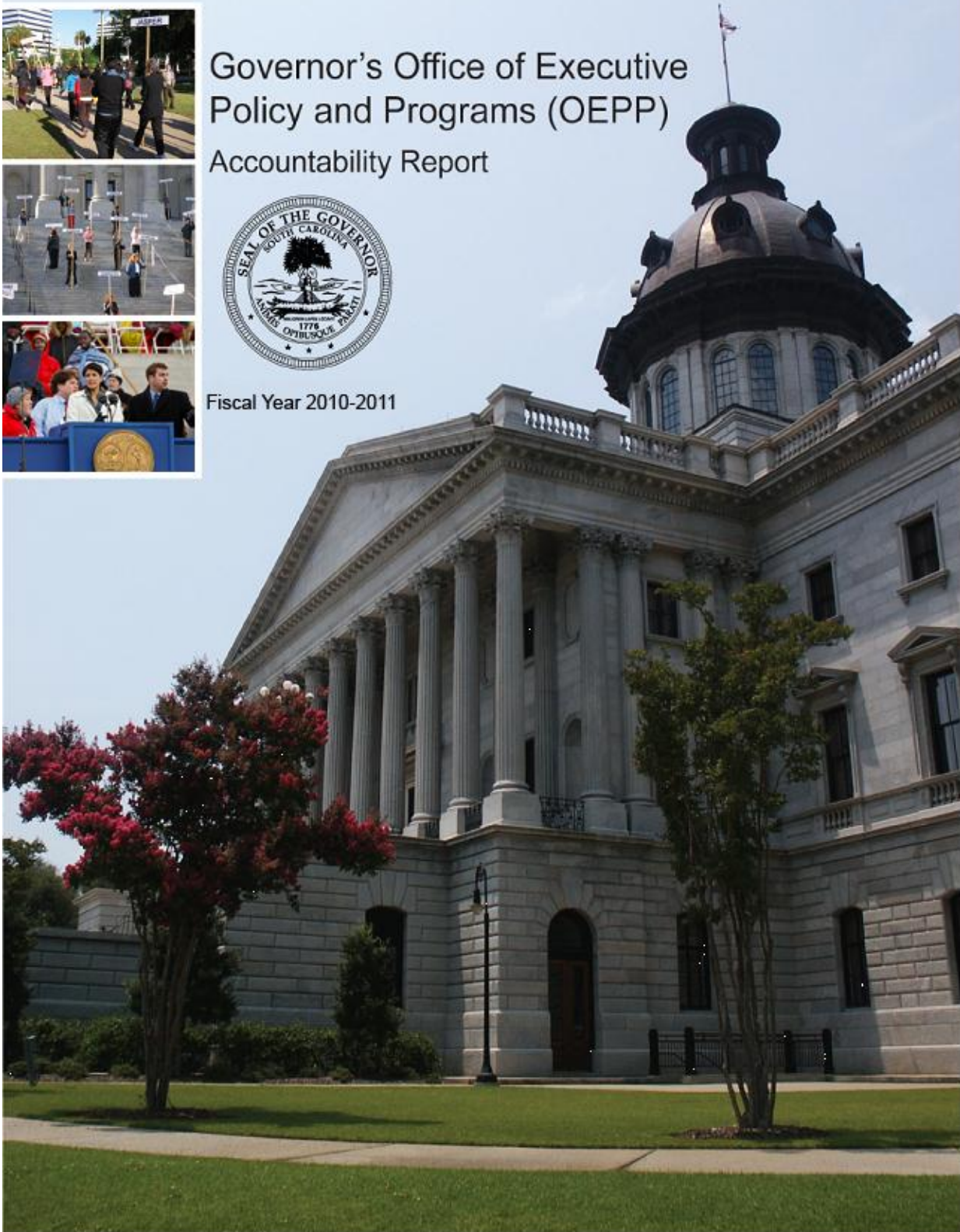


STATE OF SOUTH CAROLINA

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



Fiscal Year 2010-2011



Accountability Report Transmittal Form

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

Date of Submission: September 15, 2011

Agency Director: Christine Glover – Director of Administration

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Agency Contact's Telephone Number: 803-734-0432

2010-2011 Accountability Report

Governor's Office of Executive Policy and Programs

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

The individual offices of OEPP are:

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

Governor's Office

**Office of Executive
Policy and Programs**

2010-2011 Accountability Report

Governor's Office of Executive Policy and Programs

Section I. Executive Summary

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

Mission Statement:

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 11 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. Specific information for the 11 OEPP Offices 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 fiscal responsibility
- Maintain a commitment to servant leadership

2. Major Achievements for FY 2010-2011

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 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.
- b) Foster Care Review Board supported local foster care review board volunteers, who donated 14,928 hours in service to children and families involved with the foster care system. Local foster care review boards held 434 individual local review meetings and conducted 8,130 reviews for 4,986 children.
- c) Office of Veteran's Affairs responded to requests for assistance from over 85,890 constituent contacts. 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 \$2.09 billion in federal veterans' benefits, medical and financial, were realized in South Carolina in FY 2010.

- d) During FY 2010-2011, OSMBA processed 189 applications for certification eligibility and more than 200 minority contracting reports from agencies. 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.
- e) Continuum of Care served 577 children during FY 2010-2011. There were 117 children/adolescents accepted for full case management services and 138 were discharged.
- f) Client Assistance Program resolved 207 full cases without resorting to formal hearings or litigation, and provided outreach to 2200 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 674 new volunteers and served 10,024 children in 2010-2011, an increase of 1,193 over 2009-2010. In addition, 100% of all children in child abuse and neglect cases in 45 counties were served. GAL was awarded over \$141,000 in three grants to support National Court Appointed Special Advocates, Public Awareness Trainers and volunteers, and procure equipment to promote volunteer recruitment and county operations.
- h) Development Disabilities Council assisted Fort Mill School District 4 to develop a program called It's My Life: Student Directed IEPs and Transition Plans. This grant has served students with disabilities ages 13 to 21 in the Fort Mill District by providing self-advocacy training and facilitating student involvement in transition planning. This has enabled students to have the skills and opportunities they need to make choices about their future. In addition, Project SEARCH, a national model for high school adult transition, was researched and a feasibility study was conducted, to bring this program to the state of South Carolina to provide increased opportunities for students to experience a variety of jobs to assist them in selecting jobs that matched their interests and abilities. New programs to increase the number of employers who hire people with disabilities were also created. All strategies promote advocacy, build capacity, and represent systems change.
- i) Office of Economic Opportunity, through the OEO Weatherization and Weatherization ARRA grant shops weatherized a record of 2,548 and 823 houses, respectively, for a total of 3,371 dwellings weatherized. In addition, the Emergency Shelter Grants Program (ESGP) has provided financial and non-financial services to a total of 32,476 homeless individuals or individuals at-risk of becoming homeless.
- j) OEPP Finance Office has continued to make significant progress towards adopting the SCEIS system to the unique financial requirements of the Governor's Office and OEPP divisions.
- k) OEPP Information Technology unit completed network upgrades, increasing network security through a redesign of the network infrastructure, and the addition of improved network firewall hardware. In addition, the network operating system and email systems were replaced with more current and more secure systems.

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) Continue to refine the implementation of the SCEIS Systems, Applications, and Products in Data Processing (SAP) for the Governor's Office to provide greater efficiency and compatibility with State-wide adaption of SCEIS.

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 and strategizing personnel re-allocation.
- 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. Those units within OEPP receiving federal and or other funds filled vacancies with transfers from other units within OEPP where possible instead of recruiting externally. OEPP also implemented a ten day furlough for all employees during FY 2010-2011 to address reduced funds through budget cuts.
- d) OEPP has prepared to restructure IT functions and will further explore restructuring administrative functions during FY2011-2012.

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

5. OEPP’s operational 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. Number of employees

There were 278 employees within OEPP as of June 30, 2011. The breakdown of employee classifications is as follows:

<u>174</u>	Classified	<u>6</u>	Unclassified
<u>5</u>	Temporary	<u>62</u>	Temporary (Time Limited)
<u>31</u>	Temporary (Grant)	<u>0</u>	Contract

7. 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

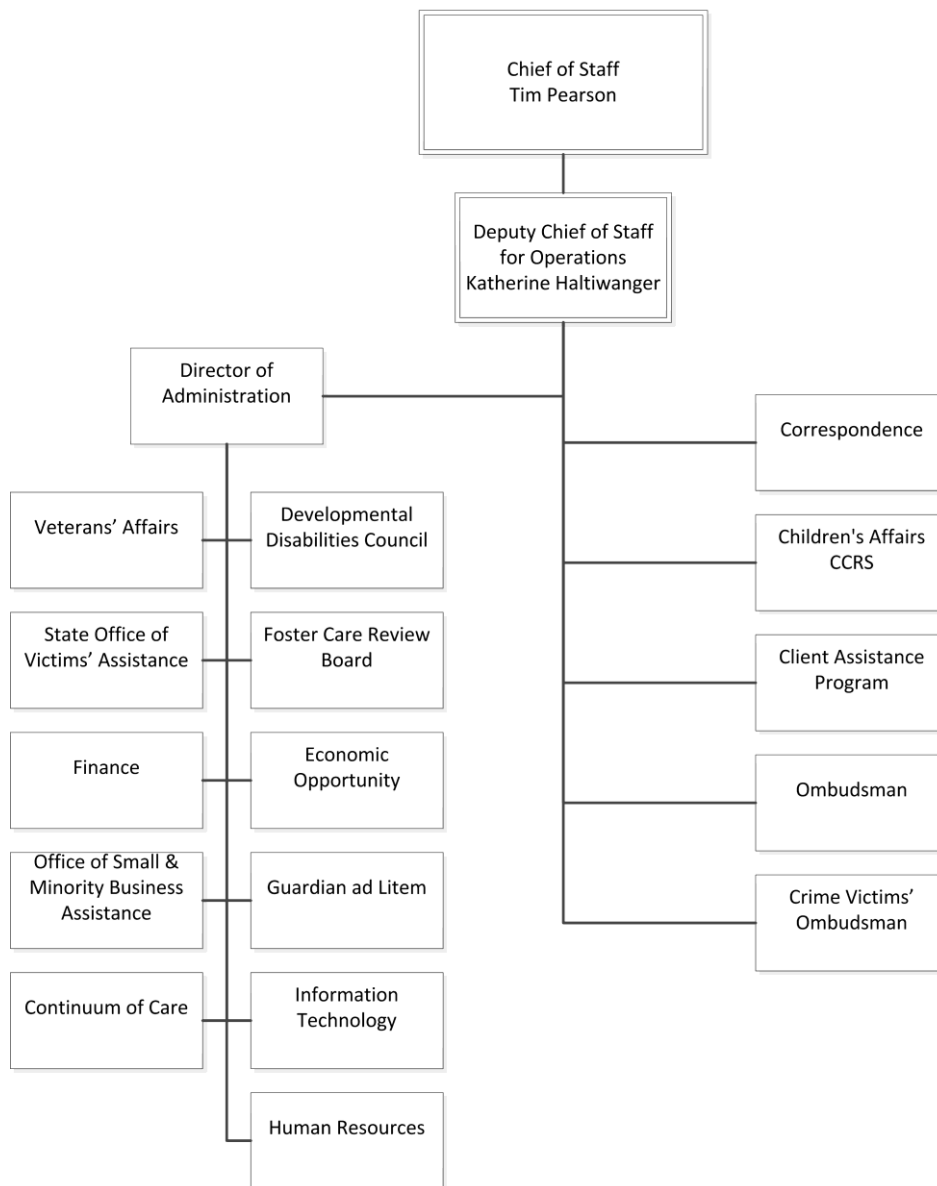
The methods used by the Office of Administration within OEPP include:

- a) Ensure all individuals hired in supervisory positions undergo in-depth management training.

- b) 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 assess any barriers to the provision of services, determine potential support needed from administration, identify resources needed and help facilitate/ provide needed support.
- c) Closely examine all processes within OEPP to prioritize budget requests and to advocate with the legislature for additional resources.
- d) Continuously modernize the IT infrastructure, enhance IT security, and provide for disaster recovery.

9. Organizational Structure

Office of Executive Policy and Programs



10. Expenditures/Appropriations Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 10,258,523	\$ 3,995,911	\$ 9,895,754	\$ 3,140,380	\$ 12,834,847	\$ 3,558,467
Other Operating	\$ 16,665,349	\$ 554,442	\$ 16,125,026	\$ 782,399	\$ 22,646,766	\$ 343,940
Special Items	\$ 229,105	\$ 229,105	\$ 228,063	\$ 228,063	\$ 248,138	\$ 248,138
Permanent Improvements						
Case Services	\$ 2,381,388	\$ 1,605,858	\$ 1,177,454	\$ 729,701	\$ 3,942,885	\$ 992,885
Distributions to Subdivisions	\$ 100,469,839	\$ 1,142,288	\$ 87,632,401	\$ 184,538	\$ 74,789,940	
Fringe Benefits	\$ 3,076,098	\$ 1,482,576	\$ 3,244,263	\$ 1,026,476	\$ 4,277,922	\$ 1,138,861
Non-recurring	\$ 85,457	\$ 85,547	\$	\$	\$ 750,000	
Total	\$ 133,165,759	\$ 8,292,147	\$ 118,302,961	\$ 6,091,557	\$119,490,498	\$ 6,282,291

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross References for Financial Results*
		State:		State:		
I.A. 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:	693,730	State:	732,564	
		Federal:	1,124,790	Federal:	521,649	
		Other:	100,000	Other:	14,996	
		Total:	1,918,520	Total:	1,269,209	
		% of Total Budget:		% of Total Budget:		
III. A. 4. Ombudsman - Client Assistance Program (CAP)	To advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Dept. Commission for the Blind, and Independent Living Programs in the State.	State:		State:		See individual report
		Federal:	131,143	Federal:	146,543	
		Other:		Other:		
		Total:	131,143	Total:	146,543	
		% of Total Budget:		% of Total Budget:		
II. A. 4. 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:	4,060,366	State:	2,521,887	See individual report
		Federal:		Federal:		
		Other:	2,979,628	Other:	2,431,208	
		Total:	7,039,994	Total:	4,953,095	
		% of Total Budget:		% of Total Budget:		
I.A. Administration - Correspondence (Corr.)	To track the status of all mail routed throughout the Governor's Office and to provide assistance in responding.	State:	293,668	State:	171,429	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	293,668	Total:	171,429	
		% of Total Budget:		% of Total Budget:		
III. A. 4. Ombudsman - 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:		State:		See individual report
		Federal:		Federal:		
		Other:	187,178	Other:	140,762	
		Total:	187,178	Total:	140,762	
		% of Total Budget:		% of Total Budget:		
III.A. 5. Developmental Disabilities Council (DDC)	To administer and monitor federal grants to sub-grantees for services for persons with developmental disabilities.	State:	53,638	State:	42,740	See individual report
		Federal:	835,252	Federal:	1,072,244	
		Other:		Other:		
		Total:	888,890	Total:	1,114,984	
		% of Total Budget:		% of Total Budget:		
III.A. 7. 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:	100,864,959	Federal:	88,018,221	
		Other:	92,388	Other:	72,098	
		Total:	100,957,347	Total:	88,090,319	
		% of Total Budget:		% of Total Budget:		

II.A.3.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:	539,524	State:	444,134	See individual report
		Federal:		Federal:		
		Other:	666,651	Other:	571,099	
		Total:	1,206,175	Total:	1,015,233	
		% of Total Budget:		% of Total Budget:		
II.A. 1. 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:	1,065,887	State:	884,600	See individual report
		Federal:	35,274	Federal:		
		Other:	3,340,563	Other:	4,625,609	
		Total:	4,441,724	Total:	5,510,209	
		% of Total Budget:		% of Total Budget:		
II.A. 2. Children's Affairs - 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:	53,434	State:	17,539	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	53,434	Total:	17,539	
		% of Total Budget:		% of Total Budget:		
III. A.4. 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:	246,522	State:	94,463	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	246,522	Total:	94,463	
		% of Total Budget:		% of Total Budget:		
III. A. 6. 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:	121,823	State:	88,823	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	121,823	Total:	88,823	
		% of Total Budget:		% of Total Budget:		
III. A.1.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:	14,397	State:		See individual report
		Federal:	4,680,239	Federal:	5,355,931	
		Other:	9,787,175	Other:	9,146,519	
		Total:	14,481,811	Total:	14,502,450	
		% of Total Budget:		% of Total Budget:		

III. A.2. Veterans' Affairs (OVA)	To be chief advocate for all veterans issues in South Carolina. This includes state and federal benefits, eldercare, compensation, pension, and burial.	State:	926,817	State:	905,892	See individual report
		Federal:	495	Federal:		
		Other:	47,877	Other:	94,526	
		Total:	975,189	Total:	1,000,418	
		% of Total Budget:		% of Total Budget:		
Remainder of Expenditures: Special Items	Remainder of expenditures applies to various fees, pass through funds and SOVA special funds.	State:	222,341	State:	187,486	
		Federal:		Federal:		
		Other:		Other:		
		Total:	222,341	Total:	187,486	
		% of Total Budget:		% of Total 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 OEPP intranet web site contains all Governor’s Office Personnel Policies and Procedures, and is available to OEPP employees.

1.2 How do senior leaders establish and promote a 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 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 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, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?

The 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 and the accomplishment of strategic 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 organizational 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 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 and members of their staff often support community organizations relevant to their office's mission and customers. OEPP staff participate in work-related associations: SC Government Webmasters, 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 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.

