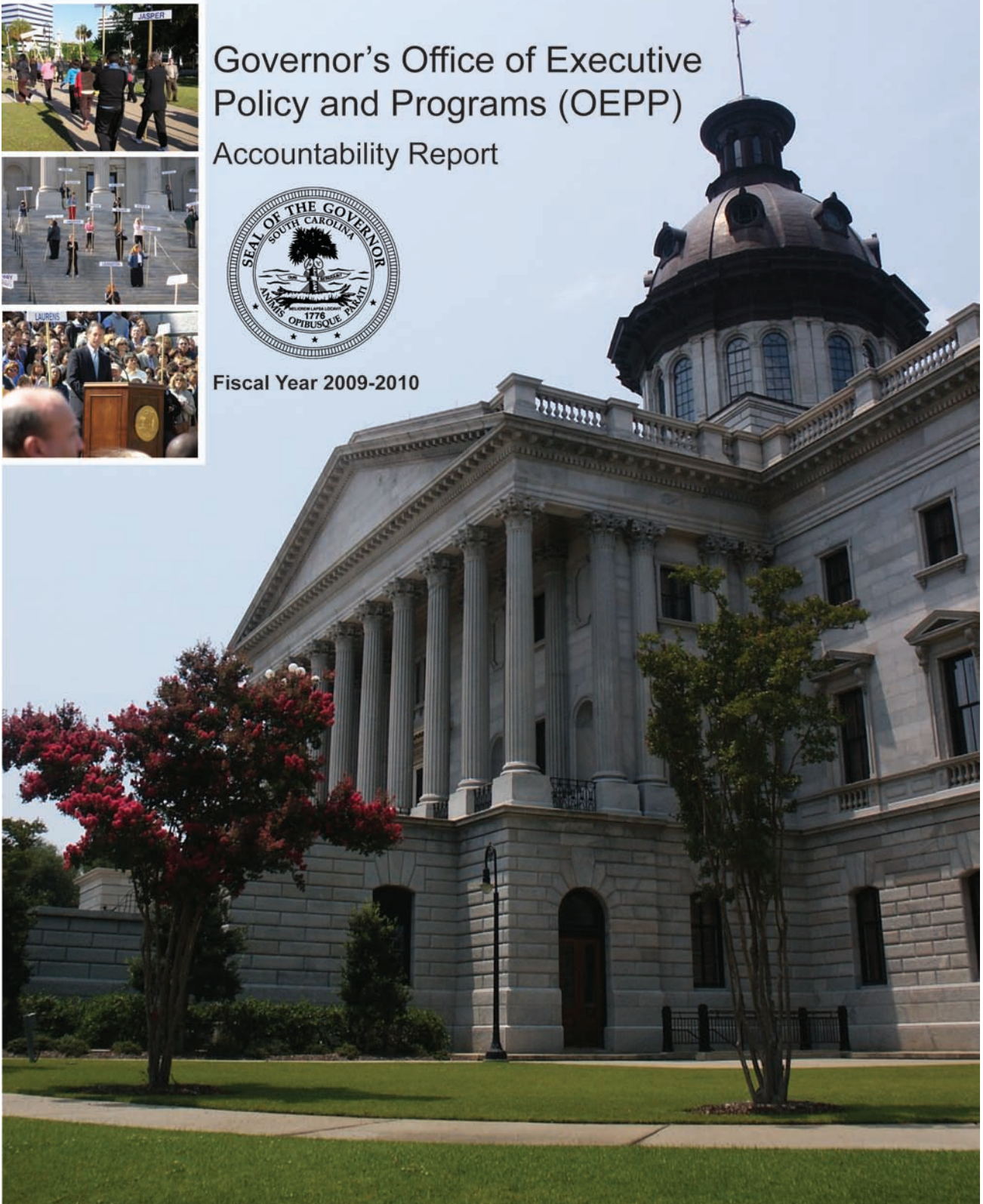# STATE OF SOUTH CAROLINA

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

Accountability Report

Fiscal Year 2009-2010

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs

Section I - Executive Summary
1. **Organization stated purpose, mission, vision and values**
   Purpose: The Office of Executive Policy and Programs (OEPP) provides administrative and financial support 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.

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

   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.

   Values: The organizational values of OEPP are to:
   • Provide exceptional customer service
   • Promote open and accountable government
   • Operate efficiently with fiscally responsibility
   • Maintain a commitment to servant leadership

2. **Major Achievements for FY 2009- 2010**
   The Office of Executive Policy and Programs (OEPP) has effectively and efficiently worked to fulfill its mission with limited State funding despite increased numbers of caseloads and work units.
   a) Working through the SC Victim Services Coordinating Council (VSCC), SOVA assisted with the passage of H.4601. This codified the VSCC and allows victims to receive an additional 20 counseling sessions upon documented need and created a certification program for victim service providers throughout the Palmetto State. SOVA also has a full time Program Coordinator to assist with and facilitate the VSCC meetings and provide the administrative services needed to the Council as a result of this bill. Also as a result of H.4601, SOVA staff has successfully conducted site visits to the Solicitor's Offices.
   b) Foster care Review Board was able to organize and support local foster care review board volunteers who donated 16,403 hours in service to children and families involved with the foster care system. Local foster care review boards held 450 individual local review meetings and conducted 8,961 reviews for 5,424 children.
   c) Educated and counseled veterans, in collaboration with the County Veterans Affairs Officers, service organizations' representatives, and the US Department of Veterans Affairs (VA), such that $1.889 billion in federal veterans' benefits, medical and financial, were realized in South Carolina in FY 2009.
   d) Office of Small and Minority Business (OSMBA) implemented new guidelines for processing applications. These guidelines allowed OSMBA to track potential stakeholders that are seeking

certifications. OSMBA also implemented a new interval review process to expedite certification determinations in a timely manner. OSMBA created in-house guidelines to ensure consistency in customer service. OSMBA implemented an online customer service feedback survey to assess customer satisfaction and potential improvements needed for customer service.

e) The Continuum served 564 children. 84% of those children who Continuum provided wrap support services, were able to remain home with their family and in the community.

f) The CAP provided outreach to 2765 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.

g) The Guardian ad Litem (GAL) Program trained 709 new volunteers, an increase of 33% over 2008-2009; served 8,831 children in 2009-2010, 847 more children than in 2008-2009; served 87% of all children in child abuse and neglect cases in 45 counties, provided guardian ad litems to 77% of new child abuse and neglect cases a 9% increase over 2008-2009.

h) The Developmental Disabilities Council, through a grant with the University of South Carolina Research Foundation, a model program continues to be developed for childhood surveillance and early intervention referral when indicated, by providing didactic and clinical experiences for Family Medicine residents and medical students in an academic department of Family Medicine. The Family Medicine Center has implemented a major clinic re-organization plan to improve patient care. The Project Team will provide developmental milestone education material to parents and guardians periodically. Through this program, 20 medical students, 19 family residents, 12 attending physicians, and 109 pediatric patients have been served. 20 medical students have attended the pre-rotation developmental screening didactic sessions and 12 out of 13 attending physicians have administered the PEDS screening tool. All 20 medical students have been exposed to the scoring of the screening tool, its use and integration into the EMR and the resultant referral process. 19 out of 30 family medicine residents have used the PEDS screening tool with their pediatric patients.

i) Even with reduction in staff and implementation of new SCEIS system, the OEPP Finance Office continued to meet timeframes for bill payment.

j) OEPP Information Technology Unit has been streamlined and has been able to utilize resources across all agencies to address needs such as installing network security, VPN and network support. Have maximized savings through attrition of two IT positions and maximizing utilization of existing personnel

k) Office of Economic Opportunity with DOE ARRA funds and in partnership with the SC Technical College system implemented six Energy Efficiency Technical School training centers. The OEO Weatherization and Weatherization ARRA grant shops weatherized a record 790 and 969 houses respectively for a total of 1,759 houses weatherized. The target number for regular WX was 516 exceeded goal by 44%. For ARRA WX, 969 houses is 28% above projection.

l) Crime Victims Ombudsman (CVO) provided certification, eligibility, and oversight to training to Victim Service Providers (VSP), Summary Court Judges and Notifiers throughout the state about the Victim's Bill of Rights, victim services and statutory laws.

3. **Key Strategic Goals for Present and Future Years**
   OEPP's overall goals include:
   a) To foster a 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.
   b) To have all offices be fiscally and programmatically accountable (to the legislature and South Carolina citizens) for the services they provide.

c) Implement the requirements of the SCEIS deployment of the Systems, Applications, and Products in Data Processing (SAP) for the Governor's Office.

Please refer to the appendices for each office within OEPP for identified goals and key measures.

4. **Key Strategic Challenges**

Within OEPP 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. This compartmentalization can be a barrier; however, OEPP leadership has increased teamwork and support by having individual offices work together and share information and ideas.

An example of increased teamwork and support offered by OEPP is through job sharing among departments in the areas of auditing, budgeting, administrative support, utilization of state cars and sharing office leaders.

a) OEPP Office of Administration provides support to each unit through consultation and administrative assistance for projecting financial needs, assessing areas of reductions to sustain budget cuts while minimizing impact on direct services, strategizing personnel re-allocation, etc.

b) OEPP administrative staff is faced daily with the ever changing and diverse needs presented by supporting eleven varied and different offices. This is especially challenging since each office has different goals, resources and customers, and as a result, different needs for support, supervision and technological resources.

c) Limited financial resources to best operate programs and to deliver services to the citizens of South Carolina is a challenge. The increasing cost of providing services (in terms of both human resources and finances) and/or the static and decreasing appropriations and subsequent budget cuts are a barrier faced by OEPP. However, OEPP has addressed the issue of limited financial resources in numerous ways. Through attrition, OEPP continued to job share between divisions as a method of streamlining operations and increasing awareness between divisions (i.e. eliminated Network Administrator and Procurement positions within OEPP, and administrative positions within Correspondence, Continuum of Care, Foster Care Review) These functions were supported by existing personnel in various units within OEPP. Also, those units within OEPP receiving federal and/or other funds filled vacancies with transfers from other units within OEPP instead of recruiting externally. This allowed OEPP to accelerate eliminating administrative positions and avoid a large number of employees being subjected to a RIF. OEPP also will implement a ten day furlough for all employees in FY2010-2011 to address budget cuts.

d) OEPP will continue to explore further restructuring of IT and administrative services in order to reduce administrative positions and streamline services within all units.

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 program areas. Each office was created to serve the citizens of South Carolina in key areas of interest and/or need – both as statutorily mandated or otherwise identified or required. The OEPP's Office of Administration Services, which includes Finance, Human Resources and Information Technology, forms the basis for administrative support for each program area.

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. – 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: • Financial/accounting • Human resources • Information Technology	OEPP offices: • 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	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 services/ programs to be closer to customers and to increase service availability.

6. **The number of OEPP employees**

    There are 296 employees within OEPP on June 30, 2010. The breakdown of employee classifications is as follows:

193	Classified	9	Unclassified
3	Temporary	60	Temporary (Time Limited)
30	Temporary (Grant)	1	Contract

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 includes specific regulations applicable to each office.
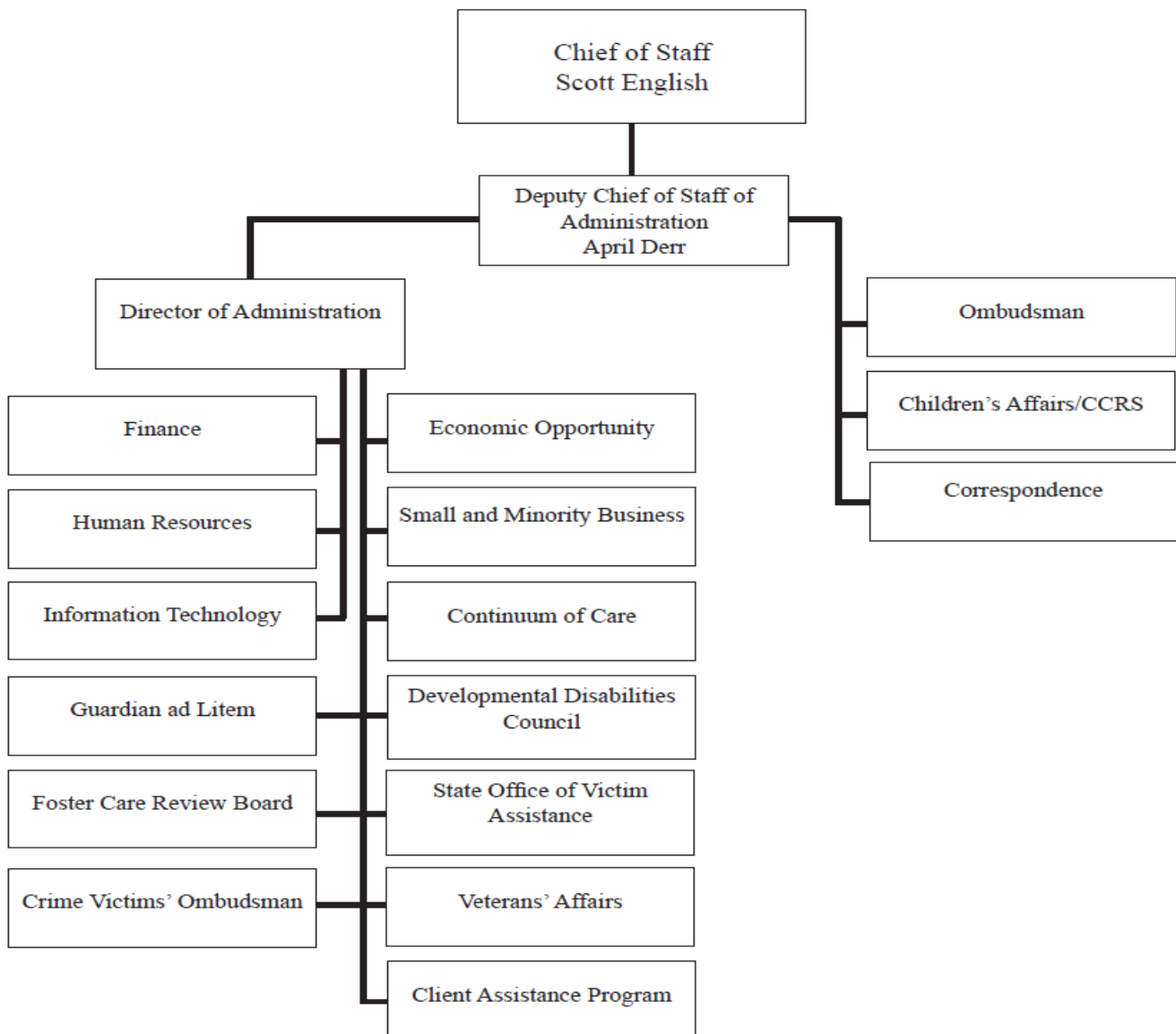
8. Performance Improvement Systems

The methods used by the Office of Administration within OEPP include:

a) Ensure all individuals hired in supervisory positions undergo in-depth management training.
b) Purchase necessary equipment in advance of SCEIS/SAP implementation.
c) Hold regular meetings with all OEPP office leaders to help increase communication among the offices. Individual meetings with each office leader are held to help provide assess any barriers to the provision of services, determine potential supports needed from administration, identify resources needed and help facilitate/ provide needed support.
d) Closely examine all processes within OEPP to prioritize budget requests and to advocate with the legislature for additional resources.
e) Modernize the IT infrastructure, enhanced IT security, and provided for disaster recovery.

9. Organizational Chart

(Chart based on 2009-2010 administrative structure)

Office of Executive Policy and Programs

- Chief of Staff — Scott English
- Deputy Chief of Staff of Administration — April Derr
  - Director of Administration
    - Finance
    - Human Resources
    - Information Technology
    - Guardian ad Litem
    - Foster Care Review Board
    - Crime Victims' Ombudsman
    - Economic Opportunity
    - Small and Minority Business
    - Continuum of Care
    - Developmental Disabilities Council
    - State Office of Victim Assistance
    - Veterans' Affairs
    - Client Assistance Program
  - Ombudsman
  - Children's Affairs/CCRS
  - Correspondence

10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations
Office of Executive Policy and Programs

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10- 11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 10,060,843	$ 4,613,505	10,258,523	3,995,911	10,755,745	3,755,234
Other Operating	$ 15,637,603	$ 1,386,846	16,665,445	554,442	16,193,949	343,440
Special Items	$ 63,896	$ 63,895	229,105	229,105	258,925	258,925
Permanent Improvements						
Case Services	$ 3,513,323	$ 1,795,432	1,831,129	1,605,858	4,402,107	1,452,107
Distributions to Subdivisions	$ 58,558,025	$ 1,142,288	100,469,839	644,223	35,689,248	
Fringe Benefits	$ 3,083,454	$ 1,482,576	3,076,098	1,177,151	3,419,369	1,145,197
Non-recurring			85,457	85,457		
Total	**$ 90,917,144**	**$ 10,484,542**	**133,165,759**	**8,292,147**	**70,719,343**	**6,954,903**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
Administration including Finance/ Accounting, Human Resources, Information Technology	To support the offices of OEPP. **Note:** this total does not reflect support services (correspondence). Refer below	State	1,218,867	State	693,730	
		Federal	979,561	Federal	1,124,790	
		Other	143,302	Other	100,000	
		Total	2,341,730	Total	1,918,520	
		% of budget:	3%	% of budget:	%	
Client Assistance Program (CAP)	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		See individual report
		Federal	141,539	Federal	131,143	
		Other		Other		
		Total	141,539	Total	131,143	
		% of budget:	0%	% of budget:	0 %	
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	4,121,125	State	4,060,366	See individual report
		Federal		Federal		
		Other	3,502,377	Other	2,979,628	
		Total	7,623,502	Total	7,039,994	
		% of budget :	8 %	% of budget :	%	
Correspondence (Corr.) **NOTE:**	To track the status of all mail routed throughout the Governor's Office and to provide assistance in responding. For auditing purposes Administration's appro-priations normally include Corr.; however, for this report expenditures are shown separately.	State	377,948	State	293,668	See individual report
		Federal		Federal		
		Other		Other		
		Total	377,948	Total	293,668	
		% of budget:	0%	% of budget:	0%	
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims to ensure that the State's crime victims receive top quality service at all levels of our criminal justice system.	State	22,110	State		See individual report
		Federal		Federal		
		Other	171,049	Other	187,178	
		Total	193,159	Total	187,178	
		% of budget:	0%	% of budget:	0 %	
Developmental Disabilities Council (DDC)	To administer and monitor federal grants to sub-grantees for services for persons with developmental disabilities.	State	59,506	State	53,638	See individual report
		Federal	804,803	Federal	835,252	
		Other		Other		
		Total	864,309	Total	888,890	
		% of budget:	1 %	% of budget:	%	
Economic Opportunity (OEO)	Grants Administration – CSBG, LIHEAP, WAP, and ESGP *Federal expenditures reported are based on the state fiscal year. OEO revenue sources are appropriated on the federal fiscal year	State		State		See individual report
		Federal	56,445,867	Federal	100,864,957	
		Other	875,134	Other	92,388	
		Total	57,321,001	Total	100,957,347	
		% of budget:	63 %	% of budget:	%	
Foster Care Review Board (FCRB)	To provide an external system of accountability and advocacy for children and families involved with the foster care system.	State	630,557	State	539,524	See individual report
		Federal		Federal		
		Other	742,145	Other	666,651	
		Total	1,372,702	Total	1,206,175	
		% of budget:	2 %	% of budget:	%	
Guardian ad Litem (GAL)	To recruit, train and supervise volunteers who are court-appointed to advocate for the best interests of children in the child welfare system and in family court proceedings involving allegations of abuse and neglect.	State	1,281,421	State	1,065,887	See individual report
		Federal		Federal	35,274	
		Other	2,927,754	Other	3,340,561	
		Total	4,209,175	Total	4,441,724	
		% of budget:	5 %	% of budget:	5 %	

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
Office of Children's Affairs (OCA) **Children's Case Resolution System (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 the CCRS which has 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	59,759	State	53,434	See individual report
		Federal		Federal		
		Other		Other		
		Total	59,759	Total	53,434	
		% of budget:	0%	% of budget:	0%	
Ombudsman's Office	The Ombudsman's Office provides constituent services to the citizens of the State by identifying systematic problems in the service delivery system and working 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	191,932	State	246,522	See individual report
		Federal		Federal		
		Other		Other		
		Total	191,932	Total	246,522	
		% of budget:	0 %	% of budget:	0%	
Small and Minority Business Assistance (OSMBA)	To administer the State of South Carolina's minority certification program. Act as an advocate for the State's minority businesses.	State	118,641	State	121,823	See individual report
		Federal		Federal		
		Other		Other		
		Total	118,641	Total	121,823	
		% of budget:	0 %	% of budget:	0 %	
State Office of Victim Assistance (SOVA)	• To provide compensation to eligible victims of crime. • To meet the educational, training and professional needs of victim advocates, health care professionals, SC schools, and victim service providers. • To ensure SC's crime victims receive top quality service at all levels of our criminal justice system.	State	264,369	State	14,397	See individual report
		Federal	3,254,312	Federal	4,680,239	
		Other	11,117,465	Other	9,787,175	
		Total	14,636,146	Total	14,481,811	
		% of budget	16 %	% of budget:	%	
Veterans' Affairs (OVA)	To be the Chief Advocate for all veterans' issues in South Carolina. This includes state and federal benefits, eldercare, compensation, pension, and burial.	State	1,108,744	State	926,817	See individual report
		Federal	186,537	Federal	495	
		Other	20,326	Other	47,877	
		Total	1,315,607	Total	975,189	
		% of budget:	2%	% of budget:	%	
Remainder of Expenditures: **Special Items**	Remainder of Expenditure applies to: • Various fees • Pass through funds • SOVA special funds	State	150,004	State	222,341	
		Federal		Federal		
		Other		Other		
		Total	150,004	Total	222,341	
		% of budget:	0%	% of budget:	%	

Section III – Elements of Malcolm Baldrige Criteria

The OEPP's goals are broad and aimed at improving the infrastructure and supporting the individual offices. Please refer to the Appendices for each office's specific response.

Category 1: Leadership, Governance, and Social Responsibility

1.1 **How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior?**

The diverse nature of the offices in OEPP dictates special approaches for communicating direction. Depending on the office, 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. To ensure compliance, understanding, and effective organizational communication monthly staff meetings are conducted with office leaders, who in turn, communicate with staff.

Telephone, e-mail and open-door policies throughout OEPP further facilitate communication. These methods permit a quick response to issues or concerns for OEPP's internal and external customers. OEPP leaders communicate, model and reinforce general and specific performance expectations. 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.

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. The *Employee Handboo*k is given to all new OEPP employees contains guidelines for ethical behavior.

1.2 **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. The office leader's 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 citizens of South Carolina. This information is presented directly to the senior leaders so that they can review and formulate legislative policy.

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?**

Communication with customers, stakeholders, and partners allows information to flow to the Governor and/or legislators.

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

To ensure fiscal, legal and regulatory accountability the Director of Administration reviews and approves budget expenditures. The OEPP Finance Office and the Director of Administration oversee all financial transactions to maintain fiscal compliance. As a part of this process, the

Director of Administration and OEPP Finance staff meet individually with each Office Leader to review their budget and project potential needs along with developing cost saving procedures (i.e. renegotiate cell phone pages rates, co-locate offices, etc.).

1.5   What performance measures do senior leaders regularly review to inform them on needed actions?
Due to the diverse nature of OEPP offices, office leaders are relied upon to routinely review their action plans and performance measures regarding service efficiency and effectiveness. Office leaders meet with the Director of Administration to discuss progress with individual action plans and any potential barriers that may hinder accomplishment of their goals.

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 primary mechanism used for providing feedback is the Employee Performance Management System (EPMS) process. Feedback also comes from employee satisfaction surveys, interactions with OEPP staff, 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.

1.7   How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?
Office leaders are encouraged to help mentor staff, conduct meetings to share information and assist/support the leadership in future planning and advocating with the legislature.

1.8   How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?
OEPP performance improvement priorities are set and communicated through OEPP's mission, through legislative mandate, and through meetings between senior leaders.

1.9   How do senior leaders create an environment for organization and workforce learning?
Senior Leaders are encouraged to explore new approaches to performing their job and accomplishing their office's mission. This is essential at times of budget issues and cuts. Staff are encouraged to share information and attend training (as finances allow), along with researching national and statewide information on best-practices.

1.10   How do senior leaders 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 leaders take responsibility in engaging, empowering and motivating their office staff. OEPP Senior Leaders take an active role in OEPP recognition events such as State Service Ceremony and State Employee Appreciation Day. Also see 1.7 and 1.8.

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.
Senior Leaders and members of their staff often support community organizations relevant to their office's mission and customers. OEPP staff participates in work-related associations: SC Information Technology Directors Association, SC Government Webmasters, and the SC Joint Terrorism Task Force, Society for Human Resource Managers, Joint Council on Adolescents, Program Oversight Council, International Personnel Management Association and also serve as a volunteer mediator in the statewide mediator's pool.

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 and customer preferences d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.**
Each OEPP office's strategic plan is developed using a variety of information including enabling legislation, customer service issues, and feedback received. OEPP senior leaders are responsible for creating, reviewing and updating their established goals, objectives, strategies, and action plans. OEPP offices involve staff, customers (clients) and stakeholders (advocacy organizations, sub-grantees, focus groups) to determine the best methods to provide services.

Senior leaders maintain a constant check and balance with regards to the various potential risks. They also 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. OEPP Information Technology staff mapped and documented network infrastructure of all OEPP facilities for future projects and participated in an industry audit of OEPP websites for compliance with standards for visitors with special needs. The OEPP Human Resources Director is instrumental in helping the senior leaders in examining workforce capabilities and needs. All offices of OEPP have instituted contingency plans in case of emergencies. These include remote computer access as well as telecommuting.

2.2 **How do your strategic objectives address the strategic challenges you identified in your Executive Summary?**
Challenges are analyzed to determine the best methods to make realistic changes. Specific examples are discussed in the individual OEPP office reports.

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?**
Each OEPP office develops and tracks their action plan to address their specific key strategic objectives.

2.4 **How do you communicate and deploy your strategic objectives, action plans, and related performance measures?**
The specific OEPP goals/objectives 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 OEPP Directors to

ensure communication and coordination. The individual reports outline specific methods for communicating and deploying strategic objectives, action plans and performance measures.

2.5 **How do you measure progress on your action plans?**
The offices within OEPP use a variety of techniques to measure progress on action plans according to strategies that work best within their office.

2.6 **How do you evaluate and improve your strategic planning process?**
The OEPP Director of Administration reviews each office's strategic goals and outcomes 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.

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.**
Please refer to the Appendices for the availability of each office's plan.

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

3.1 **How do you determine who your customers are and what their key requirements are?**
OEPP's key customers and stakeholders are primarily 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 within their individual report.

3.2 **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 methods for identifying when customer needs and expectations change. Methods include meetings with customers, public hearings, advisory councils, customer satisfaction surveys, and written or verbal communication. 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.

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

3.4 **How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?**
One primary method for obtaining data on customer satisfaction is through formal surveys sent to customers and/or stakeholders. Feedback is also received from the Governor, Legislators, and other agency directors. Each office within OEPP has also 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.

3.5 **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 if new procedures should be incorporated into standard procedures, to reassess and adapt working goals and to set strategic goals on an annual basis.

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

Strong customer communication links, flexibility, and accurate and timely service delivery also provide the primary keys for building 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.

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?

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. OEPP's Finance Officer assists each individual office in processing financial tracking procedures and outcomes.

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?

Due to OEPP office's diversity, data comes in a variety of quantitative or qualitative measures. Each office's report describes specific methods of integrating data to support decision making.

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

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

4.4   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.

4.5   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 Health Insurance Portability and Accountability Act

(HIPAA) guidelines. The Information Technology department updated the e-mail security mail and updated all computers with secure operating systems.

4.6 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 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.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify, share and implement best practices?
The collection, transfer and maintenance of accumulated employee knowledge are generally accomplished through the production of written procedural manuals and cross-training. Staff often support and help train new employees. 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. In addition, Human Resources maintains a current list of staff who can offer specialized trainings. 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.

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?
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. 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.

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) allowing employees to implement cost-saving ideas which create a feeling of accomplishment and 4) encouraging employees to work on team projects which cut across office lines.

Human Resources organized and conducted the agency's state service recognition ceremony. Sixteen (16) 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. We also continue to offer our 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 in the agency's monthly newsletter.

Individual OEPP offices implement various processes to help develop and use employees while encouraging and promoting office initiatives; some examples include: development of guidelines for caseload size, consultation schedules and paperwork deadlines—all of which help staff to manage work and meet 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.

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

5.3   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 (HR) posts vacancies 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. HR 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 HR and the Director of Administration for approvals and background checks. HR makes official job offers once approvals are granted. New employees go through an agency orientation program 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.

5.4   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. These measures help to assess 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.

5.5   **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?**
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.

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.

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 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. 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.

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?**
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 EPMS planning stage to specific training opportunities provides information on what types of training employees need. The Human Resources Office reviews these documents and works to ensure employees have access to 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) thus increasing the availability and range of training available. Cross training is another avenue widely used by OEPP offices.

To meet specific office 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.

OEPP's Human Resources office conducts Supervisor 101 training for OEPP supervisors. At the conclusion of this class, attendees are asked to provide feedback regarding content, expectations/needs met, and suggestions. Feedback has been very positive.

Human Resources also developed and conducted EPMS training for all employees as needed to help them understand the agency's EPMS system. Human Resources also has information about the agency's EPMS system, and many other related topics, on the agency's intranet website for all employees to review. This includes a "Supervisor's Toolkit" with information and training links for supervisors to improve their skills and access resources.

During this year, we began offering free online webinars to help enhance our training efforts. To date, we have offered sessions on the "Family and Medical Leave Act," "Managing Difficult Employees/Resolving Conflict," and another session is scheduled in the coming weeks on "Sexual Harassment."

Human Resources has also coordinated agency-wide training this year for our employees across the state in preparation for the SCEIS human resources/payroll transition on June 2. This includes various training classes for all employees, managers, non-exempt staff, and core human resources/payroll users.

5.8   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. Employees are also given the opportunity to share knowledge and skills during staff meetings.

5.9 **How does employee training contribute to the achievement of your action plans?**
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 offices link individual employee goals to OEPP's action plan, and any necessary training is key toward achieving the action plan.

5.10 **How do you evaluate the effectiveness of your workforce and leader training and development systems?**
Following each Supervisor 101 training class, a course assessment session is held so that supervisors who attended the class can provide input regarding content, expectations/needs met, and to offer any suggestions for improvements or additional content.

5.11 **How do you motivate your workforce to develop and utilize their full 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 online PEP (Professionals Excelling in Performance) Award program. This is a mechanism whereby employees can recognize peers or subordinates for outstanding customer service, individual or team accomplishment, leadership or cost savings measures. These employees' successes are recognized publicly in our monthly newsletter, *OEPP Gazette*.

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?**
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. Office leaders encourage open communication and discussions. Employees are encouraged to go to Human Resources (HR) if there are concerns in the workplace that have not been addressed after notifying their chain of command. HR 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.

Additionally HR, in conjunction with Lexington Medical Center, offered free health screenings to all employees and any covered family members. The overall results of the health screenings were given to HR to help identify health issues or trends impacting our workforce. To that end, we conducted a follow-up training session for employees to help address cholesterol management issues.

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

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 offices 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 offices with periodic updates regarding potential retirements within each area to assist offices with preparing for knowledge transfer in the event of an employee separation. When vacancies occur, offices 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.

5.14   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. Free health screenings are offered to employees. Free health workshops and distribution of health information are made available regularly. In addition, the agency developed and distributed guidelines for employees on the flu pandemic.

Emergency and disaster preparedness is coordinated by 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 a designated staff member is instructed to take roll call in such events. Emergency and Disaster plans have been developed and are continually reviewed.

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?
OEPP offices communicate objectives, define measures, and monitor the achievement of objectives through teamwork at all levels. Major processes have been integrated system-wide, using teams, databases, and Internet/Intranet technology for greater coordination and efficient service delivery. Processes within the OEPP's Information Technology, Finance and Human Resources (HR) support OEPP offices. Internal (activity reports, management reports on achievement of goals, etc.) and external (applications, budgets, etc.) processes are in place.

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?
Written and telephone inquiries are handled on a case by case basis. Information is provided and referrals are made accordingly. A detailed system of editing ensures accuracy of the information or referral as well as ensures correspondence is presented to the Governor for signature without error. If inquiries are not resolved within 30 days, follow up is completed. The Information Technology staff addresses issues promptly. Accounting staff processes and

pays bills within established guidelines; services purchased as strictly reviewed for compliance with procurement regulation. Human Resource addresses staff issues in a timely manner.

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?**
As stated previously, finance and accounting, information technology and human resources are key support systems provided within OEPP to our individual offices. Staff are preparing for the change from the GAFFRS programs to the SCEIS which will radically change the way we do business. Over the past two years, OEPP has focused on updating and modernizing our information technology which will help ensure that we can remain current with IT needs. Our Human Resources Office continues to provide guidance and training on complex personnel and supervisory issues.

As stated in 2.1 OEPP Information Technology staff mapped and documented network infrastructure of all OEPP facilities for future projects and participated in an industry audit of OEPP websites for compliance with standards for visitors with special needs. Staff also managed intrusion detection and prevention on e-mail and network channels during a recent jump in internet spam and virus activity.   Additional, IT staff consolidated wireless devices programs and calling plans to maximize agency savings.

6.4   **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.

6.5   **How do you systematically evaluate and improve your key product and service related work processes?**
OEPP offices, in conjunction with OEPP leadership, routinely evaluate their products and processes. This ensures offices provide quality services in keeping with the OEPP mission. The individual OEPP offices have fixed schedules for routine review of goals, objectives and evaluation measures, as well as a review of various processes. Feedback is reviewed from OEPP administration, customers/stakeholders and assessments; staff help evaluate what processes should be changed and then implement the changes. Some Offices also evaluate using monitoring assessment tools for grants, providers, statistics, etc.

6.6   **What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?**
Key support systems in OEPP's Office of Administration include finance/accounting, human resources and information technology. 6.2 and 6.3 outline current improvements and updates.

6.7   **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 the State's budget environment, 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.

Due to state budget issues, more attention has been placed on how to cut budgets without severely impacting the services to our consumers. This has been a challenge to OEPP and our 11 offices. If additional cuts are imposed, services to our consumers may be negatively affected. The Director of Administration frequently meets with each office director to assess their critical needs and how any cut to their budget can be sustained without impacting direct services to the consumers. This process has allowed for the creativity in strategically planning utilization of shared resources such as administrative, budget, and IT personnel. Although painful at times it has been beneficial to the support, awareness and cooperation among offices and it minimized the RIF of critical needs positions among numerous offices.

Section III – Elements of Malcolm Baldrige
Category 7: Results

OEPP's goals are broad and aimed at improving the infrastructure and support provided to 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 and can be found in the Appendices.

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?**
Please refer the individual reports included in the Appendices.

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?**
Please refer the individual reports included in the Appendices.

7.3 **What are your performance levels for key measures of financial performance, including measure of cost containment, as appropriate?**
Audit reports for the past three years have had no major findings or any questioned costs.

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 Human Resource Office of OEPP has processes in place to track human resources trends and measure performance. Tables 7.4.1, 7.4.2, 7.4.3 and 7.4.4 reflect OEPP's workforce performance measures.

Table 7.4.1 OEPP Employment Process:

	FY 2009 - 2010	FY 2008 – 2009	FY 2007-2008
Job Vacancy Postings:	59	64	81
Applications Processed:	8,613	7,638	4,767
New Hires:	54 19 FTE 15 Time Limited 20 Temp Grant	57 36 FTE 11 Time Limited 10 Temp Grant	64 38 FTE 15 Time Limited 11 Temp Grant
Terminations:	60 43 FTE 12 Time Limited 5 Temp Grant	54 38 FTE 10 Time Limited 6 Temp Grant	53 40 FTE 9 Time Limited 4 Temp Grant
Turnover (FTE):	17%	15%	16%

Table 7.4.2 OEPP Termination Statistics**:**

Primary reasons reported for termination of employment in exit interviews. FY 09-10	
Personal	38%
Misconduct	17%
New job (outside state government):	15%
New job (other state agency)	9%
RIF:	9%
Relocation:	3%
Substandard Performance:	3%
Military Service	3%
Death	3%

Table 7.4.3 OEPP Exit Interviews:

Exit interviews revealed the following information about <u>direct supervisors.</u> The rating choices were (1) almost always, (2) sometimes, or (3) never:	
Topic	**Rating Average**
Demonstrated fair/equal treatment:	1.3
Provided recognition on the job:	1.4
Developed cooperation and teamwork:	1.5
Encouraged/listened to suggestions:	1.5
Resolved complaints and problems:	1.4
Followed policies and procedures:	1.2
Provided clear performance expectations:	1.2
Provided feedback regarding my work:	1.5
Exit interviews revealed the following information about <u>employment with the Governor's Office and the employee's Division.</u> The rating choices were (1) Excellent, (2) Good, (3) Fair, or (4) Poor:	
Topic	**Rating Average**
Cooperation within your office:	1.6
Communication within your office:	1.9
Communication within Governor's Office:	2.2
Work Environment:	2.1
Morale:	2.3
Potential for career growth:	3.1
Training opportunities:	2.3
Use of your skills/abilities:	1.7
Flexible schedule:	2.1
Work hours:	1.8
Compensation:	2.8
Benefits:	1.9
Exit interviews revealed the following information about <u>whether the employee would consider returning to employment with the Governor's Office in the future:</u>	
Yes: 80%	No: 20%

OEPP's Human Resources Office reports the agency's Affirmative Action Plan goal attainment annually to the State Human Affairs Commission. OEPP remains within the top 15% of all state agencies for goal attainment. The results for the last three reporting cycles are:

Table 7.4.4 OEPP EEO/Diversity:

YEAR	GOAL ATTAINMENT
2009/10:	94.3%
2008/09:	94.2%
2007/08:	94.8%

7.5 **What are your performance levels and trends for your key measures of organization effectiveness/operational efficiency, and work system performance?**)
Please refer the individual reports included in the Appendices.

7.6 **What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?**
Please refer the individual reports included in the Appendices.

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
<u>Ombudsman, Office of Children's Affairs and Children's Case Resolution System</u>

Section I. Executive Summary

1.   Organization's stated purpose, mission, vision and values
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 resolution to children's case issues.

2.   Major Achievements for FY 2009-2010
- Successfully managed the Volunteer Awards and United Way Campaign
- Worked, with Governor Sanford, to staff over 140 Open Door cases and their outcomes
- Successfully handled 130 "walk-ins"
- Maintained active membership in the SCVOAD
- Continued to assist with the development of an on-line donation/volunteer system to be used during natural disasters
- Offered training to all new OEPP staff members for the Governor's Call Center.
- Developed a current schedule for the Governor's Call Center to ensure weekday and weekend coverage

3.   Key Strategic Goals for Present and Future Years
A. Resolve concerns of constituents who contact the Governor's office
B. Maintain current information regarding services available through local, state and federal agencies and nonprofit and for profit organizations
C. ESF-18 will coordinate donated goods and volunteer services in order to provide easy delivery during the time of a disaster

4.   Key Strategic Challenges
A challenge for Constituent Services would be that often the assistance we request for constituents rests solely with the agency we are contacting and the final outcome is out of our control. While constituent service is always needed, there are times, for instance the holiday season, when volume can increase greatly. This does not prevent us from achieving our goals but it does require more effort and determination on the part of each caseworker. Finally, although ESF-18 has made great strides in the state's disaster plan, it has in turn increased staff workload, which takes time from staffing constituent cases.

5.   How the accountability report is used to improve organizational performance
This report is used to assess performance expectations and identify areas needing improvement. The data presented in Section III 7.1 demonstrates the success of the system in place. Based on this information, Constituent Services, the Office of Children's Affairs and CCRS have

Constituent Services: Ombudsman's Office, Office of Children's Affairs, and Children's Case Resolution System
2009- 2010 Accountability Report

1

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-ins.
- 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
- In some cases, non-residents who are family members of residents needing assistance
- 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. Operational locations
Constituent Services, CCRS, OCA are all located in the Governor's Office on the First Floor of the Wade Hampton Building.

6. The number of employees
<u>1</u> Classified   <u>3</u> Unclassified
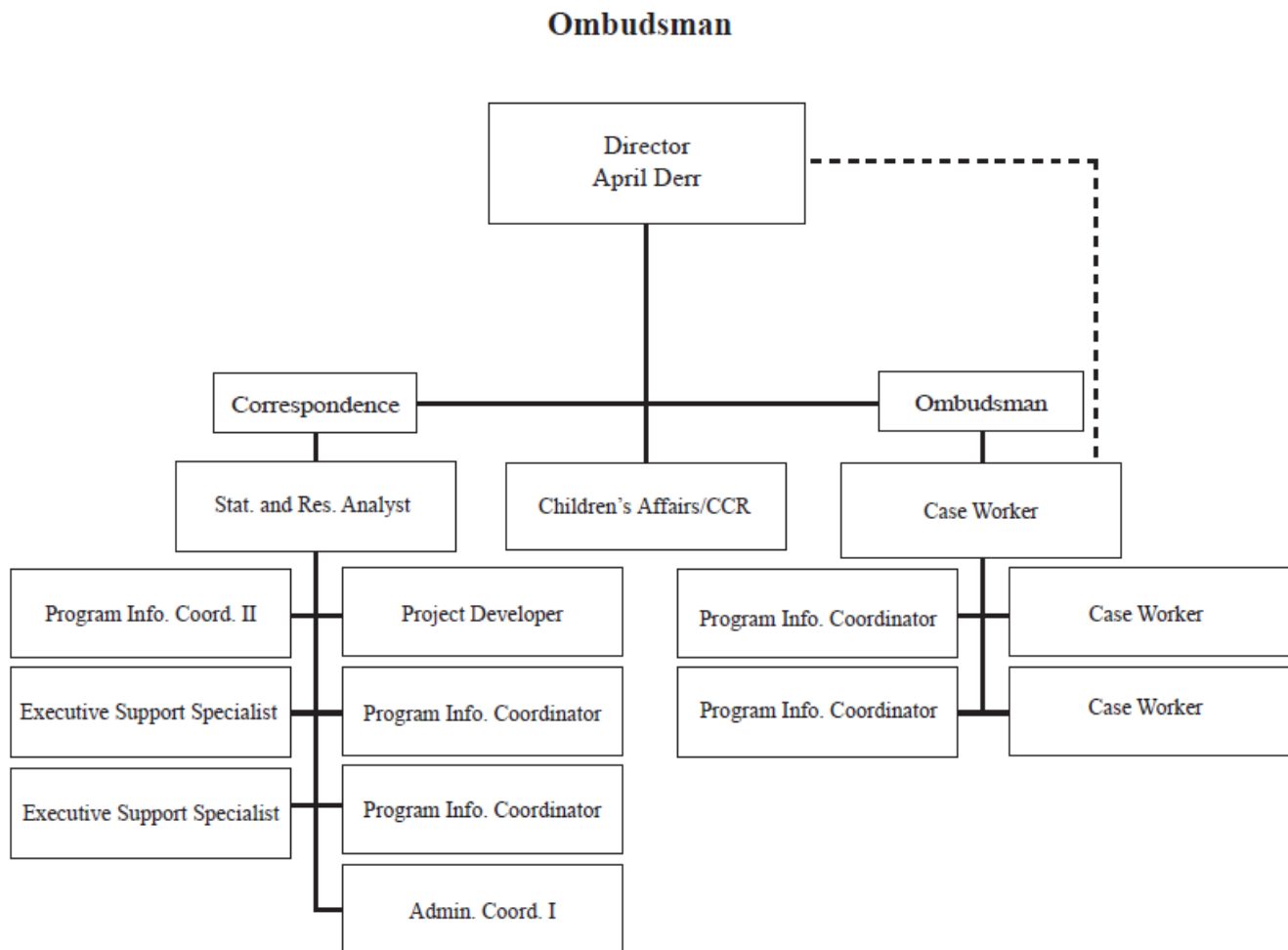
7. Regulatory Environment
- Constituent Services and OCA are regulated by the Governor and his Executive Assistant.
- CCRS operates according to Section 20-7-5210 of the South Carolina code of laws.

