly to OEPP. Information on our goals and consumer satisfaction are shared with staff, customers (children and families we serve) and stakeholders.

- 2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary?**

The Continuum has tried not to allow our challenges to have a direct impact on the services we provide. The majority of our challenges are based on funding or Federal mandates while our objectives are based on client functioning and improvement. Many of our challenges are fiscal and system related and not related to the strategic objectives which are based on service delivery to our clientele. While the Continuum has addressed the challenges upfront with minimal impact to our families, this may not continue to be possible with the additional budget cuts and elimination of Federal funding for services purchased on behalf of our clients. In the future, the Continuum may not have any option other than having our challenges and Federal mandates negatively impact upon the clients.

Chart 2.2 Strategic Planning Chart for Continuum of Care

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. To ensure appropriate assessment, planning and service coordination for severely emotionally disturbed youth.	1.1 Children will demonstrate an increased ability to function in their communities while they are Continuum clients.	<ul style="list-style-type: none"> • Case management • Monitor child’s progress at home and in the community • Utilize CALOCUS to assess need for out-of-home placements or community supports • Use “Progress in Placement” tool to conduct monitoring of client’s progress in out-of-home placement • Psychological/Transition consults • Supervisor consults • CAFAS assessments • Contact with child, family and service providers • Treatment planning meetings • Survey independent living providers to assess client’s progress 	Tables: 7.1.1 7.1.2 7.1.4
	1.2 Children will function better in their school environments.	<ul style="list-style-type: none"> • Staff participation in school IEP planning • Transition consults for children 14+ • Survey of teachers • Coordination of education support services • Case management contact with school personnel 	Tables: 7.1.1 7.1.2 7.1.3

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
	1.3 Families will see a decrease in their child's problematic behaviors.	<ul style="list-style-type: none"> • Case management • Monitor child's progress at home and community • Supervisor consults • CAFAS assessments • Contact with child, family, & service providers • Family satisfaction survey 	Tables: 7.1.1 7.1.2
2. To ensure severely emotionally disturbed youth have appropriate access to a full array of community based and residential services.	2.1 Clients will receive the services they need to maximize their functioning while in the least restrictive care.	<ul style="list-style-type: none"> • Utilize level of care process • Psychologist/Transition consults • Supervisor consults • CAFAS assessments • Contact with child, family and providers • Involve child, family, and service providers in treatment planning • Interagency planning efforts • Utilize CALOCUS to assess need for out-of-home placements 	Tables: 7.1.3 7.1.4 7.1.5
3. To increase the quality, effectiveness and efficiency of the system of care to enable emotionally disturbed children and their families to successfully transition into less intensive and developmentally appropriate service systems.	3.1 COC transition age clients will be better able to live independently within the community setting.	<ul style="list-style-type: none"> • Case management • Transition consults • CAFAS assessments • Contact with child, family and service providers • Treatment planning meetings • Survey independent living providers to assess client's progress 	Tables: 7.1.2 7.1.5
	3.2 Clients with at least 1 year of service will be at the same or lower level of care after each quarter.	<ul style="list-style-type: none"> • Case management • Monitor child's progress at home and in the community • Utilize CALOCUS to assess need for out-of-home placements • Use "Progress in Placement" tool to conduct monitoring of client's progress in out-of-home placement • Clinical consults • Supervisor consults • Contact with child, family and service providers • Treatment planning meetings 	Table: 7.1.4
4. Encourage Continuum staff to engage families of emotionally disturbed youth as leaders and active partners in their child's treatment - including the identification of services to address the child's and family's specific needs.	4.1 Families will express satisfaction with the services they receive.	<ul style="list-style-type: none"> • Family satisfaction survey • Family forums (one per region) • Newsletters 	Table: 7.2.1
	4.2 Families will improve their advocacy skills and be active participants in the design and delivery of services for their children.	<ul style="list-style-type: none"> • Contact with child, family and service providers • Treatment planning meetings • Parent training 	Table: 7.2.1
	4.3 Families will express an increased ability to manage the challenges presented by their children.	<ul style="list-style-type: none"> • Case management • Monitor child's progress at home and in the community • Clinical consults • Family feedback 	Tables: 7.1.1 7.2.1

2.3 How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?

The Continuum of Care develops and tracks our action plans on a quarterly basis, thus providing staff with “real time” information for review. (See 2.1) Resource distributions (staff and fiscal) are first allocated toward client/customer services; administrative staff positions and the related funding are secondary to the provision of services.

2.4 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

See 2.1. The group members are responsible for communicating information within their region/unit; in addition, information is communicated via the Continuum newsletters. Annually the Continuum publishes our “report card” that summarizes the status of our goals and outcomes.

2.5 How do you measure progress on your action plans?

The Continuum of Care uses a variety of methods to measure progress; the technique depends on the action plan and initiative. Some examples include:

- a) Reports tracking the amount of case management provided
- b) Annually administering the Child and Adolescent Functioning Assessment Scale (CAFAS), which reflects the child’s progress in eight key areas: school/work, home, community, relationships, substance use, thinking, moods/emotions, and self-harm.
- c) Consultations with Psychologist, Clinical Consultants and/or Transition Liaison
- d) Responses to family and teacher surveys
- e) Changes in level of care as indicated by the CALOCUS

2.6 How do you evaluate and improve your strategic planning process?

Input from our customers and staff is important. The Continuum reviews our strategic planning documents and makes necessary revisions. Comments from the family and teacher surveys and family forums are important ways to evaluate the services we provide.

2.7 If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide a website address for that plan.

The strategic plan is not available on our website at the current time.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

3.1 How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Children (and their families) with serious emotional challenges	<ul style="list-style-type: none">• To have assistance with obtaining services necessary to meet their individual needs• To reside in their home or the least restrictive environment• Other requirements are determined based on individual needs regarding treatment goals• (For clients’ families) to have an avenue for input and participation
Child serving state agencies	<ul style="list-style-type: none">• To work together to help improve services available to children in South Carolina

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?

- a) Regular contact with the children and their families
- b) Various assessments on needed services, service availability, and child functioning to determine needs and expectations
- c) Yearly family surveys
- d) Regional family forum meetings
- e) Hosting and attending interagency and service provider meetings to keep abreast of stakeholder needs and service availability
- f) Participation on state agency workgroups

3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Families have access to regional and state office leadership; when selected for services families are provided with names and phone numbers. The regional offices are encouraged to address issues in their office; but when needed, the Continuum Director answers family calls. The Director also hosts a family forum each year to meet with families and get their input and listen to their concerns. Additionally families are asked to complete an anonymous survey and return in a self-addressed stamped envelope.

3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?

Annually, the Continuum of Care sends surveys to our families and teachers asking our customers to rate the services we provide, the child's progress, and provide other comments and suggestions. The submitted information is compiled and shared with management, staff and stakeholders; trends and data are tracked over time. In addition, the Continuum Director and the Regional Program Director host a meeting in each regional office to get feedback from the Continuum families. (See Table 7.2.1)

3.5 How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

The Continuum continually assesses the services used and the child's progress using the Child and Adolescent Functioning Assessment Scale (CAFAS). The CAFAS results help drive treatment plan development and Continuum's future efforts to service development. The Continuum also uses the Child and Adolescent Level of Care Utilization System (CALOCUS) to help determine the level of residential placement needed.

3.6 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups?

The Continuum believes open communication and responsiveness help build relationships. In the past, a family workgroup developed a protocol to address how issues can be resolved between the family and case management staff; this process continues. (See 3.2.)

Section III – Elements of Malcolm Baldrige

Category 4: Measurement, Analysis and Knowledge Management

4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

Through the Continuum of Care’s strategic planning process (outlined in 2.1) four overriding strategic goals were developed along with the related action plans and evaluation measures. This process drives the identification and revision of goals/objectives, action plans; outcomes are measured and evaluated, thus enabling Continuum to improve services and processes.

Quarterly, information/data is gathered. Our goals, objectives, strategies, action plans, and outcomes are reviewed. The upcoming year will present challenges due to the changes in Federal reimbursement; therefore operational and financial tracking systems will need close monitoring and adjustments based on changes.

4.2 How do you select, collect, align, and integrate data/information analysis to provide effective support for decision making and innovation throughout your organization?

As stated previously, in 2.1 and 4.1 the Continuum of Care’s strategic plan, related goals and outcome measures are reviewed. Management staff reviews and makes decisions based on identified needs and trends. Information regarding caseload size, service availability, client functioning, and resources available are considered in the decision making process.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?

Key Measure	Review Methods (Time Frame)
Client Progress/ Functioning	Children and Adolescent Function Assessment Scale-CAFAS (minimum yearly) Case management (weekly) Clinical Consultations (quarterly) Stakeholder/customer surveys (yearly) Independent Living Skills assessments (quarterly) Child and Adolescent Level of Care Utilization System-CALOCUS (yearly) Child/Family contact expectations (monthly)
Service Availability/ Delivery	Stakeholder/customer surveys (yearly) Review of services received (quarterly) Review of selection frequency (monthly)
Customer Satisfaction	Family Forums (yearly – in each regional office) Family/Parent feedback surveys (annually) Teacher feedback surveys (annually)
Compliance with regulatory standards	Internal audits (2/year)
Family Involvement	Family feedback surveys (annually) Family Forums (yearly) Case management involvement (monthly)

4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

Due to the uniqueness of Continuum’s case management services, there is not another state or national entity to compare the effectiveness of our services. Instead, internal data information is compared and tracked. Comparative data and information includes:

- a) Measuring and tracking data on 45 action statements and 11 child/family outcome goals
- b) Multiple reports using data in our Contract and Client database systems
- c) Reviewing individual client data (including assessments on functioning, procured services, and documentation of case management)
- d) Receiving parent feedback and noting trends
- e) Generating ad hoc reports
- f) Tracking of trends (annually and over time)

4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

The Continuum uses real time data – particularly with our contract and client databases. Daily updates occur with all databases. The procurement and accounting databases are monitored for accuracy and completeness. Client data is monitored for integrity and accuracy; critical data changes are tracked. Health Insurance Portability and Accountability Act (HIPAA) procedures are in place to protect client confidentiality. In addition, the Information Technology department ensures the security on GroupWise e-mail and keeps all computers updated with secure operating systems.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?

All action plans, objectives, performance measures and indicators are reviewed quarterly and modified as needed. Continuum also tracks trends over time. (See 2.1, 4.1, 4.4) When modifications are needed, workgroups are formed to improve the related processes.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

The accumulated employee knowledge is accomplished through written procedural manuals, cross-training, and staff training. The Continuum uses Business Rules to provide written protocols and flowcharts to reflect job functions and to outline best practices at times of staffing changes. Regular staff meetings also help collect and share knowledge.

Section III – Elements of Malcolm Baldrige

Category 5: Workforce Focus

5.1 How does management organize and measure work to enable your workforce to: 1) develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and to 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

The Continuum of Care relies on the Director, Senior Managers and the Regional Team Managers to oversee their staff’s job duties. The Continuum has guidelines for caseload size, consultation schedules and paperwork deadlines, all of which assist staff in managing work and meeting requirements.

5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and location? Give examples.

In addition to the aforementioned newsletter, reports and e-mails, the Continuum recently

implemented video conferencing which increased staff's communication with state office and regional offices. This allows direct communication without the travel. In addition the agency's intra-net web site was updated to allow documentation and policies to be more readily available.

5.3 How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.

OEPP Human Resource (HR) department advertises vacant job positions on the State HR web page. The Continuum has internal procedures for hiring and communication of new hire data among staff. A comprehensive on-the-job training process and training curriculum is in place which encompasses regional, supervisor and state office training. At times the Continuum is faced with barriers in the hiring and supervision of new workers in satellite offices where immediate supervisor input and oversight is not available.

5.4 How do you access your workforce capability and capacity needs, including skills, competencies, and staffing levels?

The Regional Program Directors, access workforce capability and need. Through our training curriculum staff must successfully complete all steps of the processes and, at times, prove mastery of the topic and/or skills. The Continuum is planning to implement a formal assessment process to determine individual training needs. When necessary, staff provides individual training to reinforce areas needing strengthening. When specialty skills or training is needed, these are sought out from other resources.

5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

The Continuum tries to involve staff in planning changes to the organization or service delivery (see 1.10). Staff are hired based on education and work experience with the population we serve and are provided with additional training. Staff are regularly informed of service delivery hours, progress in client's functioning and treatment goals. All of which are directly related to our action plans and strategic goals. (Also see 5.7)

5.6 How does your development and learning system for leaders address the following: a) development of personal leadership attributes b) development of organizational knowledge c) ethical practices d) your core competencies, strategic challenges, and accomplishment of action plans?

The development of personal leadership attributes is addressed with the individual staff and supervisor. Tasks are assigned to encourage professional development and skills. Organization knowledge, ethical practices and core competencies used to accomplish our action plans are addressed through our extensive training curriculum, which encompasses on the job training, classroom training, competencies tests, etc.

5.7 How do you identify and address key developmental training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation, and safety training?

During 07-08 the Continuum of Care redesigned our initial and on-going training. The new curriculum now includes a variety of trainers (each with a "specialty" area), opportunities

for on-going training, and clearly outlines classroom and regional on-the-job training. The Continuum provides many training opportunities:

- a) General agency orientation
- b) Detailed case management curriculum, extensive instructional and on-the-job training
- c) Competency evaluations and reliability ratings on select training topics occur
- d) Training staff attends supervisory meetings to ensure training needs are being met.
- e) Regional staff working with clients must attend training and become reliable in administering the Child and Adolescent Functioning Assessment Scale. This provides training on performing clinical assessments, which are used to measure client progress. All staff must demonstrate reliability.
- f) Initial and ongoing training for computer/office applications
- g) Internal staff (with specialized knowledge or skills) train and educate other staff.

The Continuum is a member of the State Agency Training Consortium, which coordinates general and specialized training thus increasing the availability and topics of training.

5.8 How do you encourage on the job use of new knowledge and skills?

The new team approach provides staff with greater communication, sharing of ideas and mentoring of skills. Classroom curriculum is enforced by on the job mastery of select skills.

5.9 How does employee training contribute to the achievement of your action plans?

In order to achieve many of our action plans, Continuum workers must be trained in the best ways to perform their job and work with our clients. Staff must have the appropriate educational background and experience; the Continuum supplements with additional training. The Continuum tries to train and equip staff so they can provide quality services thus helping ensure client goals and outcomes are met, customer satisfaction is reached, and progress is made on our action items.

5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?

As stated previously, staff must demonstrate effectiveness/competency and mastery of certain skills (See 5.7)

5.11 How do you motivate your workforce to develop and utilize their full potential?

When possible, the Continuum of Care believes in promoting from within. This often occurs with Service Coordinators entering into supervisory roles. When employees demonstrate skills or express an interest in developing skills, (when possible) job tasks are assigned to help develop or utilize areas of knowledge. The Continuum was able to reallocate positions to create entry level positions that allow for more cross training and advancement opportunities while also making a positive fiscal impact.

5.12 What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

Informal communication happens daily; formal communication occurs through regularly scheduled meetings. Complaints within the regional operations are first handled through the staff and Regional Director, then the Director. When needed, OEPP H.R. is involved.

5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?

Supervision for professional licensure is offered at no cost to the staff. Additionally Management staff can mentor staff to help develop management and leadership skills.

5.14 How do you maintain a safe, secure and healthy work environment?

- a) Each regional office has a security system and, in most cases, is located in a building/complex, which houses other businesses/agencies.
- b) Staff that have direct contact with children are encouraged to attend a crisis prevention course, which teaches de-escalation and proper responses to client aggression.
- c) Each operational unit and regional office have contingency plans outlining how staff will sustain services to clients during abnormal or emergency circumstances or events.
- d) Two Continuum staff participate in the South Carolina Emergency Management Division trainings.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

6.1 How do you determine and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?

Continuum's mission and action plans are formulated to enhance/improve the functioning and related services provided to the children and families we serve. Services range from case management, assessment, treatment planning and monitoring procured services. Our staff's core competencies relating to: assessment, communication, advocacy, and planning skills are essential qualities which enable workers to provide quality services to our customers thus helping accomplish our action items.

6.2 How do you determine and what are your key work processes that produce, create, or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?

The Continuum of Care has the following processes in place:

- a) The strategic planning process (as described in 2.1 and 4.1) includes communicating information on our goals, progress of our clients and survey results.
- b) By gathering and analyzing Child and Adolescent Functioning Assessment Scale (CAFAS) data on clinical functioning, changes in the client's behavior (both individually and as a population) are reflected.
- c) Business rules are developed which outline and flowchart key work processes.
- d) The client database contains essential information on demographics, CAFAS results, placements, medications, family contact, diagnostic, consultations, etc.
- e) There is an extensive selection process - whereby applicants (potential clients) apply for services, are scored/ranked based on severity, and selected for services based on severity and need.
- f) The Child and Adolescent Level of Care Utilization System (CALOCUS) is used to help ensure children are receiving services at the most appropriate level.
- g) Procurement of service procedures are in place.
- h) Expectations are set which outline minimum contact with our children, families and service providers.

The above processes help to ensure clients/families receive needed services – including treatment planning requirements; contact frequencies with clients, family, school, and service providers; and consultations.

6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

The Continuum of Care addresses this in several ways:

- a) An experienced trainer who has provided case management services for emotional disturbed children trains new staff. Training involves instruction as well as on the job training (See 5.4). Staff members with the direct knowledge of the issues also offer specialty training.
- b) Management staff review budgets, costs, and (actual and projected) expenditures.
- c) Data from the Procurement and Contract Management System and the accounting databases are updated daily and are combined in the Client Authorization Payment System database application to provide current procurement and expenditure data on all services and clients. Daily updates to the Client Services Management System database occur and these are available to all administrative and regional staff.
- d) A list of approved contractors is available on-line for state and regional staff.

6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?

The operational procedures are in place. The policy and directives are on-line for easy reference and all key processes have been flowcharted. Daily Information Technology updates occur to ensure up-to-date information is available in the databases. Checks and balances are in place to ensure schedules and timeliness of completing/conducting critical assessments, consultations, treatment planning, contract renewals, staff training, etc. are performed. Regulatory and policy mandated requirements are incorporated within a monitoring schedule. Regional and state office staff conduct case management and service audits to ensure compliance with standards.

6.5 How do you systematically evaluate and improve your key product and service related work processes?

Please refer to 6.2. The impact of service delivery is shown by the CALOCUS and CAFAS results level of care assessments, improvement in client functioning, and customer satisfaction surveys.

6.6 What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?

Key processes are described in 6.2. There are three main methods to improve and update processes within the Continuum, these include: communication to and from staff and customers; review of goals and evaluation results; and workgroups involving staff with various job duties, customers and stakeholders.

6.7 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

The majority funding the Continuum receives is from state appropriations and Medicaid reimbursement for services we provide to our clients. Budget and financial projections are

based on projected estimates of service delivery and the year's allocation of State appropriated funds. When changes occur in either of the major sources of funding, adjustments must occur. To address past reductions in State appropriations, changes were made to the administrative structure (a Reduction In Force occurred and realignment of duties); currently administrative positions go unfilled.

The Continuum is now facing a change in Medicaid reimbursement – both in the amount we will be reimbursed for services our staff provides to our clients and elimination of Medicaid reimbursement for children's (residential) mental health services we purchase for our clients. The latter will cause Continuum to need additional state funds (to replace the Federal reimbursement) to pay for necessary services for our clients. Both of these factors occurring simultaneously causes concern in projecting and meeting financial obligations. Therefore, the Continuum will be exploring:

1. Continuing to realign staff and responsibilities to adjust to the changes including freezing additional administrative/operational positions.
2. A request for our Medicaid case management reimbursement rate to be re-examined.
3. Any future reduction in funding may result in a decrease in services to clients.

Section III – Elements of Malcolm Baldrige

Category 7: Results

7.1 What are your performance levels and trends for the key measures of mission accomplishment/product and services performance that are important to your customers? How do your results compare to those of comparable organizations?

The Continuum of Care (COC) has several goals (See chart III 2.2) related to client functioning. These are:

1. Children will demonstrate an increased ability to function in their communities while they are Continuum clients.
2. Children will function better in their school environments.
3. Families will see a decrease in their child's problematic behaviors.
4. Clients will receive services they need to maximize their functioning while in the least restrictive care.
5. Transition age clients will be better able to live independently within the community setting.
6. Clients with at least 1 year of service will be at the same or lower level of care after each quarter.

The following tables reflect the Continuum's performance levels and trends related to these goals/objectives. As indicated previously (see Section III 4.4), there are not comparable organizations to compare results.

Table 7.1.1 Continuum of Care (COC) Child Functioning

Performance Measure (Many of these data points* are based on feedback provided through surveys)	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of parents* who felt their child's behavior at home has improved	57%	57%	62%	57%
% of teachers* who reported the COC child will advance to the next grade level	95%	91%	86%	88%
% of teachers* who responded that students' behaviors improved as a result of the COC's involvement	83%	94%	88%	87%
% of teachers* who stated the COC has been critical in supporting the student's educational placement and progress	87%	99%	93%	95%
% of COC children (9 th grade or above) who are on the High School diploma, Occupational Certificate or GED Education Track	51%	52%	53%	73%

Table 7.1.2 Child Functioning (based on CAFAS assessments)

Assessments are administered to clients who have been served by Continuum for at least three months; CAFAS is administered annually thereafter. CAFAS results reflect improvement by child. The % shown are averages of all Continuum clients' assessments in a specified time period.

Performance Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of clients showing a decrease in problematic behaviors in a school setting	45%	43%	40%	34%
% of clients showing a decrease in problematic behaviors in the home	51%	39%	40%	30%
% of clients showing a decrease in problematic behaviors in the community	35%	33%	32%	27%

Table 7.1.3 Continuum of Care Service Availability/Delivery Effectiveness

Performance Measure (Many of these data points* are based on feedback provided through surveys)	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of students who have been able to remain in the classroom more consistently due to the Continuums' coordination of services* (based on teachers surveyed)	81%	91%	86%	91%
% of families* receiving WRAP services who report receiving them in the amount stated on their treatment plan	42%	87%	83%	90%
% of families* who felt services were more available to their child now that the child is a client of the Continuum	75%	84%	89%	91%
% of families* who felt that services are a higher quality now that their child is a client of the Continuum	86%	85%	86%	92%

Table 7.1.4 Continuum of Care Level of Care Restrictiveness

Performance Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of children with at least six months tenure and wrap services in place who remain in their home at the end of each quarter	52%	54%	60%	67%
% of clients in placement that did not require a higher level of care during the quarter	--	92%	93%	92%

Table 7.1.5 Continuum of Care Transition Services

Performance Measure (Data points indicated with * are based on survey results from ILS providers)	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of clients age 16+ receiving independent living skills (ILS) services that have some skills needed for employment	--	100%	100%	100%
% of clients age 16+ who can complete a job application	--	65%	53%	60%
% of clients age 16+ who have some interviewing skills	--	34%	39%	38%
% of clients age 16+ who made progress on independent living skills TSP goals	--	90%	84%	88%

In addition, six Continuum of Care children attended the South Carolina Youth Leadership Forum (YLF) conference in July 2007. This annual career leadership program is for high school students, with disabilities between the ages of 17-21, who have leadership potential in both their school and community. This conference offered children the opportunity to

learn about disability, community and academic resources, career options and resources thus enhancing them to grow their leadership, citizenship, and social skills.

7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?

The Continuum of Care utilizes two methods to verify customer satisfaction – primarily families and teachers. The Continuum’s goal is: “Families will express satisfaction with the services they receive.” Comparable organization results are unknown. (See 7.1)

Table 7.2.1 Continuum of Care Customer Satisfaction Results – Family

Performance Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08
All data is based on feedback provided through surveys				
% of families giving Continuum an A or B rating	80%	82%	88%	84%
% of families who say they will refer other families to the Continuum	80%	93%	80%	97%
% of families more satisfied with services once their child became a COC client	86%	86%	90%	94%
% of families who report most or all needed services are being received	82%	80%	80%	82%
% of families who stated COC listens to their concerns when planning services	96%	93%	95%	96%
% of families who stated COC allows them to help in making treatment decisions for their child	--	--	96%	99%
% of families who stated their relationship with their child has improved since they became involved with the Continuum	--	83%	86%	84%

7.3 What are your performance levels for key measures of financial performance, including measure of cost containment, as appropriate?

At a minimum, expenditures and pending contracted amounts are monitored monthly. Expenditures and authorizations are reviewed to ensure costs are aligned within budget.

7.4 What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

The Continuum of Care does not gather this data.

7.5 What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency, and work system performance? (These could include measures related to the following: product, service, and work system innovation rates and improvement results; improvements to cycle time; supplier and partner performance, and results related to emergency drills or exercises?)

The Continuum of Care does not gather this data.

7.6 What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?

Although not related to a specified outcome in this report, the Continuum measures our compliance with Medicaid requirements.

Table 7.6.1 Continuum of Care Compliance with regulatory standards

Performance Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08
% of WRAP funds recouped by Medicaid	0%	0%	0%	0%
% of Case Management funds recoup by Medicaid (DHHS)	0%	0%	0%	0%

OEPP – Correspondence

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Correspondence

Section I - Executive Summary

1. Purpose, Mission, Vision and Values

- 1.1 The purpose of the Office of Correspondence is to receive, track and respond to mail received by the Governor's Office.
- 1.2 The mission of the Office of Correspondence is to efficiently handle the mail received by the Office of the Governor.
- 1.3 The vision of the Office of Correspondence is to process incoming and outgoing mail effectively.
- 1.4 The values of the Office of Correspondence are to provide quality products and services to our customers, partners and stakeholders and to maintain high standards of professionalism and confidentiality.

2. Major Achievements for FY 2007-2008

- 2.1 Received, logged and routed 29,852 pieces of correspondence
- 2.2 Prepared 2,235 letters in response to constituent requests.
- 2.3 Prepared 446 proclamations.
- 2.4 Responded to 138 urgent, last-minute requests.
- 2.5 Helped senior staff with 2,732 written responses
- 2.6 Prepared certificates for 2,795 state retirees
- 2.7 Proactively prepared 2,248 letters to acknowledge constituents' achievements
- 2.8 Managed the Governor's Citizenship program
- 2.9 Managed the Reading Honor Roll program
- 2.10 Assisted with the Safe Kids Calendar

3. Key Strategic Goals for Present and Future Years

- 3.1 Process Management
 - 3.1.1 Accurately log and track all mail received by the Governor's Office
 - 3.1.2 Assist Senior Staff in responding to legislative/policy mail
 - 3.1.3 Prepare and maintain accurate mail reports
- 3.2 Customer Satisfaction
 - 3.2.1 Respond to requests and meet deadlines for letters, certificates and proclamations
 - 3.2.2 Acknowledge residents' achievements with congratulatory letters
 - 3.2.3 Assist Senior Staff in responding to legislative/policy mail

4. Key Strategic Challenges

- 4.1 The greatest challenge facing the Office of Correspondence is the unpredictability of the volume of mail received, and an unusually large amount of mail on any given day is problematic in all phases of the Office's operations. For example, during a three-day period, over 4,000 letters, e-mails and faxes were received, affecting staff and daily routines as regular duties were put on hold in order to accurately log the mail prior to responding to the constituents.
- 4.2 The inability to run reports automatically has placed an additional burden on staff as numbers have to be pulled manually as needed, and the normal quarterly and annual reports were discontinued.

5. **How the accountability report is used to improve organizational performance**
 The Accountability Report provides a snapshot of past achievements and a planning tool for future needs and expectations.

Section II - Organizational Profile

1. Main Products and Services

- 1.1 Manage and maintain mail received and answered by the Governor's Office to include receiving, assigning, logging, routing, filing, monitoring and tracking
- 1.2 Prepare letters and certificates in response to anniversary, birthday, condolence, graduation, wedding, retirement, new baby, special occasion, reunions, greetings, photos, scouts, congratulatory, student information and other miscellaneous requests
- 1.3 Prepare proclamations
- 1.4 Assists senior staff in responding to policy/legislative mail
- 1.5 Provides receptionist duties, including walk-ins and phones, for Constituent Services and Correspondence
- 1.6 Maintains an extensive filing system of all mail received and sent
- 1.7 Manages the Governor's Citizenship Award and Reading Honor Roll programs

2. Key Customers Groups and Their Key Requirements/Expectations

- 2.1 Constituents: Accurate, appropriate and timely response to their requests
- 2.2 Legislators: Accurate, appropriate and timely response to their requests
- 2.3 Local, State and Federal Agencies: Accurate, appropriate and timely response to their requests
- 2.4 Federal Officials: Accurate, appropriate and timely response to their requests
- 2.5 Community Organizations: Accurate, appropriate and timely response to their requests
- 2.6 Schools: Accurate, appropriate and timely response to their requests along with necessary information and materials in support of the Reading Honor Roll and Governor's Citizenship program
- 2.7 Businesses: Accurate, appropriate and timely response to their requests
- 2.8 Students and Other Out-of-State Residents: Accurate, appropriate and timely response to their requests
- 2.9 Senior Staff: Support and assistance in responding to constituents
- 2.10 OEPP Staff: Accurate, appropriate and timely response to their requests for letters or information

3. Key Stakeholder Groups

- 3.1 Senior Staff
- 3.2 OEPP Staff

4. Key Suppliers and Partners

- 4.1 OEPP Staff
- 4.2 Senior Staff
- 4.3 Governor

5. Operation locations

The Office of Correspondence is located on the first floor of the Wade Hampton Building

6. The number of employees (segmented by employee category)

 5 Classified 4 Unclassified _____ Contract
 _____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

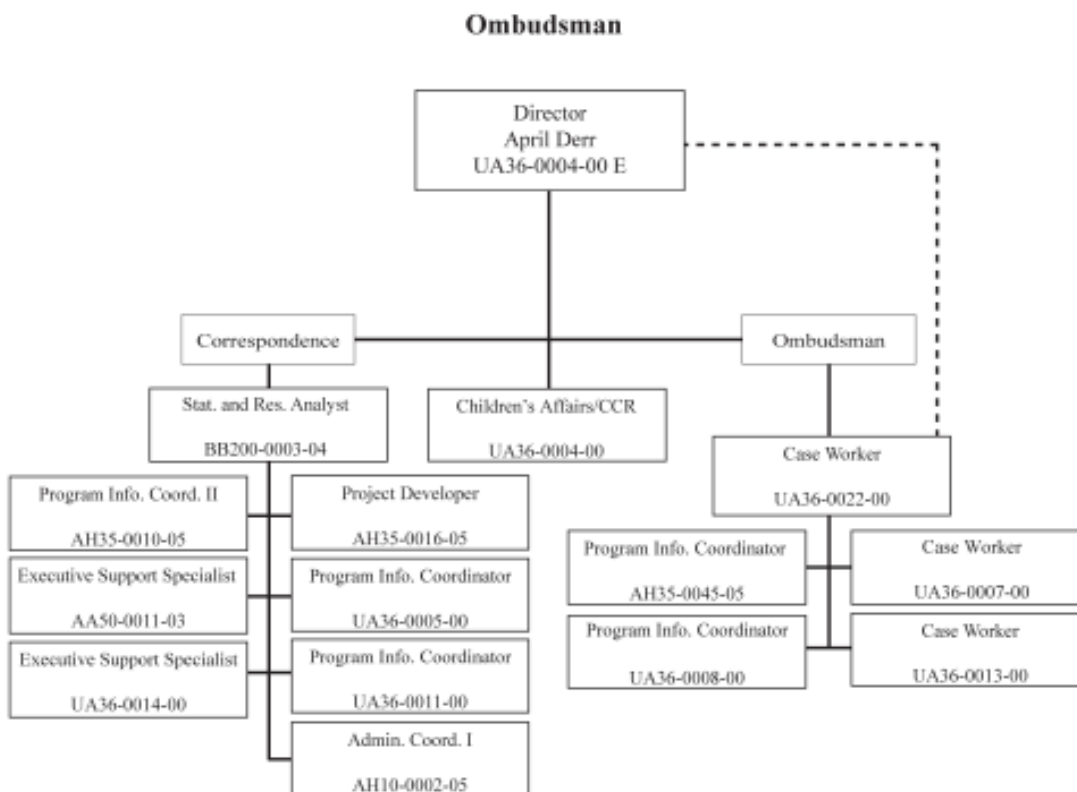
7. The regulatory environment under which your organization operates

There is no regulatory environment for Correspondence.

8. Performance improvement systems

The mail log is monitored on a weekly basis to ensure accuracy, keep track of the status of open mail, and quickly identify patterns of errors that can be remedied by additional training or a simple reminder of procedures. Staff members are periodically assigned different types of correspondence to answer in order to determine the most effective use of the workforce, and they are encouraged to offer suggestions that can improve individual and team performance.

9. Organizational chart



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 209,605	\$ 209,605	\$ 218,957	\$ 218,957	\$ 219,494	\$ 219,494
Other Operating	\$ 7,159	\$ 7,159	\$ 15,176	\$ 15,176	\$ 16,290	\$ 16,290
Special Items	\$ 0	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 58,248	\$ 58,248	\$ 67,279	\$ 67,276	\$ 66,914	\$
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$ 275,012	\$ 275,012	\$ 301,408	\$ 301,408	\$ 302,698	\$ 302,698

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Correspondence	Log, track and help respond to Governor's Office mail.	State	301,408	State	302,698	
		Federal		Federal		
		Other		Other		
		Total	301,408	Total	302,698	
		% of budget:	0%	% of budget:	0%	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

1.1 How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior?

Because of the variety of assigned duties among the Correspondence staff, short and long term direction, organizational priorities and performance expectations are set with individual and small-group discussions. The Director of Constituent Services holds meetings as necessary to address changes in priorities or procedures and to reinforce organizational values and issues surrounding ethical behavior. Additionally, staff is encouraged to share any individual concerns that can be addressed during meetings.

1.2 How do senior leaders establish and promote focus on customers and other stakeholders?

All functions of Correspondence, from logging in mail and maintaining the files to preparing letters, certificates and proclamations and mailing these responses, are grounded in serving the customers and stakeholders. The mail log is monitored for accuracy of information and each response is individually proofed for quality and accuracy of information.

1.3 How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

Feedback from customers and partners is used to monitor and address the impact Correspondence has on the public. Follow-up calls and notes from constituents are shared with staff. Additional requests from individuals, as well as repeat requests from year to year for annual events, provide an indication of the Office's impact on the public.

1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?

Correspondence follows all guidelines and policies in place. Additionally, the Office makes every effort to practice fiscal responsibility, sending responses electronically whenever possible, for example.

1.5 What performance measures do senior leaders regularly review to inform them on needed actions?

Senior leaders regularly review the amount of correspondence received, answered and awaiting response, as well as the time it takes to respond to the various types of mail received by the Office of the Governor.

1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?

Senior leaders promote honest and open feedback from employees at all times. Staff members are encouraged to express their opinions and offer suggestions, which are often incorporated into the daily routine. Senior leaders are always available to address concerns of the staff, and they set a positive example with a good work ethic and high expectations for all employees.

1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

In addition to learning how to carry out the basic functions of Correspondence and how they provide support to or otherwise impact constituents and the other divisions of the Governor's Office, staff receives cross training and is encouraged to pursue additional or different duties in the Office.

1.8 How do senior leaders create an environment for performance improvement and the accomplishment of strategic objectives?

Senior leaders recognize that, just because "it's always been done that way" doesn't necessarily mean that it is the most efficient way and are willing to consider suggestions or implement changes that can lead to a higher level of accomplishment.

1.9 How do senior leaders create an environment for organizational and workforce learning?

By sharing offices, Correspondence staff is positioned to easily share their expertise, experience and knowledge to contribute to organizational and workforce learning.

1.10 How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

The small staff and varied duties are conducive to individual meetings, open communication and daily interaction with senior leaders. Common goals are addressed with the entire staff as needed. Staff meetings also provide the opportunity to offer recognition for a job well-done.

1.11 How do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce and the organization contribute to improving these communities.

Senior leaders recognize that the members of the staff are individuals with different areas of interest and expertise to offer the community. Leaders and staff participate in and support various community service programs such as the United Way, blood drives, food drives, church youth groups, educational programs and homeless pet programs. Leaders and staff within the office have taken steps to reuse and recycle where possible.

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

2.1 What is your strategic planning process, including key participants, and how does it address: a) your organization's strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory, societal and other potential risks, and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.

The strategic planning process includes the Director of Constituent Services, OEPP Directors and senior staff who meet with staff or otherwise communicate immediate and long-term needs, expectations, opportunities, threats, changes in technology and areas for improvement. Procedures are in place to help ensure continuity in the event of an emergency.

Chart III.2 Strategic Planning Chart for Correspondence

Program Number and Title	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Accurately log and track all mail received by the Governor's Office	Process management	Provide ongoing training for all staff members in order to assign and process incoming mail faster and reduce possible errors in the log.	Table III.7.1.1
2. Respond to requests and meet deadlines for letters, certificates and proclamations	Customer satisfaction	Cross-training of employees and sharing of files	Table III.7.1.2 Table III.7.1.3 Table III.7.1.4
3. Assist Senior Staff in responding to legislative/policy mail	Customer satisfaction Process Management	Cross-training of employees and sharing of files Provide ongoing training for all staff members in order to assign and process incoming mail faster and reduce possible errors in the log	Table III.7.1.5
4. Prepare certificates for state retirees	Customer satisfaction	Cross-training of employees and sharing of files.	Table III.7.1.6
5. Acknowledge residents' achievements with congratulatory letters	Customer satisfaction	Cross-training of employees and sharing of files	Table III.7.1.7

2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary? (Section I, Question 4)?

Providing on-going training in assigning and logging mail helps prevent delays in logging mail at times when the volume is high and in getting it to the proper staff member for response. Cross training and file sharing between employees assists in meeting deadlines for constituent requests

2.3 How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?

Employees provide input as to their individual workload requirements to assist the Director of Constituent Services in addressing staffing needs, office workflow, and help needed from senior staff to respond to mail received.

2.4 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

Daily interaction and open communication between staff provides the opportunity to address objectives, plans, and performance. Individual and team goals are utilized to attain organizational objectives.

2.5 How do you measure progress on your action plans?

Productivity reports help keep track of the status of all mail received by the Office of the Governor and whether or not it is answered in a timely manner. The mail log is monitored for accuracy and additional training is provided as needed. Responses to mail are carefully proofed

for quality and accuracy prior to receiving final approval, and approved language is shared between staff to facilitate the process of responding to requests. Feedback from "customers" is noted in the log and shared with appropriate staff, supervisor, and the Director of Constituent Services.

2.6 How do you evaluate and improve your strategic planning process?

The strategic planning process is evaluated and improved through individual and group meetings, review of report data, staff input and feedback from customers and stakeholders.

2.7 If the agency's strategic plan is available to the public through the agency's internet homepage, please provide a website address for that plan.

Correspondence is not mentioned on the OEPP homepage.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

3.1 How do you determine who your customers are and what their requirements are?

Customers include any and all people who contact the office with a request for a specific type of letter, concerns or questions about legislation or policies and, potentially, residents who celebrate milestones in their lives.

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?

The trends identified in reports, the changing nature of customer requests, repeat/duplicate requests and the issues/concerns raised through direct feedback are all monitored to determine needs and expectations.

3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Contact information for the Office of the Governor, including mail and e-mail addresses and telephone and fax numbers are listed on the Governor's Web page.

3.4 How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?

Satisfaction and dissatisfaction are measured through direct feedback including thank you letters and follow-up requests, which are documented in the mail log, assigned to the appropriate staff person and reviewed by the supervisor and the Director of Constituent Services. Any follow-up, additional requests or concerns are addressed immediately with the customer as well as staff.

3.5 How do you use information and feedback from customers/stakeholders to keep services and programs relevant and provide for continuous improvement?

Customer/stakeholder feedback, including concerns and suggestions for changes or improvements are addressed immediately and incorporated whenever appropriate and possible.

3.6 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?

Positive relationships with all customers and stakeholders are built through timely, professional and courteous responses to all requests and follow up as necessary.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

Because the Office of Correspondence is responsible for receiving, tracking and answering mail sent to the Governor's Office, measurements are focused on the handling of the mail. Performing these tasks effectively is the key to an effective system of process management and customer satisfaction and requires cross training and the sharing of files and approved language among staff.

4.2 How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?

Information from constituent mail is entered in the Mail Log and used to help in making decisions regarding the overall mail process and trends in constituent concerns. Data can be pulled and reports generated to assist in setting current and long-term needs.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction? Note: List measures only (chart). Include key performance in Category 7.

- Correspondence Received
- Requests for Letters
- Written Responses
- Proclamations Issued
- Urgent Requests
- Legislative/Policy Responses
- State Retiree Certificates
- Happy Letters Generated

All measures are reviewed through weekly reports, and adjustments in workflow and assignments are made accordingly.

4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

The amount and type of correspondence and requests received are used in the selection of comparative data and information supporting operational and strategic decision-making and innovation.

4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

The mail log is monitored closely to ensure the accuracy of information, that request deadlines are met and needed follow-up is provided. When repetitious errors are found, additional training is provided to the staff person so that corrections can be made.

Report data is provided to all related staff members.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?

Any goals, priorities or suggested changes identified by staff are incorporated whenever possible. Their feedback is used to make adjustments in overall office workflow and assignments.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

This is accomplished through cross-training, individual and group meetings and the sharing of approved language among staff.

Section III – Elements of Malcolm Baldrige

Category 5 Workforce Focus

5.1 How does management organize and measure work: to enable your workforce to 1) develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

Although each staff member has regular duties, wide flexibility is used on a regular basis to determine needed changes in work distribution depending upon current staff size, mail volume and the high rate of last minute requests. Every effort is made to identify and use each person’s strengths, interests and unique abilities to determine the best fit. Continuing cross training efforts help ensure that several staff members are trained to perform the key duties of several positions so that mail is processed efficiently during absences or unexpected increases in mail volume.

5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs and locations?

With the relatively small staff in close quarters, communication occurs through e-mail, telephone, and conversation.

5.3 How does management recruit, hire, place and retain new employees? Describe any barriers you may encounter.

Vacancies are submitted to the Human Resources Department and qualified applicants are interviewed. Once hired, the new employee receives basic training in the functions of Correspondence before settling into their new position. As staff becomes more knowledgeable in the area of government operations, they often decide to return to school or accept other jobs in different areas, creating problems with retention.

5.4 How do you assess your workforce capability and capacity needs, including skills, competencies and staffing levels?

Workforce capability and capacity is assessed through the ability of staff to respond to requests within approved deadlines. Staff is reassigned to help with other duties when there are unexpected amounts of mail that need to be logged in or answered. Proofing mail and monitoring the log helps identify possible areas of weakness that require additional training.

5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

It promotes and encourages staff to proactively identify potential problems before they occur, assist with cross-training for their regular duties, adjust individual schedules when pressing deadlines arise or extra help is needed in other areas, and offer any spare time/expertise to help with other duties to reduce the negative impact of employee absences, special projects, urgent deadlines, and unexpected increases in mail volume on the overall daily processes of the office.

5.6 How does your development and learning system for leaders address the following?

a. Development of personal leadership attributes

Leadership attends and participates in Supervisory Training offered by Human Resources.

b. Development of organizational knowledge

Organizational knowledge is developed and disseminated through meetings and interaction with senior leaders and executive staff.

c. Ethical practices

Leaders are held accountable to ethical practices through meetings and other communications with executive leadership in the Governor’s office.

d. Your core competencies, strategic challenges, and accomplishment of action plans

- 5.7 How do you identify and address key developmental and training needs for your workforce, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training?**
Staff receives training in all functions of Correspondence, and constant monitoring and proofing helps identify areas in which skills and performance excellence training may be needed. Members of the workforce are encouraged to learn and assist with duties traditionally handled by others in the office in order to develop possible new interests and additional skills. Various levels of new employee orientation occur with HR and IT staff as well as with the Director of Constituent Services, the supervisor and fellow staff. New employees also receive information on workplace safety.
- 5.8 How do you encourage on the job use of new knowledge and skills?**
Often the acquisition of new knowledge and skills is accompanied by ideas for changes and improvements that can lead to increased efficiency and effectiveness, and the practice of open communication lends itself to the sharing of information which can be helpful to others in the office.
- 5.9 How does employee training contribute to the achievement of your action plan?**
Training ensures that all employees have the information and resources necessary to process the Governor's mail.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?**
Effectiveness is evaluated by customer and stakeholder feedback.
- 5.11 How do you motivate your employees to develop and utilize their full potential?**
Employees are motivated through open communication, cross-training, identification of areas of special interest and interaction with senior staff.
- 5.12 What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?**
Open communication, knowledge of and interest in co-workers and accessibility of the supervisor provide information on satisfaction, well-being and motivation, as do productivity reports that are prepared as necessary. A drop in productivity can be a sign of dissatisfaction, lack of motivation, or other problems that can be addressed through mentoring, peer support or a change in assignment. There have been no grievances.
- 5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?**
Executive staff, senior leaders and managers work with employees to find the most satisfactory placement within the office.
- 5.14 How do you maintain a safe, secure and healthy work environment?**
Correspondence follows all emergency and facility procedures in place. Should any threatening mail be received, it is turned over to SLED for evaluation. Likewise, SLED alerts the staff if and when it hears of the possibility that a threat may be forthcoming.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

- 6.1 How do you determine and what are your organization’s core competencies, and how do they relate to your mission, competitive environment, and action plans?**
Core competencies are determined by the mail received, and the volume, requests and issues are factors in the processing of same.
- 6.2 How do you determine what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?**
Due to the variety of mail processed, these determinations are made on an individual basis. Careful editing for content and proofing for errors ensure quality for the customers.
- 6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?**
Feedback and other information received from staff within the Governor’s Office are used to make changes or improvements whenever appropriate and feasible.
- 6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?**
All daily office functions are highly specific and closely monitored to ensure all process steps are followed. This is required to ensure that all of the mail is processed, logged and routed quickly and properly.
- 6.5 How do you systematically evaluate and improve your key product and service related processes?**
This is accomplished by meeting the deadlines and receiving feedback from customers, senior leaders and other stakeholders.
- 6.6 What are your key support processes, and how do you improve and update these processes to achieve better performance?**
Office processes are regularly monitored for effectiveness and adjustments are made, as needed, for efficiency in assignments and workflow.

**Section III – Elements of Malcolm Baldrige
Category 7: Results**

- 7.1 What are your performance levels and trends for the key measures of mission accomplishment/product service performance that are important to your customers? How do your results compare to those of comparable organizations?**

Table III.7.1 Key Measures

	2007-2008	2006-2007	2005-2006
7.1.1 Correspondence Received	29,852	26,465	29,145
7.1.2 Written Responses	2,235	1,865	1,826
7.1.3 Proclamations	446	438	434
7.1.4 Urgent, Last-Minute Requests	138	107	Not measured
7.1.5 Legislative Responses	2,732	3,341	5,754
7.1.6 State Retiree Certificates	2,795	3,077	2,632
7.1.7 Congratulatory Letters	2,795	Not measured	Not measured

7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare with those of comparable organizations?

With the diversity of the Correspondence customer base, which includes constituents, legislators, local, state and federal agencies, businesses, community organizations, Governor's Office staff and others, satisfaction is measured mainly through the feedback that may be provided by the "customers," and there is no formal process in place. Every effort is made to fulfill last minute requests.

7.3 What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?

While Correspondence has no formal measure of financial performance, staff is encouraged to make wise and efficient use of work resources and materials.

7.4 What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, work force climate including workplace health, safety, and security?

Although there are no formal measures in place, employees are encouraged and given the opportunity to further develop skills and gain knowledge through cross training. The correspondence staff is relatively small, and employees and managers are genuinely interested in each other, which contributes to employee satisfaction and well-being.

7.5 What are your performance levels and trends for your key measures of organizational effectiveness/operational efficiency, and work system performance?

While there are no formal measures in place, effectiveness, efficiency and performance are monitored for possible improvements in these areas.

7.6. What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?

N/A

OEPP – Crime Victims Ombudsman

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Office of the Crime Victims' Ombudsman (CVO)

Section I - Executive Summary

Mission Statement

To ensure that crime victims are served justly, equitably, and fairly.

Vision

For every crime victim to be provided fair and just treatment by the South Carolina criminal justice system.

Major Achievements for FY 2007-2008

- Assisted with the South Carolina Victim Assistance Academy, which was held at the College of Charleston, as core faculty.
- Gained additional funding through Proviso 73.22 for \$48,000.00.
- Planned, assisted and helped implement the CVO & State Office of Victim Assistance (SOVA) 3rd Annual Crime Victims' Unity Ceremony.
- Assisted with legislation H. 4106 which will house the Office of Victim Services Education & Certification within the CVO.

Key Strategic Goals for Present and Future Years

- To efficiently resolve complaints made by crime victims.
- To ensure ethical performance and accountability.

Key Strategic Challenges

- The lack of recurring funding to CVO's budget since its inception in 1994.
- The inability to impose sanctions against violators of the Victims' Bill of Rights.

How the accountability report is used to improve organizational performance

It's a blue print for the CVO, used as a guide on how to improve on services.

Section II - Organization Profile

1. Main products and/or services and the primary methods by which these are delivered

To receive and respond to crime victims complaints by mail or phone.

2. Key customers segments and their key requirements/expectations

Crime Victims- to get resolution to their complaints.

3. Key stakeholders

Crime Victims

4. Key suppliers and partners

Local and state criminal & juvenile justice organizations /agencies

Table II.1.1 –(Office of the Crime Victims’ Ombudsman) Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Crime Victims’ Ombudsman (CVO)	To refer, provide liaison services, and review/attempt to resolve complaints of crime victims.	Crime Victims	Local/state criminal & juvenile justice agencies

5. Operation locations

Edgar Brown Building, 1205 Pendleton Street, Room 463, Columbia, SC 29201

6. The number of employees (segmented by employee category)

 2 Classified 1 Unclassified _____ Contract

_____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

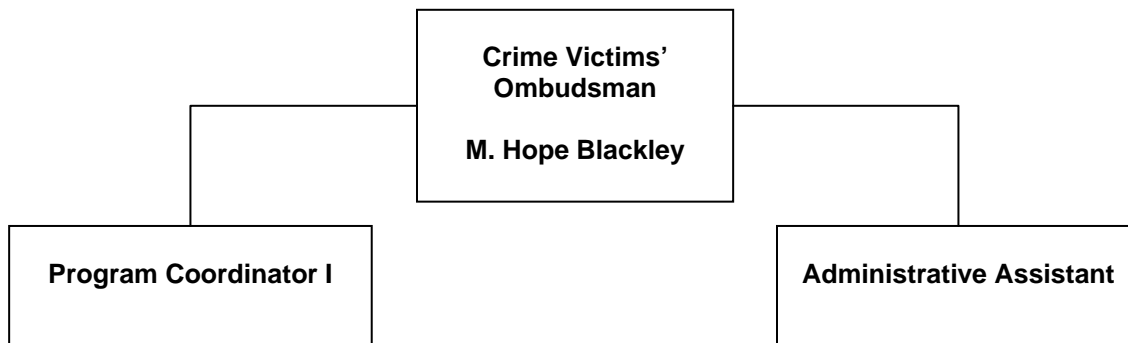
7. The regulatory environment under which your organization operates

The CVO is statutorily mandated by legislation passed in 1994 under SC Code of Laws, Section 16-3- 1610 through 16-3-1670.

8. Performance improvement systems

By reviewing statistical data kept each fiscal year in FileMaker Pro, to see what recurring violations exist and working to improve this data with the appropriate violators.