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 redesigned the network infrastructure for all OEPP supported facilities, and significantly improved security of the network. 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/stakeholder 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 to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder 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 for 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, reliability, 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. Information Technology staff updated network security and maintained all computers with secure operating systems and anti-malware software.

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 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 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 was involved with mentoring staff to develop skills to improve in performance. OEPP has a Standardized Operational Procedural Booklet that outlines 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. Thirteen (13) 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.

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 the past year, we have offered 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 "Sexual Harassment."

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.

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, Lexington Medical Center conducted a follow-up session with individual employees to help address their noted medical concerns.

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 are 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, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process 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 have worked diligently to meld OEPP business practices with the SCEIS system in order to maximize the potential benefits and efficiencies of that system. OEPP has continued to update, modernize, and improve our information technology which will help ensure that we can remain current with IT needs. Our Human Resources Office continued to provide guidance and training on complex personnel and supervisory issues.

As stated in 2.1 OEPP Information Technology staff redesigned the network infrastructure for all OEPP supported facilities, and significantly improved security of the network as well as updating the email system.

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 customers. This process 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 to 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 to 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 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 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 2010-2011	FY 2009-2010	FY 2008 – 2009
Job Vacancy Postings:	65	59	64
Applications Processed:	7,025	8,613	7,638
New Hires:	49	54	57
	17 FTE 12 Time Limited 20 Temp Grant	19 FTE 15 Time Limited 20 Temp Grant	36 FTE 11 Time Limited 10 Temp Grant
Terminations:	65 37 FTE 10 Time Limited 18 Temp Grant	60 43 FTE 12 Time Limited 5 Temp Grant	54 38 FTE 10 Time Limited 6 Temp Grant
Turnover (FTE):	16%	17%	15%

Table 7.4.2 OEPP Termination Statistics:

Primary reasons reported for termination of employment in exit interviews. FY 10-11	
Career Change	18%
Compensation	18%
New job (other state agency)	18%
Relocation:	14%
New job (outside state government):	9%
Issues with Supervisor	9%
Other (personal)	9%
Family Issues	5%

Table 7.4.3 OEPP Exit Interviews:

Exit interviews revealed the following information about direct supervisors.	
The rating choices were (1) Almost always, (2) Sometimes, or (3) Never:	
Topic	Rating Average
Demonstrated fair/equal treatment:	1.4
Provided recognition on the job:	1.5
Developed cooperation and teamwork:	1.6
Encouraged/listened to suggestions:	1.7
Resolved complaints and problems:	1.6
Followed policies and procedures:	1.4
Provided clear performance expectations:	1.6
Provided feedback regarding my work:	1.4
Exit interviews revealed the following information about employment with the Governor's Office and the employee's Division.	
The rating choices were (1) Excellent, (2) Good, (3) Fair, or (4) Poor:	
Topic	Rating Average
Cooperation within your office:	1.7
Communication within your office:	1.8
Communication within Governor's Office:	2.1
Work Environment:	2.1
Morale:	2.3
Potential for career growth:	3.2
Training opportunities:	2.2
Use of your skills/abilities:	2.0
Flexible schedule:	1.8
Work hours:	1.5
Compensation:	2.9
Benefits:	2.1
Exit interviews revealed the following information about whether the employee would consider returning to employment with the Governor's Office in the future:	
Yes: 81%	No: 19%

OEPP's Human Resources Office reports the agency's Affirmative Action Plan goal attainment annually to the State Human Affairs Commission. OEPP currently ranks 12th out of 76 state agencies for goal attainment. The results for the last three reporting cycles are:

Table 7.4.4 OEPP EEO/Diversity:

YEAR	GOAL ATTAINMENT
2011:	93.1%
2010:	94.3%
2009:	94.2%

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

Please refer to 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 to the individual reports included in the Appendices.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Ombudsman, Office of Children's Affairs and Children's Case Resolution System

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 2010-2011

- A. Worked, with the Governor, to staff over 140 Open Door cases and their outcomes
- B. Successfully handled 130 "walk-ins"

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

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.

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

- 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.

2. Key customers groups and their key requirements/expectations AND

3. Key stakeholders groups

- 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 suppliers and partners

- Governor
- OEPP Offices
- City, County, State and Federal Government offices

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

2 Classified 5 Unclassified.

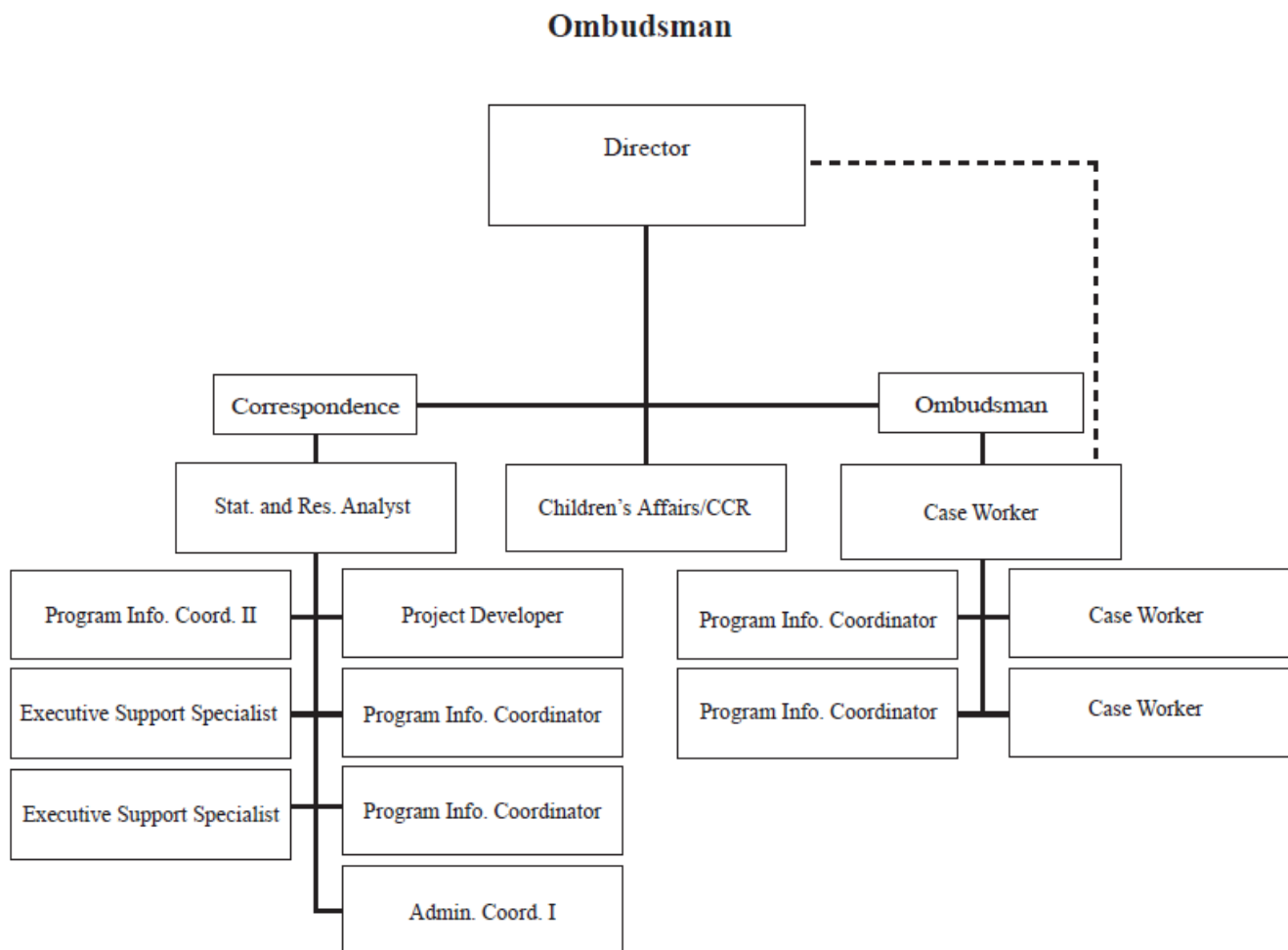
7. Regulatory environment under which your organization operates

- Constituent Services and OCA are regulated by the Governor and her Senior Staff.
- CCRS operates according to Section 20-7-5210 of the South Carolina Code of Laws.

8. Performance improvement systems

- 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

9. Organizational Structure



10. Appropriations/Expenditures Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 40,116	\$40,116	\$13,507	\$13,507	\$36,523	\$13,507
Other Operating	583	583	112	112	90	90
Special Items	0	0	0	0	4,054	4,054
Permanent Improvements						
Case Services	0	0	0	0	0	0
Distributions to Subdivisions	0	0				
Fringe Benefits	12,735	12,735	3,920	3,920	3,920	3,920
Non-recurring						
Total	\$53,434	\$53,434	\$17,539	\$17,539	\$44,587	\$44,587

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

10. Appropriations/Expenditures Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$180,459	\$180,459	\$68,962	\$68,962	\$60,789	\$60,789
Other Operating	2,205	2,205	3,218	3,218	1,629	1,629
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	63,857	63,857	22,282	22,282	21,276	21,276
Non-recurring						
Total	\$246,522	\$246,522	\$94,462	\$94,462	\$ 83,694	\$83,694

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Areas Chart

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 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	53,434	State	17,539	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	53,434	Total	17,539	
		% of budget:	0%	% of budget:	0%	

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 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	246,522	State	94,462	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	246,522	Total	94,462	
		% 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 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?

- 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 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 a 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 programs, services, facilities and operations, including associated risks?

Our office addresses impact on the public mainly through constituent and agency feedback, Press Briefings and News Releases issued by 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 follow all guidelines and policies in place. Additionally, the Office makes every effort to practice fiscal responsibility by utilizing e-mail whenever possible, for example.

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

Senior leadership regularly:

- Evaluates the percentage of written inquiries responded to within 5 days or less
- Evaluates the percentage of telephone inquiries responded to within 24 hours
- Evaluates the percentage of agency referrals which have not received a response within 30 days

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?

- 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 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 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. Additionally, 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 other community service programs such as blood drives, food drives, church youth groups, and educational programs.

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. Senior leaders advise caseworkers daily and meet often with individual employees to determine and discuss progress and future planning for the office. Reports are used to track progress and caseloads.

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?

The strategic planning process is evaluated and improved through individual and group meetings, 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.

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 key 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.

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 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 electronic mail.

3.4 How do you measure customer/stakeholder 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 continuously updates files so information is readily available for customers in need of assistance or referral. Staff remains receptive to periodic program changes and updates from state agencies regarding services they provide and other programs.

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

- 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 Governor’s “Open Door After Four Program” increases collaboration between the Governor, her 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 EPMS and unclassified evaluations. 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 are not reached, a change in the process must be made. Constituent Services and OCA consistently meet the designated time frames 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, how do you keep them current with your needs and direction?

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 accumulated 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: 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?

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 location? Give examples.

CS, OCA and CCRS staff communicates via electronic mail, 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 who posts the job description. After selecting resumes, interviews are conducted, which often leads to the hiring of a new employee. From this point, the new employee spends time with each member of the workforce for training until they are able to handle their own workload.
- 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 to 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 is 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 rotates 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?

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 even if the case does not result in the desired outcome, the customer should 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

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?

- 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, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process 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 e-mailed 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 assures that key performance requirements are being maintained. This recording of information also provides a method of tracking progress and expectations.

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

- Bi-weekly, annual and quarterly reporting.
- Continuously research and share current information about services available to constituents.
- Customer feedback from senior leaders as well as customer feedback.

6.6 What are your key support processes, and how do you evaluate, 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.

**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 services 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 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
Written inquiries received	5569	4091	6803	8776	7214
Percentage answered within 5 days or less	99%	92%	97%	98%	88%
Phone inquiries received	8632	8207	13,436	16,826	8237
Percentage answered within 24 hours or less	98%	97%	96%	97%	98%
Written agency referrals sent	387	408	1,446	1,747	1356
Percentage of agency referrals responded to and closed with constituent	61%	95%	97%	98%	97%

Table 7.1.2 CCRS Cases

	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
Cases receiving CCRS funds	1	2	1	0	0
Cases monitored by CCRS - no pay	1	6	3	1	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?**

Staff is encouraged to make wise and efficient use of work resources and materials. For example, the “clean” side of waste paper is used for drafts.

- 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?**

As a small staff in a small area, we have a genuine care and concern for one another’s safety and well being and are therefore able to identify and address issues early on.

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

There are not any regulatory reports required for Constituent Services or CCRS. The South Carolina community continues to utilize Constituent Services, OCA and CCRS as an effective tool to navigate state government programs, services and resources.

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

Neither Constituent Services nor CCRS have performance levels for key measures of financial performance.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Client Assistance Program

Section I. Executive Summary

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

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 2010-2011

- a) The CAP resolved 207 full cases without resorting to formal hearings or litigation.
- b) The CAP provided outreach to 2200 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 areas in keeping with our CAP mission. It is an opportunity to monitor our progress throughout the year and review and revise ways to achieve set goals.

Section II - Organization Profile

- 1. Main products and/or services and the primary methods by which these are delivered**
- 2. Key customers groups and their key requirements/expectations**
- 3. Key stakeholders 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)	<ul style="list-style-type: none"> • Alternative dispute resolution services provided through personal representation of the client. • Information and referral services provided by telephone and personal contact. • Outreach to underserved population groups with disabilities throughout the state. 	<ul style="list-style-type: none"> • Persons with disabilities and their families, and other consumers who desire information about services and benefits under the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act, Title I. • Clients and client applicants who are disputing services provided by the state Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs. 	<ul style="list-style-type: none"> • 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. Operational locations

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

6. The number of employees

2 Classified

7. Regulatory environment under which your organization operates

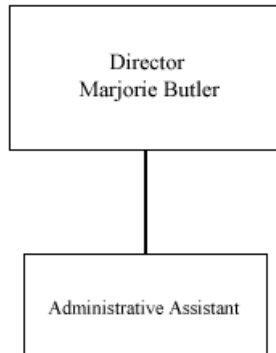
The Federal Rehabilitation Act of 1973, as amended.

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 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$77,720		\$81,199		\$97,000	
Other Operating	\$33,252		\$44,613		\$23,680	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$20,171		\$20,730		\$34,320	
Non-recurring						
Total	\$131,143		\$146,542		\$155,000	

Other Expenditures

Sources of Funds	FY 10-11 Actual Expenditures	FY 11-12 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
Client Assistance Program	To Advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs in the state.	State		State		Chart III.7.1.1 Chart III.7.2.1
		Federal	131,143	Federal	146,542	
		Other		Other		
		Total	131,143	Total	146,542	
		% 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 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?**
- Staff weekly meetings with open communication for direction and training.
 - Provide staff training for professional development.
 - 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?**
- Customer service and client confidentiality emphasized at all times.
 - Review verbal and written client satisfaction surveys for program improvement.
 - CAP staff training ensures that clients and consumers with disabilities are always treated with respect and dignity.
 - Staff training on current agency's policies and laws relevant to serving persons with disabilities.
 - Staff participates in national CAP Advocacy Listserv on the Internet to share current information and strategies with other CAP programs to better serve our customers.
- 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?**
- Recorded timeliness of responding to client concerns and resolution.
 - Customer satisfaction surveys.
 - 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 the organizational values?**
- a) Weekly staff meetings for client case reviews and information sharing.
 - b) “Open Door” policy for open 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 sharing in 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) Participates in available web casts and teleconferences on ever changing complexities in serving persons with disabilities.
 - b) Program and personal development training for staff.
 - c) Staff keeps informed with available periodicals and other written information relating to person with disabilities.
- 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?**
- a) Staff meetings to exchange ideas, concerns, and accomplishments related to program goals.
 - b) Recognition for accomplishments reflected on annual employee performance report (EPMS).
- 1.11 How does senior leaderships 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
- b) Applications Program, Midlands Interagency Human Services Network, SC Assistive
- c) Technology Advisory Board, SC Independent Living Council, SC Commission for the Blind,
- d) Association for Education and Rehabilitation of the Blind and Visually Impaired, SC
- e) Vocational Rehabilitation Department, and other disability related community organizations.
- f) Staff participates in available community programs such as: Hadley School for the Blind, Vision Summit, Website Tester for Assistive Technology Project, and the SC Association of the Deaf.

**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 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 Strategic Planning Goal/Objective	Related FY 10-11 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Advocate and resolve cases at the lowest possible level in the alternative dispute resolution system.	Clients will receive appropriate services and become employed and/or live independently.	<ul style="list-style-type: none"> • 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.	<ul style="list-style-type: none"> • Exhibit and present at 19 conferences and/or groups for persons with disabilities. • Visited 6 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 relationship with other agencies and programs.
 - b) Analysis of the data of the annual CAP Federal report is best instrument for yearly comparison on 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 that plan.**
CAP federal mandated services and objectives are outlined in www.oepp.sc.gov/cap.

**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
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 I.

- 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 relating to services and persons with disabilities.
 - b) Attend annual CAP conference and other trainings related to better serving persons with disabilities.
 - c) Participate in national CAP advocacy listserv on the internet to share current information and strategies to better serve our clients with disabilities.