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 unanswered.

- 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 Emergency Management Disaster exercise and training of the Governor's Call center volunteers

9.   Organizational Structure

Ombudsman

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                        │    Director     │ - - - - - - - - ┐
                        │   April Derr    │                 │
                        └────────┬────────┘                 │
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      ┌───────┴───────┐                      ┌───────┴──────┐│
      │ Correspondence │                      │  Ombudsman   ││
      └───────┬───────┘                      └───────┬──────┘│
   ┌──────────┴─────────┐  ┌────────────────┐  ┌─────┴───────┴┐
   │ Stat. and Res.     │  │ Children's     │  │  Case Worker │
   │ Analyst            │  │ Affairs/CCR    │  └──────┬───────┘
   └──────────┬─────────┘  └────────────────┘
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Program Info. Coord. II	Project Developer		Program Info. Coordinator	Case Worker
Executive Support Specialist	Program Info. Coordinator		Program Info. Coordinator	Case Worker
Executive Support Specialist	Program Info. Coordinator			
	Admin. Coord. I			

Constituent Services: Ombudsman's Office, Office of Children's Affairs, and Children's Case Resolution System
2009- 2010 Accountability Report

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10.   Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations
Children's Affairs – Children's Case Resolution System (CCRS)

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 40,116	$40,116	$40,116	$40,116	$36,523	$36,523
Other Operating	$1,033	$1,033	$583	$583	$90	$90
Special Items	$5,630	$5,630	0	0	$4,054	$4,054
Permanent Improvements						
Case Services	0	0	$0	$0		
Distributions to Subdivisions	0	0				
Fringe Benefits	$12,980	$ 12,980	$12,735	$12,735	$12,783	$12,783
Non-recurring						
Total	**$59,759**	**$59,759**	**$53,434**	**$53,434**	**$53,450**	**$53,450**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations
Ombudsman's Office

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10- 11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$129,547	$129,547	$180,459	$180,459	$60,789	$60,789
Other Operating	$6,370	$6,370	$2,205	$2,205	$1,629	$1,629
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	$56,015	$56,015	$63,857	$63,857	$21,276	$21,276
Non-recurring						
Total	**$191,932**	**$191,932**	**$246,522**	**$246,522**	**$ 83,694**	**$83,694**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 08- 09 Budget Expenditures		FY 09-10 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	59,759	State	53,434	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	59,759	Total	53,434	
		% of budget: 0%		% of budget: 0%		

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 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	191,932	State	246,522	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	191,932	Total	246,522	
		% of budget: %		% of budget: %		

Section III – Elements of Malcolm Baldrige Criteria
Category 1: Leadership

1.1 How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior.

- Short and long term direction: Staff receives direction through monthly meetings (or as needed), direct and open communication regarding each case as handled.
- Performance expectations: Timelines are set by Constituent Services senior leadership. Bi-weekly and quarterly reports are used to ensure that performance is meeting outlined expectations.
- Organizational values: Staff members 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
- Ethical behavior: 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. Ethical behavior is routinely discussed and expected by senior leadership.

1.2   How do senior leaders establish and promote focus on customers and other stakeholders?
- Encourage positive morale among staff through open communication
- Complete Employee Performance Management System (EPMS) evaluations yearly
- Complete Bi-weekly, quarterly and annual performance reports

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?
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. Impact is also assessed by following changes in legislation.

1.4   How do senior leaders maintain fiscal, legal and regulatory accountability?
The Office of Constituent Services and Office of Children's Affairs/CCRS submit quarterly Minority Business Expenditures reports.

1.5   What key performance measures are regularly reviewed by senior leaders to inform them on needed actions?
Senior leadership regularly:
- Evaluates the percentage of written inquiries responded to within five days or less
- Evaluates the percentage of telephone inquiries responded to within 24 hours
- Evaluates the percentage of agency referrals that have not received a response within 30 days
- Monitors the number of ESF-18 and Governor's Call Center trainings provided and employees trained

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?
- Key performance values are incorporated as performance measures for the EPMS evaluation. EPMS values demonstrate where progress is needed by staff and senior leadership.
- Staff feedback is necessary to share resources and techniques useful to efficiently perform constituent services. Feedback also facilitates cross training among staff.
- Monthly meetings allow staff to share thoughts, concerns and information; however, staff is proactive in relaying concerns that may need to result in the change of a certain office procedure.
- Bi-weekly performance reports enable senior leadership to balance caseloads.

1.7   How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?
Because we are a small office working closely together, mentoring is a daily activity.

1.8   How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?
- Working closely with the Governor during Open Door allows for specific case instruction.
- Because we are a small office working closely together, open communication is encouraged, senior leaders listen to employee ideas and brainstorming occurs as necessary.

1.9   How do senior leaders create an environment for organizational workforce learning?
Leadership schedules training sessions with state agencies, such as DSS, so staff can familiarize themselves with programs services (i.e., food stamps). New information provided by state agencies regarding programs constituents inquire about is circulated. Leadership encourages asking questions and conducting research to continuously learn about state and local programs that may benefit constituents.

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?
Leadership stays in touch with all staff members to discuss cases and the manner in which they are handled. The notion that we are public service employees is engrained amongst staff so that every effort is made to ensure that all constituents receive an exceptional customer service experience when contacting the Governor's office. When cases result in a positive outcome for the constituent, this is noted in the Comments section of Filemaker. Thus, positive outcomes are accessible. Staff members are recognized and thanked for their hard work on a continuous basis.

1.11   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.
Leadership and employees participate in United Way Employee Campaign; Offering Assistance, Stability and Intensive Support (OASIS) for Families; Program Oversight Committee (POC); SCVOAD; and 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. While the SCVOAD 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 organizations' strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.
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. The Director of Constituent Services advises caseworkers daily and meets often with individual employees to determine and discuss progress and future planning for the office. The director is also a caseworker and works closely with staff to ensure continued learning opportunities. Reports are used to 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 08-09 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	• 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.	• Share relevant, updated information during staff meetings and cross train all caseworkers. • 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 about 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? (Section I, Question 4)

- Constant collection of up-to-date information about agencies, non-profit organizations and services available, since they are always changing, prevents dissemination of erroneous information.
- Encouraging open and consistent communication increases cooperation among state agencies involved in the coordination of family services.
- Regular 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 actions plans?
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. 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?
Bi-weekly, quarterly and annual reports are reviewed and discussed at monthly meetings. Staff meetings also help staff by providing consistent and efficient information regarding referrals and each caseworker working directly with the Director of Constituent Services provides guidance when needed.

2.5   How do you measure progress on your action plans?
- Resolution, whether positive or negative, to constituent's inquiry
- Number of constituent contacts and agency referrals processed
- Bi-weekly, quarterly, annual reports

2.6   How do you evaluate and improve your strategic planning process?
Director holds weekly meetings to review and consult with staff on cases that need intense follow up and immediate response. Track cases through Filemaker from beginning to end to ensure all interventions that are requested or needed is completed and resolved.

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 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?
- 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.
- 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.
- 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 you key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?

The access mechanisms for customers include the Internet, phone directories and word of mouth. Each of these mechanisms provides constituents with information for contacting the Governor's office via phone, mail or email.

3.4   How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?
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?
Staff members consistently update files so information is readily available for customers in need of assistance or referral. Staff members remain 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?
- 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.
- The OCA/CCRS coordinator's involvement in POC and the OASIS Committee encourages positive relationships by building interagency collaboration.
- The Governor's "Open Door After Four Program" increases collaboration between the Governor, his staff 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?
Based on the key goals outlined in Section 2 – chart 2.2, this office is able to track progress via reports detailing the number of written and telephone inquiries, agency referrals, unanswered mail and responses drafted. Staff performance is measured 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?
Data is pulled from the Filemaker database to demonstrate response time to telephone and written inquiries. 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 timeframes each year. 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, and how do you keep them current with organizational service needs and directions?
Bi-weekly Performance reports show how many phone and written inquiries were handled by each caseworker. This report also tracks the number of agency responses relayed to constituents and any mail over two weeks old. Additional reports can be generated to show the percentage of written cases responded to within five 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?
Data is taken from 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, reliability, timeliness, accuracy, security and availability for decision making?
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. Performance 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?
Data trends addressed in Section I show which barriers are most relevant. Staff, state agencies, OEPP offices, and constituent feedback are frequently communicated through email, telephone correspondence and staff meetings. Suggestions and changes to casework procedure are incorporated as necessary.

4.7   How do you collect, transfer and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?
The accumulation employee knowledge is accomplished through cross-training, staff meetings and the fact that we all work out of the same office space.

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?
Constituent Services (CS) staff is dependent on the accuracy and efficiency of Filemaker Pro and manual correspondence filing systems in place. Suggestions for organizing files and improving the overall flow of CS cases are communicated through staff meetings and email. Open communication is appreciated and promoted in order to help staff achieve their full

potential. 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?**
CS, OCA and CCRS staff members communicate via email, in person and telephone.

5.3 **How does management recruit, hire, place and retain new employees? Describe any barriers you may encounter.**
- Management submits job vacancies to the Human Resource office, which posts the job description. After selecting resumes, interviews are conducted, which often lead to the hiring of new employees. From this point, new employees spend time with each member of the workforce for training until they are able to handle their own workload.
- 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.
- During times of staff turnover, job tasks are reassigned to ensure services remain available to our customers.

5.4 **How do you assess your workforce capability and capacity needs, including skills, competencies and staffing levels?**
Staffing levels are measured by aligning the amount of inquiries handled according to the designated timelines. If staff members are consistently unable to meet deadlines through no fault of their own, additional staffing may be needed. Workforce skills and competencies are assessed daily through communication with leadership and approval of case handling. When areas needing 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?**
EPMS evaluations identify and support areas of high performance as well as areas that can be improved. Based on the information acquired through EPMS 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:**
a) **Development of personal leadership attributes**
   Supervisory trainings administered by Human Resources are available to staff.
b) **Development of organizational knowledge**
   Contact with state agencies, community organizations, and executive leadership within the Governor's office allows for a continuous flow of information regarding services and information available to constituents.
c) **Ethical practices**
   Leadership is held accountable to executive leadership within the Governor's office through meetings and constant communication.
d) **Your core competencies, strategic challenges, and accomplishment of action plans**

As leadership receives new information, it is shared with the workforce enabling more efficient resolution of constituent inquiries.

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?

- Cross training among the Office of Constituent Services and Children's Affairs produces better end results. Employees are also encouraged to express ideas regarding additional areas of interest.
- 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.
- Staff members 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?
Processes are flexible in that any new ideas that may produce more efficient results are welcomed.

5.9 How does employee training contribute to the achievement of your action plan?
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?
Effectiveness of workforce and leadership is measured by customer response. Whether a positive or negative outcome is achieved, the customer should be satisfied with their interaction with the Governor's office and feel that all possible efforts were made.

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

- Open communication and a friendly, professional environment help staff feel comfortable.
- By openly expressing ideas and suggestions with other staff members.
- Through cross training and identification of areas of interest
- Staff is given the opportunity to assist and plan special projects that involve the Governor's Office (i.e., Governor's Carolighting Ceremony, Governor's Volunteer Awards, OASIS)

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

- Annual Employee Performance Review and Planning Stage agreement.
- Staff meetings promote open communication.
- Open communication is a part of EPMS, which allows employees to express their likes and dislikes. This helps determine priorities for improvement.
- Priorities for improvement are also determined by reviewing the performance expectations and bi-weekly/quarterly reports.
- 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?
Executive leadership within the Governor's office and leadership in CS, OCA and CCRS are willing to 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?
- Strive to keep work areas clean and sanitary.
- Follow all emergency evacuation procedures.
- Report suspicious or threatening constituents to South Carolina Law Enforcement Division (SLED) Detail.
- Hold one-on-one meetings with constituents in an open room where other co-workers are easily accessible in case of threatening circumstances.

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?

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?
Written and telephone inquiries are handled on a case-by-case basis. Information is provided and referrals are made accordingly. 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. If inquiries are not resolved within 30 days, follow up is conducted.

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?

- As mentioned earlier, cross training is important to maintain efficiency.
- New technology is often added and staff is trained accordingly.
- Outgoing correspondence is emailed whenever possible; limiting the cost of postage.
- Because of the open lines of communication in this office, changes can be made easily.

6.4 How does your day-to-day operation of these processes ensure meeting key performance requirements?
Cases are handled on an individual basis to ensure accuracy and customer satisfaction. Accurate reporting of each case in Filemaker ensures 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 service related processes?
- Bi-weekly, annual and quarterly reporting.
- Continuously research and share current information about services available to constituents
- 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?
Cases handled by written referral are reviewed by Constituent Services staff, thus input from colleagues is provided for all correspondence. All processes of our office are intermittently reviewed and improvements/adjustments are made as necessary. Customer feedback is discussed openly among senior leadership and caseworkers.

6.7 How does your organization determine the resources needed to meet current and projected budget and financial obligations?
The Ombudsman Office Director works very closely with OEPP Administration and Support to assess budget short falls and impact on work flow. There has been the ongoing need to reallocate duties among fewer staff in order to maintain functions and lessen disruption for the citizens of S.C.

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:
1. Respond to written inquiries
2. Respond to verbal inquiries
3. Track agency referral and response time

Constitute Services 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 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10
Written inquiries received	5888	5569	4091	6803	8776
Percentage answered within 5 days or less	89%	99%	92%	97%	98%
Phone inquiries received	6093	8632	8207	13,436	16,826
Percentage answered within 24 hours or less	97%	98%	97%	96%	97%
Written agency referrals sent	628	387	408	1,446	1,747
Percentage of agency referrals responded to and closed with constituent	62%	61%	95%	97%	98%

For the Fiscal Year 09-10, out of 8,776 written inquiries, 98% were answered within five days or less. Moreover, 97% of the 16,826 phone calls received were answered within 24 hours. This demonstrates the success of the system in place.

Table 7.1.2 CCRS Cases

	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10
Cases receiving CCRS funds	1	1	2	1	0
Cases monitored by CCRS - no pay	2	1	6	3	1

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?
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?
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, workforce climate including workplace health, safety, and security?
As a small staff in a small area, we have genuine care and concern for one another's safety and well-being and are therefore able to identify and address issues early.

7.5   What are your performance levels and trends or organizational effectiveness/operational efficiency, and work system?
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 are your performance levels and trends for the key measures of regulatory/legal compliance and community support?
Neither Constituent Services nor CCRS have performance levels for key measures of financial performance other than quarterly Minority Business Expenditure reports.

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
Client Assistance Program

Section I - Executive Summary
1. Stated Purpose, Mission, Vision, and Values

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.

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.

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.

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 2009-2010
 a) The CAP resolved 220 full cases without resorting to formal hearings or litigation.
 b) The CAP provided outreach to 2,765 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
 a) Advocate and resolve CAP cases at the lowest possible level in the alternative dispute resolution system.
 b) Increase outreach efforts throughout the state for underserved adult populations of persons with disabilities.

4. Key Strategic Challenges
 a) Improved collaboration with service providers in provision of services for persons with disabilities.
 b) Transition to paperless system as much as possible.
 c) Staff remains current with knowledge and training in increased complexities of clients with mental and physical disabilities.

d) 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 in keeping with CAP's 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**
2. **Key customer groups and their key requirements/expectations**
3. **Key stakeholder groups**
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)	• Alternative dispute resolution services provided through personal representation of the client • Information and referral services provided by telephone and face-to-face contact • Outreach to underserved populations of individuals with disabilities throughout the state	• 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 • Clients and applicants who are disputing services provided by the state Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs	• South Carolina Vocational Rehabilitation Department • Commission for the Blind • Independent Living Programs • Statewide service organizations that serve the employment needs, and/or independent living needs of persons with disabilities

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 Contract

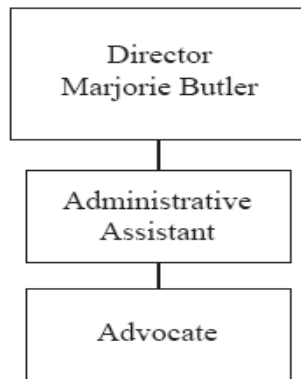7. **The regulatory environment under which your organization operates**
   The Federal Rehabilitation Act of 1973, as amended.

8. **Performance improvement systems**
   a) Review of client satisfaction surveys.
   b) Performance review from mandated annual Federal CAP report.
   c) 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
OEPP – Client Assistance Program

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$76,695		$77,720		$78,000	
Other Operating	$44,277		$33,252		$49,251	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	$20,568		$20,171		$27,749	
Non-recurring						
Total	**$141,540**		**$131,143**		**$155,000**	

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
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	141,540	Federal	$131,143	
		Other		Other		
		Total	$141,540	Total	$131,143	
		% of budget:		% of budget:		

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 organizational direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?
  a) Staff weekly meetings with open communication for direction and training.
  b) Provide staff training for professional development.
  c) Annual staff reviews with Employee Performance Management System (EPMS).

1.2   How do senior leaders establish and promote a focus on customers and other stakeholders?
  a) Customer service and client confidentiality are emphasized at all times.
  b) Review verbal and written client satisfaction surveys for program improvement.
  c) CAP staff training ensures that clients and consumers with disabilities are always treated with respect and dignity.
  d) Staff training on current agencies policies and laws relevant to serving persons with disabilities.
  e) To better serve our customers, staff members participate in the national CAP Advocacy Listserv to share current information and strategies with other CAP programs.

1.3   How does the organization address the current and potential impact on the public of its programs, services, facilities and operations, including associated risks?
   a) Recorded timeliness of responding to client concerns and resolution.
   b) Customer satisfaction surveys.
   c) Feedback from agencies and programs serving persons with disabilities.

1.4   How do senior leaders maintain fiscal, legal, and regulatory accountability?
   Through required annual federal reporting and audit systems.

1.5   What performance measures do senior leaders regularly review to inform them on needed actions?
   a) Successful case resolutions at lowest alternative dispute resolution level without litigation.
   b) Productive collaboration with other service providing agencies and programs.
   c) Feedback from customer satisfaction surveys.

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 organizational values?
   a) Weekly staff meetings for client case reviews and information sharing.
   b) "Open Door" policy for communication with staff.
   c) Staff review of customer satisfaction surveys for program improvement.

1.7   How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?
   a) Staff communication and mentoring.
   b) Provide training opportunities for professional development.
   c) Staff participation in decision making process for program improvements.

1.8   How do senior leaders create an environment for performance improvement, and the accomplishment of strategic objectives?
   a) Staff members share in the decision-making process.
   b) Conducting staff reviews of program goals.
   c) "Open Door" communication with staff.
   d) Quarterly performance reviews for staff.

1.9   How do senior leaders create an environment for organizational and workforce learning?
   a) Senior leaders participate in available web casts and teleconferences about the ever-changing complexities in serving persons with disabilities.
   b) Program and personal development training for staff.
   c) Staff members are kept informed of best practices by periodicals and other documents related to serving individuals with disabilities.

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?
a) Staff meetings to exchange ideas, concerns, and accomplishments related to program goals.
b) Recognition for accomplishments reflected on annual employee performance reports.

1.11   How does 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.
a) 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.
b) Staff members participate 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.

Section III – Elements of Malcolm Baldrige Criteria
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, 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.

2.2   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	Related FY 06-07	Key Cross

	Strategic Planning Goal/Objective	Key Agency Action Plan/Initiative(s)	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 22 conferences and/or groups for persons with disabilities. • Visit 3 Navigators at WIA Employment One Stop Job Services • Visit 9 Vocational Rehabilitation Department Evaluation Training Centers. • Annual collaboration with other organizations for community Information and events for persons with disabilities.	Chart III.7.1.1

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?
   a) Annual CAP Federal report is the best CAP tool to determine overall progress of program objectives.
   b) CAP monthly staff meetings to track effectiveness of target projects.
   c) Weekly case staffing to determine effective advocacy and client satisfaction.

2.4   How do you communicate and deploy your strategic objectives, action plans, and related performance measures?
   a) Attend annual national CAP conference to acquire current knowledge related to serving persons with disabilities and effective measures for achieving program objectives.
   b) Monthly staff meetings to review and discuss progress of program goals.

2.5   How do you measure progress on your action plans?
   a) Feedback on continued professional and productive relationships with other agencies and programs.
   b) Analysis of the data from the annual CAP Federal report is the best measure yearly achievements.

2.6   How do you evaluate and improve your strategic planning process?
   a) Annual CAP Federal report.
   b) Review of client satisfaction surveys.

c) Input from the 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 than plan.**
CAP federal mandated services and objectives are outlined in www.oepp.sc.gov/cap.

Section III – Elements of Malcolm Baldrige Criteria
Category 3 - Customer Focus

3.1 **How do you determine who your customers are and what their key 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 and customers needing information on the Americans with Disabilities Act, Title 1.

3.2 **How do you keep your listening and learning methods current with changing customer/business needs and expectations?**
a) Research current information outlined in periodicals related to services for individuals with disabilities.
b) Attend annual CAP conference and other trainings related to better serving persons with disabilities.
c) Participate in national CAP advocacy listserv to share current information and strategies to better serve our clients.

3.3 **What are your key customer access mechanisms, and how do those access mechanisms enable customers to seek information, conduct business, and make complaints?**
a) CAP brochure given to every applicant of the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.
b) Access through office visits, telephone contact, TTY for deaf and hard of hearing, CAP website, and e-mail.
c) Consumer and community organization referrals.

3.4 **How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?**
a) Review written client CAP satisfaction surveys and make necessary adjustments to the way we provide services. We mailed 150 surveys and 48 were returned.
b) Review of annual Federal CAP report data.

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

a) Review input from agency state plans and public hearings to determine the need for any changes that may improve service to persons with disabilities.
b) Participate in committees and boards established to better serve persons with disabilities.
c) Listen and make changes.

3.6 **How do you build positive relationships with customers and stakeholders to meet and exceed their expectation? Indicate any key distinctions between different customer and stakeholder groups.**
a) Building positive and productive relationships with agencies and programs with effective communication and feedback.
b) All clients are treated with respect, dignity, confidentiality, and sensitivity to their disability and issues of concern.

Section III – Elements of Malcolm Baldrige Criteria
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?**
a) Outlined by Federal Grantee.
b) Required annual CAP Federal Report.

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?**
Data is used on a regular basis to analyze problem areas in serving clients with disabilities.

4.3 **What are your key measures, how do you review them, and how do you keep them current with organizational service needs and direction?**
a) Annual Federal CAP report based on federal program mandates.
b) Successful case resolutions at lowest alternative dispute resolution level without litigation.
c) Outreach efforts to traditionally underserved populations of individuals with disabilities throughout the state.

4.4 **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.

4.5 **How do you ensure data integrity, reliability, timeliness, accuracy, security and availability for decision-making?**
a) Review annual Federal CAP report information with mandated guidelines for programs.
b) Participate in national CAP advocacy listserv with CAP program directors in other states.
c) Attend mandated trainings by the Federal Grantee.

4.6 **How do you translate organizational performance review findings into priorities for continuous improvement?**
Federal guidelines mandated for provision of services to persons with disabilities.

4.7   How do you collect, transfer, and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?
a) Annual Federal CAP report.
b) Regular internal staff meetings.

Section III – Elements of Malcolm Baldrige Criteria
Category 5: Workforce Focus

5.1   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 to 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?
a) Weekly staff meetings with open communication and mentoring.
b) Staff members attend trainings for professional development.
c) Participation in regular meetings with other program directors.

5.2   How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.
a) Regular staff meetings with open communication facilitate teamwork.
b) Participation in teleconferences related to CAP program and persons with disabilities.
c) Participation in agency and program trainings related to policies and programs serving persons with disabilities.

5.3   How does management recruit, hire, place and retain new employees? Describe any barriers that you may encounter.
a) Positions are filled through OEPP Office of Human Resources with vacancy postings.
b) Federal grant award funding limits hiring additional employees.

5.4   How do you access your workforce capability and capacity needs, including skills, competencies, and staffing levels?
a) Staff members participate in available training to enhance knowledge related to serving persons with disabilities, which is part of our Federal mandate.
b) Increased opportunities for professional development within the organization for staff.

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 plan?
a) Feedback from employees and management on EPMS allows for open discussion on organizational goals and employee performance relating to program goals.
b) Feedback allows for professional staff development opportunities.

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) Leadership attributes are discussed during EMPS evaluations and staff members are encouraged to continue with educational and training opportunities for personal and leadership development.
b) Staff meetings allow for open communication in all areas of program competencies and challenges.

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?
Staff training opportunities offered through Human Resources, current computer/office applications, general staff meetings.

5.8   How do you encourage on the job use of new knowledge and skills?
Staff discussions and sharing of new knowledge.

5.9   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.

5.10   How do you evaluate the effectiveness of your workforce and leader training and development system?
Staff members demonstrate the ability and expertise in everyday performance within the CAP program and working with CAP clients.

5.11   How do you motivate your workforce to develop and utilize their pull potential?
Increased opportunities for professional development within the organization.

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?
a) Small staff allows for close working relationship and open line of communication.
b) Meetings with staff on performance review as needed.

5.13   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.

5.14   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.

Section III – Elements of Malcolm Baldrige Criteria
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?**
Organization mission and competencies are outlined in guidelines from the Rehabilitation Service Administration for our federally mandated program with regulatory and policy-mandates.

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

6.3 **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?**
Through participation in annual national CAP conference, training webcasts, Rehabilitation Service Administration memorandums, and Federal Grant guidelines.

6.4 **How does your day-to-day operation of these processes ensure meeting key performance requirements?**
a) Regulatory and policy-mandated requirements are provided by Federal Grantee and followed by staff.
b) All processes are closely monitored on a daily basis to ensure compliance.

6.5 **How do you systematically evaluate and improve your key product and service related work processes?**
a) Case resolution for clients with disabilities at the lowest level of alternative dispute resolution.
b) Federal mandated annual reporting used for case reviews and program evaluation for improvements in serving clients with disabilities.

6.6 **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.

6.7 **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.

Section III – Elements of Malcolm Baldrige Criteria
Category 7 - Results

7.1 **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 these of comparable organizations?**
a) Tracking the number of CAP cases that were resolved at the lowest level in the alternative dispute resolution system without litigation.
b) 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 07-08	FY 08-09	FY 09-10
Number of CAP Cases	191	206	184
Number of information and referral	3100	3250	3285
Number of outreach to underserved population groups throughout the state	2402	2312	2765

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

a) Tracking the number of CAP Satisfaction Surveys returned by clients, which include multiple choices ranging from Very Satisfied, Satisfied, Not Satisfied, and whether client would or would not use CAP services again.

b) Rate for 57 returned surveys out of approximately 100 surveys mailed seems to be in line with the general rate of returned surveys for other organizations serving persons with disabilities.

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

Performance Measure Goal: Clients will express satisfaction with the services they receive	FY 07-08	FY 08-09	FY 09-10
Number of clients expressing "Very Satisfied"	26	80	48
Number of clients expressing "Satisfied"	9	6	9
Number of clients expressing "Not Satisfied"	6	2	1
Number of clients stating that they would use CAP services again	36	86	57
Number of clients stating that they would not use CAP services again.	5	2	0

Consider using percentages in this table.

7.3 **What are your performance levels for your key measures on financial performance, including measure of cost containment, as appropriate?**
Federal mandate determines our required program performance levels and auditing expectations. South Carolina CAP has not been audited in the past fifteen years, since becoming part of the Office of the Governor.

7.4 **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, and workforce climate including workplace health, safety, and security?**
Small staff allows for open discussions relating to workforce and annual performance reviews (EPMS).

7.5 **What are your performance levels and trends for your key measures of organizational 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.

7.6   What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?
Performance levels are designated by the Federal Grantee and monitoring includes on-site reviews and annual reports.

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
Continuum of Care

Section I. Executive Summary

1.   Organization's stated purpose, mission, vision and values

Mission Statement:

The Continuum of Care's mission is "To ensure the development and delivery of appropriate services to children with severe emotional disturbance."

Vision:

Our vision is to have "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."

Values:

Our core values are that services will be: child-centered, family focused, community-based, strength based and culturally competent.

2.   Major Achievements for FY 2009-2010

a) 98% of families who responded to a Continuum of Care survey felt they were involved in helping make treatment decisions for their child. Additionally, 99% of families who responded stated they will refer others families to the Continuum.

b) The Continuum served 564 children during 2009-2010. 123 children/adolescents were accepted for full case management services and 118 were discharged.

c) The average number of days an applicant was on Continuum's "waiting list" (days between completed application and selection) was 117 during the 09-10 fiscal year. Of those selected, 45% were on the "waiting list" less than 30 days.

d) The Continuum continues to partner with the Department of Mental Health in the Youth Net project. Also involved in Youth Net were the Departments of Social Services and Juvenile Justice, along with local community service and health care providers. These agencies/ providers joined together to serve children with wrap around services in the York, Chester and Lancaster counties with the focus of strengthening community services and helping prevent out-of-home placements.

e) The Continuum renewed our efforts to serve children in the community. When residential care is clinically necessary, those services are procured for our children; however, we are continuing to focus on keeping children at home with their families and "wrapping" them with community-based services. For 2009-2010, the Continuum averaged over 80% of our children were living at home; at the same time three years ago only 65% were living at home.

f) The Continuum implemented the Global Assessment of Individual Needs–Short Screener (GAIN-SS) to enhance our assessment processes. Through the implementation of this interagency collaborative effort, Continuum staff will be able to identify substance abuse issues quicker and have greater access to referral services for our clients.

3.   Key Strategic Goals for Present and Future Years

During 2009-2010, 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 affected the Continuum's ability to provide and receive Medicaid reimbursement for Targeted Case Management (TCM) services. These changes include the loss of TCM billing when our children (less than 10%) are placed in a Psychiatric Residential Treatment Facility or Inpatient Psychiatric Hospital.
b) Previously the Federal government reinterpreted regulations impacting select requirements for residential programs serving emotionally disturbed children. Effective January 1, 2009, Federal Medicaid reimbursement was no longer available for many of the therapeutic residential services the Continuum uses. During 09-10, the Continuum averaged less than 5% of our children in these placements. Although replacement dollars were appropriated, these dollars were reduced with budget cuts the Continuum received; as of June 30, 2010, these dollars were cut by 38% The replacement dollars were provided to allow the service provider's rates to be unchanged; however, providers are no longer required to provide treatment services. Thus when treatment services are needed, these must be purchased separately–but money was not allocated for payment of the additional treatment services. All of these factors equate to increased spending in state funds since Federal funds are no longer available (See III 6.7). In addition, Medicaid reimbursement for some services (sex offender treatment, Temporary De-Escalation care, etc) was eliminated without replacement dollars being allocated.
c) Effective July 1, 2010 additional changes in the Medicaid program will impact services for emotionally disturbed children and the Continuum's budget. Numerous services changed from a "bundled" daily service to "unbundled" service components whereby individual services will need to be identified, purchased and provided separately. However, many essential system details needed to make this change were undecided until the "last minute" reducing the Continuum's time to thoughtfully plan and implement the changes (i.e. rates for unbundled TFC, Targeted Case Management documentation standards, enrolling of providers, etc.). This creates a challenge since the Continuum is unable to project cost, determine service need, train staff, etc. An anticipated impact is more expensive individual services, increased paperwork and administrative burden on state agencies and service providers, along with contracting and purchasing systems changes.
d) In an effort to insure the maximum use of funds, the Continuum placed greater focus on accessing private insurance and other supplemental benefits (Adoption subsidy, SSI, etc) for a child's care when the child is not living in their parent's home. This has been very challenging in getting families to: provide the information, help financially to support the child's placement, or supply insurance information for child's treatment needs. Therefore, the Continuum worked throughout the fiscal year to develop an income verification and placement fee process that would involve families as a financial partner in the planning of

their child's care. All Continuum staff received training in assisting families through this process along with understanding all the changes in the changes in the array of services that were instituted by DHHS on July 1, 2010.

e) Due to the state budget crisis, the Continuum closely examined each child's length of stay when they are placed outside their home. Every attempt is made to return the child to their home as soon as clinically appropriate. It is the intent to connect the child and family with community support services; however, a major challenge is service availability. . The array of services to meet the special needs of emotionally disturbed children is lacking – specifically specialized services, location of services, and availability of non-residential services (particularly for older children)The lack of community services accompanied with other state agency's reduction in services has created a situation with little or no community services being available to children aging out of the child service system.

f) Through realignment of positions, implementation of the team approach to case management, reorganizing duties, changing band levels, and not filling administrative positions, the Continuum averaged an annual cost savings of $472,000 over the past four years. The lack of timely data by third-party monitoring entities concerning contracted providers' compliance with regulatory issues continues to be a challenge. A lack of a fully implemented and uniform monitoring system results in staff not having current data to make the best decisions when referring and purchasing services.

g) During this fiscal year, various administrative elements related to operations were "shut down" during the change-over to the new SCEIS systems. Specifically, the accounting system was shut down in November 2009; this caused many of our providers not to be paid on a timely basis. In June 2010, the Human Resources systems were inactive thus affecting hiring of direct line staff and other HR functions.

Uncertainty about future changes in children's services affects the impact of various initiatives and has been a barrier for our organization in formulating and implementing necessary plans and making realistic budget projections. Pending decisions made by funding sources will influence how the Continuum will address issues and their related impact to our agency and to services for our customers.

As a result of previous cost-cutting measures the Continuum was able to utilize carry forward funds from previous fiscal conservation efforts to help operate during 2009-2010. However, reductions in Federal reimbursements (Medicaid) as stated in a) - c), significant reductions (38%) in Continuum's budget, and the depletion of carry forward funds will require additional state appropriations if we are to continue providing the same level of services to our clients

5. **How the accountability report is used to improve organizational performance**
    The Continuum of Care's Office Director and Senior Managers use the 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 measure 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. 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. identifies 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	• 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.	• In some instances, stakeholders are also partners. State agencies, schools, public and private service providers all partner with COC to help provide services to our children and families. • The Department of Health and Human Services.

5. **Operational locations**
   The Continuum of Care's administrative office is located in Columbia within the Edgar Brown Building. Services are provided statewide through four regional and ten satellite offices. The regional offices are located in Columbia, Greenville, Florence and North Charleston; satellite offices are in Aiken, Aynor, Beaufort, Chester, Gaffney, Greenwood, Oconee, Orangeburg, Spartanburg, and York.

6. **The number of employees**

57	Classified	1	Unclassified
1	Temporary	8	Temporary Grant

   The above information reflects the number of filled positions. As of June 30, 2010, the Continuum had 24 unfilled FTE positions (15 classified and 11 temporary grant). Vacancies are filled as funding allows–with positions for staff directly working with children being our first priority. Vacancies in the state office have not been filled in over three years.

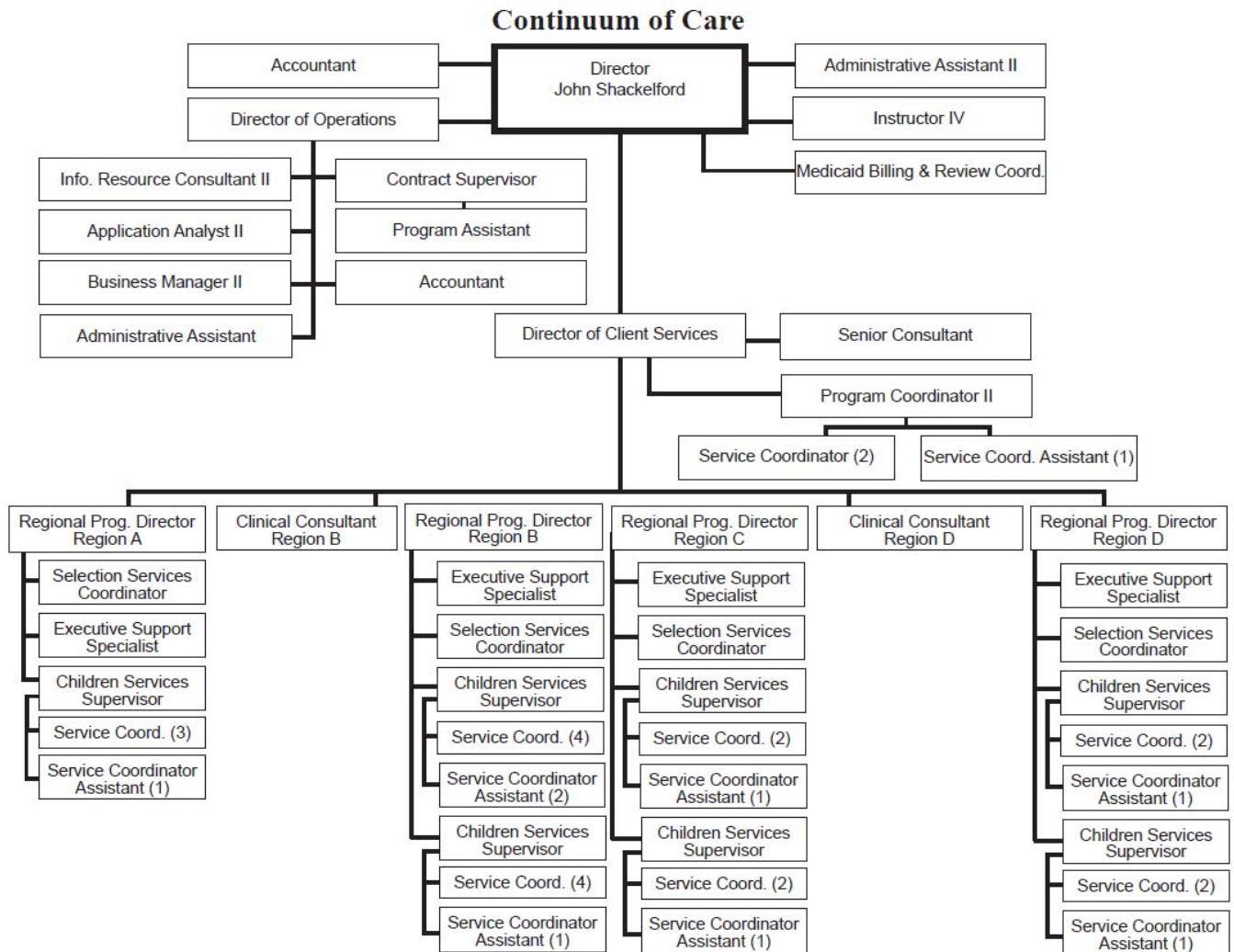7. **Regulatory environment under which your organization operates**
   The Continuum operates under legislative mandates, Federal and State Medicaid policies and regulations, and internal policies and procedures. The Continuum's statutory authority is located in Article 23 Sections 20-7-5610 – 20-7-5670.

8. **Performance improvement systems**
   The Continuum has several ways of gathering feedback from our customers/stakeholders to improve performance.
   a) Hosting six 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)

Organizational Chart

Continuum of Care

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                  ┌──────────────────┐
  ┌────────────┐  │     Director     │  ┌──────────────────────────┐
  │ Accountant │──│ John Shackelford │──│ Administrative Assistant II │
  └────────────┘  └──────────────────┘  └──────────────────────────┘
  ┌──────────────────────┐                ┌──────────────┐
  │ Director of Operations│                │ Instructor IV │
  └──────────────────────┘                └──────────────┘
                                          ┌────────────────────────────────┐
                                          │ Medicaid Billing & Review Coord.│
                                          └────────────────────────────────┘
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Info. Resource Consultant II	Contract Supervisor
Application Analyst II	Program Assistant
Business Manager II	Accountant
Administrative Assistant	

Director of Client Services — Senior Consultant

Program Coordinator II

- Service Coordinator (2)
- Service Coord. Assistant (1)

Regional Prog. Director — Region A
- Selection Services Coordinator
- Executive Support Specialist
- Children Services Supervisor
  - Service Coord. (3)
  - Service Coordinator Assistant (1)

Clinical Consultant — Region B

Regional Prog. Director — Region B
- Executive Support Specialist
- Selection Services Coordinator
- Children Services Supervisor
  - Service Coord. (4)
  - Service Coordinator Assistant (2)
- Children Services Supervisor
  - Service Coord. (4)
  - Service Coordinator Assistant (1)

Regional Prog. Director — Region C
- Executive Support Specialist
- Selection Services Coordinator
- Children Services Supervisor
  - Service Coord. (2)
  - Service Coordinator Assistant (1)
- Children Services Supervisor
  - Service Coord. (2)
  - Service Coordinator Assistant (1)

Clinical Consultant — Region D

Regional Prog. Director — Region D
- Executive Support Specialist
- Selection Services Coordinator
- Children Services Supervisor
  - Service Coord. (2)
  - Service Coordinator Assistant (1)
- Children Services Supervisor
  - Service Coord. (2)
  - Service Coordinator Assistant (1)

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 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 2,616,116	$ 1,417,826	$ 2,587,652	$ 1,180,765	$ 3,098,700	$ 1,318,700
Other Operating	$ 697,310	$ 436,385	$ 679,480	$ 238,105	$ 894,890	$ 144,890
Special Items						
Permanent Improvements						
Case Services	$ 3,494,322	$ 1,795,432	$ 2,333,511	$ 1,605,858	$ 3,852,107	$ 1,452,107
Distributions to Subdivisions			$ 644,222	$ 644,222		
Fringe Benefits	$ 815,754	$ 471,482	$ 795,129	$ 391,416	$ 1,084,545	$ 461,545
Non-recurring						
Total	**$ 7,623,502**	**$ 4,121,125**	**$ 7,039,994**	**$ 4,060,366**	**$ 8,930,242**	**$ 3,377,242**

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 08-09 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	4,121,125	State	$4,060,366	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 COC transition services 7.2.1 COC customer satisfaction 7.5.1 COC work performance 7.6.1 COC compliance with regulatory standards 7.6.2 COC use of vendors
		Federal		Federal		
		Other	3,502,377	Other	$2,979,628	
		Total	7,623,502	Total	$7,039,994	
		% 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.