9. Organizational chart – Chart 1



Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 110,621	\$	\$ 93,687	\$	\$ 125,917	\$
Other Operating	\$18,172	\$	\$12,132	\$	\$18,700	\$
Special Items	\$	\$	\$ 24,226	\$24,226	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$32,088	\$	\$37,194	\$4,776	\$38,867	\$
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$160,881	\$	\$167,239	\$29,002	\$183,484	\$

Other Expenditures

Sources of Funds	FY 05-06 Actual Expenditures	FY 06-07 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

10. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims.	State		State	4,776	See Table III.2 & Chart 2 & 3
		Federal		Federal		
		Other	\$160,881	Other	\$138,237	
		Total	\$160,881	Total	\$143,012	
		% of budget:	0%	% of budget:	0%	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

- 1. How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; and f) ethical behavior?**
 - a-** Short & long term direction and organizational priorities include strengthening the services of the CVO by ensuring that there is recurring funding for the next fiscal year, that there are reprimands imposed for violators in the future, and overall awareness of the CVO is increased by conducting trainings, presentations, and attending more conferences and functions geared toward victims.
 - b-** Performance expectations are to service every crime victim that contacts the CVO to ensure that they have received the best referral, service, and resolution according to the law.
 - c-** Organizational values are to efficiently assist each crime victim in a relevant, timely, impartial and accessible manner.
 - f-** Ethical behavior is in accordance to the policy and procedures that are put forth by the Governor’s Office and law.
- 2. How do senior leaders establish and promote focus on customers and other stakeholders?**

By giving full, direct attention and returning calls within a 24 hour period to assist victims with their problems or questions in an efficient and timely manner.
- 3. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?**

By reviewing all negative/positive feedback and responding in a positive and neutral way to avoid conflicts/risks. Also, and most importantly, by submitting an annual report to the Governor, General Assembly, elements of the criminal and juvenile justice systems, and victim assistance programs summarizing activities for the year. This report is reviewed to ensure actions taken are in compliance with SC Code of Laws, Section 16-3-1610 through 16-3-1670.
- 4. How do senior leaders maintain fiscal, legal and regulatory accountability?**

By conducting and performing the duties and functions as outlined by the enabling legislation.
- 5. What key performance measures are regularly reviewed by senior leaders?**

Responses of correspondence and formal inquiries within the time frames set forth by CVO guidelines. Specifics measurements can be found in 4.3.
- 6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?**

By listening, reviewing and comparing past reviews, the agency head seeks to ensure improvements are understood and implemented, if possible. Employees’ personal actions reflect a commitment to the organizational values by showing that they are interested and that success is the main goal of the organization.
- 7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**

By encouraging new and different approaches and also providing open opportunities to assist (such as approval of appropriate training) and giving experiences, advice, and guidance in the field of victim advocacy.
- 8. How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?**

By having an open door policy and an open mind to different approaches, suggestions to solving issues, and making improvements.
- 9. How do senior leaders create an environment for organizational and workforce learning?**

By establishing a protocol, by which, workforce will follow, but also be open to suggestions, thought, and concerns from workforce of new protocols when needed, which will promote news procedures and processes in which to be learned from for ensured success.

10. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? Ho do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

By meeting regularly with workforce to listen, engage, and implement, when possible, the ideals and suggestions that they may have, when new procedures are implemented based on the actions of the workforce they are commended by oral and written praise.

11. How do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and organization contribute to improving these communities.

By conducting routine grant funded training in reference to compliance and by serving on numerous boards and councils such as the South Carolina Victim Assistance Network (SCVAN) Board, South Carolina Department of Probation, Parole and Pardon (SCDPPPS) Services Victims’ Advisory Council, Mother’s Against Drunk Driving (MADD) State Operations Council, Parents of Murdered Children (POMC) Community Advisory Board, State Victim Assistance Training Academy (SCVAA) Steering Committee, and Victim Services Coordinating Council (VSCC).

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

1. What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks, and customer preferences; c.) shifts in technology or regulatory, societal and other potential risks, and customer preferences; d) Workforce capabilities and needs; f) Organizational continuity in emergencies; g) your ability to execute the strategic plan.

The strategic planning process for the CVO includes recurring funding and awareness of the CVO.

- a- The CVO strengths include being the only legislatively mandated victim service provider to ensure the rights of crime victims are upheld according to the Victims’ Bill of Rights. The CVO’s main weakness is the inability to impose sanctions and/or penalties as well as inadequate funding to run the office.
- b- The potential risk of financial, regulatory, societal would include insufficient funding of the CVO.
- c- There are no major issues at this time with shifts in technology, regulatory, societal and other potential risks, and customer preferences;
- d- Workforce capabilities and needs are met by the HR director and staff.
- f- The CVO’s organizational continuity in emergencies would be followed through by the CVO’s Pandemic Procedure Plan that’s been set forth.
- g- The CVO’s ability to execute the strategic plan would be by gaining permission from supervisory staff to seek funding on a recurring cycle and accepting invitations for presentations and training by outside entities.

Table III.2 Strategic Planning Chart for Office of the Crime Victims’ Ombudsman

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To efficiently resolve complaints made by crime victims	By receiving and responding to all crime victims’ complaints in a timely and efficient manner with the best overall resolution.	Refer & provide liaison services.	See chart 2 & see Table 7.1:1 & 2

To ensure ethical performance and accountability	By acting as a neutral third party that ensures all crimes victims are served justly, equitably and fairly by SC criminal justice system organizations.	Review & attempt to resolve complaints by crime victims.	See charts 2 & 3
--	---	--	------------------

2. **How do your strategic objectives address the strategic challenges you identified in your Executive Summary?**
By being that neutral third party agency that ensures that all crime victims are treated justly, equitably, and fairly by all criminal and juvenile justice agencies.
3. **How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?**
By referring to our case management software that statistically keeps how the CVO resolves crime victims' complaints.
4. **How do you communicate and deploy your strategic objectives, action plans, and related performance measures?**
By performing the duties outlined in the enabling legislation to ensure that all objectives, action plans, and performance measures have been met.
5. **How do you measure progress on your action plans?**
By the number of complaints received each fiscal year and focusing on the major complaint during training and presentations.
6. **How do you evaluate and improve your strategic planning process?**
By reviewing and implementing new procedures/plans as necessary according to changes in the field of crime victims' issues, such as changing of laws and requests by victims and their providers.
7. **If the agency's strategic plan is available to the public through the agency's internet homepage, please provide an website address for that plan.**
The agency's plan is not currently available via internet.

Section III – Elements of Malcolm Baldrige Category 3: Customer Focus

1. **How do you determine who your customers are and what their requirements are?**
By enabling legislation that requires us to serve crime victims.

Customer/Stakeholder	Requirements
Crime Victims	Must be a South Carolina crime victim who needs assistance with criminal justice system.

2. **How do you keep your listening and learning methods current with changing customer/business needs and expectations?**
By listening to the feedback of the constituency the CVO comes in contact with and then evaluating what needs to be improved upon.
3. **What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?**
The telephone is our key customer access mechanisms, as well as, letters mailed to the CVO, they enable the customer to speak directly with CVO staff and in most cases get a remedy to their complaint in a more timely and efficient manner.
4. **How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?**

By listening to both satisfied and dissatisfied customers' opinions and thoughts and documenting them for reviewing purposes. Those legitimate concerns are then incorporated into trainings and presentations, as a learning tool for those who assist victims within the criminal justice system.

5. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups?

By constantly contacting victims on a regular basis even when no new information has been received, being available to assist with their particular concern(s), listening to victims when they feel they are not being treated fairly and having victims express concerns. The CVO then relays those concerns to criminal justice system entities during trainings and presentations.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

By reviewing financial documents, data, and the budget weekly to ensure accuracy. These are some of the most important aspects that make the CVO the agency it is today. It also ensures that the CVO is in compliance within accordance to the law.

2. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?

By reviewing new data/information on a monthly basis, then determining where the CVO is as far as strengths and weaknesses. After this, the actions of the CVO are to improve on the weaknesses that have been identified.

3. What are your key measures, how do you review them, how do you keep them current with your needs and direction?

Key measures are reviewed on a monthly basis and compared with current needs and/or positive reviews from customers. This helps keep the CVO current on the needs of crime victims.

***Key Measures**

-Percent of correspondence responded to within a 48 hour time period -goal is 95%

-Percent of all formal inquiries conducted within a 4 month period -goal is 90%

-Number of trainings per employee per fiscal year -goal is 2

(Results of this can be found in Category 7 Section III Tables 7.1:1 & 1:2)

4. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

Selective comparative data and information by the overall involvement of crime victims is used as a whole. Once selected, it is used to compare and decide in what direction the CVO needs to go and how we can better serve customers.

5. How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

By maintaining the office case management system, FileMaker Pro.

6. How do you translate organizational performance review findings into priorities for continuous improvement?

By acting on these findings in an objective way, with the focus being on improving performance in new ways with current data and legislation.

7. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

By reviewing case management statistics, cases, and the process of how to handle difficult complaints through monthly meetings and being readily available to answer any and all questions.

Section III – Elements of Malcolm Baldrige

Category 5 Work Force Focus

- 1. How does management organize and measure work to enable your workforce to: 1) develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?**

By listening to employee suggestions and opinions, assigning calls and cases, and reviewing cases with staff on a monthly basis to ensure that all are in accordance with carrying out the duties of the CVO.
- 2. How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?**

By keeping constant contact with HR for updates and advice on human resource issues. Such as being updated on new and current positions by viewing the vacancy listing and inquiring when I may have or know of an interested party, based on the requirements listed mentioned.
- 3. How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.**

By listing openings on the state job vacancy website, the recruit then must fill out application, be interviewed and then hired, based on their future goals and aspirations with the agency, if qualified. Barriers would include unqualified applicants, which, in turn, longer interviewing processes, to fill a vacancy.
- 4. How do you access your workforce capability and capacity needs, including skills, competencies, and staffing levels?**

By sharing the education of an employee’s training with other staff members, which is then implemented into daily use when necessary for improvement of the CVO.
- 5.2 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?**

By having monthly staff meetings and daily discussions on cases, concerns, and job performance. This ensures high performance and achievement levels of the CVO office and its staff.
- 5.3 How do you motivate your employees to develop and utilize their full potential?**

By being attentive to each employee’s ideas /suggestions and implementing them whenever possible. Outside favorable training, if an employee shows an interest, is encouraged as well.
- 5.4 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?**

By having a one-on-one meeting with employees, which gives every employee a chance to verbalize their thoughts and feelings to the director directly. By documenting these meetings and keeping this information in each employee’s file. All retention and grievances are done in the same manner, within a private setting, and documented.
- 5.5 How do you maintain a safe, secure and healthy work environment?**

By keeping employees updated about all safety, security, and health issues as communicated by human resources, protective services or the OEPP administrator.

Section III – Elements of Malcolm Baldrige

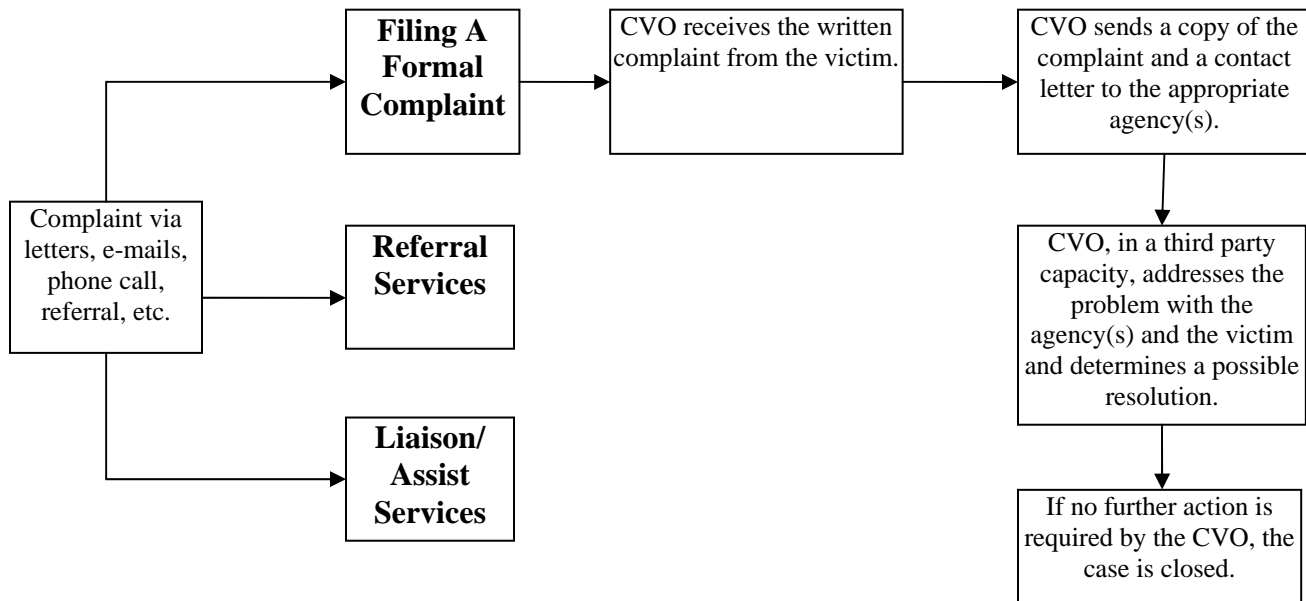
Category 6: Process Management

6.1 How do you determine and what are your key processes that produce, create or add value for your customers and your organization? How do you ensure that they are used?

Key processes are determined by legislation. These processes are receiving a customer's complaints and getting a resolution in a timely fashion to that customer's complaints.

Chart 2- How to Handle Complaints in the CVO-General Overview.

How Complaints are Handled in the CVO - General Overview



6.2 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

By researching new processes of technology and the cost to update and incorporate them into the CVO's process, if cost effective.

6.3 How does your day-to-day operation of these processes ensure meeting key performance requirements?

By receiving calls from victims, answering questions about victim rights' violations and assisting in resolving their issues.

6.4 How do you systematically evaluate and improve your key product and service related processes?

By listening to customers' comments about the CVO's performance as well as comments received from outside entities and then evaluating what processes need to be changed and implementing them.

6.5 What are your key support processes, and how do you improve and update these processes to achieve better performance?

The key processes are the same as mentioned in 6.1, Category 6. Updates and improvements are made by listening to our customers' comments and/or issues with the CVO's process and making the necessary changes.

6.6 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

By reviewing what worked, what resources were needed before and see where all stands with them. Also, researching any new and upcoming resources that fit into the current budget outside of current obligations.

Section III – Elements of Malcolm Baldrige Category 7: Results

7.1 What are your performance levels and trends for the key measures of mission accomplishment and organizational effectiveness?

Performance measures:

Table 7.1:1

Percent of calls/correspondence responded to within 48 hour time period:

FY 03-04	FY 04-05	FY 05-06	FY 06-07	FY 07-08
93%	97%	96%	97%	98%

Table 7.1:2

Percent of all formal inquiries conducted within a 4 month period:

FY 03-04	FY04-05	FY 05-06	FY 06-07	FY 07-08
91%	92%	90%	95%	93%

7.2 What are your performance levels and trends for the important measures of customer satisfaction?

At this particular time, there are no formal measures for gathering information of customer satisfaction other than listening to customers’ feedback after an inquiry of their complaint. The CVO’s plan is to implement a customer satisfaction survey, which will be on-line, along with an on-line complaint form.

7.3 What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?

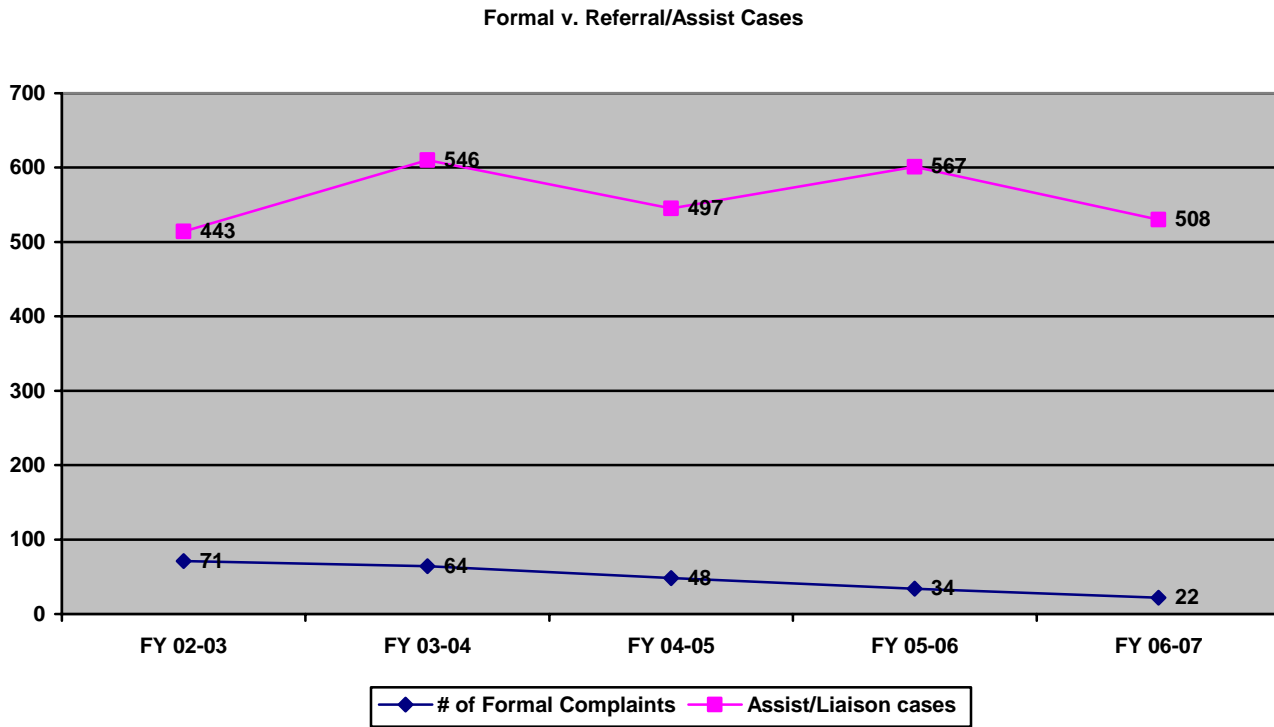
To not go over the CVO’s approved budget. This is done by cutting cost as much as possible and investigating cost effective ways to reduce the budget instead of increasing it.

7.4 What are your performance levels and trends for key measures of Human Resources Results (i.e. work system performance, employee learning and development, well-being, employee satisfaction, diversity, and retention?)

One-on-one meetings to hear and discuss how to improve the CVO.

7.5 What are your performance levels and trends for regulatory/legal compliance and community support?

Chart 3 -Formal v. Referral/Assist Cases- below



**OEPP – Developmental
Disabilities Council**

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Developmental Disabilities Council

Section I - Executive Summary

- 1. Mission Statement:** The mission of the South Carolina Developmental Disabilities Council is to administer the basic State Grant Program and to assure that the awards made through this program address the needs of persons with disabilities.

Vision: The South Carolina Developmental Disabilities Council encourages change by advocating and planning for better supports and services so that people with developmental disabilities will live in homes, work at jobs of their own choosing, learn skills, and form friendships.

- 2. Major Achievements for FY 2007-2008**

- A.** Each year the Developmental Disabilities Council publishes a summer recreation guide. For the second year, the council partnered with SC Parks, Recreation, and Tourism to include activities at the state's parks that are geared for people with disabilities. These activities included camps, sporting activities and other summer programs for people of all ages who have developmental disabilities. The guide was also distributed at all of the state's Welcome Centers. Nearly 6,500 of the guides were distributed across the state. In addition, the publication was recognized by the SC State Library as being one of the 10 most notable state government documents. The council received the award on March 17.

- B.** Through a grant with People On the Go, a self advocacy organization, members of the group have attended conferences to learn about their rights and have been able to develop advocacy skills to empower them to become leaders. Five officers of the organization, have received training from the Disability Resource Center and have attended self advocacy conferences. Nearly 60 members have received training from guest speakers at meetings by attending self advocacy conferences and leadership training forums. Sixty members received lists of available conferences and received and discussed information at meetings. Nearly 60 People On the Go members were informed about self advocacy training initiatives. People On the Go hosted the Leadership Training Forum which was held on April 18 by the Disability Resource Center. In June, members of the group were trained about How to Become An Effective Advocate. Seven members attended The Arc of North Carolina Convention; 21 members attended the Pathways Conference; 25 members attended the NC Self Advocacy Conference. Sixty self advocates are sent flyers by mail about monthly membership meetings, with information on guest speakers and topics, conferences, and other activities.
- C.** Through a grant with the Tri-Development Center of Aiken County, Inc., a variety of recreational opportunities were available for children and adults with developmental disabilities, according to reports provided by the subgrantee. In addition, the program led to the promotion, development and support of inclusive recreational opportunities. Also, through a demonstration project, the agency worked closely with the city recreation staff, made public officials aware of the capabilities of individuals with disabilities to participate more fully in the life of their community so that they will be more likely to find such programs in the future. Through this grant, brochures about the program were distributed; six large recreational activities were completed; 11 basic skills classes or exploration activities were offered; the project coordinator attended nine self-advocated and five parent meeting during this grant year; there were 34 contacts made to solicit volunteers; and the program had 10 to 12 volunteers who volunteer on a regular basis.

- D.** Through council funding, the Irmo-Chapin Recreation Commission offered the program People for Active Living (PALS). Through PALS, four programs for special needs adults in a recreation setting were provided. Two of the programs, jazz aerobics and Steps to Your Health, were set up to teach young adults about exercise and healthy choices. Wild Weekend Adventures was introduced to the participants to the outdoor opportunities in the area and finally Carolina Actors with Special Talents (CAST) provides a theatrical experience with stage performances. Jazz Aerobics was run six times per year with an average of eight participants per series equaling 48 participants during the year. CAST, one of the more popular programs, which as been funded through council efforts, had 15 participants in the fall and 16 in the spring. There was an average of 8 participants each weekend, totaling 32 participants during the year.
- E.** The council partnered with the University Center of Excellence for People with Disabilities and with the Protection and Advocacy for People with Disabilities, to develop a brochure called Spot Abuse and Report It. The brochure is designed to educate individuals on use and who to report it to. The council has distributed 11,579 brochures to more than 51 agencies, organizations, and individuals.
- F.** Through a grant with the Greenwood Genetics Center, a total of 30 billboards, 20 English and 10 Hispanic, throughout South Carolina have been sponsored by the South Carolina Neural Tube Defect public awareness campaign and were placed beginning Oct. 1, 2007. 66,744 pieces of folic acid materials were distributed through various programs and exhibits. A 2007 vitamin survey of women of childbearing age in South Carolina was completed. The total interviewed randomly was 1,010 with the results of 65 percent knowing about the prevention of birth defects through the use of folic acid. The campaign audience covers women ages 14 to 45 statewide. Folic acid outreach representatives contacted nurses in 250 physicians' offices to discuss the importance of telling patients about folic acid intake and supplied them with educational materials, give-aways, and other information as reminders to take folic acid daily. Vitamins were distributed to physicians to give to patients and lectures were held when requested. January 2008 was declared Birth Defects Awareness Month by Governor Mark Sanford. According to information distributed by the Greenwood Genetic Center the rate of Neural Tube Defects per 1000 live births for 2007-2008 is at 0.6. This is down from one in 2006-2007 and 0.8 in 2005-2006.

3. Key Strategic Goals

A. Employment

1. Increase the number of people with developmental disabilities who are employed competitively by 10 percent.
2. Increase by 10 percent the number of individuals with disabilities who are able to have transportation.

B. Formal/Informal Community Supports

1. Support people with developmental disabilities, their families and caregivers to have information to make informed choices.
2. Increase the number of individuals with disabilities who are able to make their own choices.

C. Quality Assurance

1. Increase by 5 percent, the number of individuals and family members of people with developmental disabilities to be in roles of leadership.
2. Increase the understanding of influence individuals with Developmental Disabilities can have on boards.

D. Health

1. Continue to reduce the incidence of Neural Tube Defects (NTDs) in South Carolina at a rate below the national average of .9 per 1000 live births/fetal deaths.
2. Reduce the incidence of traumatic and other acquired brain injury and spinal cord injury in children and youth in South Carolina.

4. Key Strategic Challenges

- A. People with disabilities who want to work often find difficulties in finding jobs of their own choice.
- B. People with developmental disabilities and their family members often do not know their rights or how to make informed choices.
- C. People with developmental disabilities often find it difficult to have the knowledge to improve their wellness and/or to prevent the occurrence of secondary debilitating conditions.
- D. The Developmental Disabilities Council has recently implemented a new 5-Year State Plan. As a result, the DDC's priority areas have changed, as well as the way sub-grantees are chosen. The council now has four priority areas that include Health, Quality Assurance, Community Supports, and Employment. Council members have been assigned to committees based on each area of emphasis.

5. How the accountability report is used to improve organizational performance

The accountability report is part of the Developmental Disabilities Council’s system to review processes and to take an arms length look at how the council director and staff interact with one another and also to take a look at how the director and staff interact with council members and customers.

Section II - Organization Profile

- 1. Main products and/or services and the primary methods by which these are delivered**
- 2. Key customers segments and their key requirements/expectations**
- 3. Key stakeholders**
- 4. Key suppliers and partners**

Table II.1 Developmental Disabilities Council Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
DD Council	Provides funding to sub-grantees to fund grant projects in the areas of health, quality assurance, community supports and employment.	sub grantees	Partners In Policymaking
		People with Developmental Disabilities	The South Carolina Autism Society
		Family members of individuals with Developmental Disabilities	University Centers for Excellence

5. Operation Location: The DDC is located at 1205 Pendleton Street, Columbia, SC, 29201

6. The number of employees (segmented by employee category)

5 Classified 1 Unclassified _____ Contract
 _____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

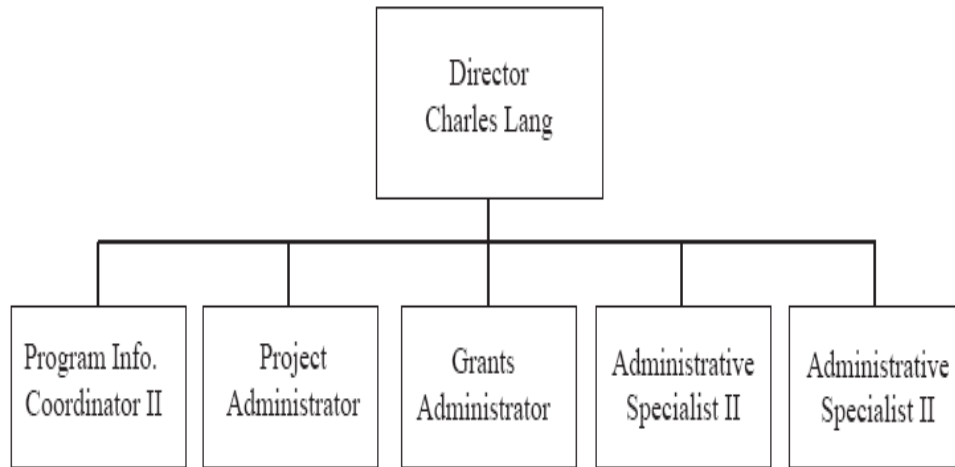
The Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law.

8. Performance improvement systems

Council sub-grantees are required to submit quarterly progress reports. This is in addition to onsite visits. Each sub-grantee is required to develop a customer satisfaction report. These reports are reviewed by staff to see if the program being offered is meaningful to participants.

9. Organizational chart

Office of Developmental Disabilities Council



10. Expenditures/Appropriations Chart

**Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations**

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$210,570	\$41,488	\$ 208,299	\$ 40,653	\$ 295,888	\$ 36,386
Other Operating	\$70,298	\$10,880	\$59,399	\$11,811	\$91,416	\$14,416
Special Items	\$0	\$0	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$0	\$0	\$	\$	\$	\$
Distributions to Subdivisions	\$573,200	\$54,176	\$791,320	\$54,176	\$ 1,701,517	\$ 51,517
Fringe Benefits	\$57,123	\$12,576	\$58,367	\$12,685	\$85,318	\$9,097
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$911,192	\$119,120	\$1,117,385	\$119,325	\$ 2,174,139	\$ 111,416

Other Expenditures

Sources of Funds	FY 05-06 Actual Expenditures	FY 06-07 Actual Expenditures
Supplemental Bills	\$ 0	\$ 0
Capital Reserve Funds	\$ 0	\$ 0
Bonds	\$ 0	\$ 0

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
DD Council	To administer and monitor federal grants funding to sub-grantees, providing services for persons with DD.	State	119,120	State	119,325	
		Federal	792,072	Federal	998,060	
		Other	0	Other	0	
		Total	911,192	Total	1,117,385	
		% of budget:	1%	% of budget:	2%	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

1. **How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?**

The senior leader of the Developmental Disabilities Council responds to concerns about the delivery service system. Sub-grantee calls or e-mails are answered promptly and technical assistance is provided in a courteous way. These expectations are also communicated to staff on a regular basis.

2. **How do senior leaders establish and promote focus on customers and other stakeholders?**

An emphasis is placed on prompt response to questions from the general public.

3. **How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?**

The Developmental Disabilities Council held public hearings to receive feedback when writing our current Five Year State Plan. In addition, the Developmental Disabilities Council has a comment section on our Web site where all of our brochures, newsletters, and other printed materials are posted. A newsletter is also published three times per year.

- 4. How do senior leaders maintain fiscal, legal and regulatory accountability?**
The senior leader of the Developmental Disabilities Council maintains fiscal, legal, and regulatory account-ability through a careful review of all requests for reimbursement from sub-grantees and through site visits.
- 5. What key performance measures are regularly reviewed by senior leaders?**
The Developmental Disabilities Council has four priority areas which include health, employment, community supports, and quality assurance. Senior leaders measure key indicators yearly while compiling data for the annual performance report which is submitted to the federal government.
- 6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness , the effectiveness of management throughout the organization, including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?**
The senior leader of the Developmental Disabilities Council interacts with the Administration on Developmental Disabilities.
- 7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**
The Developmental Disabilities Council’s senior leader is involved in training through the National Association on Developmental Disabilities. Members of the association have regular discussions on managerial issues and share information with staff members to discuss how to improve management techniques as needed
- 8. How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?**
To create an environment for performance improvement, accomplishment of strategies, objectives, and innovations, council staff and senior leaders have group discussions and brain storming is encouraged. In addition, during the review process, the director works with staff to identify training needs to provide additional training.
- 9. How do senior leaders create an environment for organizational and workforce learning?**
During the EPMS process, senior leaders discuss with staff members any training needs which may be needed. As a result, senior leaders work with staff to meet these training needs.

- 10. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?**

Monthly staff meetings are held to discuss staff projects. Group discussions are encouraged.

- 11. How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.**

Senior leaders serve on various committees which include: Special Needs Task Force at Emergency Management Division; System Transformation Grant Advisory Committee, Lt. Governor's Office on Aging; Medicaid Infrastructure Work Group, Health and Human Services; Brain Injury Leadership Council; Folic Acid Leadership Group; Governor's Budget for Results Team/Improve the Health and Protection of our Children and Adults.

Areas of emphasis are established based on priorities set by the Developmental Disabilities Council and also listed in the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law.

Section III – Elements of Malcolm Baldrige Category 2: Strategic Planning

- 1. What is your strategic planning process, including key participants, and how does it address: a) your organization's strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology or regulatory environment; d) human resource capabilities and needs; e) opportunities and barriers f) business continuity in emergencies; g) your ability to execute the strategic plan.**

The council holds public hearings to receive feedback. Staff has on-going interaction with sub grantees, advocacy organizations, families, and consumers.

- 2. How do your strategic objectives address the strategic challenges you identified in your executive summary?**

The federal government requires the council to write a State Plan every five years. Through this process, the council receives public input, as well as input from the council in determining goals and objectives. Through staff monitoring of the grants, the council determines whether or not the subgrantee is meeting the goals and objectives of the council and also based on the contract with the subgrantee.

Strategic Planning Chart for Developmental Disabilities Council

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
People with disabilities who want to work, work in places of their own choosing.	1. Increase the number of people who are employed competitively by 10 percent. 2. Increase the number of individuals who are able to have transportation by 10 percent.	Hold conference	Outlined in state plan
Individuals and their families know and understand their rights to make informed choices.	1. Increase the opportunities for social capital, financially supporting advocacy organizations to develop a stronger network. 2. Support the number of individuals who are able to make their own choices.	Fund training for self advocates	Outlined in state plan
Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.	1. Monitor activities of the South Carolina Neural Tube Defect Prevention Awareness Campaign, including surveys of actual use of folic acid by women of childbearing age in South Carolina. 2. Reduce the incidence of traumatic and other acquired brain injury and spinal cord injury in children and youth in South Carolina.	Review national/state information and data	Outlined in state plan

3. How do you develop and track action plans that address your key strategic objectives and how do you allocate resources to ensure the accomplishment of your action plans?

The council develops and tracks action plans that address key strategic objectives through regular monitoring of sub-grantees and by making sure grants are consistent with the goals and objectives in our state plan.

4. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

The council's state plan is available on our Web site at www.sccdc.state.sc.us and we include this information in our other printed materials.

5. How do you measure progress on your action plans?

The council measures progress through quarterly reports from our sub-grantees.

- 6. How do you evaluate and improve your strategic planning process?**
 This process is developed by staff and presented to the council’s executive committee for review. After approval, recommendations are presented to the full council to receive comments. After public hearing and an extensive public comment period, council is divided into committees based on the four priority areas which include Health, Quality Assurance, Community Supports, and Employment, the council members begin developing our 5-year State Plan by writing goals and outcomes. The process takes about a year and a half. For our most recent plan that was completed last year, the council used an outside facilitator. When the draft plan was completed, it was made available for public comment. The final version of the plan was submitted to the Administration on Developmental Disabilities and was approved as submitted. The council is now implementing this plan.
- 7. If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide a Web site address for that plan.**
www.scdcd.state.sc.us

**Section III – Elements of Malcolm Baldrige
 Category 3: Customer Focus**

- 1. How do you determine who your customers are and what their requirements are?**

Customer/Stakeholder	Requirements
People with disabilities who want to work, work in places of their own choosing.	Funding through DDC grants to provide services
Individuals and their	Funding through DDC grants to provide services
Subgrantees	Funding through DDC grants to provide services

- 2. How do you keep your listening and learning methods current with changing customer/business needs and expectations?**
 The Developmental Disabilities Council has regular interaction with sub-grantees and consumer members.
- 3. What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?**
 Council staff conducts onsite visits with subgrantees and are also available by phone and e-mail. We also encourage customers to contact us with questions or concerns. Most of our information is available on our Web site at www.scdcd.state.sc.us.

- 4. How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?**
The Developmental Disabilities Council requires customer satisfaction surveys from sub-grantees each year. Feedback from the surveys will be used when considering grants to be funding for the following grant cycle.
- 5. How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?**
The Developmental Disabilities Council reviews the State Plan and it is amended annually. Staff uses customer feedback, and also comments from public input. The council's Five Year State Plan is amended yearly, as stated in the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law, to maintain relevancy and to be outcome focused.
- 6. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups?**
The Developmental Disabilities Council has regular interaction with sub-grantees.

**Section III – Elements of Malcolm Baldrige
Category 4 Measurement, Analysis and Knowledge Management**

- 1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?**
This is required by the Developmental Disabilities Assistant Bill of Rights Act (P.L. 106-402), which is Federal law.
- 2. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout the year?**
The Developmental Disabilities Council reviews the State Plan and it is amended annually. Staff uses customer feedback, and also comments from public input. The council's Five Year State Plan is amended yearly, as stated in the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law, to maintain relevancy and to be outcome focused.
- 3. What are your key measures, how do you review them, how do you keep them current with your needs and direction?**
The following key measures come from our current 5-year State Plan. Each year, these measures are reviewed by staff and council, to determine any changes that need to be made. This is the first year that data has been gathered for the current state plan. Data will be tracked and compared in future years to determine areas of improvement and areas that need more improvement.

- A. **Employment**
 - 1. Increase the number of people with developmental disabilities who are employed competitively by 10 percent.
 - 2. Increase by 10 percent the number of individuals with developmental disabilities who are able to have transportation.
 - B. **Formal/Informal Community Supports**
 - 1. Support people with developmental disabilities, their families and caregivers to have information to make informed choices.
 - 2. Increase the number of individuals with developmental disabilities who are able to make their own choices.
 - C. **Quality Assurance**
 - 1. Increase by 5 percent, the number of individuals with developmental disabilities and their family members to be in roles of leadership.
 - 2. Increase the understanding of influence individuals with developmental disabilities can have on boards.
 - D. **Health**
 - 1. Continue to reduce the incidence of Neural Tube Defects (NTDs) in South Carolina at a rate below the national average of .9 per 1000 live births/fetal deaths.
 - 2. Reduce the incidence of traumatic and other acquired brain injury and spinal cord injury in children and youth in South Carolina.
4. **How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?**
 Council staff collects data for the yearly Program Performance Report. The information gathered for this report is then used in the planning process to ensure the operation and strategic decisions made to meet the needs of customers. The council has required that a customer satisfaction piece be a component of the grant review process. Each subgrantee is required to develop a customer satisfaction survey based on the goals and objectives of the grant. Council staff reviews the results of each survey for each grant. Overall, the customer satisfaction surveys have shown positive results. This has led to the innovative process that the council uses to develop funding proposals and also to develop the review process.
5. **How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?**
 This is determined from stakeholders. Multiple source data is reviewed by council.
6. **How do you translate organizational performance review findings into priorities for continuous improvement?**
 This is done through feedback from stakeholders.

- 7. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?**

Staff communicates with one another during monthly staff meetings.

Section III – Elements of Malcolm Baldrige

Category 5 Workforce Focus

- 1. How does management organize and measure work to enable your workforce to: 1.) develop to their full potential, aligned with the organizations' objectives, strategies, and action plans; and 2.) promote cooperation, initiative, empowerment, teamwork, innovation, and your organizational culture?**

Council staff meets at least monthly, but more often when necessary to discuss work plans and also to discuss how to work more cooperatively to achieve better results. Council staff members identify areas of training to benefit them at better job performance.

- 2. How do you achieve effective communication and knowledge/skill/ best practice sharing across departments, jobs, and locations?**

During monthly meetings staff conducts a review of current projects. Staff looks ahead at the approaching months and due dates and of upcoming projects ahead. Council staff also reviews opportunities to interact with other key state agencies and consumer organizations.

- 3. How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter?**

During the interview process, the council's senior leaders work to identify areas of emphasis in the job area of the applicant. Also, the applicants strengths and weaknesses are identified. The job position and requirements are explained to the applicant, and well as a description of the applicant's daily activities. The applicant that best matches the position qualifications is hired. Once the new employee is in place, council staff works with the employee to make sure he or she has the tools he or she needs to be successful. No barriers have been encountered.

- 4. How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?**

Senior staff interacts daily with each employee to ensure they understand job assignments. Senior staff checks to make sure assignments are being done correctly. Senior staff also works with the council's executive committee to determine staffing levels.

- 5. How does your employee performance management system, including feedback to and from individual members of the workforce, support high performance and contribute to the achievement of your action plans?**

Employees are considered stakeholders in the day to day operation of the office

6. How does your development and learning system for leaders address the following?

A. development of personal leadership attributes

Senior staff interacts daily with each employee to ensure they understand job assignments. Senior staff checks to make sure assignments are being done correctly. Senior staff also works with the council's executive committee to determine staffing levels.

B. development of organizational knowledge

Staff communicates with one another during monthly staff meetings.

C. ethical practices

This is required by the Developmental Disabilities Assistant Bill of Rights Act (P.L. 106-402), which is Federal law.

D. your core competencies, strategic challenges, and accomplishment of action plans

Senior staff interacts daily with each employee to ensure they understand job assignments. Senior staff checks to make sure assignments are being done correctly. Senior staff also works with the council's executive committee to determine staffing levels.

7. How do you identify and address key developmental training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employees orientation, and safety training?

Senior staff interacts daily with each employee to ensure they understand job assignments. Senior staff checks to make sure assignments are being done correctly. Council staff meets at least monthly, but more often when necessary to discuss work plans and also to discuss how to work more cooperatively to achieve better results. Council staff members identify areas of training to benefit them at better job performance.

8. How do you encourage on the job use of new knowledge and skills?

During the evaluation process, staff is asked to identify skill sets to benefit job performance and training needs are identified.

9. How does employee training contribute to the achievement of your action plans?

Staff training allows employees to work more efficiently.

10. How do you evaluate then effectiveness of your workforce and leader training and develop systems?

Through the evaluation process, each staff member is evaluated based on job performance. At this time, any training needed is identified.

- 11. How do you motivate your employees to develop and utilize their full potential?**
Employees are encouraged to become involved in council projects that interest them.
- 12. What formal and informal assessment methods and measures do you use to determine workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information.**
This is done through on-going discussions.
- 13. How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?**
Senior management has identified a deputy director and has ensured this individual has had training of the role of executive director. This individual interacts regularly with council members, subgrantees, members of the national organization, and also council staff in other states.
- 14. How do you maintain a safe, secure and healthy work environment?**
This is done through communication during monthly staff meetings.

**Section III – Elements of Malcolm Baldrige
Category 6: Process Management**

- 1. How do you determine and what are your organization’s core competencies, and how do they relate to your mission, competitive environment, and action plans?**

Staff has on-going interaction with sub-grantees. This includes regular monitoring visits on site and also the requirement of sub-grantees to complete quarterly reports.
- 2. How do you determine and what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies?**
Council staff has regular interaction with customers to determine the clarity of reporting forms. Staff also requests suggestions from the customers on making forms more customer friendly and when possible, staff implements those suggestions.
- 3. How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?**
Staff is encouraged to take part in training.

- 4. How does your day-to-day operation of these processes ensure meeting key performance requirements?**
The Developmental Disabilities Council monitors our sub-grantees on a routine basis. This includes site visits, quarterly reports that the sub-grantees are required to submit, and also a yearly customer service satisfaction survey.
- 5. How do you systematically evaluate and improve your key product and service related processes?**
This is done through on-going discussions. The council has required that a customer satisfaction piece be a component of the grant review process. Each subgrantee is required to develop a customer satisfaction survey based on the goals and objectives of the grant. Council staff reviews the results of each survey for each grant. Overall, the customer satisfaction surveys have shown positive results.
- 6. What are your key support processes, and how do you improve and update these processes to achieve better performance?**
They are evaluated and amended through the state plan process.
- 7. How does your organization determine the resources needed to meet current and projected budget and financial obligations?**
Staff members of the Developmental Disabilities Council review budgets from past years to determine long-term trends in spending. We use those trends to project spending based on staffing and the training needs of the staff. Budgets for council grants are determined by the council by reviewing grant application and funding determination.

**Section III – Elements of Malcolm Baldrige
Category 7: Results**

- 1. What are your performance levels and trends for the key measures of mission accomplishment/product and service performance that are important to your customers? How do your results compare to those of comparable organizations?**
Most of what council accomplishes is done through the grant process. Council members make sure the new grants will meet the council needs based on the 5-Year State Plan. Priority is given to those grants that meet the goals and objectives identified in the state plan. There are no comparable organizations in this state. However, each state has a Developmental Disabilities Council and each council is a member of the National Association of Council on Developmental Disabilities. As a result, staff and senior leaders from various council interact on a regular basis.

2. What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?

The council has required that a customer satisfaction piece be a component of the grant review process. Each subgrantee is required to develop a customer satisfaction survey based on the goals and objectives of the grant. Council staff reviews the results of each survey for each grant. Overall, the customer satisfaction surveys have shown positive results. This year with 1,437 individuals surveyed, reports indicate 99.20 percent say that he or she was treated with respect during the project or activity. 96.60 percent said he or she have more choices and control as a result of the project. 96.60 percent said he or she can do more things in his or her community as a result of the project. 77.60 percent strongly agree and 18.40 percent agree that they are satisfied with the project activity. 68.80 percent strongly agree and 31.20 percent agree that his or her life is better as a result of the project. 91.40 percent said because of the project he or she better knows his or her rights. 92.80 said he or she is more able to be safe or protect themselves from harm as a result of the project.

Customer Satisfaction Survey Topic	Percentage of Customers Satisfied
Individuals treated with respect during project	99.20 percent
Individual had more choices and control as a result of project	96.60 percent
Individual can do more in the community as a result of the project	96.60 percent
Individual is satisfied with project activity	96 percent
Individual says life is better as a result of the project	100 percent
Individual better knows his or her rights as a result of the project	91.40 percent
Individuals say they feel like they can protect themselves from harm as a result of the project	92.80 percent

- 3. What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?**
We review quarterly reports from sub-grantees and measure against requirements for reimbursement. Fiscal matters are reviewed when application is submitted. Reimbursements are sent in quarterly along with a fiscal report which is reviewed on a quarterly basis. Also, staff monitors on a yearly basis to review grant projects for expenditures. Back-up documentation is required to support reimbursement.
- 4. What are your performance levels and trends for your key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?**
Discussions are held with employees during the EPMS process.
- 5. What are your performance levels and trends for your key measures of organizational effectiveness. Operational efficiency, and work system performance (these could include measures related to the following: product, service, and work system innovation rates and improvement results; improvements to cycle time; supplier and partner performance; and results related to emergency drills or exercises?)**
This is done through our sub-grantee process. Staff makes regular on-site visits. Performance levels are reviewed when application is submitted. Progress reports are sent in quarterly which are reviewed on a quarterly basis. Also, staff monitors grant site on a yearly basis to review grant projects for compliance.
- 6. What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?**
Council staff ensures grants are implemented according to the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law. Community support is determined through the review of support letters for grant applications through the subgrantees.

OEPP – Office of Economic Opportunity

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Economic Opportunity

Section I - Executive Summary

There are approximately 547,869 persons in the Palmetto State living at or below the poverty level (2000 US Census, Table STF 3 Profile). Working in partnership with the South Carolina community, the Office of Economic Opportunity* (OEO) administers and distributes funds for local initiatives in all 46 counties that are designed to appreciably impact the causes of poverty. The programs accomplish anti-poverty goals and permit maximum flexibility in meeting locally identified needs. Programs sustain the entire range of life necessities, including health care, education, employment, and housing assistance. Currently, the OEO administers five federally funded programs and one other-funded program; total annual funding is approximately \$32 million. Each program operates on a different program year and applicants must be income eligible. Household income guidelines are based upon the federally issued Poverty Income Guidelines that are updated and published annually. Monthly household incomes cannot exceed 125% for Community Services and 150% for Energy Services, based upon the number of persons who reside in each household.

Mission Statement The OEO is dedicated to helping end poverty through community revitalization, self-sufficiency programs, and leveraged resources.

Vision To make South Carolina a benchmark state in the field of community action.

Major Achievements for FY 2007-2008

- The OEO received a federal review from the US Department of Housing and Urban Development for the Emergency Shelter Grants Program with no findings or questioned costs.
- The US Department of Health and Human Services monitored OEO administration of the Low-Income Home Energy Assistance Program. There were no findings or areas of concern noted.
- The OEO worked with the SC Association of Community Action Partnerships to secure a centralized client intake system for case management and outcome reporting for community action agencies throughout the Palmetto State.
- In FY 2007-2008, the OEO received a Workforce Investment Act grant for Soft Skills Trainings by CAPs from the SC Department of Commerce.

Key Strategic Goals for Present and Future Years

1. To make South Carolina a benchmark state in the field of community action.
2. To ensure all agency performance activities are completed according to set deadlines.
3. To implement in cooperation with subgrantees a centralized intake system for a more holistic assessment of both client needs and agency performance.

Key Strategic Challenges

The state will need the support of other subgrantee programs to integrate data collection, to include Head Start and Workforce Investment Act programs, among others.

- Working with subgrantees to encourage and implement best practices among South Carolina's community action network.

- Ensuring subgrantee compliance with state and federal regulations while promoting a culture of cooperation through advocacy, training, and technical assistance.

How the accountability report is used to improve organizational performance?

The data collected and analyzed in this report provides the basis for goals for the upcoming year to ensure continuous process improvement. Goals are then reviewed quarterly by team leaders to ensure adequate progress.

Section II - Organization Profile

The OEO serves as the state pass through entity for federal grant funds aimed at increasing the self-sufficiency of low-income persons. As the pass through entity, the OEO is responsible for the following: preparation of the state plans, monitoring of grant expenditures and activities by subgrantees, and training and technical assistance. The OEO administers four major grants:

- ❖ Community Services Block Grant (CSBG) –US Department of Health and Human Services; funds case management programs (employment, education, etc.) and emergency services such as rent, mortgage, and food assistance
- ❖ Low-Income Home Energy Assistance Program (LIHEAP) - US Department of Health and Human Services; assistance with utility bills for low-income persons
- ❖ Weatherization Assistance Program (WAP) –US Department of Energy; weatherizing dwellings of low-income persons to increase energy efficiency
- ❖ Emergency Shelter Grants Program (ESGP) –US Department of Housing and Urban Development; funds for client assistance and operating expenses for homeless shelters.

CSBG, LIHEAP, and WAP services are delivered via a network of 15 community action agencies (CAAs) serving all 46 counties in the state. LIHEAP is supplemented through Project Share, a fund consisting of donations from SCE&G, Progress Energy, Duke Energy, and Piedmont Natural Gas. In FY 2007-2008, the OEO received a Workforce Investment Act grant for Soft Skills Trainings by CAPs from the SC Department of Commerce. This was a one-time initiative for which outcomes will be reported in the 2009 fiscal year.

Table II.1.1 –Office of Economic Opportunity Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/ Stakeholders	Key Partners
Community Services, Workforce Development	community action agencies, homeless shelters, vulnerable, low-income residents, federal funding sources, local workforce development boards, Governor, and General Assembly	US Department of Health and Human Services, South Carolina Association of Community Action Partnerships, SC Department of Social Services, SC Office of Regulatory Staff, SC Department of Commerce, utility providers
Emergency Services/ Housing	community action agencies, homeless shelters, vulnerable, low-income residents, federal funding sources, Governor, and General Assembly	US Department of Housing and Urban Development, SC Department of Commerce; Area Continua of Care
Emergency Services/ Energy Assistance/ Weatherization	community action agencies, homeless shelters, vulnerable, low-income residents, federal funding sources, Governor, and General Assembly	US Department of Energy, US Department of Health and Human Services , SCE&G, Progress Energy, Duke Energy, and Piedmont Natural Gas, Area Councils on Aging, local electric companies
Compliance monitoring	community action agencies, homeless shelters, federal funding sources, Governor, and General Assembly	South Carolina Association of Community Action Partnerships, SC Head Start Collaboration Office

5. Operation locations

- OEO Location - Edgar Brown Building, 1205 Pendleton Street
- Subgrantees are located in all 46 counties of the state

6. The number of employees (segmented by employee category)

19 Classified 1 Unclassified _____ Contract
_____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

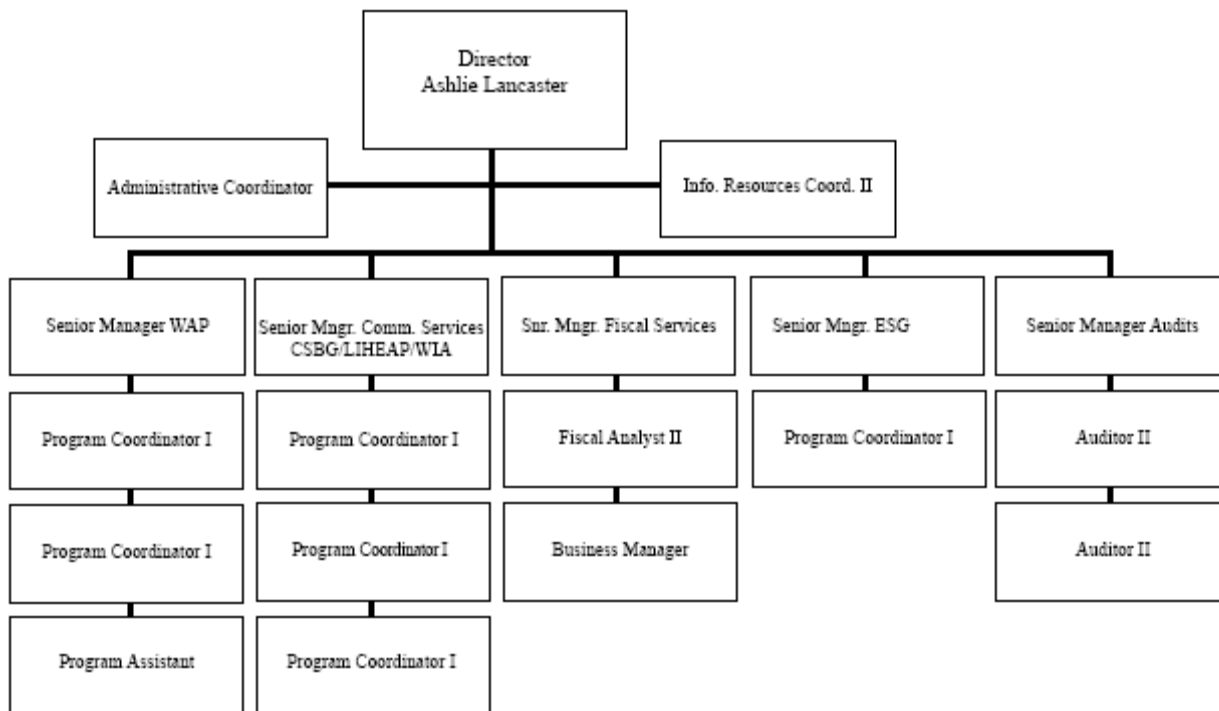
Grants administered by the OEO adhere to their corresponding rules and requirements found in the Code of Federal Regulations, as well as to binding memoranda, statements, and opinions issued from the federal funding sources. As block grant funds, OEO administered programs also follow an annual State Plan dictating specific program requirements and goals. The OEO is subject to federal monitoring. The OEO in turn monitors the grant activity of subgrantees.