- 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?**
- CAP brochure given to every applicant of the Vocational Rehabilitation Department,
 - Commission for the Blind, and Independent Living Programs.
 - Access through office visit, telephone contact, TTY machine for deaf and hard of hearing, CAP website, and e-mail.
 - Consumer and community organization referrals.
- 3.4 How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?**
- Review written client CAP satisfaction surveys to make any adjustments if necessary to the way we are providing services. We mailed 150 surveys and 45 were returned.
 - Review of annual Federal CAP report data.
- 3.5 How do you use information and feedback from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?**
- Review input from agency state plans and public hearings to determine need for any changes to be considered for better serving persons with disabilities.
 - Participate on committees and boards established to better serve persons with disabilities.
 - Listen and make changes.
- 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.**
- Building positive and productive relationships with agencies and programs with open communication and feedback.
 - All clients are treated with respect, dignity, confidentiality, and sensitivity to their disability and issues of concern.

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?**
- Outlined by Federal Grantee.
 - 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?**
Using data 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, how do you keep them current with organization service needs and directions?**
- Annual Federal CAP report based on mandated federal program requirements.
 - Successful case resolutions at lowest alternative dispute resolution level without litigation.
 - Outreach efforts to traditionally underserved populations 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 annual Federal CAP report information with mandated guidelines for program on yearly basis.

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

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?

- a) Weekly staff meetings with open communication and mentoring.
- b) Attend available trainings for staff to enhance 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 location? Give examples.

- a) Regular staff meetings with open communication allowing more effective team work.
- b) Staff participation in teleconferences relating to CAP program and persons with disabilities.
- c) Participation by staff in agency and program trainings relating to policy 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) Employee positions are filled through OEPP Office of Human Resources with vacant job position 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 participation 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 plans?**
- 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) Development of personal leadership attributes discussed in staff meetings where staff is encouraged to continue with educational and training opportunities for personal and leadership development.
 - 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 plans?**
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 systems?**
Staff needs to demonstrate 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 full potential?**
Increase 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?**
- 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 organization?

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

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-mandated requirements.

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

Category 7: Results

7.1 What are your performance levels and trends for your 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?

- 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 08-09	FY 09-10	FY 10-11
Number of CAP Cases	206	184	207
Number of information and referral	3250	3285	4000
Number of outreach to underserved population groups throughout the state	2312	2765	2200

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?

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

Performance Measure	FY 08-09	FY 09-10	FY 10-11
Goal: Clients will express satisfaction with the services they receive			
Number of clients expressing “Very Satisfied”	80	48	30
Number of clients expressing “Satisfied”	6	9	11
Number of clients expressing “Not Satisfied”	2	1	4
Number of clients stating that they would use CAP services again	86	57	44
Number of clients stating that they would not use CAP services again.	2	0	1

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

Federal mandate determines our required program performance levels and auditing considerations. South Carolina CAP has not been audited in the past sixteen 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, 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.

2010-2011 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 2010-2011

- a) 96% of families who responded to a Continuum of Care survey felt they were involved in helping make treatment decisions for their child. Additionally, 93% of families who responded stated they will refer others families to the Continuum.
- b) The Continuum served 577 children during FY 2010-2011. There were 117 children/adolescents accepted for full case management services and 138 were discharged.
- c) The average number of days an applicant was on Continuum's selection list (days between completed application and selection) was 148 during the FY 2010-2011. Of those selected, 55% were on the selection list less than 90 days.
- d) The Continuum transitioned to the online scoring and reporting system of the Child and Adolescent Function Assessment Scale (CAFAS). Implementing the online CAFAS system has improved the Continuum's ability to monitor and report clients' functioning while reducing the expense of purchasing printed material.
- e) Our efforts to serve children in the community remained a high priority. 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 FY 2010-2011, on average, 79% of our children were living at home.
- f) The Continuum continues to partner with other child-serving agencies by participating in the South Carolina Child and Adolescent Policy Forum. The Continuum has administered over 50 Global Assessment of Individual Needs–Short Screener (GAIN-SS) assessments and participated in other No Wrong Door initiatives. Through the implementation of this interagency collaborative effort, Continuum staff members are better able to identify substance abuse issues and have greater access to referral services.
- g) During the FY 2010-2011, three Continuum employees served as staff in the South Carolina Youth Leadership Forum (YLF). This year, approximately 30 high school juniors

and seniors with disabilities participated in YLF in order to develop leadership skills. By all accounts, this year's forum was an overwhelming success.

- h) This year, the Continuum secured field placements for several master's-level social workers at two regional offices. These internships provided clinical experience for the interns and productive support workers for the Regions.

3. Key Strategic Goals for Present and Future Years

During FY 2010-2011, 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) During this fiscal year, the South Carolina State Medicaid Plan was amended to allow an array of rehabilitative behavioral health services (RBHS). The transition to provide RBHS as opposed to WRAP services required the Continuum to develop new procedures for contracting and monitoring services. The Continuum also modified procedures for tracking payment of services by requesting families to complete logs of times services are provided. As a result of the transition to providing RBHS, the paperwork required to contract for services increased threefold compared to the paperwork required to contract for WRAP services. This increase in administrative work came without an increase in administrative staff and affected regional and state offices.
- b) The Department of Health and Human Services (DHHS) now pays providers of RBHS directly. The Continuum had to develop time-consuming procedures for reviewing RBHS payments and it has been challenging to correct instances of inappropriate billing.
- c) The Continuum has been challenged by staff turnover this year—including an agency director. At times, staff shortages came during hiring freezes. Due to staff resignations, military leave, ten days mandatory furlough, and FMLA, there were periods when each Continuum office was under-staffed—by up to 50%.
- d) There continues to be a lack of certain services across the state. Due to budget constraints, other state agencies have reduced services and Medicaid has stopped reimbursement for some services. The combined effect of these factors has created a need for community-based and specialized residential services throughout the state.
- e) There continues to be a lack of a fully implemented and uniform monitoring system of third-party contracted providers' compliance with regulatory issues. Without independent oversight, Continuum staff members have difficulty receiving timely records of services. This in turn interferes with measuring clients' progress toward goals and making informed decisions.
- f) For six months during this fiscal year, DHHS required documentation of targeted case management services to include start and end times that calculated billing to the minute as

opposed to quarter hours. This new procedure substantially increased administrative work without a clinical benefit.

- g) Again this year, the Continuum was able to utilize carry forward funds from previous fiscal conservation efforts to help operate during 2010-2011. However, reductions in Federal reimbursements (Medicaid) as stated in a) - c), significant reductions (49%) 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)	<p>Case management for children with serious emotional challenges and their families.</p> <p>Through case management COC:</p> <ol style="list-style-type: none"> 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 	<ul style="list-style-type: none"> • Children/adolescents with serious emotional challenges who are clients of COC • Families of children/adolescents who are COC clients • Children and families who have made application for services • State Agencies and schools who serve emotionally challenged children • Service providers who serve emotionally challenged children. 	<ul style="list-style-type: none"> • In some instances, stakeholders are also partners. State agencies, schools, public and private 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 at 1205 Pendleton Street, Suite 372, Columbia, South Carolina 29201. Services are provided statewide through four regional and nine satellite offices. The regional offices are located in Columbia, Greenville, Florence and North Charleston; satellite offices are in Aiken, Aynor, Beaufort, Fort Mill, Gaffney, Greenwood, Seneca, Orangeburg, and Spartanburg.

6. The number of employees

50 Classified

1 Temporary

12 Temporary Grant

The above information reflects the number of filled positions. As of June 30, 2011, the Continuum had 20 unfilled FTE positions (19 classified and one unclassified) and seven vacant temporary grant positions. 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 four 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 five statewide Family Forums (annually)
- b) Requesting information/comments via Family Feedback surveys
- c) Obtaining comments from Teacher Feedback surveys
- d) Holding regularly scheduled meetings to discuss budget issues, staff performance, process improvement and communication
- e) Tracking data on Continuum service provision
- f) Meetings with state agencies (minimum monthly) and providers (quarterly)

9. Organizational Structure

Continuum of Care



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 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11- 12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 2,587,652	\$ 1,180,765	\$ 2,198,902	\$ 909,275	\$ 3,288,700	\$ 1,318,700
Other Operating	\$ 679,480	\$ 238,105	\$ 671,174	\$ 378,804	\$ 894,890	\$ 144,890
Special Items						
Permanent Improvements						
Case Services	\$ 2,333,511	\$ 1,605,858	\$ 1,161,135	\$ 729,701	\$ 3,392,885	\$ 992,885
Distributions to Subdivisions	\$ 644,222	\$ 644,222	\$ 184,538	\$ 184,538		
Fringe Benefits	\$ 795,129	\$ 391,416	\$ 737,347	\$ 319,569	\$ 1,152,679	\$ 363,806
Non-recurring						
Total	\$ 7,039,994	\$ 4,060,366	\$ 4,953,096	\$ 2,521,887	\$ 8,729,154	\$ 2,820,281

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
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	\$4,060,366	State	\$2,521,887	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 7.2.1 COC customer satisfaction 7.6.1 COC compliance with regulatory standards 7.6.2 COC use of vendors
		Federal		Federal		
		Other	\$2,979,628	Other	\$2,431,209	
		Total	\$7,039,994	Total	\$4,953,096	
		% 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 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 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) The Client Services Director, Regional Program Directors, and Clinical Consultants meet monthly 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) Bi-annual 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 ensure issues are addressed with a coherent plan.
- Staff are informed of our agency's progress toward 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.
- Video conferencing is used to communicate immediate issues with managers, supervisors, and clinical staff.

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

- The Continuum of Care conducts various satisfaction surveys, publishes and distributes parent training manuals, conducts family forums and provides resource information 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 programs, services, facilities and operations, including associated risks?

- The Continuum of Care worked with the DHHS, 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 clients' 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 for which the Continuum seeks Medicaid reimbursement (case management). 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 clients' 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, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?

The 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. 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. Supervision for professional social work licensure is available at no cost to the staff.

1.8 How do senior leaders create an environment for performance improvement and the accomplishment of strategic 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 organizational and workforce learning?**
Senior leaders encourage staff to explore new approaches to performing their jobs. Leaders support staff by approving leave and financial reimbursement (as money allows) for attendance at appropriate trainings that will expand staff's 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. 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 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.**
- 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 board president, 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 members participate on various councils and boards—such as the Humanities Council, Greenville Safe Communities Board, Muscular Dystrophy Association, Horry County Solicitor's Roundtable, Manna House of Florence, Palmetto State Law Enforcement Association, Greenville County Transition Cooperative, Youth Empowerment Programs, the Youth Leadership Forum, and Greenville County DJJ Community Case Management.
 - Continuum staff also participates on various work-related committees. Examples include No Wrong Door (Departments of Alcohol and other Drug Abuse Services, Mental Health, and Social Services) and numerous Department of Health and Human Services' workgroups on changes in the state service standards. Staff participates on interagency staffings (with schools, juvenile justice, social services, etc.) and helps sponsor various interagency group meetings. The Continuum is a team member of the Community Networks Collaborative in Lancaster and Chester Counties.

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.

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

The Continuum’s strategic objectives are clinical in nature and geared toward serving clients and their families. The strategic challenges the Continuum faced this fiscal year were largely administrative. Whenever possible, administrative staff addressed strategic challenges so staff members that interact directly with clients and families could focus on providing targeted case management. When faced with staff shortages, State Office personnel and regional managers fulfilled duties in the vacant positions.

Chart 2.2 Strategic Planning Chart for Continuum of Care

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 10-11 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. To ensure appropriate assessment, planning and service coordination for severely emotionally disturbed youth.	1.1 Children will demonstrate an increased ability to function in their communities while they are Continuum clients.	<ul style="list-style-type: none"> • Case management • Monitor child’s progress at home & 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 • Clinical consults • Supervisor consults • CAFAS assessments • Contact with child, family and service providers • Treatment planning meetings • Survey independent living providers to assess client’s progress • GAIN-SS assessments 	Tables: 7.1.1 7.1.2 7.1.4
	1.2 Children will function better in their school environments.	<ul style="list-style-type: none"> • Staff participation in school IEP planning • Clinical consults • 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.	<ul style="list-style-type: none"> • Case management • Monitor child’s progress at home & community • Supervisor consults • CAFAS assessments • Contact with child, family, & service providers • Family satisfaction survey • GAIN-SS assessments 	Tables: 7.1.1 7.1.2
2. To ensure severely emotionally disturbed youth have appropriate access to a full array of community based and residential services.	2.1 Clients will receive the services they need to maximize their functioning while in the least restrictive care.	<ul style="list-style-type: none"> • Utilize level of care process • Clinical 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 • GAIN-SS assessments 	Tables: 7.1.3 7.1.4 7.6.2

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 10-11 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 developmentally appropriate service systems.	3.1 COC transition age clients will be better able to live independently within the community setting.	<ul style="list-style-type: none"> • Case management • Clinical 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
	3.2 Clients with at least 1 year of service will be at the same or lower level of care after each quarter.	<ul style="list-style-type: none"> • Case management • Monitor child's progress at home & 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.	<ul style="list-style-type: none"> • Family satisfaction survey • Family forums (one per region) • Resource information 	Table: 7.2.1
	4.2 Families will improve their advocacy skills and be active participants in the design and delivery of services for their children.	<ul style="list-style-type: none"> • Contact with child, family and service providers • Treatment planning meetings • Parent training • Resource and advocacy information 	Table: 7.2.1
	4.3 Families will express an increased ability to manage the challenges presented by their children.	<ul style="list-style-type: none"> • Case management • Monitor child's progress at home & community • Clinical consults • Family feedback 	Tables: 7.1.1 7.2.1

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

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

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

See 2.1. Involved Senior and Regional Managers are responsible for communicating information within their region/unit; in addition, information is communicated via the Continuum's website. Annually, the Continuum publishes our "report card" that summarizes the status of our goals and outcomes.

2.5 How do you measure progress on your action plans?

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

- 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 Clinical Consultants
- Responses from family and teacher surveys
- Changes in level of care as indicated by the CALOCUS and monitored by Progress in Placement tool

2.6 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.

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

The strategic plan is not currently available on our website.

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	<ul style="list-style-type: none"> • To have assistance with obtaining services necessary to meet their individual needs • To reside in their home or the least restrictive environment • Other requirements are determined based on individual needs regarding treatment goals • (For families) to have an avenue for input and participation
Child serving state agencies	1. 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 of staff, 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. The Client Services Director is available to

assist and if issues persist, the COC Director intervenes. The Client Services Director hosted five family forums this year to meet with families and get their input and listen to their concerns. Additionally, families were asked to complete an anonymous survey and return it in a self-addressed stamped envelope.

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

Annually, the Continuum of Care sends surveys to our families and teachers asking them 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 Client Services 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)

Based on the specific feedback received, the Client Services Director and Senior Managers develop appropriate actions to address concerns and acknowledge success.

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 efforts to improve services. The Continuum also uses the Child and Adolescent Level of Care Utilization System (CALOCUS) to help determine the level of residential placement needed and transition to lower levels of care when appropriate.

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 Continuum participates in statewide interagency meetings and local collaborative. The surveys conducted by the Continuum initiate dialog with stakeholders. (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?

The Continuum has created extensive databases that collect information on clients' clinical presentation, placements, and functioning and contracts for services.

Quarterly, information from our databases is compiled to review the progress toward strategic goals and action plans.

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?

See 4.1. The Continuum's strategic plan, related goals and outcome measures are reviewed. Quarterly, Continuum staff at all levels review and makes decisions based on identified needs and trends identified.

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 annually) Case management (weekly) Clinical Consultations (quarterly) Stakeholder/customer surveys (annually) Independent Living Skills assessments (quarterly) Child and Adolescent Level of Care Utilization System-CALOCUS (at intake and when changes in placement are considered) Progress in Placement tool (bi-monthly) Child/Family contact expectations (monthly) Global Assessment Inventory of Needs—GAIN-SS (at time of intake)
Service Availability/ Delivery	Stakeholder/customer surveys (annually) Review of services received (quarterly) Review of selection frequency (bi-monthly)
Customer Satisfaction	Family Forums (annually—in each regional office and some satellite offices) Family/Parent feedback surveys (annually) Teacher feedback surveys (annually)
Compliance with Regulatory Standards	Internal audits (bi-annually)
Family Involvement	Family feedback surveys (annually) Family Forums (annually) 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?

Internal data is monitored and tracked for changes over time. Comparative data and information include:

- a) Measuring data on action statements and 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
- e) Generating ad hoc reports
- f) Tracking of trends (annually and over time) of all the above items

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

The Continuum uses real-time data when making decisions—specifically from our contract and client databases. Daily updates occur with all databases. The procurement database and fiscal expenditures are monitored for accuracy and completeness daily. Client data is monitored for integrity and accuracy; critical data changes are tracked. Health Insurance Portability and Accountability Act (HIPAA) procedures are in place to protect client confidentiality. In addition, Information Technology staff ensures the email 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 workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?

The accumulation of workforce knowledge assets is accomplished through written procedural manuals and directives, 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. The team approach to targeted case management facilitates a shared knowledge of various roles.

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?

Employee productivity is largely measured by targeted case management hours provided to clients and families. The Continuum assists employees with reaching productivity expectations and professional growth by mentoring through a team approach, guided supervision, and clinical consultations. Resources, such as reports from client management databases, are readily available to staff members to help them monitor progress toward strategic goals.

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

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 intranet website allows documentation and policies to be readily available. Business rules are in place for internal processes, which help outline specific actions. Statewide meetings are held annually for training and process refinement.

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. See 5.11.

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

The Continuum's Managers access workforce capability and capacity need. 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. Workforce capability is developed by an on-the-job training program and maintained through supervision and mentorship. The team approach to targeted case management is utilized to address capacity needs.