- There are several staff meetings 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 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.
- Staff are informed on our agency's progress on outcomes on a quarterly basis; an annual Organization Outcome Report is published and distributed to staff and parents.
- Two statewide meetings have occurred with all staff to discuss organizational and services changes. In addition, newsletters, frequent e-mails, and letters to our customers (families and clients) occur.
- 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?

- The Continuum of Care conducts various satisfaction surveys, parent training manuals, family forums and mails newsletters to families we serve.
- The Continuum participates in quarterly meetings with private providers to discuss relevant issues, policies, etc. related to services for emotionally disturbed children.
- Continuum staff meets monthly with other child serving and regulatory agencies to foster communication and collaboration concerning policies and services for emotionally disturbed children.
- 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?

- 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.
- The Continuum works with other child serving state agencies to discuss changes in policy and its impact on our stakeholders (private service providers).
- The Continuum provides internal monitoring of our client's progress. Monitoring client functioning and behavior allows us to continually assess safety issues, as well as, the impact of the child's behavior on the community. Monitoring of select service providers is also done. This allows staff to be more aware of the services our children are receiving, the

quality of those services, along with the provider's compliance with standards – thus keeping staff aware of any potential impact and risks.

1.4   How do senior leaders maintain fiscal, legal and regulatory accountability?
The Continuum of Care has several avenues to maintain accountability. These include:
- 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.
- Ensuring internal policies/procedures for maintaining and handling funds are followed.
- Reviewing monthly billing reports and budget projections to keep spending in line with available funds.

1.5   What performance measures do senior leaders regularly review to inform them on needed actions?
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?
The team approach to case management (implemented in 2009) provides greater opportunity for career advancement. Service Coordinator Assistants have the opportunity to be promoted into Service Coordinator positions. Supervision for professional licensure is offered at no cost to the staff. Management mentors staff to help develop management and leadership skills. Supervisory training is provided to those staff members who are in management or have an expressed desire to be in a management role.

1.8   How do senior leaders create an environment for performance improvement, accomplishment of strategies objectives?
Established goals, strategies, action plans, evaluation measures and related outcomes are reviewed by senior leaders. This review allows the Continuum 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 encourage staff to explore new approaches to performing their jobs and support staff to attend training (as money allows) to expand their skills and knowledge.

1.10   How do senior leaders 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. Continuum implemented two new processes and continued refining two other processes. All changes involved staff buy-in and participation. See challenges d) for the new processes. Staff who receive positive comments from our consumers on various satisfaction surveys and forums are 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.
- Staff are active participants and volunteers in community activities. Examples include: a member of the Lake Murray Elementary Student Improvement Council, Sumter Community Concert Band and the Sumter Little Theater Orchestra, Girl Scouts, March of Dimes, American Red Cross, and various sororities. Staff continue to 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.
- 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, Youth Development Advisory Council, and the Youth Leadership Forum.
- Continuum staff also participates on various work-related committees; Examples include No Wrong Door (Departments of Alcohol and other Drug Abuse Services and Mental Health and Social Services); numerous Department of Health and Human Service workgroup on changes in the state service standards. Continuum has also started providing support services to Youth Net (see accomplishments). 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 organizations' strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology and customer 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 and regional operations. Information on our goals and consumer satisfaction are shared with staff, customers (children and families we serve) and stakeholders.

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

The Continuum has tried not to allow the 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. While we have 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. At times during this past fiscal year, some of our stakeholders (families) have not reacted positively to the request of insurance information, use of client subsidy when the child is living outside the family's home, or in planning for the child's return home. In the future, the Continuum may not have any option other than having our challenges negatively impact upon the clients we serve.

Chart 2.2 Strategic Planning Chart for Continuum of Care

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 09-10 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.	• Case management • Monitor child's progress at home & community • Utilize CALOCUS to assess need for out-of-home placements or community supports • Use "Progress in Placement" tool to monitor a 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.	• 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
	1.3 Families will see a decrease in their child's problematic behaviors.	• Case management • Monitor child's progress at home & 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.	• 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 7.6.2

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 09-10 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
3. To increase the quality, effectiveness and efficiency of the system of care to enable emotionally disturbed (ED) children and their families to successfully transition into less intensive and develop-mentally appropriate service systems.	3.1 COC transition age clients will be better able to live independently within the community setting.	• 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.	• Case management • Monitor child's progress at home & community • Utilize CALOCUS to assess need for out-of-home placements • Use "Progress in Placement" tool to monitor a 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 COC staff to engage families of ED 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.	• 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.	• 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.	• Case management • Monitor child's progress at home & community • Clinical consults • Family feedback	Tables: 7.1.1 7.2.1

2.2 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.

2.3 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?
See 2.1. Involved Senior and Regional Managers 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.

2.4 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:
• Reports tracking the amount of case management provided

- Annually administrating 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.
- Consultations with Psychologist, Clinical Consultants and/or Transition Liaison
- Responses to family and teacher surveys
- Changes in level of care as indicated by the CALOCUS

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

2.6   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.
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 key requirements are?

Customer/Stakeholder	Requirements
Children (and their families) with serious emotional challenges	• 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 families) to have an avenue for input and participation
Child serving state agencies	• 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?
- Regular contact with the children and their families
- Yearly family and teacher surveys.
- Regional family forum meetings
- Various assessments on needed services, service availability, and child functioning to determine needs and expectations
- Hosting and attending interagency and service provider meetings to keep abreast of stakeholder needs and service availability
- 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, as well as a parent manual with a complete listing of information on the Continuum, resources and services. The regional offices are encouraged to address issues in their office; but when needed, the Continuum Director is available to assist. The Client Services Director hosted six family forums 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 3.3 and Table 7.2.1)

When circumstances dictate, customer satisfaction is immediately obtained. For example, several weeks after implementation of the new case management model, the Continuum requested feedback on the new case management approach and its impact on our communication and availability.

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 to help build relationships. (See 3.2 and 3.3)

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 (see 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. Due to the changes in Federal reimbursement, operational and financial tracking systems, the Continuum will need to closely monitor and to make necessary adjustments.

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, client county or residence, CALOCUS scores, 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 organization service needs and directions?**

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 (at changes in placement and yearly) Child/Family contact expectations (monthly) Global Assessment Inventory of Needs -GAIN-SS (at time of assessment)
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 and some satellite offices) 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 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 confidentially. In addition, Information Technology staff ensures the e-mail security 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, and 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, share and implement best practices?**
The accumulated employee 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 and the Regional 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 utilizes video conferencing which increases staff's communication with state office and regional offices. This allows direct communication without travel. The agency's intra-net web site was updated to allow documentation and policies to be more readily available. . Business rules are also developed for new processes, which help outline specific actions.

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 communicating 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. As part of 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 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 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. 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?
Continuum of Care's curriculum 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:
- General agency orientation
- Detailed case management curriculum, extensive instructional and on-the-job training
- Competency evaluations and reliability ratings on select training topics occur
- Training staff attends supervisory meetings to ensure training needs are being met.
- 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
- Initial and ongoing training for computer/office applications
- 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. We are in the process of planning an agency assessment to identify future training needs.

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 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?
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 believes in promoting from within. We were able to reallocate jobs to create entry level positions which allow more cross training and advancement opportunities while also making a positive fiscal impact. Advancement often occurs with Service Coordinator Assistants being promoted to Service Coordinators or Service Coordinators entering supervisory roles. When staff demonstrate skills or express interest in developing skills, we try to assign job tasks to help develop or utilize areas of knowledge.

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?
Informal communication happens daily; formal communication occurs through scheduled meetings or video conferencing. Complaints within the regional operations are first addressed through staff and Regional Director, then the Director. OEPP Office of Human Resources (HR) gathers exit interview information and when needed is involved in other HR issues.

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. 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) Regional Office procedures outline when a Service Coordinator should be accompanied to a family home where possible threats have been identified or communicated.
c) Each operational unit and regional office has contingency plans outlining how staff will sustain services to clients during abnormal or emergency circumstances or events.
d) Two Continuum staff members 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. Case management services range from 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 following processes help to ensure clients/families receive needed services:
- 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.
- 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.
- The Child and Adolescent Level of Care Utilization System (CALOCUS) is used to help ensure children are receiving services at the most appropriate level.
- Business rules are developed which outline and flowchart key work processes.
- Client databases contain essential information on demographics, CALOCUS and CAFAS results, placements, medications, diagnostic, consultations, etc.
- There is an extensive selection process - whereby applicants (potential clients) apply for services, scored/ranked, and selected for services based on severity and need.
- Procurement of service procedures are in place.
- Service contact requirements between staff and our children, families and service providers have been established.

6.3 How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency factors such as cycle time into your design and delivery?
The Continuum of Care addresses this in several ways:
- An experienced trainer who has provided case management services for emotional disturbed children oversees the training of 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.
- Management staff reviews budgets, costs, and (actual and projected) expenditures.
- 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.
- 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?
Operational procedures are in place. The policy and directives are on-line for easy reference and all key processes have been outlined. 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?
(See 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 of 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 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 recent reductions (38%) last year in State appropriations, changes were made in the administrative structure with non-client serving positions remaining unfilled.

The Continuum is continuing to face more changes in Medicaid reimbursement (see challenges) – both in the amount we will be reimbursed for services our staff provide and the continued unbundling of services. These factors occurring simultaneously causes concern in projecting and meeting financial obligations. Therefore, the Continuum will be exploring:
- Continuing to realign staff and responsibilities to adjust to the changes including freezing additional administrative/operational positions.
- Any future reduction in funding may result in a decrease in services to clients.
- Increased focus will be placed on community services and returning the child back to the parent's home.
- Reviewing length of stay data to insure children do not remain in placements any longer than clinically necessary.
- Aggressively gathering and utilizing parent's insurance and other financial supports (adoption subsidy, child's SSI, etc) when the child is not living at home. The Continuum is in the process of implementing a payment rate from families to help slightly defray costs when their child is not living at home.

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 has several goals (See chart III 2.2) related to client functioning:

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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 needed services 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 06-07	FY 07-08	FY 08-09	FY 09-10
% of teachers* who reported the COC child will advance to the next grade level	86%	88%	87%	90%
% of teachers* who responded that students' behaviors improved as a result of the COC's involvement	88%	87%	75%	84%
% of teachers* who stated the COC has been critical in supporting the student's educational placement and progress	93%	95%	94%	91%

Table 7.1.2 Child Functioning (based on CAFAS assessments) Assessments are administered to clients who have been served by COC for at least three months; CAFAS is administered annually thereafter. CAFAS results reflect improvement by child. The % shown are averages of all COC clients' assessments in a specified time period.

Performance Measure	FY 06-07	FY 07-08	FY 08-09	FY 09-10
% of clients showing a decrease in problematic behaviors in a school setting	40%	34%	41%	41%
% of clients showing a decrease in problematic behaviors in the home	40%	30%	32%	28%
% of clients showing a decrease in problematic behaviors in the community	32%	27%	37%	35%

Table 7.1.3 Continuum of Care (COC) Service Availability/Delivery Effectiveness

Performance Measure (Many of these data points* are based on feedback provided through surveys)	FY 06-07	FY 07-08	FY 08-09	FY 09-10
% of students who have been able to remain in the classroom more consistently due to the COC's coordination of services* (based on teachers surveyed)	86%	91%	89%	84%
% of families* report receiving services in the amount stated on their treatment plan	89%	89%	88%	92%
% of families* who stated they were more aware of services available to help their child now that the child is a client of the Continuum	88%	91%	88%	91%

Table 7.1.4 Continuum of Care Level of Care Restrictiveness

Performance Measure	FY 06-07	FY 07-08	FY 08-09	FY 09-10
% of children with at least six months tenure and wrap services in place who remain in their home at the end of each quarter	60%	67%	68%	81%
% of children in placement not requiring a higher level of care during the quarter	93%	92%	93%	85%

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 (COC) Customer Satisfaction Results – Family

Performance Measure All data is based on feedback provided through surveys	FY 06-07	FY 07-08	FY 08-09	FY 09-10
% of families giving COC an A or B rating	88%	84%	93%	94%
% of families who say they will refer other families to the COC	80%	97%	94%	99%
% of families more satisfied with services once their child became a COC client	90%	94%	92%	94%
% of families who stated COC listens to their concerns when planning services	95%	96%	96%	98%
% of families who stated COC allows them to help in making treatment decisions for their child	96%	99%	98%	98%

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 complies with OEPP's Office of Human Resources (HR) policies. Workforce data is gathered and maintained by HR.

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

Data on operational efficiency and work system performance related to serving our clients can best be measured in data related to the child's functioning and provision of case management services. Data presented in Table 7.1.2 is an indicator in client functioning. Other methods to review the services to children are by:

- Regular reviews by our clinical consultant staff (quarterly)
- Review of the Total Service Plan (quarterly)
- Review of "waiting list" to ensure applicants are being processed in a timely manner and selected when slots are available (monthly)
- Review of the intensity of case management services rendered through a review of hours provided per client (weekly)
- Review of contact standards are tracked through supervision (weekly)
- Review of level of care (through CALOCUS and progress in placement reports) to ensure children who are being served in out-of-home placements are placed at the appropriate level and returned back to their home as soon as possible (quarterly)

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 06-07	FY 07-08	FY 08-09	FY 09-10
% of WRAP funds recouped by Medicaid	0%	0%	0%	0%
% of Case Management funds recoup by Medicaid (DHHS)	0%	0%	0%	0%

In order for our clients to be served in locally and as near to their community as clinically appropriate, the Continuum first and foremost utilizes services and vendors in South Carolina and ideally within the client's home community.

Table 7.6.2 Continuum of Care use of South Carolina vendors

Performance Measure	FY 06-07	FY 07-08	FY 08-09	FY 09-10
Number South Carolina vendors used to provide service	56	58	54	46
Number of out-of state vendors used to provide services	4 *	0	1 *	2*

* All of the out-of state vendors are located within 50 miles of the South Carolina border)

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
Correspondence

Section I - Executive Summary

1. **Purpose, Mission, Vision and Values**

   The purpose of the Office of Correspondence is to receive, track and respond to mail received by the Governor's Office.

   The mission of the Office of Correspondence is to efficiently handle the mail received by the Office of the Governor.

   The vision of the Office of Correspondence is to process incoming and outgoing mail effectively.

   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 2009-2010**
   - Received, logged and routed 44,370 pieces of correspondence
   - Prepared 2,233 letters and certificates in response to constituent requests
   - Prepared 355 proclamations
   - Responded to 85 urgent, last-minute requests
   - Helped senior staff with 14,158 written responses
   - Managed the Governor's Citizenship program
   - Managed the Reading Honor Roll program

3. **Key Strategic Goals for Present and Future Years**

   Process Management
   - Accurately log and track all mail received by the Governor's Office
   - Assist Senior Staff in responding to legislative/policy mail
   - Maintain an accurate mail log system

   Customer Satisfaction
   - Respond to requests and meet deadlines for letters, certificates and proclamations
   - Assist Senior Staff in responding to legislative/policy mail

4. **Key Strategic Challenges**
   1) The greatest challenge facing the Office of Correspondence is the unpredictability of the volume of mail received—an unusually large amount of mail on any given day is problematic in all phases of the Office's operations. During the 2009-2010 fiscal year, the Office handled approximately 10% more correspondence than last year, requiring a comparable increase in staff time spent logging in and responding to both written and phone contacts.
   2) The increase in mail has placed a strain on the filing system as all space has been utilized.

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

The Accountability Report provides a snapshot of past achievements and is a planning tool for future needs and expectations.

Section II - Organizational Profile

1. **Main Products and Services**
   - Manage and maintain mail received and answered by the Governor's Office to include receiving, assigning, logging, routing, filing, monitoring and tracking
   - Prepare letters and certificates in response to anniversaries, birthdays, condolences, graduations, weddings, retirements, births, special occasions, reunions, greetings, photos, scouts, congratulatory, student information, and other miscellaneous requests
   - Prepare proclamations
   - Assists senior staff in responding to policy/legislative mail
   - Assist with receptionist duties, including phone messages, for Constituent Services and Correspondence
   - Maintains an extensive filing system of all mail received and sent
   - Manages the Governor's Citizenship Award and Reading Honor Roll programs

2. **Key Customers Groups and Their Key Requirements/Expectations**
   - Constituents: Accurate, appropriate and timely response to their requests
   - Legislators: Accurate, appropriate and timely response to their requests
   - Local, State and Federal Agencies: Accurate, appropriate and timely response to their requests
   - Federal Officials: Accurate, appropriate and timely response to their requests
   - Community Organizations: Accurate, appropriate and timely response to their requests
   - 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
   - Businesses: Accurate, appropriate and timely response to their requests
   - Students and Other Out-of-State Residents: Accurate, appropriate and timely response to their requests
   - Senior Staff: Support and assistance in responding to constituents
   - OEPP Staff: Accurate, appropriate and timely response to their requests for letters or information

3. **Key Stakeholder Groups**
   - Senior Staff
   - OEPP Staff
4. **Key Suppliers and Partners**
   - OEPP Staff
   - Senior Staff
   - 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)**

  _4____Classified   ___1__ Unclassified   _____Contract

  _____ Temporary   _____ Temporary (Grant)   _____Temporary (time-limited)
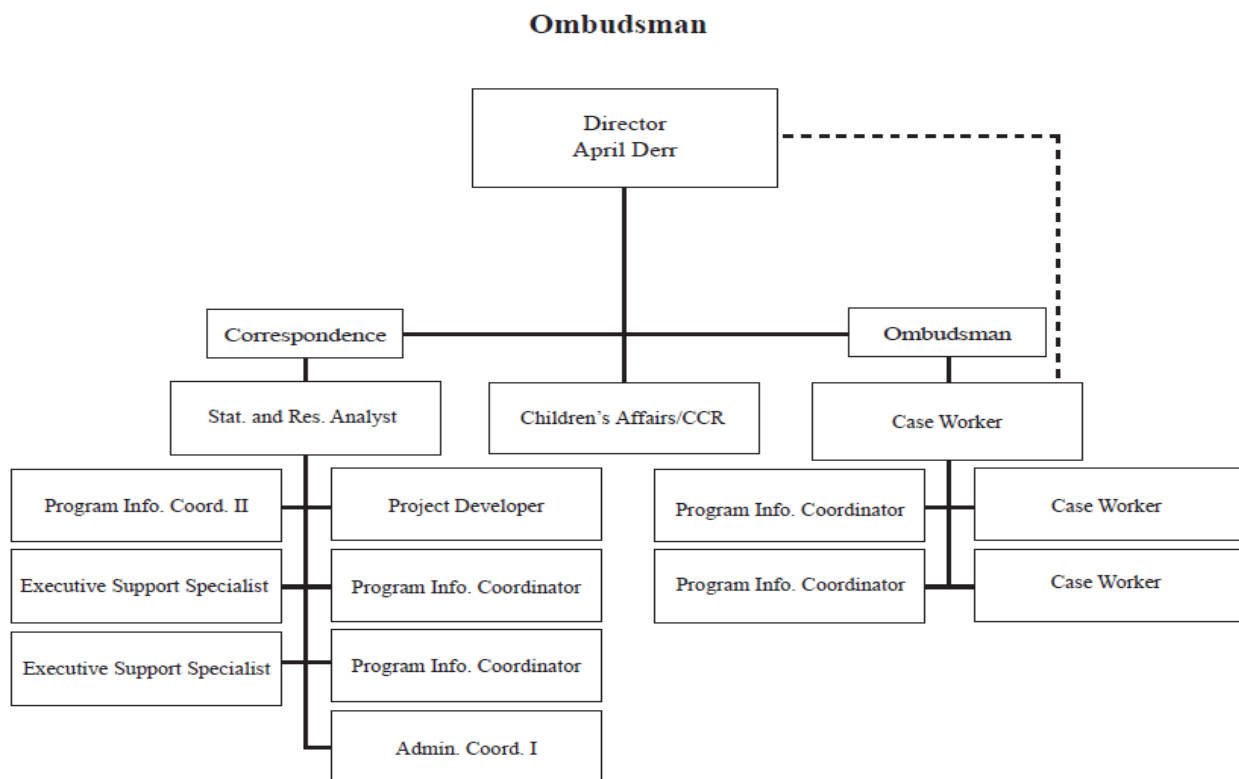
7. **The regulatory environment under which your organization operates**
There is no regulatory environment for Correspondence.

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. Staff members are encouraged to offer recommendations that can result in individual and team performance.

9. **Organizational chart**

Ombudsman

Director
April Derr

Correspondence — Ombudsman

Stat. and Res. Analyst — Children's Affairs/CCR — Case Worker

Program Info. Coord. II — Project Developer — Program Info. Coordinator — Case Worker

Executive Support Specialist — Program Info. Coordinator — Program Info. Coordinator — Case Worker

Executive Support Specialist — Program Info. Coordinator

Admin. Coord. I

10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 279,139	$ 279,139	$ 221,066	$ 221,066	$ 182,536	$ 182,536
Other Operating	$ 11,385	$ 11,385	$ 1,970	$ 1,970	$ 1,500	$ 1,500
Special Items	$	$	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$ 87,424	$ 87,424	$ 70,632	$ 70,632	$ 63,888	$ 63,888
Non-recurring	$	$	$	$	$	$
Total	**$ 377,948**	**$ 377,948**	**$ 293,668**	**$ 293,668**	**$ 247,924**	**$ 247,924**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

10.   Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
Correspondence	Log, track and help respond to Governor's Office mail.	State	377,948	State	293,668	
		Federal		Federal		
		Other		Other		
		Total	377,948	Total	293,668	
		% of budget:	0%	% of budget:	0%	

NOTE: For auditing purposes, these expenditures are captured under OEPP Administration; however, for purposes of this report, Correspondence's expenditures are shown separately.

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 organizational 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 a 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 programs, services, facilities and operations, including associated risks?**
Feedback from customers and partners is used to monitor and address the impact Correspondence has with 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 and preparing drafts on the clean side of used paper 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" does not 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?
Correspondence staff is positioned to easily share their expertise, experience and knowledge and 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 number of staff members 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 organizations' strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology 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 managers 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 09-10 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Accurately log, maintain 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

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 processing mail and in getting it to the proper staff member for response at times when the volume is high. 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 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?

The mail log provides the means to 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 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 final drafts are shared among staff to facilitate the process of responding to additional requests. Feedback from "customers" is noted in the log and shared with appropriate staff, supervisors, 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 data from the log, 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 key requirements are?
Customers include any and all people who contact the office to make a request for a specific type of letter, express concerns or ask questions about legislation or policies, and 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 through the 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 members.

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 to meet and exceed their expectations? 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 performance, 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 efficiently is key to an effective system of process management and customer satisfaction and requires cross training and the shared efforts of all staff members.

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 make decisions regarding the overall mail process and trends in constituent concerns. Additionally, the ability to recognize current events at local, state and national levels that may have an impact on mail received enables staff to prepare for a higher than normal volume of mail. Data can be pulled from the log and reports generated to assist in setting current and long-term needs.

4.3   What are your key measures, how do you review them, and how do you keep them current with your needs and direction? Note: List measures only. Include key performance in Category 7.
- Correspondence received
- Requests for letters
- Written responses
- Proclamations issued
- Urgent requests
- Legislative/policy responses

All measures are reviewed through various checks in the log 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 general correspondence and specific requests received are used in the selection of comparative data and information necessary to support operational and strategic decision-making and innovation.

4.5   How do you ensure data integrity, reliability, timeliness, accuracy, security and availability for decision-making?
The mail log is monitored closely to ensure the accuracy of information entered, 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.

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 workforce knowledge (knowledge assets)? How do you identify share and implement best practices, as appropriate?
This is accomplished through cross-training, individual and group meetings and the sharing of final draft 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 last minute requests. Every effort is made to identify and use each person's strengths, interests and unique abilities to determine the best fit with assigned tasks. 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 morning mail meetings, e-mail, telephone, and daily 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, new employees receive basic training in the functions of Correspondence before settling into their new position. Through the wide range of issues addressed in the mail each day, staff members become more knowledgeable in the various areas of government operations and, on occasion, decide to return to school or accept jobs in different areas of interest.

5.4   How do you assess your workforce capability and capacity needs, including skills, competencies and staffing levels?
Workforce capability and capacity are assessed through the ability of staff to respond to requests within approved deadlines. Staff members are reassigned to help with other duties when there are unexpected amounts of mail that need to be logged 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?

The workforce performance management system encourages staff to proactively identify potential problems before they occur, assist with cross-training for their regular duties, adjust individual schedules when deadlines arise or help is needed in other areas, and offer any spare time/expertise to assist 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
Leaders attend and participate in Supervisory Training offered by Human Resources and share experiences during regular meetings.
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?
Competencies, challenges and accomplishment the action plans are addressed through individual and group meetings with other leaders and members of the executive staff.

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?**
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 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 indigenous to the Office of Correspondence.

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. 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, interaction with senior staff and recognition of a job done well.

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?**
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. The relatively small number of staff members lends itself to closeness and concern for one another, which allows for immediate recognition of potential problems and the ability to address them in the earliest stages. 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. All staff members have the opportunity, and are encouraged, to develop the skills and tools necessary for other positions.

5.14 **How do you maintain a safe, secure, and healthy work environment?**
Correspondence follows all emergency and facility procedures in place. Should any unusual or threatening mail or phone calls be received, they are shared with SLED for investigation. Likewise, SLED alerts the staff if and when a possible threat is 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 assessing productivity of staff regarding the volume of mail received and the timely processing of mail that accurately address requests and issues.

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?**
Due to the variety of mail processed, these determinations are made on an individual basis. Careful editing for content and proofing for errors ensures quality for the customers.

6.3 **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?**
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 evaluate, improve and update these processes to achieve better performance?
Logging the mail correctly is key to all functions of the Office of Correspondence and this process is regularly monitored for accuracy. Once the mail is logged in correctly, adjustments can be 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	2008-2009	2009-2010
7.1.1 Correspondence Received	29,852	40,718	44,370
7.1.2 Written Responses	2,235	2000	2,233
7.1.3 Proclamations	446	376	355
7.1.4 Urgent, Last-Minute Requests	138	115	98
7.1.5 Legislative Responses	2,732	11,158	14,153

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 is provided by the "customers" or requested by supervisors. 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?
Staff is encouraged to make wise and efficient use of work resources and materials. For example, per Governor Sanford, the unused side of all printed paper is used.

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?
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?**
Effectiveness, efficiency and performance are monitored during the daily process 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

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
Office of the Crime Victims' Ombudsman (CVO)

Section I. Executive Summary

1.   Organization's stated purpose, mission, vision and values
Mission Statement:
To be an impartial third party that attempts to ensure that all crime victims are served justly, equitably, and fairly by the South Carolina criminal justice system and victim service organizations.

Vision:
To provide oversight of training, education, and certification of victim assistance programs.

2.   Major Achievements for FY 2009-2010
- Gained additional funding through Proviso 73.22 for $48,000.00 to be used for annual administrative and operational support.
- Completed a memorandum of agreement and received $23,000.00 for initial support to create the database of certified victim service providers for the Office of Victim Services Education and Certification (OVSEC).
- Planned, assisted and helped implement the CVO & State Office of Victim Assistance (SOVA) 5th Annual Crime Victims' Unity Ceremony.
- Provided education to several criminal justice services and other community organizations about CVO and victim rights laws.
- Planned, and participated in meetings with the Victim Services Coordinating Council (VSCC) about the growing demands on the newly implemented (OVSEC) within the CVO and other victim services issues and concerns.
- Provided certification, eligibility, and oversight to training to Victim Service Providers (VSP), Summary Court Judges and Notifiers throughout the state about the Victim's Bill of Rights, victim services and statutory laws.

3.   Key Strategic Goals for Present and Future Years
- To efficiently resolve complaints made by crime victims.
- To ensure ethical performance and accountability.
- To provide oversight of training and education about crime victim laws and services to VSPs, the criminal justice system and community.
- To reduce conflicts and violations between victims and the criminal justice system/ victim service organizations.
- To attend conferences and participate in training about the growing and changing services for victims and the criminal justice systems.
- To develop a more efficient and cost effective data base system to record and report CVO victim activity as well as VSP certification and training.
- To develop a cost efficient training module to assist VSPs that can not afford to travel to training locations.
- To explore if SKYPE or training module can be approved and used to assist in training and communication with VSPs.

- To broadcast a Public Service Announcement to remind the citizens of South Carolina about their Victims Rights according to the constitution.

4. **Key Strategic Challenges**
   - The lack of recurring funding to CVO's budget since its inception in 1994 to provide quality service.
   - The inability to impose sanctions against violators of the Victims' Bill of Rights.
   - Budget cuts affecting CVO's ability to provide the appropriate support staff and/or operating expenses needed for the growing victim service demands and accountability.

5. **How the accountability report is used to improve organizational performance**
   The accountability report is a blueprint for the CVO, used as a guide on how to improve 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 phone, mail, or in person.
   - To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.

2. **Key customer groups and their key requirements/expectations**
   - Crime Victims—to resolve their complaints
   - Victim Service Providers—eligibility, certification and training to assist crime victims

3. **Key stakeholder groups**
   - Crime Victims
   - Victim Service Providers

4. **Key suppliers and partners**
   - Local and state criminal and juvenile justice agencies
   - State agencies
   - Non-profit organizations

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. To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.	Crime Victims Victim Service Providers	Local/state criminal & juvenile justice agencies Local, and State agencies, and non-profit organizations

5. **Operation locations**
Edgar Brown Building, 1205 Pendleton Street, Room 463, Columbia, SC 29201

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

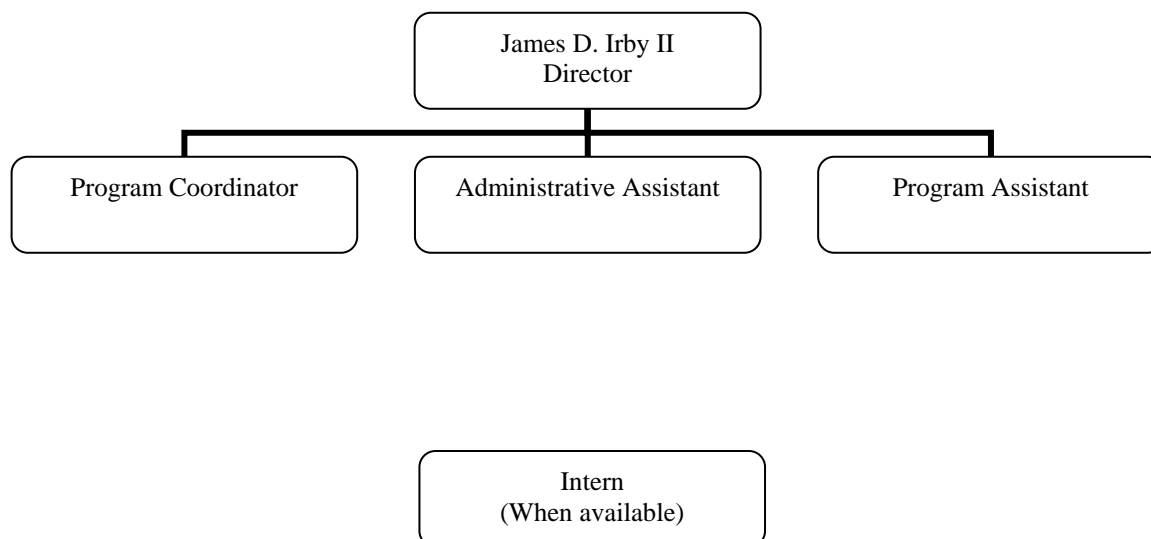|		
2 Classified	1 Unclassified	0 Contract
1 Temporary	0 Temporary (Grant)	0 Temporary (time-limited)

7. **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.
- By qualifying the eligibility and certification of VSPs and determine accreditation of training presentations that meet the VSCC guidelines.

9. **Organizational chart**

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                    ┌─────────────────────┐
                    │   James D. Irby II   │
                    │       Director       │
                    └─────────────────────┘
          ┌──────────────────┼──────────────────┐
┌──────────────────┐ ┌──────────────────┐ ┌──────────────────┐
│Program Coordinator│ │  Administrative   │ │ Program Assistant│
│                  │ │    Assistant      │ │                  │
└──────────────────┘ └──────────────────┘ └──────────────────┘

                    ┌─────────────────────┐
                    │        Intern        │
                    │   (When available)   │
                    └─────────────────────┘
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10.   Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 APPROPRIATIONS	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 114,707	$	$ 123,820	$	$147,937	$
Other Operating	$ 18,771	$	$ 20,035	$	$ 23,680	$
Special Items	$ 22,110	$22,110	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$37,571	$	$ 43,323	$	$51,778	$
Non-recurring	$	$	$	$	$	$
Total	**$193,159**	**$22,110**	**$187,178**	$	**$223,395**	**$**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$ 0	$ 0
Capital Reserve Funds	$ 0	$ 0
Bonds	$ 0	$ 0

8. Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims. To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.	State	22,110	State		See Table III.2 & Chart 2
		Federal		Federal		
		Other	171,049	Other	187,178	
		Total	193,159	Total	187,178	
		% 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 throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior.

a) Short and 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 most appropriate referral, service, and resolution according to the law. To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.

c) Organizational values are to efficiently assist each crime victim in a relevant, timely, impartial and accessible manner; to assist VSPs to maintain approved certification.

d) Ethical behavior is in accordance to the policy and procedures that are put forth by the Governor's Office and law.

1.2   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
- Assist victims and VSPs with their problems or questions in an efficient and timely manner.

1.3   How does the organization address the current and potential impact on the public of its programs, services, facilities and operations, including associated risks?
By reviewing feedback from victims, those in the criminal justice system and VSP and responding in an appropriate way to resolve conflicts, to educate and assist in certification. 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. The risks

associated with CVOs impact on the public involve occasional threats of harm and harassment from victims that are not satisfied with our inability to do more when their rights are violated by others in the community. There have been no reported or potential risks by VSPs to CVO.

1.4   How do senior leaders maintain fiscal, legal and regulatory accountability?
By conducting and performing the duties and functions as outlined by the enabling legislation.

1.5   What performance measures do senior leaders regularly review to inform them on needed actions?
Responses of correspondence and formal inquiries within the time frames set forth by CVO guidelines. Specifics measurements can be found in 4.3.

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 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.

1.7   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.
- By reviewing staff EPMS quarterly so they may participate in the planning and development process.

1.8   How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?
- By having an open door policy and an open mind to different approaches, suggestions to solving issues, and making improvements.
- By assessing staff abilities to perform tasks and oversight of their success with strategic objectives.

1.9   How do senior leaders create an environment for organizational and workforce learning?
By establishing a protocol that workforce will follow while being open to suggestions, thought, and concerns from workforce of new procedures. By allowing staff to talk freely about their performance ideas in the work place and provide appropriate feedback and redirection when necessary to address organizational and workforce learning.

1.10   How do senior leaders 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?

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.

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.
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, Victim Services Coordinating Council (VSCC), and volunteer presentations about Victim's Bill of Rights and victim rights statutory duties to Summary Court Judges and Notifiers.

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 organizations' strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology 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 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) The major issue at this time involves a need to shift from the Filemaker Pro data system which requires outsourcing expenses each time updates are needed. The plan is to transfer the organizations information to an access data system that can be modified w/out expense and within the scope of the IT staff currently employed.
d) Workforce capabilities and needs are met by the HR director and staff.
e) The CVO's organizational continuity in emergencies would be followed through by the CVO's Pandemic Procedure Plan that's been set forth.
f) The CVO's ability to execute the strategic plan would occur by gaining permission from supervisory staff to seek funding on a recurring cycle, until the legislature accepts a Proviso to meet the growing funding needs; 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 08-09 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To efficiently resolve complaints made by crime victims. To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.	By receiving and responding to all crime victims' complaints in a timely and efficient manner with the best overall resolution. VSPs to receive appropriate victim rights certification and education	Refer & provide liaison services. Provide assistance and oversight.	See chart 2 & see Table 7.1:1 & 2
To ensure ethical performance and accountability	By acting as a neutral third party that attempts to ensures all crimes victims are served justly, equitably and fairly by SC criminal justice system organizations. By providing VSP appropriate information and accurate record keeping for certification.	Review & attempt to resolve complaints by crime victims. Provide oversight and certification.	See chart # 2

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

By being that neutral third party agency that attempts to ensures that all crime victims are treated justly, equitably, and fairly by all criminal and juvenile justice agencies. By providing appropriate oversight to victim service trainings and ensure proper certification to victim service providers.

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 actions plans?

By referring to our case management software that statistically keeps how the CVO resolves crime victims' complaints and OVSEC VSP certifications.

2.4 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.

2.5 How do you measure progress on your action plans?
By the number of complaints received each fiscal year, focusing on the major complaints during training, presentations, and maintaining certification of VSPs.

2.6 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. By monitoring legislation that affects the potential changes in the number of VSPs that would affect upgrades to the data system.

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 agency's plan is not currently available via internet. However the mission statement, response to victims for referrals, assistance and addressing complaints are available on our website www.oepp.sc.gov/cvo. The agency's plans to assist VSPs are on the website link under OVSEC.

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?
By enabling legislation that requires us to serve crime victims and VSPs.

Customer/Stakeholder	Requirements
Crime Victims	Must be a South Carolina crime victim who needs assistance with criminal justice system.
VSPs	Must be a paid state employee, non-profit or volunteer with criminal background check.

3.2 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. By providing a survey online to give feedback about CVO services.

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?
The telephone is our key customer access mechanism. We also receive letters by mail and email to CVO. These methods enable the customer to speak directly with CVO staff and in most cases get a remedy to their complaint or certification in a timely and efficient manner.

3.4 How do you measure customer/stakeholder 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.

3.5   How do you use information and feedback from customers/stakeholders to keep services and programs relevant and provide for continuous improvement?
By making the appropriate changes when needed to better serve crime victims.

3.6   How do you build positive relationships with customers and stakeholders to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder 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. By listening and responding to Victim Service Providers who work and advocate with victims; collaboration with the VSCC to implement victim services.

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 performance, including progress relative to strategic objectives and action plans?
By reviewing financial documents, data, and the budget monthly or as needed 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.

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?
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.

4.3   What are your key measures, how do you review them, and how do you keep them current with organizational service needs and directions?
Key measures are referral, assist, and resolutions to complaints calls to victims. Also measuring calls to assist VSPs and presenters with eligibility and certification to assist victims. We review on a monthly basis and compare the number of calls and current needs thru oversight and reviews from these consumers. This helps keep the CVO current on the needs of crime victims and VSPs.

Key Measures:
- Percent of correspondence responded to within a 48 hour time period -goal is 95.08
- Percent of all formal inquiries conducted within a 4 month period -goal is 90%
- Number of trainings per employee per fiscal year -goal is 12 hours
- Number of VSPs that complete their annual certification.
(Results of this can be found in Category 7 Section III Tables 7.1:1 & 1:2)

4.4   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 and VSP 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.

4.5   How do you ensure data integrity, reliability, timeliness, accuracy, security and availability for decision making?
By providing appropriate oversight, and consults with staff to provide accurate recording of information about the stakeholders into the case management system, FileMaker Pro.

4.6   How do you translate organizational performance review findings into priorities for continuous improvement?
By acting on these findings in staff meetings, victim and VSP consults, and during staff evaluations in an objective way. The focus being on improving performance to meet the stakeholders needs and adhere to the current legislation.

4.7   How do you collect, transfer and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?
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. We transfer data each fiscal year and evaluate it against the previous years to implement best practice for the organization.
 By an accounting for the total number of VSP applications for certification and presentations each month and discussions during staff meetings the most appropriate way to accurately report the production of VSPs.

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?**
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.

5.2   How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.
By maintaining and receiving 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 an interested party, based on the requirements listed mentioned is available.

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

By informing senior staff and HR about the employment need, employment listing opening on the state job vacancy website, the application completed by potential employee, interviews and then employee is hired. The employee retention will be based on the training, and evaluation process. Barriers would include unqualified applicants, short term employment which, in turn, creates a continued interviewing process to fill a vacancy.

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

By cross training other staff members, which is then implemented into daily use when necessary for improvement of the CVO.

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 having monthly staff meetings, daily discussions on cases, staff concerns, and quarterly EPMS performance evaluations. This ensures high performance and achievement levels of the CVO office and its staff.

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?

By discussing staff concerns about victim services and victim service provider issues that affect our way of providing services to meet their needs. By addressing and discussing staff and stakeholder issues with the Victim Service Coordinating Council on a quarterly or as needed basis depending on the severity of the issue.

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?

We identify developmental training needs for employees based on their previous, current experiences and the changes in current legislation and victim services. We also base the training on the reports from the community about issues that we have not experienced or reports from other states that effect programs and services to meet the needs of our stakeholders.

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

Director encourages employees to use their new skills to help the victims of crime and our stakeholders to be empowered. Employees believe their knowledge will help others to be more productive citizens in their communities and this state.

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

Employee training improves retention which allows the most accurate information to be conveyed to our stakeholders.

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

Employee training helps to keep the staff aware of current legislation and victim services and programs to meet our stakeholders needs.

5.11 **How do you motivate your workforce 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.

5.12 **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?**
By having a one-on-one meeting with employees, which gives every employee a chance to verbalize 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.

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

Employee progression and effective succession planning are managed by reviewing employee evaluations and having open discussions during staff meetings.

5.14 **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.

By observing staff performance daily as they interact with customers, reinforce staff behaviors appropriately to ensure the needs of the customer and organizations core value and mission statement are met.