8. Performance improvement systems

OEO performance is measured internally through deadlines for the submission of State Plans, budgets, and federal reports. Internal performance by individual staff members is monitored and gauged using the state EPMS. OEO performance with regard to monitoring, training and technical assistance is also reflected in the performance of subgrantees and the outcomes achieved by clients served. For example, monitoring reports provide performance data for areas of compliance and non-compliance. Recommendations for areas of concern are shared with subgrantee staff and reports are used to ensure corrective plans of action are followed. Monitoring reports also highlight best practices and identify training needs. In addition, data is collected on outcomes achieved by clients served, including the number of clients whose emergency situations are alleviated, the number of clients obtaining a higher education, and the number of clients gaining employment.

9. Organizational chart

Economic Opportunity



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	761,243	\$	687,494	\$	800,809	\$
Other Operating	479,519	\$	225,555	\$	353,500	\$
Special Items	0	\$		\$		\$
Permanent Improvements		\$		\$		\$
Case Services	0	\$		\$		\$
Distributions to Subdivisions	26,568,111	\$	34,018,192	\$	31,464,412	\$
Fringe Benefits	214,582	\$	206,133	\$	244,481	\$
Non-recurring		\$		\$		\$
Total	28,023,454	\$	35,137,374	\$	32,863,202	\$

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Office of Economic Opportunity*	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
* expenditures reported are based on the state fiscal year whereas OEO revenue sources are appropriated on the federal fiscal year	Grants Administration – state pass through entity for federal funds aimed at promoting self-sufficiency among low-income populations (CSBG, LIHEAP, WAP, WIA and ESGP)	State	0	State		See tables in section 7 – the numbers in section 7 reflect all funding including carry forward and supplemental appropriations as opposed to expenditures only and correspond to the federal fiscal year.
		Federal	27,559,779	Federal	34,843,717	
		Other	463,675	Other	293,657	
		Total	28,023,454	Total	35,137,374	
		% of budget:	46%	% of budget:	51%	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership

1.1 How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior?

Short and long term direction is set through regular staff meetings. Performance expectations are set in Planning Stages for employees; State Plans, grant agreements, and technical assistance memoranda for subgrantees. Organizational values are facilitated through an open door discussion policy that encourages empowerment and innovation. Ethical behavior is encouraged through internal controls routing work output through each division manager.

1.2 How do senior leaders establish and promote focus on customers and other stakeholders?

OEO staff members receive regular customer-oriented trainings, to include workshops on changing federal regulations to assist subgrantees with compliance, train-the-trainer, and through the exploration of other states' best practices.

1.3 How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

Data, including demographics, goals, and outcomes achieved, is maintained on the number of low-income persons served through community action agencies and the number of homeless persons served through OEO funded emergency shelters.

1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?

Fiscal compliance is maintained through the OEPP Finance office which oversees all draw downs/disbursements issued by the OEO. Legal and regulatory accountability are maintained through a complex filing system holding all required programmatic reports, work plans, budgets, monitoring, and audit documentation. Subgrantees are required to submit monthly Financial Status Reports on the use and expenditure of funds. Disbursements are processed based a percentage expended formula to ensure compliance with the federal Cash Management Act.

1.5 What key performance measures are regularly reviewed by senior leaders?

- Timely and accurate expenditure and disbursement of funds according to the Federal Cash Management Act
- # of low-income people achieving self-sufficiency on a variety of scales
- # of low-income people whose emergency situations are alleviated
- # of homeless persons and people at risk for homeless whose immediate and long-term needs are addressed

1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization including the head of the organization and the governance/board/policy making entity? How do their personal actions reflect a commitment to the organizational values?

Employees are encouraged to establish a minimum of one objective for each evaluation period determined by them as to how they can best improve work procedures. In addition, all managers are included in the decision-making process, and the staff is asked for feedback at regular staff meetings. Suggestions from staff are considered by upper management and implemented as appropriate. Employees are asked to model appropriate professional behavior to promote best practices among subgrantees.

1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

The OEO encourages the use of earmarked federal training dollars to increase employee knowledge and help them develop into future organizational leaders. Staff attending trainings must train staff not attending upon completion of that training. In addition, the OEO attempts to promote from within as much as possible to encourage retention and continued growth of organizational knowledge.

1.8 How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?

The OEO work environment allows for the accomplishment of objectives and innovations by providing staff with direct control over their own work processes with an approval system for work output that ensures internal controls through a routing system that impacts each division.

1.9 How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

Employees are rewarded through recognition during staff meetings.

1.10 How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders determine areas of emphasis for organization involvement or support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

OEO is an active member of the National Association of State Community Services Programs and the National Community Action Partnership. The OEO Director also often speaks and/or brings greetings at local community action agency events. In addition, the OEO staff serves on the following:

- Cross-Cultural Action Council
- Council on Aging
- State Citizen Corps Council
- Interagency Council on Hazard Mitigation
- Interagency Council on Homelessness
- State Emergency Response Team
- National Energy Assistance Director’s Association
- Government Finance Officers Association
- State Energy Advisory Council
- Human Trafficking Task Force
- Victim Services Coordinating Council
- PPP Victim Services Advisory Council

In addition, the OEO donates all old technology equipment to community action agencies and emergency shelters to support operating activities. Involvement is based on support for anti-poverty initiatives.

**Section III – Elements of Malcolm Baldrige
Category 2: Strategic Planning**

2.1 What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory, societal or other potential risks, and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.

Manager’s meet on a regular basis to establish short and long term goals and then work with support staff to implement procedures necessary to achieve those goals. Office strengths, weaknesses, and needs are assessed through the EPMS process, regular manager’s meetings, and feedback from subgrantees.

Chart III.2.2 Strategic Planning Chart for the Office of Economic Opportunity

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 07-08 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To make South Carolina a benchmark state in the field of community action.	<u>Current:</u> Begin the process of ROMA Training for CAA personnel <u>New:</u> Ensure a certified ROMA trainer on staff at each of the state’s 15 CAAs.	Sponsored certification of two agency personnel (Association leaders) and two ROMA trainings – one for CAAs and one for OEO state personnel.	7.1
To ensure all OEO performance activities are completed according to set deadlines	<u>Current:</u> Sponsor two CAA network personnel in becoming certified ROMA trainers.	Sponsored certification of two agency personnel	7.1
To develop in cooperation with subgrantees a centralized intake system for a more holistic	<u>New:</u> Implement system purchased by State Association for central intake and data collection.	Five pilot agencies have begun implementation with full implementation complete by January 1,	

assessment of both client needs and agency performance.		2009.	
---	--	-------	--

2.2 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Strategic objectives are designed to overcome challenges identified through inclusion of all interested policies in the development of the action plans designed to achieve these objectives. For example, funding challenges that could negatively impact achievement of benchmark status through the Pathways Initiative would be resolved through group analysis of how available resources should be prioritized.

2.3 How do you develop and track action plans that address your key strategic objectives and how do you allocate resources to ensure accomplishment of your action plans?

Action plans to achieve strategic objectives are developed in conversation with the SC community action network to ensure input from all involved parties. Tracking plan development and achievement is accomplished through an in-house filing and tickler system that allows managers to stay on task and achieve office objectives.

2.4 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

Objectives/action plans/performance measures are communicated through staff meetings, EPMS, written correspondence to subgrantees, and meetings with subgrantee leadership through the SC Association of Community Action Partnerships.

2.5 How do you measure progress on your action plans?

Progress is measured internally via the achievement of employee goals through EPMS as they are directly related to office goals. Community action agency subgrantee progress is measured through monthly financial status and program status reports, quarterly ROMA reports, and an annual Information Systems Report.

2.6 How do you evaluate and improve your strategic planning process?

The strategic planning process is evaluated through staff development brainstorming with staff suggestions incorporated in the creation of future goals.

2.7 If the agency's strategic plan is available to the public through the agency's internet homepage, please provide an address for that plan on the website.

The public can access current State Plans governing all OEO funded programs via our website at www.oopp.sc.gov/o eo.

**Section III – Elements of Malcolm Baldrige
Category 3: Customer Focus**

3.1 How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Federal funding sources	Requirements are determined through enabling legislation in the Code of Federal regulations and through Information Memoranda issued by the funding source. Standard requirements include submission of State Plans for review and accurate reporting of OEO and subgrantee expenditures and program activities.
Subgrantees/ 15 community action agencies/ 30-40 Homeless Shelters	Requirements are determined through federally approved State Plans and codified in annual work plans, budgets, and grant agreements. Compliance as well as training and technical assistance needs are determined through fiscal and programmatic monitoring.
Governor/ General Assembly	Requirements are determined through issued agency policies regarding personnel, travel, etc.
Low-income residents	Requirements are determined through local needs assessments, federal census data, and correspondence from individual clients.
Local electric companies	Requirements include timely vendor payments and accountability for supplemental funds.

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?

Changes in federal funding source expectations are communicated in writing from the funding source and/or via national associations. Subgrantee needs and expectations are assessed through face-to-face meetings, polls, and public hearings on draft state plans. Client needs and expectations are delineated and updated through the annual local needs assessment process.

3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Services are accessed via a network of 15 local community action agencies. Clients denied service can request a hearing. Complaints are tracked at the state office to determine areas of concern.

3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?

Dissatisfaction is assessed based on complaints/requests for hearings received.

3.5 How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Information garnered through polls and public hearings is incorporated in final drafts of state plans and is used to offer appropriate training and technical assistance. Feedback from monitoring visits is used to draft training modules for two annual statewide training events annually.

3.6 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?

Positive relationships with customers and stakeholders are encouraged through an inclusive decision-making process in designing and implementing state plans for the various programs funded.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

OEO revenue and expenditure schedules are prepared monthly for review by the Director. Subgrantees submit monthly Financial Status reports to monitor local grant expenditures. Quarterly and annual data collection is governed through the Results Oriented Management and Accountability (ROMA) national indicators set by the federal government. Agencies report outcomes on predetermined national indicators to show progress in achieving performance target outcomes associated with those indicators. Performance target outcomes are determined at the subgrantee level based on their needs assessment and approved by the OEO.

4.2 How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?

Census data is used to determine agency allocations and client program eligibility. In addition, national indicator data is used to assess the effectiveness of local programs designed in response to community needs assessments.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?

OEO key measures reviewed and rate of review

Timely and expenditure and disbursement of funds according to the Federal Cash Management Act	monthly
# of low-income people achieving self-sufficiency on a variety of scales	quarterly and annually
# of low-income people whose emergency situations are alleviated	quarterly and annually
# of homeless persons and people at risk for homeless whose immediate and long-term needs are addressed	quarterly and annually

4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

Comparative data is obtained through national associations for OEO administered grants that post via the web best practices from across the country.

4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

The SC ROMA software system utilized by all SC community action agencies ensures the accuracy, security, and availability of data. Data input takes place at the subgrantee level but the server and statewide data are maintained at the OEO. The South Carolina Association of Community Action Partnerships also has access to state level data as an internal control/data integrity check mechanism. Data on homeless shelters is collected through the HUD mandated HMIS and reported through the HUD mandated IDIS software systems.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?

Subgrantees develop corrective action plans in response to weaknesses and/or findings indicated via the monitoring process. The OEO encompasses these needs when identifying overall network training needs.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

Staff are cross-trained within divisions to ensure retention of organizational and employee knowledge. Manuals and/or administrative guides have been developed outlining the general procedures and requirements of each grant. Staff is encouraged to contact and participate in trainings with other agencies and states to share best practices.

**Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus**

5.1 How does management organize and manage work to enable your workforce to: develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

The staff is divided into grant specific divisions, in addition to the fiscal and audit divisions. Staff work products are routed through that grant manager, as well as through audit, fiscal, and the director to ensure fiscal and programmatic cooperation in the administration of federal funds. The staff is encouraged to participate in training designed to increase knowledge of their assigned duties.

5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?

Skills and best practices among community action agencies are shared via annual training events.

5.3 How does management recruit, hire, place, and retain new employees?

New employees are recruited and hired via the state human resource system.

5.4 How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?

Capability and capacity needs are assessed through the EPMS process and monitoring reviews for subgrantees.

5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

Internal training needs are identified and addressed through the EPMS process. Subgrantee training needs are assessed through the monitoring process and subsequent improvements in subgrantee processes and performance are used to assess the effectiveness of training. Employees are required to justify training requests in terms of how they contribute to the attainment of goals for the organization.

5.6 How does your development and learning system for leaders address development of personal leadership attributes, organizational knowledge, ethical practices, and core competencies, strategic challenges and achievement of your action plans?

Managers are expected to set an example for high performance and are held accountable through the EPMS process for achievement of action plans.

5.7 How do you identify and address key developmental training needs for your workforce?

Training needs are identified through manager assessment of employee performance and skills.

5.8 How do you encourage on the job use of new knowledge and skills?

Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.

5.9 How does employee training contribute to the achievement of your action plans?

Training is geared toward skills needed by employees to achieve action plans.

5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?

The effectiveness of training is based on survey evaluations and subsequent job performance and knowledge.

5.11 How do you motivate your workforce to develop and utilize their full potential?

Workforce potential is developed by encouraging and rewarding hard work and innovation.

5.12 What formal and informal assessment methods and measures do you use to determine workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. The OEO also encourages staff to attend trainings to improve their skills and enhance office procedures.

5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout your organization?

Cross training of employees and internal promotion are encouraged.

5.14 How do you maintain a safe, secure and healthy work environment?

A safe, secure, and healthy workplace is maintained through compliance with state and federal regulations on workplace requirements.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

6.1 How do you determine and what are your organizations core competencies, and how do they relate to your mission, competitive environment and action plans?

Core competencies include ability to understand and follow grant guidances, federal regulations, and OMB Circulars.

6.2 How do you determine and what are your key processes that produce, create or add value for your customers and your organization? How do you ensure that they are used?

- OEO internal management (internal transaction activity reports, quarterly management reports on achievement of internal and external goals, monthly and close-out reconciliations for all open grants, interim and final reporting)
- OEO external management (application budgets, monitoring, financial and program status reports)
- Governor's Office of Finance internal management (budgets, draw-downs, coding)
- State level accounting management (SC Comptroller General's Office)
- Federal level management (US Departments of Energy, Health and Human Services, Housing and Urban Development)

6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

Employees are cross-trained to ensure retention of organizational knowledge through staff changes. New technology is assessed and incorporated via a statewide technology committee with OEO and subgrantee membership. Changing grant requirements are conveyed from the federal funding source to the state; the state then conveys to subgrantees via technical assistance memoranda. State procurement guidelines are followed by the OEO and subgrantee procurement guidelines are modeled after the state guidelines to ensure costs are competitive.

6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?

These processes are designed to monitor regulatory compliance with grant parameters. Budget and financial status reports are reviewed to ensure allowable expenditures. Program status reports assess agency progress in reaching program goals. Performance problems can therefore be identified early and training can be provided to overcome obstacles.

6.5 How do you systematically evaluate and improve your key product and service related processes?

Processes are evaluated through the monitoring assessment tools for each grant. In addition, in FY06-07, the OEO underwent a process review utilizing an external audit firm that specializes in federal grants management. Recommendations provided from this review were incorporated into OEO procedures.

6.6 What are your key support processes, and how do you improve and update these processes to achieve better performance?

Key processes include the development of state plans, evaluation of subgrantee application budgets and work plans, monitoring, and training and technical assistance. These activities are evaluated annually in the development of new state plans by examining obstacles from the previous year and best practices of other states.

6.7 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

This is determined through close management of resources and monthly financial status reports from subgrantees. Federal award expenditures are reconciled to the state accounting system on a monthly basis to ensure accurate tracking of budgets.

**Section III – Elements of Malcolm Baldrige
Category 7: Results**

7.1 What are your performance levels and trends for the key measures of mission accomplishment/product and service performance that are important to your customers?

The primary mission of the OEO is to aid subgrantees in administering programs that help move individuals out of poverty and into self-sufficiency. The OEO monitors subgrantees for grant compliance and provides training and technical assistance. All agencies were monitored at least once during the 2007 Program Year. There were no major findings or areas of non-compliance. The OEO also sponsored Results Oriented Management and Accountability (ROMA) and case management training for subgrantees. Over 30 individuals participated in ROMA training. Two individuals were certified through the National ROMA Peer to Peer Certification Program.

Subgrantees reported outcomes relating to mission accomplishment as follows:

Table 7.1.1

<u>Goal: Low-income People Become More Self-Sufficient.</u>	# Participants Expected to Achieve PY2006	# Participants Expected to Achieve PY2007	# Achieving Outcome PY2006	# Achieving Outcome PY2007	% Achieving Outcome PY2006	% Achieving Outcome PY2007
Unemployed and obtained a job	2083	1874	1791	1406	86%	75%
Obtained pre-employment skills/competencies and received training program certificate or diploma	1727	1221	1400	942	81%	77%
Obtained safe and affordable housing in support of family stability needed to gain or retain employment	1472	1291	1369	1118	93%	87%

<u>Goal: The conditions in which low-income people live are improved through increased affordable essential services.</u>	# of Opportunities or Community Resources Created or Preserved PY2006	# of Opportunities or Community Resources Created or Preserved PY2007
Accessible, safe, and affordable child care or child care placement opportunities for low-income families created or saved from reduction or elimination	2153	3056

<u>Goal: Emergency Needs of Households in Crisis are Ameliorated.</u>	# Seeking Assistance PY2006	# Seeking Assistance PY2007	# Receiving Assistance PY2006	# Receiving Assistance PY2007	% Receiving Assistance PY2006	% Receiving Assistance PY2007
Emergency Vendor Payments, including fuel and energy bills and rent/mortgage payments	79,407	129,525	65,751	117,196	83%	90%

In addition, working with the South Carolina Association of Community Action Partnerships, the OEO successfully sponsored certification of two ROMA trainers in the CAA network.

All outstanding desk audits have been completed and the OEO Audit Division is up to date.

Subgrantees exceeded the PY 2006 goal of 516 homes by 47%, with a total of 964 homes weatherized. The following table details the number of homes weatherized by county:

Table 7.1.2a

WAP PY 2006 Dwellings Completed

County	Quota	# Wx'd
Aiken/Barnwell		
Aiken	19	33
Allendale	3	6
Bamberg	4	10
Barnwell	5	17
Calhoun	2	4
Greenville	39	79
Hampton	4	10
Lexington	19	64
Richland	40	102
SUB TOTAL	135	325

Berkeley-Dorchester		
Berkeley	15	16
Dorchester	8	8
Colleton	7	7
SUB TOTAL	30	31

Carolina		
Chester	5	5
Fairfield	4	4
Lancaster	7	7
Union	4	4
York	15	15
SUB TOTAL	35	35

Charleston CHS		
Beaufort	11	11
Charleston	46	56
Jasper	4	4
SUB TOTAL	61	71

CMEOC		
Chesterfield	8	18
Darlington	13	23
Dillon	7	7
Marlboro	5	10
SUB TOTAL	33	58

County	Quota	# Wx'd
GLEAMNS		
Abbeville	8	13
Anderson	9	10
Edgefield	3	8
Greenwood	3	8
Laurens	1	4
McCormick	6	8
Newberry	3	8
Oconee	18	52
Pickens	7	14
Saluda	13	29
SUB TOTAL	71	154

Piedmont		
Cherokee	7	10
Spartanburg	28	40
SUB TOTAL	35	50

Waccamaw		
Georgetown	9	9
Horry	22	23
Williamsburg	9	8
SUB TOTAL	40	40

Wateree		
Clarendon	7	15
Florence	19	47
Kershaw	6	19
Lee	4	12
Marion	8	20
Orangeburg	17	47
Sumter	15	40
SUB TOTAL	76	200

GRAND TOTALS	516	964
---------------------	------------	------------

99% of the PY 2007 goal of 404 homes was met, with a total of 402 homes weatherized. The reduction in the number of homes weatherized from PY 2006 to PY 2007 resulted from the implementation of Hot Climate Whole House Weatherization techniques which are more labor and cost intensive, requiring more time spent per dwelling for greater energy savings. The following table details the number of homes weatherized by county:

Table 7.1.2b

WAP PY 2007 Dwellings Completed

County	Quota	# Wx'd
Aiken/Barnwell		
Aiken	15	21
Allendale	3	3
Bamberg	3	4
Barnwell	4	4
Calhoun	2	2
Greenville	30	26
Hampton	3	4
Lexington	15	14
Richland	31	34
SUB TOTAL	106	112

Berkeley-Dorchester		
Berkeley	12	12
Dorchester	6	8
Colleton	7	7
SUB TOTAL	25	27

Carolina		
Chester	4	4
Fairfield	3	3
Lancaster	6	6
Union	3	3
York	12	12
SUB TOTAL	28	28

Charleston CHS		
Beaufort	9	2
Charleston	36	23
Jasper	3	1
SUB TOTAL	48	26

CMEOC		
Chesterfield	6	6
Darlington	10	10
Dillon	5	5
Marlboro	4	4
SUB TOTAL	25	25

County	Quota	# Wx'd
GLEAMNS		
Abbeville	3	3
Anderson	14	14
Edgefield	2	2
Greenwood	7	7
Laurens	7	7
McCormick	1	2
Newberry	4	4
Oconee	5	5
Pickens	10	11
Saluda	2	2
SUB TOTAL	55	57

Piedmont		
Cherokee	5	2
Spartanburg	22	24
SUB TOTAL	27	26

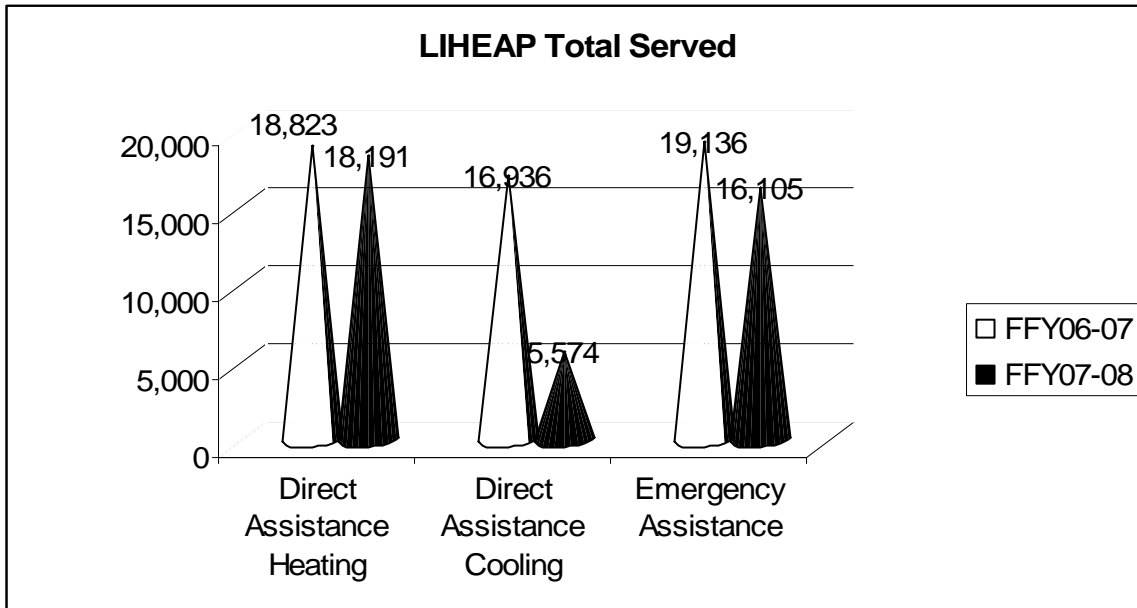
Waccamaw		
Georgetown	7	7
Horry	17	17
Williamsburg	7	7
SUB TOTAL	31	31

Wateree		
Clarendon	5	6
Florence	15	14
Kershaw	5	6
Lee	3	4
Marion	6	5
Orangeburg	14	17
Sumter	11	18
SUB TOTAL	59	70

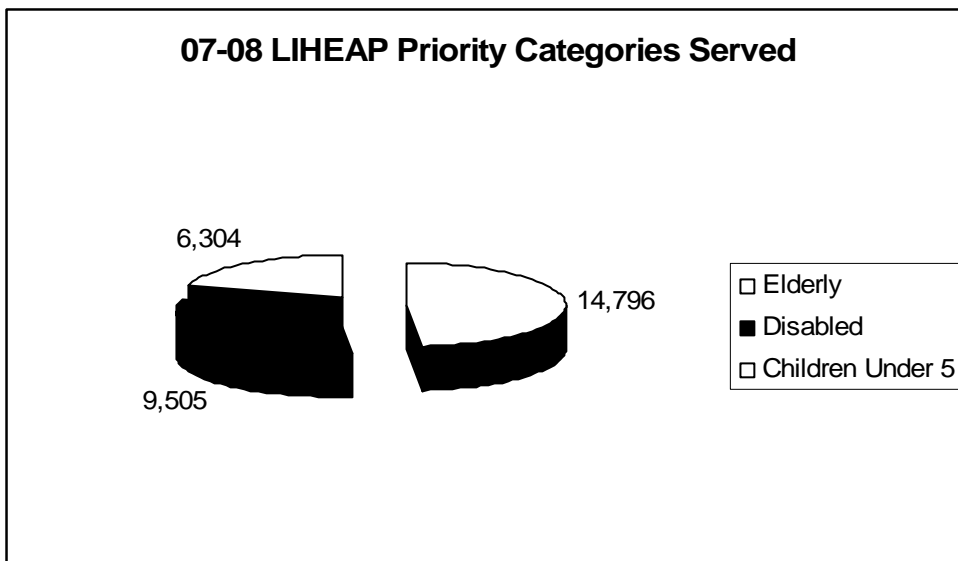
GRAND TOTALS	404	402
---------------------	------------	------------

The Low-Income Home Energy Assistance Program (LIHEAP) provides both direct assistance and emergency crisis intervention for those in danger of utility termination. Pursuant to the LIHEAP State Plan, subgrantees must show

priority in service to the elderly, disabled, and households with a high energy burden, high energy usage, or children under the age of five.



The number served for Direct Assistance Cooling is higher in 06-07 due to the release of contingency funds not available in 07-08. Of the 39,870 total served through LIHEAP in 07-08, 14,796 households had an elderly member, 9,505 had a disabled member, and 6,304 had at least one child under the age of 5.



During FY 06-07, Emergency Shelter Grants (ESG) Program funds were used to provide operating expenses for 37 emergency shelters and support services for approximately 68,532 homeless individuals, thereby alleviating their emergency situations and helping to move them toward self-sufficiency. During FY 07-08, ESG funded 35 emergency shelters and provided support services for 48,300 homeless or at risk individuals.

7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction?

There were no appeals or requests for hearings from denied clients during the 2007 program year. In addition, client interviews conducted during subgrantee monitoring indicated clients were generally pleased with the service received. HUD sponsored training was provided for ESG subgrantees with positive attendance and review.

7.3 What are your performance levels for key measures of financial performance?

The OEO again obtained funds from Piedmont Natural Gas, SCE&G, Progress Energy, and Duke Power to supplement the Low-Income Home Energy Assistance Program.

The OEO received \$500,000 in Workforce Investment Act funds by the SC Workforce Development Board for competitive grants for soft skills employment training in the 2008-2009 fiscal year.

The OEO was selected by the US Department of Energy to host the 2008 Southeast Weatherization Training Conference to be held December 1-4, 2008 in Myrtle Beach.

Below is information regarding revenue and expenditures for OEO programs. Funding information provided follows the federal fiscal year.

Chart 7.3.1

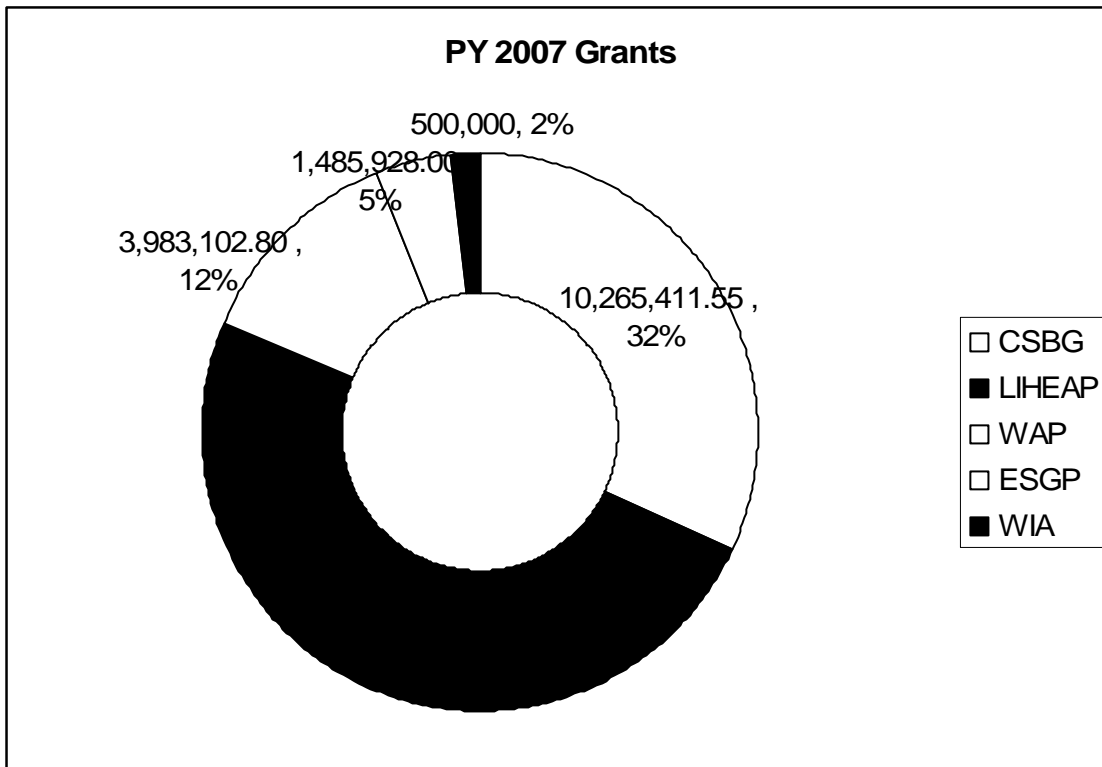


Chart 7.3.2

PY 2007 OEO Admin \$

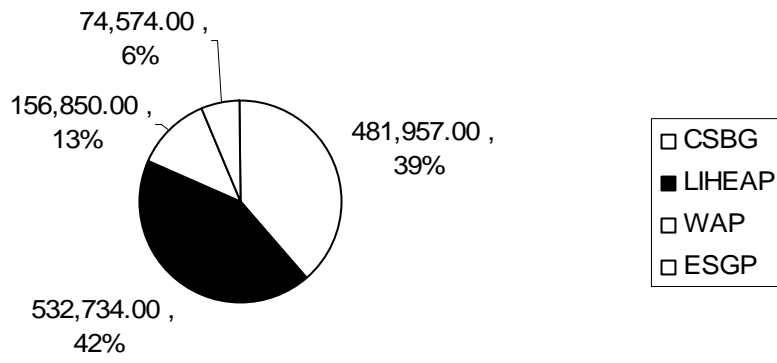


Chart 7.3.3

Funds for the ESGP were spent according to the following categories:

ESGP Budget Categories									
	<u>Shelter</u>	<u>Essential</u>				<u>Preventive</u>	<u>Operational</u>		
	Rehab	Services	Counseling	Education	Other	Homeless	Other	Staff Cost	
Budget	8000.00	45411.82	69182.24	8678.00	133204.22	70696.14	979786.68	96394.90	
Expended	8000.00	41320.19	66911.24	5853.00	116732.57	52900.43	916048.90	96394.90	

7.4 What are your performance levels and trends for key measures of workforce engagement, satisfaction, and development, including leaders, workforce retention, workforce climate?

OEO Program Coordinators attended federally sponsored training in their respective grant areas. Employee retention remains high. In addition, all employees successfully completed their EPMS Planning Stage requirements during the 07-08 year.

7.5 What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency?

All disbursements and reports to federal awarding agencies were submitted accurately and on-time.

7.6 What are your performance levels and trends for regulatory/legal compliance and community support?

All federal and state reporting requirements were met according to the designated timelines. Each program was monitored at least once during the program year. The LIHEAP and WAP programs were selected for review during the OEPP single audit with no findings.

**OEPP – Foster Care
Review Board**

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Children's Foster Care Review Board

Section I - Executive Summary

1. Stated Purpose, Mission, Vision, and Values

A. Mission Statement

The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system. The Division utilizes panels of community volunteers to promote safe, permanent homes for children in foster care in a timely manner and to increase public awareness regarding the impact of child abuse and neglect.

B. Vision

The Vision of the Children's Foster Care Review Board is for all children in South Carolina to have permanent, safe, loving homes.

C. Values

- (1) All children deserve permanent, loving, safe homes.
- (2) All staff and board members must have a commitment to service.
- (3) Internal and external accountability is necessary to fulfill the mission of the Review Board.
- (4) The Review Board must have respect of diversity and equal opportunity for placement of children.
- (5) Ethical and legal behavior is required for all staff and Board members.
- (6) Board members must have a strong dedication to the process of community-based citizen review.

2. Major Achievements for FY 2007-2008

- A. Local foster care review board volunteers donated 16,532 hours in service to children and families involved with the foster care system.
- B. Local foster care review boards held 464 individual local review meetings and conducted 8,981 reviews for 5,347 children.
- C. Local foster care review boards established relationships and communicated with their local partners. Thirty-two local review boards participated in 85 quarterly county-based partners' meetings with representatives from the Department of Social Services, the Foster Parent Association, and the Guardian ad Litem programs to discuss county specific issues and needs.
- D. Local foster care review boards kept their elected officials informed of the status of children in foster care in their counties. Sixteen local review boards facilitated the presentation of the 2006 – 2007 South Carolina Children's Foster Care Review Board Annual Report to their county legislative delegations. Twenty-eight local review boards implemented procedures to communicate regularly with

their county legislative delegations about the status of children in foster care in their county.

- E. Thirty-two local foster care review boards demonstrated their commitment to supporting children and the system that serves them by completing service projects this year. These service projects provided many “extras” to the foster care system, and to individual children in foster care who might otherwise not receive the routine things many children take for granted.
- F. One hundred and two children in foster care and reviewed by local review boards in 2007, were represented by Review Board legal staff at 122 court hearings across South Carolina. Review Board program staff also provided in-depth, post-review, supplemental advocacy on behalf of 1,381 children.
- G. During 2007, over 1,200 bi-annual evaluative surveys were distributed to parties participating in local review board meetings and other system stakeholders who interact with the Review Board. Response from surveys indicated that the Review Board is on track with overall expected performance outcomes and identified specific areas in which the program should work to improve.
- H. The South Carolina Heart Gallery, a collective effort by the Children’s Foster Care Review Board and the South Carolina Department of Social Services, is a traveling photo exhibit designed to raise awareness of the need for adoptive homes for legally free children. In 2007, the SC Heart Gallery photographed 124 children and held seven exhibits.

3. Key Strategic Goals for Present and Future Years

- A. Increase public knowledge and understanding about the role and responsibilities of the South Carolina Children’s Review Board through the State Board of Directors and local foster care review boards.
- B. Collaborate with state and national partners to improve the many systems that affect children in foster care.

4. Key Strategic Challenges

- A. Recruiting and maintaining qualified, professional staff and securing the appointments of qualified and dedicated citizen volunteers in order to meet statutory mandates. The continuing increase in the population of children in foster care creates added staffing burdens and increased workloads for appointed volunteers.
- B. Acquiring additional State funding in order to maximize the Review Board’s ability to draw down federal dollars through the Title IV-E contract. These funds would be used to pay for additional legal staff and the costs associated with the operation of four additional local review boards.
- C. Additional State FTEs are required to expand the current legal staff. Additional legal staff would allow the Review Board to more adequately address the increased legal needs of the agency and local review boards that have occurred due to the growing number of children entering the foster care system and reviewed by local review boards.

5. **Improvements Achieved Through the Accountability Report**

Sustained State funding provided State match dollars necessary to continue the Review Board's contract match for Title IV-E funding and remain operational, thus meeting state and federal mandates for an external foster care review system. The Annual Accountability report also provides an opportunity to align and monitor routine check points that the Review Board has established throughout the year such as annual strategic planning with the State Board of Directors, budget planning and requests, surveys and staffing patterns.

Section II - Organization Profile

1. Main products and/or services and the primary methods by which these are delivered

The South Carolina Children's Foster Care Review Board was created in 1974 by the General Assembly to monitor the progress in achieving permanent placements for children in foster care. SC Code of Laws, § 20-7-2376, et seq.

- A. The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system through the use of citizen volunteers.
- B. Each of South Carolina's sixteen judicial circuits must have at least one local volunteer citizen foster care review board. There are 42 local foster care review boards currently serving 5,347 children.
- C. Local foster care review boards meet monthly to review the cases of children who spend more than four consecutive months in foster care. Each local review board has five members, who are appointed by the Governor, upon the recommendation of the local legislative delegation. A professional staff person from the Children's Foster Care Review Board coordinates the monthly review meetings of each local board and provides liaison services to the local board.
- D. A seven member State Board of Directors supports the Children's Foster Care Review Board. The State Board meets quarterly and is responsible for reviewing and coordinating the activities of the local foster care review boards and making recommendations in an annual report to the Governor and the General Assembly.
- E. The Children's Foster Care Review Board is comprised of a Division Director, a Program Director, two Program Supervisors, two Attorneys, a Research and Planning Administrator, a Business Manager, 10 Review Board Coordinators, and two Administrative Assistants.

2. Key customers groups and their key requirements/expectations

Children and families involved in the foster care system in South Carolina are the primary customers of the Children's Foster Care Review Board program. Volunteers appointed to serve on local foster care review boards and members of the State Board of Directors are primary customers of the staff of the Children's Foster Care Review Board.

3. Key stakeholder Groups

Stakeholders are public and non-profit child welfare agencies that partner with the local foster care review boards and local communities across the state. Local stakeholders most effectively address the issues surrounding child abuse and neglect at the local level.

4. Key suppliers and partners

Local foster care review board members and Review Board staff partner with other public and non-project child welfare agencies to serve children and families in the foster care system. Partners include The SC Department of Social Services, the SC Foster Parent Association, the Volunteer Guardian ad Litem Program, the SC Department of Mental Health, the SC Department of Disabilities and Special Needs, the SC Department of Alcohol and Other Drug Abuse Services, the SC Association of Children’s Homes and Family Services, the SC Department of Health and Human Services, the SC Department of Juvenile Justice, the SC Heart Gallery, and the Children’s Trust Fund.

Table II.4.1-1 Children’s Foster Care Review Board Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
<p>Children’s Foster Care Review Board (FCRB)</p>	<p>FCRB monitors progress in achieving permanent placements for children in foster care by providing an external system of accountability and advocacy for children and families involved with the foster care system through citizen volunteers.</p> <p>There are 42 local foster care review boards currently serving 5,347 children.</p>	<ul style="list-style-type: none"> • Children and families involved in the foster care system in South Carolina are the primary customers. • Volunteers appointed to serve on local Review Boards and the State Board of Directors. • Stakeholders are public and non-profit child welfare agencies that partner with the Review Board and local communities across the state. 	<ul style="list-style-type: none"> • SC Dept of Social Services • SC Foster Parent Association • Volunteer Guardian ad Litem Program • SC Dept of Mental Health • SC Dept of Disabilities and Special Needs • SC Dept of Alcohol and Other Drug Abuse Services • SC Association of Children’s Homes and Family Services • SC Dept of Health and Human Services • SC Dept of Juvenile Justice • SC Heart Gallery • Children’s Trust Fund

5. Operation locations

The Children’s Foster Care Review Board is located in Room 436, Edgar Brown Building, Columbia, SC.

6. The number of employees (segmented by employee category)

18 Classified 1 Unclassified _____ Contract
_____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

- A. The South Carolina Children’s Foster Care Review Board was created in 1974 by the General Assembly to monitor the progress in achieving permanent placements for children in foster care. Each of South Carolina’s 16 judicial circuits has at least one local foster care review board. Each local foster care review board consists of five volunteers, appointed by the Governor, from the community. SC Code of Laws, § 20-7-2376, et seq.
- B. Each local foster care review board must be provided sufficient staff to perform its function as set forth in statute with funds provided in the annual state general appropriations act.
- C. The Children’s Foster Care Review Board has a State Board of Directors that provides oversight for the programmatic duties and responsibilities of the agency, as described by statute.
- D. The Children’s Foster Care Review Board statute requires the production of an Annual Report reflecting the deficiencies in the child welfare system in SC. The Review Board gathers extensive data at each child’s review in order to carefully target specific systemic barriers to permanence for children in foster care.
- E. The Children’s Foster Care Review Board receives extensive programmatic and operational funding from one contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.

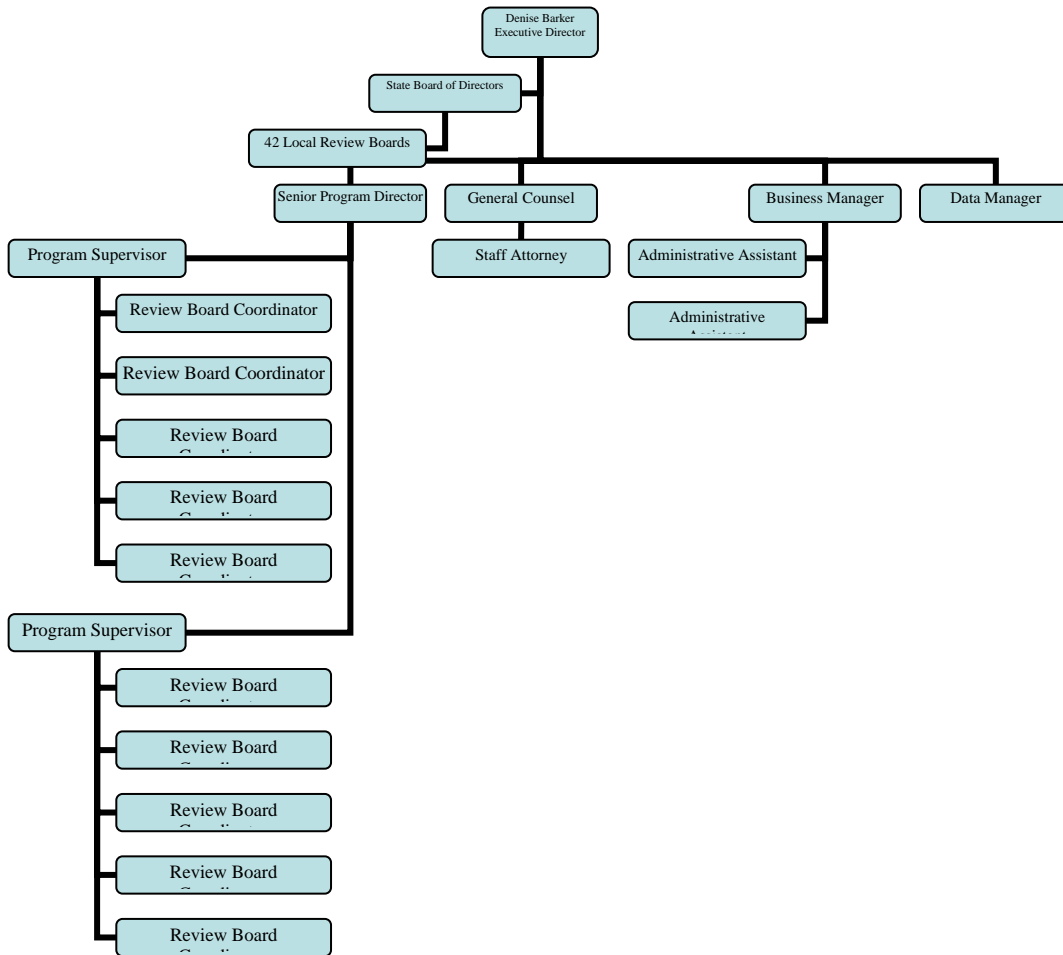
8. Performance improvement systems

Data on performance improvement are located in Section III.2 tables III.2.E-1 and III.2.E-2, and in Section III.7 tables III.7.A-1 and III.7.B-1.

- A. Post training evaluations are collected and analyzed.
- B. Review of completed annual staff evaluations.
- C. Periodic customer surveys are distributed and analyzed.
- D. Accurate monitoring of numbers of children reviewed to ensure balanced caseloads.
- E. Routine data analysis to focus on counties reviewed who are falling behind in services to children and families – conveying this information to DSS and working collaboratively to address community issues.
- F. Satisfactory OEPP financial audit outcomes.

- G. Satisfactory management and audit outcomes for the programmatic contract resulting in renewal and/or increase in contracted dollars.
- H. Preparation of the Annual Report, Accountability Report, and Activity Report within prescribed timeframes.
- I. Review Board member and staff exit interviews.

9. Children’s Foster Care Review Board Organizational Chart



Accountability Report Appropriations/Expenditures Chart

10. Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$778,077	\$402,735	\$837,364	\$418,682	\$897,498	\$421,152
Other Operating	\$225,173	\$118,522	\$264,004	\$136,589	\$345,304	\$206,901
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$213,089	\$111,443	\$248,906	\$124,453	\$240,132	\$105,288
Non-recurring	\$	\$	\$	\$	\$	\$
Special Items (Pass-Through P&A)	\$297,938	\$297,938	\$297,938	\$297,938	\$290,489	\$290,489
Total w/Pass Through	\$1,514,277	\$930,638	\$1,648,212	\$977,662	\$1,773,423	\$1,023,830
Actual Review Board Budget Total	\$1,216,339	\$632,700	\$1,350,274	\$679,724	\$1,482,934	\$733,341

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures	FY 08-09 Actual Expenditures
Supplemental Bills	\$	\$	\$
Capital Reserve Funds	\$	\$	\$
Bonds	\$	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Children's Foster Care Review Board	The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system	State	\$632,700	State	\$679,724	Table II.4.1-1 Table III.2.A-1 Table III.2.E-1 Table III.2.E-2 Table III.7.A-1 Table III.7.B-1
		Federal		Federal		
		Other	\$583,639	Other	\$670,550	
		Total	\$1,216,339	Total	\$1,350,274	
		% of budget:		% of budget:		

Section III – Elements of Malcolm Baldrige Criteria

1. Senior Leadership, Governance, and Social Responsibility

A. How do senior leaders set, deploy and ensure two-way communication for: a) short and long-term direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?

- (1) Provide staff with opportunities to participate in training and professional development workshops.
- (2) Require all review board volunteers to attend mandatory, on-going training.
- (3) Staff participates in weekly and monthly staff meetings.
- (4) Routine written and oral communication both written and electronic, perform annual EPMS rating and planning sessions with all staff, strict adherence to HR policy.
- (5) Shared decision-making and brainstorming sessions with all levels of staff on planning, process initiatives.
- (6) One-on-one annual goal setting meetings between each staff member and agency director.
- (7) Ethical and professional behavior modeled by all staff at all times is required.

B. How do senior leaders establish and promote focus on customers and other stakeholders?

All staff and volunteer training is focused on the agency mission addressing our targeted customer – children in foster care in South Carolina. Senior Review Board leaders also participate in many collaborative opportunities with specific State partners (i.e. the SC Department of Social Services, the Children's Law Center, the South Carolina Bar Association, non-profit organizations and other child welfare agencies). Senior staff leaders also encourage and monitor partner

interactions between local stakeholders and local review board volunteers that take place at the county level.

C. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

Analysis of data collected from a survey of critical stakeholders was shared with program staff, the State Board of Directors, and at the Annual Professional Development Day attended by local review board members and Review Board staff. Other surveys, self-assessment, exit interviews, and evaluations are conducted throughout the year and specific issues raised in these evaluations are addressed as needed. Analysis and results are shared with staff, State Board of Directors and review board members.

D. How do senior leaders maintain fiscal, legal and regulatory accountability?

- (1) The Children's Foster Care Review Board requires a State Board of Directors to be in place in order to provide oversight for the programmatic duties and responsibilities of the agency, as described by statute.
- (2) The Review Board statute requires the production of an Annual Report reflecting the deficiencies in the child welfare system in SC. The Review Board gathers extensive data at each child's review in order to carefully target specific systemic barriers to permanence for children in foster care.
- (3) The Review Board receives extensive programmatic and operational funding from one contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.

E. What performance measures do senior leaders regularly review to inform them on needed actions?

The Review Board Leadership Team routinely reviews established performance measures and reports regarding service efficiency and effectiveness. The Review Board maintains action plans and related performance measures to support OEPP's mission. A description of each measure is detailed in Section III.7.A.

F. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization, including the head of the organization, and the governance/policy making body? How do their personal actions reflect a commitment to the organizational values?

- (1) Weekly senior staff meetings with Division Director.
- (2) Monthly full staff meetings with information sharing from all departments. Any staff who have attended outside trainings or relevant outside meetings provide other staff with an overview of information and reproduced handouts, etc.
- (3) Monthly Review Board Coordinator meetings where program and direct-line staff meet to process information from recent trainings, share other information and receive updates, i.e. legal, national best practice.

(4) Annual staff goal sharing meetings with Division Director.

G. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

When funding is available, all professional staff is given the opportunity to participate in the Certified Public Manager program, Executive Institute and Leadership South Carolina. Selection for participation is based on seniority and length of time with the agency. As a part of their annual EPMS planning session, staff is given the opportunity to request specific types of training and these requests are honored when possible according to course and funding availability. All staff members share the responsibility of conducting and organizing the agency's monthly staff meeting including planning activities, arranging for speakers and facilitating the meeting.

H. How do senior leaders create an environment for performance improvement and the accomplishment of strategic objectives?

Shared decision-making is a vital part of the Division Director's management style – staff is treated as professionals and responds in kind by participating in all planning sessions and communicating freely with supervisory and upper-management staff. Without this input, the Review Board would be unable to accomplish any of our objectives. For the past four years, Review Board staff have worked hard to empower our State Board of Directors and local review board members to become more active and involved in their local communities to facilitate change for children. This has been very effective and excellent results from this approach continue.

I. How do senior leaders create an environment for organizational and workforce learning?

Senior leaders receive an intense amount of national and statewide information related to excellence in the field of child welfare and organizational management through contacts and resources on the Internet. In addition to relative training opportunities for staff and volunteers when funding is available, this information is screened and distributed to all staff and volunteers through electronic interface. This allows on-going and current best-practice information to be shared throughout the organization routinely. Senior staff seeks out opportunities for staff and volunteers to reach beyond their "comfort zones" to apply newly acquired knowledge and to practice skills learned in training.

J. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

The Review Board leadership works hard to maintain a positive and well-supported workforce, including the 200+ local review board volunteers. Strong, supportive supervision as well as a passion for the mission of the Review Board makes this possible. Both small and large victories that occur when a staff person or board member can be successful, through advocacy efforts, in correcting a wrong that has happened in a child's life, or seeing where personal advocacy has moved a child into a forever family are immensely rewarding. An important segment of Professional Development Day each year is the awarding of *Review Board Member of the Year* and *Review Board of the Year* to those outstanding volunteers in each category. Legislators are invited to participate at that meeting and they are then able to praise and encourage both staff and volunteers for their hard work. This recognition means a great deal.

K. How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

Executive Director: National appointee to the Permanency Planning Committee of the National Council of Juvenile and Family Court Judges; gubernatorial appointee, Governor's Task Force on Foster Care and Adoption Services, charter steering committee member National Foster Care Review Coalition; faculty, 2008 Casey Family Services National Convening for Youth, ex-officio chair, Board of Directors, Prevent Child Abuse South Carolina; ex-officio chair, Midlands Community Mediation Center; appointee, Bench/Bar Committee; SC DSS Children and Family Services Review Stakeholders Advisory Committee; SC DSS Independent Living Advisory Committee; Columbia College Social Work Advisory Committee; Children's Trust Fund Advisory Board; Columbia College Alliance for Women Organizational Committee; Social Indicators Focus Group, University of South Carolina Indicators Project, Institute for Public Service and Policy Research.

General Counsel Executive/Host Committee and Volunteer, *Art-A-Must*, Prevent Child Abuse SC; Children's Committee of the SC Bar Association, Bench/Bar Committee.

Program Director Conference committee interagency volunteer conference, reporting coordinator for monthly State- Partner's meetings Program Oversight Committee; liaison, SC Foster Parent

Association Training calendar, Certified Public Manager Advisory Committee.

Program Supervisor Citizen Review Panel committee, Certified Auditor - US Children's Bureau - Children and Family Services Review, Certified Public Manager, Chairperson, Child Welfare Advisory Committee - Subcommittee on Foster Parent Recruitment and Retention, member, South Carolina Citizen's Review Panel - Midlands Region.

Program Supervisor SC Victim Assistance Network; Children's Legislative Committee; Education Subcommittee of the SCDSS Independent Living Committee; grant reviewer, SC Children's Trust Fund; volunteer for Art-A-Must fundraiser, Prevent Child Abuse SC.