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 employee performance management system provides employees with clear performance expectations and feedback about work achievement. Staff are regularly informed of service delivery hours and progress in clients' functioning and treatment goals—all of which are directly related to action plans and strategic goals (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 training curriculum, which encompasses on the job training, classroom training, competencies tests, etc. Moreover, staff members may be selected to participate in a supervisory practices training program provided by the Department of Human Resources.

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 specialty trainers and opportunities for on-going training. The Continuum provides many training opportunities:

- General agency orientation.
- Detailed case management curriculum, with instructional and on-the-job training.
- Competency evaluations and reliability ratings on select assessment instruments for clinical and supervisory staff members.
- 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.
- Initial training for computer/office applications and ongoing training as needed.
- Internal staff (with specialized knowledge or skills) train and educate other staff.

The Continuum is a member of the No Wrong Door initiative, which coordinates general and specialized training thus increasing the availability and topics of training. The Continuum's Training Director routinely seeks feedback from staff about areas for training needs.

- 5.8 How do you encourage on-the-job use of new knowledge and skills?**
Once new knowledge and skills have been introduced, staff members shadow mentors, demonstrate the new skills under supervision, and receive feedback regarding performance. Staff complete annual training need's assessments.
- 5.9 How does employee training contribute to the achievement of your action plans?**
Staff must have the appropriate educational background and experience; the Continuum supplements with additional training. The Continuum's training program targets skills necessary for employees to achieve action plans.
- 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. Advancement often occurs when entry-level staff members achieve skills and experience needed to fill openings in higher-level positions. When staff members 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/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?**
Informal communication happens daily; formal communication occurs through the employee performance management system. Concerns and accomplishments within the regional operations are first addressed through staff and Regional Director, then the Client Services 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 social work licensure is available 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 controlled entry process, in most cases, is located in a building/complex that 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) Staff members in the field are issued mobile phones in order to increase their safety.

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 are essential skills that enable workers to provide quality services to our customers thereby 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.
- 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, have needs assessed, and are selected for services based on severity and need.
- Procedures are in place to ensure the correct and timely procurement of services.
- Service contact requirements between staff and our children, families and service providers have been established.

Business rules are addressed through directives and written procedures that outline and flowchart key work processes.

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 Continuum of Care addresses this in several ways:

- An experienced trainer who has provided case management services for emotionally 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.
- During this year, an online CAFAS system was implemented. This system increased the quality of assessments while decreasing the use of expensive paper products.
- Management staff reviews budgets, costs, and actual and projected expenditures.
- Data from the Service Authorization System and fiscal transaction tracking systems 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 providers is available online for state and regional staff.

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

The Continuum's policy, directives, and operational procedures are in place and online for easy reference. All key processes have been documented. Databases are updated daily to ensure current information is available to all staff. Checks and balances are in place to ensure timeliness of critical assessments, consultations, treatment planning, contract renewals, staff training, and other time-sensitive processes. 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. Quarterly reports highlight and enable agency-wide review of these outcome measures.

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. Support processes are generally evaluated by feedback from regional staff. Improvements and updates to support processes occur routinely based on feedback received. For example, the client services database is frequently refined to increase the efficiency of data retrieval. When needed, workgroups are formed to address substantial updates to support processes.

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 reductions (49%) for FY 2010-2011 in State appropriations, changes were made in the administrative structure with non-client serving positions remaining unfilled.

The Continuum continues to refine a process to better utilize resources in serving clients given recent Medicaid rate changes. In addition, the Continuum will prepare for:

- Realignment of staff and adjustments to job duties.
- Any future reduction in funding that may result in limiting our array of services.
- Continued focus placed on community services and returning the child back to their families' home.
- Monitoring the length of stay to ensure children do not remain in placements any longer than clinically necessary.
- Continued refinement of our process for gathering and utilizing insurance and other financial supports when a client is placed in an out-of-home setting.

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 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:

- Children will demonstrate an increased ability to function in their communities while they are Continuum clients.
- Children will function better in their school environments.
- Families will see a decrease in their child's problematic behaviors.
- Clients will receive needed services to maximize their functioning while in the least restrictive care.
- Transition age clients will be better able to live independently within the community setting.
- 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. To date, comparative data from other state entities with similar functions is not available; therefore, comparisons are made within the Continuum on a year-by-year basis.

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 07-08	FY 08-09	FY 09-10	FY 10-11
% of teachers* who reported the COC child will advance to the next grade level	88%	87%	90%	85%
% of teachers* who responded that students' behaviors improved as a result of the COC's involvement	87%	75%	84%	87%
% of teachers* who stated the COC has been critical in supporting the student's educational placement and progress	95%	94%	91%	97%

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 07-08	FY 08-09	FY 09-10	FY 10-11
% of clients showing a decrease in problematic behaviors in a school setting	34%	41%	41%	34%
% of clients showing a decrease in problematic behaviors in the home	30%	32%	28%	29%
% of clients showing a decrease in problematic behaviors in the community	27%	37%	35%	32%

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 07-08	FY 08-09	FY 09-10	FY 10-11
% 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)	91%	89%	84%	79%
% of families* report receiving services in the amount stated on their treatment plan	89%	88%	92%	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	91%	88%	91%	84%

Table 7.1.4 Continuum of Care Level of Care Restrictiveness

Performance Measure	FY 07-08	FY 08-09	FY 09-10	FY 10-11
% of children with at least six months tenure and RBHS services in place who remain in their home at the end of each quarter	67%	68%	81%	83%
% of children in placement <u>not</u> requiring a higher level of care during the quarter	92%	93%	85%	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	FY 07-08	FY 08-09	FY 09-10	FY 10-11
All data is based on feedback provided through surveys				
% of families giving COC an A or B rating	84%	93%	94%	92%
% of families who say they will refer other families to the COC	97%	94%	99%	94%
% of families more satisfied with services once their child became a COC client	94%	92%	94%	87%
% of families who stated COC listens to their concerns when planning services	96%	96%	98%	97%
% of families who stated COC allows them to help in making treatment decisions for their child	99%	98%	98%	92%

7.3 What are your performance levels for your key measures of financial performance, including measures 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. Due to fluctuations in the severity of functioning of clients, the cost of treatment for individual clients may vary substantially; therefore, the cost of treatment may not be an accurate measure of workforce performance.

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 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 organizational 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 applicants for Continuum services to ensure applications are processed in a timely manner and the children in the most need of services are selected when slots are available (bi-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 clients' functioning through targeted case management, CALOCUS assessments, and progress in placement reports to ensure children who are being served in out-of-home placements are in the appropriate level and return to their homes as soon as possible (monthly)

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 08-09	FY 09-10	FY 10-11
% of RBHS funds recouped by Medicaid	0%	0%	0%
% of Case Management funds recouped by Medicaid (DHHS)	0%	0%	0%

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

Table 7.6.2 Continuum of Care use of South Carolina vendors

Performance Measure	FY 07-08	FY 08-09	FY 09-10	FY 10-11
Number South Carolina vendors used to provide service	58	54	46	44
Number of out-of state vendors used to provide services	0	1*	2*	2*

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

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Correspondence

Section I - Executive Summary

1. Organization's stated 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 2010-2011

- Received, logged and routed 30,572 pieces of correspondence
- Prepared 1,021 letters and certificates in response to constituent and Senior Staff requests.
- Prepared 212 proclamations.
- Packed and labeled 218 cartons of Governor's correspondence for Archives

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

A challenge for 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. A special challenge this year was closing out one administration as a new one moved in.

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

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

Section II - Organization Profile

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

- 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 anniversary, birthday, condolence, graduation, wedding, retirement, new baby, special occasion, reunions, greetings, photos, scouts, congratulatory, student information and other miscellaneous requests
- Prepare proclamations
- Assists senior staff, as requested, 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

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
- 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 stakeholders groups

- Senior Staff
- OEPP Staff

4. Key suppliers and partners

- OEPP Staff
- Senior Staff
- Governor

5. Operational 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)

<u>3</u> Classified	<u>3</u> Unclassified	<u>0</u> Contract
<u>0</u> Temporary	<u>0</u> Temporary (Grant)	<u>0</u> Temporary (time-limited)

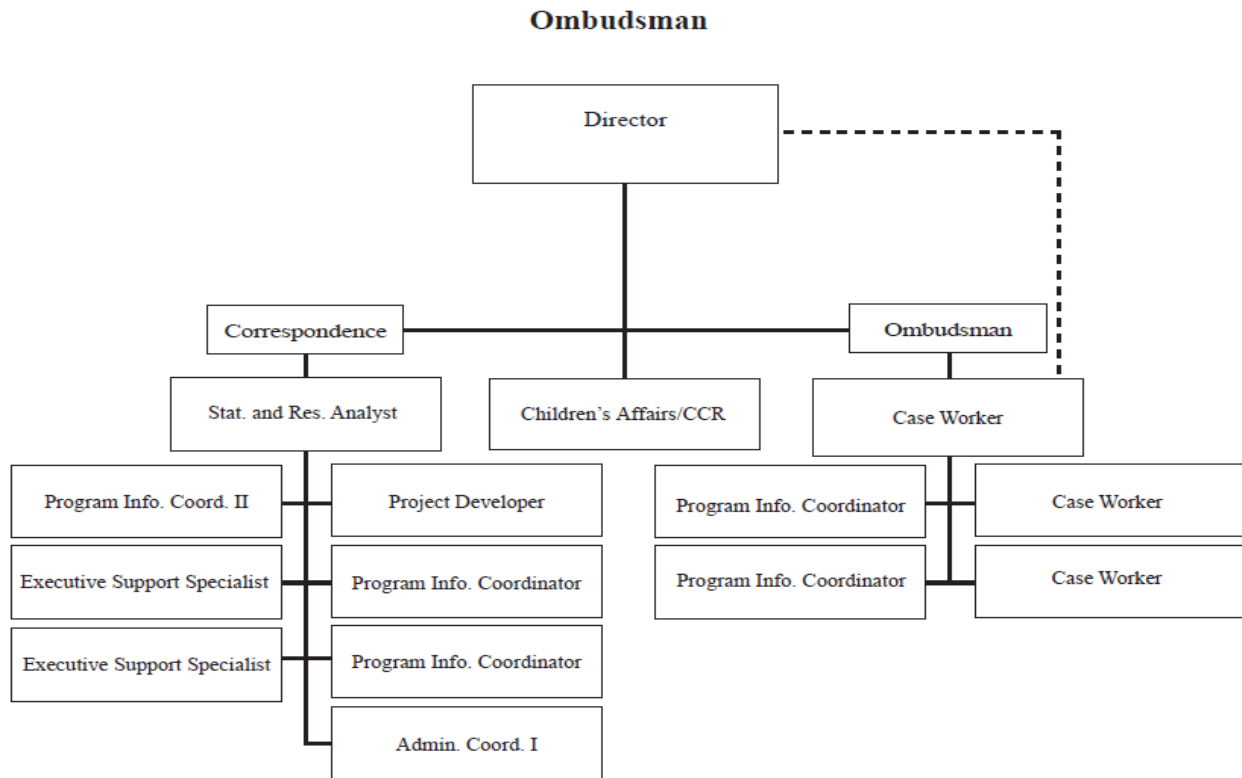
7. Regulatory environment under which your organization operates

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 encouraged to offer suggestions that can improve individual and team performance.

9. Organizational Structure



10. Expenditures/Appropriations Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 221,066	\$ 221,066	\$ 126,844	\$ 126,844	\$ 127,000	\$ 127,000
Other Operating	\$ 1,970	\$ 1,970	\$ 4,984	\$ 4,984	\$ 5,000	\$ 5,000
Special Items	\$	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 70,632	\$ 70,632	\$ 39,601	\$ 39,601	\$ 44,450	\$ 44,450
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$ 293,668	\$ 293,668	\$ 171,429	\$ 171,429	\$ 176,450	\$ 176,450

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
Correspondence	Log, track and help respond to Governor's Office mail.	State	293,668	State	171,429	
		Federal		Federal		
		Other		Other		
		Total	293,668	Total	171,429	
		% 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: 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?

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. Meetings are held 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 on the public. Follow-up calls and notes from constituents are shared with staff. Additional requests from individuals, as well as repeat requests from year to year for annual events, provide an indication of the Office's impact on the public.

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

Correspondence follows all guidelines and policies in place. Additionally, the Office makes every effort to practice fiscal responsibility, sending responses electronically 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" doesn't necessarily mean that it is the most efficient way and are willing to consider suggestions or implement changes that can lead to a higher level of accomplishment.

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

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

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

1.11 How does senior leaderships 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 Senior Staff and OEPP Directors 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?

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

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

Employees provide input as to their individual workload requirements to assist in addressing staffing needs and office workflow.

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 between 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 senior leaders.

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 with a request for a specific type of letter, concerns or questions about legislation or policies and, potentially, residents who celebrate milestones in their lives.

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

The trends identified 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 senior leaders. 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 performances, including progress relative to strategic objectives and action plans?

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

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

Information from constituent mail is entered in the Mail Log and used to help in making decisions regarding the overall mail process and trends in constituent concerns. Additionally, the ability to recognize current events at local, state and national levels that may have an impact on mail received allows staff to try to prepare for a higher than normal volume of mail to handle. 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, how do you keep them current with organization service needs and directions?

- Correspondence Received
- Requests for Letters
- Written Responses
- Proclamations Issued

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 to 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. 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 location? Give examples.

With the small staff in close quarters, communication occurs through 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, the new employee receives 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 becomes more knowledgeable in the various areas of government operations and, on occasion, decides 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 is assessed through the ability of staff to respond to requests within approved deadlines. Staff is reassigned to help with other duties when there are unexpected amounts of mail that needs to be logged in or answered. Proofing mail and monitoring the log helps identify possible areas of weakness that require additional training.

- 5.5 How does your workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to the achievement of your action plans?**
It promotes and encourages staff to proactively identify potential problems before they occur, assist with cross-training for their regular duties, adjust individual schedules when pressing deadlines arise or extra help is needed in other areas, and offer any spare time/expertise to help with other duties to reduce the negative impact of employee absences, special projects, urgent deadlines, and unexpected increases in mail volume on the overall daily processes of the office.
- 5.6 How does your development and learning system for leaders address the following?**
- a. Development of personal leadership attributes**
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 achieving 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 possible new interests and additional skills. Various levels of new employee orientation occur with HR and IT staff as well as with 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, and the practice of open communication lends itself to the sharing of information which can be helpful to others in the office.
- 5.9 How does employee training contribute to the achievement of your action plan?**
Training ensures that all employees have the information and resources necessary to process the Governor’s mail.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?**
Effectiveness is evaluated by customer and stakeholder feedback.

- 5.11 How do you motivate your employees to develop and utilize their full potential?**
Employees are motivated through open communication, cross-training, identification of areas of special interest, 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?**
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 staff 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, and 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 evaluation. Likewise, SLED alerts the staff if and when it hears of the possibility that a threat may be forthcoming.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

- 6.1 How do you determine and what are your organization’s core competencies, and how do they relate to your mission, competitive environment, and action plans?**
Core competencies are determined by the mail received, and the volume, requests and issues are factors in the processing of same.
- 6.2 How do you determine 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 ensure 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 your 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?**

Table III.7.1 Key Measures

	2010-2011	2009-2010	2008-2009
7.1.1 Correspondence Received	30,572	44,370	40,718
7.1.2 Written Responses	1,021	2,233	2,000
7.1.3 Proclamations	212	355	376
7.1.4 Urgent, Last-Minute Requests		98	115
7.1.5 Legislative Responses		14,153	11,158

- 7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare with those of comparable organizations?**
With the diversity of the Correspondence customer base, which includes constituents, legislators, local, state and federal agencies, businesses, community organizations, Governor's Office staff and others, satisfaction is measured mainly through the feedback that may be provided by the "customers" 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, the "clean" side of waste paper is used for drafts.

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

2010-2011 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 2010-2011

- 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).
- 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.

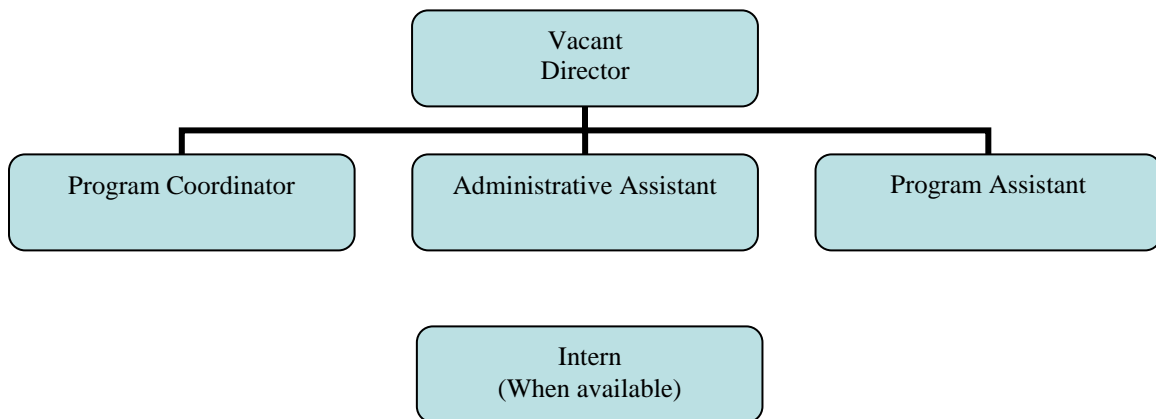
3. Key Strategic Goals for Present and Future Years

- 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.