Section III – Elements of Malcolm Baldrige
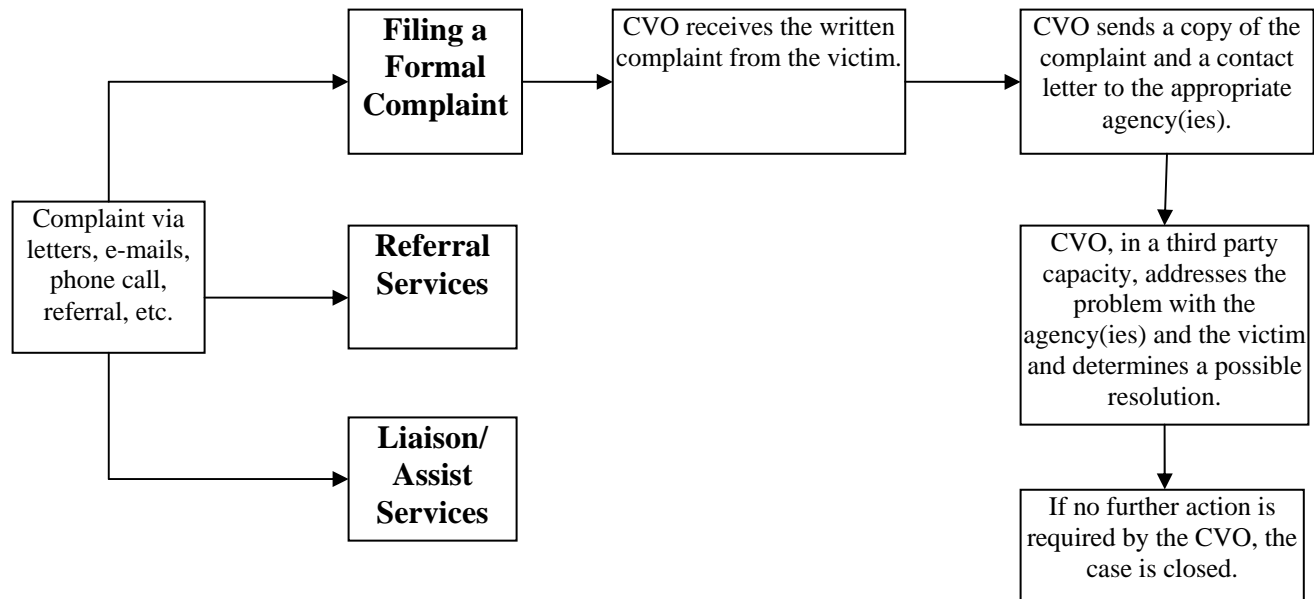## Category 6: Process Management
6.1 **How do you determine, and what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?**
- By determining core competencies by staff performance, evaluation and feedback from consumers.
- By meeting the required standards from legislation.

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 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 Complaints are handled in the CVO - General Overview

```
                    ┌──────────────┐     ┌────────────────────┐     ┌──────────────────────┐
              ┌────>│  Filing a    │────>│ CVO receives the   │────>│ CVO sends a copy of  │
              │     │  Formal      │     │ written complaint  │     │ the complaint and a  │
              │     │  Complaint   │     │ from the victim.   │     │ contact letter to    │
              │     └──────────────┘     └────────────────────┘     │ the appropriate      │
┌────────────┴┐                                                     │ agency(ies).         │
│ Complaint via│                                                    └──────────┬───────────┘
│ letters,     │                                                               │
│ e-mails,     │    ┌──────────────┐                                           ▼
│ phone call,  │───>│  Referral    │                             ┌──────────────────────────┐
│ referral,    │    │  Services    │                             │ CVO, in a third party    │
│ etc.         │    └──────────────┘                             │ capacity, addresses the  │
└────────────┬┘                                                  │ problem with the         │
             │      ┌──────────────┐                             │ agency(ies) and the      │
             │      │  Liaison/    │                             │ victim and determines a  │
             └─────>│  Assist      │                             │ possible resolution.     │
                    │  Services    │                             └──────────┬───────────────┘
                    └──────────────┘                                        │
                                                                            ▼
                                                               ┌──────────────────────────┐
                                                               │ If no further action is  │
                                                               │ required by the CVO, the │
                                                               │ case is closed.          │
                                                               └──────────────────────────┘
```

How a VSP Become Certified for OVSEC
Victim service providers employed in their respective offices are certified through the Office of Victim Services Education and Certification within the Office of the Crime Victims' Ombudsman.
Victim service providers (VSP), serving in public or private nonprofit programs, employed on the effective date of January 1, 2009 are exempt from the 15 hours basic certification requirements but shall meet the 12 hours of annual continuing education requirements to maintain certification.
Victim service providers, serving in public or private nonprofit programs, employed after the effective date of this chapter are required to complete the basic certification requirements within one year from date of employment and to meet annual continuing education requirements to maintain certification throughout their employment.

6.3 **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?**
By researching new processes of technology and the cost to update and incorporate them into the CVO's process, if cost effective.

6.4 **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, assisting in resolving their issues, as well as certifying training for VSPs.

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

By listening to customers' comments about the CVO's performance as well as comments received from outside entities. Then evaluating what processes need to be changed and implementing them. By making plans to have evaluations performed by stakeholders and submitted to CVO for performance reviews.

6.6   What are your key support processes, and how do you evaluate, 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. By having stakeholders complete evaluations on CVO trainings, presentations, and work performance.

6.7   How does your organization determine the resources needed to meet current and projected budget and financial obligations?
By reviewing quarterly the work completed by staff and the operating expenses, access the resources needed for the current fiscal year and project the outcome for stakeholder activity based on previous year performance as well as outcomes from legislative decisions. By researching new resources that meet the current budget without increasing current obligations.

Section III – Elements of Malcolm Baldrige
Category 7: Results
7.1   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?

Table 7.1:1 Percent of calls/correspondence responded to within 48 hour time period:

FY 04-05	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10
97%	96%	97%	98%	98%	97%

Table7.1:2
Percent of all formal inquiries conducted within a 4 month period:

FY 04-05	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10
92%	92%	95%	93%	98%	82 %

7.1:2 How do your results compare to those of comparable organizations?
CVO uses an online customer satisfaction survey, and an on-line complaint form to gather information of customer satisfaction. We also listen to customers' feedback after an inquiry of their complaint. CVO plans to implement an evaluation at the end of core training presentations performed by CVO staff.

CVO and several state organizations closely compare to each other when it comes to addressing formal complaints to assist victims when their rights were violated by the criminal justice and

victim services organizations and no sanctions. We request a response from the complainant, attempt to resolve the issues and prepare an annual report. At least two states impose sanctions that can be imposed by a Crime Victims Rights Board. One state has the ability to pull funding of Victim rights funds recipients. One state requires the complainant completes a set of requirements which includes additional training on Victims Rights, empathy and a letter of apology to the victim. One state publishes the annual report with their conclusions with the governor, legislature and the media. One state even brings civil action to assess a forfeiture, and impose a fine up to $1000 for intentional violations.

7.1:2 OVSEC accomplishments and comparable organizations. See 7. 6

7.2   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?
CVO uses an online customer satisfaction survey, and an on-line complaint form to gather information of customer satisfaction. We also listen to customers' feedback after an inquiry of their complaint. CVO plans to implement an evaluation at the end of core training presentations performed by CVO staff.

7.3   What are your performance levels for the key measures of financial performance, including measures of cost containment, as appropriate?
To monitor spending trends as needed to maintain CVO's approved budget. This is done by using all available resources, projecting supply and demand of operating expenses based on production/needs as well as finding other cutting cost ways to effectively reduce the budget without affect services.

7.4   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?
By performing EPMS evaluations, regular staff meetings and consultations about stakeholder issues to hear and discuss updates and improvements within the CVO.

7.5   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)?
By reviewing surveys and feedback from CVO services, and implementing change as needed toward servicing the stakeholders in a timely manner. By encouraging staff to work together, communicate different ideas and implement changes and office procedures and low to no cost measures that enhance the quality of service, staff retention, and morale. By reviewing safety measures that address issues that come up from stakeholders. By being observant of security and sensitive matters surrounding the work environment, adherence to and participate in emergency drills at the office and surrounding areas.

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

The data in this report is in compliance with SC Code of Laws, Section 16-3-1610 through 16-3-1670. The victim service community and other state agencies within the criminal justice and victim service organizations support our efforts. Below are the results of performance levels and trends for the past 5 years.

CVO fielded the following incoming phone calls.
FY08-09…...1207
FY 07-08…..1250
FY 06-07…..1457
FY 05-06…..1962
FY 04-05…..1799
FY 03-04…..1841

CVO assisted and referred the following incoming phone calls.
FY 08-09…..578
FY 07-08…..625
FY 06-07…..508
FY 05-06…..567
FY 04-05…..497

This is the first year of reporting data for OVSEC since the program was initiated in January 2009. There is no reportable data to compare with this being the only one of its kind to provide education and certification to Victim Service Providers in the nation. At least one state reports the ability to provide training when a complaint is founded. There were approximately 2011 applications received for VSPs to become certified. Victim service advocates, Judges, court administration, detention center staff, and volunteers for victim rights organizations make up the largest population of certified VSPs. Changes in legislation and recommendations from the Victim Services Coordinating Council (which created OVSEC) will dictate the impact OVSEC will have on the VSPs service delivery and the victim service community.

2009-2010 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 provide leadership in advocating, funding and implementing initiatives which recognize the inherent dignity of each individual and promote independence, productivity, respect and inclusion for all persons with disabilities and their families.

    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.

    Values:

    - Families are the foundation of our society.

    - An individual with developmental disabilities may provide additional challenges in the family.

    - A coordinated system of support is critical to the individual, family members, and community to foster independence, productivity and inclusion into the community setting.

    - Individuals and family members should be actively involved in the decision making process for supports and services.

2. **Major Achievements for FY 2009-2010**

    A. Through council efforts, a program called the South Carolina Adult Sibling Leadership Network has been established that creates a state-wide network for siblings of persons with developmental disabilities, and head and spinal cord injuries for the purpose of providing opportunities for them to network with one another; share experiences, ideas and concerns; gain information about the state's system supports and services; and receive training on how to effectively advocate on behalf of a brother or sister with a disability. Siblings 21 years old or older, or anyone else that the individual with a disability considers family in cases where there is no living sibling, will be targeted. During the first year of this grant, a project coordinator was hired and a steering committee was established. The committee meets once each quarter. A Web page for the network has also been developed. A brochure was created and project information has been distributed to 19 agencies. A newsletter was developed and sent to over 25,000 recipients. Webinars were presented on January 11 and March 31. Planning has begun for the first SibL Conference, which will be held in October.

B.   Through a grant with the University of South Carolina Research Foundation, a model program continues to be developed for childhood surveillance and early intervention referral when indicated, by providing didactic and clinical experiences for Family Medicine residents and medical students in an academic department of Family Medicine. The Family Medicine Center has implemented a major clinic re-organization plan to improve patient care. As a result of this re-organization, the project team has developed a plan to implement developmental milestone screening into a new clinic flow procedure. The Pre-Test for medical students is in its final stages of revision. The Project Team has conducted the first rotation of medical students. In addition, one of the doctors has completed major revisions to the Pediatric Visit template in the Electronic Medical Record (EMR). The new template includes a link to the PEDS Online service, where the screens will be completed and stored in each patient's PEDS Online record. Scores and outcomes will be recorded and will be visible each time the patient's EMR is accessed to allow physicians to monitor the child's progress over time. The Project Team will provide developmental milestone education material to parents and guardians periodically. Through this program, 20 medical students, 19 family residents, 12 attending physicians, and 109 pediatric patients have been served. 20 medical students have attended the pre-rotation developmental screening didactic sessions and 12 out of 13 attending physicians have administered the PEDS screening tool. All 20 medical students have been exposed to the scoring of the screening tool, its use and integration into the EMR and the resultant referral process. 19 out of 30 family medicine residents have used the PEDS screening tool with their pediatric patients.

C.   Through council funding, the Greenwood Genetic Center continues the South Carolina Neural Tube Defect (NTD) Campaign, which represents a multifaceted approach to educate women of childbearing age about the preventive use of folic acid. As of September 31, 2009, NTD prevalence rate was 0.81 cases per 1,000 pregnancies. Of 506 subsequent pregnancies, there have been two recurrences among women who were taking folic acid prior to becoming pregnant. 551 individuals have been served during this fiscal year through this grant. Of 931 neural tube defect affected pregnancies ascertained since 1992, 545 women with NTD affected pregnancies are followed by the SC NTD prevention program. Since July 1, 2009, of these 545 women, eight have been enrolled into the SC Birth Defects Prevention Program. 188 athletic booster club packets were sent out with the request to publish a one page black and white ad in the football program of high schools in the state. 25 ads have been placed. 188 health packets have been sent out to school nurses of high schools for the nurses to request free information about the importance of folic acid for distribution among their students. A total of 6,743 bottles of multi-vitamins containing folic acid have been distributed since July 1, 2009. A total of 12,486 pieces of folic acid educational material have been distributed through various programs and physician offices since July 1, 2009 with 62 billboards being placed in the coastal and upstate areas of the state.

D.   The council also continues to fund Partners In Policymaking (PIP). The purpose of the program is to provide grassroots leadership training for self-advocates and parents about developmental disabilities issues and competency training necessary to become effective advocates. Through this project, 21 individuals were selected to participate in the class. This included 6 self-advocates and 15 parents. The PIP class met on five weekends, which provides a comprehensive training for targeted parents and self-

advocate participants. The sessions focused on key disability issues using the National PIP e-learning curriculum. The speakers selected provide state-of-the-art information and best practices. In addition to the regular curriculum, a one day workshop entitled "How to Be an Effective Advocate" was offered. Through the project, 20 individuals were trained in employment; 20 people were active in systems advocacy; 20 individuals were trained in systems advocacy; 21 individuals were trained in leadership, self advocacy, and self determination; and 21 people were active in systems advocacy about formal/informal community supports. 14 people attained membership on public and private bodies and other leadership coalitions.

E. The Council and its key partners - University Centers for Excellence in Developmental Disabilities Education, Research and Service and Protection and Advocacy - as defined in the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402) undertake coordinated activities which bring about advocacy, capacity building, and systemic change activities that affect individuals with disabilities and their families. One such project was to facilitate a study to learn more about seclusion and restraint in South Carolina's schools. The project surveyed South Carolina school districts about their policies and practices in this area. A report was released in December, 2009. This continues to be a target area for collaboration, as it is clear that many districts engage in potentially dangerous practices with no policies in place to guide teachers and other staff in their safe use. A coalition is being considered that will make recommendations for the Department of Education and the legislature to promulgate or enact legislation governing the use of these practices.

3. **Key Strategic Goals**
   A. **Employment**
      1. People with disabilities who want to work, work in places of their own choosing.
   B. **Formal/Informal Community Supports**
      1. Individuals will have access to services they need to exercise choice.
      2. Individuals and their families know and understand their rights to make informed choices.
   C. **Quality Assurance**
      1. People with developmental disabilities and their families are strong advocates for themselves, their families, and all individuals with disabilities.
      2. Increase opportunities for social capital, financially supporting advocacy organizations.
      3. Council funded projects include consumer participation in the planning, design and implementation of the project.
      4. People have the information, skills, opportunities, and support to live free of abuse, neglect, financial and sexual exploitation, and violation of their human and legal rights.
   D. **Health**
      1. Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.
      2. Promote primary prevention of developmental disabilities.

4. **Key Strategic Challenges**
   A. People with disabilities who want to work often face difficulties in finding jobs of their own choice. This is of particular concern due to the tenuous economy in the State and the high rate of unemployment and glut of people looking for work.
   B. People with developmental disabilities and their family members often do not know their rights or how to make informed choices. There have been changes in many services and policies and procedures at service agencies due to budget concerns. This has made it difficult for individuals to make choices and understand their rights.
   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.

5. **How the accountability report is used to improve organizational performance.**
   The accountability report is used to look at our processes and make needed improvements in how we track and gather information. Discussions will continue among Council staff to ensure that adequate processes are in place and that everyone understands their roles and responsibilities.

Section II - Organization Profile

1. **Main products and/or services and the primary methods by which these are delivered**
   The Council accomplishes much of its work in providing grant funding for projects that help accomplish Council goals identified in our 5-year State Plan and through collaboration with community service providers and advocacy organizations.

2. **Key customers segments and their key requirements/expectations**
   Key customers are individuals with developmental disabilities as well as parents, guardians and family members of persons with developmental disabilities.

3. **Key stakeholders**
   Key stakeholders include all South Carolina Citizens, community service provider organizations, advocacy organizations, State governmental agencies that administer and/or provide services to persons with developmental disabilities and the Legislature.

4. **Key suppliers and partners**
   Key partners include University Centers for Excellence in Developmental Disabilities Education, Research and Service and Protection and Advocacy.

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

6.   The number of employees (segmented by employee category)
    ____4__ 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 provides the framework for the Council to operate. The Administration on
    Developmental Disabilities (ADD) is the federal administering agency for the DD Act program
    and thus provides the direct oversight and monitoring of the Council. ADD develops program
    regulations and provides technical assistance and guidance to state programs.
`
    The Council is required to submit State plans and fiscal and programmatic reports to ADD.
    These reports require approval by ADD. Program Performance Reports are required to be
    submitted annually. Reporting on activity-specific outcomes is required through this reporting
    mechanism.

    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 that meets
    required elements. These reports are reviewed by staff to see if the program being offered is
    meaningful to participants. At least twice each grant period, staff conducts a monitoring visit,
    meets with people being served by the grant, and conducts on site record reviews.

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.
    At least twice each grant period, staff conducts an on-sight review, meets with people being
    served by the grant, and conducts an on-sight record review.

9.   Organizational
Chart

13

_____   5
Developmental Disabilities Council   2009-2010
Accountability Report

10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$243,988	$37,436	$201,074	$36,087	$294,160	$34,658
Other Operating	$51,777	$9,683	$55,455	$8,028	$92,342	$15,342
Special Items	$0	$0	$0	$0	$0	$0
Permanent Improvements	$0	$0	$0	$0	$0	$0
Case Services	$0	$0	$0	$0	$0	$0
Distributions to Subdivisions	$504,013	0	$572,100	$0	$1,650,000	$0
Fringe Benefits	$64,531	12,387	$60,261	$9,523	$102,956	$12,130
Non-recurring	$0	$0	$0	$0	$0	$0
Total	$864,309	$59,506	$888,890	$53,638	$2,139,458	$62,130

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 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 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross Reference
DD Council	To administer and monitor federal grants funding to sub-grantees, providing services for persons with DD.	State	59,506	State	$53,638	
		Federal	804,803	Federal	$835,252	
		Other	0	Other	0	
		Total	864,309	Total	$888,890	
		% 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 throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities; b) performance expectations; c) organizational values; and d) ethical behavior?
Short and long term direction is set through regular staff meetings. Performance expectations are set in the Planning Stages of EPMS for employees and through the development of our State Plan that guides Council direction for grant funding. Ethical behavior is in accordance to the policies and procedures put forth by the Governor's Office and by law.

1.2 How do senior leaders establish and promote focus on customers and other stakeholders?
Senior leadership is involved in community activities including advisory group membership with other organizational leaders to ensure a strong focus on current issues and communication with stakeholders. Communication with sub grantees is ongoing to ensure that questions or concerns are addressed. Phone calls or inquiries to the Council office are returned promptly.

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?
The Council monitors sub grantees to ensure that projects that are funded are meeting expectations. Feedback is sought periodically through surveys on our website, particularly during development of our 5 year State Plan. Feedback is encouraged from partners and addressed through discussion and planning that is submitted to our Council for direction. Oversight of the Council is provided by the Administration on Developmental Disabilities to ensure that public law requirements are met.

1.4 How do senior leaders maintain fiscal, legal and regulatory accountability?
The Council maintains fiscal, legal, and regulatory accountability by following policies and procedures set up by OEPP, the Governor's Office and through a careful review of all requests for reimbursement from sub-grantees and through site visits. The OEPP Finance office provides oversight for all disbursements within the department.

1.5 What performance measures do senior leaders regularly review to inform them on needed actions?
The Developmental Disabilities Council is a small organization that consists of five FTEs. Staff meets at least monthly, or more often as needed, to review areas of responsibility to ensure all

staff is working towards the Council's goals and objectives. Feedback and direction from the Council is set up to occur regularly to ensure Council members are kept informed and provide direction to Council staff.

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?

Designated Council staff interact with the Administration for Developmental Disabilities to ensure compliance with their standards. Communication regularly occurs between the senior leader and the Council – particularly the Executive Committee. Staff are encouraged to give feedback for improvements.

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

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. This information is then applied to the organization locally.

1.8   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 the senior leader have discussions and brain storming is encouraged. In addition, during the review process, the director works with staff to identify organizational expectations.

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

Monthly staff meetings are held to discuss projects of all staff. Group discussions are encouraged. Staff ideas and input are encouraged.

1.10   How do senior leaders 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. Staff ideas and input are freely encouraged. This is also done through the EPMS process.

1.11   How does senior leadership 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.

Council's senior leader serves 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
- Partners of Disability Organizations

8

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Developmental Disabilities Council   2009-2010
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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

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; b) shifts in technology and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.**

The Council holds public hearings to receive feedback for development of our 5 year State Plan. Staff has on-going interaction with sub grantees, advocacy organizations, families, and consumers. This ensures that all Council staff has an understanding of the current environment affecting individuals served by the Council projects. Regular communication with Council members is critical to ensuring a strong execution of the State Plan.

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

The Developmental Disabilities Assistance Bill of Rights ACT (PL 106-402) requires the council to write a State Plan every five years. Through this process, the Council receives public input, as well as input from Council members in determining goals and objectives. The Administration on Developmental Disabilities approves the State Plan to ensure that all required elements are included. Through staff monitoring of the grants, the Council determines whether or not the subgrantee is meeting the goals and objectives of the grant.

Table 2.2
Strategic Planning Chart for Developmental Disabilities Council

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 09-10 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.	Hold conference to include VR, DDSN, and other agencies to train persons with DD and employers to promote inclusion. Hold follow-up sessions with service providers. Fund innovative projects that support employment opportunities for individuals with disabilities	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 Fund initiatives that strengthen the knowledge base of self advocates and family members	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. Serve in an advisory capacity for the South Carolina Disabilities and Health Project at USC School of Medicine	Routinely review national/state information and data related to health disparity of people with developmental disabilities and successful health promotion activities and strategies. Monitor and assist with grant projects to ensure evaluation and quality enhancement activities are carried out	Outlined in state plan

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 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. Feedback is then given to the Council for direction and follow-up.

2.4 **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.scddc.state.sc.us and we include this information in our other printed materials. The Council staff and members also sponsor and attend conferences across the state to make brochures, newsletters, and other materials available to educate the public about what the Council is and does. State Plan goals are reviewed at least annually by Council staff and the State Plan Committee of the full Council. Revisions are submitted to ADA within the appropriate timeframe if changes are identified.

2.5 **How do you measure progress on your action plans?**
The Council measures progress through quarterly reports from our sub-grantees and by discussion with and feedback from the Council.

2.6 **How do you evaluate and improve your strategic planning process?**
The 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 hearings and an extensive public comment period, the Council meets in its 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 expected outcomes. When the draft plan is completed, it is made available for public comment before being finalized. The final version of the plan is submitted to the Administration on Developmental Disabilities for approval.

2.7 **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.scddc.state.sc.us

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
People with disabilities who want to work, work in places of their own choosing.	Feedback on the State Plan goals is encouraged. Funding is provided for grant projects. These grants are monitored regularly to ensure that acceptable outcomes are being achieved. The Council reviews reports periodically to ensure consistency with the plan.
Parents, guardians and family members of persons with developmental disabilities	Feedback on the State Plan goals is encouraged. Funding is provided for grant projects. These grants are monitored regularly to ensure that acceptable outcomes are being achieved. The Council reviews reports periodically to ensure consistency with the plan.

3.2   How do you keep your listening and learning methods current with changing customer/business needs and expectations?
The Developmental Disabilities Council and Council staff has regular interaction with sub-grantees and consumers and family members. Council staff serve on committees that help us keep up with current system issues that have a direct impact on consumers and family members.

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? Council staff conduct onsite visits with subgrantees and are also available by phone and e-mail. We also encourage customers to contact us with questions or concerns. Contact information is available on our Web site at www.scddc.state.sc.us.

3.4   How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?
The Council requires customer satisfaction surveys from sub-grantees each year. Feedback from the surveys will be used when considering grants to be funded for the following grant cycle.

3.5   How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?
The Council reviews the State Plan. Staff uses customer feedback, and also comments from public input. The Council's Five Year State Plan is reviewed and may be amended annually, 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.

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

The Council staff has regular interaction with sub-grantees. This includes individuals with developmental disabilities, family members, other service providers, and advocacy organizations throughout the state. Council staff serve on a variety of advisory committees consistent with mission. This helps us to remain in touch with key issues and projects that impact our customers.

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?
The process is outlined by the Developmental Disabilities Assistance Bill of Rights Act (P.L.106-402), which is Federal law with oversight carried out by the Administration for Developmental Disabilities (ADA). Areas of focus must be within the provided guidelines and are put into our State Plan. Updates to the State Plan may be made annually as changes are needed. Approval for changes must then come from ADA.

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?
The Developmental Disabilities Council develops a State Plan. Staff receives customer feedback through grant monitoring visits. The Council's Five Year State Plan may be amended annually if changes are needed, 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.

4.3   What are your key measures, how do you review them, how do you keep them current with organizational, service needs and directions?
The following key measures come from our current 5-year State Plan. Each year, these measures are reviewed by staff and Council, to determine if any changes need to be made. Data is tracked and will be compared in future years to determine areas of improvement.
A.   Employment
    1.   People with disabilities who want to work, work in places of their own choosing.
B.   Formal/Informal Community Supports
    1.   Individuals will have access to services they need to exercise choice.
    2.   Individuals and their families know and understand their rights to make informed choices.
C.   Quality Assurance
    1.   People with developmental disabilities and their families are strong advocates for themselves, their families, and all individuals with disabilities.
    2.   Increase opportunities for social capital, financially supporting advocacy organizations.
    3.   Council funded projects include consumer participation in the planning, design and implementation of the project.
    4.   People have the information, skills, opportunities, and support to live free of abuse, neglect, financial and sexual exploitation, and violation of their human and legal rights.

D. **Health**
    1. Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.
    2. Promote primary prevention of developmental disabilities.

4.4 **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 operational and strategic decisions 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.

4.5 **How do you ensure data integrity, reliability, timeliness, accuracy, security and availability for decision-making?**
Council staff monitors sub grantees to ensure that all requirements are met. Any concerns are reported to senior leadership and to the Council as needed.

4.6 **How do you translate organizational performance review findings into priorities for continuous improvement?**
Reporting is provided to the Council regarding current grant projects. This information is reviewed prior to approval of new and continued projects and amendments to the State Plan.

4.7 **How do you collect, transfer and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices?**
Staff communicates with one another during monthly staff meetings and regular discussions.

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?**
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. Staff access the Technical Assistance website and staff of the NACDD to ensure that work is consistent with guidelines from the oversight agency.

5.2 **How do you achieve effective communication and knowledge/skill/ best practice sharing across departments, jobs, and locations?**
The Council office is a small office with 5 staff. During monthly meetings staff conducts a review of current projects. Staff looks ahead at the approaching months and due dates and of upcoming projects. Council staff also reviews opportunities to interact with other key state

agencies and consumer organizations. Advisory Committee involvement affords opportunities to learn what other agencies are doing and to stay on top of current trends.

5.3   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 applicant's strengths and weaknesses are identified. The job position and requirements are explained to the applicant, as 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.

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. Senior staff checks to make sure assignments are being done in a timely manner.

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?
Council staff are considered stakeholders in the day to day operation of the office. Council staff works as a team to ensure positive outcomes.

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 leadership attributes is addressed between individual staff and their supervisor. Tasks are assigned to encourage professional development and skills. Staff are held accountable through the EPMS process. Staff access learning tools on the Technical Assistance website and staff from NACDD to increase their knowledge and help them in their work.

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?
Training needs are identified through the EPMS process and identified concerns of staff or supervisor. Human Resources in OEPP does new staff orientation and has established policies and procedures that are on the website and available to all staff.

5.8   How do you encourage on the job use of new knowledge and skills?
Staff are encouraged to develop knowledge and skills and to use these in their work. Staff are also encouraged to become involved in Council projects of interest to them.

5.9   How does employee training contribute to the achievement of your action plans?
A knowledgeable, skilled workforce produces better results in our action plans.

5.10   How do you evaluate the effectiveness of your workforce and leader training and develop systems?
Staff is evaluated using the EPMS process.

5.11   How do you motivate your employees to develop and utilize their full potential?
Staff is encouraged to become involved in Council projects of interest to them.

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?
This is done through on-going discussions. This information is used in the EPMS process.

5.13   How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?
Council staff is included in discussions regarding issues affecting the Council. Staff develops organizational knowledge through these ongoing discussions. This will ensure that work will be completed should the senior leader become unavailable for any reason. The Council Executive Committee plays a significant role in succession planning through their role to hire the Executive Director of the Council.

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. Any potential building hazards are promptly reported to the building liaison.

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?

The Council's mission and core competencies are found in the Developmental Disabilities Assistance Bill of Rights Act (P.L. 106-402), which is Federal law. The Administration for Developmental Disabilities (ADA) provides guidelines for Council's action. Areas of focus must be within these guidelines.

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?
Processes are developed based on the Developmental Disabilities Assistance Bill of Rights Act (PL 106-402) and by Administration on Developmental Disabilities guidelines. The State Plan guides our work and establishes a time line for carrying out the actions. All work revolves around the Plan and is evaluated for effectiveness and may be modified annually if needed.

6.3   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?

Senior leaders value the insight and knowledge of longer term employees but constantly study new ways to improve on existing systems. Strategies are set to incorporate changes and better ways of doing business into the day-to-day activities.

6.4   How does your day-to-day operation of these processes ensure meeting key performance requirements?
Operational procedures address performance requirements. A schedule is set up to meet and monitor regulatory requirements.

6.5   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 sub-grantee 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.

6.6   What are your key support processes, and how do you improve and update these processes to achieve better performance?
 The Council's key support processes are developed based on the Developmental Disabilities Assistance Bill of Rights Act (PL 106-402) and by the Administration on Developmental Disabilities. Additional support comes from the National Association of Councils on Developmental Disabilities (NACDD) through their Technical Assistance Advisory Committee and products. The State Plan guides our direction for grant funding.

6.7   How does your organization determine the resources needed to meet current and projected budget and financial obligations?
Council staff reviews budgets from past years to determine long-term trends in spending. Those trends are used to project spending based on staffing. Budgets for Council grants are determined by the Council by reviewing grant applications and funding determination.

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?
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 councils interact on a regular basis.

7.2 **What are your performance levels and trends for your key measures on customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?** See Table 7.2 below.

Table 7.2

Customer Satisfaction Survey Topic	Percentage of Customers Satisfied
Individuals treated with respect during project	99 percent
Individual had more choices and control as a result of project	92 percent
Individual can do more in the community as a result of the project	94 percent
Individual is satisfied with project activity	99 percent
Because of project, individual feels he or she knows his or her rights	91 percent
Individual feels safe as a result of the activity	97 percent
Individual feels as though he or she has a better life as a result of the activity	98 percent

Satisfaction percentages remain high and above average when compared to other Councils. Since this is a compilation of results from sub grantees, Council staff is able to focus on areas where there might be poor performance and assess the reasons for that result. Monitoring visits can be used to assess the situation and to make recommendations should changes need to occur.

7.3 **What are your performance levels for your key measures on financial performance, including measures of cost containment, as appropriate?**
Financial performance is measured against the Council budget. Funding levels are identified and maintained when grant awards are considered. Fiscal guidelines are used when grant contracts are completed. Sub grantee requests for reimbursement are carefully reviewed against requirements before payment is made.

7.4 **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?**

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Staff meet monthly and have regular discussions that contribute to individual and Council success. Discussions are held with employees during the EPMS process.

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?**
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.

7.6 **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 sub-grantees and feedback on the State Plan.

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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 South Carolina Children's Foster Care Review Board is to provide external accountability for the foster care system and to advocate on behalf of children in foster care.

B.   Vision

South Carolina will make child well-being a top priority by assuring safe, permanent families for all children in foster care.

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 2009-2010

A.   Local foster care review board volunteers donated 16,403 hours in service to children and families involved with the foster care system.

B.   Local foster care review boards held 450 individual local review meetings and conducted 8,961 reviews for 5,424 children.

C.   Local foster care review boards established relationships and communicated with their local partners. Twenty-eight local review boards participated in 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. Fifteen local review boards facilitated the presentation of the 2008 – 2009 South Carolina Children's Foster Care Review Board Annual Report to their county legislative delegations. Twenty-two 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.   Twenty-seven 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.   Eighty-two children in foster care and reviewed by local review boards in 2009, were represented by Review Board legal staff at 98 court hearings across South Carolina. Review Board program staff also provided in-depth, post-review, supplemental advocacy on behalf of 1,251 children.

G.   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 2009, 34 photographers donated their time and talents to photograph 142 children at photo shoots. There were 126 public venues featuring children in exhibits. There were 133,452 unique visitors to the South Carolina Heart Gallery website that generated 1,447 inquiries from interested families.

3.   **Key Strategic Goals for Present and Future Years**

A.   Focus on core mission and streamline processes and procedures to work more efficiently and effectively with limited resources.

B.   Build and expand the capacity of local review boards to more fully meet their mission.

C.   Collaborate with state and national partners to improve the many systems that impact children in foster care.

4.   **Key Strategic Challenges**

A.   One of the biggest challenges that the Review Board faces is an ever-increasing number of children entering foster care. That workload, combined with significant staff reductions at the Department of Social Services, makes oversight even more critical to ensure children are not lost in the child welfare system. In order to meet this increased demand, the Review Board will focus on its core mission and work more efficiently at that core mission. In order to carry out the core mission, the Review Board will work diligently to recruit and retain qualified professional staff to meet the demands. The Review Board will also need to retain and secure appointments of qualified and dedicated volunteers in order to meet the state and federal mandate to review the cases of children in foster care. Division staff and volunteers are doing more work with less pay and support, so this will be a challenging year, as it is for all State agencies.

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 § 63-11-700, et seq.

A.   The mission of the South Carolina Children's Foster Care Review Board is to provide external accountability for the foster care system and to advocate on behalf of children in foster care.

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 4,816 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, ten Review Board Coordinators, two Attorneys, a Research and Planning Administrator, a Business Manager, one Heart Gallery Program Coordinator, one Heart Gallery Program Assistant, 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-profit 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, Richland County CASA, 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
Children's Foster Care Review Board (FCRB)	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. There are 42 local foster care review boards currently serving 4,816 children.	• 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.	• SC Dept of Social Services • SC Foster Parent Association • Volunteer Guardian ad Litem Program • Richland County CASA • 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 • The Children's Trust of SC

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   __0__ Unclassified   _____Contract

  _____ Temporary _____ Temporary (Grant) _1_____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 § 63-11-700, 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 Division, 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 two contracts 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.2.5-1 and III.2.5-2, and in Section III.7 tables III.7.1-1 and III.7.2-1.

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 specified timeframes.

I. Review Board member and staff exit interviews.

9. Children's Foster Care Review Board Organizational Chart

Children's Foster Care Review Board
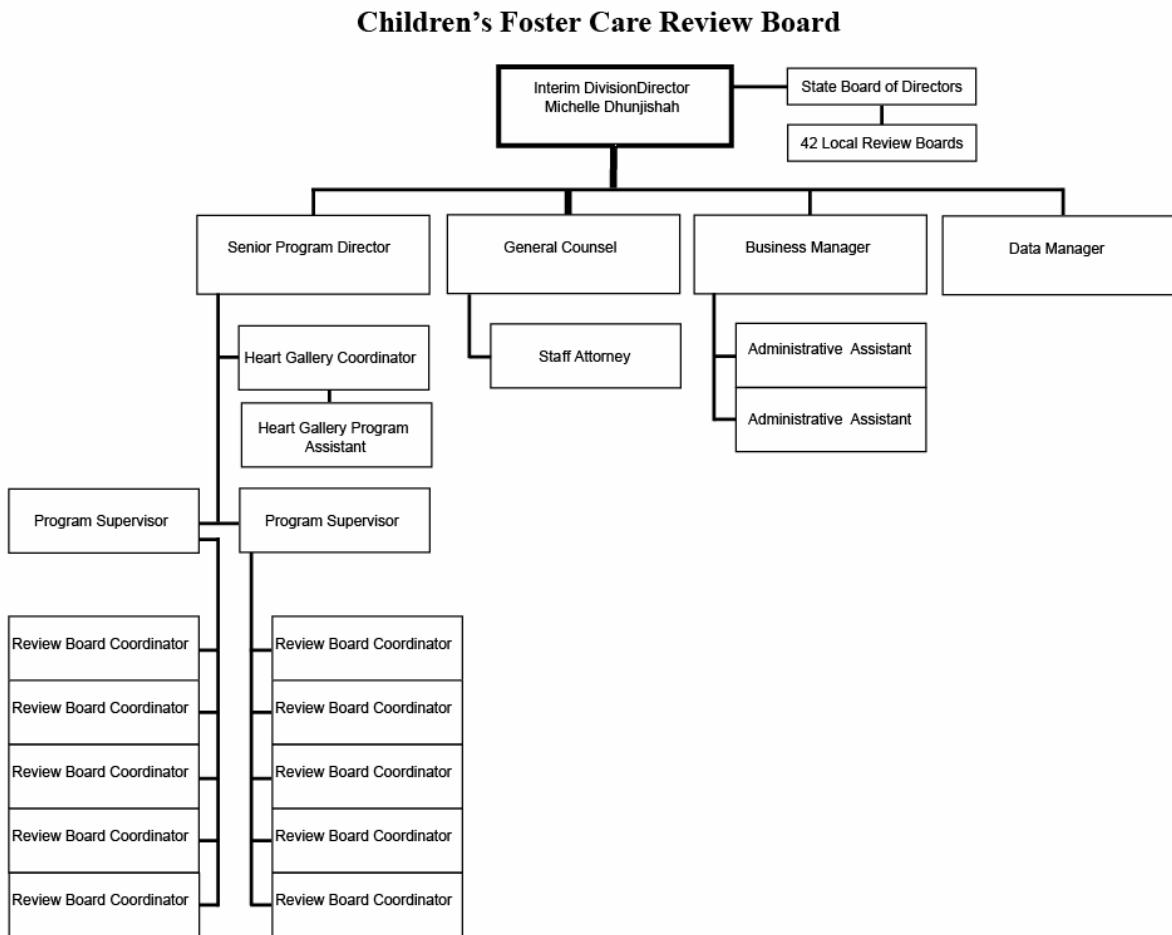
10. Expenditures and Appropriations Chart

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$850,486	$406,199	$808,515	$369,080	$842,048	$301,903
Other Operating	$259,461	$97,374	$148,069	$ 72,223	$ 217,766	$ 49,924
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$262,755	$126,984	$249,591	$ 98,221	$294,717	$105,666
Non-recurring	$	$	$	$	$	$
Special Items (Pass-Through P&A)	$	$	$	$	$0.00	$0.00
Actual Review Board Budget Total	**$1,372,702**	**$630,557**	**$1,206,175**	**$539,524**	**$1,354,531**	**$457,493**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures	
Supplemental Bills	$	$	
Capital Reserve Funds	$	$	
Bonds	$	$	

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 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	$630,557	State	$539,524	Table II.4.1-1 Table III.2.1.1 Table III.2.5.1 Table III.2.5.2 Table III.7.1.1 Table III.7.2.1
		Federal		Federal		
		Other	$742,145	Other	$666,651	
		Total		Total		
			$1,372,702		$1,206,175	

Section III – Elements of Malcolm Baldrige Criteria

1.   Senior Leadership, Governance, and Social Responsibility

1.1   How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders as appropriate 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 Division director.

(7)   Ethical and professional behavior modeled by all staff at all times is required.

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

All staff and volunteer training is focused on the Division 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.

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?

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 (when funding permits) 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.

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

(1) By statute, the Children's Foster Care Review Board has a State Board of Directors to provide oversight for the programmatic duties and responsibilities of the Division.

(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.

1.5 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.7.1.

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/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.

1.7 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 Division. 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 Division's monthly staff meeting including planning activities, arranging for speakers and facilitating the meeting.

1.8 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.

1.9 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 relevant 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.

1.10 How do senior leaders 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 almost 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. Due to budget constraints, the Division has not held a Professional Development Day in a

few years; however, Division staff have presented these awards to the recipients in their local communities which seems to have been just as meaningful to the volunteers.

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.

Interim Division Director/
General Counsel: Steering committee member and National Initiative Workgroup Chairperson, National Foster Care Review Coalition; Casey Family Programs Advisory Committee; Children Come First Advisory Board; Chairperson, Children's Committee of the SC Bar Association; Member, Bench/Bar Committee; Associate Member, National Council of Juvenile and Family Court Judges; Member, South Carolina Women Lawyers Association; and Member, Military Law Section, South Carolina Bar Association.

Program Director: Chairperson, Permanency Planning Subcommittee, SC Child Welfare Advisory Committee; Division Representative, SC Program Oversight Committee; and Liaison, SC Foster Parent Association.

Program
Supervisor: Certified Auditor, US Children's Bureau, Children and Family Services Review; Certified Public Manager; Chairperson, Subcommittee on Foster Parent Recruitment and Retention, Child Welfare Advisory Committee; and Member, South Carolina Citizen's Review Panel - Midlands Region.

Program
Supervisor: SC Crime Victim's Council, Children's Legislative Committee; and Grant Reviewer, SC Children's Trust Fund.

SC Heart Gallery
Program Coordinator: Founder/Coordinator, South Carolina Heart Gallery; Regional Director, South Atlantic Region, Heart Gallery of America; and Member, Subcommittee on Foster Parent Recruitment and Retention, Child Welfare Advisory Committee.

Research/Planning
Administrator: Member, SC Child Welfare Advisory Committee; Member, United Methodist Women Executive Committee; President, Agape Circle; Member, Children's Ministry Team; and Member, Safe Sanctuary Leadership Team, Mt. Horeb United Methodist Church.

Business Manager: OEPP Business Financial Liaison; OEPP Personnel Liaison; Children's Foster Care Review Board SCEIS Travel Coordinator; and Member, Architectural Review Board, Hunter's Mill Subdivision Homeowner's Association.

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; d) workforce capabilities and needs; e) organizational continuity in emergencies; and f) your ability to execute the strategic plan.

The Division has procedures in place that ensure adequate and effective strategic planning. Through weekly executive staff meetings and monthly leadership and full staff meetings, the Division discusses issues, analyzes existing processes, and implements new or revised processes for delivery of services. On an annual basis, staff meet individually with the Division Director for goal setting and planning. These goal setting and planning meetings are the foundation for an annual leadership staff retreat where the Division's strengths, weaknesses, opportunities, and threats are evaluated. The annual leadership staff retreat then serves as a basis for an annual full staff retreat where a full strategic plan is developed and the execution of the strategic plan is discussed. The Division consults with the State Board of Directors throughout the strategic planning process and gets the State Board's approval prior to executing the strategic plan.