2. Strategic Planning

- A. What is your strategic planning process, including key participants, and how does it address: a) your organization's strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory, societal and other potential risks; d) workforce capabilities and needs; e) organizational continuity in emergencies; and f) your ability to execute the strategic plan.**

In October 2007, the State Board of Directors and senior management staff held a two-day planning session with an outside facilitator to evaluate and review progress of the five year Strategic Plan developed in 2005. The State Board revised and updated specific goals, objectives and outcomes, encompassing activities of local review boards, the State Board of Directors, and Review Board staff. The Strategic Plan is evaluated annually to review progress and determine additional future goals and objectives.

The Strategic Planning Chart on the following page summarizes goals and objectives of the Strategic Plan.

Table III.2.A-1

Key Agency Action Plan/Initiative

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
<p>1. Increase public knowledge and understanding about the role and responsibilities of the Review Board through the State Board of Directors and local review boards.</p>	<p>1. To build strong relationships between the State Board of Directors and local review boards through routine telephone contact and regular personal attendance at local review board meetings.</p> <p>2. To develop a uniform message conveying to the public the role of the Review Board and foster care in South Carolina.</p> <p>3. Use print and broadcast media to share the message.</p>	<p>1.1 Routine telephone contact and personal attendance at local review board meetings.</p> <p>1.2 Quarterly reporting on the progress and effectiveness of the phone calls and visits, discussion of issues and possible solutions.</p> <p>1.3 State Board members will attend Annual Chairperson’s Training and will participate on the agenda of that meeting.</p> <p>2.1 Active Public relations and legislative committees.</p> <p>2.2 Review and analysis of State Data.</p> <p>2.3 Development of a clear message regarding the Review Board and their impact on the child welfare system presented to the State Board.</p> <p>2.4 Dissemination of the developed message.</p> <p>2.5 Review and analysis of the message for effectiveness.</p> <p>3.1 Methods for meeting this goal will be finalized in FY 2008-2009.</p>	<p>Table II.4.1-1 Table III.2.E-1 Table III.2.E-2 Table III.7.A-1 Table III.7.B-1</p>
<p>2. Collaborate with state and national partners to improve the many systems that impact children in foster care.</p>	<p>1. Enhance and broaden relationships between local review boards and the Department of Social Services (DSS) county directors, volunteer Guardians ad Litem, and foster parents to address issues and deficiencies as they arise.</p> <p>2. Work with county DSS directors to improve the quality of legal representation for children in foster care.</p>	<p>1.1 Attend quarterly community stakeholders meetings and State DSS meetings.</p> <p>1.2 Reports are available and issues are discussed monthly at the state level.</p> <p>1.3 On-going stakeholder training about the role of the Foster Care Review Board.</p> <p>2.1 The Review Board surveyed county directors to determine barriers to quality legal representation for children in foster care.</p> <p>2.2 Survey results were shared at the state level.</p>	

Table continued on next page

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
2. Collaborate with state and national partners to improve the many systems that impact children in foster care.	3. Meet with members of the SC congressional delegation. 4. Work with other administrators of State Review programs to enhance the participation of foster care reviewers in the second round of CFSRs.	3.1 Committee members scheduled meetings with each member of the SC congressional delegation. Meetings will continue in FY 2008-2009. 4.1 The Review Board Executive Director is a standing member of the National Foster Care Review Coalition.	Table II.4.1-1 Table III.2.E-1 Table III.2.E-2 Table III.7.A-1 Table III.7.B-1

B. How do your strategic objectives address the strategic challenges you identified in your Executive Summary?

The challenges to obtaining many of the strategic objectives are defined in Section II.8. Without increased state funding to improve the federal match currently available, as well as additional staff, some of the steps spelled out in the action plan may not be possible. We have tried to address each of the objectives in some manner, but additional advocacy efforts on behalf of the increasing foster care population will require resources not currently available and without which we may not reach the outcomes we had hoped to achieve.

C. How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?

The Strategic Plan is reviewed quarterly at each State Board of Director's meeting. Annually, the State Board holds a planning retreat to evaluate the plan objectives, goals, and outcomes. The Review Board Leadership Team has an annual retreat to evaluate objectives, goals, and outcomes from the previous year and to prepare their planning ideas for the coming year for the State Board to consider at their retreat.

D. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

- (1) Annual Report
- (2) Bi-Annual newsletter
- (3) Division website
- (4) Annual Facts About Foster Kids (statewide and county specific demographic data and performance measures)
- (5) Quarterly State Board of Directors' meetings
- (6) Quarterly State Board contacts with local review boards
- (7) Weekly senior staff meetings
- (8) Monthly Leadership Team meetings

- (9) Monthly full staff meetings
- (10) Annual Chairperson training/meetings
- (11) Annual Review Board member training
- (12) Regional Trainings for local review boards (as needed)
- (13) List-serve for all Review Board members with on-line capabilities
- (14) Monthly Review Board business meetings
- (15) Staff Retreats
- (16) State Board Planning Retreat

E. How do you measure progress on your action plans?

Continuous data analysis of demographic trends and progress measures; training evaluation analysis; review board member and stakeholder surveys; and analysis of self-assessment surveys.

Table III.2.E-1 Key Performance Measures for Increasing Public Knowledge and Understanding about the Role of the Children’s Foster Care Review Board

Reference 1.1 State Board Members Call and Visit local review boards	Completed for FY 2007-08
Reference 1.2 Quarterly Reports at State Board Meetings	Completed for FY 2007-08
Reference 1.3 State Board Members Attend Chairperson’s Training	Completed for FY 2007-08
Reference 2.1 Formation of Public Relations/Legislative Committee	Meeting Quarterly for FY 2007-08
Reference 2.2 Review of State Data	FY 2007-08 Annual Report and 2008 Facts about Foster Kids Reports
Reference 2.4 Create and Implement Plan to Disseminate Message	FY 2008-2009
Reference 2.5 Evaluate Public Awareness Plan Effectiveness	FY 2008 - 2009

Table III.2.E-2 Key Performance Measures for Collaborating with State and National Partners to Improve Systems that Impact Children in Foster Care.

Reference 1.1 Number Quarterly Stakeholder Meetings and Monthly State DSS Meetings	Review Board members and Review Board staff attended 95 stakeholder meetings
Reference 1.2 Number of Reports Submitted to State Office	79 reports submitted
Reference 1.3 Number of External Trainings for Stakeholders	18

F. How do you evaluate and improve your strategic planning process?

The State Board of Directors reviews the strategic plan at each quarterly meeting. Annually, the State Board meets for two days to review, evaluate, and revise the strategic plan to reflect the current needs and issues facing the Review Board.

G. If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide a website address for that plan.

The Strategic Plan is available at the Children’s Foster Care Review Board’s web site: www.oepp.sc.gov/fcrb and then selecting the State Board link.

3. Customer Focus

A. How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Children and families involved in the foster care system.	By statute, each of South Carolina’s 16 judicial circuits must have at least one local volunteer citizen review board. Review boards meet monthly to review cases of children who have been in foster care for longer than four consecutive months. The role of the Review Board is to advocate for permanent homes for all foster children and to monitor the progress of children in the foster care system.
Public, private, and non-profit child welfare agencies.	By statute, all public and private agencies and facilities which provide for or arrange foster care for children shall cooperate with the board of directors and local review boards by making available for review records as may be requested.
Review Board volunteers	By statute, the appointment and training needs of these volunteers must be addressed by staff
State Board of Directors	By statute, coordination of meetings and facilitation of appointments to the State Board of Directors must be handled by the Executive Director

B. How do you keep your listening and learning methods current with changing customer/business needs and expectations?

Through review and analysis of foster care review data, training evaluations, annual surveys, self-assessments, and active participation in many arenas of the child welfare field both locally and nationally.

C. What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Customers are able to access the Review Board by telephone, through the “Contact Us” link on the Review Board website and through participation in regular review board meetings. All staff members have assigned e-mail addresses and personal voice mail and can be contacted through either means. The Review Board office is open and accessible during regular work hours and the front desk is equipped to handle and direct all calls coming into the main telephone line.

D. How do you measure customer satisfaction/dissatisfaction, and use this information to improve?

Review Board stakeholder surveys are conducted every other year in even years. A stakeholder survey of county Department of Social Services workers, Family Court Judges, guardian ad litem, foster parents, birth parents, and other interested parties, was completed in 2008. The results of that survey were shared at the Review Board Professional Development Day held in April of 2008. In addition, local review boards are actively involved in self-assessments and staff assessments. Both provide reports to Review Board leadership staff for review and analysis.

E. How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Review data and findings, statewide and county based, are reviewed by local boards, their assigned staff, the Leadership Team and the State Board of Directors. Programmatic and systemic changes identified by the trends and findings in this data are brought to the attention of appropriate parties at the state and local level.

F. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?

Quarterly community stakeholder meetings, educational professional development trainings and other relevant child welfare trainings, participation in legislative delegation meetings, community presentations, personal involvement with public and non-private agencies, boards, and commissions. All of these serve to establish on-going working relationships that will enhance the Review Board’s ability to facilitate systemic improvement.

4. Measurement, Analysis and Knowledge Management

- A. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?**

By legislative, statutory, mission and regulatory authority

- B. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?**

Data is collected and routinely analyzed. Results are shared and discussed with Leadership Staff, the State Board of Directors, and local review board members to assist in management, program decisions and creation and deletion of local boards as needed.

- C. What are your key measures, how do you review them, how do you keep them current with your needs and direction?**

By statute, the Review Board is required to report annually to the Governor and the General Assembly on:

Demographics -- how many children there are in foster care, their characteristics and whether their prevalence is increasing or decreasing;

Areas of Concern -- legal and program shortcomings identified at monthly citizen reviews; and

Progress Measures -- length of time in care, number of placements, achieving permanency, and recidivism rates. Information is collected from local volunteer citizen review boards that review the cases of children who have been in foster care at least four consecutive months; each case is then reviewed every six months thereafter until the child leaves care.

Under the direction of the State Board of Directors and the Review Board program staff, additional data may be collected and evaluated for trend analysis to determine where and what changes or adjustments need to be made in appropriate programmatic areas. Additional data is also collected and analyzed when requested by staff, review board members and other stakeholders.

- D. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?**

To comply with statutory requirements, the Review Board tracks all data that bears on statutes and policies related to permanence for children in the foster care system. Programmatic requirements for federal funds that come into SC's foster care program are also tracked for compliance, as well as specific categories of information used by federal auditors in the Children and Family Services Review process and those targeted for improvement in the SC Program Improvement Plan.

E. How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

Routine and ad hoc reports are generated to review data for accuracy and timeliness. Standards for data collection and data entry have been established. Regular supervision ensures that standards are being met. Data for the Review Board is stored on a wide area network server. The Information Technology Division of the OEPP is responsible for service maintenance, and data security and availability. Information compiled from Review Board data is compared to similar data gathered by the Department of Social Services and Family Court to determine accuracy and consistency.

F. How do you translate organizational performance review findings into priorities for continuous improvement?

Data and trends are studied to determine what barriers are the most prevalent in preventing children from moving through the foster care system and into permanent homes in a timely manner. Advocacy efforts for system change or correction are targeted to those areas, which will vary from county to county. Any statewide similarities in this data or trend analysis are dealt with from a statewide, systemic perspective.

G. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

The collection, transfer, and maintenance of accumulated employee knowledge are accomplished through the production of written policies and regulations, cross training, and the duplication of material resources. Staff often support and help train new staff (formally as well as by on the job training). A detailed Review Board Coordinator handbook ensures uniform process implementation. Regular staff meetings also help collect and share knowledge.

5. Workforce Focus

A. How does management organize and measure work to enable your workforce to: 1) develop to their full potential, aligned with the organization's objectives, strategies, and action plans; and 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

Regional caseloads are routinely checked to insure that caseloads are evenly balanced among program staff and that each judicial circuit is operating with adequate review boards for the population of children in foster care. Supervisors monitor and develop staff strengths to insure that the specific needs of local boards or counties are paired with the best staff member to address these issues. All staff members are routinely involved in planning and programmatic development.

B. How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.

All levels of staff participate in monthly staff meetings in which information relative to the mission and operation of the Review Board are discussed. All levels of staff also participate in the annual staff retreat coordinated by Review Board leadership staff. Future plans, direction and strategic plans are made at that time. Regardless of role within the agency, all new staff is required to observe local review board meetings and attend agency orientation training for new board members within the first 3 months of their hire date.

C. How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.

The Division coordinates all human resource activities with the OEPP Office of Human Resources. Supervisors are provided on-going training to ensure compliance with agency policy and procedures. Current budget restraints in State government make it extremely difficult to attract qualified staff to fill current program positions as salary levels are not commensurate with job requirements and the skill level required for this complex work. If fortunate enough to acquire good staff, it becomes very difficult to retain them as there is no monetary way to reward or acknowledge quality of service, length of service or professional expertise. Due to pay compression in State government, newly hired staff is compensated at the same salary as senior staff serving in the same capacity.

D. How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?

Due to inadequate funding, the Review Board is beyond capacity needs with the workforce currently available. The number of children entering the foster care system drives the caseload of the Review Board and this number has increased by over ten percent in one year. Current staff and local review boards are operating with caseloads that are beyond capacity for optimal outcomes, but funding for additional review boards and FTEs for necessary support staff is not available. Individual staff competency is assessed on an on-going basis by supervisors and through the annual EPMS procedure.

E. How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

The Review Board performs an auditing function for the Department of Social Services and it is imperative that high standards of staff performance be maintained at all times. This is addressed through on-going quality supervision, local review board self-assessments, annual evaluations of assigned staff by local boards and timely EPMS evaluations.

F. How does your development and learning system for leaders address the following:

(1) development of personal leadership attributes

Staff at all levels is engaged in developing, assessing and accepting responsibility for successful agency outcomes. While engaged in the on-going group decision-making process, staff is routinely evaluated on leadership and teamwork. All program staff is required to exhibit strong personal leadership through their work with local review boards and they are evaluated on this skill annually through the EPMS process.

(2) development of organizational knowledge

Strong communication skills by supervisory and leadership staff set a tone for overall organizational knowledge in that information is routinely shared up and down the structure of the Division in order to maintain a sound knowledge base.

(3) ethical practices

Due to the nature of the extremely confidential information monitored by the Review Board, unethical behavior of any type is not tolerated. It is incumbent on leadership staff to monitor and model the strictest of ethical standards in order to protect the children and families served.

(4) your core competencies, strategic challenges, and accomplishment of action plans

Through development of a sound Annual Report and by empowering local review board members to become strong advocates with their local partners and legislators, Review Board staff and the State Board of Directors have worked together to establish the need for and the advantages of a strong review system in South Carolina. The State Board of Directors establishment of an effective 3-year strategic plan has made the accomplishment of these mutual goals possible.

G. How do you identify and address key developmental and training needs for your workforce, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training?

Supervisory staff routinely travels with and/or observe their staff members on the job to assess their competence and level of professionalism. EPMS planning meetings and rating discussions are conducted as per HR personnel standards for all staff. As staff rotates the responsibility of planning monthly full staff meetings, they are free to bring in any speaker or subject matter that they may want additional information about, and can make requests for specific training needs as a part of their EPMS planning session. Staff members also meet individually each year with the Division Director to discuss individual training needs and goals.

H. How do you encourage on the job use of new knowledge and skills?

After any member of staff attend training, they are responsible for presenting the content of these training to other staff members at the next full staff meeting. Discussion follows about how what was learned can be of use to program staff or the Division as a whole.

I. How does employee training contribute to the achievement of your action plans?

The Review Board's commitment to on-going training opportunities for staff insures that all staff that meet and work in conjunction with local review board members has the most current, most beneficial information available, which in turn provides quality oversight for the children in foster care in South Carolina.

J. How do you evaluate the effectiveness of your workforce and leader training and development systems?

By measurement of overall Division outcomes and working with the State Board of Directors to assess success on strategic planning goals.

K. How do you motivate your workforce to develop and utilize their full potential?

Through support, quality supervision and training, and through an expectation of high standards of performance in each segment of the office.

L. What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

In addition to annual EPMS evaluation meetings and planning sessions, each staff member meets annually with the agency director for a one-on-one goal planning session. All issues that come up in these meetings are cataloged and discussed with supervisory staff and overall concerns or issues are addressed by senior management staff. Priorities for improvement are made based on the problem's relativity to permanence for children in foster care and the impact that the problem is having on staff's ability to focus on our mission of advocating for children in foster care.

M. How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?

Succession planning for Division leadership is a part of the discussion at each annual State Board of Director's retreat. Persons suitable for effective career progression are easily discernable by leadership staff through their participation in Division activities and overall commitment to the Division's mission and the children they serve.

N. How do you maintain a safe, secure and healthy work environment?

By maintaining a strong management team made up of individuals who are good listeners, team players and committed to establishing a positive workplace for the people who work for them. One core strength of the Review Board management team is that they respond to staff first as people, then as employees.

6. Process Management

A. How do you determine, and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?

- (1) Review Board Meetings
- (2) State Board of Directors
- (3) Distribution of Review Board Recommendations
- (4) System of accountability provided by third party, citizen review

B. How do you determine and what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?

The process of citizen review itself and the data and information generated by the process empower local review board volunteers to achieve positive system reform through their advocacy at the local, state and national level. Various levels of system reform speak to the usefulness of citizen review and the Division strives to build on those successes.

C. How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

This is covered in Section III.1.

D. How does your day-to-day operation of these processes ensure meeting key performance requirements?

All processes are linked to meeting statutory requirements and are mission driven.

E. How do you systematically evaluate and improve your key product and service related processes?

Through routine self and external assessments that are in place, by being open to the requests and needs of Review Board customers and stakeholders and by being good team players both internally and externally.

F. What are your key support processes, and how do you improve and update these processes to achieve better performance?

- (1) Coordination and facilitation of third party citizen reviews for all children in foster care in SC.
- (2) Through these reviews we are able to advocate for children in foster care, identify barriers to permanence for children in care and facilitate systemic

change as necessary to limit the amount of time children spend in foster care in order to achieve permanent, stable living situations.

(3) This is covered in Section III.4.

G. How does your organization determine the resources needed to meet current and projected budget and financial obligations?

Through routine assessment of the caseload of children placed in foster care and by continually addressing the degree of difficulty faced by staff and local review boards in monitoring and advocating for these children. If the Review Board is not adequately staffed and supported, it becomes impossible for the agency to achieve its statutory mission.

7. Results

A. What are your performance levels and trends for the key measures of mission accomplishment/product and service performance that are important to your customers? How do your results compare to those of comparable organizations?

The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system, promoting safe, permanent homes for children in foster care in a timely manner, while increasing public awareness about the impact of child abuse and neglect. Program Measures for the past seven years are in Table III.7.A-1. The number of children residing in foster care in South Carolina has seen a steady increase since 2000. The number of reviews completed and the number of children review have also increased. The stress created by this continuing increase in the population of children reviewed impacts both Review Board staff and volunteers. In addition to the increased caseload, as the population increases, the ability of the system to manage these increases also creates more barriers for children and families, making the work of the Review Board more demanding and more necessary than ever before.

Other significant trends are Areas of Concern cited, the length of time children spend in foster care, the average number of placements children experience while in care, the percentage of children achieving permanency either through a consummated adoption or through return to their natural parent, and the number of children that re-enter foster care. In 2007, the number of Areas of Concern identified increased. The length of time children spend in foster care has decreased 25% since 2002 and the number of placements has decreased 38%. These are significant improvements for children and families in the foster care system. However, permanency has not improved significantly for children and the percentage of children re-entering foster care remains above 20%.

The stated goals for FY 2007-2008 address increasing public knowledge and awareness about the foster care system, and collaborating with partners to improve the system for children in foster care. Tables III.2.E-1 and III.2.E-2 (Section III.2: Strategic Planning) outline performance measures that will be used to evaluate progress in these areas.

Table III.7.A-1 Foster Care Review Program Measures

Measure	2000	2001	2002	2003	2004	2005	2006	2007
Number of Reviews Completed	8,097	8,075	8,305	8,443	8,232	8,317	8,464	8,981
Number of Children Reviewed	4,665	4,771	4,856	4,800	4,810	4,853	4,976	5,347
Number of Review Board Meetings	423	416	434	431	440	431	436	464
Number of Coordinators	9.25	9.00	8.10	8.00	8.00	8.00	10.00	10.00
Number of Volunteer Hours	9,890	9,781	9,668	10,031	10,155	10,574	13,115	16,474
Children Reviewed per Meeting	19.1	19.4	19.1	19.6	18.7	19	19	19
Reviews per Coordinator	875	897	1,025	1,055	1,029	1,040	846	898
Volunteer Hours per Review	1.22	1.21	1.16	1.19	1.23	1.27	1.54	1.83
Volunteer Hours per Child	2.12	2.05	1.99	2.09	2.11	2.17	2.63	3.08
Number of Areas of Concern Cited	10,096	8,623	8,543	10,415	10,270	9,816	11,168	14,864
Areas of Concern per Review	1.25	1.07	1.03	1.23	1.25	1.18	1.32	1.65
Reviews Continued or Rescheduled	258	206	225	386	321	316	410	393
Reviews Not Held Timely	219	198	177	205	228	229	333	409
Average Number of Years in Care	3.5	3.3	4.5	4.1	3.8	3.6	3.3	2.7
Average Number of Placements	3.5	3.6	5.4	4.9	4.3	4.0	2.8	3.3
Percent Achieving Permanency	64%	64%	64%	58%	59%	59%	63%	60%
Percent Recidivism	18%	22%	18%	27%	24%	22%	24%	26%
Percent of Reviews Completed Timely	97.3%	97.5%	97.9%	97.6%	97.8%	97.7%	97%	97%
Number of Advocacy Referrals Initiated *	1,406	1,275	1,254	562	727	821	436	1,641
Number of Training Sessions Conducted for Staff & Review Board Members	Not Measured	10	8	7	9	11	10	13
Number of Presentations Given for Outside Entities	Not Measured	17	18	12	13	23	28	17

* The Administrative Contract for Medicaid Review with Health and Human Services was discontinued in July 2007.

B. What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?

Table III.7.B-1 Foster Care Review Customer Satisfaction Results outlines indicators for measuring customer satisfaction.

In October 2007, the Foster Care Review Board surveyed local review board members and Foster Care Review Board staff. Each group was asked to agree or disagree with twenty-five statements, using a scale of 1 to 5 where strong agreement scored a 1 and strong disagreement scored a 5. One hundred and eighty-one surveys were mailed, with a response rate of 44%. The average score for all statements was 4.62; 93% of all scores were “strongly agree”, while less than 10% of all scores were “disagree” or “strongly disagree”.

The State Board of Directors completes a self-assessment annually use their results at their annual planning retreat. Local review boards completed self-assessment plans for the year. The results were collected and analyzed in October 2007. These results will be reviewed by the State Board at their annual planning retreat.

Table III.7.B-1 Foster Care Review Customer Satisfaction Results: FY 07-08 (July 2007-June 2008)

Performance Measures	Number	Dates
Timely Preparation of Annual Report (statistical research and recommendations)	950 copies distributed	7/31/2007
Review Board Member Survey	101 responses	11/01/2007
Review Board Member Exit Interviews	21 completed	throughout year
Evaluation: New Board Member and Staff Orientation	27 responses	08/27/07, 10/29/07, 2/25/08, 4/19/08, 5/19/08
Evaluation: Regional Training for Board Members	71 responses	Sept 2007
Evaluation: Foster Care Review Board Conference	69 responses	4/25/2008
Stakeholder Survey (bi-annual)	464 responses	11/1/2007 – 2/29/2008

C. What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?

Clean OEPP audit and satisfactory management and audit outcomes for the programmatic contract resulting in renewal and/or increase in contract dollars.

D. What are your performance levels and trends for key measures of work force engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

All EPMS ratings are reviewed annually and low performance areas are addressed as possible training needs during EPMS planning sessions. Each member of program staff receives annual reviews from volunteers and problem areas and training needs are frequently identified from these evaluations. General well-being and satisfaction are addressed during the Executive Director's annual goal setting meetings with staff, as well as during staff retreats, travel with staff, review observations and strategic planning sessions.

E. What are your performance levels and trends for your key measures of organizational effectiveness/operational efficiency, and work system performance?

Collective areas of low performance noted in EPMS ratings are reviewed annually and addressed as possible training needs or areas requiring system refinement during leadership staff retreats. General well-being and satisfaction are addressed during the Executive Director's annual goal setting meetings with staff, as well as during staff retreats, travel with staff, review observations and strategic planning sessions. Review Board volunteers and county and state partners are an on-going source of information when determining specific areas for system improvement.

F. What are your performance levels and trends for regulatory/legal compliance and community support?

Tables III.7.A-1 and III.7.B-1 include indicators for regular/legal compliance performance levels. Percent of reviews held timely has remained extremely high at 97% or better for the past eight years. The Annual Report has been completed timely. Volunteers and staff have been adequately training according to policy.

OEPP – Guardian Ad Litem

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Guardian Ad Litem Program

Section I. Executive Summary

1. Organization's stated purpose, mission, vision and values

1.1 Purpose:

The purpose of the South Carolina Guardian ad Litem Program is to give abused and neglected children a voice in family court that is uniquely their own and an individual presence in their lives throughout a traumatic time whose focus is on the child's best interests rather than the interests of any other person or entity. Further, the Program is charged to provide to the family court, through its court-appointed volunteers, conclusions and recommendations, which must be based on the guardian ad litem's independent investigation of the case.

1.2 Mission Statement:

The mission of the South Carolina Guardian ad Litem Program is to recruit, train and supervise volunteers who are court-appointed to represent and advocate for the best interests of children in the child welfare system and in family court proceedings involving allegations of abuse and neglect.

1.3 Vision:

The vision of the South Carolina Guardian ad Litem Program is to provide a well-trained, appropriately motivated, competent volunteer child advocate for every child in South Carolina involved in a Department of Social Services case of abuse or neglect in family court and to have a well-trained, highly-motivated staff to support the volunteers in their mission by providing the volunteers with supervision and on-going training and otherwise assisting them in being an integral part of the child welfare system's improvement.

1.4 Values:

Every child deserves a safe, permanent home that provides adequately for his or her physical needs and emotional well-being. The Guardian ad Litem Program is committed to helping children find safe, permanent, nurturing homes. The Guardian ad Litem staff and volunteers believe that every child matters. As a Program we value reuniting families when it is safe for the child to return home and moving a child to adoption as quickly as appropriate when the biological home cannot provide an environment that is minimally safe and stable. We value treating children of every race, ethnicity, ability and religion with equal care and concern.

2. Major Achievements for FY 2007-2008

- Implemented Circuit Case Worker positions in the 1st Circuit and 7th Circuit.
- Trained 401 new volunteers, an increase of 21% over 2006-2007.
- Served 7,080 children in 2007-2008, 425 more children than in 2006-2007.
- Served 75% of all children in child abuse and neglect cases in the 45 counties in which the South Carolina Guardian ad Litem Program operates.
- Provided guardians ad litem to 58% of children in new child abuse and neglect cases served by the South Carolina Guardian ad Litem Program, a 6% increase over 2006-2007.
- For the second year, developed and implemented County Plans in 45 counties that designate specific county goals and objectives.

- Established as an FTE position a Public Relations Supervisor to coordinate volunteer recruitment efforts statewide & develop county-specific PR plans for recruitment.
- Maintained contracts for county attorneys who represent the volunteer guardians ad litem statewide.
- Guardian ad Litem staff served on the Governor's Task Force on Children in Foster Care and Adoption Services.
- Coordinated with the University of South Carolina School of Social Work to research Grief and Loss issues for Guardian ad Litem program staff.
- In conjunction with Dr. David Pooler of USC, and based on research conducted with the USC School of Social Work, held a seminar on Grief and Loss for GAL staff to enhance staff retention and satisfaction.
- Conducted a survey of volunteer satisfaction with the GAL program & staff support.
- Supervised field placements for two USC Social Work graduate students for the 2007-2008 school year.
- Supervised a summer field placement for a Northern Arizona University Applied Anthropology graduate student in a study of how to improve volunteer recruitment in the Latino community.
- Based on a Memorandum of Agreement with the Charleston School of Law, provided Guardian ad Litem training at the law school for 35 law students as part of the students' pro bono service requirement. This was the second of a two-year of collaboration with the law school.
- Was awarded a \$50,000 National Court Appointed Special Advocates (NCASAA) grant for 2008-2009 to fund a part-time Public Relations Coordinator to assist the Public Relations Supervisor and facilitate volunteer recruitment.
- Was awarded \$32,245 Victims of Crime Act (VOCA) grant for the purchase of equipment to promote volunteer recruitment.
- Expanded high speed Internet access to 7 additional counties.
- Opened a Cherokee County GAL office.
- Enlisted a volunteer to analyze court hearing continuances for 3 months in 2008 & to determine the reasons for court delays. Results to be shared with stakeholders in 2009.
- Volunteers and staff participated in the Prevent Child Abuse Rally at the Capitol for April Child Abuse Awareness Month.
- Guardian ad Litem staff, as part of a collaborative group of child welfare partners, attended two national conferences hosted by the National Council of Juvenile and Family Court Judges (NCJFCJ).
- Underwent an audit conducted by the Legislative Audit Council (LAC) and responded to the recommendations.

3. Key Strategic Goals for Present and Future Years

1. Hire a fourth Regional Supervisor for better statewide support of staff.
2. Make time-limited employees FTEs.
- 3 Increase SCGAL Program acceptance of cases by an additional 15%.
4. Expand DSL Internet service to all county Guardian ad Litem offices.
5. Provide travel reimbursement to volunteers in order to maintain child visits.

4. Key Strategic Challenges

4.1 Mission

The Guardian ad Litem program faces several challenges directly related to its mission. The Program is called upon to recruit, train and supervise volunteer child advocates in a complex investigation of child abuse and neglect cases. The volunteers act as both an officer of the court providing a report and recommendations about what is in the best interests of the child, and they act as a presence in the child's life where compassion and knowledge of how to interact well with children is the key skill. The legislation that created the Program requires the Program to supervise the volunteers in order to safeguard the children and the volunteers. However, current law gives the Program very little ability to remove volunteers who do not meet the duties and responsibilities outlined in the statute.

4.2 Operational

Operationally the Guardian ad Litem Program faces a challenge of finding the resources to increase staff to ensure adequate supervision of its growing pool of child advocates. A 13% net growth in volunteers was accompanied by a 4% growth in staff. The Program must continue to fulfill its mission to recruit, train and supervise volunteers and is therefore seeking every creative means possible to expand the capacity of staff to get the job done, such as supervising field placements for graduate interns.

4.3 Human resource

Approximately 75% of the Guardian ad Litem budget is salaries. Human resources challenges and financial challenges are necessarily linked. There are six Guardian ad Litem county offices with over 125 active cases each month that need additional staff: Charleston, Greenville, Horry, Pickens, Spartanburg and York. Other counties need part-time staff to become full-time in order to complete job responsibilities. Identifying the available resources to fulfill staffing needs is a financial challenge. There are 15 single-person offices, which presents its own set of problems.

4.4 Financial

Another financial challenge is the increasing cost of gasoline. Volunteers are required to visit the children for whom they are appointed. The children may be placed out of county or be at some distance, even within the county. Volunteer guardians ad litem are unable to receive mileage reimbursement at this time. Not only do they give their time and expertise, they are paying to volunteer. This has become too great an expense for some of our volunteers and promises to be a continuing concern.

4.5 Community-related

Our main challenge in our communities is getting the word out about our work. Confidentiality of cases and the work load for county staff have made public awareness work difficult to accomplish. This is changing rapidly as our Public Relations staff members focus attention on the needs of our children and the opportunity for the community to help them. The SCGAL Program still struggles to distinguish its volunteers from lay guardians ad litem who are appointed in divorce and custody cases.

5. How the accountability report is used to improve organizational performance

The Governor's Office Guardian ad Litem Program serves 45 of 46 counties. The entire state is divided among three Regional Supervisors, each of whom has approximately 15 counties in which they assist with training, public relations, case resolution, staff supervision and staff hiring and for whom they function as liaisons to the state office. The expanse of geography that each must cover is a deterrent to efficient, effective management. The SCGAL Program would be better served by dividing the state into quadrants. Regional Supervisors would have less area to cover, more time with the counties they support and a better ability to focus on volunteer and staff development. The preparation of the accountability report is an opportunity to compare the last fiscal year's performance numbers to years prior. The report suggests through its questions new measures that can be taken to examine performance.

The ability to relieve current staff of cases on which they are personally appointed is an obstacle to achieving adherence to child welfare best practices and standardization statewide. It hinders County staff members from supporting existing volunteers and finding new ones. Placement of two additional Circuit Case Workers in the 1st Circuit and 7th Circuit follows the success of the pilot project position in the 8th Circuit. The Circuit Case Worker position has taken the burden off of county staff in the 8th Circuit and provides children a consistent guardian ad litem in an overburdened area. Over time we foresee the position as one that will provide training and recruitment assistance throughout the region where it is located. Processing the information about the Program's performance in the 8th Circuit in preparing the accountability report highlights the needs and the areas in which those needs exist.

The GAL Program employs 83 persons at this time, plus the grant positions funded through the National Court Appointed Special Advocate Association. Of this number, 24 are FTEs and one is grant-funded. Fifty-eight staff members are classified as time-limited. The designation neither fits the positions nor the needs of the GAL Program. Eighteen are County Coordinator positions, integral to the fundamental working of the Program. Three are Circuit Case Workers. The rest are Case Managers or Administrative Specialists, who are also essential for the running of the Program. The Program needs enough FTE slots to appropriately staff the Program throughout the state.

The Guardian ad Litem Program's goal continues to be to provide a volunteer guardian ad litem for 90% of abused and neglected children statewide. Preparation of the Accountability Report compels the Program to compare the progress made from one year to the next and to identify where deficiencies exist. No county Guardian ad Litem Program should be serving fewer than 70% of the children who need a volunteer advocate. Calculating these numbers for the report focuses attention on our recruitment efforts and highlights where efforts are creating positive results. The Public Relations team has assisted the Program with positive momentum towards this goal.

Section II. Organization Profile

1. Main products and/or services and the primary methods by which these are delivered

The Governor's Office Guardian ad Litem Program recruits, trains and supervises volunteers who speak for the best interests of abused and neglected children in family court proceedings. This is our primary mission. Abused and neglected children involved in family court cases brought to court by the Department of Social Services are our clients. Advocacy for the children is provided by appointed volunteers, who are recruited by Public Relations staff in conjunction with county staff. Volunteers are trained at the county level by GAL Program staff. Volunteer supervision is accomplished in the local county office with assistance from Regional Supervisors and state office. Public education about the prevalence of abuse and neglect of children is a secondary mission.

2. Key customer groups and their key requirements/expectations

Our customers include the children for whom our volunteers are appointed. The children should be receiving informed advocacy in the family court and in all aspects of the DSS case. The family court bench is another customer. Statute directs our volunteers to collect information and report to the judges in family court in order for the Court to be more fully informed in its decision making. Volunteers are required to supply the Court with a written report that includes recommendations in every court hearing. Defendants in the family court cases are also customers. The volunteer guardian ad litem is required to speak for the child's or children's best interest; however, the defendants can expect the volunteer to do an independent investigation and include the defendants' information in the report to the court. The defendants should expect that the volunteer advocate will diligently speak for their minor children. The volunteers are a customer group of the Guardian ad Litem Program. The volunteers receive thirty hours of pre-service training that prepares them for their appointed role, in-services that keep them informed on child welfare and advocacy topics, and support both in and out of court as child advocates.

3. Key stakeholder groups

Every case in which the GAL Program is involved is one that originates with a DSS family court action, making DSS an important stakeholder. Other key stakeholders include all child welfare organizations whose mission is to improve of the lives of children touched by child abuse or neglect, including the Department of Mental Health, the Department of Disabilities and Special Needs, the Department of Juvenile Justice, the Department of Alcohol and Drug Abuse Services, the Foster Care Review Board, the Children's Law Center, Court Administration, the Foster Parents' Association, the Citizen's Review Panel and the Children's Trust Fund. The citizens of South Carolina also have a stake in the welfare of its children and, as such, are a stakeholder group.

4. Key suppliers and partners

The South Carolina Bar has been a generous partner in supplying legal representation to our volunteers via contracts and 608 appointments. The Finance, Accounting and Human Resources Departments of OEPP are all essential to running the GAL Program. The Information Technology Department of OEPP has been a very supportive partner. The National Court Appointed Special Advocates Association (NCASAA) has been a key partner, awarding a \$50,000 state grant each year since 2000, as well as giving training support and materials, public relations materials and staff development through its conference. The Victims of Crime Act (VOCA) division of the Office of Juvenile Justice has awarded equipment, technology, & training grants for the past 4 years.

Table II.1.1 – Guardian ad Litem Program Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
State Office	Administrative functions, to include lease management, attorney contracts, utility payments, travel reimbursement, and equipment contracts	County Guardian ad Litem offices	Office of Executive Policy and Programs Human Resources, Finance, & Procurement
State Office	Legal consultation, case work support, program policy and best practices development, legislative liaison, public relations coordination and human resources functions	County Guardian ad Litem offices, and the volunteers	Office of Executive Policy and Programs Human Resources office; NCASAA best practices and public relations departments
36 County Guardian ad Litem Program offices	Recruitment, training and supervision of volunteer child advocates for DSS abuse and neglect cases in family court	Abused and neglected children, volunteers, DSS and the family court bench	Public Relations Team, SCGAL Senior staff and the Statehouse
36 County Guardian ad Litem Program offices	Assistance to volunteers to produce written reports for every court hearing in which a volunteer guardian ad litem is appointed for the family court judge and monitoring compliance to provisions of the court order	Abused and neglected children, DSS and the family court bench	The Volunteer Guardians ad Litem

5. Operation locations

The South Carolina Guardian ad Litem Program is comprised of the state office in Columbia and 36 remote, county locations. See county office locations below.

The State Office address is: 1205 Pendleton Street, Suite 477, Columbia, SC 29201.

COUNTY OFFICES:

- | | |
|---------------------|---------------------|
| Abbeville/Greenwood | Hampton/Allendale |
| Aiken | Horry |
| Anderson | Kershaw |
| Bamberg/Barnwell | Lancaster |
| Beaufort/ Jasper | Laurens |
| Berkeley | Lee |
| Charleston | Lexington/Saluda |
| Cherokee | McCormick/Edgefield |
| Chester/Fairfield | Marion |
| Chesterfield | Marlboro |
| Clarendon | Newberry |
| Colleton | Oconee |
| Darlington | Orangeburg/Calhoun |
| Dillon | Pickens |
| Dorchester | Spartanburg |
| Florence | Sumter |
| Georgetown | Williamsburg |
| Greenville | York/Union |

6. The number of employees (segmented by employee category)

23 Classified 1 Unclassified 42 Contract
 Temporary 1 Temporary (Grant) 58 Temporary (time-limited)

7. Regulatory environment under which your organization operates

The Guardian ad Litem Program operates under the statutory guidelines of the Family Code Chapter 7, Section 20. The Program's originating statute, 20-7-110, mandates a guardian ad litem for every child involved in a case of abuse or neglect proceeding in family court. Statutes 20-7-121 through 20-7-127 create the South Carolina Guardian ad Litem Program and define the role, rights and responsibilities of the volunteers that the Program recruits, trains and supervises. The volunteers are appointed to serve as the advocates for the children.

Volunteer guardians ad litem are also subject to the rules of family court. They are appointed by court order and must follow the provisions of the appointment order. Reports provided to the family court by volunteer guardians ad litem are subject to the rules of evidence.

The Guardian ad Litem Program is an affiliate of the National Court Appointed Special Advocate Association (NCASAA) and has met its compliance requirements, a major achievement. National child advocacy best practices and child welfare best practices are measured by NCASAA. The GAL Program's policies and procedures are derived from national best practice standards. Each county office is provided with a printed copy of the updated policy manual. Regular updates are disseminated by email. All staff is expected to adhere to program best practices and policy, unless expressly ordered by the Court otherwise. Volunteers are made aware of program policy at pre-service training and sign an agreement to adhere to Program policy before being assigned the first case. Volunteers sign a confidentiality agreement outlining specific policies to which they will abide at the beginning of each case to which they are assigned.

8. Performance improvement systems

Each office reports monthly from information in its county database on the number of cases received by that office, number of cases accepted, number of volunteers assigned, number of volunteers resigning, number of children served and number of court hearings attended. A statewide report is aggregated from that information and sent to every office via email. Every county office has the opportunity to see how it is performing with respect to important measures such as case acceptance, and has the chance to compare its performance with other counties of like size.

Acceptance rate is calculated by the Director, Public Relations Supervisor and Regional Supervisors monthly. Data collection from Court Administration on numbers of child abuse and neglect cases files by county is compared to database information collected by the county Guardian ad Litem offices to ascertain if all cases are being counted by the GAL Program. An individual county plan is developed for each county annually by a specific format to designate recruitment and case acceptance goals. A detailed plan for publicity for recruitment is a core part of the County Plans this year. Goals are designed to focus county offices and regional support staff on activities to meet the needs of all children who find themselves in the family court system due to abuse or neglect. Regional Supervisors meet with County Coordinators to discuss the plan and modify it based on county input.

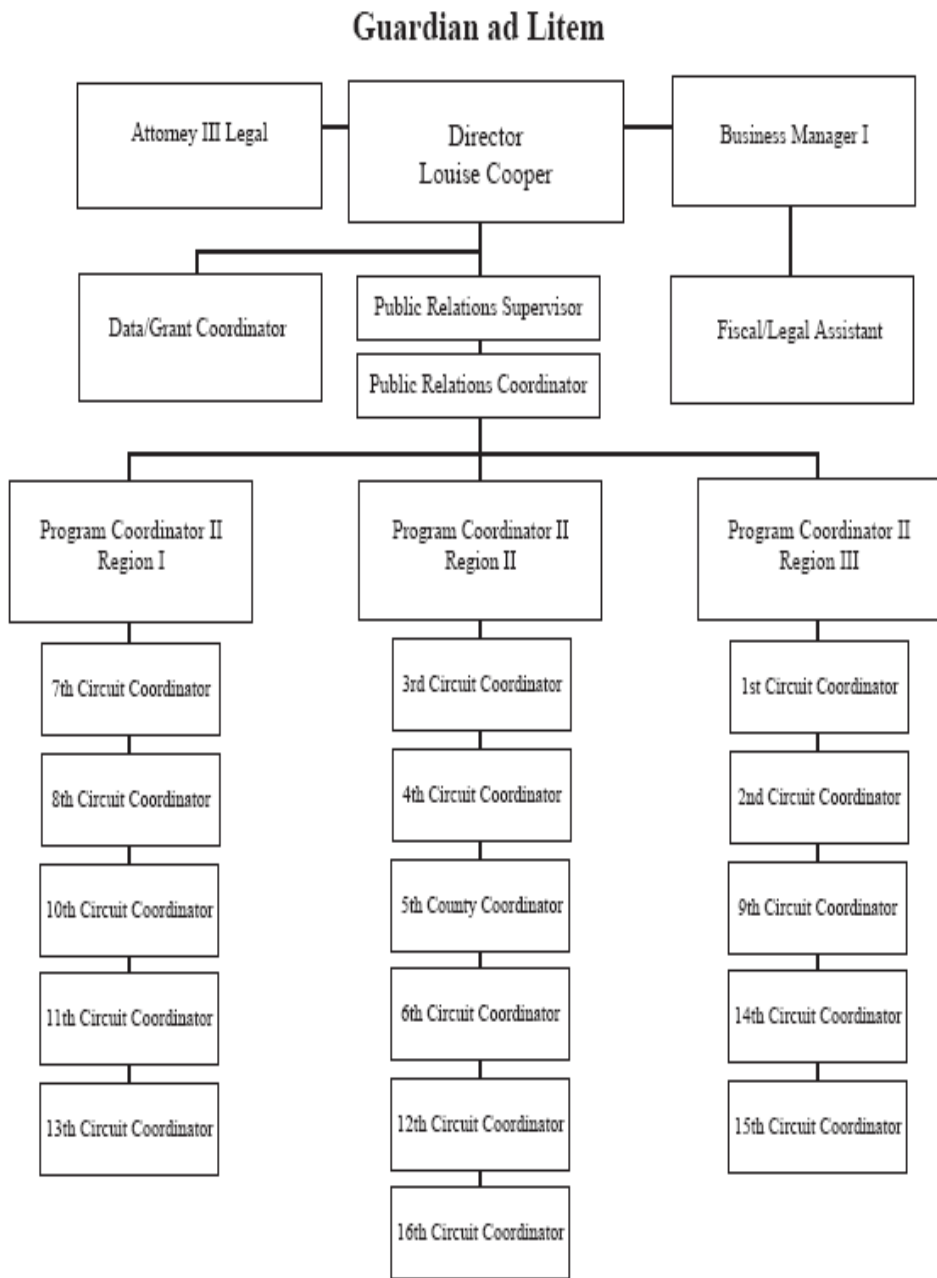
The two members of the Public Relations team have been traveling to the counties to assess the PR needs of individual counties and assist with direct implementation of recruitment plans. The PR team analyzes their data based on numbers of response to specific activity, number of attendees at functions and other measures. The Public Relations Supervisor wrote a satisfaction survey for the volunteer force. The survey was mailed in the quarterly newsletter to all

volunteers and made available on-line through survey monkey, an on-line survey tool. A small but statistically valid sample of volunteers replied. The results follow in the chart section.

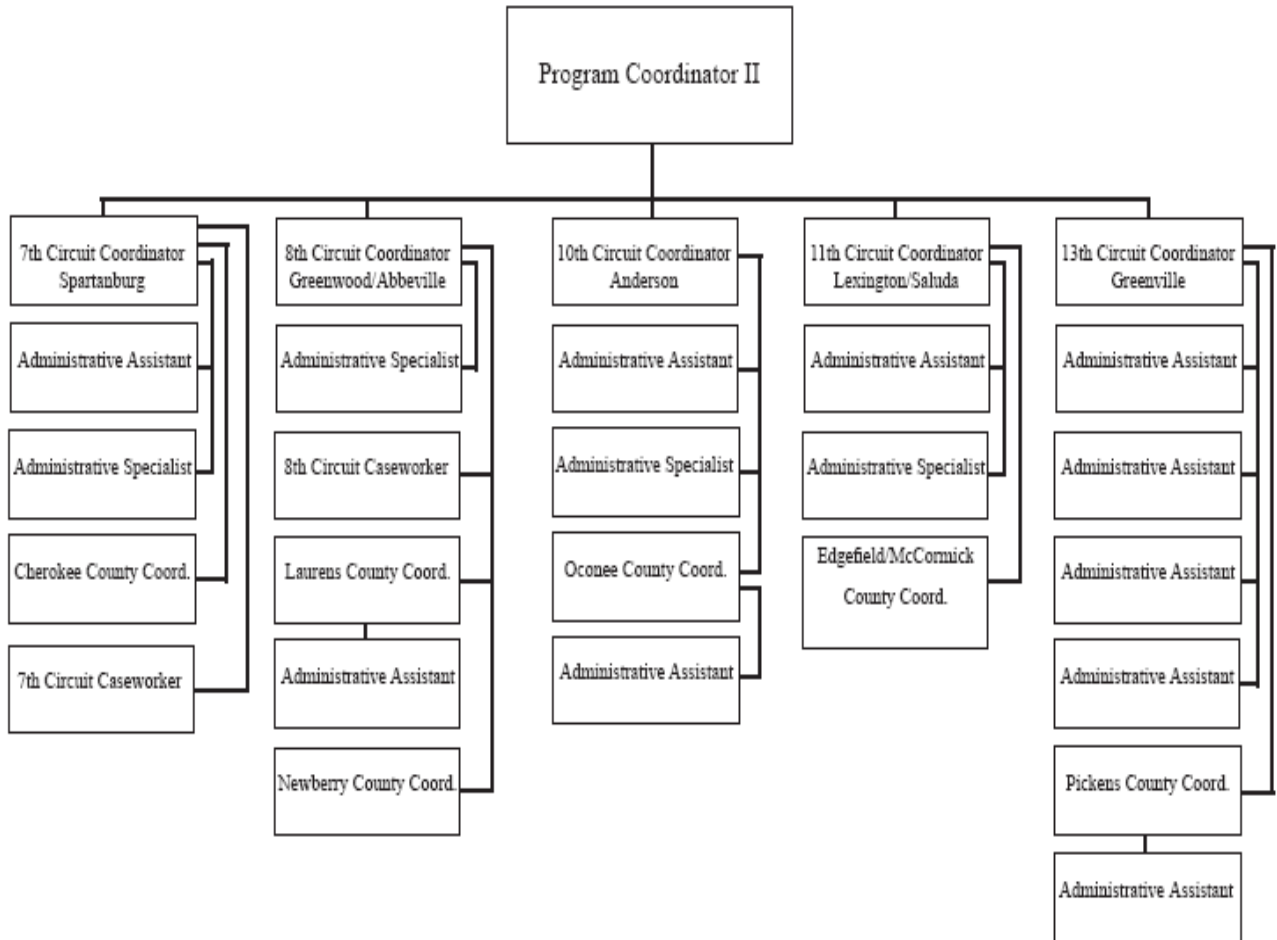
A cycle for auditing county case files has been modified this year. The Program had instituted a limited bi-monthly audit process. It became apparent early in 2007-2008 that the frequency left little time for other types of support to the county staff. Audits in 2008-2009 will be conducted on case files quarterly on no more than 3 parameters and on up to 25 randomly selected case files. County Coordinators receive a follow-up letter after the audit that outlines the finding of the audit and requests a response on corrective measures from the county. All correspondence is copied to state office and filed for the county.

All counties should be moving towards case acceptance rates of 90%, with no volunteer serving on more than a maximum 5 cases. Staff should not be assigned to more than 10% of cases statewide and that measure should be reduced over the next five years. These goals are regularly communicated via county plan meetings and statewide staff meetings which are held every other month in Columbia.