8. Performance improvement systems

- By reviewing statistical data kept each fiscal year in FileMaker Pro to determine 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 Structure



10. Expenditures/Appropriations Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$123,820	\$	\$ 98,601	\$	\$ 128,937	\$
Other Operating	\$ 20,035	\$	\$ 13,833	\$	\$ 49,251	\$
Special Items	\$	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 43,323	\$	\$ 28,327	\$	\$ 52,621	\$
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$187,178	\$	\$140,761	\$	\$230,809	\$

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 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 09-10 Budget Expenditures		FY 10-11 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		State		See Table III.2 & Chart 2
		Federal		Federal		
		Other	\$187,178	Other	\$140,761	
		Total	\$187,178	Total	\$140,761	
		% of Budget	0%	% of budget:	0%	

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 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?

- 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 a focus on customers and other stakeholders?

- By giving full, direct attention and returning calls by close of business day or within a 24 hour period.
- Assist victims and VSPs with their concerns 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?

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 CVO's

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 the organizational values?

By listening, reviewing and comparing past reviews, the agency head seeks to ensure improvements are understood and implemented, if possible. Employees' personal actions reflect a commitment to the organizational values by showing that they are interested and that success is the main goal of the organization.

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 strategic 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 ideas 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 does senior leaderships 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 acquire someone in the Information Technology Department that can make modifications/updates to Filemaker Pro data system. CVO currently has to outsource each time modifications/updates are needed.
- d) Workforce capabilities and needs are met by the Human Resources 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 10-11 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
<p>To efficiently resolve complaints made by crime victims.</p> <p>To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.</p>	<p>By receiving and responding to all crime victims’ complaints in a timely and efficient manner with the best overall resolution.</p> <p>VSPs to receive appropriate victim rights certification and education</p>	<p>Refer & provide liaison services.</p> <p>Provide assistance and oversight.</p>	<p>See Chart 2 & see Table 7.1:1 & 2</p>
<p>To ensure ethical performance and accountability</p>	<p>By acting as a neutral third party that attempts to ensure 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.</p>	<p>Review & attempt to resolve complaints by crime victims.</p> <p>Provide oversight and certification.</p>	<p>See Chart # 2</p>

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

By being that neutral third party agency that attempts to ensure 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 action 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?

Progress is measured 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 key 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 employee 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 and 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 or 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; 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 performances, including progress relative to strategic objectives and action plans?

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, how do you keep them current with organization service needs and directions?

Key measures are referral, assistance, and resolutions to complaint calls from victims and 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 through 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?

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 to 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 location? Give examples.

By maintaining and receiving contact with HR for updates and advice on human resource issues. Staying updated on new and current positions by viewing the vacancy listing and inquiring when an interested party, based on the requirements listed 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 access your workforce capability 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 and current experiences and the changes in current legislation and victim services. We also base the needs training on the reports from the community about issues that we have not experienced or reports from other states that affect 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?

Employees are encouraged to use their new skills to help the victims of crime and our stakeholders to be empowered. We want them to 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 enables them to give the most appropriate information to our stakeholders. The training also makes the employees feel good about themselves and the work they perform.

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

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.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

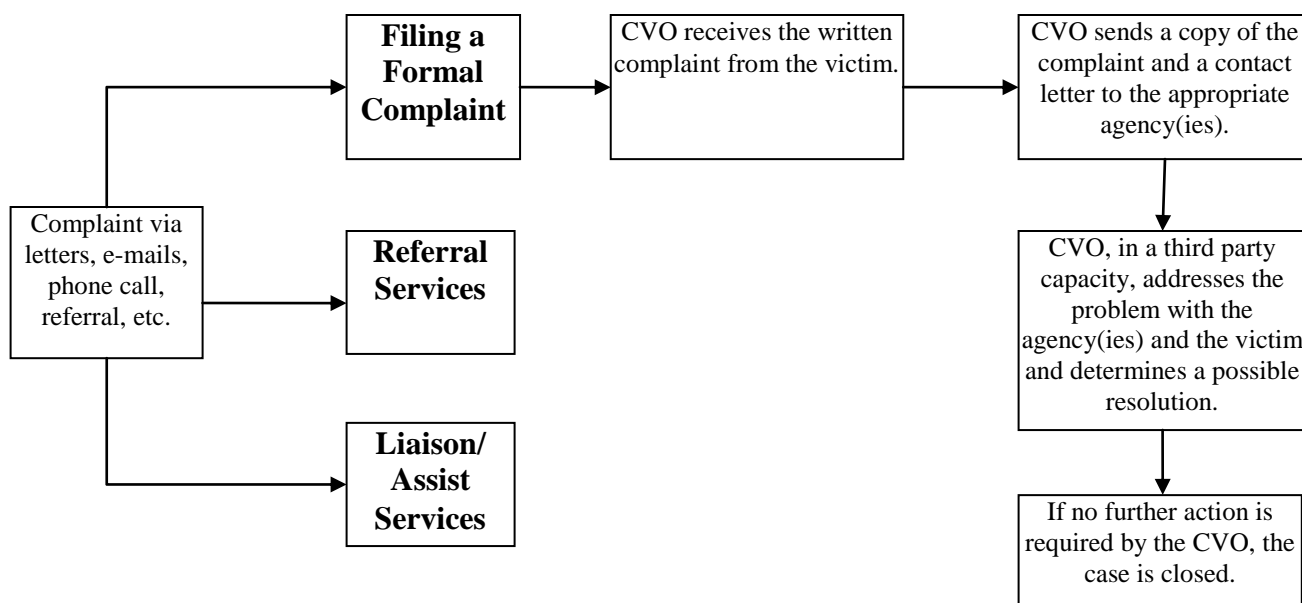
6.1 How do you determine and what are your organization’s core competencies, and how do they relate to your mission, competitive environment, and action plans?

- 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



How a VSP Becomes 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. CVO researches 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 services 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 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
96%	97%	98%	98%	97%	96%

Table 7.1:2

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

FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
92%	95%	93%	98%	82%	89 %

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 imposes 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 the important measures of customer satisfaction and dissatisfaction? 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 your 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 cost cutting ways to effectively reduce the budget without affecting 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 your key measures of organizational effectiveness/operational efficiency, and work system performance?

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?

Comparable Statistical Data

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.

FY10-11.....1928
FY 09-10.....1207
FY 08-09.....1250
FY 07-08.....1457
FY 06-07.....1962

CVO assisted and referred the following incoming phone calls.

FY 10-11.....894
FY 09-10.....607
FY 08-09.....578
FY 07-08.....625
FY 06-07.....508

The Office of Victim Services Education & Certification (OVSEC) 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 (VSP) in the nation. There are currently 1,040 active VSPs, 927 active Notifiers/Support Staff, and 416 Judges in the state. 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 services community.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Developmental Disabilities Council

Section I. Executive Summary

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

Mission Statement:

The mission of the South Carolina Developmental Disabilities Council is to provide leadership in planning, funding and implementing initiatives that lead to improved quality of life for people with developmental disabilities and their families through advocacy, capacity building and systemic change.

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 2010-2011

- a) Fort Mill School District 4 developed a program called It's My Life: Student Directed IEPs and Transition Plans. This grant has served students with disabilities ages 13 to 21 in the Fort Mill District by providing self-advocacy training and facilitating student involvement in transition planning. This has enabled students to have the skills and opportunities they need to make choices about their future. In addition, Project SEARCH, a national model for high school adult transition, was researched and a feasibility study was conducted to bring this program to the state of South Carolina to provide increased opportunities for students to experience a variety of jobs to assist them in selecting jobs that matched their interests and abilities. New programs to increase the number of employers who hire people with disabilities were also created. All strategies promote advocacy, build capacity, and represent systems change.
- b) Bold Responses: Addressing Bullying and Ostracism in Youth with Disabilities was started by the Citadel's Department of Psychology. The project proposed to develop, evaluate, and disseminate procedures and responses that can be used to reduce bullying and ostracism and their emotional/behavioral aftermath in youth with disabilities. The resources and products included testing procedures for detecting school populations of youth with disabilities, who are most in need of intervention, understanding bullying and ostracism cultures in which intervention needed to be attempted, and cost-effective school and community-based inclusive interventions, supporting youth with disabilities who are victims, perpetrators, or both. Training and networking of peers, parents, educators, healthcare professionals,

college students and advocates have developed collaboration, wide support, broad impact, and sustainability.

- c) An education initiative through the Roger C. Peace Rehabilitation Hospital has provided persons with brain injury, their families and educators materials and training regarding the nature of Traumatic Brain Injury (TBI) and the educational needs of persons re-entering school after a TBI through ongoing development of a web portal and through increasing awareness of materials available. The Education Initiative has also continued to provide teacher training, as well as place TBI tool kits in regional libraries. Additional projects include post secondary education through online training and the start of identifying best practices of communication between hospitals, families, and schools.
- d) The Council continues to support Partners in Policymaking (PIP). The PIP program is a leadership training program that teaches adults with disabilities and parents of young children with disabilities how to be effective advocates for systems change, and a partner with legislators, school officials, service providers, etc. The graduates of the 14th PIP class joined previous graduates who have the necessary advocacy skills and training in state-of-the-art and best practices in disability issues to be true Partners with Policymakers at the local, state, and national levels.
- e) The Council and its key network 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 facilitated the implementation of guidelines by the Department of Education for use of seclusion and restraint in South Carolina schools. The guidelines were released to school districts in the spring of 2011. The network partners also provided education to USC graduate students on the DD Act and our individual organizations, including current priorities and goals.

3. Key Strategic Goals for Present and Future Years

a) Employment

- i. People with disabilities who want to work, work in places of their own choosing.

b) Formal/Informal Community Supports

- i. Individuals will have access to services they need to exercise choice.
- ii. Individuals and their families know and understand their rights to make informed choices.

c) Quality Assurance

- i. People with developmental disabilities and their families are strong advocates for themselves, their families, and all individuals with disabilities.
- ii. Increase opportunities for social capital, financially supporting advocacy organizations.
- iii. Council funded projects include consumer participation in the planning, design and implementation of the project.
- iv. 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

- i. Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.
- ii. 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, 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)**

<u>4</u> Classified	<u>1</u> Unclassified	<u>0</u> Contract
<u>0</u> Temporary	<u>0</u> Temporary (Grant)	<u>0</u> 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.

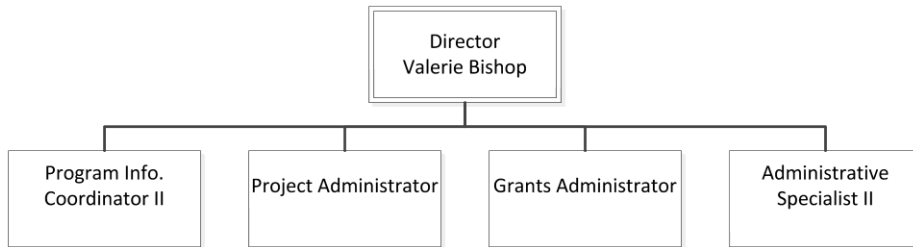
Council sub-grantees are required to submit quarterly progress reports. This is in addition to onsite visits. Each sub-grantee is required to develop a customer satisfaction report that meets required elements. These reports are reviewed by staff to see if the program being offered is meaningful to participants.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

Developmental Disabilities Council



10. Expenditures/Appropriations Chart

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

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$201,074	\$36,087	\$197,526	\$24,301	\$294,160	\$34,658
Other Operating	\$55,455	\$8,028	\$58,527	\$11,417	\$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	\$572,100	\$0	\$790,106	\$0	\$1,650,000	\$0
Fringe Benefits	\$60,261	\$9,523	\$61,098	\$7,021	\$77,851	\$12,130
Non-recurring	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$888,890	\$53,638	\$1,107,727	\$62,944	\$2,114,353	\$62,130

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 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 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
DD Council	To administer and monitor federal grants funding to sub-grantees, providing services for persons with DD.	State	\$53,638	State	\$42,740	
		Federal	\$835,252	Federal	\$1,072,244	
		Other	0	Other	0	
		Total	\$888,890	Total	\$1,114,984	
		% 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 a 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 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 and Rules Committees. 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 and the accomplishment of strategic 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 leaderships 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:

- Functional Needs Workgroup with Emergency Management Division
- SC Act Early Team
- Medicaid Infrastructure Work Group, Health and Human Services
- Lifespan Respite State Advisory Council
- SC Brain Injury Leadership Council
- SC Assistive Technology Advisory Council

- SC Transition Education Service Team
- SC Partnership of Disability Organizations
- DDSN Advisory Group

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 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 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 10-11 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.sccdc.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 ADD 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 website address for that plan.**
www.scdde.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.scdde.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 (ADD). 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 ADD.

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

- i. People with disabilities who want to work, work in places of their own choosing.

b) Formal/Informal Community Supports

- i. Individuals will have access to services they need to exercise choice.
- ii. Individuals and their families know and understand their rights to make informed choices.

c) Quality Assurance

- i. People with developmental disabilities and their families are strong advocates for themselves, their families, and all individuals with disabilities.
- ii. Increase opportunities for social capital, financially supporting advocacy organizations.
- iii. Council funded projects include consumer participation in the planning, design and implementation of the project.
- iv. 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**

- i. Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.
- ii. 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 location? Give examples.

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 (ADD) 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 work 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 evaluate, 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 your 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?

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 the important measures of 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	95 percent
Individual had more choices and control as a result of project	89 percent
Individual can do more in the community as a result of the project	93 percent
Individual is satisfied with project activity	97 percent
Because of project, individual feels he or she knows his or her rights	83 percent
Individual feels safe as a result of the activity	91 percent
Individual feels as though he or she has a better life as a result of the activity	96 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?

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?

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.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Children's Foster Care Review Board

Section I. Executive Summary

1. Organization's 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 2010-2011

- A. Local foster care review board volunteers donated 14,928 hours in service to children and families involved with the foster care system.
- B. Local foster care review boards held 434 individual local review meetings and conducted 8,130 reviews for 4,986 children.
- C. Local foster care review boards established relationships and communicated with their local partners. Thirty-one 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. Fourteen local review boards facilitated the presentation of the 2009 – 2010 South Carolina Children's Foster Care Review Board Annual Report to their county legislative delegations. Twenty-three local review boards implemented procedures to communicate regularly with their county legislative delegations about the status of children in foster care in their county.

- E. Thirty-three local foster care review boards demonstrated their commitment to supporting children and the system that serves them by completing service projects this year. These service projects provided many “extras” to the foster care system, and to individual children in foster care who might otherwise not receive the routine things many children take for granted.
- F. One hundred and ten children in foster care and reviewed by local review boards in 2010, were represented by Review Board legal staff at 131 court hearings across South Carolina. Review Board program staff also provided in-depth, post-review, supplemental advocacy on behalf of 949 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 2010, 18 photographers donated their time and talents to photograph 102 children at photo shoots. There were 172 public venues featuring children in exhibits. There were 102,773 unique visitors to the South Carolina Heart Gallery website that generated 1,577 inquiries from interested families.

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

- A. Continue to streamline Division processes and procedures to work more efficiently and effectively in order to maximize limited resources on behalf of children and families.
- B. Maximize the impact of the Division’s independent review mandate by working with child welfare stakeholders to increase positive permanency for children in foster care.

4. **Key Strategic Challenges**

- A. One of the key strategic challenges is making the time to do thoughtful strategic, long-range planning and look closely at how to work more efficiently and effectively. Within the last few years, the Division has focused on core mission and made significant strides on working smarter and doing more with less. At this point, the Division has less staff and less money, which means more work for everyone. This makes it more challenging to set aside time to look at the big picture because the Division’s State mandate must be accomplished. Long-range planning is critical to the success of any organization; however, the cost of senior leaders doing the jobs of two people is that the big picture gets lost in the shuffle. This short-term approach is not sustainable and it a challenge that the Division hopes to overcome in 2012.
- B. Another strategic challenge is the retention of quality staff. They too, have been doing more with less for a significant period of time. The Division is constantly looking for ways to work more efficiently; however, there is a limit as to how much staff are willing to give and how often they are willing to go above and beyond the call of duty. The Division is fortunate to have staff with excellent work ethic, professionalism, who consistently exceed expectations; however, there is a concern that the staff may reach burn out, which impacts productivity (slacking off at the office, poor work product, excessive absenteeism.) Decreased productivity becomes an HR issue – which can be a full-time job in and of itself. Or, in the event the staff person quits before burn out, and the Division is fortunate enough to be able to hire for the vacancy, there is a significant

amount of time and energy invested in posting the vacancy, interviewing, hiring, and training of a new employee. The Division has a vested interest in retaining quality staff; however, it is extremely challenging to do so in these economic times.

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

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. This year in particular, it has helped focus senior leaders on the strategic planning that is so critical to the long-term health of a Division.

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 43 local foster care review boards currently serving 4,183 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. When fully staffed, 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/Business Manager, one Heart Gallery Program Coordinator, one Heart Gallery Program Assistant, and two Administrative Assistants.