The Data and Research manager is responsible for addressing shifts in technology and developing plans to address those shifts.   Annual EPMS and direct supervisory meetings address workforce capabilities and needs. The Governor's Office of Executive Policy and Programs has developed a comprehensive continuity plan for the Division in case of organizational emergencies. The strategic plan is shared with staff, the State Board of Directors, and local review board members. The strategic plan is available to the public upon request.

The Strategic Planning Chart summarizes goals and objectives of the current Strategic Plan.

Key Strategic Goal	Supported Division Strategic Planning Goal/Objective	Related FY 09-10 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Focus on core mission and streamline processes and procedures to work more efficiently and effectively with limited resources.	1. Reduced time spent processing reviews and increased advocacy efforts for children in each caseload. 2. Efficient, effective, and timely program and legal advocacy to promote permanency for children reviewed by local review	1.1 Complete and fully implement the Division's database to minimize data entry requirements and maximize data accuracy. 1.2 Train all staff on data entry processes and report generation for creating an automated recommendation for the family court.	Table II.4.1-1 Table III.2.5-1 Table III.2.5-2 Table III.2.5.3 Table III.7.1-1 Table III.7.2-1

Key Strategic Goal	Supported Division Strategic Planning Goal/Objective	Related FY 09-10 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
	boards. 3. Review Board program staff have a fully developed advocacy focus using an interdisciplinary team approach.	1.3 Revise the automated recommendation form to decrease the amount of edits for distribution. 2.1 Standardize the *OneNotes* case note data collection format and process. 2.2 Establish process for legal referrals and advocacy that maximize resources and positive outcomes for children. 3.1 Methods for meeting this goal will be finalized in FY 2010-2011.	
2. Build and expand the capacity of local review boards to more fully meet their mission.	1. Enhanced 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. 2. Developed comprehensive Community Contribution Plans for each local review board. 3. Enhanced relationships between the State Board of Directors and local review boards.	1.1 Attend all offered review board trainings, quarterly community stakeholders meetings and State DSS meetings. 1.2 Reports are available and issues are discussed monthly at the state level. 2.1 Revised Community Contribution Plan distributed in early 2010. 2.2 Review Board Coordinators will routinely review with local review boards during business meetings. 3.1 Routine telephone contact and/or personal attendance at local review board meetings. 3.2 Participation in Chairpersons and Regional Training activities (suspended 2009 due to budget constraints).	

Key Strategic Goal	Supported Division Strategic Planning Goal/Objective	Related FY 09-10 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
3. Collaborate with state and national partners to improve the many systems that impact children in foster care.	1. Participated in second round of Child and Family Services Review ("CFSR"). 2. Worked with other administrators of State Review Programs to improve the systems that impact children in foster care.	1.1 Local review board members and executive staff provided feedback through stakeholder interviews. 1.2 Review board staff conducted CFSR reviews and attended the post-review meeting. 2.1 The Review Board Division Director is a standing member of the National Foster Care Review Coalition.	Table II.4.1-1 Table III.2.5-1 Table III.2.5-2 Table III.2.5-3 Table III.7.1-1 Table III.7.2-1

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

The strategic objectives focus on ways for the Division to operate more efficiently and more effectively, which is imperative during times of limited resources and limited staff. The Division is focused on working smarter; however, with the ever-increasing number of children in foster care, staff is being asked to do more with less. These strategic objectives are designed to help the Division overcome the strategic challenges.

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?

Executive and leadership staff, with guidance from the State Board of Directors, regularly review the progress of action plans. The Review Board leadership team has an annual retreat to evaluate objectives, goals, and outcomes from the previous year and to prepare planning ideas for the coming year.

2.4 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)   Statewide and county-specific demographic data and performance measures provided as requested
(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 (suspended 2008 and 2009)
(11)   Annual Review Board member professional development (suspended 2008 and 2009)
(12)   Regional Trainings for local review boards (suspended 2008 and 2009)
(13)   E-blast list-serve information dissemination for Review Board members
(14)   Monthly Review Board business meetings
(15)   Staff retreat

2.5   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.2.5-1 Key Performance Measures for developing a focus on core mission and streamline processes and procedures to work more efficiently and effectively with limited resources.

Reference 1.1 Complete and fully implement the Division's database to minimize data entry requirements and maximize data accuracy.	Completed FY 2009-2010
Reference 1.2 Train all staff on data entry processes and report generation for creating an automated recommendation for the family court.	Completed FY 2009-2010
Reference 1.3 Revise the automated recommendation form to decrease the amount of edits for distribution.	Completed FY 2009-2010
Reference 2.1 Standardize the *OneNotes* case note data collection format and process.	Completed FY 2009-2010
Reference 2.2 Establish process for legal referrals and advocacy that maximize resources and positive outcomes for children.	Completed FY 2009-2010
Reference 3.1 Methods for meeting this goal will be finalized in FY 2010-2011.	Pending FY 2010-2011

Table III.2.5-2 Key Performance Measures for building and expanding the capacity of local review boards to more fully meet their mission.

Reference 1.1 Attend all offered review board trainings, quarterly community stakeholders meetings and State DSS meetings.	Review Board members and Review Board staff attended 112 training and stakeholder meetings in FY 2009-2010.
Reference 1.2 Reports are available and issues are discussed monthly at the state level.	67 reports submitted.
Reference 2.1 Revised Community Contribution Plan distributed in early 2010.	41 Community Contribution Plans were distributed.
Reference 2.2 Review Board Coordinators will routinely review with local review boards during business meetings.	Completed plans will be collected and compiled in

	early FY 2011.
Reference 3.1 Routine telephone contact and/or personal attendance at local review board meetings.	State Board members reported quarterly on their activities with local review boards.
Reference 3.2 Participation in Chairpersons and Regional Training activities.	Chairpersons and Regional Training were suspended in FY 2009-2010 due to budget constraints.

Table III.2.5-3 Key Performance Measures for collaborating with state and national partners to improve the many systems that impact children in foster care.

Reference 1.1 Local review board members and executive staff provided feedback through stakeholder interviews.	Completed FY 2009-2010
Reference 1.2 Review board staff conducted CFSR reviews and attended the post-review meeting.	Completed FY 2009-2010
Reference 2.1 The Review Board Division Director is a standing member of the National Foster Care Review Coalition.	Completed FY 2009-2010 Continue

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

Executive staff and senior leadership routinely monitor and evaluate progress being made on the strategic plan.   Annual goal setting meets are held with each staff member to ensure full participation in the planning process. At annual retreats the strategic plan is reviewed and updated as necessary.

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 available to the public upon request.

3.   Customer Focus

3.1   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 Division Director

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

By reviewing and analyzing foster care review data, training evaluations, annual surveys, self-assessments, and active participation and collaboration with child welfare partners, the Division keeps its listening and learning methods current.

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?

Customers may contact the Review Board by telephone, email, website, letter, walking into the office, attending the review of a child's case (if invited), and attending a quarterly State Board of Directors meeting which are open to the public. More specifically, 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 Division even has a general email address that a customer can utilize if he or she is not sure who to contact at the Division. The Review Board office is open and accessible during regular business hours and the front desk is equipped to handle and direct all calls coming into the main telephone line.

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

Review Board stakeholder surveys are conducted every other year. Pending availability of funding, the next stakeholder survey will be completed for FY 10-11.

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

Local Review Board members, the State Board of Directors, staff, and the leadership team review both statewide and county-specific data and findings. 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.

3.6   How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer and stakeholder groups?
The Division builds positive relationships with customers and stakeholders through quarterly community stakeholder meetings, educational professional development trainings and other relevant child welfare trainings, participation in legislative delegation meetings, community presentations, and personal involvement with public

and non-pofit 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

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?

Federal and State Statutes, State Regulations, Division Policy and Procedures dictate the operations, processes, and systems to measure performance.

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?

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.

4.3   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 reports 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.

4.4   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 relative to statutes and policies on 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.

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

Routine and ad hoc reports are generated on review data to check 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.

4.6   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.

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 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

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?

Regional caseloads are routinely checked to ensure 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 ensure 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. Additionally, management assist program staff in reaching their full potential through increased responsibility and encouragement to become active participants in a variety of stakeholder groups that meet to assess and implement systems change.

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

The Division communicates by a combination of face-to-face meetings, internal professional development, planning retreats, and emails. All levels of staff participate

in monthly staff meetings in which information relative to the mission and operation of the Review Board is 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 Division, all new staff is required to observe local review board meetings and attend Division orientation training for new board members within the first 3 months of their hire date.

5.3   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 Division 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.

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

Due to reduced funding levels, the Review Board is operating beyond capacity needs with the current workforce. 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.

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 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.

5.6   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 Division 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 an 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.

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?

Supervisory staff routinely observe their staff members on the job to assess their competence and level of professionalism. EPMS planning meetings and rating discussions are conducted according to 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.

5.8   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.

5.9   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 South Carolina's children in foster care.

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

The Division evaluates effectiveness of the workforce and leader training through measuring overall Division outcomes, Review Board member surveys, stakeholder surveys, open communication and working with the State Board of Directors to assess success on strategic planning goals.

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

The management team motivates the workforce through support, quality supervision and training, and through an expectation of high standards of performance in each segment of the office.

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?

In addition to annual EPMS evaluation meetings and planning sessions, each staff member meets annually with the Division 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.

5.13   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. However, opportunities for career advancement within the Division are limited because it is a small Division.

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

The Division has 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

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)   Review Board Meetings
(2)   State Board of Directors
(3)   Distribution of Review Board Recommendations
(4)   System of accountability provided by third party, citizen review

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 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.

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?**

This is covered in Section III.1.

6.4 **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.

6.5 **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.

6.6 **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 South Carolina.

(2) Through these reviews staff and volunteers 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.

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

The Division determines the resources needed 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 Division to achieve its statutory mission.

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 mission of the Children's Foster Care Review Board is to provide external accountability for the foster care system and to advocate on behalf of children in foster care. Program Measures for the past eight years are in Table III.7.1-1. 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 reviewed 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 2009, the number of Areas of Concern identified increased by 6%. The length of time children spend in foster care and the number of placements has decreased since 2002. 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 at or above 20%.

The stated goals for FY 2009-2010 address the commitment to core mission while building and expanding the capacity of local review boards and the State Board. Specifically, the Division will focus on streamlining processes and procedures enabling staff to work more efficiently and effectively with allocated resources. The focus on core mission will improve and expand our focus on advocacy and permanence for children in foster care in South Carolina. Tables III.2.5-1, III.2.5-2, and III.2.5.3 (Section III.2: Strategic Planning) outline performance measures that will be used to evaluate progress in these areas.

Table III.7.1-1   Foster Care Review Program Measures

Measure	2002	2003	2004	2005	2006	2007	2008	2009
Number of Reviews Completed	8,305	8,443	8,232	8,317	8,464	8,981	9,068	8,961
Number of Children Reviewed	4,856	4,800	4,810	4,853	4,976	5,347	5,384	5,424
Number of Review Board Meetings	434	431	440	431	436	464	465	450
Number of Coordinators	8.10	8.00	8.00	8.00	10.00	10.00	10.00	9.0
Number of Volunteer Hours	9,668	10,031	10,155	10,574	13,115	16,474	15,082	16,403
Children Reviewed per Meeting	19.1	19.6	18.7	19	19	19	19	20
Reviews per Coordinator	1,025	1,055	1,029	1,040	846	898	907	996
Volunteer Hours per Review	1.16	1.19	1.23	1.27	1.54	1.83	1.66	1.83
Volunteer Hours per Child	1.99	2.09	2.11	2.17	2.63	3.08	2.80	3.0
Number of Areas of Concern Cited	8,543	10,415	10,270	9,816	11,168	14,864	16,649	17,669
Areas of Concern per Review	1.03	1.23	1.25	1.18	1.32	1.65	1.83	1.83
Reviews Continued or Rescheduled	225	386	321	316	410	393	418	339
Reviews Not Held Timely	177	205	228	229	333	409	339	303
Average Number of Years in Care	4.5	4.1	3.8	3.6	3.3	2.7	2.8	2.6
Average Number of Placements	5.4	4.9	4.3	4.0	2.8	3.3	3.2	3.0
Percent Achieving Permanency	64%	58%	59%	59%	63%	60%	62%	65%
Percent Recidivism	18%	27%	24%	22%	24%	26%	25%	23%
Percent of Reviews Completed Timely	97.9%	97.6%	97.8%	97.7%	97%	97%	96%	97%
Number of Advocacy Referrals Initiated *	1,254	562	727	821	436	1,641	1,228	1,251
Number of Training Sessions Conducted for Staff & Review Board Members	8	7	9	11	10	13	7	11
Number of Presentations Given for Outside Entities	18	12	13	23	28	17	57	29

* The Administrative Contract for Medicaid Review with Health and Human Services was discontinued in July 2007.

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?**

Table III.7.2-1 Foster Care Review Customer Satisfaction Results outlines indicators for measuring customer satisfaction.

In October 2009, the Foster Care Review Board surveyed local review board members. Review Board members were asked to agree or disagree with twenty-eight statements, using a scale of 1 to 3 where **ALWAYS** scored a 3, and **NEVER** scored a 1. One hundred and seventy-eight surveys were mailed, with a response rate of 66%. The average score for all statements was 2.64 (out of a possible 3); 73% of all scores were "always", 18% of all scores were "sometimes", and less than 10% of all scores were "never" or "don't know".

The State Board of Directors completes a self-assessment annually, using 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 2009. These results will be reviewed by the State Board at a planning meeting in 2010.

Table III.7.2-1 **Foster Care Review Customer Satisfaction Results: FY 09-10 (July 2009-June 2010)**

Performance Measures	Number	Dates
Timely Preparation of Annual Report (statistical research and recommendations)	500 copies distributed	09/01/2009
Review Board Member Survey	118 responses	11/01/2009
Review Board Member Exit Interviews	14 completed	throughout year
Evaluation: New Board Member and Staff Orientation	37 responses	08/24/09; 11/09/09; 01/25/10; 03/15/10; 06/14/10
Evaluation: Regional Training for Board Members	N/A	not held due to budget reductions
Evaluation: Foster Care Review Board Conference	N/A	not held due to budget reductions
Stakeholder Survey (bi-annual)	N/A	pending for FY 10-11

7.3 **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.

7.4 **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 Division Director's annual goal setting meetings with staff, as well as during staff retreats, travel with staff, review observations and strategic planning sessions.

7.5 **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 Division 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.

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

Tables III.7.1-1 and III.7.2-1 include indicators for regular/legal compliance performance levels. Percent of reviews held timely has remained extremely high at 97% or better for the past nine years. The Annual Report has been completed timely. Volunteers and staff have been adequately training according to policy.

Section I. Executive Summary

1. **Organization's stated purpose, mission, vision and values**

   The purpose of the Guardian ad Litem Program is to give abused and neglected children a voice in family court and a comforting presence throughout a traumatic time. The GAL Program supports volunteers whose focus is the child's best interests rather than the interests of any other person or group. The Program is charged with providing the family court, through its court-appointed volunteers, recommendations, based on the guardian ad litem's independent investigation of the case.

   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.

   Vision:

   The vision of the Guardian ad Litem Program is to provide a well-trained, competent, appropriately motivated volunteer child advocate for every child in South Carolina involved in a DSS family court case of abuse or neglect. Further, the vision is to have an effective staff to support the volunteers in their efforts by providing supervision, on-going training and assistance in each case. The GAL Program envisions being an integral part of the child welfare system's improvement.

   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 Program values reuniting families when it is safe for the child to return home and moving a child to adoption when the biological home cannot be made safe and stable. We value treating children of every race, ethnicity, ability and religion with equal care and concern.

2. **Major Achievements for FY 2009-2010**
   - Trained 709 new volunteers, an increase of 33% over 2008-2009.
   - Served 8,831 children in 2009-2010, 847 more children than in 2008-2009.
   - Served 87% of all children in child abuse and neglect cases in 45 counties.
   - Provided guardians ad litem to 77% of new child abuse and neglect cases, a 9% increase over 2008-2009.
   - Provided Guardian ad Litem training at the Charleston School of Law for 35 law students as part of the students' pro bono service requirement, for the fourth year of collaboration with the law school.

- Was awarded a $55,000 National Court Appointed Special Advocates (NCASAA) state grant and a $45,000 NCASAA expansion grant for 2010-2011 to fund two Public Relations/Trainers to increase volunteer recruitment.
- Was awarded a $48,650 Victims of Crime Act (VOCA) grant for the purchase of equipment to promote volunteer recruitment and county operations.
- Partnered with DSS to obtain a three-year Fostering Connections federal grant. The GAL portion of the grant is $49,276 for each of 3 years to support one of two Family Connections Coordinators. GAL volunteer hours are the state match for supporting DSS's $750,000 grant.

3. **Key Strategic Goals for Present and Future Years**
   A. Recruit sufficient volunteers to support 100% CAN case appointment without staff cases.
   B. Increase GAL volunteer retention through case management support and continuing education that improves volunteer performance and enhances positive outcomes for children.
   C. Implement a new data system that collects and tracks child outcomes.
   D. Increase Family Connections services in the two pilot regions.

4. **Key Strategic Challenges**
   - To find the caliber of persons to volunteers who can act as child advocates in complex investigations of child abuse and neglect cases. Volunteers act as both an officer of the court who provides a report with recommendations for the best interests of the child and as a presence in the child's life where compassion and knowledge of how to interact well with children is the key skill.
   - To find the resources to fund adequate staff to support the volunteers and ensure adequate supervision of its growing number of child advocates. A 19% net growth in volunteers was accompanied by a 6% growth in staff. To continue its mission, the GAL Program requires staff members who have strong skills in many areas. Every creative means possible to expand program capacity, such as supervising field placements for graduate interns and applying for additional grants for personnel, is being implemented.

5. **How the accountability report is used to improve organizational performance**
   Preparation of the accountability report is an opportunity to compare the year's fiscal and operational performance to prior years. The report suggests new measures to examine performance.

   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. Individual annual County Plans give a map of goals for performance progress, focuses attention on our recruitment efforts and highlights where efforts are creating positive results. Calculating the numbers for the accountability report guides efforts for the next year.

Section II. Organization Profile
1. **Main products and/or services and the primary methods by which these are delivered.**
   - Recruit, train and supervise volunteer child advocates for DSS abuse and neglect cases
   - Four state PR staff members develop materials and conduct events to recruit

- The PR staff and Regional Supervisors create individual county plans to set goals for recruitment and child advocacy in each county
- PR, Regional and County staff members conduct 30-hour pre-service trainings for volunteers
- Local Coordinators in 37 county offices supervise the volunteers
- Over 2,000 volunteers advocate for abused and neglected children in family court
- The volunteers visit the children wherever the children are residing
- The volunteers investigate all aspects of the case and interview pertinent parties
- The volunteers, with staff support, write a report to the Court for each hearing

2. **Key customer groups and their key requirements/expectations**
- Abused and neglected children involved in DSS family court cases expect the volunteers to speak for their best interest alone.
- The family court bench requires the volunteers to make recommendations after an independent investigation of the facts and to know the child sufficiently to speak for his or her best interest.
- Defendants in the family court cases can expect the volunteer to speak for the child, while being an independent voice.
- The volunteers are a customer group of the Guardian ad Litem Program. The volunteers can expect to receive thirty hours of pre-service training that prepares them for their appointed role, continuing education that keeps them informed on child welfare and advocacy topics, and support both in and out of court as child advocates.

3. **Key stakeholder groups**
- The Department of Social Services
- The Children's Law Center
- Foster Care Review Board
- The Department of Juvenile Justice
- Court Administration
- The Foster Parents' Association

4. **Key suppliers and partners**
- The National Court Appointed Special Advocate Association (NCASAA)
- The Victims of Crime Act (VOCA) division of the Office of Juvenile Justice
- The Human Resources Departments of OEPP
- The Finance& Accounting Department of OEPP
- The Information Technology Department of OEPP
- The Children Law Center, USC
- Local 501C3 Friends Groups organized to support county GAL offices

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, casework 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
37 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, GAL state and county staff
37 County Guardian ad Litem Program offices	Assistance to volunteers to produce written reports for each 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 37 county locations. See county office locations below.

The State Office address is: 1205 Pendleton Street, Suite 330, 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)

<u>25</u> Classified   <u>1</u> Unclassified   <u>0</u> Contract

<u>0</u> Temporary   <u>1</u> Temporary (Grant)   <u>59</u> Temporary (time-limited)
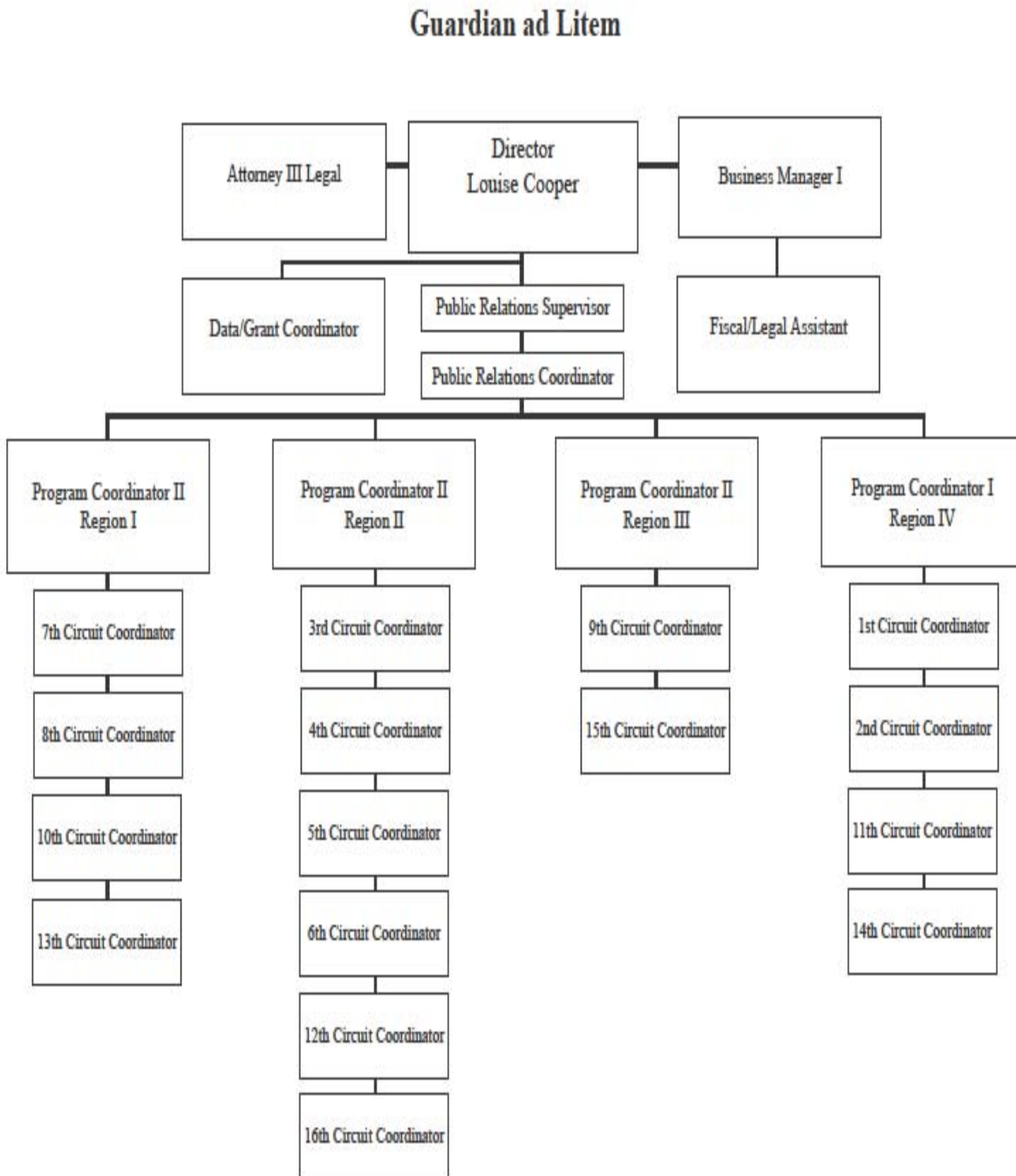
7.   Regulatory environment under which your organization operates
- The South Carolina Children's Code at 63-7-1620 mandates a guardian ad litem for every child involved in a case of abuse or neglect proceeding in family court.
- The Guardian ad Litem Program operates under the statutory guidelines of Family Code Title 63, Chapter 11 at 63-11-500 through 63-11-570, which creates the South Carolina Guardian ad Litem Program and defines the role, rights and responsibilities of the volunteers that the Program recruits, trains and supervises.
- Volunteer guardians ad litem are subject to the rules of family court and the provisions of the court appointment order. Volunteer GAL court reports 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 is in compliance with its requirements for national child advocacy best practices.
- The GAL Program policies and procedures guide staff and volunteer actions. Volunteers sign a confidentiality agreement at the beginning of each case and a volunteer agreement before service in any case.
- The Guardian ad Litem program is subject to OEPP regulations for human resources and financial operations.

8.   Performance improvement systems
- Monthly COMET database report includes for each county and the state:
  o Number of cases received
  o Number of cases accepted
  o Number of children served
  o Number of volunteers assigned
  o Number of volunteers trained
  o Number of volunteers who resigned
  o Number of court hearings attended
- A statewide report is aggregated from that information and sent to every office via email.
- 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
- The Public Relations team travels to individual counties and assists with direct implementation of recruitment plans.
- The case files audit measure for 2009-2010 includes the presence of 12 monitoring reports and complete volunteer screening files.
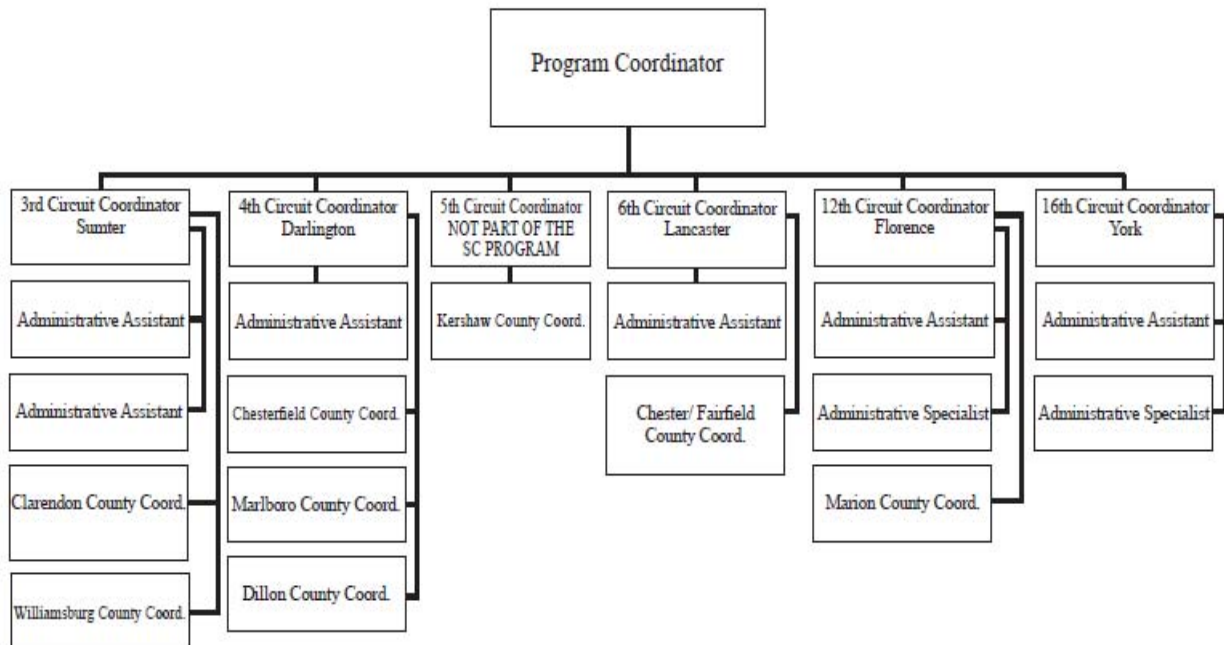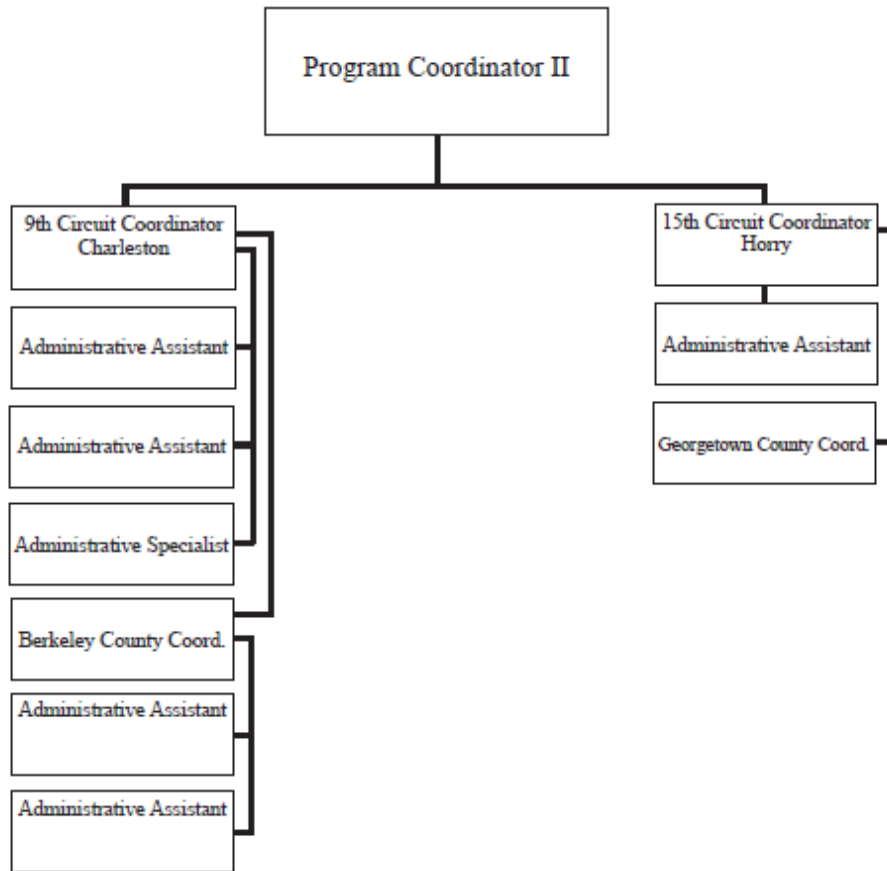
9.   Organizational chart

Guardian ad Litem
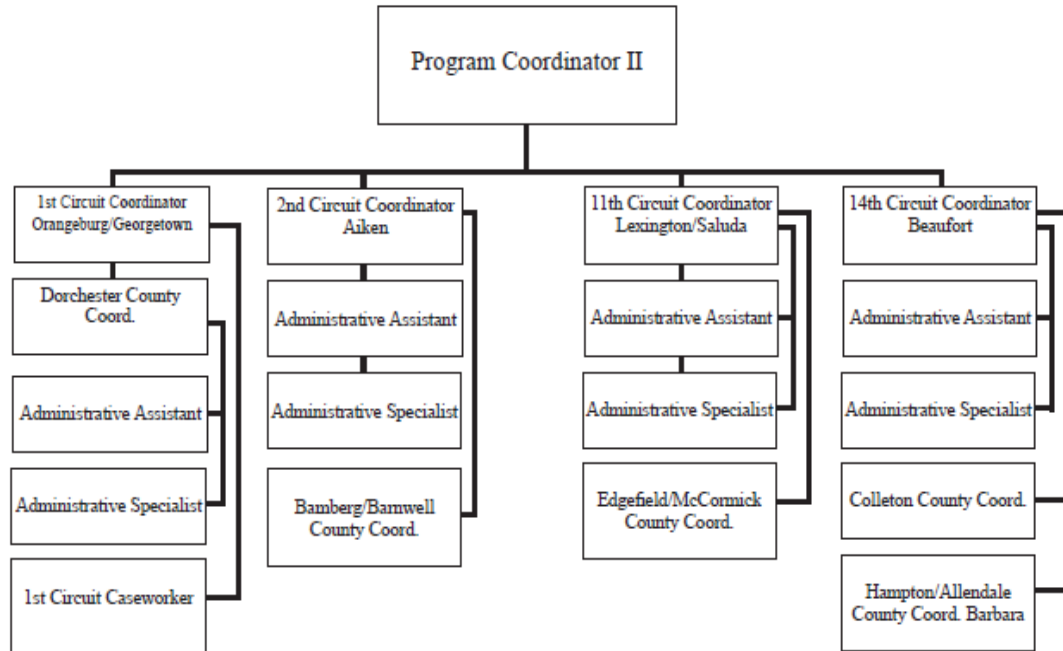
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│ Attorney III Legal│───│     Director     │───│Business Manager I│
│                  │   │   Louise Cooper  │   │                  │
└──────────────────┘   └──────────────────┘   └──────────────────┘
           ┌──────────────┴──────────────┐                 │
┌──────────────────────┐  ┌──────────────────────┐  ┌──────────────────────┐
│Data/Grant Coordinator│  │Public Relations Supervisor│ │Fiscal/Legal Assistant│
└──────────────────────┘  └──────────────────────┘  └──────────────────────┘
                          │Public Relations Coordinator│
                          └──────────────────────┘
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Program Coordinator II Region I	Program Coordinator II Region II	Program Coordinator II Region III	Program Coordinator I Region IV
7th Circuit Coordinator	3rd Circuit Coordinator	9th Circuit Coordinator	1st Circuit Coordinator
8th Circuit Coordinator	4th Circuit Coordinator	15th Circuit Coordinator	2nd Circuit Coordinator
10th Circuit Coordinator	5th Circuit Coordinator		11th Circuit Coordinator
13th Circuit Coordinator	6th Circuit Coordinator		14th Circuit Coordinator
	12th Circuit Coordinator		
	16th Circuit Coordinator		

Guardian ad Litem
Region I

Program Coordinator II

7th Circuit Coordinator
Spartanburg

Administrative Assistant

Administrative Specialist

Cherokee County Coord.

7th Circuit Caseworker

8th Circuit Coordinator
Greenwood/Abbeville

Administrative Specialist

8th Circuit Caseworker

Laurens County Coord.

Administrative Assistant

Newberry County Coord.

10th Circuit Coordinator
Anderson

Administrative Assistant

Administrative Specialist

Oconee County Coord.

Administrative Assistant

13th Circuit Coordinator
Greenville

Administrative Assistant

Administrative Assistant

Administrative Assistant

Administrative Assistant

Pickens County Coord.

Administrative Assistant

Administrative Assistant

Guardian ad Litem
Region II

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                          +------------------------+
                          |  Program Coordinator   |
                          +------------------------+
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3rd Circuit Coordinator Sumter	4th Circuit Coordinator Darlington	5th Circuit Coordinator NOT PART OF THE SC PROGRAM	6th Circuit Coordinator Lancaster	12th Circuit Coordinator Florence	16th Circuit Coordinator York
Administrative Assistant	Administrative Assistant	Kershaw County Coord.	Administrative Assistant	Administrative Assistant	Administrative Assistant
Administrative Assistant	Chesterfield County Coord.		Chester/ Fairfield County Coord.	Administrative Specialist	Administrative Specialist
Clarendon County Coord.	Marlboro County Coord.			Marion County Coord.	
Williamsburg County Coord.	Dillon County Coord.				

Guardian ad Litem
Region III

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                    │  Program Coordinator II  │
                    └─────────────────────────┘
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         ┌───────────────────────┴───────────────────────┐
┌─────────────────────────┐              ┌─────────────────────────┐
│  9th Circuit Coordinator │              │ 15th Circuit Coordinator │
│        Charleston        │              │          Horry           │
└─────────────────────────┘              └─────────────────────────┘
┌─────────────────────────┐              ┌─────────────────────────┐
│ Administrative Assistant │              │ Administrative Assistant │
└─────────────────────────┘              └─────────────────────────┘
┌─────────────────────────┐              ┌─────────────────────────┐
│ Administrative Assistant │              │ Georgetown County Coord. │
└─────────────────────────┘              └─────────────────────────┘
┌─────────────────────────┐
│ Administrative Specialist│
└─────────────────────────┘
┌─────────────────────────┐
│   Berkeley County Coord. │
└─────────────────────────┘
┌─────────────────────────┐
│ Administrative Assistant │
└─────────────────────────┘
┌─────────────────────────┐
│ Administrative Assistant │
└─────────────────────────┘
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Guardian ad Litem
Region IV

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                    ┌─────────────────────────┐
                    │  Program Coordinator II  │
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1st Circuit Coordinator Orangeburg/Georgetown	2nd Circuit Coordinator Aiken	11th Circuit Coordinator Lexington/Saluda	14th Circuit Coordinator Beaufort
Dorchester County Coord.	Administrative Assistant	Administrative Assistant	Administrative Assistant
Administrative Assistant	Administrative Specialist	Administrative Specialist	Administrative Specialist
Administrative Specialist	Bamberg/Barnwell County Coord.	Edgefield/McCormick County Coord.	Colleton County Coord.
1st Circuit Caseworker			Hampton/Allendale County Coord. Barbara

10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget **Categories**	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 2,312,961	$ 875,088	$2,488,082	$ 842,754	$ 2,551,837	$ 600,477
Other Operating	$ 1,184,310	$ 120,672	$1,226,983	$ 57,870	$ 1,014,958	$ 45,170
Special Items			$	$	$	$
Permanent Improvements			$	$	$	$
Case Services			$	$	$	$
Distributions to Subdivisions			$	$	$	$
Fringe Benefits	$ 711,904	$ 285,660	$ 726,659	$ 165,263	$ 606,789	$ 111,831
Non-recurring			$	$	$	$
Total	**$ 4,209,175**	**$1,281,420**	**$ 4,441,724**	**$1,065,887**	**$ 4,173,584**	**$ 757,478**

Other Expenditures

Sources of Funds	FY 08 – 09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 08-09 Budget Expenditures		FY 09-10 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	1,281,420	State	1,065,887	Table 7.1.1 Graph 7.1.2 Table 7.2.1 Graph 7.2.2 Graph 7.3.1
		Federal	32,245	Federal	35,274	
		Other	2,895,510	Other	3,340,563	
		Total	4,209,175	Total	4,441,724	
		% of budget: 0%		% of budget: 0%		
Below: List any programs not included above and show the remainder of expenditures by source of funds.						

*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

1.1   How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior.

Senior staff members include the State Director, the General Counsel, Regional Supervisors, and the Public Relations Supervisor who meet monthly to discuss national trends in child advocacy, examine the impact of the trends statewide, and set priorities for the state program and for individual county offices. An individual county plan is written for each county annually, setting a plan to recruit volunteers and improve advocacy. County staff participate in the production of the plan. A monthly report from the COMET database that indicates the success of the local offices is distributed to all staff to monitor performance. Frequent communications concerning goals and priorities occur via email, telephone, meetings and trainings. Performance expectations for individuals are clear. Copies of all job descriptions are distributed. EPMS evaluations are conducted annually.

Core organizational values that impact child advocacy are a part of the volunteer training that every employee of the SCGAL Program also attends. Values include placing the best interests of children first in all casework decisions. Senior leaders have face-to-face contact with county staff, which promotes the value of having a volunteer advocate for every child. The GAL Policy and Procedures Manual outlines best practice standards for child advocacy and volunteer supervision. The Human Resources policy of the Office of Executive Policy and Programs sets standards for employee relations.

Ethical issues of major concern for the Guardian ad Litem Program include face-to-face contact with children and investigating the facts of cases sufficiently to inform the Court with accurate information. Maintaining confidentiality in casework is critical. The importance of these concerns is stressed beginning in volunteer training and throughout written policy. Staffing cases is one major means of communicating the continuing duty to the ethical framework of child welfare work and all staff is involved in casework staffing. General Counsel also informs staff of decisions in state and federal cases that impact ethical considerations via written communications.

2. **How do senior leaders establish and promote focus on customers and other stakeholders?**
    The GAL Program focus is specifically limited to advocacy for abused and neglected children. The child-first focus 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.

3. **How does the organization address the current and potential impact on the public of its 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. An associated risk is training volunteers well for the complex task as court-appointed advocates. To combat that risk, the Program provides a free 30-hour course, conducts extensive pre-service interviews, and provides continuing education and on-going support. 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 five years. Training Program staff is also essential for quality outcomes in cases.

    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 members of 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 more productive futures.

4. **How do senior leaders maintain fiscal, legal and regulatory accountability?**
    Fiscal accountability is regulated through the OEPP Finance Office which processes all disbursements for the Program. The state office of the Guardian ad Litem Program prepares office leases, utilities payments for the 37 offices and other program-related expenditures such as travel reimbursement and equipment purchase for submission to Finance. The Program contracts with 44 attorneys throughout the state to represent the volunteers, per statute, in family court proceedings. The Program's General Counsel advises the program staff and contract attorneys on legal matters of general concern. Senior staff monitor performance to ensure that the program is in compliance with the law and court rules.

5. **What performance measures do senior leaders regularly review to inform them on needed actions?**
    Reviewed monthly:
    - Number of children served; number of cases accepted or not accepted
    - Number of volunteers trained
    - Number of current volunteers
    - Number of termination of parental rights (TPR) actions filed in cases for which a volunteer guardian ad litem has been appointed.
    - Number of volunteers who have resigned that month
    - Training dates by county for publication to the website

    The measures for each county are aggregated for the state monthly and at the end of the calendar and fiscal years. Performance in these categories gives an overall picture of the vitality of a county program. Success is measured by service to children.

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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?**
      Annual county plans provide benchmarks to measure success and receive employee feedback for senior leaders. Achievement of county performance measures are an indication of senior leadership skills. The Director's success is measured by an increasing number of children served with positive outcomes and an increasing volunteer pool. Operating within the Program's budget, while promoting the necessary growth to serve more children, is also an important success indicator for the Director and other senior staff. Organizational values in the GAL Program include focusing on the child first; senior staff model the orientation and promote it to county staff and volunteers.

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 and observation, are asked to identify strengths 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. In the hiring process, succession planning is a conscious motivator in selection of new employees.

8.   **How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?**
      County Coordinators are involved in the development of the objective measures of their goals. County staff identify particular county obstacles and opportunities. The public relations team assists county staff members with recruitment efforts while preserving county ownership of goals.

9.   **How do senior leaders create an environment for organizational and workforce learning?**
      The guardian ad litem staff comes together for staff meetings and learning opportunities. Senior staff meets with county staff through regional meetings and in individual county offices to improve staff competency. Senior leaders assist with volunteer training and conducts continuing education.