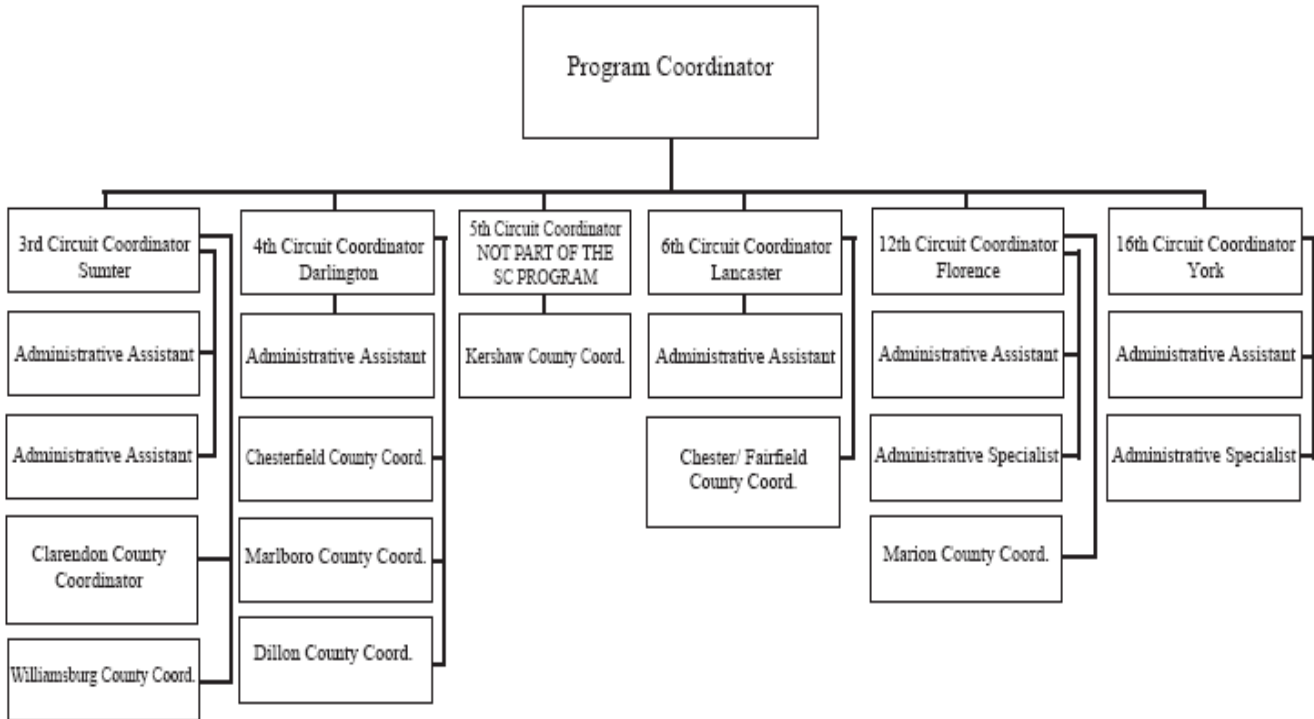
9. Organizational chart



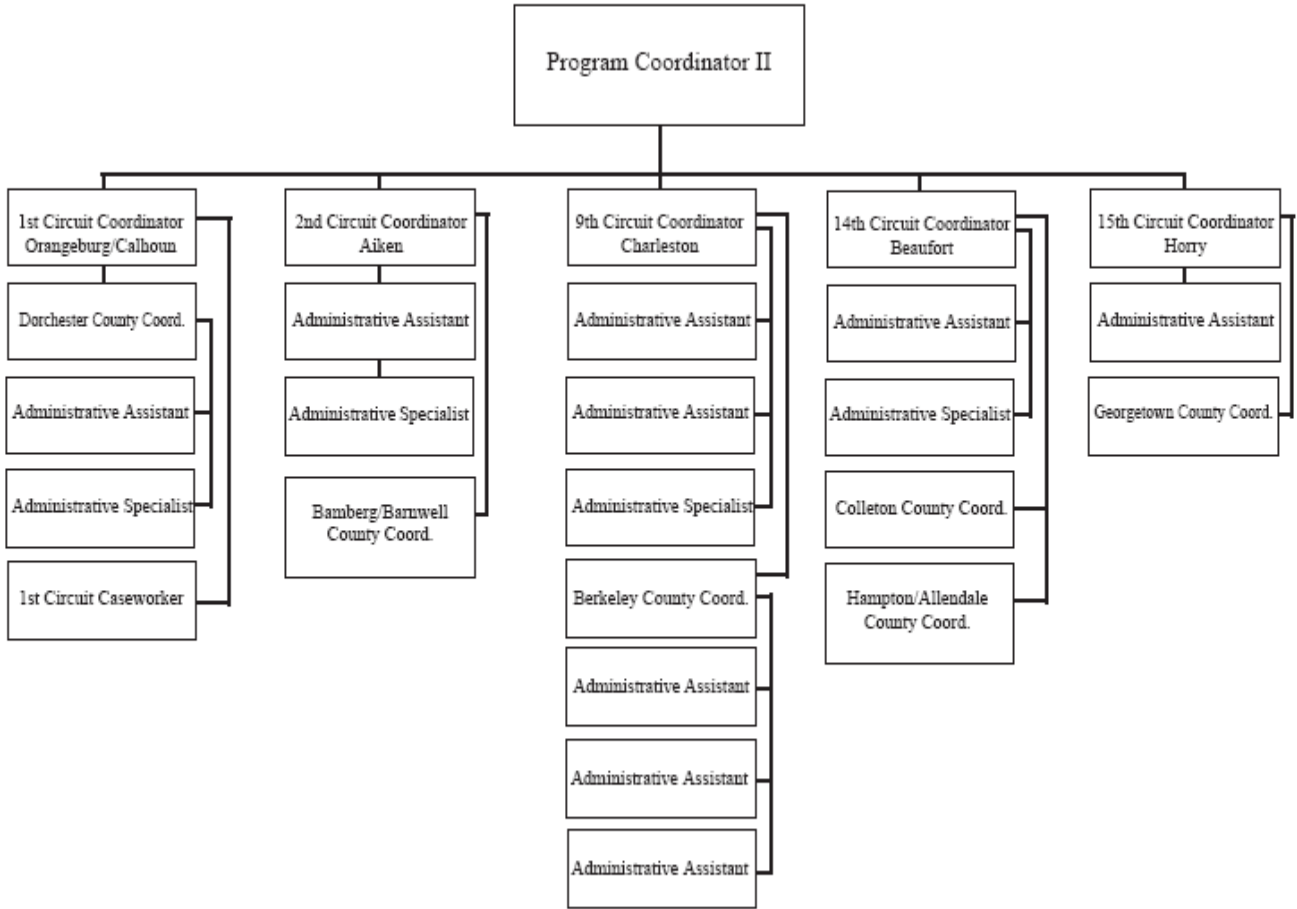
Guardian ad Litem Region I



Guardian ad Litem Region II



Guardian ad Litem Region III



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$1,859,545	\$ 741,960	\$ 2,116,749	\$ 1,045,497	\$ 2,779,220	\$ 1,061,076
Other Operating	\$ 824,669	\$ 108,254	\$ 1,173,424	\$ 176,066	\$ 958,060	\$ 172,080
Special Items	\$	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 533,752	\$ 213,105	\$ 638,839	\$ 315,166	\$ 980,141	\$ 244,048
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$ 3,217,966	\$ 1,063,319	\$ 3,929,012	\$1,536,729	\$ 4,645,421	\$ 1,477,204

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross References for Financial Results*
D-17 South Carolina Guardian ad Litem Program	Recruit, train and supervise volunteer guardians ad litem in child abuse and neglect proceedings brought to family court by the Department of Social Services in 45 counties.	State	1,063,319	State	1,536,739	Graph 7.1-1 Graph 7.2-1 Graph 7.3-1 Chart 7.4-1
		Federal	8,771	Federal	85,010	
		Other	2,145,876	Other	2,307,273	
		Total	3,217,966	Total	3,929,012	
		% of budget:	5%	% of budget:	6%	
Below: List any programs not included above and show the remainder of expenditures by source of funds.						

Remainder of Expenditures:	State:	State:
	Federal:	Federal:
	Other:	Other:
	Total:	Total:
	% of Total Budget:	% of Total Budget:

*Key Cross-References are a link to the category 7 – Business results. These References provide a Chart number that is included in them7th section of this document.

Section III. Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

1. How do senior leaders set, deploy and ensure two-way communication for:

1.1 Short and long term organizational direction and organizational priorities:

Senior staff members meet regularly to discuss trends in child advocacy nationally, examine the impact of those trends statewide, and set priorities for movement towards goals as a state program and for individual county offices. Annually the GAL Program sets goals for service to the children who come into the child welfare system through DSS court cases. Based on the statistics from the previous year, an individual county plan is written for each office, setting a plan to recruit volunteers and a percentage goal of service to children. A monthly report from our COMET database that indicates the success of the local offices and state program monitors performance. The long term goal of the Guardian ad Litem Program is to meet the needs of 90% of the children in South Carolina who need a volunteer advocate in a child abuse or neglect proceedings. Short term goals include meeting a satisfactory level of the best practices standards for child advocacy set by the National CASA Association (NCASAA). The state program and each individual county office have achieved best practices compliance goals. Staff is well-acquainted with best practice standards through meetings and policy publications. Communications concerning goals and priorities are frequent between county staff of all levels and Regional Supervisors, the Public Relations Supervisor, General Counsel and the State Director via email, telephone, meetings and trainings.

1.2 Performance expectations:

Staff members have copies of job descriptions for each position. Each month every office receives the aggregated database report that shows the performance of the county for a number of performance parameters. Every county has a county plan that outlines goals and performance objectives related to child service and volunteer retention and recruitment. County Coordinators participate in the plans' creation. Employee evaluations are conducted annually or as needed.

1.3 Organizational values:

The Policy and Procedures Manual sets forth best practice standards for child advocacy and volunteer supervision. Organizational values that impact child advocacy are a part of the volunteer training that every employee of the SCGAL Program must also attend. The values include placing the best interests of children first in all case work decisions, which is consistent with the underlying intent of the Children's Code. The Human Resources policy of the Office of Executive Policy and Programs sets standards for employee relations.

1.4 Ethical behavior:

Ethical issues of major concern for the staff and volunteers of the Guardian ad Litem Program include maintaining confidentiality in case work, maintaining confidentiality concerning volunteer applications, and investigating the facts of cases sufficiently to inform the Court with accurate information. Training staff and volunteers is the responsibility of senior leadership and sets the tone for the Program's standards on these matters. Face-to-face or telephonic case staffings are the mode of communication with front-line staff members about ethical child advocacy.

2. How do senior leaders establish and promote focus on customers and other stakeholders?

The GAL Program focus is narrow and specific, and permeates all meetings, trainings, and publications. Collaboration with the SCDSS and other child welfare entities who are stakeholders is modeled by senior staff through monthly partners meetings held at state DSS that are mirrored in meetings held quarterly at the county level. Senior staff recognizes volunteers as customers of the GAL Program. A survey of volunteer satisfaction was distributed via the volunteer newsletter in 2007-2008. A significant number of volunteers responded. The results were compiled and analyzed in order for the senior staff to assist county staff to improve those areas where volunteers indicated a need for improvement. In fact, volunteers rated satisfaction with county staff and the support as excellent.

3. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

The Guardian ad Litem Program impacts communities by assisting children who have been abused and neglected to find a safe, permanent home as quickly as possible. One associated risk could be to have volunteers who are not adequately trained for the complex task for which they are assigned. To combat that risk the Program provides a 30-hour free training, interviews the volunteers extensively before service, and provides in-service hours of continuous education. Volunteers also have required record checks for previous criminal or child abuse findings, including NCIC checks on volunteers who have not lived in South Carolina for more than 5 years. Training Program staff is also essential. Volunteers are retained longer and are more satisfied when they have knowledgeable staff members to support and supervise them. Volunteer supervision is statutorily mandated, in order to protect vulnerable children.

As more volunteers are recruited, the public is more fully educated on the dangers of child abuse and neglect. Volunteer guardians ad litem learn that children who are abused often become the prison population of tomorrow, a sad consequence for both the victims and the community. The impact of public awareness is to help children find safe, permanent homes today and hopefully have fewer damaged and destructive former child victims in the future.

4. How do senior leaders maintain fiscal, legal and regulatory accountability?

Fiscal accountability is regulated through the finance and accounting offices of the Office of Executive Policy and Programs division of the Governor's Office. The state office of the Guardian ad Litem Program processes all office leases, utilities payments for the 36 offices and other program-related expenditures such as travel reimbursement and equipment purchase. However, procurement and accounting staff in OEPP handle the final payment. All purchases of equipment are reviewed by the Director of Administration. The SCGAL Program is responsible for operating within its budget and has consistently had carryover from its 2% fund for the last three years. An audit by the Legislative Audit Council (LAC) in 2007-2008 found no fiscal oversights.

5. What performance measures do senior leaders regularly review to inform them on needed actions?

Each month, senior staff measures county by county the number of children served, number of cases accepted, number of cases turned back for assignment to attorney guardians ad litem and the number of current volunteers through the COMET monthly report. The Program also maintains the number of termination of parental rights actions filed in cases for which there is an appointed volunteer guardian ad litem and the number of volunteers who have resigned that month. These measures are on the monthly report that all staff receive and are derived from the COMET database. These measures are aggregated for the state monthly at the end of the calendar and fiscal years. County offices report the training dates they are proposing for publication to the website. Performance in these categories gives an overall picture of the vitality of a county program. Success is measured by service to children.

6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?

The county plan process provides for regular and consistent evaluation of county programs. Regional Supervisors can evaluate their success as leaders by the performance of the counties they supervise on attaining the goals set for the year. Annual performance evaluations give staff members a chance to voice their needs for supervision. Regional Supervisors, the Public Relations Supervisor and the General Counsel all receive annual evaluations from the Director. In addition, there are frequent conversations about effective management techniques. As mentioned above, county performance measures are an indication of senior staff success. The Director's success is measured by an increasing number of children served and an increasing volunteer pool. In addition, the Director measures success by staff retention as compared to comparable child advocacy organizations. Operating within the Program's budget, while promoting the necessary growth to serve more children, is also an important success indicator for the Director.

7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

Senior staff members, through the annual EPMS evaluations, have the opportunity to recognize employee strengths and weaknesses. The Guardian ad Litem Program requires its employees to hold diverse skills. Each employee has skills that are stronger than others. Senior staff is asked to identify particular abilities in employees for development. Skill identification enhances employee satisfaction and gives the Program the benefit of the employees' best aptitudes. It increases employee retention and builds additional expertise. This process has been responsible for the promotion of two internal candidates to public relations positions and one to a data coordinator position.

8. How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?

Regional Supervisors involve County Coordinators in the development of the individual County Plans. County Coordinators have the opportunity to see an objective measure of their goal performance. Through this process the county staff can identify particular county obstacles and opportunities. The addition of a public relations team to assist county staff members with recruitment efforts maintains county ownership of the process while providing quality materials and products to attract new volunteers.

9. How do senior leaders create an environment for organizational and workforce learning?

The entire guardian ad litem staff comes together for staff meetings and learning opportunities. Senior staff meets with regional staff through regional staff meetings and in individual county offices to improve staff competency, assists with volunteer training and conducts in-services.

10. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

Senior staff recognizes special accomplishments at meetings and via email to all staff. The expense of bringing all the staff to Columbia to meet and the time away from the business of the county offices are deterrents to face-to-face recognition. Regional meetings have been used this year to combat these problems and help staff members maintain contact with each other. Leadership is frequently in the county offices to coach, mentor and support.

11. How do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

The leadership of the GAL Program participates in efforts with stakeholders to make every facet of the state and local child welfare system more efficient and effective. Senior staff, through, county offices, are involved in programs where clothing or toiletries for foster children are collected for distribution when the children come into care. These efforts are possible because the county GAL office has become affiliated with a local non-profit or church group that provides the goods. Senior leaders guide the projects in which counties choose to participate, but give discretion to the county offices. At the local level, GAL staff members have sensitivity to what organizations are best able to assist children.

Category 2: Strategic Planning

1. What is your strategic planning process, including key participants, and how does it address:

The strategic plan for the South Carolina Guardian ad Litem Program is updated each year as part of the grant application for the National Court Appointed Special Advocate (NCASAA) state grant. The grant is written by the state director, with assistance from the Data Coordinator and the Business Manager. The GAL Program General Counsel and Regional Supervisors also contribute to developing annual programmatic goals in the strategic plan. Senior Staff develops individualized County Plans with input from county staff to increase service to more children. This year we have combined the Public Relations Plan for recruitment of more volunteers into the County Plan. Throughout the year, statistics are reviewed to determine if the county is on track for goal attainment. If not, then a revised goal is set. Progress is measured by increased case acceptance and increased volunteer recruitment and retention.

1.1 Your organizations' strengths, weaknesses, opportunities and threats;

The strategic plan addresses the strengths, weaknesses, opportunities and threats of the organizations by objectives measurements that either set a goal for improvement on a measure of performance or identify a goal of maintaining performance levels. The Program's strengths are recognized by maintaining performance; weaknesses are reflected in new performance measure goals. Opportunities are addressed by adding goals based on existing performance positives. Threats are minimized by adherence to best practices and strictly following statutory mandates.

1.2 Financial, regulatory, societal, and other potential risks:

In our existing strategic plan, under Staff and Volunteer Development, objective E, the plan is to "Disseminate current information to local GAL programs regarding federal and state legislation, policy changes, trends in child welfare and court improvement as well as court decisions that impact the work of GAL programs." GAL staff is made aware of potential risks, and staff in county offices brings risks to the attention of the state office. We address financial risks by careful, long-range planning. Because personnel expense is approximately 75% of our budget, this includes identifying trends of caseload growth to determine where any new staff position may be necessary. Senior staff members have to decide which counties are most in need and make changes as funds allow.

The state office monitors national, legal, and policy trends in volunteer advocacy through its director and general counsel. This information is relevant to the Program's strategic plan. Participation in child welfare stakeholders groups, including the Bench/Bar committee and the Governor's Task Force on Foster Care and Adoptions, impacts program planning. The Guardian ad Litem Program has the opportunity to voice its perspective in those groups. The GAL Program attempts to impact the regulatory climate for child welfare through participation. The GAL Program also seeks to impact societal risks to children by its strategic goal of public education. The publicity for the volunteer guardian ad litem opportunity is certainly meant to create more advocates; it has the additional result of making the public aware of child abuse and its frequency. In general, the GAL Program's strategic planning process is written annually but reviewed and revised as a constant evaluation of programmatic needs. The goal is to be as responsive as possible to evolving circumstances either positive or negative.

1.3 Shifts in technology, regulatory, societal and other potential risks, and customer preferences:

In the past fiscal year, the GAL Program began the process of providing the remote offices with direct internet service where possible. In some rural areas, the costs had previously been prohibitive. We plan to implement DSL in every office this year, without the cost being excessive. This is a component of our plan to accommodate technology needs. We have also designed a pilot effort in conjunction with the OEPP IT office to bring IT assistance directly to the remote offices rather than have the county staff travel to Columbia for assistance. If successful, the Program will explore means of making this a full-time service. One risk that the GAL Program is researching is that which arises from the increased use of email for confidential information. Electronic transmission of information is not now addressed in the Program's policy manual. This is a current topic that is being addressed.

1.4 Workforce capabilities and needs:

The strategic plan has objectives and steps for training staff and volunteers, providing updates on new information, support for key county program performance measures through senior staff and volunteer recruitment and retention. Evaluation of performance on county plans highlights capabilities for individual staff members. Evaluation of caseload trends determines the need for new staff in each county office. The need of staff members for assistance or training is determined by on-going evaluation of the database numbers. All of these evaluations are on-going at the state office.

1.5 Organizational continuity in emergencies:

The GAL Program has submitted an emergency plan to NCASAA that details the Program's actions to contact all remote staff during a natural disaster or epidemic. Program policy is that county staff backs up its daily input of COMET data in the larger counties and every few days in smaller counties. The backup disk is to be removed from the building but secured with a staff member each day. The importance of this practice was demonstrated recently when the Lancaster County GAL Office was destroyed by fire. The COMET data was with the Case Manager. Of particular emphasis in our data protection is the physical location of the children we serve. In the event of an emergency, we would be a source for law enforcement and DSS child locations. The GAL Program has compiled a list of its children that need priority evacuation in the event of an emergency for submission to the Governor's emergency management division. The Data Coordinator has a statewide data set that is externally stored and portable for removal to a safe location in the event of an emergency. The purpose is to ensure that the Program can return to operation as quickly as possible and assist with safeguarding children.

1.6 Your ability to execute your strategic plan:

The strategic plan, as currently written can be accomplished through the COMET database collection, data dissemination, County/Public Relations Plan implementation, and county and senior staff commitment to the Program's goals. The plan focuses on achievement of the main mission to field well-trained advocates in sufficient numbers for abused and neglected children. Every goal supports that mission, making the strategic plan relatively narrow in its focus and objectives.

2. How do your strategic objectives address the strategic challenges you identified in your Executive Summary? (Section I, Question 4)

The strategic challenges identified in the Executive Summary are:

1. finding and supervising volunteers who wish to perform difficult and complex child advocacy;
2. training those volunteers well;
3. funding adequate staff to support and supervise the volunteers;
4. having the ability to remove a volunteer if he/she is found to be in violation of the required duties;
5. providing training regularly to a dispersed staff;
6. finding resources for mileage reimbursement so that volunteers will not be impacted financially on order to visit the children;
7. raising public awareness of the need for child advocates and the prevalence of child abuse and neglect.

The strategic objectives of the Guardian ad Litem Program are grounded in one goal: to have a well-trained, appropriate volunteer for every abused or neglected child who needs one. The objectives to have more staff and more volunteers directly flow from that goal. The need for publicity is driven by that goal.

While the goals of the Program are constant, the planning is dynamic. As already noted, 75% of the program's budget is in personnel. The objective is to have support staff in the counties where the children need us. The strategic process for the GAL Program includes closely monitoring the funds the Program has as they become available. All changes are made on a two to three year basis. Any additions to staff are calculated to be funded for multiple years on existing funds, which is possible because of the nature of the Program's other funds. Decisions about staff changes or additions are made based on analysis of trends in caseload over several years. The need for numbers of volunteers is determined by the number of cases that were filed in a county for the last year. Projected population growth is considered, as well.

The public relations efforts this past year have been successful. Publicity plans need consistency to continue to grow. The current public relations team provides the focus that PR efforts need and assists the very busy county staff with recruitment of volunteers. As we grow the numbers of volunteers, the need for more staff to supervise has been apparent. In concurrence with LAC-identified needs, the Program has increased the hours of many of its part-time employees to achieve that goal. Careful management of resources has allowed for the addition of staff in critical spots.

The strategic goal to train staff and volunteers adequately is addressed in part through regional meetings and local in-service training. Attendance at trainings by other child welfare groups also provides specialized education.

Of the challenges noted one that has not been addressed fully is the expense of gas. Volunteers bear the expense of travel to visit children, some of whom are placed at great distance. The Program has asked county staff to take volunteers on the visits as often as possible because we can reimburse staff, but not volunteers. The extra expense is well worth it, and the Program has been able to absorb this year's cost. The challenge for this solution is the extra time it requires of staff. Once again this brings us back to the need for adequate staff to support the volunteers. Another possibility is a legislative change to allow volunteers to be reimbursed for travel up to a pre-determined limit per year.

The challenge of a mechanism to allow the Program to reasonably remove volunteers who are in violation of required duties must be resolved with legislation. That avenue is being pursued.

Chart III.2. Strategic Planning

Program Number And Title	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
D-17 Guardian ad Litem Program	Hire a 4th Regional Supervisor for staff and volunteer development & support for GAL county programs.	More ably assist county staff with volunteer & staff training and problem case management. Audit staff files and data more consistently.	Graph 7.1-1, Graph 7.1-2 Graph 7.2-1
Guardian ad Litem Program	Change time-limited positions to FTE positions in order to support the appropriate staffing of existing GAL county programs.	Create stability and value for positions within the Guardian ad Litem program, ensuring that the Program attracts and retains valuable staff members.	Chart 7.4-1 Table7.4-2
Guardian ad Litem Program	Increase volunteer assignment to child abuse and neglect cases by 15% through public relations efforts individualized to each county.	Increase production and use of public relations materials generated by the public relations team to increase volunteer recruitment.	Graph 7.1-1 Graph 7.1-2 Graph 7.2-1
Guardian ad Litem Program	Expand DSL service to all county offices. Support and provide technical assistance to local GAL programs for better case management and staff and volunteer education	Increase accessibility for staff and volunteers to information, continuing education and communication through better technology.	Graph 7.3-1

3. How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your actions plans?

Monthly assessment of COMET data and feedback from county staff provide the necessary information to determine where additional staff is needed. Regional Supervisors provide additional information about the areas where they act as training and recruitment support for the counties. The Public Relations team identifies what efforts have been made towards recruitment goals. All of our data indicate that we need more staff members to adequately supervise additional volunteers. The decision to request new positions is based on an analysis of the Program’s last fiscal year budget, closely monitoring our expenditures and any increase in operational expenses, and monitoring the performance of the 2% fund, which is highly variable. Requests for new positions or expansion of existing ones is based on whether the GAL Program can sustain the additional positions on existing funds for more than one year. The addition of a 4th Regional Supervisor can be sustained.

The change of staff from time-limited to FTE would have a one-time expense to the GAL Program for pay-out on accrued leave. The total would be \$85,355.36. Because the current time-limited positions have benefits, once made FTEs, they would not impact the state budget negatively. The goal was developed in response to the awareness that the current time-limited designation is incorrect.

Accurate tracking of case rejections and acceptances have resulted in improving the Program’s rate of new case acceptance by 6% this year. The goal to increase acceptance statewide of new cases by another 15% was developed when data analysis showed that performance improvement in key counties would be the best way to increase advocacy to children. It is

imperative to serve children in all counties, but targeting efforts in Charleston and Greenville could help the most children in the fastest way. Gains in those counties will result in the percentage increase. More importantly, the actual number of children that are now lacking a volunteer would plunge if those counties were able to field more volunteers. Recruitment efforts are being focused in both places through our PR team and Regional Supervisors.

4. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

Information is communicated via email, state and regional staff meetings and face-to-face meetings in county locations. Goals for performance are a part of County/Public Relations Plan development.

5. How do you measure progress on your action plans?

Each month the monthly COMET database statistical report measures key performance numbers for each county and is totaled for the state. An annual report is done on the calendar and fiscal year for bi-annual reports. County Plans have been re-developed with the Public Relations component. They are assessed annually in the first quarter of the fiscal year. They are due for completion from the Regional Supervisors by the end of August. Grant based activities, such as the public relations goals set for the NCASAA grant are monitored through the grant term with monthly reporting and bi-annual reports on goal achievement.

6. How do you evaluate and improve your agency's strategic planning process?

The strategic planning process is improved by constant measurement of goals and re-evaluation of the action plans. Combining the County Plans and the Public Relations Plan was a refinement that arose from senior staff discussion. Regular evaluation of which goals are being achieved in which counties and how the process worked in those locations is a key to improve strategic planning for the future.

7. If the agency's strategic plan is available to the public through the agency's internet homepage, please provide a website address for that plan.

The strategic plan can be accessed through the Guardian ad Litem website at <http://www.oepp.sc.gov/gal>

Category 3: Customer Focus

1. How do you determine who your customers are and what their requirements are?

Customers of the Guardian ad Litem Program include the persons and agencies involved in family court cases of abuse or neglect of a child and brought to court by the Department of Social Services. We determine who are customers are by noting those who are the active parties in a case. These include:

The child victims require well-trained advocates who conduct independent assessments of the facts of the case, provide consistency and compassion for the child, and make recommendations based on the child's best interest.

The family court bench requires that the GAL Program provide a pool of appropriate volunteer guardians ad litem for appointment by the bench and upon whom the bench may rely to bring relevant case information to all hearings.

DSS requires that the GAL Program communicate professionally with the agency. The Program provides volunteer child advocates who can collaborate with DSS and share information about the cases to which they are assigned for the purposes of assuring that abused and neglected children receive safety and stability as quickly as possible.

Defendants in the family court abuse and neglect cases require an advocate for their child that will interact with them sufficiently to hear the defendants' perspective and present to the court a balanced child-centered report that speaks to the child's best interest.

2. How do you keep your listening and learning methods current with changing customer/business needs and expectations?

Staff members attend in-services and conferences that hone case management skills. Regional and statewide staff meetings present opportunities for staff members to present an example of difficult case resolution for discussion. Our affiliation with the National Court Appointed Special Advocates Association (NCASAA) provides us with information on trends in the field including case management.

3. What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Volunteer guardians ad litem are required to visit the children for whom they are appointed monthly if at all possible. The child may directly ask questions and should have frequent access to their guardians. If children have a complaint, they may tell their DSS case worker or foster parent who should relay the concern to Guardian ad Litem county staff. Older children may voice their complaints to the volunteer or ask to come to court and speak to the judge.

The family court bench has direct access to county staff, regional staff and state staff for any matter. Should they have a complaint they may contact the Program at any level which they feel is appropriate. The bench may also address concerns with the local county contract attorney for the Program.

DSS and the Guardian ad Litem staff meet at all levels frequently. The access mechanisms are staffings about case matters, cross trainings, phone calls and email. Complaints will follow the chain of command through the county office to the regional staff to the state office, if necessary.

Defendant parents should be interviewed at the inception of a case by the volunteer guardian ad litem and met with during the pendency of the case with enough frequency for the volunteer to access the defendants' progress in the case. Defendant parents may address any complaints to the county GAL staff. They may also take complaints to the state office or to the Governor's Office Constituent Services division for investigation and resolution.

4. How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?

A three year cycle of customer satisfaction surveys began in 2007-2008 with a survey of volunteer satisfaction, an internal measure. A formal survey of judges is planned for the fiscal year 2008-2009. A formal survey will be conducted in 2009-2010 of DSS staff. Defendant satisfaction is largely measured by the number of complaints, since it is difficult to survey this population without a breach of confidentiality. It is difficult to measure the satisfaction of our children, except anecdotally.

5. How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Volunteer feedback when they must leave the Program is valuable as a means for determining if we are providing adequate support to them. The family court bench can and does give us valuable feedback both formally and informally. They inform us as to the type of information they need to render informed decisions. The GAL Program meets monthly with state DSS and

other stakeholders to discuss any concerns. Issues as they are brought up inform the discussions of senior staff with county staff and keep us sensitive as to how we can improve our advocacy. Complaints from defendants make us aware of any type of deficiency in particular cases. We directly address the concerns with the assigned volunteer.

6. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?

The relationship with the children may be the hardest to measure, but the easiest to build positively. The way to build a positive relationship with our children is to visit them at least monthly and let them know you will be consistent in seeing them. Talking with the children in an age-appropriate manner and asking them what they want the judge to know gives them some control in their lives.

The way to build a positive relationship with the family court bench is to be present for court, with a report that is fact-based and pertinent to the needs of the child. The volunteers build credibility for themselves and more importantly for the child each time they demonstrate that they have done an independent investigation into the case.

To build a positive relationship with DSS or other child welfare agencies, the GAL Program asks its staff and volunteers to behave professionally even in the midst of disagreements. The Program values collaboration and expects that our volunteers and staff will conduct themselves for the best interest of children.

Building a positive relationship with Defendants in a child abuse and neglect case is not impossible. The GAL Program has a value that supports treating all individuals with respect and conducting our case work on the assumption that we must ask the questions before we can have answers. Understandably, in a situation where a volunteer or staff member recommends that a child not return home, defendants are often unhappy. Treating the defendants fairly and being straightforward with them assists with as positive a relationship as may be had. In cases where families are reunited and lives improved, defendants often feel very positive about the volunteer guardian ad litem.

Category 4 Measurement, Analysis and Knowledge Management

1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

The Guardian ad Litem Program utilizes a database collection system that was developed by the National Court Appointed Special advocate Association (NCASAA). It is designed to track case information and court hearing information in advocacy work.

The GAL Program tracks through its COMET database the following measures:

1. the number of children served;
2. the number of cases served;
3. the number of volunteers trained and resigned;
4. the number of cases rejected;
5. the number of termination of parental rights (TPR) cases filed;
6. the number of volunteer hours of service.

These are collected by county monthly, at six months, and annually and aggregated for the state manually. The calendar year totals and fiscal year totals are derived for each county and the state. Based on these measures, the Program makes decisions about where there exists a need

for additional personnel and where to request additional personnel hours. National best practices suggest that there should be a full-time staff person for every 30 volunteers that are supervised. This guidance and our collections of numbers of cases and volunteers, along with knowledge of the geographic territories over which some personnel are working, determine our placement and request for staff positions. The GAL Program operates efficiently. Rent, utilities, supplies and travel per county office and state office are among the items tracked for expenditure. Approximately seventy-five percent of the GAL budget has been expended on personnel expenses because those resources are essential to conduct advocacy for abused children. The Program has kept operational expenses low and seeks to minimize expenditures by seeking rent-free office space through county government where possible and funding special projects for recruitment through state and county grants. Operational expenses are totaled quarterly.

2. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?

The number of children who enter the child welfare system because of abuse or neglect selects the parameter for measurement. Measures from the COMET database tell us if the Program is meeting its core mission of providing volunteer advocates. The types of measures are selected by the database. County staff inputs the raw data for each case and enters the data on case progress through the pendency of the case. At the state level, through analysis by senior staff, information from the database and other sources such as DSS and Court Administration reports, the Program determines which counties are meeting the need for volunteer advocacy. The information is used to create innovative solutions such as the Circuit Case Worker, where a staff member performs as the guardian ad litem in counties that require the Program to serve on cases regardless of volunteer availability. There are now 3 Circuit Case Workers after a successful pilot project in the 8th Circuit. The need for a 4th Regional Supervisor was indicated by the information gathered from county staff about their need for assistance on site with training and problem case resolution. The need for full-time public relations work was determined by reports from staff members that assistance with recruitment was their greatest need. As the Program responds to the need shown in data and by staff report, there is continuous monitoring and re-evaluation. The County Plan is meant to assist County Coordinators to set performance goals that will meet the needs of the children coming into the system. The goals set in the county plans include the number of volunteers that would be needed to serve every case, the projected caseload expected for the next year, the number of trainings needed, and strategies for retention of existing volunteers. Public relations actions have been added this year. Public relations staff members assist the county staff in performance of those goals.

3. What are your key measures, how do you review them, and how do you keep them current with organizational service needs and direction?

Key measures: monthly and annually by county and state

1. Number of new cases
2. Number of children in new cases
3. Number of cases closed
4. Number of children in closed cases
5. Total number of cases served
6. Total number of children served
7. Volunteer total
8. Number of volunteers who resigned
9. Number of volunteers trained
10. Number of cases turned back for attorney appointment
11. Number of children in cases turned back
12. Volunteer hours of service
13. Number of staff members assigned to cases

4. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

The Guardian ad Litem Program uses national best practices measures which provide comparative data against which to measure performance. Data indicate where the need for staff is greatest, due to heaviest caseloads and largest geographic areas. In addition to the information we collect, we use Kids Count demographic data, Court Administration data on child abuse and neglect cases filed, and information from the Department of Social Services to balance our picture of the needs of each county and judicial circuit throughout the state. Innovation derives from analyzing the data and recognizing that new activities will be required for solutions to the problem of recruitment of volunteers in a particular area. New recruitment ideas and staffing plans have been implemented based on the current data. Projections of population growth impact planning for each county personnel placement and recruitment actions. Innovative ideas, such as the Circuit Case Workers and creating a public relations team, have been referenced above.

5. How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

New staff is trained on the use of the COMET database by the Data Coordinator in a specialized day-long class. County and state staff are trained and updated on the COMET database system as it evolves and new versions are produced. The Data Coordinator monitors data input by counties randomly and through the monthly reports that are due for submission by the 10th of the next month. The statewide report is then aggregated by the Data Coordinator. As a check and balance measure, the GAL Program compares its case acceptance and turn-back total with numbers of child abuse and neglect cases filed through Court Administration and explores discrepancies. All staff has access to our Data Coordinator for questions and problems. We also have access to a member of the OEPP IT staff who is versed on the GAL computer image and COMET. Ultimately data integrity begins and ends at the county level. Decisions to add hours to existing staff member positions and to add support staff are partly an attempt to provide enough assistance to the counties to keep COMET accurate and up-to-date. The data is essential to ensuring the GAL Program stays on track in its mission.

6. How do you translate organizational performance review findings into priorities for continuous improvement?

The County Plans were implemented to quantify performance goals for improvement. The public relations piece was added to give concrete steps for consistent recruitment efforts. To meet goals of serving more children, recruitment goals are necessary. The plans are designed to give county programs a set of attainable goals for a specific period of time. The system of auditing each county every quarter for a limited number of items creates a rotating performance review and allows a county to focus on correction to its operations on a manageable level.

7. How do you collect, transfer and maintain organizational and employee knowledge (knowledge assets)? How do you identify and share best practices?

The Guardian ad Litem Program has a policy and procedures manual for program-specific issues and relies upon the Human Resources division of the Office of Executive Policy and Programs for human resources policy. Both are available to staff through the intranet, as well as in written manuals. Organizational and employee knowledge is maintained through development of a shared drive at the state office to collect and organize information for the smooth succession of Program knowledge and history. These include business information, county specific expenditures, DSS policies and the GAL Program training manual. All grant proposals are maintained in the shared drive. Reports from national organizations and surveys to the GAL Program from national organizations are collected and stored for easy access. New management should have immediate access to all of this preserved material.

Questions of policy changes are frequently placed to the entire staff via an email query. All staff can give its opinion of what policy should be. Senior staff compiles the information and weighs what policy should become. Decisions about policy are distributed via email for inclusion into the Best Practices Manual in each office.

Category 5: Workforce Focus

**1. How does management organize and measure work to enable your workforce to:
5.1 Develop to their full potential, aligned with the organization’s objectives, strategies, and action plans;**

The state office of Governor’s Office Guardian ad Litem Program is responsible for all business matters, including office leases, contracts for attorneys, payment of operational expenses, ordering supplies, and budget matters. The state office also coordinates standardization of child advocacy throughout the state, assists with case resolution and conducts legal research and support. All data management is coordinated through the state office. Grants are written and managed by the state office. The remote offices are organized by judicial circuit. Each circuit, except the 5th Circuit, has a Circuit Coordinator who participates in the supervision of the counties within the circuit. Regional Supervisors supervise Circuit and County Coordinators, who in turn supervise Case Managers and Administrative Specialists. This system of business and management support to the county offices allows emphasis on support of volunteers and direct child advocacy at the county level.

5.2 Promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

Positions within the GAL Program require flexibility, creativity and interconnecting skill sets. Staff members need to be proficient case managers, exhibit cultural sensitivity, perform data collection and extrapolation, write well, teach well and assist volunteers with preparation for court hearings. These skills are diverse and staff members possess them to varying degrees. As specific talents are recognized among staff members, those gifts are utilized for the whole of

the circuit or region. Within offices, the program tries to hire staff with complementary skills. In one person offices, attention is given to what strengths can be called upon in the Circuit office. In some instances talent identification has resulted in a state-wide position such as the Public Relations position full-time position and the part-time public relations grant position. The Data Coordinator position came about through recognition of specialized skills and the need of the program for those skills.

Volunteers are also relied upon when specific talents are identified. The volunteer application asks each applicant if there are other areas besides being the GAL for which the applicant would like to volunteer. Across the state we have had volunteers who have assisted with training, acted as speakers for recruitment purposes, designed and implemented a study on the reason for court continuances, and performed clerical duties.

Staff members and volunteers whose special abilities are recognized and used become more invested in the organizational identity. Because we utilize diverse skills, it is often possible to allow creative expression of a staff member's or volunteer's talents. Senior management is encouraged to observe where individuals excel. Tapping into identified talents empowers staff and volunteers.

2. How do you achieve effective communications and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.

Sharing information across many locations is our greatest challenge in communications. Examples of how we do so include state-wide staff meetings, regional and circuit staff meetings, a volunteer newsletter (that staff also receives), broadcast emails, and staff seminars, such as the Grief and Loss Seminar in April and the upcoming Case Manager Training in October, 2008. Statewide volunteer conferences are less frequent due to expense, but volunteers are invited to county in-services for continuing education twelve hours each year.

3. How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.

Positions are posted through the state employment site. Hiring is done by panel interviews. Panels are composed of supervisory and senior staff. Standardized questions are used for each type of position. Retention by the GAL Program has traditionally been in the 20% range, which is average for most organizations. In a child welfare organization, it is better than average. For the fiscal year 2007-2008, retention was 89%.

Despite the very good retention rate of the GAL Program, there are barriers to retention. The content of the work, child abuse and neglect, is difficult to deal with on a day-to-day basis. The Program has attempted to address stress by conducting a Grief and Loss Seminar for staff to learn better coping mechanisms. The GAL Program demands a great deal of devotion by its staff and, as mentioned earlier, the positions require a wide range of skills. Lastly, as is true of most child welfare organizations, GAL Program pay rates are low for the level of responsibility required.

4. How do you assess your workforce capabilities and capacity needs, including skills, competencies, and staffing levels?

One of the most significant workforce needs of the Guardian ad Litem Program is its volunteer force. The number of new volunteers trained is tracked monthly. Training for volunteer guardians ad litem is 30 hours per-service and 12 hours of annual in-service. Pre-service is comprehensive and based on national best practices for child advocacy. The training also incorporates those features that are unique to South Carolina's operation of family court.

Besides training new volunteers, the Program must track the number of volunteers who have resigned to figure the net number of volunteers. There is a program policy standard for the number of cases a volunteer should have at one time. In the strict sense, the size of the volunteer workforce dictates how many cases the Program can accept. Calculation of the number of cases that are being filed and the number that are being turned back each month gives the goal number for volunteer recruitment.

Program policy exists for the number of volunteers that staff members may supervise. The Program frequently stretches beyond the policy in order to meet the needs of more children. Requests for new staff positions are based on determining where volunteer numbers must grow in order to serve more children.

To expand the volunteer workforce, the GAL Program has embarked on a vigorous recruitment plan throughout the state tailored to individual counties. Resources are being allotted in this critical area both from the state and grants. County staff is being trained to institute the recruitment plans by the public relations team at state, regional and individual county meetings.

Experience has shown that the GAL Program needs a contract attorney in each county for appointment to represent the volunteer guardians ad litem. First, through a one-year IOLTA grant, and then by funding through the SCCID, every county has been able to hire a contract attorney. Contract attorneys provide consistent representation and become more expert in family court law. Observations by county staff and volunteers indicate that better outcomes are achieved in court for children with county contract attorneys.

When senior staff members and supervisors in the counties recognize a trend in concerns or questions, the practice of the Program has been to arrange for training to address the need. COMET training is on-going as new staff is hired and existing staff may attend for updates. All supervisory staff is required to attend Supervisor's Training offered through the Human Resources Department of OEPP. The Program will be conducting Case Manager training in October, 2008 to ensure that staff is trained to support volunteers in our complex cases.

5. How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

The volunteer workforce was surveyed in FY 2007-2008 to determine their satisfaction with staff, their concerns for the Program, and their satisfaction with their volunteer experience. County Coordinators evaluate volunteer performance after every case closure. Volunteers have an opportunity to voice their thoughts about the support they receive at any time during the case.

The EPMS (employee performance management system) of OEPP gives every employee a chance to review annually his or her performance. At the review, employees can participate and write comments and make suggestions for objectives they would like included on their next review. The County Plan system within the GAL Program evaluates the county program and sets goals for attainment within a specific time frame. Action plans are designed to facilitate reaching the goal of serving all children who need an advocate in abuse and neglect proceedings.

The annual employee evaluations also give supervisors a chance to designate specific objectives for employees to achieve or to help them strengthen an area of weaker performance. The objectives are reviewed approximately every 30 days for progress. In most cases the

specific objectives are achieved. If not, then a performance plan is written for remediation. This is a process rarely used, but available when needed. Guardian ad Litem staff members are in frequent contact with supervisors at every level. Every employee has access to managers.

6. How does your development and learning system for leaders address the following:

6.1 development of personal leadership attributes

6.2 development of organizational knowledge

6.3 ethical practices

6.4 your core competencies, strategic challenges, and accomplishment of action plans

All of the above are addressed through staff trainings and supervision. Leadership skills are noted by supervisors. Volunteers and staff members are encouraged to be as autonomous as possible. Volunteers are required to do an independent assessment of the facts of a case. County staff assesses with each case the ability of volunteers to take a leadership role in their cases. For both staff members and volunteers continuing education strengthens leadership skills and organizational knowledge. Specialized trainings, such as the Case Manager training, provide concrete skill competencies that are necessary to accomplishment of goals.

Ethical practices are discussed individually and in meetings. When an issue comes to the attention of a supervisor, it is discussed and, if applicable to all counties, it is sent out as via email as a training piece. Core ethics of child advocacy are taught to staff and volunteers alike through volunteer pre-service training. All staff must attend this training.

7. How do you identify and address key developmental and training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation and safety training?

New employee orientation for OEPP human resources policy is conducted through the HR department. Orientation to Guardian ad Litem policy and procedure is conducted by the immediate supervisor on-site, except for COMET database training, which is held in Columbia in group training classes. As mentioned before, all staff members are required to attend volunteer training and to take at least one case, in order to fully understand the Program's mission. Volunteer training effectively covers diversity training and safety training. The Best Practices manual lists the specific job skills that are required for each position. Training effectiveness of initial and continuing education is evaluated by post-training evaluations and by observation of changes in performance. Staff is encouraged to bring to the attention of the state office training opportunities available locally that are of interest or need. Staff is encouraged to attend the Children's Law Center Conference annually and a small number of staff attends the National CASAA Conference each year. Staff members who have attended seminars are encouraged to present at staff meetings to share information and to gain better presentation skills.

8. How do you encourage on the job use of new knowledge and skills?

Encouragement for the use of new knowledge and skills can be through email recognition to the entire staff, through individual recognition of goal achievement, or by having the staff member conduct training on the skill that has been learned.

9. How does employee training contribute to the achievement of your action plans?

Better trained staff is more autonomous in conducting advocacy for children in its county. Knowledgeable employees recruit and produce well-trained volunteers. Staff members who understand the mission of the Program and the necessity of multiplying the number of child

advocates reach a wider segment of the public who will be willing to speak up in family court for abused children.

10. How do you evaluate the effectiveness of your workforce and leader training and development systems?

If a county office or circuit office conducts its business in a manner consistent with child advocacy best practices and GAL Program policy, it will be revealed through the internal audit process. County offices demonstrate effective leadership through positive results in volunteer workforce growth, staff retention, and service to a larger percentage of the cases in the county.

11. How do you motivate your workforce to develop and utilize their full potential?

Supervisors make recommendations to employees as to projects that tap into the skills observed in employees and suggest how those skills can be used within the job description. Employees are given time to attend seminars that are specific to particular interests and employees are asked to join task forces and other organizations that hold interest for them and are germane to the Program's mission.

A goal for Program staff is to train volunteers so well that they become reasonably autonomous. **Volunteer guardians ad litem comprise the largest group of volunteer child advocates in the state.** Staff members empower the volunteers to be the voice for abused and neglected children. At the same time, staff ensures that volunteers understand the boundaries of the role. Methods to develop the advocacy potential of our volunteers include staffing cases with them to encourage critical thinking, assisting them with questions, help identifying the interviews that need to be completed before court, and providing oversight on all court reports before the reports go to the court.

12. What formal and/or informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

Employee retention is measured as part of self-assessment by NCASAA and for our own information. Employees are part of the county planning process and speak to their own satisfaction during annual reviews. Volunteers were surveyed in FY 2007-2008 on satisfaction with staff the program and their volunteer experience.

Senior staff members review and discuss retention of employees and volunteers. Both are considered important measures of stability for the Program. In both instances the GAL Program measures better than average. Employee retention in FY 2007-2008 was 89%. Volunteer retention for the state GAL Program is around 3 years. The national average is slightly over 2 years.

Grievances and dissatisfaction voiced by either staff or volunteers are taken seriously and investigated. We use the information to examine policy and performance that generate complaints, making changes when necessary.

13. How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?

The Guardian ad Litem Program is composed of 84 employees, 42 contract attorneys, and over 1,400 volunteers. Despite the large numbers, there are not many levels to the Program. A volunteer cannot be promoted, except by becoming an employee. Staff positions are dispersed to 36 locations. Within each location, there exists a handful or less of paid positions. Promotion from within is favored, but the number of career moves is limited. Senior staff does

identify county staff members who may move into senior positions as retirement occurs. Contract attorneys often stay with the program for years. They develop expertise that is invaluable, but there are no tiers for promotion among our attorney positions.

The Program does plan with succession in mind. All new positions are hired with the intention of retaining the employee long-term. New employees are often selected as if they were going to be moving into the next highest position. Most importantly, all information about Program management is shared broadly and captured electronically for the occasion when management changes.

14. How do you maintain a safe, secure and healthy work environment?

The Guardian ad Litem Program follows the policies of Human Resources that cover health and safety regulations. The state office participates in the emergency preparedness program of the Governor's Office. In local offices staff has been asked to backup COMET data each day and remove it each day to make sure it is not lost in the event of a disaster. Staff and volunteers are trained in initial pre-service training on taking safety precautions against any defendant or case party who may become threatening.

Category 6: Process Management

1. How do you determine, and what are your organization's core competencies, and how they relate to your mission, competitive environment, and action plans?

Our core competencies are:

1. Creating a volunteer workforce capable of quality advocacy for abused and neglected children; and
2. Supporting and supervising the volunteer guardians ad litem.

The Guardian ad Litem Program has a specific mandate: the program recruits, trains, and supervises volunteers who advocate for children in family court cases of abuse and neglect. Our core competencies are directly related to our mission and reflect the statutory mandate that created and defines the Program. We do not have any organizations with which we compete for this niche.

The Program's core competencies are achieved through the action plans for recruitment and public relations that produce more volunteers. The action plans include training the volunteers to perform as independent child advocates with Guardian ad Litem staff supervision.

2. How do you determine and what are your key work processes that produce, create, or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?

Our key work processes are:

- Recruiting, training and supervising volunteer child advocates
- Training and assisting volunteers to:
 - Conduct independent investigations of the facts in a child abuse or neglect case
 - Produce a written report and recommendations for the family court at each hearing
 - Monitor the child(ren)'s progress throughout the pendency of the case
 - Monitor the defendants' progress towards reunification throughout the case
- Compiling statistical data that tracks the cases and outcomes for children involved in the family court system
- Participating in child welfare system analysis and improvement through committees, task forces, and stakeholder organizations

The key work processes that are listed above are the statutorily mandated actions of a volunteer guardian ad litem in child abuse or neglect cases (20-7-122). The actions that ensure the

volunteer is able to effectively serve are produced through pre-service 30-hour training, in-service trainings, and staff supervision. We ensure that the staff functions are performed by providing training through the Program, and auditing by supervisory staff. Child advocacy best practices are Program policy and staff members are held accountable for the standards through performance measures taken from the database. The value for the customers is that children have a voice in family court that is independent of any other influence besides the child's best interest.

3. How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process design and delivery?

The Guardian ad Litem Program produces volunteer child advocates for 45 counties through 36 locations. The method for incorporating all of the above factors relies upon having a central state office that designs, develops and implements Program policy and practice, with input from staff at all levels. Because the GAL Program is a state organization, it can consolidate production of training materials, benefit from an IT department, and cut costs through having one business center for the statewide program. One benefit is that there is one office that coordinates operational expenses and manages them. Another is that there is a uniform standard for child advocacy across 45 counties. New practices in child welfare can be spread across the state in one email. Counties with fewer resources can have a volunteer advocacy program because the expense is not limited to local resources. Individual county offices can rely upon state staff such as the public relations team rather than having to reproduce those positions in each county. The state office writes and manages grants that provide new computer equipment, travel funds and training for the entire state program.

4. How does your day-to-day operation of these processes ensure meeting key performance requirements?

The state guardian ad litem office provides the organizational business management that allows the county offices to focus on the key work processes. Volunteers are trained pre-service and taught the requirements of performing as a volunteer guardian ad litem by county and regional staff. The entire 30-hour training is designed to teach the role of the volunteer GAL. Once trained, volunteers are supervised by staff trained in the same manner. All staff is required to take the 30-hour volunteer training, and Case Managers and Coordinators are required to take at least one case in order to experience advocating directly. COMET data is submitted to the state Data Coordinator monthly. Daily performance of case work and meeting best practices for volunteer supervision ensure that the key processes are met. If the county staff had to also perform the operational duties, they would be prevented from effectively advocating for children and fewer children would have volunteer guardians.

5. How do you systematically evaluate and improve your key product and service related processes?

Child advocacy by the volunteers and through staff supervision is evaluated via county audits, County/PR Plan production and COMET database monitoring. Volunteers are evaluated at the close of each case. At the state office, the business support process is measured by accounting for funds, controlling costs, and maintaining operational services efficiently. Controlling costs includes careful evaluation of needs for additional staff. Improved technology for the county offices, more efficient supply delivery and effective training to staff members improves delivery of our key product, child advocacy. The GAL Program evaluates its processes through calculating the percentage of budget for operational expenses and reviewing the statistics for number of active volunteers and number of children served.

6. What are your key support processes, and how do you improve and update these processes to achieve better performance?

The COMET database is a key support process. Developed by NCASAA, COMET periodically has an upgrade, of which the South Carolina Program always takes advantage. Designed to measure the items that the GAL Program needs to monitor, it gives us a means for tracking our cases and deriving reports that measure success.

Our public relations team use NCASAA materials as a starting point for development of quality tools and materials. National CASA also provides training materials, webinars for continuing education, and updates on national issues about child welfare. The IT department of OEPP supports the Program's many computers throughout the state, in large part through remote contact.

Internally, Circuit Coordinators support and supervise County Coordinators. Regional Supervisors support and supervise Circuit and County Coordinators. State office staff supports all of the above. County and Circuit Coordinators support and supervise Case Managers. All staff supports the volunteers and volunteers have access from their administrative staff up to the state director. County audits and the county plan process improve performance and support better performance because county staff members know their target goals.

7. How does your organization determine the resources needed to meet current and projected budget and financial obligations?

The need for current and projected budget needs is calculated by analyzing the data on case loads and the trends on case load growth in each county. Distribution of staff is compared among counties per caseload and volunteer count. Retention of staff is noted in each county and reasons for any trends explored.

Best practices standards of staff-to-volunteer ratio are used in the analysis. The expenditure for personal services in the last year is calculated based on the amount that would be spent if all positions were filled for an entire year without vacancies. The number of additional hours for current part-time positions and the amount of new positions needed are discussed with state staff including Regional Supervisors. County by county, state staff determines where the needs are critical. Operational expenses are tracked. Increases for rent and utilities are figured for the last year and projections made for new increases. The locations where operational expenses may increase or decrease are noted. The GAL budget is based on actual expenditures for personnel and projected operating expenses for the next year.