2. Key customer 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
<p>Children’s Foster Care Review Board (FCRB)</p>	<p>FCRB monitors progress in achieving permanent placements for children in foster care by providing an external system of accountability and advocacy for children and families involved with the foster care system through citizen volunteers.</p> <p>There are 42 local foster care review boards currently serving 4,816 children.</p>	<ul style="list-style-type: none"> • Children and families involved in the foster care system in South Carolina are the primary customers. • Volunteers appointed to serve on local Review Boards and the State Board of Directors. • Stakeholders are public and non-profit child welfare agencies that partner with the Review Board and local communities across the state. 	<ul style="list-style-type: none"> • SC Dept of Social Services • SC Foster Parent Association • Volunteer Guardian ad Litem Program • 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 Fund of SC

5. Operation locations

The Children’s Foster Care Review Board is located at 1205 Pendleton Street, Room 436; Columbia, South Carolina.

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

<u>18</u> Classified	<u>1</u> Unclassified	<u>0</u> Contract
<u>0</u> Temporary	<u>0</u> Temporary (Grant)	<u>0</u> 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 one contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.

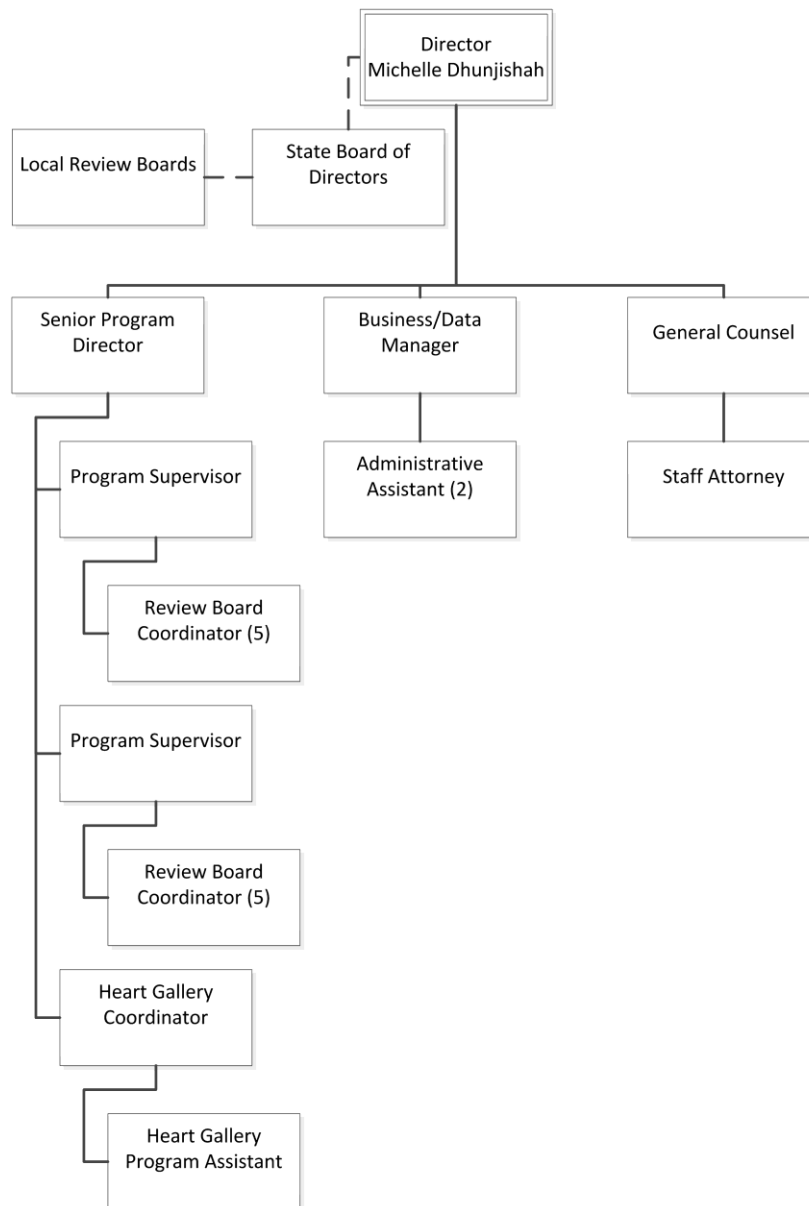
8. Performance improvement systems

Data on performance improvement are located in Section III.2 tables III.2.5-1 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. Organizational Structure

Children's Foster Care Review Board



10. Expenditures and Appropriations Chart

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$808,515	\$369,080	\$ 675,272	\$ 296,976	\$ 790,913	\$ 250,768
Other Operating	\$148,069	\$72,223	\$ 124,645	\$ 49,747	\$ 217,766	\$ 49,924
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$249,591	\$98,221	\$ 215,315	\$ 97,411	\$ 277,650	\$ 87,769
Non-recurring	\$	\$	\$	\$	\$	\$
Review Board Budget Total	\$1,206,175	\$539,524	\$1,015,232	\$ 444,134	\$1,286,329	\$ 388,461

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures	FY 11-12 Actual Expenditures
Supplemental Bills	\$	\$	\$
Capital Reserve Funds	\$	\$	\$
Bonds	\$	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
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	\$444,134	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	\$571,098	
		Total	\$1,372,702	Total	\$1,015,232	
		% 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 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?

- (1) Provide statutorily-mandated Orientation training for all review board volunteers and on-going professional development for volunteers as budget allows.
- (2) Provide staff with opportunities to participate in training and professional development workshops as budget allows.
- (3) Monthly staff meetings.
- (4) Routine written and oral communication.
- (5) Supervisors hold monthly "parking lot" meetings with employees as a structured way to discuss both positive performance and areas needing improvement. These also are an opportunity for the employee to bring issues to the supervisor's attention.
- (6) Perform annual EPMS rating and planning sessions with all staff according to HR policy.
- (7) Shared decision-making and brainstorming sessions with all levels of staff on planning and process initiatives.
- (8) One-on-one annual goal setting meetings between each staff member and Division director.
- (9) Staff at all levels models ethical and professional behavior.

1.2 How do senior leaders establish and promote a 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 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 board/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?

The senior leaders work closely to identify future organizational leaders and discuss succession planning. Advancement within the Division is limited because it is a very small Division. Because of that, the leadership staff also work very hard at encouraging professional growth of all staff. If staff leave the Division, it is the hope that they leave here better than they came. When there are work groups and meetings that the Division is asked to have representation at, the senior leaders match those opportunities with a staff member who has exhibited leadership potential to represent the Division. In addition to that, staff may request specific professional development at any time, including during their annual EPMS planning session or during their monthly parking lot meeting with their supervisor. These requests are honored according to course and funding availability. Of course, the Division is always on the lookout for free professional development opportunities to offer staff as well.

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 its objectives. Review Board staff work hard to empower the 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 both 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 nearly 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. The leadership recognizes specific accomplishments by sending an email, personally thanking someone, acknowledging the individual in front of his or her peers, handwritten notes of appreciation, or formal letters of recognition. These things take time, not money and seem simple, but it is meaningful (especially for volunteers) to be recognized. In addition to that, the Division awards *Review Board Member of the Year* and *Review Board of the Year* to those outstanding volunteers in each category.

1.11 How does senior leaderships 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.

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, Strategic Development Council; Member, Judicial Qualifications Committee of SC Bar; Member, 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; Children's Ministry Team; and Member, Safe Sanctuary Leadership Team, Mt. Horeb United Methodist Church.

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 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. When fully staffed, these goal setting and planning meetings have served as the foundation for an annual leadership staff retreat where the Division's strengths, weaknesses, opportunities, and threats are evaluated. Then, the annual leadership staff retreat had served 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.

Due to staff shortages, the leadership staff retreat and full staff retreat did not take place; however, the goal setting meetings, combined with less staff in upper-level management, and an extremely supportive State Board of Directors have allowed the Division to keep moving forward despite formal strategic planning sessions.

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 11-12 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
<p>1. Continue to streamline Division processes and procedures to work more efficiently and effectively in order to maximize limited resources on behalf of children and families.</p>	<p>1. Reduce administrative time spent planning and preparing for statutorily-mandated, independent reviews.</p>	<p>1.1 Work with SCDSS data personnel to obtain automated, monthly report of children entering and leaving foster care. 1.2 Work with SCDSS data personnel to obtain read-only access to CAPPS in order to populate certain FCRB data fields. 1.3 Continue implementation of Packet Light program in every county which significantly reduces the amount of paper process within the Division. 1.4 Explore the development of an automated scheduling process for Review Board reviews.</p>	<p>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</p>
<p>2. Maximize the impact of the Division’s independent review mandate by working with child welfare stakeholders to increase the number of children in foster care who are connected to forever families.</p>	<p>1. Increase Program and Legal staff’s ability and capacity to advocate for forever families. 2. Continue to expand the capacity of local review boards to advocate for connecting children to forever families. 3. Expand the capacity of the SC Heart Gallery to connect children in foster care to forever families.</p>	<p>1.1 Build on existing advocacy framework of interdisciplinary/team approach and utilizing volunteers. 1.2 Utilize Permanency Roundtables and follow-up from those as advocacy tools. 1.3 Rotate staff participation at DSS P2 meetings. 2.1 Plan much-needed Professional Development Day for volunteers. 2.2 Invite Chairpersons to attend P2 meetings. 2.3 Continued development at Business meetings. 2.4 Explore possible Regional Professional Development. 3.1 Work with DSS to obtain access to as much information as possible about children in foster care who will be featured in the Heart Gallery. 3.2 Work with DSS to eliminate the need for DSS to refer children to the Heart Gallery. 3.3 Explore the possibility of Heart Gallery taking photograph of child before the child is legally free. 3.4 Explore ways for more effective follow-up with families who make inquiries on children and ways to expedite home studies for these families.</p>	

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

Streamlining Division processes and procedures should help staff work smarter and more efficiently which will reduce the burden of the extra work staff has had to take on due to staff vacancies. This will hopefully reduce stress, improve morale, and lead to staff retention and more productivity. Finding new and improved ways of connecting children to forever families should provide the motivation and the passion to do this very difficult work, for both staff and volunteers, during these difficult times. If the staff is passionate and productive, the leadership should be in a position to set time aside to do the long-range strategic planning that is needed. If the staff is not productive and morale is low, the senior leaders devote a lot of time to that and then the long-range planning is off the table once again.

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 will have an annual retreat in 2012 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) Division website
- (3) Statewide and county-specific demographic data and performance measures provided as requested
- (4) Quarterly State Board of Directors' meetings
- (5) Quarterly State Board contacts with local review boards
- (6) Weekly senior staff meetings
- (7) Monthly leadership team meetings
- (8) Monthly full staff meetings
- (9) Annual Chairperson training/meetings (suspended 2008-2010)
- (10) Annual Review Board member professional development (suspended 2008-2010)
- (11) Regional Trainings for local review boards (suspended 2008-2011)
- (12) E-blast list-serve information dissemination for Review Board members
- (13) Monthly Review Board business meetings
- (14) Staff retreat (not held 2010, 2011)
- (15) Bi-Annual newsletter (suspended due to staff and budget limitations)

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 continuing to streamline Division processes and procedures to work more efficiently and effectively in order to maximize limited resources on behalf of children and families

Reference 1.1 Work with SCDSS data personnel to obtain automated, monthly report of children entering and leaving foster care.	Pending FY 2011-2012
Reference 1.2 Work with SCDSS data personnel to obtain read-only access to CAPPs in order to populate certain FCRB data fields.	Pending FY 2011-2012
Reference 1.3 Continue implementation of Packet Light program in every county which significantly reduces the amount of paper process within the Division.	Pending FY 2011-2012
Reference 1.4 Explore the development of an automated scheduling process for Review Board reviews.	Pending FY 2011-2012

Table III.2.5-2 Key Performance Measures for maximizing the impact of the Division's independent review mandate by working with child welfare stakeholders to increase the number of children in foster care who are connected to forever families

Reference 1.1 Build on existing advocacy framework of interdisciplinary/team approach and utilizing volunteers.	Pending FY 2011-2012
Reference 1.2 Utilize Permanency Roundtables and follow-up from those as advocacy tools.	Pending FY 2011-2012
Reference 1.3 Rotate staff participation at DSS P2 meetings.	Pending FY 2011-2012
Reference 2.1 Plan much-needed Professional Development Day for volunteers.	Pending FY 2011-2012
Reference 2.2 Invite Chairpersons to attend P2 meetings.	Pending FY 2011-2012
Reference 2.3 Continued development at Business meetings.	Pending FY 2011-2012
Reference 2.4 Explore possible Regional Professional Development.	Pending FY 2011-2012
Reference 3.1 Work with DSS to obtain access to as much information as possible about children in foster care who will be featured in the Heart Gallery.	Pending FY 2011-2012
Reference 3.2 Work with DSS to eliminate the need for DSS to refer children to the Heart Gallery.	Pending FY 2011-2012
Reference 3.3 Explore the possibility of Heart Gallery taking photograph of child before the child is legally free.	Pending FY 2011-2012
Reference 3.4 Explore ways for more effective follow-up with families who make inquiries on children and ways to expedite home studies for these families.	Pending FY 2011-2012

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 retreat 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.

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 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/stakeholder satisfaction and 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 11-12.

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 to meet and exceed their expectations? 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-profit 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.

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?

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 organization service needs and directions?

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, reliability, 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 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 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.

**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?

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 location? 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. In order to retain employees, the Division leadership strives to create a positive work environment, encourages a work-life balance, treats everyone with respect, praises positive performance, has an open door policy and welcomes feedback, and encourages professional and personal growth. Current budget restraints in State government do make it difficult to attract and retain quality staff to fill current program positions (when allowed to fill them) as salary levels are not commensurate with job requirements and the skill level required for this complex work. Additionally, 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 access 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 a strong review system in South Carolina.

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?

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 ensures 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/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?

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?

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.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

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

- (1) 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, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process 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 work 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 evaluate, 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.

**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 services 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, as reported by the South Carolina Department of Social Services, decreased in 2010. The number of reviews completed and the number of children reviewed have also decreased slightly.

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 2010, 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%.

Since permanency, or forever families, is so critical to child-well being, the Division’s key strategic goals for FY 2011-2012 are:

1. Continuing to streamline Division processes and procedures to work more efficiently and effectively in order to maximize limited resources on behalf of children and families.
2. Maximizing the impact of the Division’s independent review mandate by working with child welfare stakeholders to increase positive permanency for children in foster care are key to seeing that the Division accomplishes its mission.

Tables III.2.5-1 and III.2.5-2 (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	2003	2004	2005	2006	2007	2008	2009	2010
Number of Reviews Completed	8,443	8,232	8,317	8,464	8,981	9,068	8,961	8,130
Number of Children Reviewed	4,800	4,810	4,853	4,976	5,347	5,384	5,424	4,986
Number of Review Board Meetings	431	440	431	436	464	465	450	434
Number of Coordinators	8.00	8.00	8.00	10.00	10.00	10.00	9.0	9.0
Number of Volunteer Hours	10,031	10,155	10,574	13,115	16,474	15,082	16,403	14,928
Children Reviewed per Meeting	19.6	18.7	19	19	19	19	20	19
Reviews per Coordinator	1,055	1,029	1,040	846	898	907	996	903
Volunteer Hours per Review	1.19	1.23	1.27	1.54	1.83	1.66	1.83	1.83
Volunteer Hours per Child	2.09	2.11	2.17	2.63	3.08	2.80	3.0	3.0
Number of Areas of Concern Cited *	10,415	10,270	9,816	11,168	14,864	16,649	17,669	12,153
Areas of Concern per Review *	1.23	1.25	1.18	1.32	1.65	1.83	1.83	1.5
Reviews Continued or Rescheduled	386	321	316	410	393	418	339	200
Reviews Not Held Timely	205	228	229	333	409	339	303	163
Average Number of Years in Care	4.1	3.8	3.6	3.3	2.7	2.8	2.6	2.4
Average Number of Placements	4.9	4.3	4.0	2.8	3.3	3.2	3.0	2.7
Percent Achieving Permanency	58%	59%	59%	63%	60%	62%	65%	66%
Percent Recidivism	27%	24%	22%	24%	26%	25%	23%	21%
Percent of Reviews Completed Timely	97.6%	97.8%	97.7%	97%	97%	96%	97%	98%
Number of Advocacy Referrals Initiated	562	727	821	436	1,641	1,228	1,251	950
Number of Training Sessions Conducted for Staff & Review Board Members	7	9	11	10	13	7	11	5
Number of Presentations Given for Outside Entities	12	13	23	28	17	57	29	22

* In 2010 the definitions and categories for Areas of Concern were amended, making data comparisons with previous years irrelevant.

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 2010, the Foster Care Review Board surveyed 177 local review board members. Review Board members were asked to respond to 6 qualitative questions regarding their assessment of their local review board, their review board coordinator, and their relationship with the Department of Social Services and other community stakeholders. Of the 177 surveys mailed, 81 were completed and returned (response rate of 46%). Thirty-eight of the 41 review boards had at least one member respond to the survey. Sixty-one percent of respondents reported they have served on a local review board four and more years, and 36% have served less than 4 years. Survey responses were reviewed by program staff and the results will be used for future review board member and staff training preparation and evaluation.

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 2010. These results will be reviewed by the State Board at a planning meeting in late 2011.