10.   **How do senior leaders 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 the staff email newsletter monthly. Employees are motivated by encouraging independent decision making, with supportive communications as needed. When an employee excels, supervisors send congratulations with copies to all in the supervisory chain.

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.**

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The South Carolina Guardian ad Litem Program is an active member of the National Court Appointed Special Advocate Association (NCASAA). In addition, GAL staff members serve in the following:

- The Bench/Bar Committee
- Children Come First
- The Children's Justice Act Task Force
- Fostering Connections Grant Partner (DSS, USC Center for Children and Family Studies, & the South Carolina Association of Children Homes and Family Services)
- Foster Parent Training Collaborative
- DSS Partner's Meetings
- South Carolina Immigrant Victims Network (SCIVN)
- The USC Masters of Social Work Intern Program
- The Charleston School of Law Pro Bono Service Program
- Foundations and 501C3 Friends Groups for individual county programs in 11 counties

Some 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 in cooperation with a local non-profit or church group that provides the goods.

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 organizations' strengths, weaknesses, opportunities and threats; b) financial, regulatory, societal and other potential risks; c) shifts in technology and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) your ability to execute the strategic plan.

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 Grant Administrator, State Director and Business Manager with contributions by the other senior leaders. The strategic plan addresses the strengths and weaknesses of the organizations by objectives measurements of improvement or maintenance of performance levels. Opportunities are identified and discussed with senior leaders as a planning group. Threats are minimized by adherence to best practices and strictly following statutory mandates.

Financial risks are addressed by on-going assessment of the budget in order to match case management needs to personnel. Personnel is approximately 75% of our budget and operational expenses are kept to a minimum to maximize the amount of budget that can be applied to staff for supervision of volunteers. Grant writing for specialized personnel functions is a routine part of strategic planning.

A Social Networking policy has been developed for staff and volunteers in recognition of the dangers to confidentiality created by the Internet. Not yet disseminated, the policy will mitigate the risks that come with social networking. The Program is purchasing webcams this year with VOCA grant funds to provide for remote staff meetings and training. To plan for workforce

needs, senior leaders evaluate the caseload trends and develop new job duties and positions as funds become available or talents emerge in existing staff.

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. The GAL Program participates in the Governor's Office State Emergency Response Team. The strategic plan can be accomplished through the data collection, data dissemination, County/Public Relations Plan implementation, and county and senior staff commitment to the Program's goals.

2.2   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:
- Finding individuals to volunteers who can act as child advocates in complex investigations of child abuse and neglect cases.
- Finding the resources to fund adequate staff to support the volunteers and ensure adequate supervision of its growing number of child advocates.

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. Objectives for more staff and more volunteers directly flow from that goal. Strategic goals for a public relations/training team provide tangible county assistance to meet recruitment goals and train volunteers well. Close monitoring of the funds available to the Program drives decisions about staff changes. Needs assessments are based on analysis of trends in caseload over several years and success of new programs piloted throughout the country. The need for numbers of volunteers is determined by the number of cases filed in court.

Chart III.2.2 Strategic Planning Chart for the Guardian ad Litem Program

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 09-10 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
Recruit sufficient volunteers to support 100% child abuse & neglect case appointment without staff cases.	Identify special emphasis counties and apply PR/T intensive services; Conduct frequent pre-service trainings.	Hire 2 grant-funded PR/T positions and convert 2 Circuit Case Worker positions to PR/T positions by 9/2010. Continue public relations efforts statewide to increase volunteer recruitment.	Table 7.1.1 Graph 7.1.2 Table 7.2.1 Graph 7.2.2
Increase volunteer retention through case management support & continuing education that improves volunteer performance and enhances positive outcomes for children.	Increase the number of Case Managers to support volunteers. Convert position to Continuing Education Manager to support intensive volunteer retention efforts and create volunteer excellence.	Begin continuing education emphasis, 9/2010. Hire and place Case Managers where necessary.	Table 7.4.2 Table 7.4.3
Implement a new data system that collects and tracks child outcomes.	Implement web-based Efforts to Outcome (ETO) database through a grant from NCASAA to track child outcomes more effectively	Awarded grant June 2010; Begin training key staff September 2010; train county staff October 2010; migrate current database October 2010	See narrative section 7.5
Increase Family Connections services in the 2 pilot regions.	Continue Family Connections grant project in 2 pilot regions for year 2 of the 3 year grant. Expand target ages in the 2nd year.	Assist youth in foster care with finding and building connections for transition out of the child welfare system. Business Mapping: 9/ 2010.	See narrative section 7.5

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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 actions plans?**
Monthly assessment of COMET data and feedback from county and PR/T staff provide the necessary information to determine the Program's progress towards 100% case acceptance with no staff cases. The Public Relations team identifies what efforts have been made towards recruitment goals and reports the findings. Caseload data indicate where county programs are understaffed and guide how positions may be relocated.

An existing position was converted to Continuing Education Manager in order to bring focus to retention of volunteers through additional contact with each other and specialized training to help them accomplish their case goals. Emphasis on continuing education is expected to create more autonomous volunteers and more positive case outcomes for children. Retention tracking will be the success measure for the objective.

The ETO database system is on schedule for implementation. Social Solutions, the parent company, is supporting the change-over and a grant is funding the new system.

To implement the Family Connections pilot project requires collaboration with DSS. The project has been agreed upon in two pilot areas, with procedures set and goals identified. Casey Family Services will provide assistance with a business mapping process for both GAL and DSS personnel.

2.4. **How do you communicate and deploy your strategic objectives, action plans, and related performance measures?**
Information is communicated via email, newsletters, state and regional staff meetings and face-to-face meetings. Performance goals are a part of County/Public Relations Plan development.

2.5. **How do you measure progress on your action plans?**
The COMET database produces monthly statistical reports of key performance numbers for volunteer recruitment. An annual report is done on the calendar and fiscal year for bi-annual reports. County Plans are rewritten each year and are reviewed for public relations goal achievement on an on-going basis. The Family Connections grant activities are evaluated by the USC Center for Children and Family Studies, as well as by GAL Program staff. The goals for continuing education are being set for tracking in an Excel spreadsheet so that retention of volunteers can be measured.

2.6. **How do you evaluate and improve your strategic planning process?**
The strategic planning process is improved by constant measurement of goals and re-evaluation of the action plans. Regular evaluation of goals being achieved in particular counties and how the process worked in those locations is a key to improve strategic planning for the future.

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 can be accessed on the Guardian ad Litem website at
http://www.oepp.sc.gov/gal .

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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 of the Guardian ad Litem Program include the persons and agencies involved in family court cases of abuse or neglect of a child filed in family court by the Department of Social Services. These include:

Customer	Requirements
Child victims of abuse or neglect	Requirements include 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.
Volunteers guardians ad litem	Requirements of the GAL Program for the volunteers are determined by enacting legislation 63-11-500 through 63-11-570 for training and supervision.
The family court bench	Requirements are that the GAL Program provide a pool of appropriate volunteer guardians ad litem for appointment by the bench, upon whom the bench may rely to bring relevant case information to all hearings.
The Department of Social Services	Requirements include that the GAL Program communicate professionally with the agency. The Program provides volunteer child advocates who can collaborate with DSS and share information.
Defendants in the family court abuse and neglect cases	Requirements are for an advocate for their child(ren) 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.

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

Staff members attend continuing education classes and conferences that hone case management skills. Regional and statewide staff meetings present opportunities for staff members to learn about new initiatives. Our affiliation with the National Court Appointed Special Advocates Association (NCASAA) provides us with information on trends in the field including case management and case outcomes. A close association with the USC Children's Law Center gives the Program access to excellent on-going training. Growing electronic learning opportunities assist with more responsive training methods.

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?

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.

The family court bench has direct access to GAL staff and volunteers. Should they have a complaint, they may contact the Program at any level that they believe 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 monthly at the state level and quarterly at the county level. The access mechanisms are staffings about case matters, cross trainings, phone calls and email. Complaints will follow the chain of command from the county office, to the regional staff, and finally to the state office, as 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.

3.4.   **How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?**
Complaints are made at both the county and state level. All complaints are investigated to determine if the process for the case was consistent with best practices of advocacy. Complaints are reviewed by senior staff for potential policy changes or staff remediation requirements.

3.5.   **How do you use information and feedback from customers/stakeholders to keep services and programs relevant and provide for continuous improvement?**
Volunteers inform program staff if they are receiving adequate support at the close of each case when a case closure form is completed. The family court bench gives valuable feedback both formally and informally, as does court administration through advisory council decisions and court orders. Judges 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. Complaints from defendants make us aware of any type of deficiency in particular cases. We directly address the concerns with the assigned volunteer.

3.6.   **How do you build positive relationships with customers and stakeholders to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder groups?**
To build a positive relationship with our children, volunteers are consistent in seeing them, talking with them in an age-appropriate manner, and asking what they want the judge to know. The GAL Program recruitment campaign for FY 2009-2010, called *Success Stories,* included interviews with former foster children about their relationship with their volunteer guardians ad litem. The interviews gave valuable information about what our children found important to them in their advocates.

To build a positive relationship with the family court bench, volunteers are present for court with a report that is fact-based and pertinent to the needs of the child. To build a positive relationship with DSS and other child welfare agencies, the GAL Program asks its staff and volunteers to be professional even in the midst of disagreements. The Program values collaboration and expects that volunteers and staff will focus on the best interest of children in all interactions.

Building a positive relationship with Defendants is not impossible. The GAL Program values treating all individuals with respect. In a situation where a volunteer cannot recommend that a child return home, defendants are 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 improve, defendants often feel very positive about the volunteer guardian ad litem.

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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 performance, including progress relative to strategic objectives and action plans?

The Guardian ad Litem Program utilizes a data 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. Measures are chosen that indicate the ability of the program to meet the needs of abused and neglected children for advocacy.

Guardian ad Litem Program performance measures:
- the number of children served;
- the number of cases served;
- the number of volunteers trained and resigned;
- the number of cases rejected;
- the number of termination of parental rights (TPR) cases filed;
- the number of volunteer hours of service.

Guardian ad Litem Program operational measures:
- staff ratio to volunteers
- number of court hearings attended per county

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?

The number of children who enter the child welfare system because of abuse or neglect dictates the parameter for measurement. Measures from the COMET database tell us if the Program is meeting its core mission of providing volunteer advocates. The Family Connections project resulted from analysis of the population of older children aging out of the foster care system without being adopted.

4.3. What are your key measures, how do you review them, and how do you keep them current with organizational service needs and directions?

The following key measures are reviewed monthly and annually by county and state:
- Number of new cases
- Number of children in new cases
- Number of cases closed
- Number of children in closed cases
- Number of cases turned back
- Number of children in turn back cases
- Number of staff members assigned cases
- Number of all cases served
- Number of all children served
- Number of volunteers trained
- Number of volunteers resigned
- Number of volunteer service hours

- Number of all volunteers

4.4. **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. Innovation derives from analyzing the data and recognizing that new activities will be required for solutions for children in the child welfare system.

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

New staff members are trained on the use of the database in a specialized day-long class. The Grants Administrator monitors data input by counties randomly and at month's end. The new database, ETO, is web based and can be monitored in real time. Data integrity depends on the county staff; however, the ability to view it as it is inputted will improve accuracy and availability.

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

County Plans were implemented to quantify performance goals for improvement. Public relations goals were added to give concrete steps for consistent recruitment efforts. 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 biannually creates rotating performance reviews and allows a county to focus on correction to its operations on a manageable level.

4.7. **How do you collect, transfer and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?**

The Guardian ad Litem Program Policies and Procedures Manual gives program-specific guidance that is updated as necessary and disseminated to staff. 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.

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?**

The state office of the Guardian ad Litem Program is responsible for all business matters, including office leases, contracts for attorneys, payment of operational expenses, ordering supplies, and budget production and monitoring. The state office coordinates standardization of

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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.

Guardian ad Litem staff members need to exhibit flexibility, creativity, and diverse skills to be proficient case managers. They must exhibit cultural sensitivity, perform data collection and extrapolation, write well, teach well, and assist volunteers with preparation for court hearings. As specific talents are recognized among staff, those gifts are utilized for the whole of the circuit or region. Talent identification has resulted in promotion to positions such as the Public Relations Supervisor and the Grants Administrator.

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. Volunteers have assisted with training, acted as speakers for recruitment purposes, designed and implemented a study on court continuances, and performed clerical duties.

5.2. **How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.**
Joint Coordinator/Contract Attorney continuing education gives attorneys and Coordinators a chance to share knowledge from across the state. Attorneys received CLEs and Coordinators received required continuing education. Email, websites, volunteer newsletters, staff newsletters, and conferences attendance contribute to knowledge sharing. A new position, the Continuing Education Manager, should strengthen and systemize efforts to expand and share knowledge.

5.3. **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 within the 20% range, which is above average for child welfare organizations. Barriers to retention include the content of the work. Child abuse and neglect can be difficult to deal with on a day-to-day basis. As is true of most child welfare organizations, GAL Program pay rates are low for the level of responsibility required.

5.4. **How do you assess your workforce capabilities and capacity needs, including skills, competencies, and staffing levels?**
The most significant workforce need of the Guardian ad Litem Program is its volunteer force. The number of new volunteers trained is tracked monthly. To build skills, volunteers are trained pre-service for 30 hours and receive 12 hours of free annual continuing education. The Program tracks 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. Staff needs are tied to the need for volunteers. More volunteers require more staff support. There are currently 2,000+ volunteers supervised by a staff of 90 persons. Contract attorneys provide representation for the volunteers and become experts in family court law. Observations by county staff and volunteers indicate that better outcomes are achieved in court for children with county contract attorneys.

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?**
County Coordinators evaluate volunteer performance after every case closure. Volunteers voice their thoughts about the support they receive on an on-going basis. The EPMS (employee performance management system) of OEPP gives every employee a chance to review annually his or her performance. Employees participate in the review and may 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.

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?**
Staff and volunteers attend the 30-hour pre-service training as a baseline of child advocacy knowledge. Specialized trainings—such as the Case Manager training, data input training, and supervisory training—provide concrete skill competencies that are necessary for accomplishment of goals. Continuing education provides the opportunity for growth in knowledge and skills. Ethical practices in child advocacy are taught to staff and volunteers in the volunteer pre-service training. Consultation with contract attorneys provides on-going ethical support.

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?**
The OEPP Human Resources office conducts new employee orientation and supervisor's training. Orientation to Guardian ad Litem policy and procedure is conducted by the immediate supervisor on-site, except database training, which is held in Columbia in group training classes. 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.

5.8. **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.

5.9. **How does employee training contribute to the achievement of your action plans?**
Better trained staff members are more autonomous in conducting advocacy for children in their county and can case manage a greater number of volunteers and cases. Knowledgeable employees recruit and produce well-trained volunteers, who feel secure in performing their

duties. Volunteer pre-service training, when well done, is the first and best volunteer retention tool. Volunteers who understand their duties perform better and remain active volunteers longer.

5.10. **How do you evaluate the effectiveness of your workforce and leader training and development systems?**
County and circuit offices that conduct business in a manner consistent with child advocacy best practices and GAL Program policy are confirmed 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.

5.11. **How do you motivate your workforce to develop and utilize their full potential?**
Supervisors make opportunities available to employees that tap into observed skills 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 through comprehensive training. 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, helping them identifying the interviews that need to be completed before court, and providing oversight on all court reports before the reports go to the court.

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?**
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. Senior staff review and discuss retention of employees and volunteers. Both are considered important measures of stability for the Program. Grievances and dissatisfaction voiced by either staff or volunteers are taken seriously and investigated. We use the information to examine policy in order to satisfy complaints, making changes as necessary.

5.13. **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 90 employees, 44 contract attorneys, and over 2,000 volunteers. Staff positions are dispersed to 36 locations. Each location has a small number of paid positions, with 16 offices having one staff person. Promotion from within is favored. New employees are selected as if they were going to be moving into the next highest position. Senior staff identify county staff who may move into leadership positions as retirement or vacancies occur. Contract attorneys develop expertise that is invaluable, but there are no tiers for promotion among our attorney positions. All information about Program management is shared broadly and captured electronically for the occasion when management changes.

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5.14. **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 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.

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?**
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. Guardian ad Litem Program core competencies are:
- Creating a volunteer workforce capable of quality advocacy for abused and neglected children;
- Supporting and supervising the volunteer guardians ad litem; and
- Bringing real world knowledge of children's needs to the child welfare system.

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?**
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 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 (60-11-530). 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. The Guardian ad Litem Program ensures 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 data. 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.

6.3. **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 37 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 by having one business center for the statewide program. One office coordinates operational expenses and manages them. 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.

6.4. **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. The state office performs data collection and analysis for program management planning. Daily performance of casework and meeting best practices for volunteer supervision ensure that volunteers meet their statutory requirements.

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

Child advocacy by the volunteers and through staff supervision is evaluated via county audits, County Plan production, post-case evaluations, and database monitoring. The state office evaluates the business support process for efficiency and creates workflow procedures where weaknesses are revealed by failures to have supplies, equipment, or contracts delivered to county offices on time. Accounting for funds and controlling costs in done with support of the OEPP Finance office. Improved technology, more efficient supply delivery, and effective training to staff members improves delivery of our key product—child advocacy.

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

The database upgrade is an example of evaluating and improving a key support process for better performance. The new system will better measure outcomes for children. The public relations team expansion through new grants has expanded recruitment. IT equipment (purchased by grants) that allows for communication with remote offices saves travel funds and improves staff training. Procedural changes to the county audit process give objective measures for case tracking.

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

Budget needs are calculated by analyzing caseload data and the trends on caseload growth in each county. Distribution of staff is compared among counties per caseload and volunteer count. Best practices standards of staff-to-volunteer ratio are used in the analysis. The largest portion of the GAL budget is for personnel; operational expenses are tracked and kept as low as

possible so that there are funds for staff to assist volunteers. 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.

Section III – Elements of Malcolm Baldrige
Category 7: Results
7.1.   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?

Table 7.1.1 Increase in Service by the Guardian ad Litem Program

Year	Children Appointed a Volunteer GAL	Cases served by the Guardian ad Litem Program
07-08	7080	3749
08-09	7984	4192
09-10	8831	4554

Table 7.1.1 shows the number of children and cases served by the South Carolina Guardian ad Litem Program for the past three fiscal years, a key measure of mission performance.

Graph 7.1.2 History of Guardian ad Litem Program Service:
Children served; Cases appointed; & Cases turned down
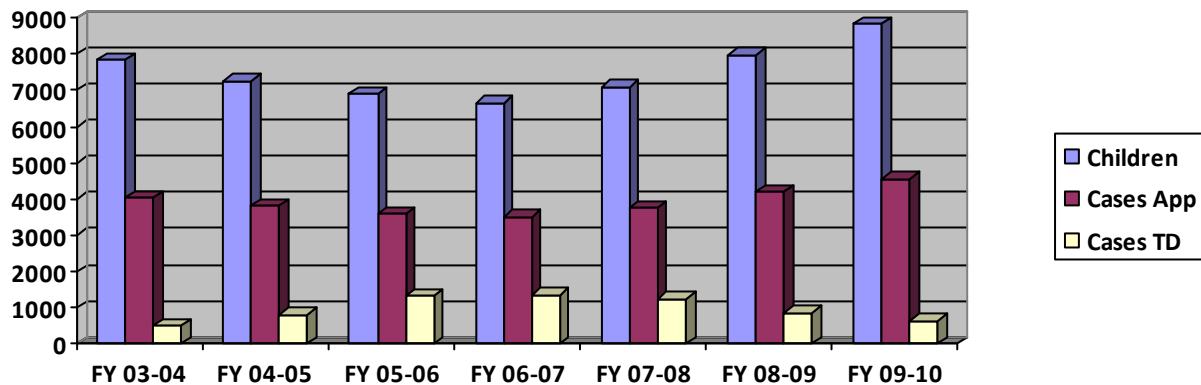
Graph 7.1.2 tracks the Program's progress for seven years. The Program not only served 638 more cases this year, but turned back 241 fewer cases in FY 2009-20010 than in the previous year. Service to more children is our key measure of mission.

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. The South Carolina Program is accepting 100% of cases in 2010-2011 by order of the Supreme Court of South Carolina.

7.2. 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 child advocacy programs in the United States and one of a handful of statewide programs. Our structure allows for more efficient use of funds because operational expenses are consolidated. South Carolina has served 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 FY 2009-2010, the GAL Program served 86% of all cases.

Customer dissatisfaction can be measured by the number of new cases not assigned a volunteer guardian ad litem. The percentage for new case appointment is shown in Table 7.2.1. Graph 7.2.2 shows a steady increase in the number of new cases accepted. FY 2010-2011 will bring 100% acceptance because of the order by the South Carolina Supreme Court.

Table 7.2.1 Guardian ad Litem Program Percentage of New Cases Assigned a Volunteer

FY 06-07	FY 07-08	FY 08-09	FY 09-10
52%	58%	69%	77%

Graph 7.2.2 New Cases Accepted for Appointment History
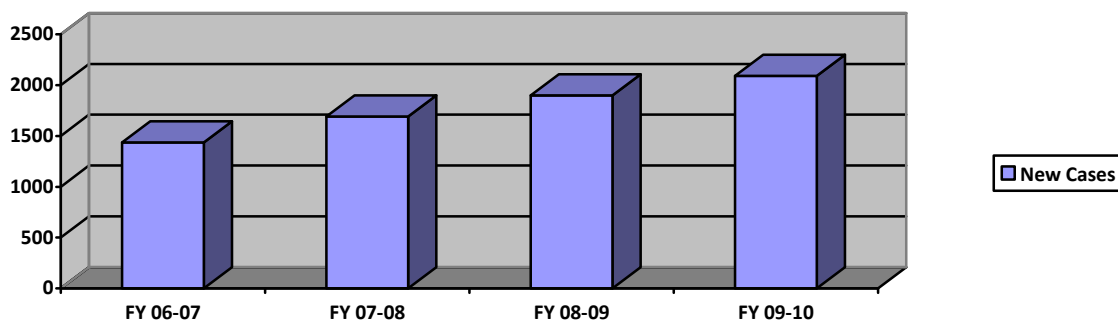
7.3. What are your performance levels for the key measures of financial performance, including measures of cost containment, as appropriate?

Operating expenses for the Guardian ad Litem Program include, but are not limited to, rent, telephone, utilities, travel, insurance and equipment contracts. For FY 2009-2010, The GAL Program paid $195,925 and the average rent for a remote office was $441.00

Graph 7.3-1 charts operating expenses for the most recent four years for the 37 remote offices and one state office.
FY 06-07 $824,669
FY 07-08 $644,957—includes an $85,000 VOCA grant for new computers.
FY 08-09 $798,613—includes a $32,245 VOCA grant for equipment.
FY 09-10 $692,336—includes a $36,581 VOCA grant for IT equipment.
This calculates to an average annual expense of $18,712 per office.

Graph 7.3.1 Operating Expenses for the Guardian ad Litem Program
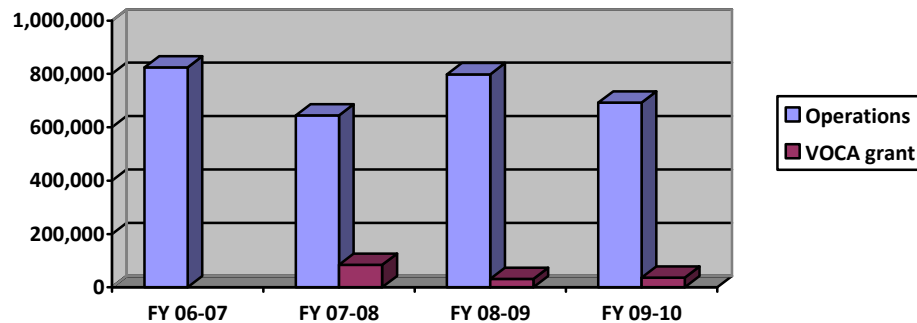
7.4.   **What are your performance levels and trends for your key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?**
The Guardian ad Litem Program measures employee retention as an important indicator of job satisfaction. The GAL Program has an excellent and improving retention rate for paid staff.

Tables 7.4.2 and 7.4.3 give the number of employees and volunteers in the last four fiscal years and the number whom the SCGAL Program retained. The Guardian ad Litem Program experienced an 88% staff retention rate for FY 2009-2010. Volunteer retention is important to the ability of the GAL Program to achieve the mission and was 85% in FY 2009-2010.

Table 7.4.2 Guardian ad Litem Staff Retention

Fiscal Year	Total Employees	Employees Retained	Retention Percentage
FY 06-07	77	65	84%
FY 07-08	83	74	89%
FY 08-09	84	72	86%
FY 09-10	90	79	88%

Table 7.4.3 Guardian ad Litem Volunteer Retention

Fiscal Year	Total Volunteers	Volunteers Resigned	Volunteers Retained	Percentage Retained
FY 06-07	1919	326	1593	83%
FY 07-08	1937	245	1692	88%
FY 08-09	2220	267	1953	88%
FY 09-10	2868	455	2413	85%

7.5. **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 new data system that will begin in 2010-2011 will improve the Program's ability to measure outcomes for children such as the length of time in foster care and number of services provided for the children and family members. The GAL program conducted an analysis of the frequencies of continuances in 2009-2010 by county and by reason for the continuance. These results were presented to the Bench/Bar committee and the Children's Justice Act Task Force. Another phase of the project will begin when the ETO database is operational.

The Guardian ad Litem Program, in partnership with the Department of Social Services, was awarded a grant to seek connections for youth who will age out of foster care without a family to which they can go. The Family Connections grant, requires two staff persons who will conduct the searches, collaborate with the volunteer GAL and DSS case worker, and ensure that the child is connected with safe and appropriate persons. These could be family or fictive kin, but they must be willing to sustain a relationship with the youth after foster care ends. The grant is in the first of three years. The program can be sustained after the grant term and enlarged beyond the pilot areas by engaging volunteers who choose to be trained for this work.

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

The Guardian ad Litem Program has met compliance with the National Court Appointed Special Advocates Association (NCASAA) self-assessment for the state and each county. The assessment covered best practices for casework and child advocacy, human resources, financial practices, staff and volunteer diversity planning, emergency response planning, and strategic planning. Volunteer guardians ad litem and staff are required to operate subject to Court Rules. Laws governing confidentiality in child welfare cases govern Program work. The program is undergoing another cycle of self-assessment at this time. Community support is evident in the growing number of volunteers, the existence of more than a dozen non-profits across the state that support county GAL Programs, and supportive media coverage.

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Office of Economic Opportunity

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Section I - Executive Summary

1. Organization stated purpose, mission, vision and values:

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 four federally funded programs and one other-funded program. Programs operate on different program years and applicants must be income eligible. Household income guidelines are based upon the federally issued Poverty Income Guidelines that are updated and published annually.

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.

2. Major Achievements for FY 2009-2010

- The OEO continued to refine the statewide web-based centralized client intake system for community action agency sub-grantees.
- The OEO, with DOE ARRA funds, and in partnership with the SC Technical College System, implemented six Energy Efficiency Technical School training centers.
- The OEO Community Services Block Grant shop received a no exception audit from the Office of Community Services.
- The OEO Weatherization and Weatherization ARRA grant shops weatherized a record 790 regular weatherization houses and 969 ARRA houses for a total of 1,759 residences weatherized.

3. 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 ensure that all sub-grantees are performing grant activities in accordance with federal and state regulations.

4. Key Strategic Challenges

The OEO must continue to support sub-grantees with efficient and meaningful monitoring, training support for new programs and programmatic guidance.

- Working with sub-grantees to encourage and implement best practices among South Carolina's community action network.
- Ensuring sub-grantee compliance with state and federal regulations while promoting a culture of cooperation through advocacy, training, and technical assistance.

5. How the accountability report is used to improve organizational performance
  The data collected and analyzed provide 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
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

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 sub-grantees, and training and technical assistance. The OEO administers four major grants with three of these grants receiving additional funds as part of the American Recovery and Recovery Act (ARRA). The ARRA grants are administered as separate grants but serve the same persons and functions except in the case of HPRP which focuses on homelessness prevention rather than emergency shelter. The ARRA grants are: CSBG ARRA, WAP ARRA, and HPRP.

- Community Services Block Grant (CSBG) & (CSBG ARRA)—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) & (WAP ARRA)—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.
- Homeless Prevention and Rapid Re-housing Program (HPRP)—US Department of Housing and Urban Development; funds for client assistance to prevent homelessness (ARRA)

CSBG, LIHEAP, and WAP services are delivered via a network of 14 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.

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

Key Services	Key Customers/Stakeholders	Key Partners
Community Services	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, SCDSS, 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, Columbia, SC 29201
   - Sub-grantees are located in all 46 counties of the state

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

18 Classified	0 Unclassified	0 Contract
0 Temporary	13 Temporary (Grant)	0 Temporary

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 sub-grantees.

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 sub-grantees 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 sub-grantee 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

Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	740,008		1,054,476		670,669	
Other Operating	487,586		2,424,146		379,315	
Special Items	0					
Permanent Improvements						
Case Services	0					
Distributions to Subdivisions	55,885,346		97,205,727		32,057,250	
Fringe Benefits	208,061		242,998		217,967	
Non-recurring						
Total	**$57,321,001**		**100,957,347**		**$33,325,201**	

Other Expenditures

Sources of Funds	FY 07-08 Actual Expenditures	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$	$
Capital Reserve Funds	$	$	$
Bonds	$	$	$

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11. Major Program Area Chart

Office of Economic Opportunity*	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 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, and ESGP)	State	0	State	0	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	56,445,867	Federal	100,864,959	
		Other	875,134	Other	92,388	
		Total	57,321,001	Total	100,957,347	
		% of budget:		% of budget:		

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 throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior?**
   Short and long term direction and priorities are set through regular staff meetings. Performance expectations are set in planning stages for employees; State Plans, grant agreements, and technical assistance memoranda are used to identify performance expectations for sub-grantees. Organizational values are promoted 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.

2. **How do senior leaders establish and promote a focus on customers and other stakeholders?**
   OEO staff members receive regular customer-oriented trainings, to include workshops on changing federal regulations to assist sub-grantees with compliance, train-the-trainer, and through the exploration of other states' best practices. Senior staff lead by example in placing emphasis on being responsive to constituents and sub-grantees.

3. **How does the organization address the current and potential impact on the public of its programs, services, facilities and operations, including associated risks?**
   Sets of data—including demographics and goals and outcomes achieved—are 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.

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 filing system holding all required programmatic reports, work plans, budgets, monitoring, and audit documentation. Sub-grantees are required to submit monthly Financial Status Reports on the use and expenditure of funds. Disbursements are processed based on a percentage-expended formula to ensure compliance with the federal Cash Management Act.

5. **What performance measures do senior leaders regularly review to inform them on needed actions?**
   - Timely and accurate expenditure and disbursement of funds according to the Federal Cash Management Act
   - Number of low-income people achieving self-sufficiency on a variety of scales
   - Number of low-income people whose emergency situations are alleviated
   - Number of homeless persons and people at risk for homeless whose immediate and long-term needs are addressed
   - Number of homes weatherized

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?**
   Employees are encouraged to determine a minimum of one objective as to how they can best improve work procedures for each evaluation period. 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 sub-grantees.

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 federal training dollars to increase employee knowledge and help them develop into future organizational leaders. Staff who attend trainings must train staff who are unable to attend. In addition, the OEO attempts to promote from within to encourage retention and continued growth of organizational knowledge.

8. **How do senior leaders create an environment for performance improvement and the accomplishment of strategies objectives?**
   The OEO work environment provides staff with direct control over their own work processes with an approval system for work output. The approval system ensures internal controls through a routing system that impacts each division.

9. **How do senior leaders create an environment for organizational and workforce learning?**
   The Results Oriented Management and Accountability (ROMA) system employed by the OEO is based on continuous improvement through goal setting, achievement, and evaluation. This allows for ongoing organizational and workforce learning.

10. **How do senior leaders 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 empowered by increasing independence and decision-making, as appropriate as capabilities are demonstrated. Employees are rewarded through individual recognition and during staff meetings. Sub-grantees are motivated and rewarded through an annual awards program recognizing achievement and best practices.

11. How do senior leaders 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. In addition, the OEO staff serves on the following:

- National Association for State Community Services Programs (NASCSP)
- Interagency Council on Homelessness
- State Emergency Response Team
- SCE&G Energy Advisory Council

In addition, the OEO donates all old technology equipment to community action agencies and emergency shelters to support their operating activities. Involvement is based on support for anti-poverty initiatives.

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 and customer preferences;
d. workforce capabilities and needs;
e. organizational continuity in emergencies;
f. your ability to execute the strategic plan.

Managers 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 managers' meetings, and feedback from sub-grantees.

Chart III. 2.2   Strategic Planning Chart for the Office of Economic Opportunity

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 09-10 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To make South Carolina a benchmark state in the field of community action.	Implement ARRA grant expansions on a schedule planned for full state benefit.	Assist CAAs to meet or exceed # of houses weatherized with DOE ARRA funds & clients served by HHS CSBG funds; Ensure use of HUD HPRP funds.	Tables 7.1.1 & 7.1.2 Graph 7.1.3 Chart 7.1.4
To ensure all OEO performance activities are completed according to set deadlines	Continue and expand a statewide central intake system that tracks performance on a real time basis.	Assist all CAAs to fully implement the database system by the end of FY 2011 for central intake of client information. Work with The Benefits Bank, the Office of Rural Health and the State Library System for greater central intake capacity.	Tables 7.1.1 & 7.1.2 & Graph 7.1.3 are made possible by the data system
To ensure that sub-grantees perform grant activities in accordance with federal and state regulations	Provide appropriate WX training to all CAA employees through 7 EETCs.	Funded and outfitted 7 EETCs for WX training. Implement client call system for complaints.	See narrative 7.1 and 7.2

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

Strategic objectives are designed to allow challenges to be overcome by providing tangible assistance to sub-grantees so that they may successfully administer the federal grants funds to the clients. The OEO provides tools, training, and regulation to ensure successful grant implementation.

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 collaboration with the SC Community Action Network, which ensures 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 accomplish office objectives.

4. **How do you communicate and deploy your strategic objectives, action plans, and related performance measures?**
   Objectives/action plans/performance measures are communicated through meetings with Senior Grant Managers, staff meetings, EPMS, written correspondence to sub-grantees, and meetings with sub-grantee leadership through the SC Association of Community Action Partnerships.

5. **How do you measure progress on your action plans?**
   Progress is measured internally through monthly statistical reports on numbers of clients served through specific grants. Community action agency sub-grantee progress is measured through monthly financial status and program status reports, quarterly ROMA reports, and an annual Information Systems Report.

6. **How do you evaluate and improve your strategic planning process?**
   The strategic planning process is evaluated through suggestions of Senior Grant Managers, other staff members, and observation of the effectiveness of processes. These are incorporated in the creation of future goals.

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: www.oepp.sc.gov/oeo.

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
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 sub-grantee expenditures and program activities.
Sub-grantees: 14 community action agencies/ 30 Homeless Shelters/ 19 HPRP organizations	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.

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 national associations. Sub-grantee 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. **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 14 local community action agencies and 30 emergency shelter organizations. The OEO website links service locations by grant program and provides links to other service provider sites. Clients denied service can request a hearing. Complaints are tracked at the state office to determine areas of concern.

4. **How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?**
   Dissatisfaction is assessed based on complaints/requests for hearings received. The information is passed to the agency against which the complaint is lodged and solutions are tracked.

5. **How do you use information and feedback from customers/stakeholders to keep services and programs relevant and provide for continuous improvement?**
   Information garnered through polls and public hearings is incorporated in final drafts of state plans and used to offer appropriate training and technical assistance. Feedback from monitoring visits is used to draft training modules for two annual statewide training events.

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

Positive relationships with customers and stakeholders are developed through an inclusive decision-making process for designing and implementing state plans for the various programs funded.

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?

OEO revenue and expenditure schedules are prepared monthly for review by the Director. Sub-grantees 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 sub-grantee level based on their needs assessment and approved by the OEO.

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.

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

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 best practices from across the country via the web.

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

The SC ROMA/FACS Pro software system utilized by all SC community action agencies ensures the accuracy, security, and availability of data. Data input takes place at the sub-grantee level but

the software is web-based and accessible by the OEO for ongoing data monitoring. 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.

6. **How do you translate organizational performance review findings into priorities for continuous improvement?**
Sub-grantees develop corrective action plans in response to limitations and/or findings indicated in the monitoring process. The OEO addresses these needs when identifying overall network training needs.

7. **How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify, share and implement best practices, as appropriate?**
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 members are encouraged to conduct and participate in trainings with other agencies and states to share best practices.

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 organization's objectives, strategies, and action plans; and 2) promote cooperation**, **initiative, empowerment, teamwork, innovation and your organizational culture?**
The staff is divided into grant specific divisions, in addition to the fiscal, audit, and in-house technology divisions. Staff work products are routed through a Grant Manager, as well as through audit, fiscal, and the director to ensure fiscal and programmatic cooperation in the administration of federal funds. Grant Managers are encouraged to develop leadership skills through grant division operations, with director oversight. Grant Mangers are also encouraged to discuss and help define the OEO mission and its accomplishment through a team approach. The staff is encouraged to participate in trainings designed to increase agency knowledge.

2. **How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.**
Senior staff members meet regularly to discuss program initiatives and goals that cross grant divisions. Skills and best practices among community action agencies are shared via annual training events. All grant divisions share fiscal, audit, and information technologies practices in OEO. Uniformity of those practices make for a common language between grant divisions.

3. **How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter.**
New employees are recruited and hired via the state human resource system.

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

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Office of Economic Opportunity   2009-2010 Accountability Report

Capability is assessed through the EPMS process, direct observation, and evaluation of performance on specific tasks. Employees receive regular feedback between formal evaluations. Capacity is continually assessed based on the workload generated by increased grant awards and the need for increased sub-grantee monitoring. Federal mandates for accountability are part of the assessment for capacity needs.

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. Sub-grantee training needs are assessed through the monitoring process. Subsequent improvements in sub-grantee 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.

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 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. To obtain this standard, they are allowed the opportunity to make decisions and supervise their grant divisions with support of the director. The program's mission and goals are shared with managers, who in turn help to refine them. Ethical practices are set by leadership and modeled.

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?**
Training needs are identified through manager assessment of employee performance and skills. All supervisors are required to participate in supervisory skills training. New employee orientation is administered by the OEPP Human Resources office.

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.

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.

10. **How do you evaluate the effectiveness of your workforce and leader training and development systems?**
The effectiveness of training is based how effectively employees are able to perform their jobs autonomously and accurately. Leaders are evaluated by the effectiveness of their team. Successful job performance and technical knowledge are evident in the work process.

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.

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?
Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. Employees leaving the OEO are interviewed in order to determine why they are leaving. There have been no grievances.

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. Employees identified as exhibiting leadership skills are encouraged with enhanced duties in order to prepare for eventual promotion.

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. The OEO participates in the EMD system as part of the Office of the Governor for emergency preparedness.

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?
Core competencies include ability to understand and follow grant guidelines, federal regulations, and OMB Circulars.

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?
- 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)

3. How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into design and delivery?
Communication between grant division managers, and internal promotion are encouraged to ensure retention of organizational knowledge through staff changes. New technology is assessed and incorporated via OEO's IT staff trainings with OEO and sub-grantee employees. Changing grant requirements are conveyed from the federal funding source to the state; the state then conveys to sub-grantees via technical assistance memoranda. State procurement guidelines are followed by the

OEO and sub-grantee procurement guidelines are modeled after the state guidelines to ensure costs are competitive.

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.

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 and feedback from sub-grantees and the federal government. Internally, grant managers conduct on-going assessments of service delivery to sub-grantees by employees through the EPMS process.

6. **What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?**
    Key processes include the development of state plans, evaluation of sub-grantee 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. OEO has a fiscal division, an audit division, and a technology division that supports each grant program.

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 sub-grantees. 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

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 primary mission of the OEO is to aid sub-grantees in administering programs that help move individuals out of poverty and into self-sufficiency. The OEO monitors sub-grantees for grant compliance and provides training and technical assistance. All agencies were monitored at least once during the 2009 program year. The OEO operates under the Results Oriented Management and Accountability (ROMA) system. Key measures include the numbers of clients served in each grant program through the agencies that receive funds and numbers of persons employed because of the grants. The OEO in cooperation with the South Carolina technical School system funded and developed six Energy Efficiency Training Centers in the first 6 months of the 2009 fiscal year and will open a 7th school in 2010. The number of individuals trained through these schools is another key measure of performance.

    Sub-grantees reported outcomes related to mission accomplishment as follows:

Table 7.1.1 CSBG Assistance

Goal: Low-income People Become More Self-Sufficient	PY2007	PY2008	PY2009
Unemployed and obtained a job	1,406	1,556	2,237
Obtained pre-employment skills/competencies and received training program certificate or diploma	942	1,331	2,065
Obtained safe and affordable housing in support of family stability needed to gain or retain employment	1,118	1,070	615

Goal: The conditions in which low-income people live are improved through increased affordable essential services	PY2007	PY2008	PY2009
Accessible, safe, and affordable child care or child care placement opportunities for low-income families created or saved from reduction or elimination	3,056	3,831	2,039

Goal: Emergency Needs of Households in Crisis are Ameliorated	PY2007	PY2008	PY2009
Emergency Vendor Payments, including fuel and energy bills and rent/mortgage payments	117,196	48,355	56,737

All outstanding desk audits have been completed and the OEO Audit Division is up to date.

The OEO has consistently met or exceeded its weatherization goals for the past three years. Goals are based on a formula calculation of funding dividing by the Department of Energy per dwelling max. The following table details the number of homes weatherized:

Table 7.1.2 Homes Weatherized Annually

YEAR	Number of homes weatherized	Number of ARRA homes weatherized
2006	964	NA
2007	402	NA
2008	429	NA
2009	790	969

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. These techniques are more labor and cost intensive and require more time spent per dwelling for greater energy savings.

In the Weatherization PY 2009, the OEO was faced with the challenge of ramping up production to expend 58 million dollars in additional grant funds for the betterment of low-income homes across South Carolina. Challenges included supporting new weatherization programs in 6 Community Action Agencies, including finding and supplying an outlet for the specialized training for the work. Six Energy Efficiency Training Centers (EETCs) were funded with Department of Energy Training and Technical Assistance funds to provide Hot Climate Whole House Weatherization classes in state. While those schools were developing, the OEO sent CAA weatherization managers and OEO weatherization monitors to Virginia to obtain the training so that the work could begin and be monitored correctly. In response to the needs of the upstate, a seventh EETC is under development.