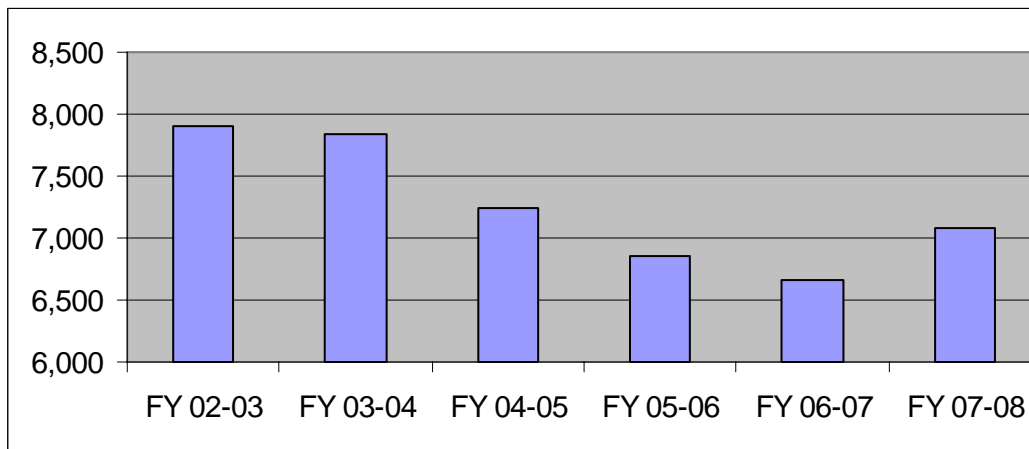
Category 7: Results

1. What are your performance levels and trends for your key measures of mission accomplishment/product and service performance that are important to your customers? How do your results compare to those of comparable organizations?

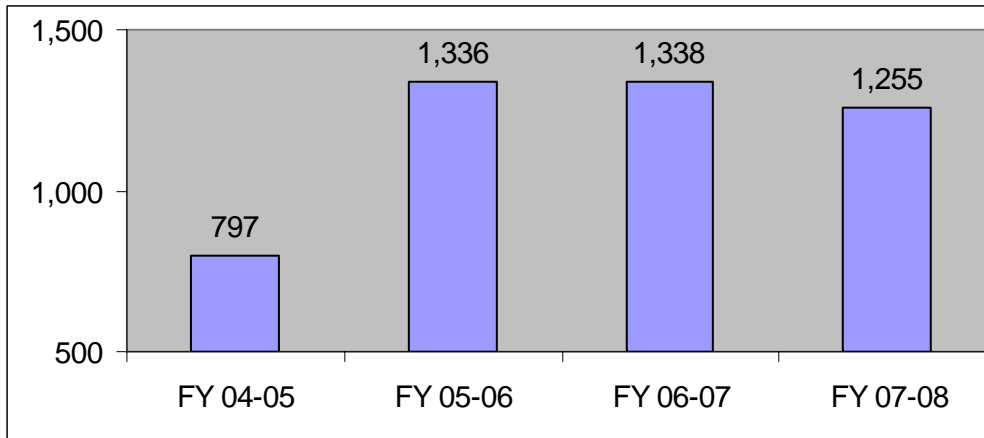
Graph 7.1-1 shows the number of children served by the South Carolina Guardian ad Litem Program for the past six fiscal years, a key measure of mission performance. The Program increased service to children in FY 2007-2008 over FY 2006-2007 by 425 children. The GAL Program accepted 3749 cases in FY 2007-2008. In FY 2006-2007, the Program accepted 3522. For FY 2007-2008, 227 more cases were appointed a volunteer. Graph 7.1-2 shows the decrease in cases turned back for attorney appointment. The Program not only served 227 more cases, but turned back 82 fewer cases in FY 2007-2008. Service to more children is our key measure of mission.

There is no comparable organization within the state. Guardian ad Litem/CASA programs vary widely in structure in the nation. Children served, not those that are not served, is the typical measure; therefore it is difficult to determine a comparison to other state organizations. The NCGAL Program accepts 100% of the cases, because the statute requires them to do so. North Carolina staff members take the cases when a volunteer is not available. Utah, a program that is statewide has approximately 1,800 new cases a year. They have 400 volunteers statewide each of whom is assigned only one case. That would be a 23% acceptance rate. Arizona has a statewide program that serves around 16% of the children in foster care. Delaware serves approximately 50% of its children and Georgia CASA served approximately 72% of its children in FY 2007-2008. The South Carolina Guardian ad Litem Program served 75% in that same period.

Graph 7.1-1 Children appointed a volunteer Guardian ad Litem



Graph 7.1-2 Cases not appointed a volunteer Guardian ad Litem

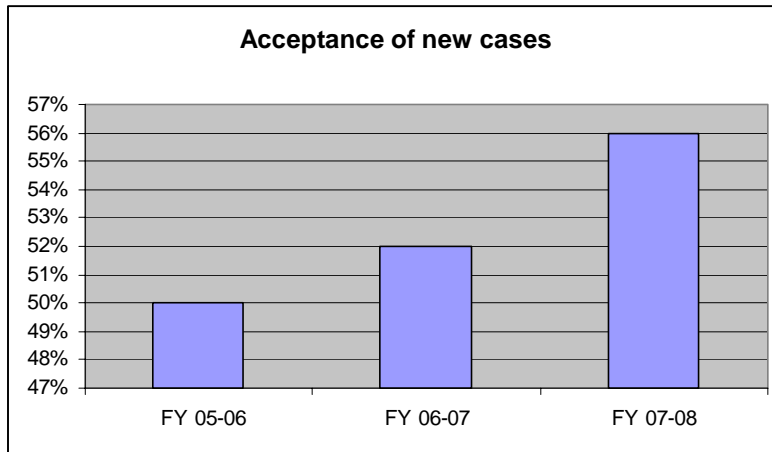


2. What are your performance levels and trends for your key measures on customer satisfaction and dissatisfaction (a customer is defined as an actual or potential user of your organization’s product or services)? How do your results compare to those of comparable organizations?

The South Carolina Guardian ad Litem Program is one of the oldest state-run child advocacy programs in the United States. Many state have programs that are non-profits. Our structure allows for more efficient use of funds because operational expenses are consolidated. South Carolina serves a greater percentage of children with a volunteer guardian ad litem than any other state except for those which require the program to accept 100%. In the FY 2006-2007, the Program served 73% of all cases. In FY 2007-2008, the GAL Program served 75% of cases. These figures have become more reliable over the past three years as our database and reporting has been emphasized.

The goal set for the GAL Program is an acceptance rate of 70% of the new cases each year. The Guardian ad Litem Program provided a volunteer for 50% of the new child abuse and neglect cases filed in 2005-2006. In 2006-2007, that number increased to 52%. In FY 2007-2008 the percentage of new cases accepted by the GAL Program was 56%. The trend is greater acceptance of cases on every measure.

Graph 7.2-1



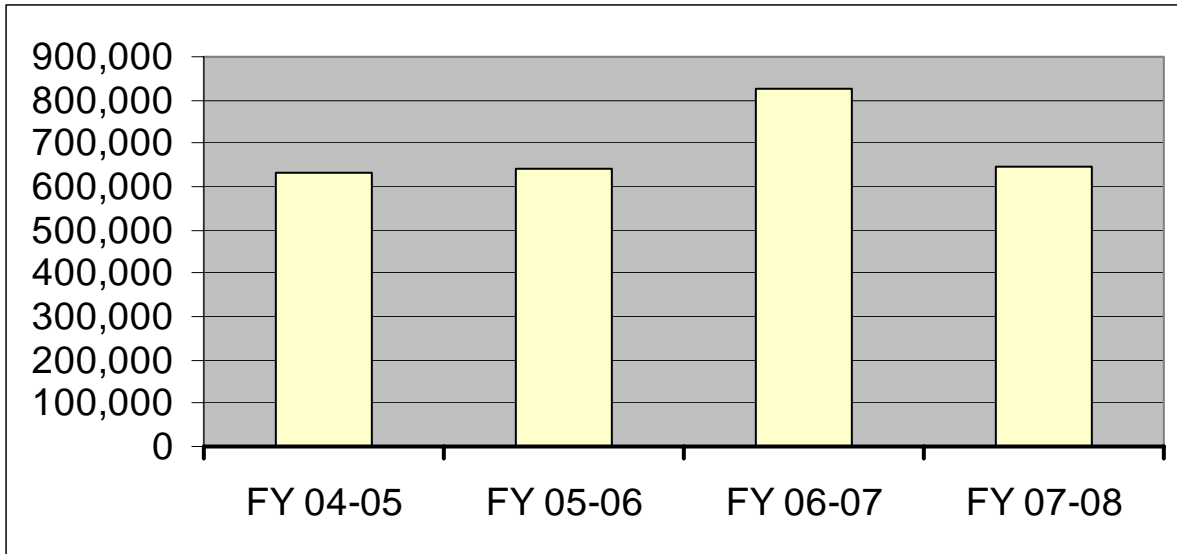
3. What are your performance levels for the key measures of financial performance, including measures of cost containment, as appropriate?

Operating expenses for the Guardian ad Litem Program include, but are not limited to, rent, telephone, utilities, travel, insurance and equipment contracts.

Graph 7.3-1 charts operating expenses for the most recent 4 years. For FY 04-05 operating expenses were \$634,080. Operating expenses for FY 05-06 were \$639,465. Operating expenses for FY 06-07 were \$824,669. For FY 07-08 the figure was \$644,957. This figure includes an \$85,000 VOCA grant for new computers. The average per office expense is \$17,431.

These figures are for the 36 remote offices and one state office.

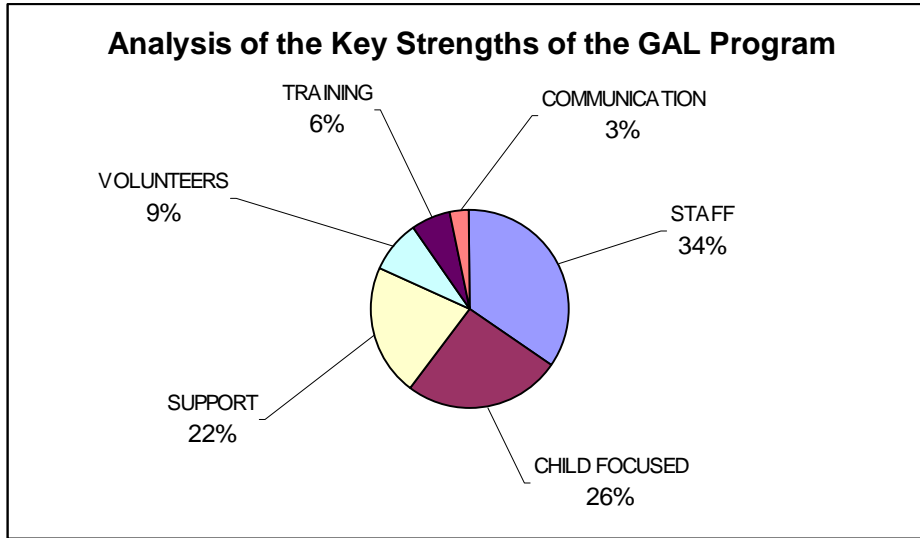
Graph 7.3-1 Operating Expenses for the Guardian ad Litem Program



4. What are your performance levels and trends for your key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

Chart 7.4-1 shows the results of the volunteer survey of satisfaction with the volunteer role, staff support and satisfaction with the Program overall. Part of the survey was focused on having the volunteers say what they thought were the key strengths of the GAL Program. The entire volunteer force was surveyed and the responding sample was valid. In the survey, 34% of volunteers felt a key strength was the staff and another 22% felt the support they receive from staff was a key strength. That the Program remains child-focused was cited as a key strength 26% of the time. Volunteers indicated that while pre-service training was good, it did not fully prepare them for the complexities of the work. This will be an area for improvement in FY 2007-2008.

Chart 7.4-1



The Guardian ad Litem Program measures employee retention as an important indicator of job satisfaction. Despite the position being demanding and the content of the work difficult to bear on a daily basis, the GAL Program has an excellent and improving retention rate for paid staff.

Table 7.4-2 gives the number of employees in the last four fiscal years and the number whom the SCGAL Program retained. Retention of 80% is average for most organizations and high for child welfare work. The Guardian ad Litem Program experienced an 89% retention rate for FY 2007-2008.

Table 7.4-2

Fiscal Year	Total Employees	Employees Retained	Retention Percentage
FY 04-05	60	47	78%
FY 05-06	71	56	78%
FY 06-07	77	65	84%
FY 07-08	83	74	89%

5. What are your performance levels and trends for key measures of organizational effectiveness/operational efficiency, and work system performance (these could include measures related to the following: product, service, and work system innovation rates and improvement results; improvement to cycle time; supplier and partner performance; and results related to emergency drills or exercises)?

The effectiveness of the Guardian ad Litem Program is reflected in the increase in accepted cases and more children served. The program has demonstrated its operational efficiency.

6. What are your performance levels and trends for the key measures of regulatory/legal compliance and community support? Note: For a government agency, this question would apply to compliance with laws and regulations other than the agency's central legal mandate.

The Guardian ad Litem Program has met compliance with the National Court Appointed Special Advocates Association (NCASAA) self-assessment at the state level at in each county. This covered best practices for case work and child advocacy, human resources, financial practices, staff and volunteer diversity planning, emergency response planning, and strategic planning. The Guardian ad Litem Program was audited in 2007-2008 by the Legislative Audit Council (LAC). The results of that audit were published and distributed. Essentially the Program was found to need additional staff for data input and management and for case management. Volunteer guardians ad litem are required to operate subject to Court Rules, as are staff members. Laws governing confidentiality in child welfare cases govern Program work. The Program operates in compliance with all statutes concerning child welfare cases, in addition to those which enact and govern the Program directly. Achievement of NCASAA compliance, audit results that were favorable, and no legal censures in the family court are measures of compliance. Community support is evident in the growing number of volunteers, the existence of more than dozen non-profits across the state who support county GAL Programs, and supportive media coverage.

**OEPP – Ombudsman’s Office and
Children’s Affairs/Children’s Case
Resolution System**

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Ombudsman, Office of Children's Affairs, & Children's Case Resolution System

Section I - Executive Summary

Mission Statement

The mission of the Office of the Ombudsman is to assist individuals who contact the Governor's office and provide direction and/or resolution. The mission of the Children's Case Resolution System (CCRS) is to review and mediate children's cases which the appropriate state/public agencies have been unable to collectively provide resolution.

Vision:

To resolve complaints, address constituent inquiries and provide CCRS.

Major Achievements for FY 2007-2008

- Successfully managed the Volunteer Awards and United Way Campaign.
- Worked, with Governor Sanford, to staff 124 Open Door cases and their outcomes.
- Successfully handled 87 Walk-in's
- Maintained active membership in the SCVOADs
- Continued to assist with the development of an on-line donation/volunteer system to be used during natural disasters
- Trained 35 additional OEPP staff members for the Governor's Call Center. Following the 122 OEPP staff members trained last year, only new employees and the Foster Care Review Board were trained during Fiscal Year 07-08.
- Developed a current schedule for the Governor's Call Center to ensure week day and weekend coverage
- CCRS has 2 active cases.

Key Strategic Goals for Present and Future Years

1. Resolve concerns of constituents who contact the Governor's office
2. Maintain current information regarding services available through local, state and federal agencies; non profit and for profit organizations.
3. ESF-18 will organize the coordinate donated goods and volunteer services in order to provide easy delivery during the time of a disaster.

Key Strategic Challenges

Several unavoidable circumstances create challenges toward achieving our strategic goals. For example, the influx of complaints/concerns requiring resolution beyond the Governor's scope of influence or jurisdiction prevent Constituent Services from being able to successfully resolve all inquiries. In addition, recent Medicaid cuts have increased requests for CCRS monies to assist with placement payments, which increases the applications processed and hearings staffed required for the allocation of these funds. Finally, although ESF-18 has made great strides in the state's disaster plan, it has in turn increased staff work load which takes time from staffing constituent cases.

How the accountability report is used to improve organizational performance

This report is used to assess performance expectations and identify areas needing improvement. For the Fiscal Year 07-08 out of 4,091 written inquiries, 92% were answered within 5 days or less as well as 97% of the 8,207 phone calls received were answered within 24 hours. The accountability report demonstrates the success of the system in place. Based on this information, Constituent Services, the Office of Children's Affairs and CCRS have maintained the same handling techniques. If the Accountability report ever suggests calls and written inquiries are not being processed in the designated time frame, the technique would be changed accordingly.

Section II - Organization Profile

1. Key Services

- Listen to constituents who contact the Governor's office.
- Handle written inquiries to the Governor's office by connecting constituents with appropriate state agencies or community resources as needed.
- Meet with constituents as necessary through Open Door After Four or daily walk-in's.
- Mediate payment disputes between agencies through CCRS and allocate funding when mediation does not reach an agreement between the responsible parties.
- ESF- 18 facilitates the delivery of volunteer services to support relief efforts in disaster areas

2-3. Key Customers/Stakeholders

- South Carolina residents
- Non-residents
- City, County, State and Federal Government offices
- Non-profit organizations
- For-profit organizations

(There are no requirements or expectations for the Customers or Stakeholders assisted.)

4. Key Partners

- Governor
- OEPP Offices
- City, County, State and Federal Government offices
- Emergency Management Division
- Federal Emergency Management Administration
- South Carolina VOAD's

5-6. Operational locations and Employees

- Constituent Services, CCRS, OCA are all located in the Governor's Office on the First Floor of the Wade Hampton Building.
- Constituent Services is overseen by an unclassified supervisor. There are four other unclassified caseworkers.
- CCRS and OCA are operated by the same classified employee.

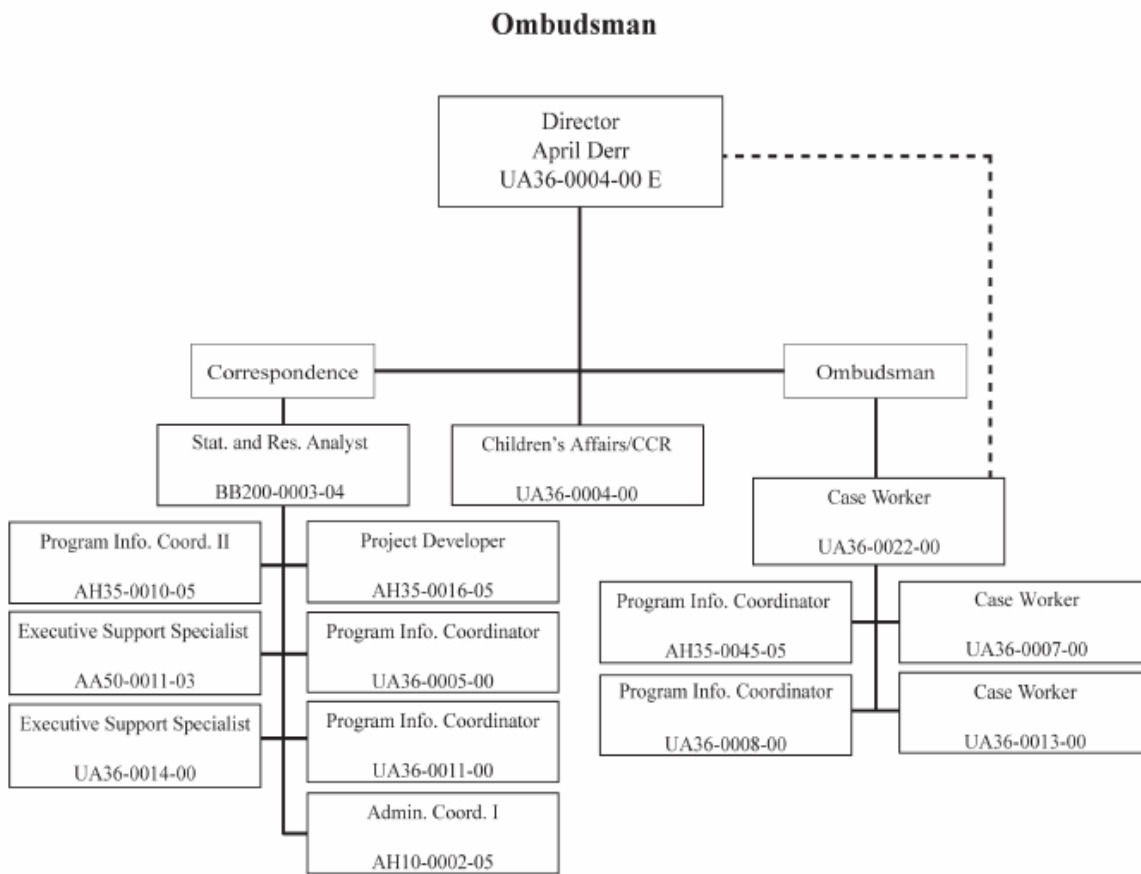
7. Regulatory Environment

- Constituent Services and OCA are regulated by the Governor and his Executive Assistant.
- CCRS operates according to Section 20-7-5210 of the South Carolina code of laws.

8. Performance Improvement System

- Bi-weekly, quarterly and annual reporting system that tracks casework progress through categories such as number of letters and telephone inquiries received. These systems also ensure that mail does not go answered.
- EPMS reports are used to track individual progress and are also reviewed during annual employee performance evaluations. Reports are useful for supervisory staff to manage and balance caseloads among staff members.
- Open communication during regular staff meetings
- Tracking trends in constituent inquiries
- Cross training caseworkers
- Working collaboratively with state and federal legislator's offices
- Full Scale EMD exercise and training of the Governor's Call center volunteers

9. Organizational Structure



10. Appropriations/Expenditures Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 38,563	\$38,563	\$38,719	\$38,719	\$38,726	\$38,726
Other Operating	\$1,330	\$1,330	\$6,882	\$6,882	\$3,186	\$3,186
Special Items	\$4,904	\$4,904	\$4,630	\$4,630	0	0
Permanent Improvements						
Case Services	0	0			\$35,102	\$35,102
Distributions to Subdivisions	0	0				
Fringe Benefits	\$11,409	\$ 11,409	\$12,569	\$12,569	\$9,682	\$9,682
Non-recurring				0		
Total	\$56,205	\$56,205	\$63,800	\$63,800	\$ 86,696	\$86,696

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Areas Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Ombudsman	To provide Constituent Services to the citizens of South Carolina. The office identifies systematic problems in the state's service delivery system and works with various government agencies to make changes as appropriate. Additionally, the office compiles reports that track number of inquiries and types of complaints/concerns of constituents for the Governor.	State	192,230	State	189,951	
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	19,230	Total	189,951	
		% of budget: 0%		% of budget: 0%		

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Children's Affairs/CCRS	To provide information and referrals to families regarding services for children. Assists families with problems they are having with child-serving state agencies, and responds to complaints. This office also houses CCRS. SC Code of Laws 20-7-5210, has the statutory responsibility to provide a process for reviewing cases on behalf of children for whom the appropriate public agencies collectively have not provided the necessary services.	State	51,302	State	59,170	
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	51,302	Total	59,170	
		% of budget: 0%		% of budget: 0%		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership - How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) empowerment and innovation; e) organizational and employee learning; and f) ethical behavior?

- 1.1. Short and long term direction
 1. Staff receives direction through monthly meetings (or as needed), direct and open communication regarding each case as handled.
- 1.2. Performance expectations
 1. Time lines are set by Constituent Services senior leadership. Bi-weekly and quarterly reports are used to ensure that performance is meeting outlined expectations.
- 1.3. Organizational values
 1. Staff are expected to maintain standards of the Ombudsman’s Office, Children’s Affairs, and CCRS. The Employee Performance Management System (EPMS) also helps evaluate each employee’s organizational and productivity values yearly.
- 1.4. Ethical behavior
 1. Senior leadership sets the standard for ethical behavior, in compliance with that set forth by the State Ethics Commission and the Office of Human resources.
 2. Ethical behavior is routinely discussed and expected by senior leadership.
- 1.5. How do senior leaders establish and promote focus on customers and other stakeholders?
 1. Encourage positive morale among staff through open communication
 2. Complete Employee Performance Management System (EPMS) evaluations yearly
 3. Complete Bi-weekly, quarterly and annual performance reports
- 1.6. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?
 1. Our office addresses impact on the public mainly through constituent and agency feedback, Daily Press Briefings and News Releases received from the Governor’s Executive staff
 2. By following changes in legislation
- 1.7. How do senior leaders maintain fiscal, legal and regulatory accountability?
 1. The Office of Constituent Services and Office of Children’s Affairs/CCRS submit quarterly Minority Business Expenditures reports.
- 1.8. What key performance measures are regularly reviewed by senior leaders?
 1. Senior leadership regularly evaluates the percentage of written inquiries responded to within 5 days or less
 2. Senior leadership regularly evaluates the percentage of telephone inquiries responded to within 24 hours
 3. Senior leadership regularly evaluates the percentage of agency referrals which have not received a response within 30 days
 4. Senior leadership monitors the number of ESF-18 and Governor’s Call Center trainings provided and employees trained
- 1.9. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization?

1. Key performance values are incorporated as performance measures for the EPMS evaluation. EPMS values demonstrate where progress is needed by staff and senior leadership.
 2. Staff feedback is necessary to share resources and techniques useful to efficiently perform constituent services. Feedback also facilitates cross training among staff.
 3. Bi-weekly meetings allow staff to share thoughts, concerns and information.
 4. Bi-weekly performance reports enable senior leadership to balance caseloads.
- 1.10. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?
1. Because we are a small office, working closely together, mentoring is a daily activity.
- 1.11. How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?
1. Working closely with the Governor during Open Door allows for specific case instruction.
 2. Because we are a small office, working closely together, open communication is encouraged, senior leadership listen to employee ideas and brainstorming occurs as necessary.
- 1.12. How do senior leaders create an environment for organizational workforce learning?
1. Leadership schedules training sessions with state agencies, such as DSS, so staff can familiarize themselves with programs services (ie...food stamps).
 2. Leadership circulates new information provided by state agencies regarding programs constituents inquire about.
 3. Leadership encourages asking questions and conducting research to continuously learn about state and local programs that may benefit constituents.
- 1.13. How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?
1. Leadership is in contact with all staff members daily to discuss cases and the manner in which they are handled.
 2. The notion that we are public service employees is engrained amongst staff so that all constituents received the exceptional customer service experiences when contacting the Governor's office.
 3. When cases result in a positive outcome for the constituent, this is noted in the Comments section of Filemaker. Thus, positive outcomes are easily accessible.
 4. Staff are recognized and thank for their hard work on a continuous basis.
- 1.14. How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders and employees determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.
1. Leadership and employees participate in United State Employee Campaign, Co-Occurring State Incentive Grant (COSIG) with the Department of Mental Health, Offering Assistance, Stability and Intensive Support (OASIS) for Families, Program Oversight Committee (POC), SCVOAD's, Governor's Volunteer Awards and the Citizenship Awards Program. Some of the programs above are chosen because of their

direct collaboration/connection with the Governor's office. The COSIG project is a state grant coming directly through the Governor's office; explaining our involvement. While the SCVOAD's work in direct partnership with the South Carolina Emergency Management Division to coordinate preparedness for ESF-18. Both leadership and the workforce attend meetings and/or assist in the execution of the above listed events.

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

- 2.1 What is your strategic planning process, including key participants, and how does it address:
- a) your organization's strengths, weaknesses, opportunities and threats; c) financial, regulatory, societal and other potential risks and customer preferences; d) shifts in technology or regulatory environment; e) workforce capabilities and needs; f) organizational continuity in emergencies; h) your ability to execute the strategic plan.
1. Our office utilizes the Employee Performance Management System evaluation period and the planning stage to address each individual staff member's strengths, weaknesses and progress. The bi-weekly and quarterly reports are also assessed during the review period to evaluate progress and productivity and develop a plan for the upcoming Planning Stage.
 2. The supervisor meets regularly with the Director of Constituent Services and individual employees to determine and discuss progress and future planning for the office.
 3. Reports track progress and caseloads.

Chart III.2.2 Strategic Planning Chart for Ombudsman, Children’s Affairs, & Children’s Case Resolution System

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Resolve concerns of constituents who contact the Governor’s office	1.1 Listen to individuals who contact Governor’s office 1.2 Respond to written and verbal inquiries 1.3 Arbitrate through the CCRS only those cases where all efforts to resolve the case have been exhausted	<ul style="list-style-type: none"> • Respond to written inquiries within 5 days or less • Respond to telephone inquires within 24 hours • Track agency referral and response time. • Facilitate, promote and improve communication and coordination of services between constituents and state agencies and among state agencies to prevent the need for arbitration through CCRS 	See Table 7.1.1 See Table 7.1.2
2. Maintain current information regarding services available through local, state and federal agencies; non profit and for profit organizations.	2.1 Continuously research and share information pertaining to goods, services and programs available to constituents 2.2 Continuously update information regarding services available through ESF-18 to SC citizens during a disaster.	<ul style="list-style-type: none"> • Share relevant, updated information during Bi-weekly staff meetings and cross train all case workers. • Information regarding available services is reviewed and updated quarterly. Any changes are relayed to applicable agencies and organizations. • Train OEPP staff regarding changes in any available information volunteer services to support relief efforts in disaster areas 	

2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary?

1.Constant collection of up to date information about agency, non profit organizations and services available since they are always changing prevents dissemination of erroneous information.

2.Encouraging open and consistent communication increases cooperation among state agencies involved in the coordination of family services.

3. Continuous training for OEPP staff participating in ESF-18 encourages cooperation with the EMD.
- 2.3 How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure the accomplishment of your action plans?
 1.As mentioned in 2.1 objectives and strategic plans are tracked through annual EMPS reports, Bi-weekly Performance reports, Annual reports, and supervisory meetings with the Director of Constituent Services and the workforce.
 2.Since we are a small and combined staff, the entire workforce dedicates time to each action plan and strategic objective.
- 2.4 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?
 1. Through the review and discussion of Bi-weekly, quarterly and annual reports are reviewed and discussed at monthly meetings.
 2. Staff meetings help staff provide consistent and efficient information and referral.
- 2.5 How do you measure progress on your action plans?
 1.Achieved resolution, whether positive or negative, to constituent’s inquiry
 2.Number of constituent contacts and agency referrals received.
 3.Bi-weekly, quarterly, annual reports
 4.Feedback from full scale EMD and governor’s call center training and exercise was provided by survey administered to OEPP staff.
- 2.6 If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide a website address for that plan.
 1.The strategic plan is available at the OEPP website <http://www.oepp.sc.gov/>, by selecting the Ombudsman and/or Children’s Affairs link.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

- 3.1 How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Residents of South Carolina , Government offices, non-profit organizations, for profit organizations, and non residents experiencing difficulty with SC government agencies.	Customers are those that seek assistance or information from the Governor’s office.

- 3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?
 1. Through constant communication among staff, constituents, the Governor, State House staff, OEPP Offices and other state agencies. The Governor’s Open Door Policy also encourages face to face interaction with constituents.

2. The OCA/CCRS coordinator is a member of the Program Oversight Committee (POC). The POC is made up of state agency representatives. They work to address needs of a special population of children who are in need of specialized services and to ensure consistent service standards. The committee also meets with statewide care providers on a quarterly basis to provide information, listen to providers concerns and attempt to find resolution to these concerns.
 3. The OCA/CCRS coordinator is a member of the Offering Assistance, Stability and Intensive Support for families (OASIS) committee. The goal of OASIS is to increase the flow and access to care and/or services for children, adolescents and their families who deal with mental health and substance abuse challenges
- 3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?
 1. The access mechanisms for customers include the internet, phone directories and word of mouth. Each of these mechanisms provides customers with information for contacting the Governor's office via phone, mail or electronic mail.
 - 3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?
 1. The Office of Constituent Services and Children's Affairs/CCRS continuously measures customer satisfaction or dissatisfaction through constituent and state agency feedback. Feedback is continuously relayed to Ombudsman caseworkers.
 - 3.5 How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?
 1. Continuously update files so information is readily available for customers in need of assistance or referral. Staff remains receptive to periodic program changes and updates from state agencies regarding services they provide and other programs.
 - 3.6 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?
 1. Work with state agencies to provide the most efficient problem solving referrals. Provide up-to-date knowledge and information about state, local and non-profit programs to constituents.
 2. The OCA/CCRS coordinator's involvement in POC and the OASIS Committee encourages positive relationships by building interagency collaboration
 3. The Governor's Open Door After Four Program increases collaboration between the Governor and constituents.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

- 4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?
1. Based on the key goals outlined in Section 2.2, this office is able to track progress via the bi-weekly and quarterly reports based on the number of written and telephone inquiries, agency referrals, number of unanswered mail, number of letters answered. Staff performance is measure annually through EMPS and unclassified evaluations. The financial operations are tracked through quarterly Minority Business Expense Reports. CCRS operations, processes, and systems are mandated by Section 20-7-5210 of the South Carolina code of laws.
- 4.2 How do you select, collect, align and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?
1. Data is pulled from the Filemaker data base to demonstrate the time span in which telephone and written inquiries are responded. This data is then compared to the designated timelines set each year. If the goals are being met, the process is working; if deadlines re not reached, a change in the process must be made. Constituent Services and OCA consistently meet the designated time frames each year.
 1. As discussed in 2.3, open communication regarding outcome measures allows for effective decision making among staff.
- 4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?
1. Bi- weekly Performance reports show how many phone and written inquiries were handled by each case worker. This report also tracks the number of agency responses relayed to constituents and any mail over 2 weeks old. The EPMS reports show the percentage of written cases responded to within 5 days or less and the percentage of telephone inquiries responded to within 24 hours or less for each caseworker. Each caseworker is responsible for reviewing agency referrals every 30 days to make sure response and/or resolution have been provided.
- 4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?
1. Data is computed Filemaker Pro. Reports are sent to staff members so that they may track their individual caseload and progress. The office also works collaboratively with other ombudsman offices to determine the most efficient methods for handling casework.
- 4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?
1. The Office staff works closely with the Office of Correspondence to ensure that data entered into Filemaker Pro is accurate. Staff is expected to maintain chronological records of cases so that they may be easily accessed. Bi-weekly reports ensure that mail is answered by phone or written correspondence.

- 4.6 How do you translate organizational performance review findings into priorities for continuous improvement?
1. Data trends addressed in Section I 1.3 show which barriers are most relevant. Staff, state agencies, OEPP offices, and constituent feedback are frequently communicated through email and telephone correspondence and bi-weekly meetings. Suggestions and changes to casework procedure are incorporated as necessary.
- 4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?
1. The accumulated employee knowledge is accomplished through cross-training and staff meetings.

Section III – Elements of Malcolm Baldrige

Category 5 Workforce Focus

- 5.1 How does management organize and measure work: to enable your workforce to develop to their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?
1. CS staff is dependent on accuracy and efficiency of Filemaker Pro and manual correspondence filing systems in place.
 2. Any suggestions for organizing files and improving the overall flow of CS cases is communicated through staff meetings and email.
 3. Open communication is appreciated and promoted in order to help staff achieve their full potential.
 4. Cross-training among CS staff members is maintained to ensure that organization and efficiency continue even when a staff member is unable to perform those duties.
- 5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?
1. CS, OCA and CCRS communicates via electronic mail, physical mail, and/or telephone (based on customer preference) with all consumers and stakeholders.
- 5.3 How does management recruit, hire, place and retain new employees? Describe any barriers you may encounter.
1. Management submits job vacancies to the Human Resource office who posts the job description. After selecting resumes, interviews are conducting, which often leads to the hire of a new employee. From this point, the new employee spends time with each member of the workforce for training until they are able to handle their own workload.
 2. Since the Governor's office makes employees highly visible, it is often difficult to retain employees as they are exposed to other organizations and job opportunities.
- 5.4 How do you assess your workforce capability and capacity needs, including skills, competencies and staffing levels?

1. Staffing levels are measured by aligning the amount of inquiries handled according to the designated timelines. If staff are consistently unable to meet deadlines through no fault of their own, then additional staffing levels may be needed.
 2. Workforce skills and competencies are assessed daily through communication with leadership and approval of case handling. When areas needing competency improvement are identified, leadership targets that specific area with the particular employee.
- 5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?
1. EPMS evaluations identify and support areas of high performance as well as areas that can be improved.
 2. Based on the information acquired through EMPS evaluations, goals for the upcoming Planning Stage are identified and agreed upon. This information also allows productivity and overall performance based on management's expectations can be reviewed and adjusted when necessary.
- 5.6 How does your development and learning system for leaders address the following;
1. Development of personal leadership attributes
 - a. Leadership attends Supervisory trainings administered by the Budget and Control Board
 2. Development of organizational knowledge
 - a. Contact with state agencies, community organizations, and executive leadership within the Governor's office allows for a continuous flow or information regarding services and information available to constituents.
 3. Ethical practices
 - a. Leadership is held accountable to executive leadership within the Governor's office through meetings and constant communication.
 4. Your core competencies, strategic challenges, and accomplishment of action plans
 - a. Leadership is constantly being exposed to new information which is then provided to constituents, better equipping the workforce to efficiently resolve inquiries received.
- 5.7 How do you identify and address key developmental and training needs for your workforce, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training?
1. Cross training of different duties performed in the Office of Constituent Services/ Children's Affairs is encouraged among staff members. Employees are also encouraged to identify and express when they have an area of interest.
 2. Open communication is promoted so specific skills and areas of interest can be identified, in order to relay newly acquired information, and identify areas lacking information/training.
 3. Staff rotate participation in various organizational meetings to gain a deeper understanding of the extent to which OEPP and the Governor's Office are involved in the community

- 5.8 How do you encourage on the job use of new knowledge and skills?
1. Using knowledge and skill is required daily when working with state agencies and constituents. This is encouraged by emphasizing the importance of customer service satisfaction; regardless of who the customer is.
- 5.9 How does employee training contribute to the achievement of your action plan?
1. Employee training ensures that all caseworkers remain informed of the most current state, public, and private resources available to constituents.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?
1. By customer response. Whether a positive or negative outcome is achieved, the customer should be satisfied with their interaction with the Governor's office.
- 5.11 How do you motivate your employees to develop and utilize their full potential?
1. Open communication and a friendly, professional environment help staff feel comfortable.
 2. By openly expressing ideas and suggestions with other staff members.
 3. Through cross training and identification of areas of interest
 4. Staff is given the opportunity to assist and plan special projects that involve the Governor's Office (i.e....Carolighting, Governor's Volunteer Awards, OASIS, etc...)
- 5.12 What formal and informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?
1. Annual Employee Performance Review and Planning Stage agreement.
 2. Staff meetings promote open communication.
 3. Open communication is a part of EPMS which allows employees to express their likes and dislikes. This helps determine priorities for improvement
 4. Priorities for improvement are also determined by reviewing the performance expectations and bi-weekly/quarterly reports.
 5. Turnover with CS/Children's Affairs occur because opportunities provided by this position are seized. No grievances have been filed.
- 5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?
1. Executive leadership within the Governor's office and leadership in CS, OCA and CCRS are willing work with workforce employees to make the best decision for their employment within our office.
- 5.14 How do you maintain a safe, secure and healthy work environment?
1. Strive to keep work areas clean and sanitary.
 2. Follow all emergency evacuation procedures.
 3. Maintain healthy volume levels when speaking with constituents.

4. Report suspicious or threatening constituents to South Carolina Law Enforcement Division (SLED) Detail.
5. Hold one on one meetings with constituents in an open room where other co-workers are easily accessible if danger arises.
6. Volunteer training and coordination of resources related to ESF-18 and the Governor's Call Center secures the readiness of resources necessary during the time of disaster. This preparation eliminates the need to gather last minute supplies and/or volunteers once a disaster has occurred; thus increasing public safety and decreasing recovery time.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

- 6.1 How do you determine and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?
 1. CS, OCA and CCRS's core competencies are determined by inquiries made by consumers. The areas where guidance and troubleshooting are sought are the areas we must be most competent and capable in navigating.

- 6.2 How do you determine what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?
 1. Written and telephone inquiries are handled on a case by case basis. Information is provided and referrals are made accordingly.
 2. A detailed system of editing ensures accuracy of the information or referral as well as to ensure that correspondence is presented to the Governor for signature without error.
 3. If inquiries are not resolved within 30 days, follow up is completed.

- 6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?
 1. As mentioned earlier, cross training is important to maintain efficiency.
 2. New technology is often added and staff is trained accordingly.
 3. Outgoing correspondence is e-mailed whenever possible; limiting the cost of postage.
 4. Because of the open lines of communication in this office, changes can be made easily to the referral system when necessary through staff meeting, memo and email contact.

- 6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?
 1. Cases are handled on an individual basis to ensure accuracy and customer satisfaction. Accurate reporting of each case in Filemaker assures that key performance requirements are being maintained. This recording of information also provides a method of tracking progress and expectations.

- 6.5 How do you systematically evaluate and improve your key product and servrelated processes?
1. Bi-weekly, annual and quarterly reporting.
 2. Continuously research and share current information about services available to constituents
 3. Customer feedback from the Director of Constituent Services as well as customer feedback.
- 6.6 What are your key support processes, and how do you improve and update these processes to achieve better performance?
1. Cases handled by written referral are reviewed by Constituent Services staff. Thus, input from colleagues is provided for all correspondence.
 2. All processes of our office are intermittently reviewed and improvements/adjustments are made as necessary.
 3. Customer feedback is discussed openly among senior leadership and caseworkers.

Section III – Elements of Malcolm Baldrige
Category 7: Results

- 7.1 What are your performance levels and trends for the key measures of mission accomplishment/product service performance that are important to your customers? How do your results compare to those of comparable organizations?

CS/CCRS/Children’s Affairs have several goals (See Chart 2.2) related to process effectiveness. These are:

4. Respond to written inquiries
5. Respond to verbal inquiries
6. Track agency referral and response time

CS Senior leadership has been unable to locate data for other state, federal constituent service offices to compare with South Carolina’s Governor’s office.

Table 7.1.1 Constituent Services and Children’s Affairs Case Work.*

Performance Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08
Written inquiries received from Correspondence	6338	5888	5569	4091
Percentage answered within 5 days or less	83%	89%	99%	92%
Phone inquiries received	4740	6093	8632	8207
Percentage answered within 24 or less	98%	97%	98%	97%
Written agency referrals sent	1384	628	387	408
Percent of agency referral responded to and closed with constituent	55%	62%	61%	95%

*Of the total written and phone inquiries, 1,117 were specifically handled by the Office of Children’s Affairs.

Table 7.1.2 CCRS Cases

	FY 04-05	FY 05-06	FY 06-07	FY 07-08
Cases receiving CCRS funds	2	1	1	2
Cases monitored by CCRS - no pay	2	2	1	6

- 7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare with those of comparable organizations?
1. Our measure of customer satisfaction comes directly from customer feedback.
- 7.3 What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?
1. Quarterly minority business expenditure reports
- 7.4 What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, work force climate including workplace health, safety, and security?
1. There are no performance levels and trends for key measures of Human resources in the office. The annual Employee Performance Review process, along with systematic reporting, staff meetings and direct communication among staff members and supervisors are all used to determine and maintain performance levels and trends.
- 7.5 What are your performance levels and trends or organizational effectiveness/operational efficiency, and work system?
1. There are not any regulatory reports required for Constituent Services or CCRS. The South Carolina community continues to utilize Constituent Services, OCA and CCRS as an effective tool to navigate state government programs, services and resources.
- 7.6. What performance levels and trends for your key measures of regulatory/legal compliance and community support?
1. Neither Constituent Services nor CCRS have performance levels for key measures of financial performance other than quarterly Minority Business Expenditure reports.

**OEPP – Office of Small and
Minority Business Assistance**

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Small and Minority Business Assistance

Section I - Executive Summary

- 1. Mission Statement:** The mission of the Governor's Office of Small and Minority Business Assistance (OSMBA) is to promote the interest of small and minority businesses as a part of the free enterprise system; thereby, enhancing economic growth and development in South Carolina.

Vision

OSMBA is the state's leading advocate to ensure that an equitable portion of State procurement contracts be awarded to small and minority contractors.

2. Major Achievements for FY 2007-2008

- A. During FY 2007-2008, OSMBA processed 403 applications for certification eligibility and more than 300 minority contracting reports from agencies.
- B. The statewide small and minority business forum and trade fair had more than 500 procurement officials and business owners in attendance. Successfully organized and managed by OSMBA, it is the state's largest networking event for business owners and procurement officials representing state, local federal agencies, plus corporations.
- C. In conjunction with the SC Association of Governmental Purchasing Officials, OSMBA planned and implemented the second Minority Networking event during the association's annual conference.
- D. In an effort by the OSMBA staff to improve accuracy of information, more than 400 expired certified application files were purged from the files, 130 incomplete application files were closed.
- E. During its outreach efforts, OSMBA has provided to more than 3,000 current and potential business owners throughout South Carolina information and training related to available services, contracting opportunities and procurement procedures.

3. Key Strategic Goals for Present and Future Years

A. Program Outreach

- 1. Administer the State of South Carolina's minority certification program while supporting state agencies in achieving their missions and goals. Support agencies in developing and achieving MBE goals.
- 2. Continue to act as an advocate for the State's Minority Business Enterprise (MBE) Program and promote the interests of South Carolina's small and minority businesses.
- 3. Increase collaboration of efforts with state, local agencies and community partners to improve and increase training, networking and contracting opportunities of small and minority businesses.

B. Quality Assurance

- 1. Development of an on-line MBE reporting system for agencies to utilize to improve the timeliness of submitted reports, consistency and accuracy of data submitted. The data will allow OSMBA to assess the effectiveness of the services rendered and identify areas for improvement in the program.

4. Key Strategic Challenges

- A. Insufficient resources to meet the needs of stakeholders.
- B. Need for additional staff to meet the increasing demand and scope of mandated services.
- C. Limited budget allocations for delivery of services and compliance to statutory responsibilities.
- D. Continual need to provide outreach services and training for procurement officials, contractors and business owners.
- E. Minimal cooperation and coordination among stakeholders challenges the service provided by OSMBA to its customers.
- F. The ability to maintain consistency in MBE reporting format and information submitted by agencies.
- G. Maintaining a culture of cooperation amongst stakeholders.

5. How the accountability report is used to improve organizational performance

The expected outcome of preparing this report is the constant effort to improve OSMBA’s efficiency of operations while adhering to its goals, the Governor’s Office of Executive Policy and Programs’ (OEPP) Strategic Plan and the Governor’s values.

Section II - Organization Profile

- 1. Main products and/or services and the primary methods by which these are delivered
- 2. Key customer groups and their key requirements/expectations
- 3. Key stakeholders
- 4. Key suppliers and partners

Table II.1.1 –(Office name) Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Office of Small and Minority Business Assistance	Administers South Carolina’s minority certification program. OSMBA also supports state agency’s missions and goals by providing assistance in developing policies and procedures to facilitate awarding contracts to small and minority firms. Activities are focused on helping small and minority businesses to: Maximize contracting opportunities Develop organizational alliances to provide technical assistance Develop and sponsor procurement and management training Encourage participation in the procurement process Serve as a point of contact for information.	Residents of South Carolina State at South Carolina Small, minority and women-owned businesses Government agencies Procurement officials Business and contracting communities	Government agencies Procurement officials Business and contracting communities

- 5. **Operation locations:** Administrative offices are located within the Edgar Brown Building, Columbia, SC 29201. However, our business site visits, outreach and training programs are conducted in all counties.

6. The number of employees (segmented by employee category)

 2 Classified 1 Unclassified _____ Contract
_____ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

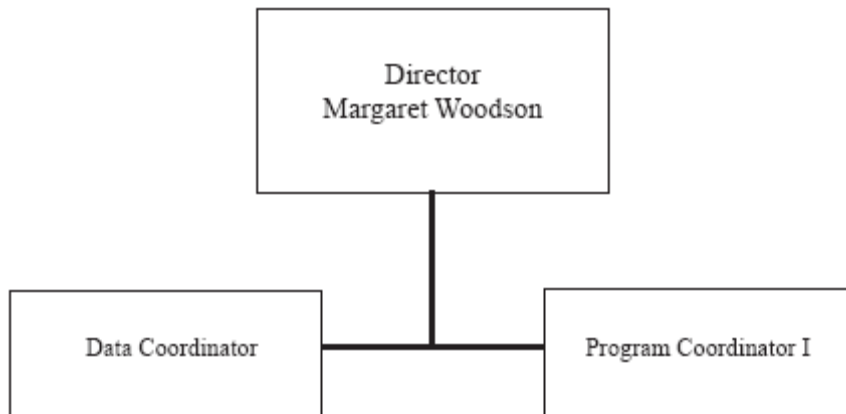
South Carolina Code of Laws Consolidated Procurement Code and Regulations
US Code of Regulation 13 C.F.R. Section 121 (June 30, 2006) 49 CFR Part 26, Subpart D (2006).

8. Performance improvement systems

Participants of outreach activities are surveyed to provide feedback on services and programs. Internally, staff workload is monitored to measure output of services rendered. Monitoring reports highlight best practices and identify training needs. Agency reports measure the State’s overall effectiveness in the implementation of the MBE program and the success of our outreach efforts.

9. Organizational chart

Office of Small and Minority Business



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08- 09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 104,339	\$ 104,339	\$ 73,263	\$ 73,263	\$ 108,210	\$ 108,210
Other Operating	\$ 44,445	\$ 33,295	\$ 53,048	\$ 50,461	\$ 24,375	\$ 24,375
Special Items	\$ 0	\$	\$ 0	\$	\$ 0	\$
Permanent Improvements	\$ 0	\$	\$ 0	\$	\$ 0	\$
Case Services	\$ 0	\$	\$ 0	\$	\$ 0	\$
Distributions to Subdivisions	\$ 0	\$	\$ 0	\$	\$ 0	\$
Fringe Benefits	\$ 26,236	\$ 26,236	\$ 18,869	\$ 18,869	\$ 27,053	27,053
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$ 175,020	\$ 163,871	\$ 145,179	\$ 142,593	\$ 159,638	159,638

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$ 0	\$ 0
Capital Reserve Funds	\$ 0	\$ 0
Bonds	\$ 0	\$ 0

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Office of Small & Minority Business Assistance (OSMBA)	To administer the State of South Carolina's minority certification program. Act as an advocate for the State's small & minority businesses.	State	163,871	State	142,593	See Section III, category 7 Area 7.3
		Federal		Federal		
		Other	11,150	Other	2,586	
		Total	175,021	Total	145,179	
		% of budget:	0	% of budget:	0	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

- 1. How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?**

An open-door policy, informal discussions and training facilitates communication and brainstorming within OSMBA. Direction and organizational priorities, performance expectations, and organizational values are determined by enabling legislation, and the goals, strategic plans and values of the Governor.

OSMBA operations include OEPP's organizational values. Key values identified as important to the organization are integrity, accountability, customer service, innovation, leadership and efficiency. The Employee Performance Evaluation process incorporates individual employee performance expectations relating to these values. Guidelines for ethical behavior are listed in the Employee Handbook that is given to all new OEPP employees. In addition, OSMBA staff has attended Ethics and Freedom of Information Act (FOIA) training provided by the Materials Management Office.

- 2. How do senior leaders establish and promote focus on customers and other stakeholders?**

The goals and supporting strategies described in the Strategic Plan provides a primary direction and focus on customer services. Communication with the Governor's Directors of Administration and Constituent Services ensures that key customer needs and concerns are identified and quickly addressed.

Specific methods used to promote focus on customers and stakeholders include:

- Administering various satisfaction surveys and offering community training sessions. Increasing customer focus and involvement through the streamlining of documents, and outreach efforts.
 - Meeting with stakeholders and partners to discuss issues, concerns, regulations, compliance, etc.
 - Conducting customer-oriented training.
 - Establishing workflow processes focused on meeting deadlines and quick responses to issues.
 - Establishing regular communication and a review of performance expectations.

3. How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

Honest and open dialogue with our customers, stakeholders and partners allows information to flow to the Governor and/or legislators from the Directors of Administration or Constituent Services.

4. How do senior leaders maintain fiscal, legal and regulatory accountability?

OSMBA certification review board assesses applications to determine compliance with guidelines and statutory requirements. Utilization of procurement, legal, FOIA and Ethics training classes offered by the Materials Management Office ensure understanding of program and legal responsibilities.

5. What key performance measures are regularly reviewed by senior leaders?

OSMBA director reviews quarterly and annually: the number of certification applications received and processed; the number of certifications awarded to MBE firms; the types of businesses that apply for certifications; the number of OSMBA outreach and training activities; the number of attendees of outreach programs; the number of reports received from state agencies; the number of agencies submitting annual MBE goals and their compliance; the actual expenditures by state agencies with MBE firms; the number of MBE firms state agencies contract with during each fiscal year; and the comparison of actual expenditures with MBE firms to other fiscal years.

6. How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization? How do their personal actions reflect a commitment to the organizational values?

The primary mechanism used for obtaining leadership effectiveness feedback is the Employee Performance Management System (EPMS) process. Additional feedback comes from employee satisfaction surveys, staff meetings, exit interviews, and individual dialogue with employees. By listening and reviewing feedback from staff and customers, senior leader makes adjustments in internal process, directives and action plans.

7. How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

Some of the methods employed to facilitate succession and future development of leaders, include mentoring, providing training opportunities, cross-training and encouragement of creativity.