Table III.7.2-1 Foster Care Review Customer Satisfaction Results: FY 10-11 (July 2009-June 2010)

Performance Measures	Number	Dates
Timely Preparation of Annual Report (statistical research and recommendations)	500 copies distributed	09/01/2010
Review Board Member Survey	81 responses	11/01/2010
Review Board Member Exit Interviews	16 completed	throughout year
Evaluation: New Board Member and Staff Orientation	22 responses	08/23/10; 11/15/10; 02/28/11; 5/16/11
Evaluation: Regional Training for Board Members	N/A	not held due to budget reductions
Evaluation: Foster Care Review Board Conference	72	1/28/2011
Stakeholder Survey (bi-annual)	N/A	pending for FY 11-12

7.3 What are your performance levels for your 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 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 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 the key measures of 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 98% or better for the past ten years. The Annual Report has been completed timely. Volunteers and staff have been adequately trained according to policy.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Cass Elias McCarter Guardian Ad Litem Program

Section I. Executive Summary

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

The Cass Elias McCarter Guardian ad Litem Program gives 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 Cass Elias McCarter 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 2010-2011

- Served 100% of all children in child abuse and neglect cases in 45 counties.
- Trained 674 new volunteers.
- Served 10,024 children in 2010-2011, 1,193 more children than in 2009-2010.
- Was awarded a \$50,000 National Court Appointed Special Advocates Association (NCASAA) state grant and a \$40,000 NCASAA expansion grant for 2011-2012 to fund two Public Awareness/ Trainers to increase volunteer recruitment and train volunteers.
- Was awarded a \$51,875 Victims of Crime Act (VOCA) grant for the purchase of equipment to promote volunteer recruitment and county operations.
- Completed 18 months of a three-year Fostering Connections federal grant in partnership with DSS. 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.
- Trained 50 volunteers throughout the state to conduct family finding searches.

3. Key Strategic Goals for Present and Future Years

1. Recruit sufficient volunteers to support 100% CAN case appointment without staff cases.
2. Increase GAL volunteer retention through case management support and continuing education that improve volunteer performance and enhances positive outcomes for children.
3. Implement a new data system that collects and tracks child outcomes.
4. Increase Family Connections services in the two pilot regions.

4. Key Strategic Challenges

1. Recruitment and retention of volunteers who can act as child advocates in investigations of child abuse and neglect cases. Volunteers are both an officer of the court who provides a report with recommendations for the best interests of the child, and a presence in the child's life where compassion and knowledge of how to interact well with children is the key skill.
2. Adequate resources to fund staff to support the volunteers and ensure quality supervision of a growing number of child advocates.
3. Furlough for FY10-11 cost the Program over 3 years of productive work days.

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 accountability report compels the Program to compare the progress made from one year to the next and to identify deficiencies. 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. The report suggests new measures to examine performance and 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

The main services of the Guardian ad Litem Program are to recruit, train and supervise volunteer child advocates for DSS abuse and neglect cases.

These services are accomplished by the following:

- Four state Public Awareness staff members develop materials and conduct events to recruit.
- The Public Awareness staff and Regional Supervisors create individual county plans to set goals for recruitment and child advocacy in each county.
- PA, Regional and County staff members conduct 30-hour pre-service trainings for volunteers.
- Local Coordinators in 37 county offices supervise the volunteers.
- Over 2,300 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 customers 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 30 hours of quality 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 stakeholders 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 Department of Juvenile Justice
- The Human Resources Department of OEPP
- The Finance & Accounting Department of OEPP
- The Information Technology Department of OEPP
- The Children’s Law Center, USC

Table II.1-1 – Guardian ad Litem Program Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
State Office	Administrative functions, to include lease management, attorney contracts, utility payments, travel reimbursement, and equipment contracts	County Guardian ad Litem offices	Office of Executive Policy and Programs Human Resources, Finance, & Procurement
State Office	Legal consultation, case work support, program policy and best practices development, legislative liaison, public awareness 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 Awareness 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. Operational locations

The Cass Elias McCarter 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 447, 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

<u>24</u> Classified	<u>1</u> Unclassified	<u>45</u> Contract
<u>0</u> Temporary	<u>3</u> Temporary (Grant)	<u>60</u> Temporary (time-limited)

7. Regulatory environment under which your organization operates

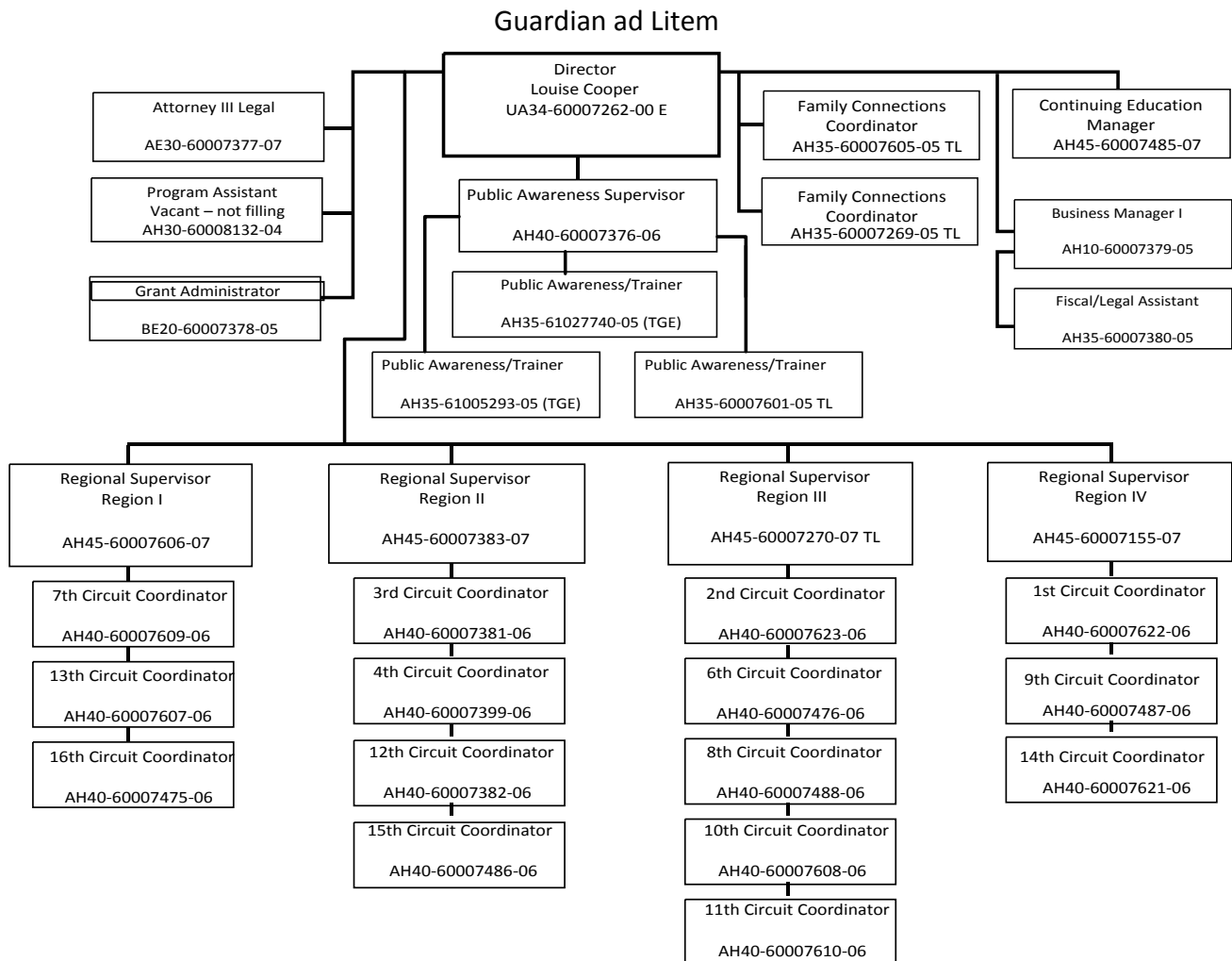
- The South Carolina Children’s Code at 63-7-1620 mandates a guardian ad litem for every child involved in a case of abuse or neglect proceeding in family court.
- The Cass Elias McCarter Guardian ad Litem Program operates under the statutory guidelines of Family Code Title 63, Chapter 11 at 63-11-500 through 63-11-570 which creates the Guardian ad Litem Program and defines the role, rights and responsibilities of the volunteers whom 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

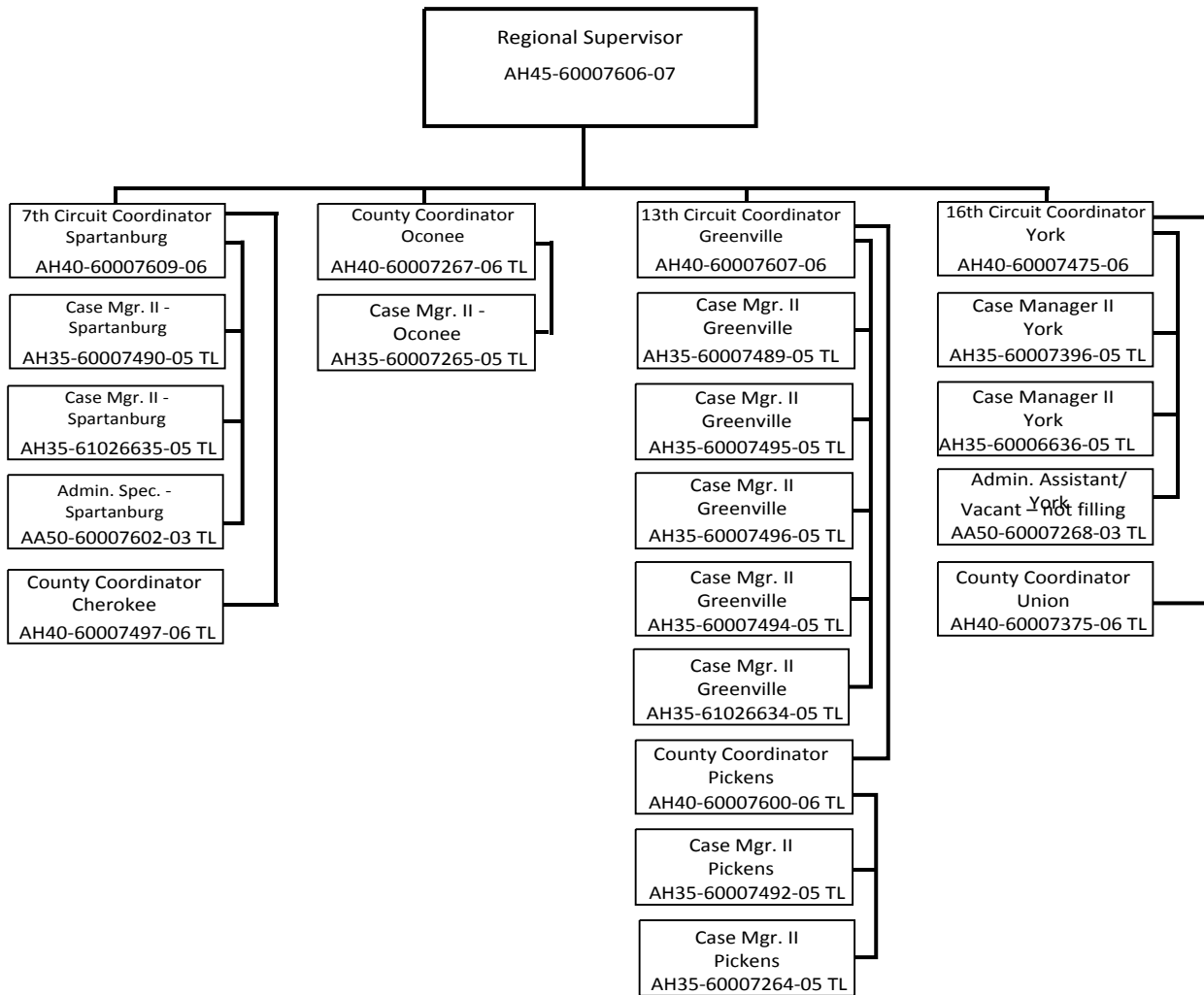
- Monthly ETO [Efforts To Outcomes] database report includes for each county and the state:
 - Number of cases received
 - Number of cases accepted

- Number of children served
- Number of volunteers assigned
- Number of volunteers trained
- Number of volunteers who resigned
- 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 to designate recruitment and training goals.
- A detailed plan for public awareness and diversity for volunteer recruitment is a core part of the county plans.
- The Public Awareness team travels to individual counties and assists with direct implementation of recruitment plans and pre-service volunteer training.

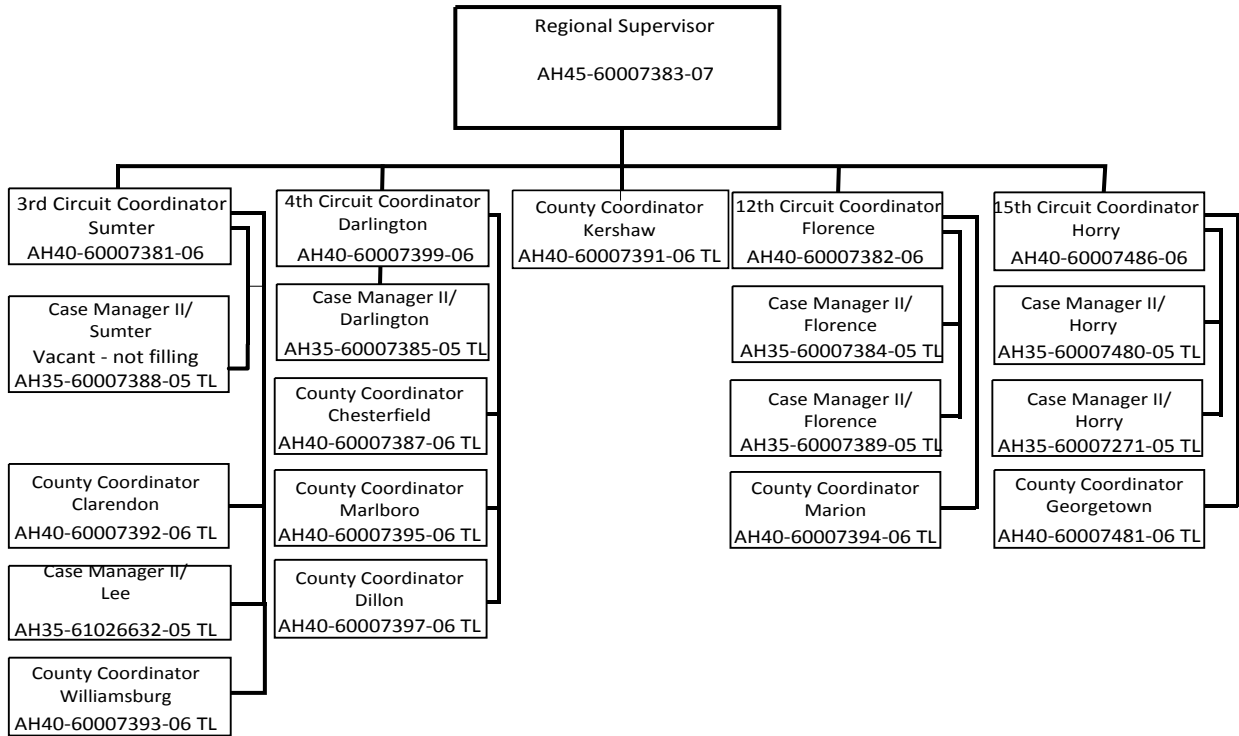
9. Organizational Structure



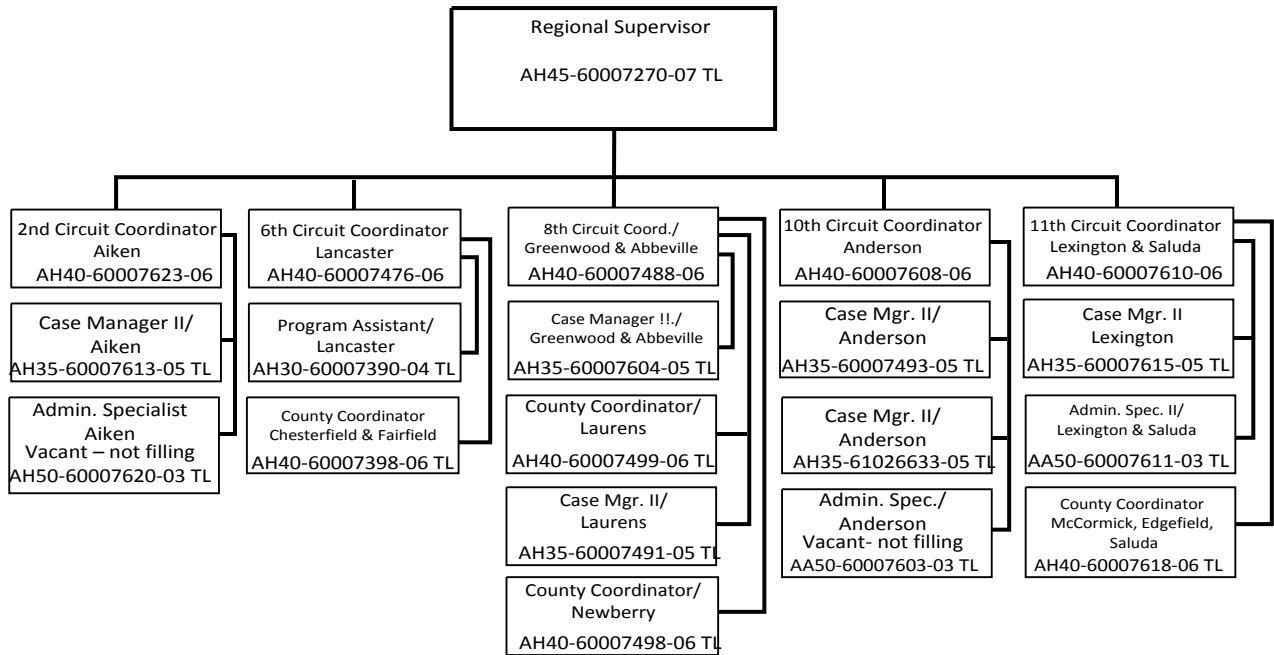
Guardian ad Litem (Region I)