As of July 1, 2010, the following seat counts have been delivered to the CAAs and their approved subcontractors:
EPA Certified Renovator (CR) certifications = 128
USDOE Lead Safe Weatherization (LSW) = 280
Hot Climate – Whole House Mobile Home = 211
Hot Climate – Whole House Site Built = 186
Total Students = 805

The CR and LSW classes are made available to ensure that USDOE lead safety standards are met for both workers and clients in the weatherization process. The Hot Climate classes are designed to produce quality results by tightening and sealing site built houses and mobile homes to reduce energy consumption and utility costs for clients.

The classes are made available to other entities through the EETCs, after preference for OEO students is fulfilled.

The regular DOE weatherization goal for PY 2009 was 516 houses. There were 790 homes weatherized, for a 44% increase over the targeted goal. In the first year of the 3 year ARRA weatherization grant, 969 houses were completed. This is 28% over projections. South Carolina has been in the lead for job production through the ARRA Weatherization grant, at 9th in the nation as of July, 2010. Altogether, 1,759 houses have been weatherized. This provides a substantial savings in energy costs to low-income individuals and will allow them to apply those savings to the other necessities of life.

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, sub-grantees 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 following table shows service for the past three years—2006, 2007, and 2008.

Graph 7.1.3 LIHEAP Assistance
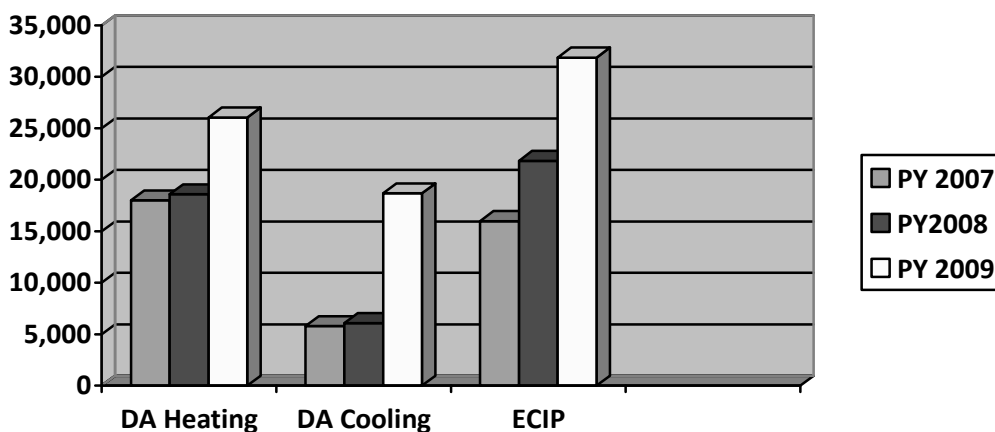
During FY 08-09, Emergency Shelter Grant (ESG) Program funds were used to provide operating expenses for 33 emergency shelters and support services for more than 46,845 individuals, thereby alleviating their emergency situations and helping to move them toward self-sufficiency.

Residential services, including emergency shelter and transitional shelter, were provided to 7,936 persons. One thousand seven hundred sixty-nine (1,769) emergency shelters residents exited to permanent housing. Of the 600 persons who were the transitional housing clients, 196 exited to permanent housing.

The Office of Economic Opportunity funded nineteen (19) agencies with Homeless Prevention and Rapid Re-housing programs. HPRP grants are part of the American Recovery and Reinvestment Act, allocated for communities to provide financial assistance and services to either prevent individuals and families from becoming homeless or help those who are experiencing homelessness to be quickly re-housed and stabilized. The duration of HPRP is September 1, 2009—July 14, 2012 and the grant to South Carolina is $11,136,176. These competitive grants spanning three years support communities in developing a strategy to assist eligible participants.

Chart 7.1.4 Homeless Prevention & Rapid Re-housing: September 1, 2009—August 31, 2010

Financial Assistance	Short-term Rental	Medium-term Rental	Security/Utilities Deposits	Utility Payments	Total Assistance
Expenditures	$497,101	$87,143	$45,480	$91,693	$721,417

7.2 What are your performance levels and trends for your key measures on customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?
The OEO instituted an in-house system of cataloging complaints for service delivery per Community Action Agency. The number of complaints was less than 1% of clients served. One client appealed to DOE in regards to a weatherization job completed by the local CAA; OEO weatherization monitored the situation until completion of the process to achieve customer satisfaction. There were no other appeals or requests for hearings from denied clients during the 2009 program year. The Community Action Network is a unique system of local community assistance and the OEO does not appear to have comparable organizations acting as a federal pass-through in order to compare it.

7.3 What are your performance levels for key measures of financial performance, including cost containment as appropriate?
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 complies with requirements of its granting agencies for procurement of equipment by the sub-grantees, eligibility requirements for clients and service limits to contain costs.

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?
OEO Program Coordinators attended federally sponsored training in their respective grant areas for enrichment of knowledge and engagement. Employees are encouraged to exercise judgment and decision-making skills in order to develop leadership potential. Where needed, such as in the weatherization program, all staff members are thoroughly trained in safety and health information and techniques. All employees successfully completed their EPMS Planning Stage requirements during the 09-10 year.

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

All disbursements and reports to federal awarding agencies were submitted accurately and on-time.

7.6 What are your performance levels and trends for the key measures of 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 CSBG ARRA and ESG programs were selected for review during the OEPP single audit with no findings.

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Small and Minority Business Assistance

Section I - Executive Summary

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 2009-2010**
   A. During FY 2009-2010, OSMBA processed 235 applications for certification eligibility and more than 200 minority contracting reports from agencies.
   B. The statewide small and minority business forum and trade fair had more than 300 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 SCEIS staff, the development of an online state agency Minority Business Enterprise (MBE) expenditure reporting system should be completed by 2010-2011.
   D. In an effort by the OSMBA staff to improve accuracy of information, an automated file tracking system was implemented.
   E. During its outreach efforts, OSMBA staff attended several training workshops that were useful in determining and deciphering information provided to our stakeholders. Also OSMBA gathered information and training materials related to available services, contracting opportunities and procurement procedures.
   F. During FY 2009-2010, OSMBA implemented new guidelines for processing applications. The new guidelines will allow OSMBA to better track potential stakeholders that are seeking certification. OSMBA has begun a process to more accurately notify stakeholders of bids.
   G. During FY2009-2010, OSMBA implemented a new Internal Review process to expedite certifications determination.
   H. During FY 2009-2010, OSMBA implemented departmental directives to ensure consistency in customer services/certifications determination. Also, an online customer services feedback survey was put into place to assess where improvements may be needed.

3. **Key Strategic Goals for Present and Future Years**

   A. **Program Outreach**
   - 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.
   - 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.

- 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.
- Establish new collaborative partners to deliver services to customers and improve the efficiency and effectiveness of programs for customers.

B. **Quality Assurance**
- Development of an on-line MBE reporting system for agencies to utilize for improvement of 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**
- Limited resources to conduct more outreach services for stakeholders, such as training & awareness.
- Increase cooperation and coordination among stakeholders to support the services provided by OSMBA to its customers.
- The ability to maintain consistency in MBE reporting format and information submitted by agencies.
- Improve the public image of OSMBA and increase awareness of its programs.
- Improve the OSMBA website to be a leading resource for certification process and link to available trainings for small minority and women-owned businesses.

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 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 agencies' 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's 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 of South Carolina.

6. **The number of employees (segmented by employee category)**
   2 Classified   0 Unclassified   0 Contract

   0 Temporary   0 Temporary (Grant)   0 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. Online survey are utilized to assess customer satisfaction with OSMBA processes (i.e. application, on-site visits, certification).