8. How do senior leaders create an environment for performance improvement, accomplishment of strategic objectives?

Performance improvement priorities are set and communicated through OEPP's mission, through legislative mandate, and through meetings between the Governor and senior staff. Those meetings communicate customer enhancement opportunities to senior leaders for action. Specific methods used include:

- Fostering a work environment that allows for the accomplishment of objectives and innovations. It provides staff with direct control over their own work processes. Encouraging and being receptive to free and open communication between staff, customers and other stakeholders.

- Conducting reviews of established goals, strategies, action plans, evaluation measures and related outcomes. If modifications are necessary, frank and open discussion by all is encouraged, and changes are made, allowing for new processes or innovative ideas to be incorporated.
- Participating in committees (internal and external) that support OSMBA and the Governor's goals.

9. How do senior leaders create an environment for organizational and workforce learning?

Senior management methods for development of leaders include mentoring, providing training opportunities, cross-training and encouragement of creativity.

10. How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders determine areas of emphasis for organizational and involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

Leadership is demonstrated through personal support of community efforts and organizations. Some examples of community leadership include serving as: board member of the Midland Carolinas Minority Supplier Development Councils; committee chair for the SC Association of Governmental Purchasing Officials; member of the National Institute of Governmental Purchasing Officials; co-chair of Procurement Procedures Committee. In addition to sponsoring several minority trade fairs and networking events, OSMBA staff participates in a variety of advocacy activities sponsored by civic and professional organizations.

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

1. What is your strategic planning process, including key participants, and how does it address: a) your organization's strengths, weaknesses, opportunities and threats; c) financial, regulatory, societal and other potential risks; d) workforce capability and needs; e) Organizational continuity in emergencies; f) your ability to execute the strategic plan.

Senior staff uses a strategic planning process to ensure that individual office goals are met. Plans were developed using a variety of information including enabling legislation, key legislative and customer service issues, and feedback from staff. Participation and cross-functional coordination in the development of the strategic plans help ensure organizational alignment, necessary financial and human resource allocations, and minimal risk to OSMBA's customers. As action plans are developed, coordination with partners or stakeholders is assured before finishing action plans. For example, the Procurement Procedures Committee has met to discuss areas of improvement in services offered to stakeholders by OSMBA.

Chart III**OSMBA Action Plan**

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
OSMBA Administer the State of South Carolina's minority business enterprise (MBE) program.	Provide leadership. Process, manage and analyze information.	F. Maintain regulatory and legal compliance and ethical business practices. G. On a quarterly basis, compile and maintain data of MBE expenditures and procurement activities by agencies for reporting purposes.	See Section III 7.1
Support agencies in developing and achieving MBE goals.	Provide leadership and enhance customer satisfaction.	H. Maintain regulatory and legal compliance, and ethical business practices. I. Determine and meet the needs and expectations of partners and stakeholders J. Provide accurate information to agencies about certified MBE's, for contracting opportunities K. Provide agency training on best practices for implementation of their activities and tracking performance.	See Section III 7.1
Act as an advocate for SC's small and minority businesses	Provide leadership	L. Ensure that small and minority businesses in South Carolina have the opportunity to fully participate in the overall procurement process of the State. M. Offer training and networking opportunities throughout SC to encourage and promote contracting with MBE's. N.	See Section III 7.1
Promote the MBE program, its stakeholders and increase collaboration of efforts with community partners	Provide leadership and customer satisfaction	Focus on facilitating agencies awarding more contracts and subcontracts to minority business firms in order to enhance minority capital ownership and overall state economic development, and to reduce dependency.	See Section III 7.1

3. How do you develop and track action plans that address your key strategic objectives?

Senior leader reviews plan, goals, and objectives with the Director of Administration. Action plans are tracked by using statistics and reports of OSMBA and agencies activities.

4. How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

Communication of OEPP's Strategic Plan is provided by the Directors of Administration and Constituent Services. Senior leader has immediate access to the Governor's Office Directors to ensure communication and coordination. Some of the methods of communication include performance reviews, staff meetings, office website, published statistical annual reports and other means of communication with stakeholders and partners.

5. How do you measure progress on your action plans?

OSMBA measures success by comparing the current activities to those of previous years. The following indicators measure success:

- A) Combining all agencies expenditures with certified minority firms during the fiscal year, meeting and/or exceeding the 10% goal. Realizing an increase in the State’s expenditures with minority businesses and the number of certifications awarded;
- B) Increasing each year the number of new qualified applications received for certification;
- C) Increase in the number of attendees of OSMBA-sponsored training and networking events for business owners and agency procurement officials;
- D) Increase in the number of procurements issued to certified minority businesses;
- E) Increase in the accuracy of data received from agencies; and
- F) Obtaining 100% compliance of state agencies submitting their reports and meeting their 10% goal of expenditures with certified businesses.

6. How do you evaluate and improve your strategic planning process?

Staff training will ensure proper knowledge and intent of laws affecting the program, expected conduct of staff and services available to meet the customer’s needs. Challenges affecting the successful obtainment of strategic objectives are identified through the development of the organizational profile. Evaluation and improvement of processes are the result of reviewing key measures and comparing current information with previous fiscal years. In addition, feedback from stakeholders as to the success of efforts will also prompt OSMBA to re-evaluate goals, efforts and processes.

7. If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide an address for that plan on the website.

Not available on website.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

Key customers and stakeholders are the residents of South Carolina. The Governor, Legislators, state government agencies, and other agencies are also customers.

1. How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
OSMBA Citizens of South Carolina	Must desire information regarding business resources and minority certification program in South Carolina.
Small, woman- and minority-owned businesses	Must need information or services from OSMBA.
State government agencies	By statute, agencies must report their expenditures with certified minority-owned businesses.
Business and contracting communities	Must be established businesses duly licensed and permitted to conduct business in the State.

2. How do you keep your listening and learning methods current with changing customer/business needs and expectations?

Methods developed to facilitate monitoring changing needs include trade fairs, networking events, meetings with customers, public hearings, advisory councils, customer satisfaction surveys, and written or other verbal communications. National and state level changes are noted through publications, training, and conferences. Changes in federal and state legislation affect needs and expectations. Significant trends or changes in customer service expectations and needs are discussed during management meetings internally and with major stakeholders, with service delivery excellence as a primary goal.

3. What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Input from our customers is received verbally through one-on-one conversations, written correspondence, emails and through our website. These options allow all customers an avenue to communicate with OSMBA.

4. How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?

Customer surveys and other communication methods are used to evaluate our effectiveness.

5. How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. If major stakeholders input are required in the decision-making process, senior leader will include them in the discussion. When appropriate, input and approval is obtained from the Director of Administration prior to implementing any recommended improvements.

Primary methods for obtaining data on customer satisfaction include direct feedback received from the Governor, ECOS, legislators, agency directors and managers, the Ombudsman's Office and the Correspondence Office. Surveys are utilized to measure customer satisfaction/dissatisfaction. OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. Other methods include meetings with customers, advisory councils, written and verbal communication.

6. How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups?

Strong customer communication is critical to building positive relationships. Staff listens to and respects the opinions and suggestions of each customer and stakeholder. OSMBA is a proud advocate for small and minority businesses inclusion in the procurement process, not only with government agencies, but with corporations. Networking events provide an opportunity for procurement officials (corporate and government) and business owners to meet one-on-one and discuss potential procurement opportunities. An award is issued to agencies as an acknowledgement of their outstanding award of contracts to certified businesses.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

- 1. How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?**

The operations, processes, and systems measured are determined by the Agency Leadership Team, under direction from the Governor’s ECOS staff and according to the Governor’s priorities, needs and OEPP’s strategic Plan. In addition, SC Consolidated Procurement Code mandates what information is to be obtained and reported for compliance.

- 2. How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?**

OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. When appropriate, input and approval is obtained from the Director of Administration prior to implementing any recommended program improvements.

- 3. What are your key measures, how do you review them, how do you keep them current with your needs and direction?**

Key measures are indicated below. Reports are generated tracking the data as they are provided. Information is updated and reviewed frequently during a quarter by staff and OSMBA director.

OSMBA	# of certifications and recertifications issued	Annually
	# of qualified certification applicants	Annually
	# of attendees for OSMBA sponsored events & training	Annually
	# of agencies submitting quarterly reports	Quarterly and Annually
	# of agencies submitting annual MBE Plan and Goal	Annually
	# of agencies meeting 10% MBE Goal	Annually
	\$ spent with certified minority businesses	Annually
	Increase in \$ spent with MBEs as compared to previous FY	Annually

- 4. How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?**

Most of the information cited in 4.3 is mandated for OSMBA to collect. The information provided in those reports measures the effectiveness of OSMBA efforts and also identify why OSMBA may not be reaching some objectives. For example, by collecting data on each agency’s MBE expenditures and goals, one can quickly identify which agencies are not in compliance, and provide an explanation of why the State may not reach its 10% collective goal of expenditures with certified minority businesses.

- 5. How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?**

To ensure accuracy and data quality, all work products flow from employee to director for approval. Agency reports are date-stamped upon receipt for measuring timeliness. Checks and balances are utilized to increase the reliability and quality of data. OSMBA staff receive training in Ethics and FOIA requirements to ensure security of data received. Information analysis helps to ensure that customer needs drive the decision-making process.

6. How do you translate organizational performance review findings into priorities for continuous improvement?

Keeping our customers, strategic goals and objectives in mind, OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders.

7. How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

The collection, transfer and maintenance of accumulated employee knowledge are accomplished through cross-training, sharing of information and reports, and the development of on-line internal information systems. Files are kept organized and clearly labeled to eliminate interruption of operations in the event a staff member is absent or unavailable. Systems are constantly reviewed for best practices to determine whether it is user friendly and can readily provide needed information. Procedure manuals are being updated to provide instruction for current procedures and systems. A flow chart tracking the certification process was developed to ensure all staff understand the process and can effectively communicate it with customers. New relevant program information is exchanged and shared with all staff. Reference and resource material are readily available for all staff to assess.

Section III – Elements of Malcolm Baldrige Category 5 Workforce Focus

1. How do you organize and measure work to enable workforce to: 1) develop their full potential, aligned with the organization’s objectives, strategies and action plans; 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?
OSMBA director delegates assigned work according to staff areas of responsibility, with a focus on objectives, strategies and action plans. Staff is provided an opportunity to utilize creativity and self-initiative.

2. How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?
OSMBA staff is small, so it is imperative that all employees are familiar with the responsibilities of each and share information so that all functions can be completed.

3. How does management recruit, hire, place and retain employees?
OSMBA is committed to develop programs that foster individual growth for employees, identifying staff for advancement, and assisting in creating a diverse workplace. OSMBA is committed to promoting from within. Employees are alerted of job openings within the office, and emails and job postings are sent out when there are vacancies in other departments within OEPP.

4. How do you assess your workforce capability and capacity needs, including skills, competencies and staffing levels?
Training needs are assessed through individual interactions between director and employees and detailed in the employee’s planning stage. Because the Office of Human Resources provides human resource services for the Governor’s Office in partnership with the Budget and Control Board (B&CB), OSMBA shares in the wide variety of education, training and development opportunities offered by the B&CB and benefits from B&CB expertise in personnel issues. In addition, staff participates in relevant training that will sharpen the skills of OSMBA staff and maintain

knowledge of current developments in areas related to the operations of the program. Some of the types of training staff have attended include ethics training by the Ethics Commission, FOIA, legal and procurement training offered by the B&CB and the state purchasing association, and disadvantaged enterprise program training offered by SC Department of Transportation and the Federal Highway Administration. Information obtained is shared. This information directly impacted office activities by enabling them to be more efficient in the evaluation of applicants for certification.

5. How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

Certification related training directly impacts staff activities by enabling them to have a better understanding of the MBE program, its processes, increase efficiency in the evaluation of applicants for certification, and improve customer service with stakeholders by effectively communicating guidelines and providing accurate information in response to customer inquiries, while protecting the information submitted by the applicants.

Procurement and business resource related training allows staff to efficiently respond to inquiries from customers on how to conduct business with the state and identify the appropriate agency (state, local or federal) they may be seeking for assistance.

Additional training programs are selected to increase the efficiency of services related to the submittal and processing of MBE reports submitted to OSMBA for processing.

6. How does your development and learning system for leaders address the following:

a. development of personal leadership attributes

b. development of organizational knowledge

c. ethical practices

d. your core competencies, strategic challenges, and accomplishment of action plans

OSMBA has an open-door policy which allows staff to communicate directly with the director any concerns, suggestions or questions and allows everyone to contribute to the overall work system. Employee feedback and suggestions are encouraged. Staff has opportunities to pursue relevant new projects. Staff has received training on the EPMS system.

7. How do you identify and address key developmental training needs for your workforce?

With our open-door policy, staff is encouraged to provide suggestions for improving systems, and several have been implemented. Staff is allowed to attend relevant training and represent the program during community outreach efforts. Variable work schedules help employees balance personal and professional lives.

Employee feedback, via informal meetings and exit interviews, provide staff assessments of program and operations. The employee grievance policy detailed in the Employee Handbook provides for mediation and appeal to the State Human Resources Director.

Determination of priorities for improvement is assessed based on the suggestion relevancy to the goals, objective strategy and available resources of the office and OEPP.

8. How do you encourage on the job use of new knowledge and skills?

As stated earlier, OSMBA staff is small, so any opportunity to improve our efficiency is welcomed by all staff.

9. **How does employee training contribute to the achievement of your action plans?**
OSMBA staff must stay abreast of the needs of the customers, their expectations and methods to improve the efficiency of our activities. Any new method or training that will improve our activities is welcomed.
10. **How do you evaluate the effectiveness of your workforce and leader training and development systems?**
Input from our customers and tracking of our activities serve to measure our effectiveness.
11. **How do you motivate your workforce to develop and utilize their full potential?**
Since the staff of OSMBA is limited and the advancement opportunities are very limited, it is critical to the success of this office to hire employees who are self-motivated and have a high personal commitment towards excellence in their performance.
12. **What formal and/or informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction and motivation?**
Open communication is critical to the success of this office. Staff are constantly asked for their feedback and opinions on how to improve the office, leadership style and operations. Exit interviews are conducted by the Office of Human Resources.
13. **How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?**
OSMBA has only three positions, which limit the career advancements within. However, the skills obtained by the workforce are transferable and highly desirable by other agencies.
14. **How do you maintain a safe, secure, and healthy environment?**
Hazard Communication Policy is given to all employees at new hire orientation sessions. Program director has received safety training and shared information with staff. Any adjustments of operational procedures that will improve safety of staff are implemented. OEPP and Human Resources ensure that the facilities are inspected accordingly. Wellness information, free health workshops, health screenings information and training sessions are posted routinely for employees by Human Resources. Emergency and disaster preparedness is coordinated through the Constituent Services Office, with staff on call to assist if necessary. Employees are informed of and are trained in evacuation procedures in the event of fire, etc. and director has been instructed to take roll call in such events.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

1. **How do you determine and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?**
Key processes are selected by referring to OSMBA's strategic plan, mission and objectives to determine whether or not it is in compliance with them. OSMBA communicates objectives, define measures, and inspect progress and achievement of objectives through teamwork of staff. New and revised databases and electronic tracking systems monitor the intake and dispersal of program service processes, allowing for greater coordination and efficiency in the delivery of services and tracking of quarterly and annual reports. OSMBA and OEPP reviews annually the effectiveness of program activities and compliance with objectives, strategic plan, and Office mission.

2. **How do you determine and what are your key work process that produce, create or add value for your customers and your organization and how do they relate to your core competencies?**
Key processes are selected by referring to OSMBA's strategic plan, mission and objectives to determine whether or not it is in compliance with them. OSMBA communicates objectives, define measures, and inspect progress and achievement of objectives through teamwork of staff. Our key processes that provide value are the maintaining of the state's MBE directory, administration of the certification program, assistance in the understanding of the procurement process for businesses and the identification of minority businesses for agencies.
3. **How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process design and delivery?**
OSMBA staff are constantly seeking and testing new processes and procedures to improve efficiency in services rendered. Customer feedback or internal indicators are used to measure their effectiveness.
4. **How does your day-today operation of these processes ensure meeting key performance requirements?**
Staff continuously reevaluates and updates processes to improve services through meetings with key partners. Before initiating new activities, OSMBA evaluates whether or not it is consistent with its strategic plan, mission and objectives.
5. **How do you systematically evaluate and improve your key product and service related work processes?**
OSMBA's Strategic Plan identifies key support processes for all office through the corresponding action items and performance measures inputted. Staff crucial to particular projects is part of the process of developing goals and action plans for those projects and are part of the process of developing goals and action plans for those projects and are included when changes are necessary. Staff regularly attends relevant training on program related issues affecting these projects.
6. **What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?**
OSMBA's key support processes involve the intake and processing of certifications and applications. Due to the increasing number of applications received and the number of agency reports to process, OSMBA is working with other agencies to design systems to reduce the processing time of these reports, so that we can provide other critical services to our customers.

Section III – Elements of Malcolm Baldrige

Category 7: Results

- 7.1 **What are your performance levels and trends for the key measures of mission accomplishment/product and service performance that are important to your customers?**
Timely submittal of annual MBE reports - For fiscal years prior to FY 06/07, only 50% of agencies submitted annual MBE goals of 10% or more. The trend nationally is to utilize an electronic reporting system to reduce human error, increase efficiency and improve timeliness of data submitted.
As a result of an amendment to the SC Consolidated Procurement Code, approximately 90% of the agencies submitted annual goals for FY 06/07 and 07/08.

Measures	FY 03-04	FY 04-05	FY 05-06	FY 06-07	FY 07-08
#Certifications	184	100	83	30	33
#Recertifications	29	99	40	30	27
\$ Spent by State Agencies with Certified Minority & Women Businesses	\$30,303,947	\$37,631,601	\$56,908,160	\$28,424,530	\$19,331,692 *incomplete report

*** Final reports have not been submitted by all agencies.**

7.2 What are your performance levels and trends for your key measures on customer dissatisfaction?

OSMBA currently does not have data on customer dissatisfaction.

7.3 What are your performance levels for key measures of financial performance, including cost containment, as appropriate?

OSMBA continues to find new and creative ways to promote increased efficiency and deliver vital services in light of tight economic times and budget constraints. OSMBA has increased the number of partners utilized to assist in the delivery of outreach and training services to customers. To reduce the number of mailings of requested items, additional forms and information have been added to the website, allowing OSMBA to continue to provide services to its customers.

7.4 What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

OSMBA complies with Human Resources objectives of performance levels and trends.

7.5 What are your performance levels and trends for your key measures of organizational effectiveness/operational efficiency, and work system performance?

OSMBA's goal is to process certifications within 90 days of receipt of a complete application. Due to the overwhelming number of new applications received and the reduction in workforce due to turnover in staff, OSMBA is currently unable to meet that goal. OSMBA believes that the development of an on-line pre-screening application system will reduce the number of applicants who are not eligible for the program and allow staff to allocate more time and resources toward those businesses that do meet the eligibility criteria.

7.6 What are your performance levels and trends for regulatory/legal compliance and community support?

OSMBA monitors the compliance of state agencies in the timely submittal of reports and percentage of their budgets spent with certified minority businesses.

**OEPP – State Office of the Governor
Victim's Assistance**

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
State Office of Victim Assistance

Section I - Executive Summary

Mission Statement The State Office of Victim Assistance (SOVA) is dedicated to efficiently channeling payments to crime victims in crisis through the Victim's Compensation Fund, while providing information, training and technical assistance to victim services providers statewide.

Vision In the interest of justice to all victims of crime whose injuries, pain, suffering and loss warrant our intervention and support, the State Office of Victim Assistance will: promote collaboration at all levels, in order to restore justice to eligible crime victims who are in need of advocacy and financial assistance; provide a network environment in which we work closely with victim service agencies and providers across the state to render advocacy, support, programs, services, information, referrals, training and technical assistance, thereby ensuring that together we are equipped to meet the needs of South Carolina's crime victims; practice a community and victim centered approach to proactively end violent crimes statewide, and assist crime victims and their families in need. By providing compensation to victims of crime who are eligible, and meeting the educational, training and professional needs of victim advocates, health care professionals, South Carolina schools, and victim service providers, the State Office of Victim Assistance seeks to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system.

Major Achievements for FY 2007-2008

- SOVA piloted the outreach system for solicitor advocates to access payments made by SOVA when requesting restitution.
- Working through the SC Victim Services Coordinating Council (VSCC), SOVA assisted with the passage of H.4601, which codifies the VSCC, allows victims to receive an additional 20 counseling sessions upon documented need, and creates a certification program for victim service providers throughout the Palmetto State.
- Held the SC Crime Victims' Unity Ceremony in conjunction with the Crime Victim's Ombudsman in recognition of Victims' Rights Week 2008
- Co-sponsored the SC Victims' Rights Week Conference with the Victim Assistance Network
- Held the Third South Carolina Victim Assistance Academy in partnership with the SC Victim Assistance Network and the Medical University of South Carolina
- Saved victims over \$7.9 million through the bill negotiation process.
- Financial monitoring from the Office for Victims of Crime, US Department of Justice, resulted in no findings.

Key Strategic Goals for Present and Future Years

1. To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina.
2. To ensure accountability in the expenditure of state funds designated for victim assistance.

Key Strategic Challenges

To be efficient and responsive in serving crime victims, SOVA will need the support and cooperation of victim advocates throughout the state. This will require building mutually beneficial partnerships in the provision of services. SOVA has faced many human resource challenges; however, recent restructuring efforts have begun to facilitate a team approach among SOVA personnel. This team atmosphere will continue to be pursued to increase productivity and employee morale.

How the accountability report is used to improve organizational performance

The data collected and analyzed in this report provides the basis for goals for the upcoming year to ensure continuous process improvement. Goals are then reviewed quarterly by team leaders to ensure adequate progress.

Section II - Organization Profile

Table II.1.1 –State Office of Victim Assistance - Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/ Stakeholders	Key Partners
Compensation for eligible victims of crime for medical, counseling, lost wages, and burial	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	National Association of Crime Victim Compensation Boards
Training for victim advocates and service providers on the SOVA process and other services for crime victims	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	National Crime Victims Research and Treatment Center; Commission on Prosecution Coordination; SC Victim Advocate Forum; SC LEVA Association; SC Department of Probation, Parole, and Pardon Services; SC Department of Public Safety
Advocacy, outreach, support, and referrals	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Association of Child Advocacy Centers; SC Association Against Domestic Violence and Sexual Assault; South Carolina Victim Assistance Network
Restitution and recovery	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Department of Corrections; SC Summary Courts Association

5. Operation locations

1205 Pendleton Street, Cola, SC

Outreach Offices: Orangeburg, Bamberg, and Bennettsville

6. The number of employees (segmented by employee category)

26 Classified Unclassified 1 Contract
 1 Temporary 4 Temporary (Grant) Temporary (time-limited)

7. The regulatory environment under which your organization operates

SOVA is governed by the following:

1. SC Constitution – Article I, Section 24 Victims’ Bill of Rights (Constitutional Amendment)
2. SC Code of Laws – Title 16, Chapter 3
 - Article 13 Compensation of Victims of Crime (SOVA laws)
 - Article 14 Victim/Witness Assistance Program (SOVA laws)
 - Article 15 Victim and Witness Service
 - Article 16 Crime Victims’ Ombudsman of the Office of the Governor
3. SC Code of Regulations – Chapter 132
 - Chapter 132 SC Crime Victim’s Advisory Board (SOVA reg.)

4. Laws Governing the Collection/Disbursement of Crime Victim Monies at the Municipal & County Levels

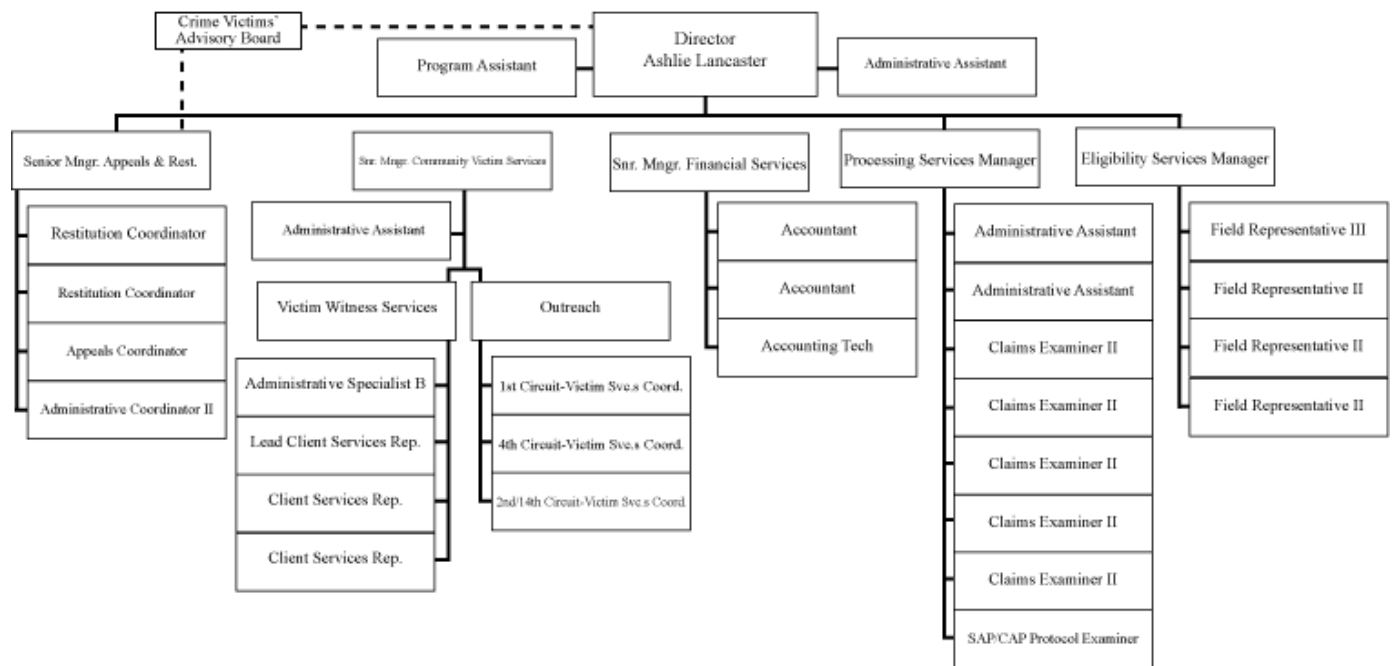
- See Sections 14-1-203, 14-1-204, 14-1-205, 14-1-206, 14-1-207

8. Performance improvement systems

SOVA performance is evaluated through weekly manager's reports on the number of claims input in the PROGRESS system, the number deemed eligible, the number of claims examined and paid, and the amount of funds recovered through restitution/subrogation.

9. Organizational chart

State Office of Victim Assistance



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08-09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	1,025,799	\$	1,370,918		1,494,257	\$
Other Operating	11,876,334	37,365\$	11,354,791	\$ 41,892	12,315,831	\$40,849
Special Items	279,353	\$279,353	279,361	\$279,361	272,377	\$272,377
Permanent Improvements		\$		\$		\$
Case Services	0	\$		\$		\$
Distributions to Subdivisions	789,479	\$	789,479	\$	822,000	\$
Fringe Benefits	301,638	\$	426,392	\$	404,562	\$
Non-recurring		\$		\$		\$
Total	14,272,603	\$316,717	14,220,941	\$321,253	15,309,027	\$313,226

Other Expenditures

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose	FY 06-07 Budget Expenditures			FY 07-08 Budget Expenditures		
		SOVA	By providing compensation to victims of crime who are eligible, and meeting the educational, training and professional needs of victim advocates, health care professionals, South Carolina schools, and victim service providers, the State Office of Victim Assistance seeks to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system.	State:	37,365		State:
Federal:	3,643,988				Federal:	4,094,242	
Other:	10,311,897				Other:	10,039,460	
Total:	13,993,250				Total:	14,175,594	
% of Total Budget:				23%	% of Total Budget:		21%

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership

1.1 How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior?

Short and long term direction is set through regular managers' and full staff meetings. Performance expectations are set in Planning Stages for employees and through written policies and procedures. Organizational values are facilitated through an open door discussion policy that encourages empowerment and innovation. Ethical behavior is encouraged through internal controls that separate payment preparation from funds disbursement.

1.2 How do senior leaders establish and promote focus on customers and other stakeholders?

SOVA staff members are encouraged to attend customer-service trainings. Regular field visits are made to promote partnerships with law enforcement and court based victim advocates. These visits encourage cooperation and as such increase the efficiency and accuracy of processing claims. Managers are charged in their Planning Stages with exploring other states' best practices.

1.3 How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?

Data is maintained on the number of clients served and denied, as well as the types of crimes committed, the amount of funds paid out by county and by victim. Training team impact is assessed through participant evaluation forms.

1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?

Fiscal compliance is maintained through the OEPP Finance office which oversees all disbursements issued by SOVA. Legal and regulatory accountability are maintained through a complex filing system that backs-up a computerized data collection system. All denied claimants receive appeal packets.

1.5 What key performance measures are regularly reviewed by senior leaders?

- Number of claims input in the PROGRESS system
- Number deemed eligible
- Number of claims examined and vouchers ordered/paid
- Amount of funds recovered through restitution/subrogation

1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization including the head of the organization and the governance/board/policy making entity? How do their personal actions reflect a commitment to the organizational values?

Employees are encouraged to establish a minimum of one objective for each evaluation period determined by them as to how they can best improve work procedures. In addition, all managers are included in the decision-making process, and the staff is asked for feedback at regular staff meetings. Suggestions from staff are considered by upper management and implemented as appropriate.

1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?

Staff attending trainings must train staff not attending upon completion of that training. In addition, SOVA attempts to promote from within as much as possible to encourage retention and continued growth of organizational knowledge.

1.8 How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?

The SOVA work environment allows for the accomplishment of objectives and innovations by providing staff with direct control over their own work processes with an approval system for work output that ensures internal controls through a routing system that impacts each division.

1.9 How do senior leaders create an environment for organizational and workforce learning?

Employees are encouraged to attend trainings to enhance job skills and to cross train with other employees.

1.10 How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?

Employees are rewarded through recognition during staff meetings.

1.11 How does senior leadership actively support and strengthen the communities in which the organization operates? Include how senior leaders and employees contribute to improving these communities.

In conjunction with the Crime Victims' Ombudsman, SOVA hosts an annual SC Crime Victims' Unity Ceremony. In addition, SOVA outreach office staff will accompany victims to court when a court-based advocate is not available. The Outreach staff has also coordinated emergency response teams to be available to assist in a mass victim incident.

SOVA or SOVA staff is a member of or involved with the following organizations:

- National Association of Crime Victim Compensation Boards
- South Carolina Association of Child Advocacy Centers
- South Carolina Victim Assistance Network
- Interagency Council on Homelessness
- South Carolina Coalition Against Domestic Violence and Sexual Assault
- Human Trafficking Task Force

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

2.1 What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology, regulatory, societal or other potential risks, and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.

Manager’s meet on a regular basis to establish short and long term goals and then work with support staff to implement procedures necessary to achieve those goals. Office strengths, weaknesses, and needs are assessed through the EPMS process, regular manager’s meetings, and feedback from staff. In addition, the SOVA staff participates in an annual staff development day during which time goals are discussed and prioritized.

Chart III.2. Strategic Planning Chart for State Office of Victim Assistance

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 07-08 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina.	Create a Victim Service Coordinating Council to improve coordination of services.	Passage of H.4601 codifying VSCC.	7.1
To ensure accountability in the expenditure of funds designated for victim assistance.	<ul style="list-style-type: none"> • Restitution Recovery • Trainings • Enhance customer satisfaction through faster eligibility determination. • Certification Program for victim service providers 	<ul style="list-style-type: none"> • Reduction in Spending Program/Creation of remote access system to obtain restitution information for court-based victim advocates. • State Victim Assistance Academy • Increase productivity by 10% in Eligibility Services. • Passage H.4601 creates mandatory certification program for all SC victim service providers 	7.3/ 7.1, 7.2 7.1 7.1, 7.2

2.2 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Efforts to increase the number of claims processed are being guided through employee input on work procedures in an effort to increase employee morale and hopefully reduce human resource issues.

2.3 How do you develop and track action plans that address your key strategic objectives and how do you allocate resources to ensure accomplishment of your action plans?

Action plans to achieve strategic objectives are developed through annual staff development strategic planning exercises and are adapted as needed through particular duties assigned to staff members through the EPMS Planning Stage process. In addition, action plans are tracked and regularly evaluated through manager’s meetings to ensure goals are being met.

2.4 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

Objectives/action plans/performance measures are communicated through staff meetings, EPMS, and written policies and procedures.

2.5 How do you measure progress on your action plans?

Progress is measured internally via the achievement of employee goals through EPMS as they are directly related to office goals. Progress is measured externally through feedback from advocates and victims via training surveys and surveys of victims going through the appeal process.

2.6 How do you evaluate and improve your strategic planning process?

The strategic planning process is evaluated through staff development brainstorming with staff suggestions incorporated in the creation of future goals.

2.7 If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide an address for that plan on the website.

The strategic plan is not available via the web.

**Section III – Elements of Malcolm Baldrige
Category 3: Customer Focus**

3.1 How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Victims	Efficient and compassionate processing and payment of claims; appropriate referrals and resource information
Victim Advocates	Training on the SOVA application process and other victim services
Hospitals and Service Providers	Training on the SOVA application process and other victim services; timely and accurate processing of payments.
Solicitors	Training on the SOVA application process and other victim services; Assistance in the coordination of standards for victim/witness programs
Law Enforcement	Training on the SOVA application process and other victim services

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?

Changing customer needs and expectations are assessed through training surveys and calls and correspondence received. Correspondence is tracked through a database to determine patterns in customer needs.

3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

Customer can access services directly or through a network of local victim advocates in municipalities and Judicial Circuits. Complaints can be directed to the Crime Victims Ombudsman office or to the Crime Victims Advisory Board.

3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?

Dissatisfaction is assessed based on complaints received, and processes are adapted as necessary. In addition, satisfaction with trainings and with treatment of victims during the appeal process is assessed through surveys.

3.5 How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Information gathered from surveys, calls, and correspondence is evaluated by managers and changes to policies and procedures are incorporated as appropriate.

3.6 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?

Positive relationships are built through meetings with victim advocate associations, public presentations, and the newly formed SC Victim Services Coordinating Council.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?

Operations essential to performing SOVA's mission are measured, to include the number of claims processed, the number deemed eligible, and the number and amount of payments made, as well as restitution recovered and amounts saved through bill negotiation.

4.2 How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?

Decisions on the workability of internal processes are made based on the output shown through weekly manager's reports. Financial data is tracked to show increases/decreases in types of claims paid and budget requests are adjusted accordingly.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?

Key measures include the number of claims received, processed, and paid, the number of training events provided, the number of informational materials distributed, and the amount of subrogation/restitution collected. As the office undertakes new initiatives, key measures are adapted to include these initiatives.

4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?

Data is gathered from other states with similar compensation programs to assess and implement best practices. In addition, the National Association of Crime Victims' Compensation Boards provides comparative data in controversial issues, as well as updates on state Supreme Court cases involving compensation programs around the country.

4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?

All claims data is entered into an electronic database to ensure its long term integrity and availability. Accuracy of data is ensured through management oversight.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?

Performance review findings are used to assess internal processes and promote continuous improvement by finding ways to adapt procedures to alleviate any concerns identified.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

Organizational and employee knowledge is collected and shared through written policies and procedures.

Section III – Elements of Malcolm Baldrige Category 5 Workforce Focus

5.1 How does management organize and manage work to enable your workforce to: develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

The staff is divided into process specific divisions, intake, eligibility, recovery, processing, financial services, and outreach. Staff work products are routed through the division manager. The staff is encouraged to participate in training designed to increase knowledge of their assigned duties.

5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?

Skills and best practices among community action agencies are shared via annual training events.

5.3 How does management recruit, hire, place, and retain new employees?

New employees are recruited and hired via the state human resource system.

5.4 How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?

Capability and capacity needs are assessed through the EPMS process and meetings with local advocates.

5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?

Internal training needs are identified and addressed through the EPMS process. Advocate training needs are assessed through the application submission process. Employees are required to justify training requests in terms of how they contribute to the attainment of goals for the organization.

5.6 How does your development and learning system for leaders address development of personal leadership attributes, organizational knowledge, ethical practices, and core competencies, strategic challenges and achievement of your action plans?

Managers are expected to set an example for high performance and are held accountable through the EPMS process for achievement of action plans.

5.7 How do you identify and address key developmental training needs for your workforce?

Training needs are identified through manager assessment of employee performance and skills.

5.8 How do you encourage on the job use of new knowledge and skills?

Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.

5.9 How does employee training contribute to the achievement of your action plans?

Training is geared toward skills needed by employees to achieve action plans.

5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?

The effectiveness of training is based on survey evaluations and subsequent job performance and knowledge.

5.11 How do you motivate your workforce to develop and utilize their full potential?

Workforce potential is developed by encouraging and rewarding hard work and innovation.

5.12 What formal and informal assessment methods and measures do you use to determine workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. SOVA also sponsors an annual staff development to encourage collaboration among departments and to provide training identified for all SOVA staff. In 06-07, all SOVA staff participated in training on workplace stress.

5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout your organization?

Cross training of employees and internal promotion are encouraged.

5.14 How do you maintain a safe, secure and healthy work environment?

A safe, secure, and healthy workplace is maintained through compliance with state and federal regulations on workplace requirements.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

6.1 How do you determine and what are your organizations core competencies, and how do they relate to your mission, competitive environment and action plans?

Core competencies include ability to understand and follow grant guidances, federal regulations, and OMB Circulars.

6.2 How do you determine and what are your key processes that produce, create or add value for your customers and your organization? How do you ensure that they are used?

- SOVA internal management (weekly and quarterly management reports on achievement of internal and external goals, monthly and close-out reconciliations for all funding, interim and final reporting)
- SOVA external management (training team presentations)
- Governor’s Office of Finance internal management (budgets, draw-downs, coding)
- State level accounting management (SC Comptroller General’s Office)
- Federal level management (US Departments of Justice)

6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

Employees are cross-trained to ensure retention of organizational knowledge through staff changes. Changing grant requirements are conveyed from the federal funding source to the state. State level provisos and other legislation are tracked to ensure changing requirements are incorporated.

6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?

These processes are designed to monitor compliance with action plans. Management reports are reviewed to ensure individual employees are meeting EPMS goals that contribute to each department reaching its departmental goals.

6.5 How do you systematically evaluate and improve your key product and service related processes?

Processes are evaluated through regular management and staff meetings.

6.6 What are your key support processes, and how do you improve and update these processes to achieve better performance?

Key processes include the processing and payment of claims, recovery of restitution and subrogation, and training and technical assistance. These processes are regularly evaluated and other states are contacted to ensure best practices are incorporated.

6.7 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

This is determined through close management of resources and steps under the law to ensure solvency of the compensation fund such as the ability to reduce claims across the board if funds are short.

Section III – Elements of Malcolm Baldrige

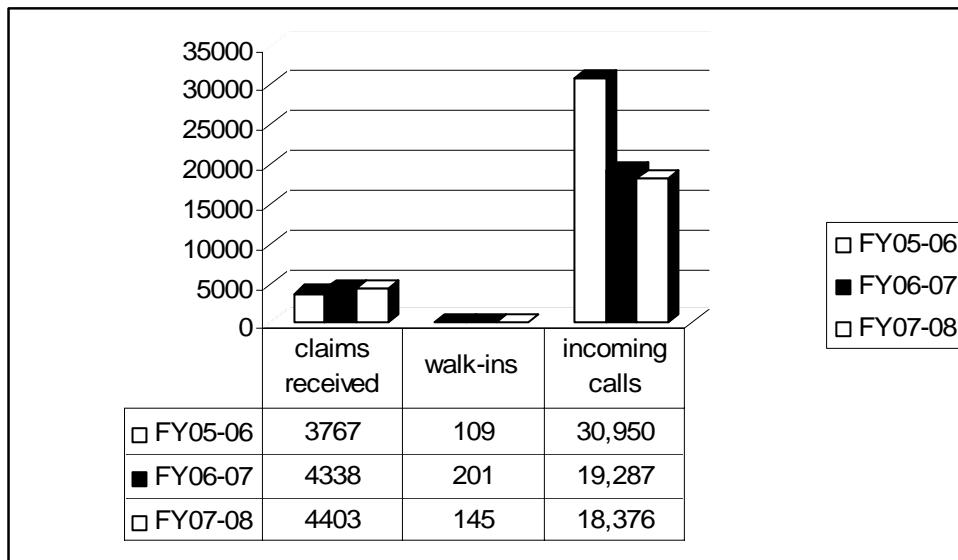
Category 7: Results

7.1 What are your performance levels and trends for the key measures of mission accomplishment/ product and service performance that are important to your customers?

Outcome measures for SOVA's Victim/Witness Assistance Services Department:

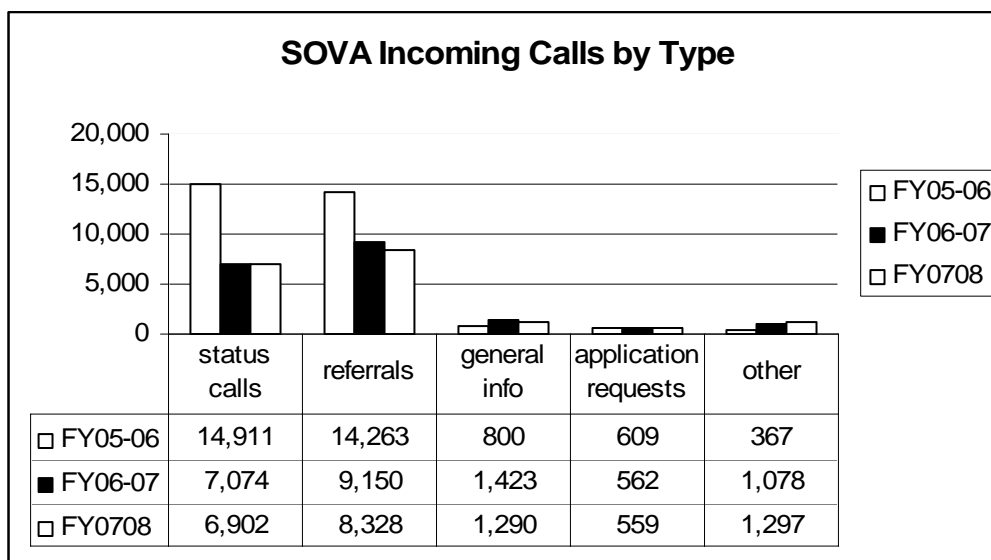
The Victim/Witness Department processes all incoming mail and calls and assists victims with both the application and appeal processes.

Chart 7.1.1



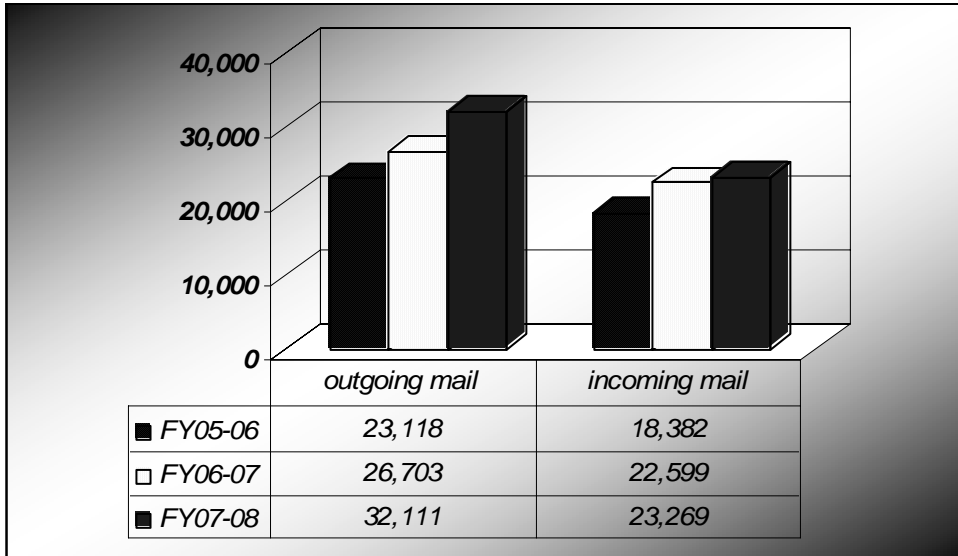
Calls received were categorized as follows:

Chart 7.1.2



Tracking incoming and outgoing mail:

Chart 7.1.3



The Victim/Witness Department also provides training and publication items to raise awareness of compensation and other victim services:

Chart 7.1.4

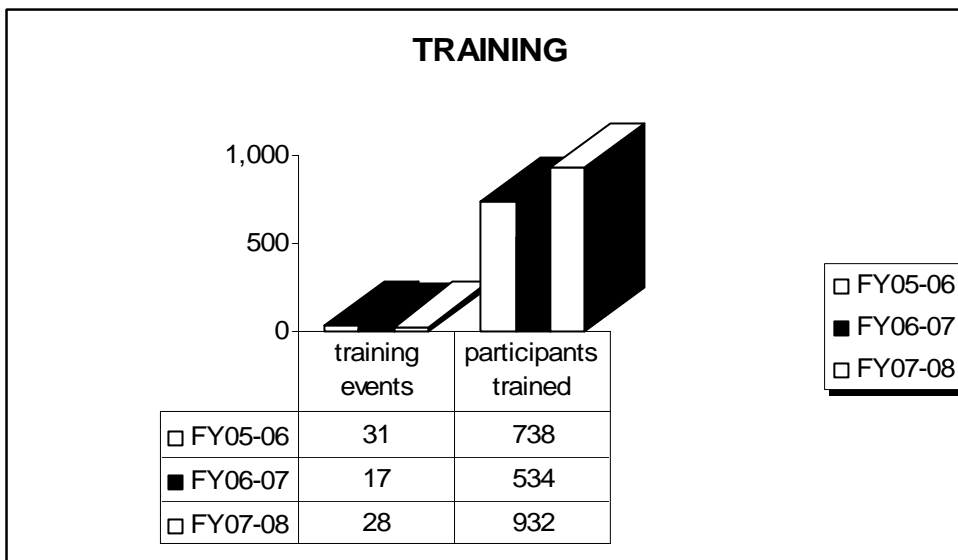
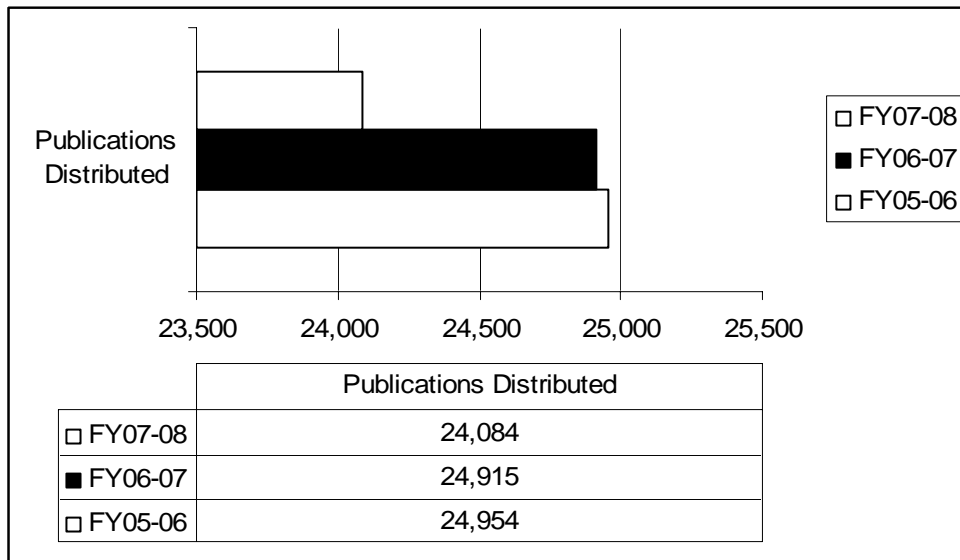
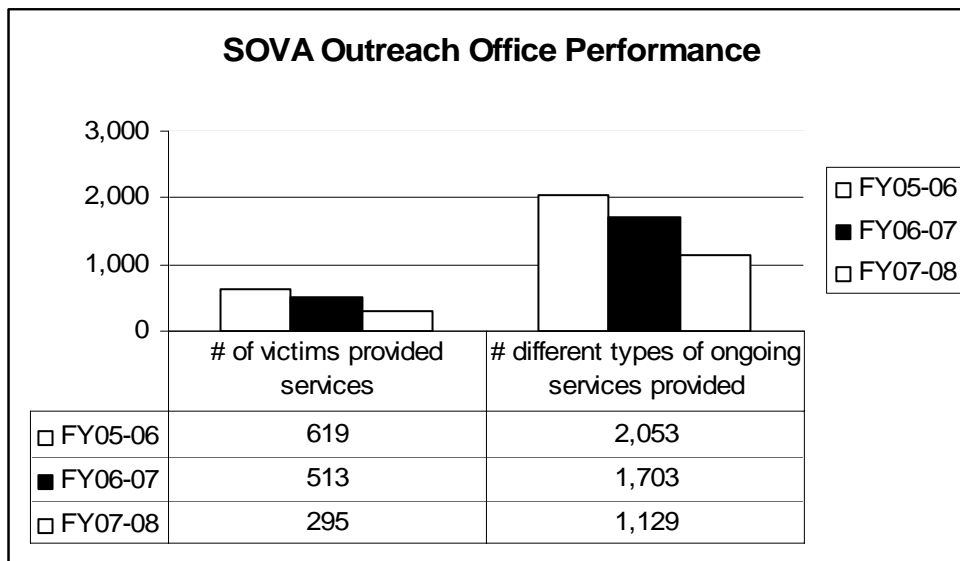


Chart 7.1.5



SOVA Outreach Offices reported the following measures of mission accomplishment for FY 2007-2008 as compared to prior fiscal years:

Chart 7.1.6

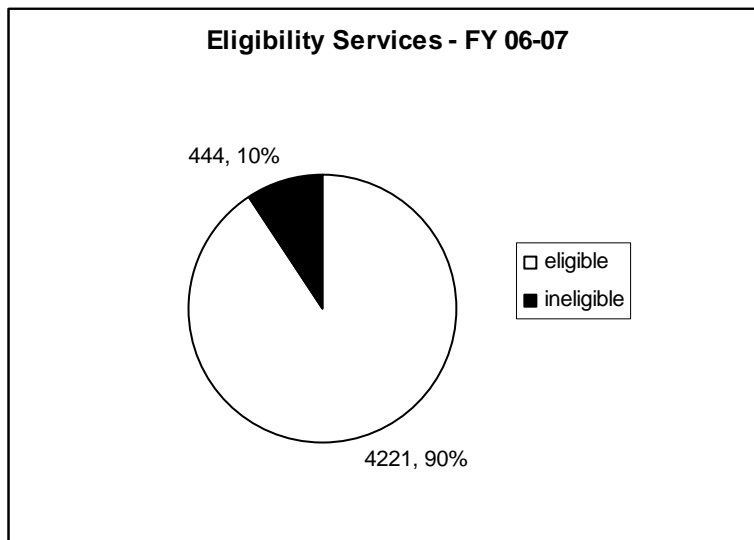


In addition, SOVA held the Third South Carolina Victim Assistance Academies in partnership with the SC Victim Assistance Network and the Medical University of South Carolina in May 2008 with 55 victim service providers trained. The Academy provided attendees with forty credit hours toward certification through the National Organization for Victim Assistance.

Compensation: Eligibility and Processing Services

The Eligibility Services Department processed 4,665 claims during FY 06-07, 90 % of which were deemed eligible:

Chart 7.1.7



Additionally, the Eligibility Services Department increased productivity by 60% as indicated in 7.2. There were 14 denials appealed to the Crime Victims' Advisory Board. Of those, 10 were upheld and 4 were overturned with full or reduced awards.

The Processing Services Department processed 8,515 vouchers for payment. In addition, 5,391 Sexual Assault and Child Abuse Protocols were processed. Despite these benefits, many victims are left with large balances they cannot pay. This year, Processing Services instituted a new initiative to negotiate bills on behalf of victims, saving victims approximately 1.4 million in out-of-pocket expenses since this process began.

Table 7.1

Total \$ Amount Owed to Providers	Total \$ Amount Paid	Total \$ Amount Offset
1,884,720.97	446,846.24	1,437,874.73

The Victim Services Coordinating Council was formed in FY06-07 to promote coordination among all agencies involved in victim/witness and domestic violence services. The Council produced a report recommending needed legislation for improving victim services in South Carolina. This report can be viewed at the Council website at <http://www.sc.edu/ccfs/research/VicServCouncil.htm>.

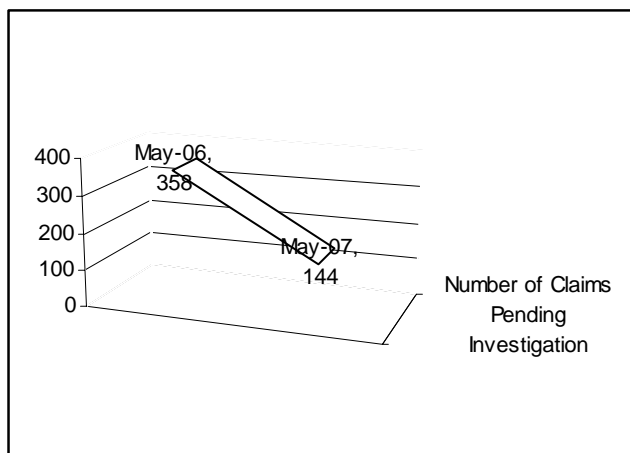
Restitution/Recovery Services

In FY 06-07, SOVA recovered over \$380,000 through restitution and subrogation (7.3). In addition, the Restitution Department worked with court-based advocates to create an outreach system for advocates to obtain information on benefits paid by SOVA on behalf of victims in order to assist with recouping those funds. This system will be tested and released in the Fall of 2007.

7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction?

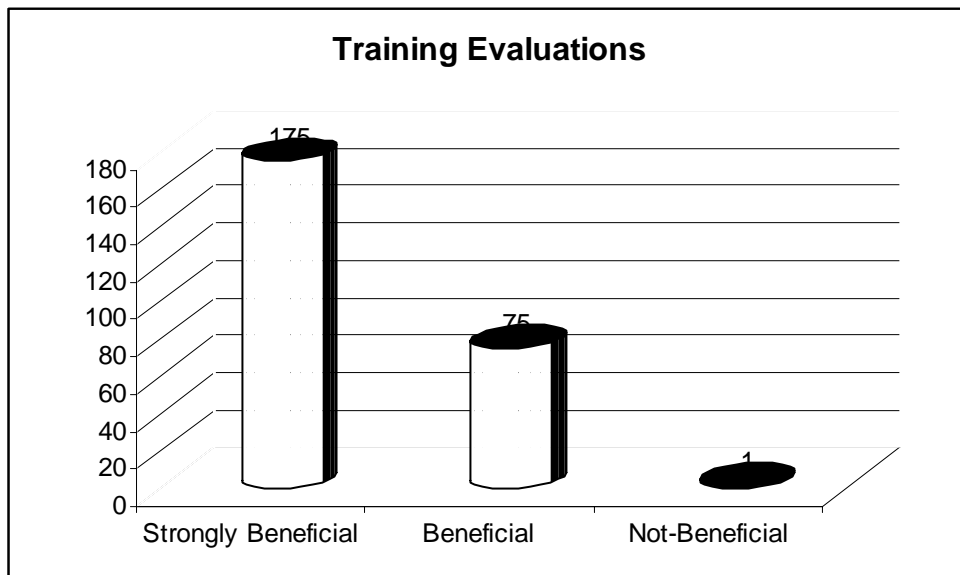
A key measure of customer satisfaction for victims is how quickly claims are deemed eligible or ineligible. The Eligibility Services Department has reduced processing time for claims by 60% as shown by the decrease in back-logged claims. In May 2006, the claim balance in Eligibility was 358; in May 2007, it was 144, for a difference of 214 claims.

Chart 7.2.1



The SOVA Training Team and Outreach Office training events received good ratings for training to law enforcement, solicitors, schools, hospitals, and other service providers: The 279 evaluations completed were overwhelming positive, indicating the training provided was clearly beneficial:

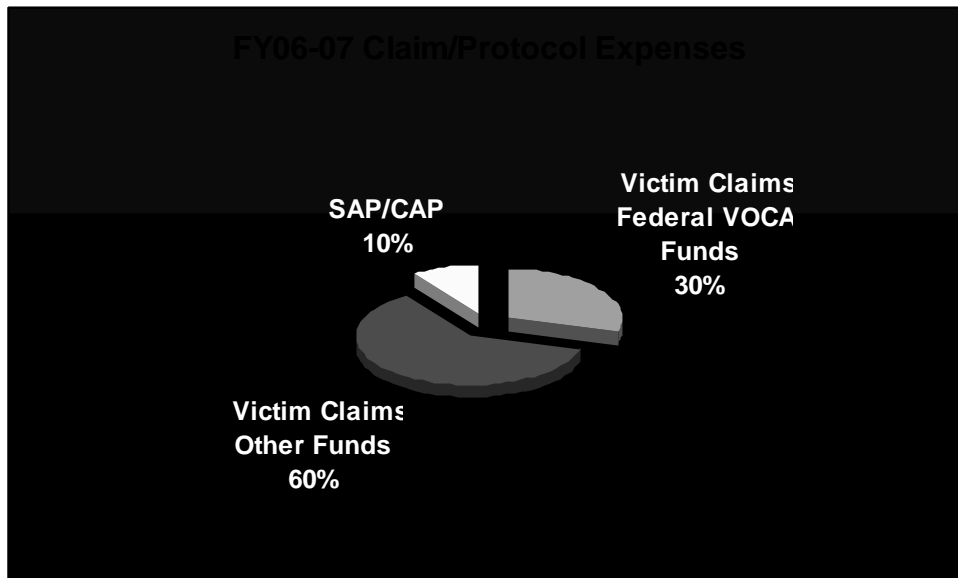
Chart 7.2.2



7.3 What are your performance levels for key measures of financial performance, including measures of cost containment, as appropriate?

In FY06-07, the Processing Services Department processed 8,515 vouchers for payment for a total of \$11.5 million in benefits for eligible victims of crime, as opposed to a total payout of 10.9 million in FY 05-06. Benefits paid for compensation claims and for Sexual Assault/Child Abuse Protocols (SAP/CAP) were as follows:

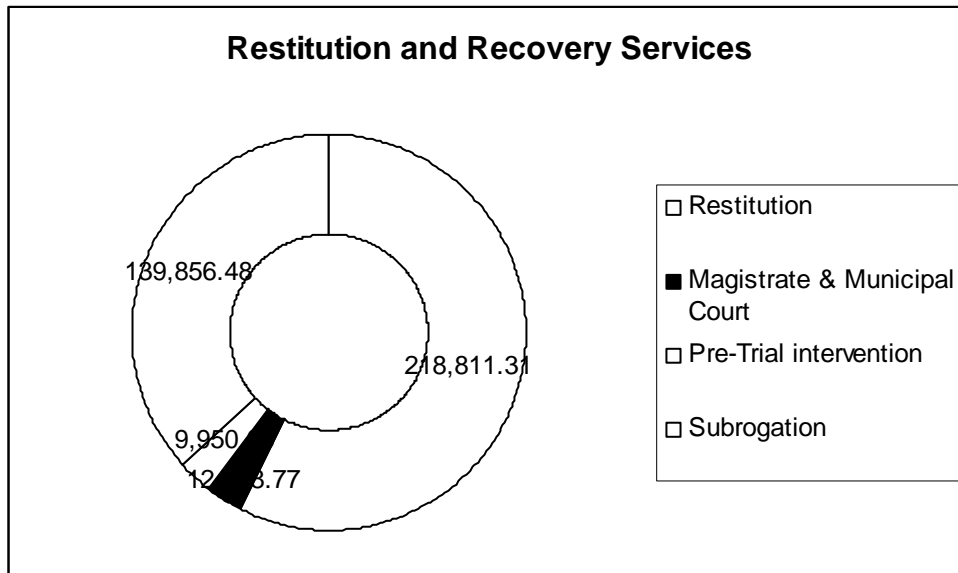
Chart 7.3.1



Forty-six (46) claimants requested and received additional funds from the Crime Victims' Advisory Board for a total increase in award amounts of 275,000.00.

The Restitution Program is designed to recoup funds from offenders for benefits paid on behalf of eligible crime victims. In this way, SOVA can help ensure the continued solvency of the compensation fund. A total of \$380,906.61 was recouped from the restitution/recovery program from July 1, 2006 to June 30, 2007. Funds were recouped from the following sources:

Chart 7.3.2



The Restitution and Recovery Services Department instituted a "Reduction in Spending" program to track funds offset through the tracking of restitution payments by offenders or through subrogation. In cases such as these where a victim is receiving benefits for medical or other services through another source, SOVA will monitor the claim and delay payment to determine any remaining balances owed. These efforts saved \$ 313,459.89 in potential duplicate payments in FY 06-07.

7.4 What are your performance levels and trends for key measures of workforce engagement, satisfaction, and development, including leaders, workforce retention, workforce climate?

All employees attended SOVA's annual staff development where they participated in strategic planning and received training in workplace stress management. Two employees were promoted through the internal selection process. One employee applied for and received certification through the National Organization for Victim Assistance. Eight (8) employees attended the SC Victim Assistance Academy and are also applying for certification. .

7.5 What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency?

All claims were processed according to internal processes and procedures and VOCA grant guidelines.

7.6 What are your performance levels and trends for regulatory/legal compliance and community support?

All federal and state reporting requirements were met according to the designated timelines. SOVA was monitored twice by the Department of Public Safety, Office of Justice Programs for its State Victim Assistance Program grant with no findings. In addition, SOVA received a positive Legislative Audit Council review during FY06-07. .

OEPP – Office of Veterans' Affairs

2007-2008 Accountability Report
Governor's Office of Executive Policy and Programs
South Carolina Office of Veterans' Affairs

Section I - Executive Summary

Mission Statement

The mission of the South Carolina Office of Veterans' Affairs is to advocate for all veterans and their family members, and to assist them in obtaining earned financial, health, and death benefits; establish uniform methods and procedures, and provide training, assistance, and instruction to county veterans' affairs officers; manage the state veterans' cemetery; administer the South Carolina Military Family Relief Fund; maintain the South Carolina War Roster; provide administrative and logistical services to the South Carolina POW Commission and Veterans' Trust Fund (Title 25, SC Code of Laws); and participate in the policies, management and operation of the South Carolina veterans nursing homes (Sec 44-11-30).

Vision

The vision of the South Carolina Office of Veterans' Affairs is to:

- be an efficient and dynamic service delivery network that exceeds statutory and moral obligations to serve those who served our Nation.
- be a proud veteran's organization, characterized by excellence and integrity for the fulfillment of our duties to our nation, state and to one another.
- strive to ensure that veterans will live the highest quality of life with dignity and honor, and also receive the honor due them at the time of interment.
- be a trusted and credible advisor to the Governor, General Assembly and other state activities.
- be an accountable steward of the resources allocated to us, and programs under our trust.

Major Achievements for FY 2007-2008

1. Opened, December 2007, and dedicated, 23 May 2007, the M.J. "Dolly" Cooper Veterans Cemetery in Anderson, SC.
2. The 220-bed Veterans Victory House (nursing home), which opened in November 2006, in Walterboro, SC has reached full staff and occupation levels.
3. Accelerated the compilation of the list of SC veterans who have served since WWII, "The War Roster," through the use of temps and work-studies.
4. Responded to requests for assistance from over 50,000 constituent contacts.
5. Educated and counseled veterans, in collaboration with the County Veterans Affairs Officers, service organizations' representatives, and the US Department of Veterans Affairs, such that **\$1.39 billion in federal veterans' benefits**, medical and financial, were realized in South Carolina in FY 2007.

Key Strategic Goals for Present and Future Years

1. Improve upon an already excellent service of advocacy and assistance to our State's 410,000 veterans and their family members by enhancing training programs for staff and County Veterans Affairs Officers. Increase the federal benefits received by SC veterans over the FY 2007 total of \$1.39 billion.
2. Honor the service and memory of deceased veterans, and their families by:
 - successfully opening and operating the new state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery.
 - attending the funerals of South Carolina service members killed in support of the Global War On Terrorism (GWOT).
3. Continue to research and compile the South Carolina War Roster.
4. Enhance communication among federal VA and Department of Defense agencies, the veterans' service organizations, County Veterans Affairs Officers, members of the General Assembly, and the Governor's Office.

5. Work toward a practical, paperless work environment.

Key Strategic Challenges

- Opportunities:
 - Federal and State leadership directives and resources have been directed toward veterans and their families in support of the Global War on Terrorism (GWOT). A challenging opportunity is to focus efforts and resources to serve, transition, and honor GWOT veterans and their families, and all veterans of South Carolina.
 - Enhanced collaboration with the VA, Department of Defense (DoD), SC state agencies and county and local agencies, to support and service veterans and families is present due to the GWOT.
 - The opening of the first state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery, in December 2007 presents an exceptional opportunity to provide these well deserved and needed services to veterans and eligible family members. The major barriers that could negatively affect this project are funding and staffing at the necessary levels.
 - Recommendation – allow any unexpended current year funding to be carried over to the succeeding fiscal year.
 - Establish a long term Capital Equipment Program to prepare for the replacement of the high cost equipment at the cemetery.
 - To enhance the efficiency and effectiveness of our offices by leveraging technology toward a paperless environment is desired and possible.
- Barriers:
 - A complete understanding of the impact of the 410,000 veterans, and their family members in South Carolina.
 - A method to identify and track military reserve service members who are activated to support GWOT; National Guard service members are more easily tracked.
 - Inadequate funding and staffing to ensure that:
 - training programs are made available to necessary staff and CVAOs.
 - travel funds to visit county offices and veterans service organizations around the state.
 - travel funds to attend training opportunities presented by state and national experts.
 - training funds to support in-state training programs that require travel, and program support funds.

How the accountability report is used to improve organizational performance

- The previous year's report is reviewed to determine progress made as required by the report. Variances are identified and addressed. Examples are:
 - ⊖ Cemetery – Goal was to have the cemetery opened and operational in May 2007; it opened in December 2007.
 - Compilation of the SC "War Roster" – progress has been made, since last year 2 FTEs have been identified to work this important database.
 - Federal impact of veterans' benefits – the total funds from the federal government realized in dollars and/or services in South Carolina increased from \$1.29 billion to \$1.39 billion.
- The Accountability Report process requires and allows the SCOVA to critically review our goals and objectives, and "take inventory" of where we are. It makes us take time to conduct a "sanity check" of our purpose, direction and our progress in these areas. We validate or revise operational measurements that indicate mission performance, to monitor progress throughout the year, and report results. Insufficient progress in any area is reviewed, validated and then addressed by directing additional attention and/or resources to that specific area.

Section II - Organization Profile

1. Main products and/or services and the primary methods by which these are delivered

- **Veterans advocacy and assistance** to 410,000 SC veterans, their family members, and survivors in informing them of their earned benefits (\$1.39 billion in FY 2007) and in developing, filing, presenting, and prosecuting to final determination all claims for benefits under terms of federal and state legislation.
- **The South Carolina Free Tuition Program** provides free tuition to in-state public colleges and universities for children of certain eligible veterans. In 2006 over \$7 million of tuition credit was awarded to eligible students.
- **Burial and memorial services:**
 - through the construction and operation of the first state veterans' cemetery in Anderson, SC, the M.J. "Dolly" Cooper Veterans Cemetery."
 - by attending the funerals of SC service members killed supporting the GWOT.
- **Nursing home care to veterans;** this office collaborates with the Department of Mental Health (DMH) in providing appropriate care for elderly veterans in our three state veterans nursing homes.
- **The "War Roster"** of South Carolina veterans.
- **A comprehensive training program** for staff and the county veterans' affairs officers that ensures thorough initial and refresher training in accordance with SC law.
- **Veterans Trust Fund** – manage and administer this trust fund.
- **SC Military Family Relief Fund** – manage and administer this fund.
- **Ex POW Commission** - administratively support his commission which is chartered to confirm and compile the list of ex POWs of South Carolina.

2. Key customer groups and their key requirements/expectations

- Veterans and their family members:
 - Provide them with awareness of benefits and assistance in filing claims for eligible benefits.
- The Governor and the General Assembly, provide:
 - awareness of the presence of the 410,000 veterans in South Carolina.
 - awareness of the impact of the economic veterans in SC; \$1.39 billion in FY 2007.
 - awareness of the articulated needs of SC veterans and families.
 - consultation and research regarding issues affecting veterans in SC.
 - good stewardship of the SC resources allocated to this office to serve veterans.
 - effective and efficient operation of the State's Veterans' Cemetery.
- County Veterans Affairs Officers (CVAOs):
 - Appointment of CVAOs, in conjunction with the appropriate County Delegation.
 - CVAO accreditation training in order to be able to file claims for, and represent veterans.
 - CVAO refresher training to maintain claims officer credential and proficiency in claims processing.
 - Guidelines in operational issues.
 - Support of, and participation in veterans and military recognition events.
- State and federal agencies:
 - Require coordination and cooperation in supporting efforts serving military, veterans and their families.
 - Work with the US Armed Forces transition programs for service members.
- Veterans service organizations:
 - Maintain an effective communication link to veteran service organizations.
 - Support the monthly Veterans Advocacy Council which is made up of the leadership of the major veteran service groups in SC.

- Support, and participate in veterans’ recognition events.
- As appropriate, present veterans concerns and issues to the attention of the Governor and the General Assembly.
- General public:
 - Provide an awareness to the public of the veterans in the state of South Carolina.
 - Perform as a good steward of the resources provided to this office to serve veterans and their families.
 - Respond to inquiries from citizens regarding veterans in SC.

3. Key stakeholder groups

- Veterans and their family members
- The Governor and the General Assembly
- County Veterans Affairs Officers (CVAOs)
- State and federal agencies
- Veterans service organizations
- General public

4. Key suppliers and partners

- Veteran service organizations
- U.S. Department of Veterans Affairs (Veterans Benefits Administration, Veterans Health Administration, and National Cemetery Administration)
- Department of Defense
- Department of Labor
- Department of Mental Health
- South Carolina National Guard and South Carolina Reserve Component Units
- National Association of State Directors of Veterans Affairs (NASDVA)

Table II.1.1 – South Carolina Office of Veterans Affairs Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
SCOVA	Veterans advocacy and assistance	Veterans and family members, the Governor’s Office and the General Assembly, VA and DOD	VBA, VHA, DOD, Veterans Service Organizations, Governor’s Office and General Assembly
SCOVA	The South Carolina Free Tuition Program	Families of Purple Heart Recipients and 100% total and permanently disabled veterans	Commission on Higher Education, Veteran Service Organizations
SCOVA	Provide burial and memorial services	SC veterans and their families, the Governor’s Office and the General Assembly	National VA Cemetery Administration, Veterans Service Organizations, funeral homes
SCOVA	Compile the “War Roster” of South Carolina veterans	SC veterans and their families	DOD, VA, veterans and County Veterans Affairs Officers
DMH and SCOVA	Provide nursing home care to veterans	Veterans, family members, the Governor’s Office and the General Assembly	VHA, SC DMH, veterans and their families, veterans service organizations

5. Operation locations

Primary Location: Governor’s Office – Office of Veterans’ Affairs
 1205 Pendleton Street, Suite 369
 Columbia, South Carolina 29201

Satellite Locations:

VA Regional Office (SCOVA)

Charleston VA Medical Center (SCOVA)

1801 Assembly Street, Room 141
Columbia, South Carolina 29201

109 Bee Street
Charleston, South Carolina 29401

Dorn VA Medical Center (SCOVA)
Building 101, Room 1C111
6439 Garners Ferry Road
Columbia, South Carolina 29209-1649

Augusta VA Medical Center (SCOVA)
5A 170 Downtown Division
1 Freedom Way
Augusta, Georgia 30910

The M.J. "Dolly" Cooper Veterans Cemetery
140 Inway Drive
Anderson, South Carolina 29621

VA Community Based Outpatient Clinic
205 Piedmont Blvd.
Rock Hill, South Carolina 29730

6. The number of employees (segmented by employee category)

23.63 Classified 5 Unclassified _____ Contract
3 Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

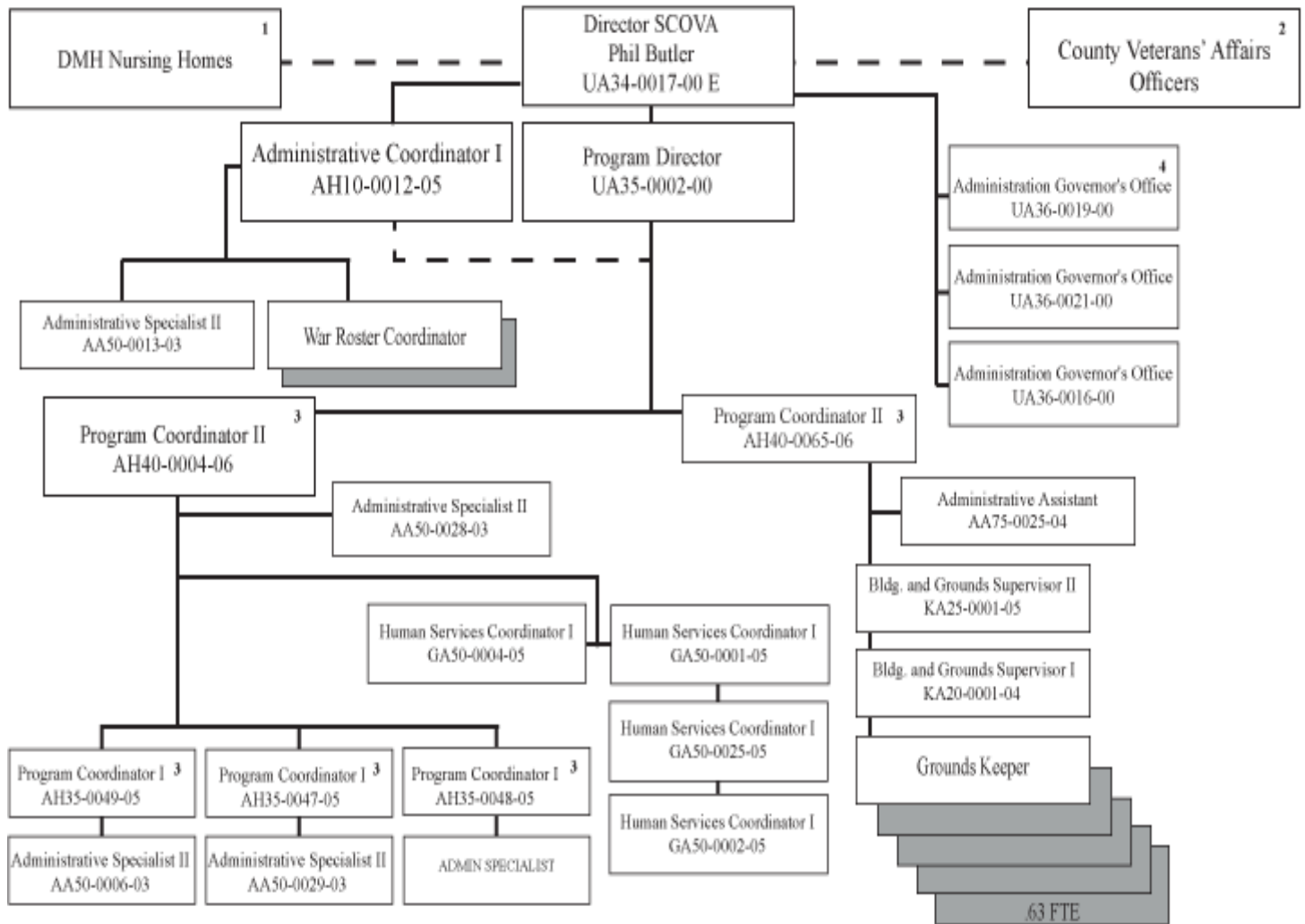
- USC Title 38
- USC Title 10
- South Carolina Code of Laws

8. Performance improvement systems

- Review and act upon routine reports submitted by the CVAOs and the staff of this office.
- Receive and respond to as appropriate, the monthly input from the Veterans Advocacy Council, and other veterans' service organizations.
- Proactively reach out to stakeholders for positive and negative feedback on our services, and suggestions for improvements.
- Strive for a "paperless" office operation.

9. Organizational chart

South Carolina Office of Veterans' Affairs



(1.) Per SC Law, SECTION 44-11-30, SC Mental Health Commission shall consult with the Division of Veterans' Affairs, Office of the Governor, concerning policies, management, and operation of veterans' homes.

(2.) Per SC Law, SECTIONS 25-11-40 through 25-11-60 define appointment, training, certification, activity reporting requirements, and other relationships among the Office of the Director, SCOVA and the CVAO's.

(3.) All Field Office Supervisors and the Cemetery Superintendent respond to requirements of the Director when needed to represent the Director or SCOVA as required.

(4.) Vet Service Officers are paid staff of SCOVA, but work under a joint agreement with SCOVA and the service organization.

10. Expenditures/Appropriations Chart

**Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations**

Major Budget Categories	FY 06-07 Actual Expenditures		FY 07-08 Actual Expenditures		FY 08- 09 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 619,236	\$ 619,236	\$ 774,168	\$ 774,168	\$ 884,168	\$ 884,168
Other Operating	\$ 130,691	\$ 53,441	\$ 455,090	\$ 158,521	\$ 86,163	\$ 86,163
Special Items	\$ 31,654	\$ 31,654	\$ 45,167	\$ 45,167	\$ 76,951	\$ 76,951
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$ 7,000	\$	\$ 13,000	\$	\$ 425,000	\$
Distributions to Subdivisions	\$3,420,220	\$	\$ 617,603	\$	\$	\$
Fringe Benefits	\$ 184,779	\$ 184,779	\$ 227,930	\$ 227,930	\$ 221,043	\$ 221,043
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$4,393,580	\$ 889,109	\$2,132,957	\$1,205,785	\$1,693,325	\$1,268,325

Other Expenditures

Sources of Funds	FY 05-06 Actual Expenditures	FY 06-07 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 06-07 Budget Expenditures		FY 07-08 Budget Expenditures		Key Cross Reference
Veterans' Affairs	The mission of SCOVA is chief advocate for all veterans' issues in South Carolina. This includes state and federal benefits, eldercare, compensation, pension, and burial.	State	\$ 857,456	State	1,160,618	Indicate where supporting data is located. See Tables 7.3-1, 7.3-2
		Federal	3,480,324	Federal	912,499	
		Other	24,147	Other	14,673	
		Total	\$ 4,361,926	Total	2,087,790	
		% of budget:	7	% of budget:	3	

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership

- 1.1 How do senior leaders set, deploy and ensure two-way communication for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) empowerment and innovation; e) organizational and employee learning; and f) ethical behavior?**
- SCOVA staff meetings involving all the SCOVA staff (from around the state) are held twice a year.
 - Organizational priorities, policies, expectations are introduced or re-emphasized at these times.
 - Frequent direct communications (via email, telephone) take place throughout the year.
 - Performance monitoring and discussions take place semi-annually, with an annual evaluation completed.
 - Supervisory chain of command is encouraged to be used to express concerns; however, an open door policy is in place to see the Director if appropriate.
- 1.2 How do senior leaders establish and promote focus on customers and other stakeholders?**
- Constant reminders of our primary mission; to be advocates for the veterans and their families.
 - Customer service training of staff.
 - Feedback, positive and negative from stakeholders, is shared with staff.
- 1.3 How does the organization address the current and potential impact on the public of its products, programs, services, facilities and operations, including associated risks?**
- By scrutinizing the issues, researching possible approaches, and taking appropriate action with close coordination and constant communication with our 46 County Veterans Affairs Officers, state resource personnel, Veterans Service Organizations, Veterans Health Administration (VHA) and Veterans Benefits Administration (VBA), and other state veterans' offices.
- 1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?**
- With knowledge of the current laws, and reference to the specifics of such laws, and request for interpretation when necessary, prior to action being taken.
 - Regular monitoring of this office's budget, with specific review of variances to determine reason and appropriateness.
 - The SC Office of Veterans' Affairs provides national certification accreditation training, and refresher training, to its staff on an annual basis, in accordance with SC law. This training and certification program is also made available to each County Veteran Affairs Officer.
 - The Veterans' Trust Fund of South Carolina has an appointed Board of Directors that provides oversight as prescribed by statute.
- 1.5 What key performance measures are regularly reviewed by senior leaders?**
- Veterans and families assisted as evidenced by:
 - Veteran contacts for benefits' information (medical, educational, etc...).
 - Claims filed for VA benefits for service connected conditions.
 - Dollars returned to South Carolina in the form of federal VA medical care and disability payments to veterans.
 - Veteran resident census of the three State Veterans Nursing Homes.
 - Review of conduct of operations at the M.J. "Dolly" Cooper Veterans Cemetery.
 - Progress on the compilation of the "War Roster."
 - Status of the Veterans Trust Fund, and ex POW Commission.
 - Number of staff and county veterans affairs officers accreditations awarded and renewed.
 - Monitor and review free tuition program.

- 1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization? How do their personal actions reflect a commitment to the organizational values?**
- By using and reviewing information provided to us directly by veterans, and through the many veterans' service organizations and County Veterans Affairs Officers; and by reviewing national statistics provided by the VA and the National Association of State Directors of Veterans Affairs, the SCOVA monitors our progress with performance effectiveness.
 - Personal involvement of the leaders of this office is evidence by presence at Veterans Service Organizations' meetings, local veterans' Town Hall Meetings, and many individual meetings with representatives of all of our stakeholders as required and appropriate.
- 1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**
- Actively look for opportunities to hire staff (permanent or temporary) that can be given an opportunity to learn and progress within the workforce (e.g. work study employee, young college graduates).
 - Challenge these staff with responsibilities and guidance to help them progress, while providing them with training and guidance to assist with their success.
- 1.8 How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives, and innovations?**
- Encourage and support an environment of open communications, inclusion, consideration and feedback.
 - Encourage the sharing of best practices and lessons learned throughout the organization.
 - Conduct after action report processes to record opportunities for improvement for future activities.
- 1.9 How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders and employees contribute to improving these communities.**

By involvement in Veterans Trust Fund of South Carolina; American Legion, including Department Service Officer for Claims and Department Rehabilitation Sub-Committee; Disabled American Veterans; Veterans of Foreign Wars; Veterans Advocacy Council, POW Commission, Veterans Day Parade Committee (Columbia), Alston Wilkes Veterans Home, Military Officers Association of America; Knights of Columbus, Blue Star Mothers of America, Inc. – Midlands Chapter; National Association of State Directors of Veterans' Affairs (NASDVA); VA Mental Health Advisory Board; Admissions Board for DMH Veterans Nursing Homes; Palmetto Health Hospice Volunteer; Non-Commissioned Officers Association; Prison Out-Reach Ministries; Fort Jackson Retiree Council; Clemson University ROTC Alumni Association; Richland One School District Mentoring Program; Rotary; Palmetto SeniorCare Board of Directors (PACE Service for Veterans); we also participate in multiple patriotic community events throughout the state.

Section III – Elements of Malcolm Baldrige

Category 2: Strategic Planning

2.1 What is your strategic planning process, including key participants, and how does it address: a) your organization’s strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology or regulatory environment; d) human resource capabilities and needs; e) opportunities and barriers f) business continuity in emergencies; g) your ability to execute the strategic plan.

The SCOVA considers the strategic planning guidance from the Governor’s Office and the Director of Administration of OEPP and incorporates that in with the vision and mission of this office. Our staff meets semiannually and strategic and short terms plans are identified and guidelines put in place to accomplish these objectives. Progress on these objectives is monitored and addressed as necessary, and also at the semiannual meetings.

Chart III.2 Strategic Planning Chart for South Carolina Office of Veterans Affairs

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 07-08 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Improve upon an already excellent service of advocacy and assistance to our State’s 410,000 veterans and their family members by enhancing training programs for staff and County Veterans Affairs Officers. Increase the federal benefits received by SC veterans over the FY 2006 total of \$1.29 billion.	1. Provide opportunities for education and training of staff and the state’s veterans to positively impact the amount of federal funds awarded to South Carolina veterans and their families. a. Update and maintain the SCOVA internet website. b. Attend local veterans-related events, e.g. veterans’ celebrations and Town Hall Meetings. c. Provide appropriate training to staff and County Veterans Affairs Officers.	1. Inquire of staff of training needs they have identified. a. Work closely with customers and staff, and supporting IT Graphics Designer, to maintain an effective, user friendly website. b. Maintain close relationships with VA, DOD, state, and local activities to ensure that gatherings such as these are held. c. Schedule at least one accrediting class and two refresher training classes this year.	Tables 7.3-1; 7.3-2
2. Successfully open and operate the new the state veterans’ cemetery, the M.J. “Dolly” Cooper Veterans Cemetery.	2. Working with the National Cemetery Administration and the State Budget and Control Board, open the first state’s veterans’ cemetery and operate it efficiently and effectively.	2. Dedicate and open the state veterans’ cemetery in May 2008.	See paragraph 7.1
3. Continue to research and compile the South Carolina War Roster.	3. Bring on appropriate staff to continue the compilation of this important database.	3. Recruit and hire the 2 authorized FTE to compile the “War Roster.”	
4. Enhance communication among federal VA and Department of Defense agencies, the veterans’ service organizations, County Veterans Affairs Officers, and members of the General Assembly and the Congressional	4. Encourage and facilitate open communications with these activities. Participate in opportunities to enhance sharing of information.	4. Continue to attend meetings of these organizations, and look for opportunities for continuous collaboration.	

Delegation.			
5. Work toward a practical, paperless work environment.	5. Improve the efficiency, effectiveness and security of operations concerning documents by working toward a paperless system, supported by current technology. Start with the veterans claims case files maintained in our locations.	5. Specifically identify functional, operational areas within our organization that lends itself to a paperless operation, and work with the OEPP IT staff to pursue this.	

2.2 How do you develop and track action plans that address your key strategic objectives?

- Monitor regularly the status of these initiatives.
- Work diligently, collaboratively and proactively with the veterans’ service organizations, federal and state government agencies and veterans and their families to accomplish our objectives.
- Document and track the status of projects, issues and meetings.

2.3 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?

- Leveraging technology as much as practical to ensure effective communication.
- Making frequent leadership visits to field offices.
- Reviewing and measure accomplishments and status of issues against stated goals, historical trends and other similar state’s veterans’ affairs offices.
- Conducting semi-annual meetings of the Office of Veterans’ Affairs staff to more formally communicate current issues and concerns, and to receive feedback from staff regarding improving our services.

2.4 How do you measure progress on your action plans?

Constantly review and compare our effectiveness against stated goals (e.g. opening of the new nursing home and state cemetery) and timelines.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Very well, they are tailored directly to our challenges.

2.6 How do you evaluate and improve your strategic planning process

Critically review and learn from After Action Reviews of significant events.

2.7 If the agency’s strategic plan is available to the public through the agency’s internet homepage, please provide an address for that plan on the website.

Not at this time.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

3.1 How do you determine who your customers are and what their requirements are?

Customer/Stakeholder	Requirements
Veterans and their family members, as identified by the US Dept of Veterans Affairs (DD-214), DOD and local authorities	Personal interview with veterans and their families.
Veterans advocacy groups	Constant communications and monthly meetings.
Federal, State, and County (County Veterans Affairs Officers) agencies and activities	Periodic meetings, training sessions, and frequent communication, and outreach efforts.
General public	Frequent attendance at community events and through correspondence

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations? The South Carolina Office of Veterans affairs:

- works closely with the 46 County Veterans Affairs Officers.
- hosts monthly meetings with veterans’ advocacy groups and frequently talk with veterans at the grass roots level.
- receives and responds to a large volume of issues and inquiries through the internet.
- attends local, state and national conferences addressing veterans’ issues and needs.
- maintains close, continuous, and effective liaison with state and federal authorities and agencies.

3.3 How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?

Working with stakeholders and supporting agencies, appropriate initiatives are planned and held to address concerns, e.g. Town Hall Meetings, Job and Health Fairs for veterans and families, etc.

3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?

- By meeting monthly with the Veterans Advocacy Council which provides input and feedback from veterans throughout the state.
- By attending the semi-annual statewide County Veterans Affairs Officer’s Conference and receiving and presenting information that is used to adjust our services to improve our services to veterans and their families.

3.5 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer groups?

- The SCOVA staff values and appreciates the veterans, their service, and their families. We use frequent and open discussions with veterans’ groups.
- Throughout the year the staff attend, and participate in a multitude of veterans’ activities (e.g. Veterans Day Ceremony, Memorial Day, speaking engagements with veterans’ service organizations, etc.).
- The SCOVA staff work closely with the federal VA agencies (VHA, VBA and VA Cemetery Administration) to ensure that we work in concert with their goals and approaches to servicing veterans and families.
- The SCOVA staff work closely with DoD activities (e.g. Fort Jackson, Moncrief Army Hospital, Shaw AFB, Charleston Naval Weapons Station, Charleston Air Force Base, Beaufort Marine Corps Air Station MCRD Parris Island and McIntyre National Guard Base) to ensure that we support the active duty force and help with the transition from active duty to veteran status.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

- 4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performances, including progress relative to strategic objectives and action plans?**
- First, we comply with the law and our higher headquarters' requirements to monitor and track identified programs.
 - Also, major programs of responsibility, the operation *M.J. "Dolly" Cooper Veterans Cemetery*, completion of the *S.C. War Roster*, the Veterans' Trust Fund, are examples of programs that are monitored regularly.
 - Veterans' claims services are monitored monthly to determine the services provided to our veterans, the volume of applications for VA benefits, and the resulting impact on the economy of South Carolina.
- 4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?**
- Review within timeframe stated and adjust accordingly.
- 4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?**
- Key measures are reviewed as necessary, but at a minimum, quarterly. Feedback received from partners and stakeholders, coupled with results of internal reviews validate that the correct key measures are being followed, or that it is necessary to revise these measures. The following represents our key measures:
- Veterans and families are satisfactorily assisted as evidenced by:
 - veteran contacts for benefits' information (medical, educational, etc.).
 - claims filed for VA benefits for service connected conditions.
 - dollars returned to South Carolina in the form of federal VA medical care and disability payments to veterans.
 - Veteran resident census of the three State Veterans Nursing Homes as appropriate.
 - Review of conduct of operations at the M.J. "Dolly" Cooper Veterans Cemetery.
 - Progress on the compilation of the "War Roster."
 - Status of the Veterans Trust Fund and ex POW Commission.
 - Number of staff and county veterans affairs officers' accreditations awarded and renewed.
 - Monitor and review free tuition program.
- 4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?**
- The SCOVA staff:
- use many data sources from federal sources and rely on their reliability for many considerations.
 - compare federal services and dollars awarded to SC veterans with states of similar veterans' makeup: Louisiana, Kentucky, and Maryland. (see Table 7.3-2).
 - also routinely communicate with the other state directors and staff.
- 4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?**
- The SCOVA staff:
- use many data sources from federal sources and rely on their reliability for many considerations.
 - receive routine monthly and semi annual reports from staff and the County Veterans Affairs Officers.
- 4.6 How do you translate organizational performance review findings into priorities for continuous improvement?**
- Working with the Director of Administration through routine meetings and as needed, performance review findings are passed with appropriate dialogue to plan improvements.

- Within the SCOVA, semi annual meetings of the entire staff address the status and progress being made regarding our goals and objectives. During these meetings, and throughout the year, adjustments to our approach to improving our services and mission accomplishments are made.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?

- An effective communication culture has been established within the SCOVA and between our Director of Administration, and our stakeholders. This encourages and facilitates the sharing of successes and requirements for improvement throughout the organization throughout the year.
- Additionally, “organizational memory” has begun to be collected electronically to facilitate continuity of operations and direction.
- The SCOVA staff also are in communication with organizations from other states, with which we exchange our best practices and opportunities for improvement.

Section III – Elements of Malcolm Baldrige

Category 5 Workforce Focus

- 5.1 How does management organize and measure work to enable your workforce to: 1) develop to their full potential, aligned with the organization’s objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?**
Employees receive opportunities to develop and exercise their potential in support of the Governor’s and SCOVA’s objectives through several formal and informal mechanisms. The formal method of developing and evaluating employees is through the Employee Performance Management System (EPMS). The employee and supervisor develop a planning stage for each employee with input from both. This planning stage allows for individual development plans within the employee’s position. Additionally, a less formal approach is through training opportunities offered by the Governor’s Office, the State Budget and Control Board, the Cabinet Agency Training Consortium, other state agencies and the private sector. For example SCOVA had 7 staff members complete Supervisory Training course presented by the HR trainers from the State Budget and Control Board this year.
- 5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.**
We try to stay on message about a commitment to serve veterans, consistently reminding staff this job is a privilege and great opportunity. Our claims representatives are nationally accredited and receive annual refresher training. We look for other low-cost training opportunities such as bringing the trainer to the regional locations of those to be trained. We use federally funded programs whenever possible. Like entities within the organization periodically best practices with each other. Our cemetery staff shares best practices with other national and state cemeteries.
- 5.3 How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.**
We recruit in accordance with our human resources office policies. Our leaders retain employees by motivation, positive reinforcement, and a quality work environment. A major barrier is low salary levels and very limited opportunities for raises.
- 5.4 How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?**
We assess skills by observation, periodic testing, and customer feedback. Staffing levels are monitored constantly and needs are articulated to leadership. Obstacles to proper staffing include a significantly increased workload caused by the war, hiring freezes, salary levels, and a lack of understanding by resource providers as to the significant positive impact our staff makes on South Carolina’s economy.
- 5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?**
By focusing on the missions and goals of the organization, staff performance objectives are developed and monitored. At a minimum, discussions are held with supervisors and staff semiannually to discuss performance progress.
- 5.6 How does your development and learning system for leaders address the following:**
- a. development of personal leadership attributes**
 - b. development of organizational knowledge**
 - c. ethical practices**
 - d. your core competencies, strategic challenges, and accomplishment of action plans**

A large number of our staff have extensive backgrounds in military leadership positions and use these to develop subordinates. Organizational knowledge is imparted from formal and informal training, on the spot

correction, after action reviews, and sharing experiences across the organization. Ethical behavior is demanded of supervisors and imparted to subordinates. We have a zero tolerance policy for violations. Core competencies, strategic challenges, and action plans are frequently discussed with organizational leadership and passed down to subordinates.

5.7 How do you identify and address key developmental and training needs for your workforce, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training?

Review of available data and feedback from staff and customers, results in training needs and opportunities. Claims Representatives and/or Field Office Supervisors receive training to further develop their knowledge of VA laws and the VA claims process which is conducted by the Office of Veterans' Affairs, and Washington, DC and Indianapolis, Indiana. This information is then passed on to other staff to enhance their proficiency. This training sharpens those skills needed by staff in preparing and presenting appeals cases before the U.S. Department of Veterans Affairs Regional Office and, in some cases, before the Board of Veterans Appeals in Washington. The office staff also attend local and/or regional training provided by the VA Regional Office and/or the VA Medical Centers.

5.8 How do you encourage on the job use of new knowledge and skills?

We challenge them to employ any new knowledge and skills, and provide positive reinforcement/feedback.

5.9 How does employee training contribute to the achievement of your action plans?

Training is focused on our mission and goals associated with being the advocate for veterans and their families in South Carolina. Successful training results in better services provided to our veterans, and potentially a positive financial impact on veterans and the economy of South Carolina.

5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?

We evaluate using daily performance monitoring, monthly reports in comparison to other statistical data.

5.11 How do you motivate your workforce to develop and utilize their full potential?

- "Catch them doing something well" and recognizing that event.
- Reminding our staff that our purpose is to assist an honorable population, veterans and their families.
- Offer training opportunities, when appropriate, to enhance their professional skills.

5.12 What formal and/or informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?

- The formal assessment would be associated with the EPMS evaluation process; at a minimum, performance reviews are held semiannually with supervisors and staff.
- Opportunities for informal discussions are taken advantage of for this purpose as well.
- An "Open Door Policy" is also in effect whereby each staff member has a direct supervisor to whom they can immediately go with questions and concerns.

5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?

There are limited opportunities for career progression and succession. In those cases where there are opportunities senior leadership and supervisors jointly review records and other performance indicators.

5.14 How do you maintain a safe, secure and healthy work environment?

- The SCOVA staff comply with the OEPP policies addressing safety and security.
- The Hazard Communication policy is provided to all staff at the new employee orientation class.
- Wellness information and training sessions are posted routinely by HR.
- Health screenings at a minimal cost are offered to employees.

- Emergency and disaster preparedness is coordinated through the OEPP's Director of Administration's Office.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

6.1 How do you determine and what are your organizations' core competencies, and how do they relate to your mission, competitive environment, and action plans?

- The SCOVA staff start with the South Carolina Code of Laws to ensure that we have processes in place that are in compliance with those requirements.
- The SCOVA staff review our strategic goals and tactical objectives to determine what processes/systems need to be in place to address them successfully.
- Key operational requirements are identified by internal staff, stakeholders, and customers, and subsequent processes developed to support these requirements (e.g. veterans' claims' processing, etc.).
- The SCOVA staff ensure that these processes are used by monitoring and review (e.g. Operation of the state cemetery, the Veterans Trust Fund, the Free Tuition Program, etc.).

6.2 How do you determine and what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies? How do you ensure these processes are used?

Key work processes are determined by national and state law, policies, and procedures. We ensure these processes are used by training and routine supervisory review.

6.3 How do you incorporate organizational knowledge, new technology, changing customer and mission-related requirements, cost controls, and other efficiency factors such as cycle time into your design and delivery?

The SCOVA staff:

- monitor and conduct functional reviews of the process and the need. We then have discussion with the specialty experts (e.g. IT, human resources, finance, etc.) to collaboratively determine the approach to be taken to enhance, or design and deliver new technology/practices.
- have an effective communication network among our staff to facilitate the sharing of information.

6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?

Frequent monitoring allows for quicker resolution of claims and corresponding payments to veterans. This improves customer satisfaction and results in greater economic benefit to the state of South Carolina.

6.5 How do you systematically evaluate and improve your key product and service related processes?

The Office of Veterans' Affairs evaluates our processes based upon mission, our history and the performances of our peers and adjust processes accordingly.

6.6 What are your key support processes, and how do you improve and update these processes to achieve better performance?

The Office of Veterans' Affairs continuously monitors the status of various individual veterans' applications for resolution.

6.7 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

- First, the staff review historical data and performance. If performance was not acceptable and the cause was insufficient resources, we request additional resources, with justification.
- For new missions, the staff determine if accomplishing these additional or changed missions require additional resources. If not, we adjust available accordingly; if additional resources are required, we prepare an objective justification to pursue obtaining those resources.

Section III – Elements of Malcolm Baldrige

Category 7: Results

7.1 What are your performance levels and trends for the key measures of mission accomplishment /product and service performance that are important to your customers? How do your results compare to those of comparable organizations?

The Office of Veterans’ Affairs tracks data associated with essential missions of this office and compares this information with expected goals and objectives. Positive results are shared with state and local agencies, negative variances are reviewed for causes and appropriate action is taken to improve future performance. Key measures tracked include, but are not limited to, Federal VA Expenditures in South Carolina (Figure 7.3-1), the Veterans’ Affairs Free Tuition Program (Table 7.2), the number of compensation and pension claims cases managed, and the number of training sessions sponsored. During the year we worked with the USDVA to **increase cash payments to South Carolinians by \$70.2 million to a total of \$756,714 million.**

Additionally, progress on the construction and equipping of the cemetery is monitored daily by the SCOVA staff assigned to the cemetery and by the staff in Columbia. Weekly meetings are held with the cemetery staff, the Budget and Control Board Project Manager, and the contractor. These meetings are detail oriented and compared to the construction timeline for progress.

7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction (a customer is defined as an actual or potential user of your organization’s products or services)? How do your results compare to those of comparable organizations?

In the Office of Veterans’ Affairs, the Free Tuition Program provides free tuition to in-state public colleges and universities for children of certain eligible veterans. The program is completely state funded throughout each public college and university. Data for the past five fiscal years are as follows:

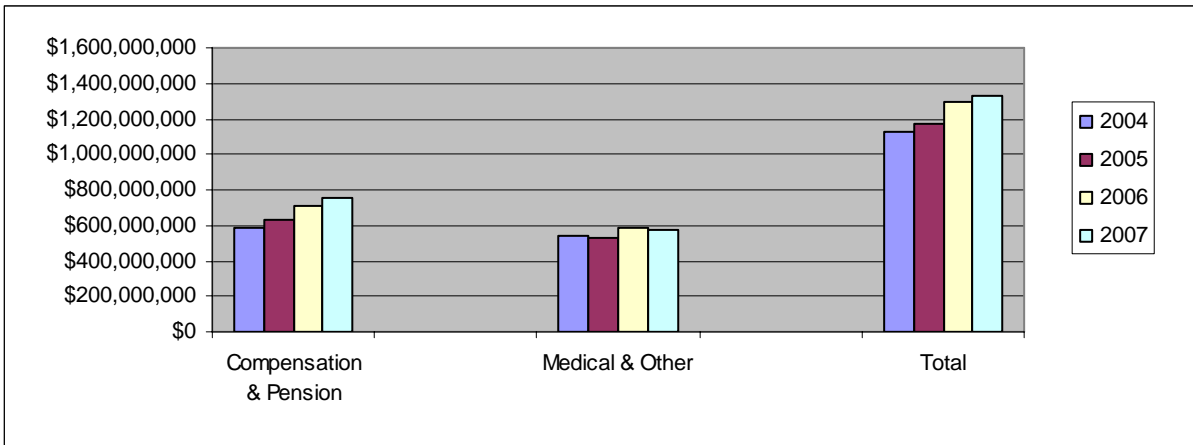
Table 7.2 – Veterans’ Affairs Free Tuition Program Measures

Measure	FY 01-02	FY 02-03	FY 03-04	FY 04-05	FY 05-06	FY 06-07	FY 07-08
# Students Applying	635	581	512	540	414	371	533
# Students Approved	387	449	388	381	311	241	291
# Students Enrolled	502	711	1182	1049	1095	1409	1660

7.3 What are your performance levels and trends for your key measures of financial performance, including measures of cost containment, as appropriate?

The Office of Veterans’ Affairs provides client assistance to all veterans, their dependents, and survivors in developing, filing, presenting, and prosecuting to final determination all claims for benefits under terms of federal and state legislation. The U.S. Department of Veterans Affairs expends millions of dollars in South Carolina as demonstrated by figure 7.3-1

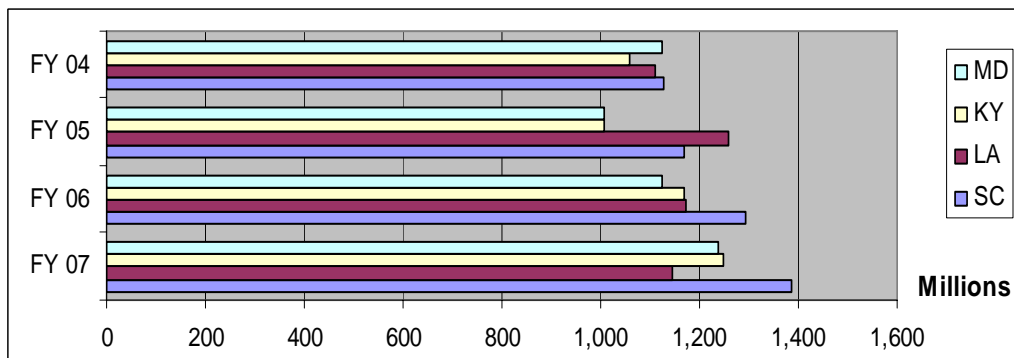
Table 7.3-1 – Federal VA Expenditures in South Carolina



Compared with Kentucky, Louisiana, and Maryland (states with comparable veteran populations), VA expenditures in South Carolina have increased over the past three federal fiscal years and exceeded comparison state's expenditures as evidenced by Figure 7.3-2. This positive trend is a result of the Governor's Office of Veterans' Affairs dedicated advocacy efforts on behalf of South Carolina veterans.

FY 2007 – SC - \$1.393 billion (410,076 veterans)
 LA - \$1.104 billion (325,992 veterans)
 KY- \$1.210 billion (247,013 veterans)
 MD- \$1.172 billion (484,013 veterans)

Figure 7.3-2 VA Expenditures Comparison Data



7.4 What are your performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?

The SCOVA complies with the OEPP Human Resources policies and direction. Additionally, SCOVA selects staff based on job requirements, and matching applicant skills and experiences.

7.5 What are your performance levels and trends for your key measures of organizational effectiveness/operational efficiency, and work system performance (these could include measures related to the following: product, service, and work system innovation rates and improvement results; improvements to cycle time; supplier and partner performance; and results related to emergency drills or exercises)?

Our performance levels, measured in dollars received and services provided, have shown a consistent increase over 2007-2008 data. VA expenditures for South Carolinians increased 8% over the previous year. Trends in state programs/activities in support of veterans have increased similarly.

7.6 What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?

The SCOVA complies with the OEPP Human Resources policies and direction. Additionally, SCOVA selects staff based on job requirements, and matching applicant skills and experiences.