9. **Organizational chart**
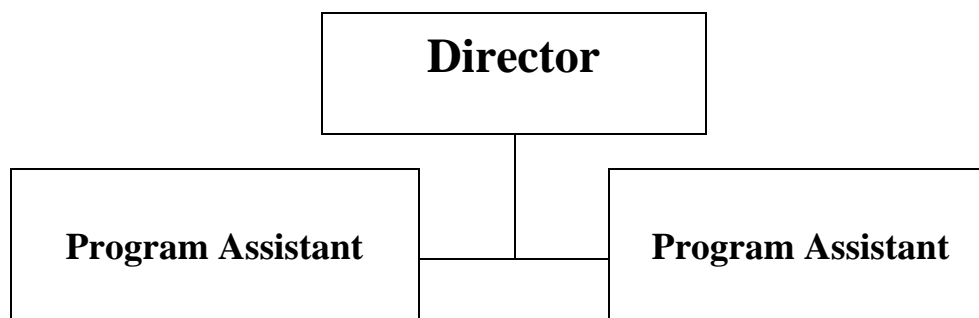
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                    ┌──────────────┐
                    │   Director   │
                    └──────┬───────┘
          ┌────────────────┴────────────────┐
┌───────────────────┐            ┌───────────────────┐
│ Program Assistant │            │ Program Assistant │
└───────────────────┘            └───────────────────┘
```

10.   Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10- 11 Appropriations Act	
	Total Funds	General Funs	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 75,726	$ 75,726	$ 77, 924	$ 77, 924	$ 92,642	$ 92,642
Other Operating	$ 20,279	$ 20,279	$ 20, 813	$ 20, 813	$ 13,061	$ 13,061
Special Items	$ 0	$ 0			$ 0	$ 0
Permanent Improvements	$ 0	$ 0			$ 0	$ 0
Case Services	$ 0	$ 0			$ 0	$ 0
Distributions to Subdivisions	$ 0	$ 0			$ 0	$ 0
Fringe Benefits	$ 22,636	$ 22,636	$ 23,086	$ 23,086	$ 32,424	$ 32,424
Non-recurring	$0	$0			$0	$0
Total	**$ 118,641**	**$ 118,641**	**$121.823**	**$121, 823**	**$ 138,127**	**$ 138,127**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 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 08-09 Budget Expenditures		FY 09-10 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	118, 641	State	121,823	See Section III, category 7 Area 7.3
		Federal		Federal		
		Other		Other		
		Total	118, 641	Total	121,823	
		% 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?

An open-door policy, informal discussions and trainings facilitate communication and brain-storming 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 members have attended Ethics and Freedom of Information Act (FOIA) training provided by the Materials Management Office.

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

The goals and supporting strategies described in the Strategic Plan provide 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.
- Conducting internal team review of applications, which serves as a cross training tool for existing staff. Also, staff members are aware of applicants' needs and can address them with telephone contact and/or letters.

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?**
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.

1.4 **How do senior leaders maintain fiscal, legal and regulatory accountability?**
OSMBA certification review board assesses undetermined applications for 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.

1.5 **What key performance measures do senior leaders regularly review to inform them of needed actions?**
OSMBA director reviews the following quarterly and annually: the number of certification applications received and processed within departmental deadlines, onsite visits conducted within newly established deadlines, 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

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?**
The primary mechanism used for obtaining feedback regarding leadership effectiveness 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 to and reviewing feedback from staff and customers, senior leaders make adjustments in internal process, directives and action plans.

1.7 **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 staff, encouraging creativity, and including the entire team on internal review of applications.

1.8 **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, legislative mandate, and 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, which 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.

1.9.   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 encouraging creativity.

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 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. 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

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

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Chart III.2 Strategic Planning Chart

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 08-09 and beyond Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Administer the State of South Carolina's minority certification program	Provide leadership of the State of South Carolina's minority business enterprise (MBE) program.. Process, manage and analyze information.	1-Maintain regulatory and legal compliance and ethical business practices. 2-On a quarterly basis, compile and maintain data of MBE expenditures and procurement activities by agencies for reporting purposes.	See Section III 7.1
Act as the MBE program advocate with agencies	Provide agency leadership and enhance customer satisfaction.	1-Maintain regulatory and legal compliance, and ethical business practices. 2-Determine and meet the needs and expectations of partners and stakeholders 3-Provide accurate information to agencies about certified MBE's, for contracting opportunities 4-Provide agency training on best practices for implementation of their activities and tracking performance.	See Section III 7.1
Promote the interests of small and minority businesses	Provide advocacy leadership	1-Ensure that small and minority businesses in South Carolina have the opportunity to fully participate in the overall procurement process of the State. 2-Offer training and networking opportunities throughout SC to encourage and promote contracting with MBE's.	See Section III 7.1
Establish partners to improve efficiency and effectiveness of program	Provide collaborative leadership and customer satisfaction	1-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

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

OSMBA strategic objectives focus on activities and utilization of resources that address issues identified as challenges to the programs effectiveness.

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?

Senior leaders review plans, goals, and objectives with the Director of Administration on a monthly basis. Action plans are tracked by using statistics and reports of OSMBA and agencies activities.

2.4.   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.

2.5.   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. Increasing in the number of attendees of OSMBA-sponsored training and networking events for business owners and agency procurement officials.
D. Increasing in the number of procurements issued to certified minority businesses;
E. Increasing in the accuracy of data received from agencies.
F. Obtaining 100% compliance of state agencies submitting their reports and meeting their 10% goal of expenditures with certified businesses.
G. Reducing wait time for processing of applications, site visits and notification of certification status.

2.6. 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 customers' 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.

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.
Our strategic plan is not available on our website, www.oepp.sc.gov/osmba

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.

3.1 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.

3.2 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 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.

3.3   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.

3.4   How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?
Customer surveys and other communication methods such as written correspondence and verbal conversations are used to evaluate our effectiveness. Staff will assess the validity of suggestions, solicit additional feedback, research issue and solutions, then, if possible, develop methods to implement improved services or program.

3.5.   How do you use information and feedback from customers/stakeholders to keep services and 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 is 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, research similar state and federal MBE programs for comparison, written and verbal communication.

3.6   How do you build positive relationships with customers and stakeholders to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder groups.
Strong customer communication and trust are critical to building and maintaining positive relationships with all stakeholders. 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, so they can all have equitable access to business opportunities and information.

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 issuing of contracts to certified businesses.

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?
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.

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?
OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, and 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.

4.3   What are your key measures, how do you review them, how do you keep them current with organizational service needs and directions?
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. A web-based service is utilized to count the number of visitors to the OSMBA website. The website is updated on at least a monthly basis with contracting opportunities and outreach event notices. The website provides another method to deliver pertinent and relevant program information online to customers, which has reduced the number of incoming phone calls and letters to OSMBA staff. A sudden increase in phone calls and emails inquiring about a particular program indicates to staff a need to provide the information on the website or provide an outreach activity to disseminate the needed information.

Key Measure	Frequency
Number of certifications and re-certifications issued	Annually
Number of qualified certification applicants	Annually
Number of attendees for OSMBA sponsored events & training	Annually
Number of agencies submitting quarterly reports	Quarterly/Annually
Number of agencies submitting annual MBE Plan and Goal	Annually
Number of agencies meeting 10% MBE Goal	Annually
Money spent with certified minority businesses	Annually
Increase in money spent with MBEs as compared to previous FY	Annually

OSMBA Website Visitors
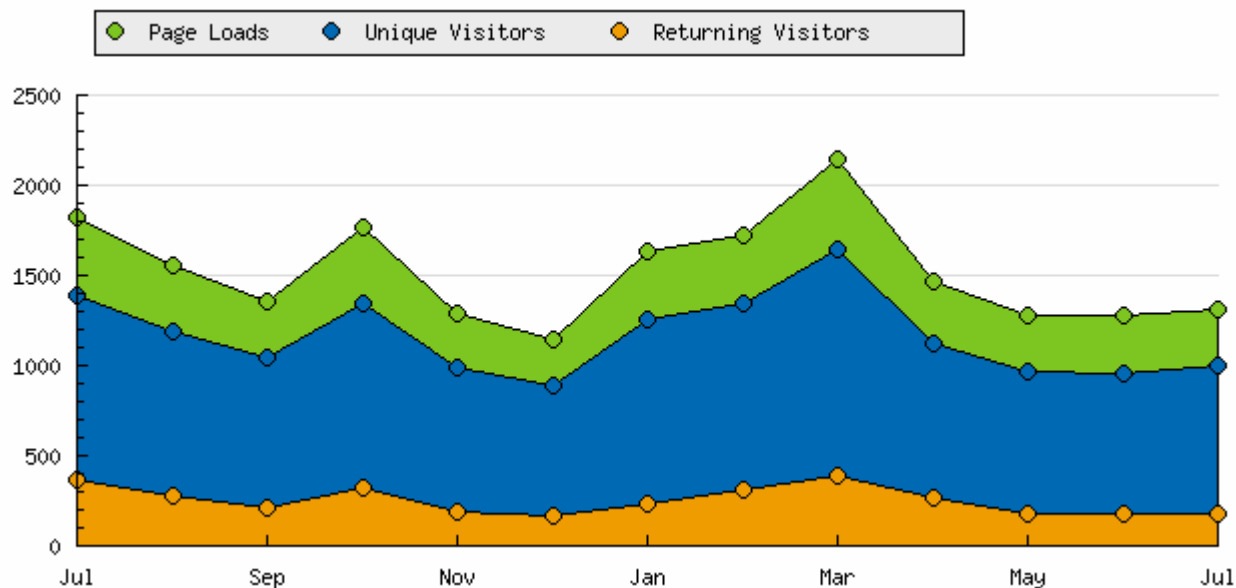
	Page Loads	Unique Visitors	First Time Visitors	Returning Visitors
FY 09-10 Total	19, 748	15, 142	11, 872	3,270
FY 09-10 Monthly Average	1, 519	1, 165	913	252

Page Load—The number of times your page has been visited.
Returning Visitors—person is returning to OSMBA website for another visit an hour or more later
Unique Visitor—this is the total of the returning visitors and first time visitors—all visitors.

4.4 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's 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.

4.5 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 received 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.

4.6   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, and its impact on program goals and objectives of OSMBA and major stakeholders.

4.7   How do you collect, transfer and maintain organizational and workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?
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 processes 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

5.1   How does management organize and measure work to enable workforce to: 1) develop 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?**
OSMBA's director delegates assigned work according to staff areas of responsibility, with a focus on objectives, strategies and action plans. Staff members are provided opportunities to utilize creativity and self-initiative.

5.2   How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations? Give examples.
OSMBA staff is small, so it is imperative that all employees are familiar with the responsibilities of each other and share information so that all functions can be completed. Staff members are encouraged to share copies of handouts from presentations or trainings they have attended, disseminate pertinent information found on websites, and provide a debriefing when conducting site visits or outreach events to ensure that everyone is aware of issues that may arise.

5.3   How does management recruit, hire, place and retain employees? Describe any barrier that you may encounter.
OSMBA is committed to develop programs that foster individual growth for employees, identify staff for advancement, and assist in creating a diverse workplace. OSMBA makes every effort to promote 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. Advertisements for openings are announced through the Human Resources department, which forwards email announcements to all OEPP staff, ensuring fairness.

5.4   **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 members participate in relevant training that will sharpen the skills of OSMBA staff and increase 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 applications for certification.

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?**
Certification-related training directly impacts staff members' activities by enabling them to have a better understanding of the MBE program, increase efficiency in the evaluation of applications 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 members 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.

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?**
OSMBA has an open-door policy that allows staff to communicate concerns, suggestions or questions with the director. The open-door policy also allows everyone to contribute to the overall work system. Employee feedback and suggestions are encouraged. Staff members have opportunities to pursue relevant new projects. Staff members have received training on the EPMS system.

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 employment orientation, and safety training?**
With our open-door policy, staff is encouraged to provide suggestions for improving systems, and several have been implemented. OSMBA staff is small and has budget challenges; therefore, individuals who are selected for hire have many basic skills and training prior to employment with OSMBA. Staff members are allowed to attend relevant training (within budget guidelines) and represent the agency 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.

5.8   How do you encourage on the job use of new knowledge and skills?
OSMBA staff members are encouraged to be creative and utilize one another to improve work efficiency. Suggestions for improvement by all staff are welcomed.

5.9   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 activities. Any new method or training that will improve activities is welcomed. OSMBA seeks opportunities to utilize relevant and cost effective trainings offered by our partners.

5.10   How do you evaluate the effectiveness of your workforce and leader training and development systems?
The effectiveness of workforce is evaluated by input from our customers through a new online survey and tracking of application.

5.11   How do you motivate your workforce to develop and utilize their full potential?
Since the number of OSMBA members staff is low 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. Opportunities are available for staff to attend relevant outreach events, representing the office. Suggestions for program enhancements developed by staff are welcomed and often implemented.

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?
Open communication is critical to the success of this office. Staff is frequently asked for feedback and opinions on how to improve the office, leadership style and operations. However, because staff often develop very useful and marketable skills, many leave for better paying positions within five years. Exit interviews are conducted by the Office of Human Resources.

5.13.   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.

5.14.   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

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?

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, defines measures, and inspects 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. Both OSMBA and OEPP review annually the effectiveness of program activities and compliance with objectives, strategic plan, and Office mission.

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 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, defines measures, and inspects progress and achievement of objectives through teamwork of staff. Our key processes that provide value are the maintaining of the state's MBE directory, administering the certification program, assisting in the understanding of the procurement process for businesses, and identifying minority businesses for agencies. Monitoring program performance, customer and stakeholder feedback, and survey results ensure awareness that the processes are adhered to.

6.3   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 staff effectiveness.

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

Staff members continuously evaluate and update 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.

6.5 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 members crucial to particular projects 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.

6.6   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 certification applications, agency reports, and outreach activities (including training). Due to the increasing number of applications received, the number of agency reports to process, requests to provide training and outreach events, OSMBA is working with other agencies to design electronic systems to reduce the manual processing time of agency reports and certification application, so that we can provide other critical services to our customers, including training and outreach events.

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

Due to the longevity of the program, staff can estimate what is needed to provide services and programs based on historical information. Many of the activities are cyclical and consistent from year to year. Volume of activity may vary from year to year, but it still allows for a degree of predictability for budget projections.

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?

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. However, since then, the agency submittal rate has started to decline again.

Measures	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY09-10
#Certifications	83	30	33	49	84
#Re-certifications	40	30	27	41	46
$ Spent by Agencies w/Certified Minority & Women Businesses	$56,908,160	$28,424,530	$19,331,692 *incomplete agency reports	$16,316,653.85 *incomplete agency reports	$14,149,625.29 *incomplete agency reports

7.2   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 products or services)? How do your results compare to those of comparable organizations?

A. Business Competitive Intelligence analysis was conducted in 2009 by USC's School of Library and Information Science to assess who our competitors are in South Carolina and a comparison of services provided. The study indicated that we have a unique advantage over comparable organizations, and the major factor is that we certify women and minority-

owned firms, our service is free, and we are an advocate for all small businesses in South Carolina.

B. The following data was obtained from a customer satisfaction survey:

Question about OSMBA representative	Agree	Strongly Agree
Representative was flexible in scheduling	18.8%	75%
Representative was courteous and professional		100%
Representative was clear and concise about he purpose of visit	18.8%	81.2%
Representative answered all my questions or concerns	12.5%	87.5%
Representative clearly explained the approval process	12.5%	87.5%
Question	**No**	**Yes**
Felt you were treated fairly		100%
Received communication in a timely manner	6.3%	93.8%
Information was clear and accurate		100%
Received the information requested		100%
Overall rating	B 25%	A 75%

C. The following table summarizes certification and re-certification data for recent years and illustrates recent progress in performance:

	7/2008—1/2010	2/2010—6/2010
Number certified	116	21
Average days from application until certification	296	71
Average days from application until site visit	184	60
Number re-certified	55	12
Average days from application until re-certification	190	36

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. Although we have received an increase in new applications (especially for firms hoping to obtain an American Recovery and Reinvestment Act contract), OSMBA is currently diligently striving to meet that goal. OSMBA believes that the development of an on-line pre-screening

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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.

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Governor's Office of Executive Policy and Programs
<u>State Office of Victim Assistance</u>

Section I - Executive Summary

1. Organization's stated purpose, mission, vision, and values

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.

2. Major Achievements for FY 2008-2009

*   Working through the SC Victim Services Coordinating Council (VSCC), SOVA assisted with the passage of H.4601. This codified the VSCC and allows victims to receive an additional 20 counseling sessions upon documented need and created a certification program for victim service providers throughout the Palmetto State. SOVA also has a full time Program Coordinator to assist with and facilitate the VSCC meetings and provide the administrative services needed to the Council as a result of this bill. Also as a result of H.4601, SOVA staff has successfully conducted site visits to the Solicitor's Offices.
*   Working through the statewide workgroup facilitated by the South Carolina Coalition Against Domestic Violence and Sexual Assault (SCCADVASA), SOVA assisted with the passage of H. 3677, which amended Section 16-3-1350 (A) and (B) of the 1976 Code, allowing victims of sexual assault to receive a forensic examination whether or not the victim chooses to cooperate with law enforcement and the criminal investigation.
*   Held the SC Crime Victims' Unity Ceremony in conjunction with the Crime Victim's Ombudsman in recognition of Victims' Rights Week 2009 while saving SOVA funds by preparing programs and invitations in-house.
*   Co-sponsored the 2009 SC Victims' Rights Week Conference with the SC Victim Assistance Network.
*   Held the fourth South Carolina Victim Assistance Academy in partnership with the SC Victim Assistance Network and the Medical University of South Carolina. There were 41 students in attendance.
*   Saved crime victims over $8.4 million through the bill negotiation process.

- SOVA received $1.1 million in Federal Recovery Act funds.
- Implemented a pre-authorization procedure for paying dental bills, eye glasses and other minor medical procedures allowing uninsured victims to receive immediate services.
- Published a payment and reimbursement guide for crime victims, service providers, and victim advocates.

3. **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 all funds designated for crime victim assistance.
   3. Maintain open and effective communication with crime victims, law enforcement agencies, advocates, solicitors, service providers and other interested parties.
   4. Develop a cost-effective paperless system.

4. **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 and continued outreach initiatives.

   Educating crime victims, service providers, and other interested parties that SOVA is not the "first-payee" or guarantor of all crime victims' related expenses remains a challenge.

5. **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

1. **Your organization's main products and services and the primary methods by which these are delivered**
2. **Your key customers groups and their key requirements/expectations**
3. **Your key stakeholder groups (other than customers)**
4. **Your key supplies and partners**

Table II.1.1 –State Office of Victim Assistance - Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/	Key Partners

	Stakeholders	
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

Main Office: Edgar Brown Bldg, Room 401, 1205 Pendleton Street, Cola, SC with Outreach Offices in Orangeburg, Bamberg, and Bennettsville

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

__30__ Classified   __1__ Unclassified   _____Contract

___1___ Temporary   __8__ 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 computer database 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 08 - 09 Actual Expenditures		FY 09 - 10 Actual Expenditures		FY 10 - 11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	1,228,935	0	1,349,959	0	1,572,898	0
Other Operating	12,045,235	101,642	11,913,614	14,397	$13,433,633	
Special Items	162,727	162,727	222,341	222,341	187,512	187,512
Permanent Improvements	0	0	0	0	0	0
Case Services	0	0	0	0	0	0
Distributions to Subdivisions	823,000	0	823,000	0	933,000	0
Fringe Benefits	376,248	0	395,237	0	462,398	0
Non-recurring	0	0		0		0
Total	**14,636,146**	**264,369**	**14,704,151**	**236,738**	**16,589,441**	**187,512**

Other Expenditures

Sources of	FY 08-09	FY 09-10

	Funds	Actual Expenditures	Actual Expenditures
Supplemental Bills		$ 0	$ 0
Capital Reserve Funds		$ 0	$ 0
Bonds		$ 0	$ 0

10. Major Program Area Chart

Program Number and Title	Major Program Area Purpose	FY 08-09 Budget Expenditures		FY 09-10 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:**	264,369	**State:**	236,738	
		Federal:	3,254,312	**Federal:**	4,680,238	
		Other:	11,117,465	**Other:**	9,787,175	
		Total:	14,636,146	**Total:**	14,481,810	
				100% of Total Budget:		

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; d) ethical behavior?

Short and long term direction is set through regular meetings with the Director, managers, and staff. 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 mandated to attend victim service trainings to maintain professional standards that include customer services. 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. Staff made site visits to the various solicitors' offices to provide technical assistance and build relationships.

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. The agency also welcomes verbal feedback as a way of assessing the impact on the public.

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

- Number of claims input in the PROGRESS computer data system
- Number deemed eligible
- Number of claims examined and vouchers ordered/paid
- Amount of funds recovered through restitution/subrogation
- Accurate weekly expense/funding reconciliations to assure availability of funds to pay claims

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 determine 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 act as trainers to those who did not attend. 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 mandated to attend trainings to enhance job skills and to cross train with other employees. Employees are required to receive 12-15 hours of certification training; 12 hours for employees hired prior to January 1, 2009 and 15 for new employees hired after January 1, 2009. Also, each year 4 or 5 SOVA staff are provided the opportunity to attend the SC Victim Assistance Academy.

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. Management also provides employees with meals as rewards.

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 hosted an annual SC Crime Victims' Unity Ceremony. In addition, SOVA outreach office staff accompanied victims to court when a court-based advocate is not available. The Outreach staff also coordinated emergency response teams to be available to assist in a mass victim incident. Also, outreach staff work in a collaborative effort to educate and train the communities in which they are assigned to work in regarding victim related issues and or concerns. SOVA continued to work

and network with agencies and communities across the state and locally as it relates to improving services and bridging the gap in victim services.

SOVA or SOVA staff is a member of or involved with the following organizations:
- National Association of Crime Victim Compensation Boards
- Outreach Staff - Task Forces
- Parents of Murdered Children, SC Chapter
- Victim Service Coordinating Council
- 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
- National Organization for Victim Assistance

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.**

Managers 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.

Chart III.2. - Strategic Planning Chart for State Office of Victim Assistance

Key Strategic Goal	Supported Strategic Planning	Related FY 08-09 Key Action	Key Cross References

	Goal/Objective	Plan/Initiative(s)	for Performance Measures
To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina	Created 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.	• Restitution Recovery • Trainings • Enhance customer satisfaction through faster eligibility determination. • Created Certification Program for victim service providers	• 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 created 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. Also, meetings with the Director assist in developing and tracking action plans.

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 meetings with Director as well as meetings with the different managers and their staff within their particular section.

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/Court Systems	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. There is a report prepared each week regarding the types of phone calls received. This aids in keeping track of phone calls and is a guide as it relates to tracking types of calls.

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?

Customers 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. Also, customers may email SOVA via SOVA website with any questions and or concerns or inquiries regarding their case.

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. Also, crime victims and service providers are able to log onto the SOVA website at www.sova.sc.gov and complete a SOVA website survey. Another way in which the agency can monitor victims' satisfaction or dissatisfaction is by reviewing the optional appeal exit surveys that are provided to crime victims once they've had the opportunity to complete their appeal process.

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 Director and 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 SC Victim Services Coordinating Council. Also, partnerships and positive relationships are built through sponsoring and co-sponsoring various events with agencies statewide as well as nationally.

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 to ensure that the goals and objectives are met.

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 as well as staff meetings.

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 specific divisions: Intake and Outreach, Eligibility, Recovery, Processing, and Financial Services. 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, emails and staff meetings.

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

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, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation, and safety training?

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. Staff are also encouraged to work on various projects together; thereby, empowering themselves to achieve and or go above and beyond their current knowledge and skills.

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.

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 guidance, federal regulations, and OMB Circulars.

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?**

- 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 or SOVA overviews)
- SOVA departmental overviews with new staff
- Staff's service provider certification
- Staff's representation on various boards
- 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 the 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 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?**

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. The Department also provides support and advocacy and makes referrals as warranted or deemed necessary.

Chart 7.1.1.a

New Claims: This chart represents all new incoming applications that are received into the agency. They are received from victims, service providers and advocates across the state. They are each screened and reviewed and all valid applications are entered into the computer database. They then become a crime victims' compensation claim with a designated claim number. The chart below indicates the number received.
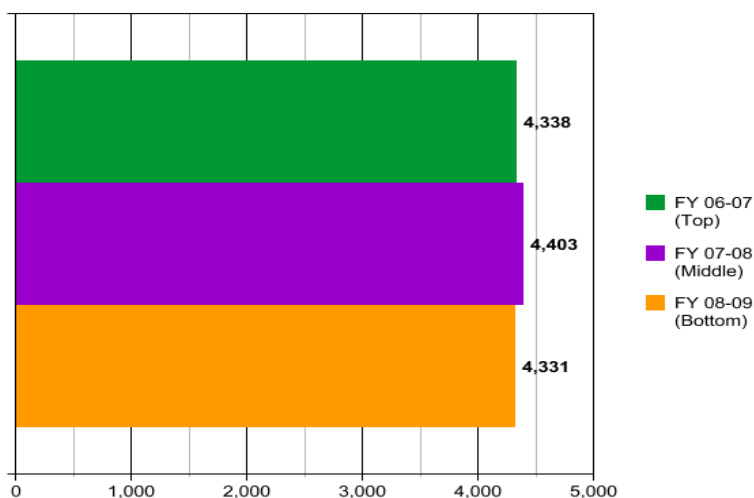
Chart 7.1.1.b

Walk-ins: The victims assisted through the intake office are considered walk-in victims. They are assisted by the Client Service Representative and provided with support and advocacy, aided in filing their crime victims' compensation application and provided with case status

information. Also, the walk-ins will provide the agency with requested documentation needed in processing their file. The chart below reflects the number assisted.
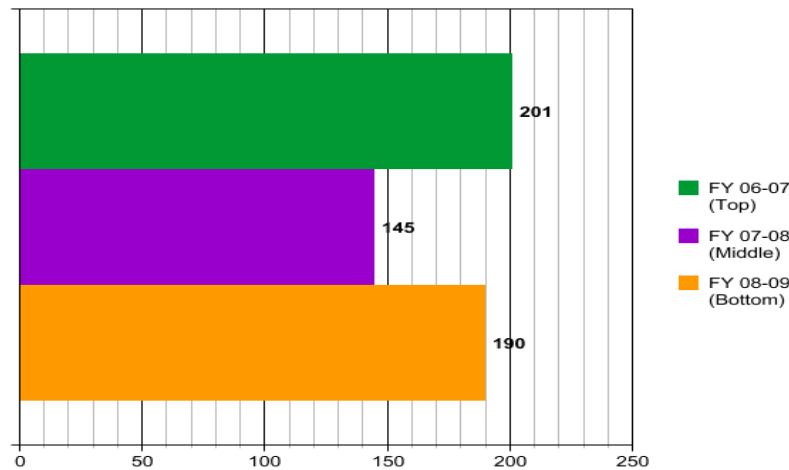
Chart 7.1.2

Incoming Calls: The calls received through the switchboard at the receptionist's area reflect crime victims calling to get case status information, asking general questions about the compensation program, asking for assistance as it relates to other victim related agencies that may be able to assist them with their needs etc. Not only are the calls from crime victims but the agency also receives calls from service providers as well seeking case status update and payment information as it relates to their specific payment. Applications are requested via phone request by advocates, victims and service providers. The chart below reflects this information.
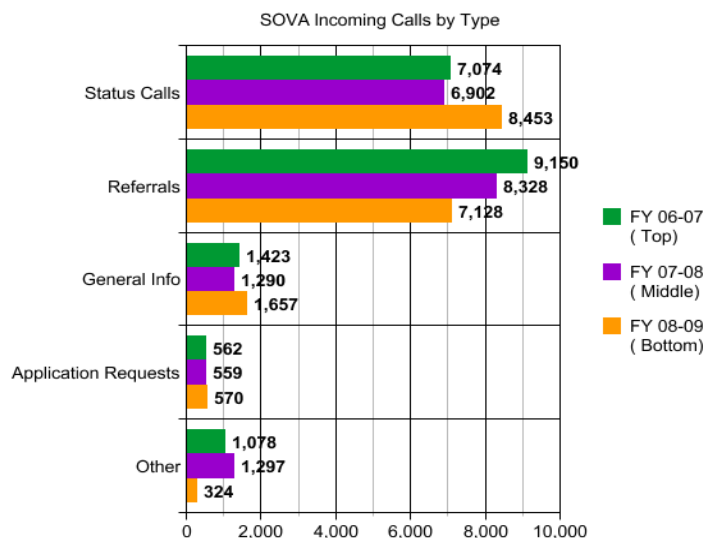
Chart 7.1.3

Tracking Incoming and Outgoing Mail: The Victim Witness Services Section is responsible for receiving all incoming mail for the agency. Upon receipt of the mail, all mail will be counted and then "looked up" in the computer database to see which section the file is in or if we have a file within the agency. If there is a file, the mail is forwarded to the appropriate

section or placed in a holding status for mail that is not in the system (NIS) and checked again later to see if there is an application on file. All outgoing mail must also be counted and processed out of the office as well. The chart below reflects those numbers.

Incoming Mail
- FY 06-07 (Top): 22,599
- FY 07-08 (Middle): 23,269
- FY 08-09 (Bottom): 22,908

Pieces of Mail Looked Up
- FY 06-07 (Top): 13,243
- FY 07-08 (Middle): 13,049
- FY 08-09 (Bottom): 12,922

Outgoing Mail
- FY 06-07 (Top): 26,703
- FY 07-08 (Middle): 32,111
- FY 08-09 (Bottom): 28,143

Legend:
- FY 06-07 (Top)
- FY 07-08 (Middle)
- FY 08-09 (Bottom)
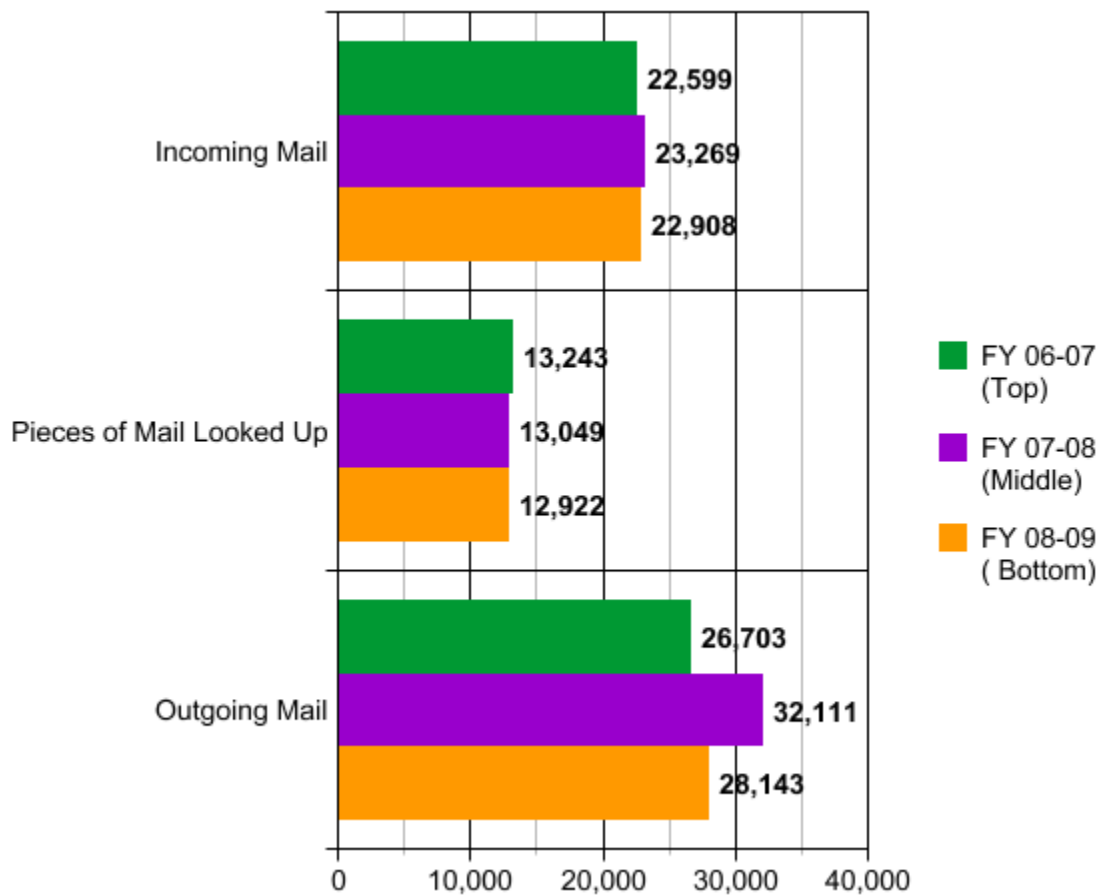
Chart 7.1.4.a

Training: The Victim/Witness Department also provides training and publication items to raise awareness of compensation and other victim services.
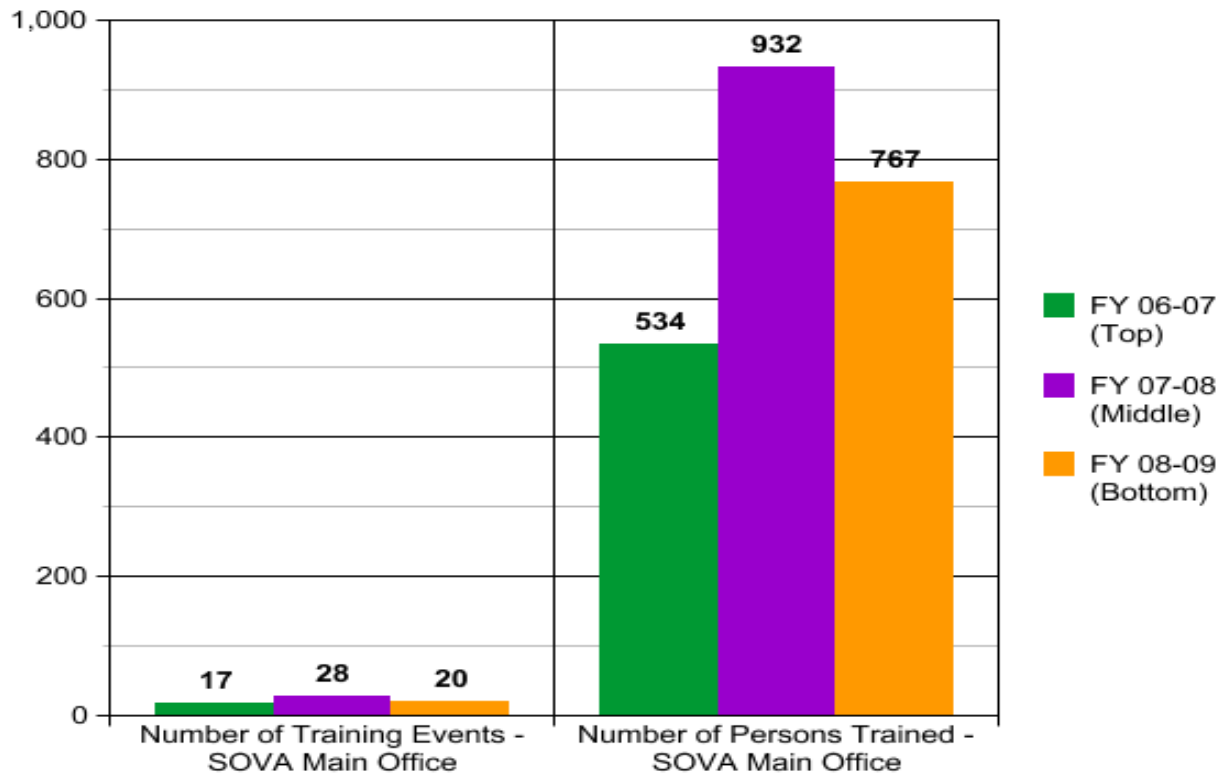
Chart 7.1.4.b (Training continued)
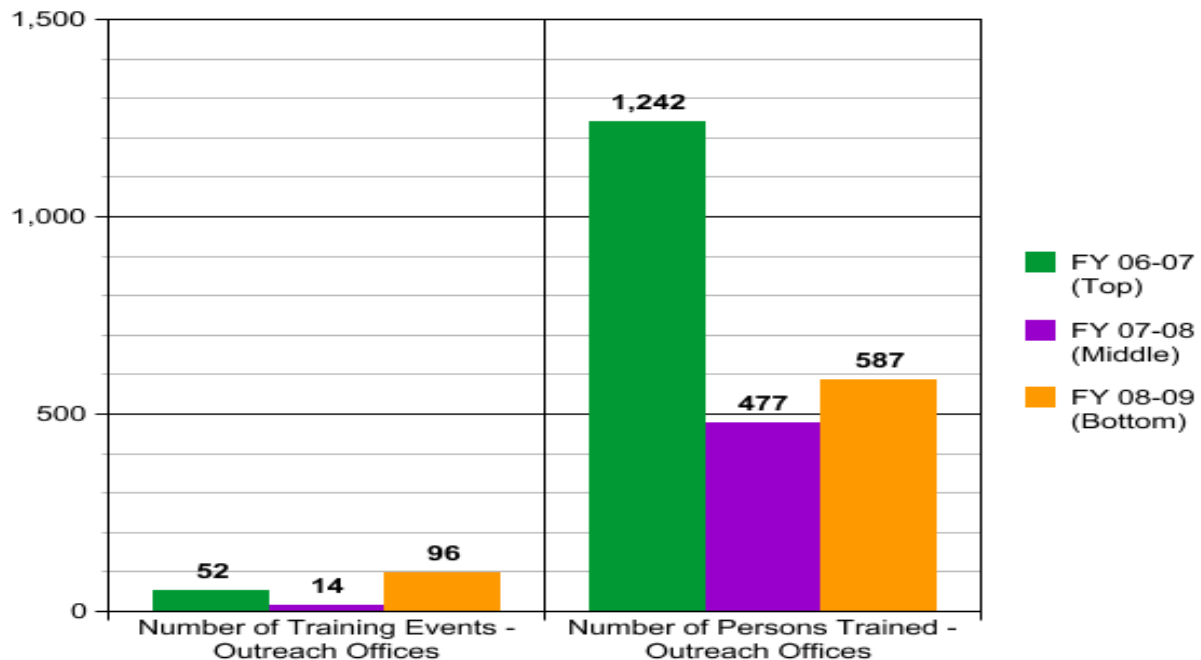
Chart 7.1.5

Publications Distributed: Various publication items to include but not limited to brochures, applications, flyers, posters etc are distributed to advocates, crime victims and service providers statewide to assist them in filing for crime victims compensation and also for public awareness purposes.
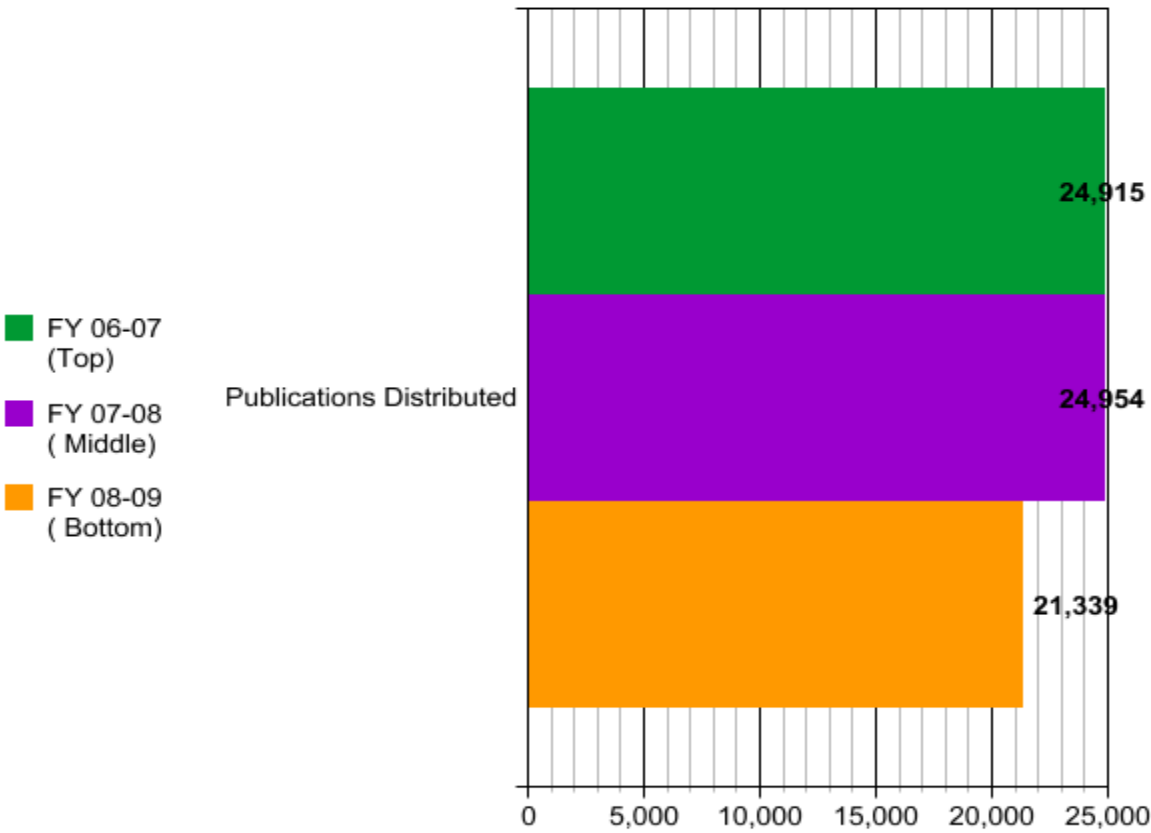
Chart 7.1.6

SOVA Outreach Performance: SOVA Outreach Offices reported the following measures of mission accomplishment for FY 2008-2009 as compared to prior fiscal years. The services provided are to a diverse group of crime victims to include but not limited to sexual assault, domestic violence, homicide, stalking etc. Some of the services provided are crisis intervention, case status updates, assistance with filing crime victims' compensation applications, courtroom accompaniment when requested etc. The agency networking includes agencies that staff coordinate and collaborate with on a daily basis in providing quality services to the victims.

SOVA Outreach Office Performance
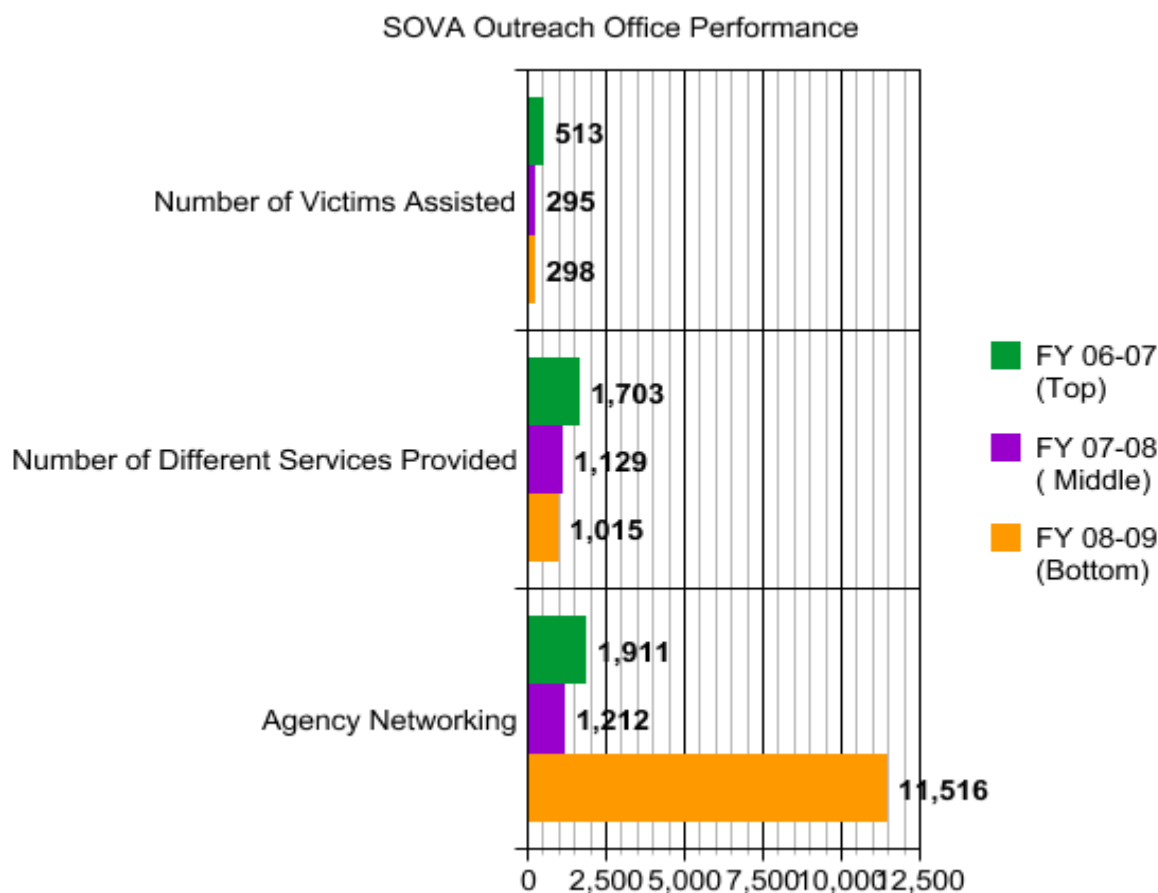
In addition, SOVA held the Fourth South Carolina Victim Assistance Academy in partnership with the SC Victim Assistance Network and the Medical University of South Carolina May 31, 2009 – June 5, 2009 with 41 victim service providers trained. The Academy provided attendees with credit hours toward certification through the National Organization for Victim Assistance as well as core and continuing certification hours as a victim service provider as legislatively mandated. Also, law enforcement in attendance were able to receive CLEs for their participation from the SC Criminal Justice Academy. This continues to be a success and a great collaborative effort on behalf of all victim service agencies.

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 along with other vital Council information can be viewed at the Council website located on the State Office of Victim Assistance's website at www.sova.sc.gov.
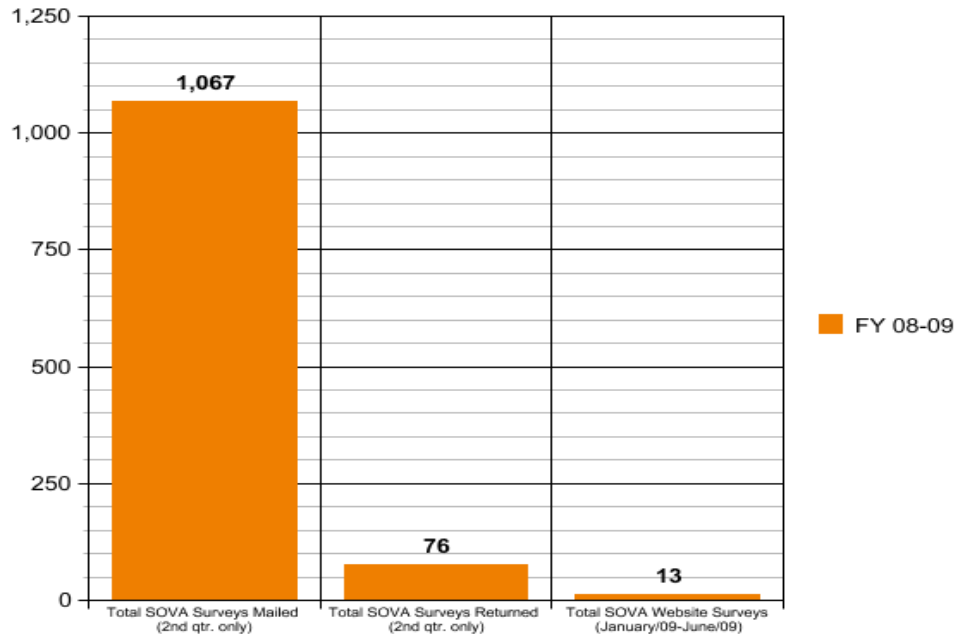
Chart 7.1.7

Fines, Fees and Assessments: In the first year, SOVA provided assistance regarding complaints and inquiries as it pertains to the expenditures of crime victims' funds retained by county and municipal governments pursuant to Section 14-1-206, 14-1-207, 14-1-211 of H4601.

Complaints/ Inquiries on Fines, Fees, Assessment
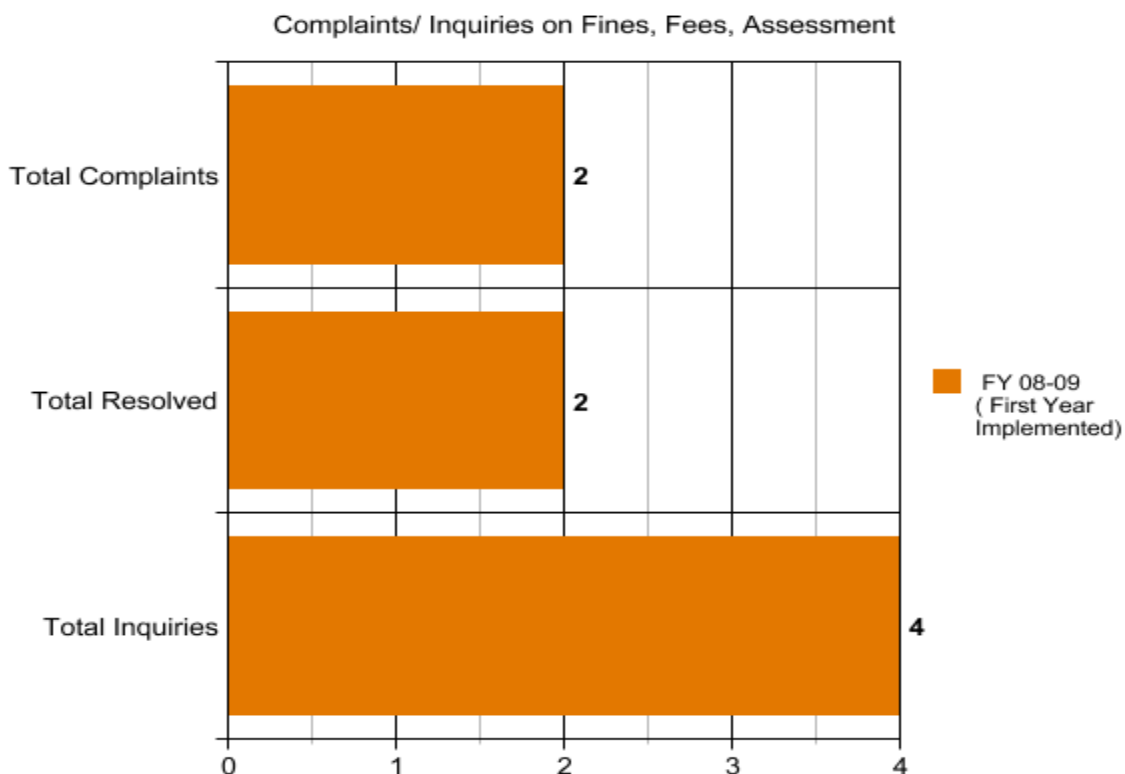
SOVA Site Visits to Solicitor's Offices: SOVA pursuant to Section 79.3 of the 1988-1989 General Appropriations Act is asked to annually monitor the implementation of the guidelines developed for the expenditure of funds distributed through the Governor's State Office of Victim Assistance. The monitoring with each Judicial Circuit is done to assess their victim assistance program, provide training and technical assistance as requested, and to highlight best practices and innovative initiatives.

Chart 7.1.8

SOVA Surveys: Surveys were developed and used for the first time to measure the effectiveness of services provided and to document how service providers and crime victims learned of the agency's services and benefits.

COMPENSATION: Eligibility & Processing Services

The Eligibility Services Department processed 3,771 claims during FY 08-09, 80% of which were deemed eligible:

Chart 7.1.9

Eligibility Services - FY 08-09

441 (12%)

3330 (88%)

- Eligible
- Ineligible
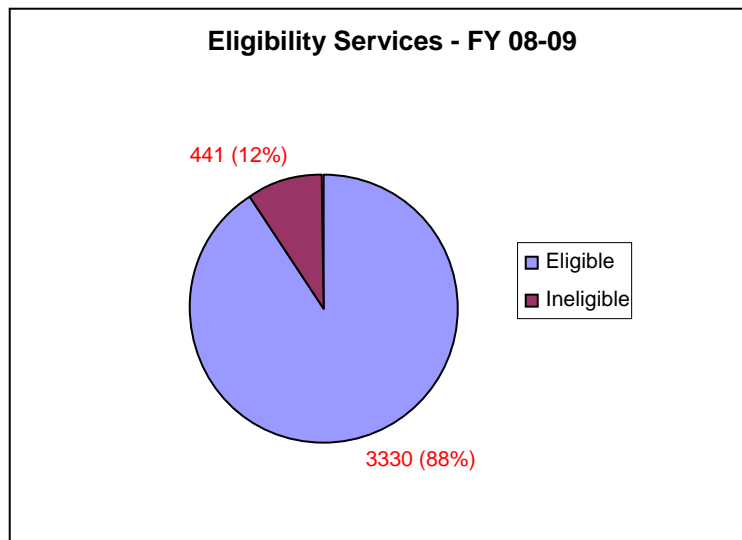
The Processing Services Department processed 8,471 claims and ordered 16,826 payments (Data is presented in chart 7.1.11).   Under the Compensation Program, 7,566 payments were ordered and under the Sexual Assault and Child Abuse Protocol Program 9,260 payments were ordered. Despite these benefits, many victims are left with large balances they cannot pay. This year under the Compensation Program, Processing Services continued initiatives to negotiate bills on behalf of victims, saving victims approximately $8.4 million in out-of-pocket expenses (Data is presented in chart 7.1.11).

Chart 7.1.10
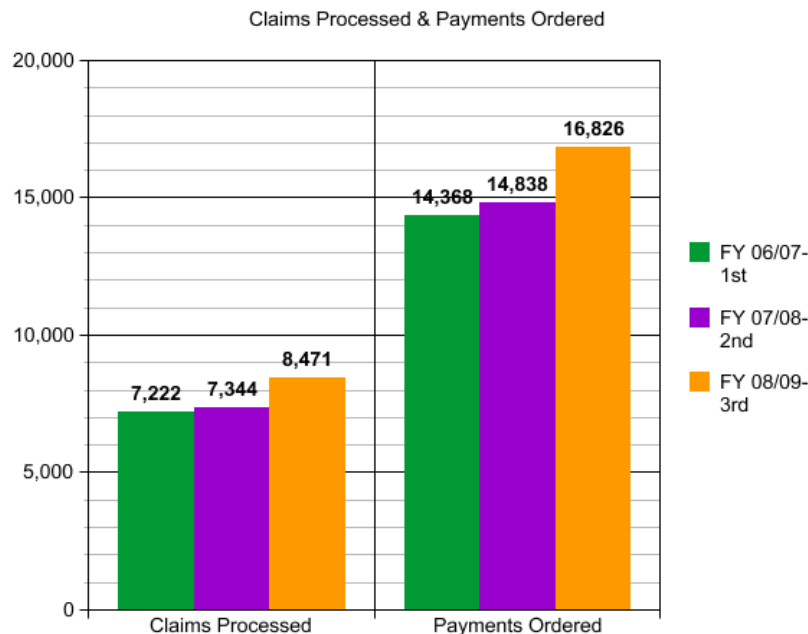
Claims Processed & Payments Ordered
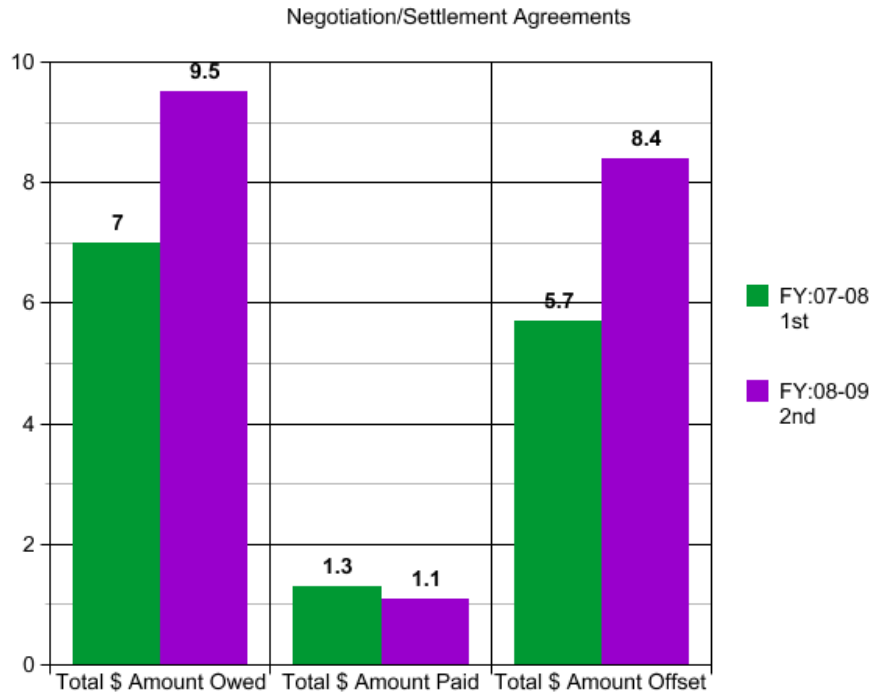
- FY 06/07-1st
- FY 07/08-2nd
- FY 08/09-3rd

Claims Processed: 7,222 7,344 8,471
Payments Ordered: 14,368 14,838 16,826

Chart 7.1.11

Negotiation/Settlement Agreements

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. Over a two year span, Eligibility Services Department (ESD) went from 4 Investigators to 3. Despite this staff turnover, ESD's processing time for claims has only increased by 7% between FY2006-2008.

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

In FY 08-09, the Processing Services Department processed 9,633 vouchers for payment for a total of $11.7 million in benefits for eligible victims of crime, as opposed to processing 8,424 claims with a total payout of 11.8 million in FY 07-08. Although there was an increase in vouchers for payment processed, the amount paid for claims decreased. This was due to SOVA staff's negotiations and settlement agreements with service providers. Benefits paid for compensation claims and for Sexual Assault/Child Abuse Protocols (SAP/CAP) were as follows:

Restitution/Recovery Services

In FY08-09, SOVA recovered over $380,000 through restitution and subrogation. 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.

Forty-five (45) claimants requested and received additional funds from the Crime Victims' Advisory Board for a total increase in award amounts of $ 436,480.88.

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 $429.331.74 was recouped from the restitution/recovery program from July 1, 2008 to June 30, 2009.

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 $ 159,466.37 in potential duplicate payments in FY 08-09.

7.4   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?

All employees attended SOVA's annual staff development where they participated in strategic planning and received training in workplace stress management and customer service. Employees continue to be promoted through the internal selection process. Several employees have applied and received certification through the National Organization for Victim Assistance as well as their certificate from attending the SC Victim Assistance Academy. All staff members completed their mandatory certification as a victim service providers as legislatively mandated.

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)?

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 has been-monitored by the Department of Public Safety, Office of Justice Programs for its State Victim Assistance Program grant with no findings.

2009-2010 Accountability Report
Governor's Office of Executive Policy and Programs
<u>South Carolina Office of Veterans' Affairs</u>

Section I - Executive Summary

1. 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 Prisoner of War (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 veterans 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.

2. Major Achievements for FY 2009-2010

A. Responded to requests for assistance from over 72,000 constituent contacts.
B. Educated and counseled veterans, in collaboration with the County Veterans Affairs Officers, service organizations' representatives, and the US Department of Veterans Affairs (VA), such that **$1.889 billion in federal veterans' benefits**, medical and financial, were realized in South Carolina in FY 2009.

3. Key Strategic Goals for Present and Future Years

A. Improve upon an already excellent service of advocacy and assistance to our State's 408,747 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 2009 total of $1.889 billion.
B. Honor the service and memory of deceased veterans, and their families by:
   o successfully operating the new state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery.
   o attending the funeral of every South Carolina service member killed in support of the Global War On Terrorism (GWOT).
C. Continue to research and compile the South Carolina War Roster.

D. 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.

E. Become a role player in advocating for jobs for veterans and the eradication of homeless veterans.

E. Work toward a practical, paperless work environment.

4. **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 yearly reasonable operating budget.
       - 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 financial and economic impact of the 408,747 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.

5. **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. An examples is:
     - Compilation of the SC "War Roster" – progress has been suspended due to lack of manpower.

- Federal impact of veterans' benefits – the total funds from the federal government realized in dollars and/or services in South Carolina increased from $1.60 billion to $1.889 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 - Organizational Profile
1. Main products and services and the primary methods by which these are delivered
- **Veterans advocacy and assistance** to 408,747 SC veterans, their family members, and survivors in informing them of their earned benefits ($1.889 billion in FY 2009) 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 2009 over $5.2 million of tuition credit was awarded to eligible students.
- **Burial and memorial services:**
  - honorable burial of 162 veterans and 41 spouses in 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 408,747 veterans in South Carolina.
  - awareness of the impact of the economic veterans in SC; $1.889 billion in FY 2009.
  - 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 (VSOs)
   - 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	Veterans' Benefits Administration (VBA), Veterans Health Administration (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, wartime 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 (NCA), VSOs, funeral homes
SCOVA	Compile the "War Roster" of South Carolina veterans	SC veterans and their families	DoD, VA, veterans and CVAOs
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, VSOs

5.   **Operation locations**

Primary Location: Governor's Office – Office of Veterans' Affairs
1205 Pendleton Street, Suite 461
Columbia, South Carolina 29201

Satellite Locations:

VA Regional Office (SCOVA)   Charleston VA Medical Center (SCOVA)
6437 Garners Ferry Road, Suite 1126   109 Bee Street
Columbia, South Carolina 29209   Charleston, South Carolina 29401

Dorn VA Medical Center (SCOVA)   Augusta VA Medical Center (SCOVA)
Building 101, Room 1C111   5A 170 Downtown Division
6439 Garners Ferry Road   1 Freedom Way
Columbia, South Carolina 29209-1649   Augusta, Georgia 30910

The M.J. "Dolly" Cooper Veterans Cemetery
140 Inway Drive
Anderson, South Carolina 29621

6.   The number of employees, segmented by employee category

___20___ Classified   _____ Unclassified   _____ Contract

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

The above information reflects the number of filled positions. As of June 30, 2010 the Office of Veterans' Affairs had 8.63 unfilled positions (4.63 classified, 4 unclassified).

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
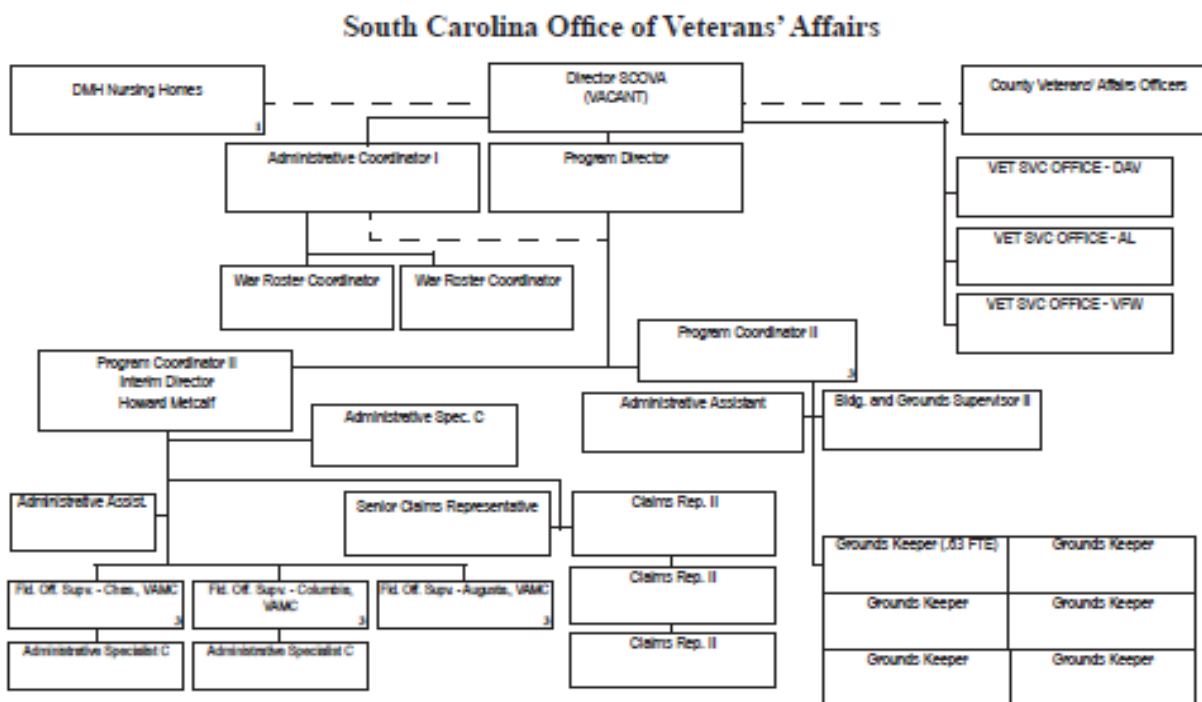
(1.) Per SC Law, SECTION 44-11-30, SC Mental Health Commission shall consult with the Division of Veterans' Affairs, Office of the Governor, concerning policies, management, and operation of veterans' homes.

(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 08-09 Actual Expenditures		FY 09-10 Actual Expenditures		FY 10-11 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 742,663	$ 742,663	$ 646,934	$ 646,934	$ 614,313	$ 614,313
Other Operating	$ 211,981	$ 127,497	$ 59,876	$ 59,381	$ 15,090	$ 15,090
Special Items	$ 24,450	$ 24,450	$ 6,763	$ 6,763	$ 67,359	$ 67,359
Permanent Improvements	$	$	$	$	$	$
Case Services	$ 19,000	$	$ 47,877	$	$ 550,000	$
Distributions to Subdivisions	$ 103,378	$	$	$	$	$
Fringe Benefits	$ 214,135	$ 214,135	$ 213,739	$ 213,739	$ 152,048	$ 152,048
Non-recurring	$	$	$	$	$	$
Total	**$1,315,607**	**$1,108,745**	**$ 975,189**	**$ 926,817**	**$1,398,810**	**$848,810**

Other Expenditures

Sources of Funds	FY 08-09 Actual Expenditures	FY 09-10 Actual Expenditures
Supplemental Bills	$	$
Capital Reserve Funds	$	$
Bonds	$	$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 08-09 Budget Expenditures		FY 09-10 Budget Expenditures		Key Cross References for Financial Results *
III.A.2 Program Management	1. To operate a veterans cemetery. 2. To provide financial relief to SC National Guard/Reservists and their families.	State	388,060	State	316,660	Tables 7..3-1, 7.3-2
		Federal	186,537	Federal	495	
		Other	20,326	Other	47,877	
		Total	594,923	Total	365,032	
		% of Total Budget: 35%		% of Total Budget: 35%		
III.A.2 Communication	1. To train, accredit and maintain close cooperation with the 46 county veterans affairs officers. 2. To respond to requests from constituents, to include federal and state legislators	State	266,090	State	6763	Tables 7..3-1, 7.3-2
		Federal		Federal		
		Other		Other		
		Total	266,090	Total	6763	
		% of Total Budget: 24%		% of Total Budget: 24%		
III.A.2 Advocacy	To ensure veterans and their family members are able to navigate and understand complex federal and state benefits systems; and obtain earned financial and medical benefits.	State	432,410	State	603,394	Tables 7..3-1, 7.3-2
		Federal		Federal		
		Other		Other		
		Total	432,410	Total	603,394	
		% of Total Budget: 39%		% of Total Budget: 39%		

Below: List any programs not included above and show the remainder of expenditures by source of funds.

Collaboration with SC Veterans Advocacy Council, National Association of State Directors of Veterans Affairs, VA Regional Office and three VA Medical Centers.

Remainder of Expenditures:	State	22,175	State	
	Federal		Federal	
	Other		Other	
	Total	22,175	Total	
	% of Total Budget: 2%		% of Total Budget: 2%	

* 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

1.1 **How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities; b) performance expectations; c) organizational values; d) ethical behavior?**

- SCOVA staff meetings involving all the SCOVA staff (from around the state) are held yearly.
- 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 a 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 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 (CVAOs), state resource personnel, Veterans Service Organizations (VSOs), 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 performance measures do senior leaders regularly review to inform them on needed actions?
- Veterans and families assisted as evidenced by:
    o Veteran contacts for benefits' information (medical, educational, etc…).
    o Claims filed for VA benefits for service connected conditions.
    o 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, 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 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 and the accomplishment of strategies objectives?**
- 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 do senior leaders create an environment for organizational and workforce learning?**
- By emphasizing need for training.
- By making training a part of overall mission of the agency.
- By emphasizing training and learning as keys to upward mobility.

1.10 **How do senior leaders 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?**
- By personalizing the workforce with individual awards.
- Being seen as strong supporter of reward and recognition programs.
- By being seen as a caring leader and a past of the whole team concept.

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.**
- Participate in community activities that support the veterans' population.

- Participate in communities outreach programs for homeless veterans.
- Conduct community workshops for veterans to educate them about available benefits.
- Participate in community organizations that recognized the contributions of veterans to the community.
- Advocate for veterans' benefits which contributes to the financial well being of their community.
- 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; 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; 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 and customer preferences; d) workforce capabilities and needs; e) organizational continuity in emergencies; f) 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

<table>
<tr><td colspan="4" align="center">**Strategic Planning ***</td></tr>
<tr>
<td>**Program Number and Title**</td>
<td>**Supported Agency Strategic Planning Goal/Objective**</td>
<td>**Related FY 09-10 and beyond Key Agency Action Plan/ Plan/Initiative(s) and Timeline for Accomplishing the Plan (s)**</td>
<td>**Key Cross References for Performance Measures***</td>
</tr>
<tr>
<td>III.A.2 Program Management</td>
<td>1. Work with National Cemetery Administration to efficiently and effectively operate first state's veterans' cemetery. 2. Research and compile the South Carolina War</td>
<td>1. Upgrade and modernize state veterans' cemetery. 2. Recruit and hire 2 authorized FTE to compile the "War Roster."</td>
<td>See paragraph 7.1</td>
</tr>
</table>

Strategic Planning *			
Program Number and Title	Supported Agency Strategic Planning Goal/Objective	Related FY 09-10 and beyond Key Agency Action Plan/ Plan/Initiative(s) and Timeline for Accomplishing the Plan (s)	Key Cross References for Performance Measures*
	Roster.		
III.A.2 Communication	1. Provide appropriate training to staff and County Veterans Affairs Officers. 2. Encourage and facilitate open communications with federal VA and Department of Defense agencies, the veterans' service Organizations, County Veterans Affairs Officers, and state and federal legislators	1. Schedule initial accreditation and refresher training classes as needed. 2. Continue to attend meetings and aggressively seek opportunities for continuous collaboration. Provide accurate and timely responses to inquiries.	Tables 7.3-1; 7.3-2
III.A.2 Advocacy	Ensure veterans and their family members are able to understand and navigate complex federal and state benefits' systems and obtain earned financial and medical benefits.	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.	Tables 7.3-1; 7.3-2

2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary?
Very well, they are tailored directly to our challenges.

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?
- 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.

2.4 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.

2.5 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.

2.6   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 on the website address for that plan.
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   What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?
- SCOVA website
- Workshops
- County Veterans Affairs Officers
- Offices at VA Regional Office and VA Medical Centers

- Through these accesses veterans have several avenues to seek information, conduct business, and/or make complaints on either state or county level, or both.

3.4 **How do you measure customer/stakeholder 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.
- By direct feedback from veterans and their dependents.

3.5 **How do you use information and feedback from customers/stakeholders to keep services and programs relevant and provide for continuous improvement?**
- Adjust programs based on needs of customers.
- Incorporate customers/stakeholder ideals as a priority in determining agency programs and goals.
- Allow agency to be customer/stakeholders driven.

3.6 **How do you build positive relationships with customers and stakeholders to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder 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 Air Force Base, Charleston Naval Weapons Station, Charleston Air Force Base, Beaufort Marine Corps Air Station Marine Corps Recruit Depot 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 select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout your organization?**
- By using same reporting mechanisms throughout organization.
- Information collected is determined by needs of veteran population.

4.3 **What are your key measures, how do you review them, and how do you keep them current with organizational service needs and directions?**
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:
  - o veteran contacts for benefits' information (medical, educational, etc.).
  - o claims filed for VA benefits for service connected conditions.
  - o 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, reliability, 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 workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?

- 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 2) 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 reach 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.

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 and advancement.

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 training needs for your workforce, including job 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?**
- 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, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process 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 work 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 evaluate, 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 $138.8 million to a total of $1.021 billion**.

Additionally, progress on the construction and equipping of the cemetery was monitored daily by the SCOVA staff assigned to the cemetery and by the staff in Columbia. Weekly meetings were held with the cemetery staff, the Budget and Control Board Project Manager, and the contractor. These meetings were detail oriented and compared to the construction timeline for progress, which resulted in a completed task with the opening and ownership of the cemetery.

7.2   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 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 seven fiscal years are as follows:

Table 7.2.1 – Veterans' Affairs Free Tuition Program Measures

Measure	FY 03-04	FY 04-05	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10
# Students Applying	512	540	414	371	533	544	583
# Students Approved	388	381	311	241	291	299	323
# Students Enrolled	1182	1049	1095	1409	1660	1696	1918

7.3 **What are your performance levels 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
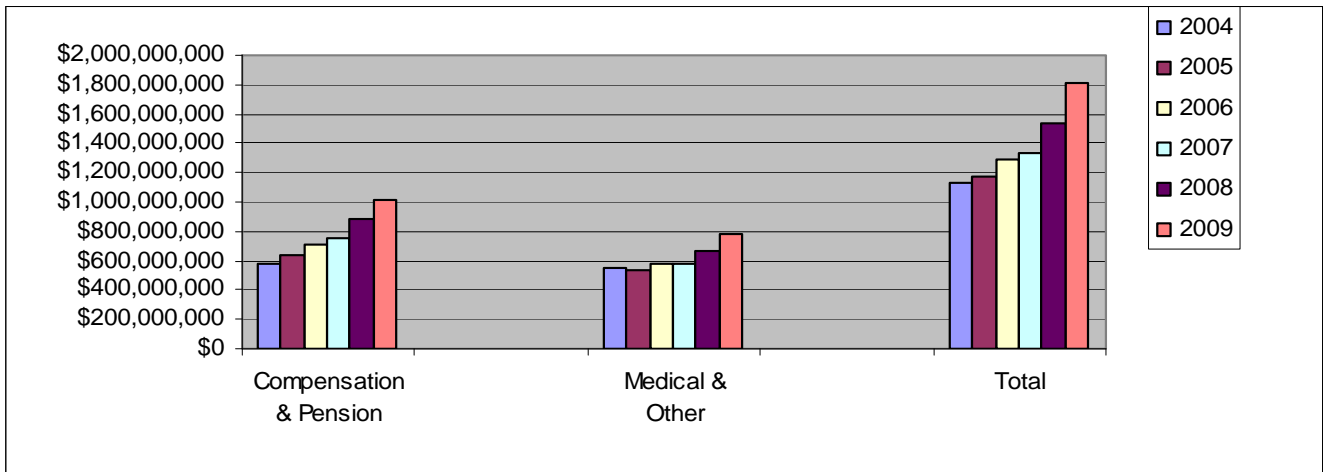
Compared with Kentucky, Louisiana, and Maryland (states with comparable veteran populations), VA expenditures in South Carolina have increased over the past three federal fiscal years and exceeded comparison state's expenditures as evidenced by Figure 7.3-2. This positive trend is a result of the Governor's Office of Veterans' Affairs dedicated advocacy efforts on behalf of South Carolina veterans.

FY 2009 ─ SC - $1.889 billion (408,747 veterans)
LA - $1.454 billion (312,087 veterans)
KY - $1.633 billion (339,942 veterans)
MD - $1.584 billion (476,202 veterans)

Figure 7.3-2 VA Expenditures Comparison Data
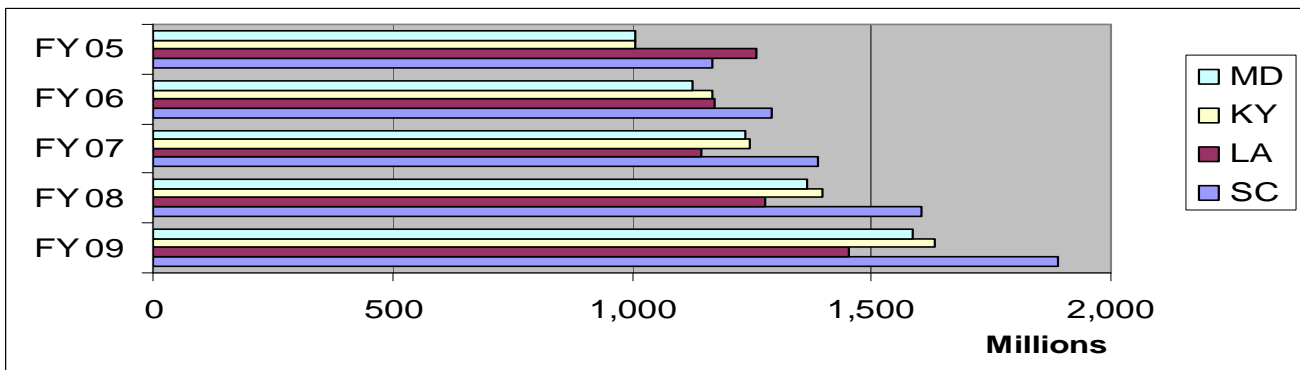
7.4 **What are your performance levels and trends for your key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, and workforce climate including workplace health, safety, and security?**
The SCOVA complies with the OEPP 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 2008-2009 data. VA expenditures for South Carolinians increased over 17% 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.