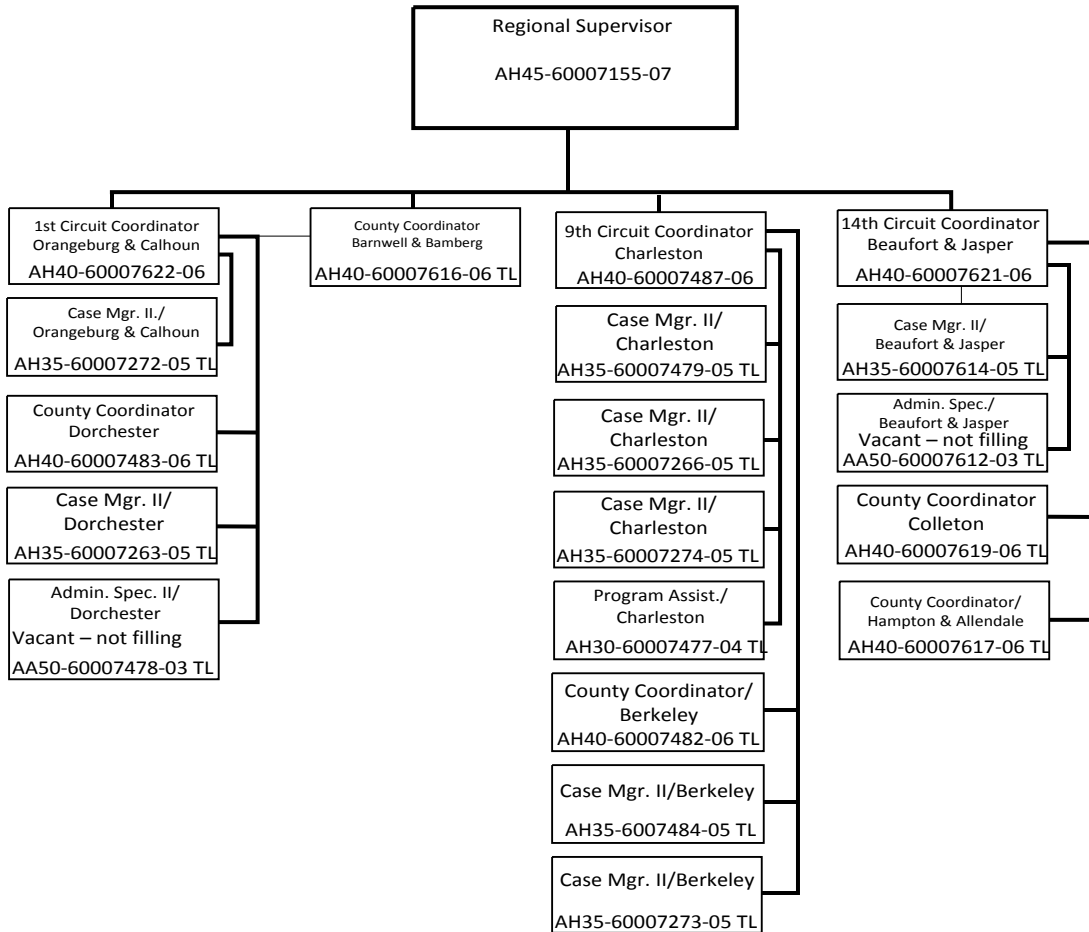
Guardian ad Litem (Region II)



Guardian ad Litem (Region III)



Guardian ad Litem (Region IV)



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 09/10 Actual Expenditures		FY 10/11 Actual Expenditures		FY 11/12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 2,488,082	\$ 842,754	\$2,998,778	\$ 641,808	\$ 3,602,509	\$ 498,788
Other Operating	\$ 1,226,983	\$ 57,870	\$1,535,389	\$ 45,104	\$ 2,760,099	\$ 45,170
Special Items			\$	\$	\$	\$
Permanent Improvements			\$	\$	\$	\$
Case Services			\$	\$	\$	\$
Distributions to Subdivisions			\$	\$	\$	\$
Fringe Benefits	\$ 726,659	\$ 165,263	\$ 976,042	\$ 197,688	\$ 1,246,977	\$ 174,576
Non-recurring			\$	\$	\$	\$
Total	\$ 4,441,724	\$1,065,887	\$ 5,510,209	\$ 884,600	\$ 7,609,585	\$ 718,534

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross References for Financial Results*
		State	Federal	State	Federal	
D-17 Cass Elias McCarter 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	1,065,887	State	884,600	Table 7.1.1 Graph 7.1.2 Table 7.2.1 Graph 7.2.2 Graph 7.3.1
		Federal		Federal		
		Other	3,375,837	Other	4,625,609	
		Total	4,441,724	Total	5,510,209	
		% of budget:		% of budget:		
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: 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?

Senior leaders include the State Director, the General Counsel, Regional Supervisors, and the Public Awareness Supervisor who meet monthly to discuss program goals for child advocacy, examine the impact of the trends within partner agencies, and set priorities for the state program and for individual county offices. An individual plan is written for each county annually, setting goals for volunteer recruitment and improved advocacy. Coordinators participate in the production of the plan. A monthly report from the ETO database that indicates the success of the local offices is distributed to all staff to monitor performance. Communications concerning goals and priorities occur via email, telephone, meetings and trainings. Performance expectations for individuals are contained in positions descriptions and EPMS Planning Stages.

Core organizational values include placing the best interests of children first in all case work decisions and 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 maintaining confidentiality in case work and ensuring face-to-face contact with children. It is also essential to investigate the facts of the cases sufficiently to inform the Court with accurate information. The importance of these concerns is stressed in volunteer pre-service training and in written policy. Staffing cases is one means of communicating the continuing duty to the ethical framework of child welfare work. All staff is involved in staffing cases. General Counsel also informs staff of decisions in state and federal cases that impact ethical considerations via written communications.

1.2 How do senior leaders establish and promote a 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 SCDS 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.

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?

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. Children so assisted have a better chance of more stability in adulthood. One associated risk is training volunteers well for the complex task as court-appointed advocates. To combat that risk the Program provides a 30-hour free course, conducts extensive pre-service interviews, and provides continuing education and on-going support. Volunteers also have required record checks, including national criminal record checks and state Central Registry of Child Abuse and Neglect checks.

As more volunteers are recruited, the public is more fully educated on the dangers of child abuse and neglect. Volunteer guardians ad litem learn that children who are abused often become the prison population of tomorrow, a sad consequence for both the victims and the community. The impact of public awareness is to help children find safe, permanent homes today and more productive futures.

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

Fiscal accountability is regulated through the OEPP Finance Office which employs SCEIS. 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 45 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 monitors performance to ensure that the program is in compliance with the law and court rules.

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

Reviewed monthly:

- # of children served
- # of volunteers trained
- # of current volunteers
- # of termination of parental rights actions filed in cases for with an appointed volunteer guardian ad litem; when those cases are scheduled for hearing
- # of volunteers who have resigned that month
- # of staff appointments to cases
- 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.

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?

Annual county plans provide benchmarks to measure success. Coordinators give feedback on the plans to supervisory leadership, as well as participate in developing the plans. Achievement of county performance measures is 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 leaders promote that value to county staff and volunteers by being involved in case resolution and continuing education in child advocacy.

1.7 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. Skill identification enhances employee satisfaction and gives the Program the benefit of the employees' best aptitudes. Skill development increases employee retention and builds additional expertise. In the hiring process, succession planning is a conscious motivator in selection of new employees.

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

County Coordinators are involved in the development of SMART goals for their counties. SMART goals must be specific, measurable, attainable, relevant, and time-bound. County staff identifies county obstacles and opportunities. The public awareness team assists county staff members with recruitment efforts while preserving county ownership of goals.

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

Guardian ad litem staff is notified of continuing education opportunities for employees and volunteers via email and newsletters. Staff meetings are held quarterly. Regional Supervisors and County staff conduct volunteer continuing education. Data training is conducted in county regions as needed.

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 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.

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

The Cass Elias McCarter Guardian ad Litem Program is an active member of the National Court Appointed Special Advocate Association (NCASAA). In addition GAL staff members serve on 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
- Project Best [Trauma-Focused Cognitive Behavioral Therapy broker training]

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 Cass Elias McCarter Guardian ad Litem Program is updated each year as part of the grant application for the National Court Appointed Special Advocate Association (NCASAA) state grant. The plan is written as a team by senior leadership. The strategic plan addresses the strengths and weaknesses of the organization by objective 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 72% 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. The policy mitigates confidentiality risks that come with social

networking by volunteers. The Program purchased webcams this year with VOCA grant funds to provide for remote staff meetings and training. To plan for workforce needs, county staffing is determined by an objective case load measure that indicates the need for staff increase or reduction per office.

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 and help locate foster children. The strategic plan can be accomplished through the data collection, data dissemination, County/Public Awareness 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?

The strategic challenges identified in the Executive Summary are:

- Recruiting and retaining individuals to volunteer 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.
- Recouping the 3+ years of work days lost to furlough.

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 volunteers and better supervision flow from that goal. Strategic goals for a public awareness/training team provide tangible county assistance to meet recruitment goals and train volunteers well. Close monitoring of county case loads drove the decision to reduce some county staff and add staff in one office. Needs assessments were based on analysis of trends in caseload over several years. The assessments are on-going. 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 10-11 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
Recruit sufficient volunteers to support 100% child abuse & neglect case appointment with no staff cases.	Identified special emphasis counties and applied PA/T intensive services. Actively included county staff in all recruitment efforts.	Two grant-funded PA/T positions and one time-limited PA/T assisted county staff in public awareness efforts statewide to continue robust volunteer recruitment.	Table 7.1-1 Graph 7.1-2 Table 7.2-1 Graph 7.2-2 Table 7.5-1
Increase volunteer retention through case management support & continuing education that improve volunteer performance and enhances positive outcomes for children.	Enhanced contact with volunteers through social media. Regional and state staff increased case management participation with volunteers. Continuing Education Manager position supported volunteer retention efforts and volunteer excellence through continuing education.	Created the Continuing Education Manager position. Began consistent continuing education programs in the counties. Began participation in DSS permanency roundtables for positive outcomes for children.	Table 7.4-2 Table 7.4-3
Implement a new data system that collects and tracks child outcomes.	Implemented web-based Efforts to Outcome (ETO) database through a grant from NCASAA to track child outcomes more effectively and timely.	Began training county staff January 2011; assisted Social Solutions with construction of necessary reports for outcome tracking throughout 2011.	See narrative section 7.5
Increase Family Connections services in the 2 pilot regions and begin family searches through the state.	Continued Family Connections grant project in 2 pilot regions for year 3 of the 3 year grant. Expanding Family Finding search training to volunteers.	Assist youth in foster care with finding and building connections for transition out of the child welfare system.	See narrative section 7.5

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?

Monthly assessments of county data provide the necessary information to determine the Program’s progress towards 100% case acceptance with no staff cases. The Public Awareness team identifies what efforts have been made towards recruitment goals and reports the findings. Case load 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 new ETO data system was not as complete a system as expected. The schedule for implementation was delayed and the GAL Program has assisted Social Solutions, the parent company, with developing reports and data entries consistent with child advocacy data needs.

The Family Connections pilot project requires collaboration with DSS which has been difficult. Slow to begin referrals, DSS is now sending referrals outside of the grant parameters, slowing the process for youth who are eligible. The difficulties are being addressed in the grant period in order to create a system that can be sustained beyond the grant. Volunteer GALs outside of the grant areas are being trained to search so that DSS can use these connections for possible permanency for youths.

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 Awareness Plan development. Regional Supervisors meet with county staff to develop county plans that support the strategic objectives.

2.5 How do you measure progress on your action plans?

The monthly ETO database statistical report measures key performance numbers for volunteer recruitment. An annual data report is done on the calendar and fiscal year for bi-annual reports. County Plans are reviewed before being rewritten each year. Recruitment plans are reviewed after each volunteer training. The Family Connections grant activities are evaluated by the USC Center for Children and Family Studies, as well as by GAL Program staff.

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

The strategic planning process is improved by more input from leadership. 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> or www.sccgal.org.

**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 of the Guardian ad Litem Program include the persons and agencies involved in cases of child abuse or neglect 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.
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. Participation in the Children's Justice Act Task Force and the Bench/Bar Committee provide updated information on expectation of system's partners and new federal and state legislation in the field of child welfare.

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 should have direct access to his or her guardian.

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 which they feel is appropriate. The bench may also address concerns with the local county contract attorney for the Program.

DSS and the Guardian ad Litem staff meet 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 through the county office to the regional staff to the state office as necessary.

Defendant parents should be interviewed at the inception of a case by the volunteer guardian ad litem. During the pendency of the case volunteers should talk with the defendants with enough frequency for the volunteer to assess the defendants' progress in the case. Defendant parents may address any complaints to the county GAL staff. They may also complain 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?

Any complaint made by a customer as defined above is investigated to determine if the process for the case was consistent with best practices of advocacy by both the volunteer and staff. Complaints and compliments are reviewed by senior leaders for potential policy changes. If a staff member or volunteer acts inconsistently with program requirements re-training is the first step to address the issue.

3.5 How do you use information and feedback from customers/stakeholders to keep services or 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 us 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. Guardians ad litem should always inform the Court of the child's wishes even if they cannot recommend it as in the child's best interest. Visiting the child is the most important thing the volunteer can do.

To build a positive relationship with the family court bench, volunteers must be 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 and Program staff must be professional and knowledgeable of the facts of the case. 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 requires 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 possible. In cases where families are reunited and lives improved, defendants often feel very positive about the volunteer guardian ad litem.

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 Guardian ad Litem Program utilizes a data collection system called Efforts to Outcomes or ETO. 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 termination of parental rights (TPR) cases filed;
- the number of volunteer hours of service.

Guardian ad Litem Program operational measures:

- staff ratio to volunteers;
- the number of staff cases;
- 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 selects the parameter for measurement. Measures from the ETO 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 in foster care aging out without adoption.

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 measures: reviewed monthly and annually by county and state

- # new cases
- # children in new cases
- # cases closed
- # children in closed cases
- # staff assigned cases
- # all cases served
- # all children served
- # volunteers trained
- # volunteers resigned
- # volunteer service hours
- # 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 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, such as Finding Family searches.

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

New staff is trained on the use of the database in a specialized 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, but the ability to view it as it is entered will improve accuracy and availability. County paper files are audited for match to the ETO data.

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. Recruitment 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 to 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?

The state office of the Guardian ad Litem Program is responsible for business operations, including office leases, contracts for attorneys, payment of expenses, supply orders, and budget production and monitoring. The state office coordinates standardization of child advocacy policy statewide, assists with case resolution and conducts legal research and support. Grants writing and management and data collection is coordinated through 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 and creativity to be proficient case managers. They must exhibit cultural sensitivity, perform data collection and extrapolation, write and teach well, and assist volunteers with preparation for court. 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 Awareness 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 location? 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. The Continuing

Education Manager has systemized efforts to expand and share knowledge of potential trainings.

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 applicant. 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.

5.4 How do you access your workforce capability 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 2,300+ volunteers supervised by a staff of 88 persons. Contract attorneys provide representation for the volunteers. Contract attorneys need to be familiar with family court and skillful at working with volunteers for better outcomes in court for children.

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. The County Plan system within the GAL Program evaluates the county program and sets goals for attainment within a specific time frame. Pre-service and continuing education trainings are evaluated by each participant upon the end of the session.

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 for staff, such as the Case Manager training, data training, supervisor's training and public awareness/recruitment training provide concrete skill competencies and organizational knowledge. Continuing education provides the opportunity for knowledge and skill expansion. 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 supervisor on-site, except database training, which is held in Columbia in group training class. Staff members are required to attend volunteer training and to take at least one case, in order to fully understand the Program's mission. Training of Facilitator training (TOF) prepares new staff to teach adult learners. Volunteer training provides diversity training and safety training.
- 5.8 How do you encourage on-the-job use of new knowledge and skills?**
New knowledge and skills are encouraged through email or newsletter 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 is more autonomous in conducting advocacy for children and conducts more efficient case resolution. Well-trained staff 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. Effective pre-service volunteer training is the first and best volunteer retention tool. GAL staff members receive specialized training for teaching adult learners.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?**
The internal audit processes confirm that county offices conduct business in a manner consistent with child advocacy best practices and GAL Program policy. County offices demonstrate effective leadership through positive results in volunteer workforce growth, volunteer retention and staff retention.
- 5.11 How do you motivate your workforce to develop and utilize their full potential?**
Supervisors make opportunities available to employees that reinforce 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 their particular interests. Employees are asked to join task forces and other organizations that hold interest for them and are germane to the Program's mission. The Program favors internal promotion when possible.

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 and supportive case management. 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 and assisting them with questions. Coordinators provide case oversight before volunteer reports are submitted 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 members 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 88 employees who are housed in 38 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 leadership identifies employees 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.

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. 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;
- 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, continuing education, and staff supervision. We ensure that the staff functions are performed by providing training through the Program, and auditing by supervisory staff. Child advocacy best practices are Program policy and staff members are held accountable for the standards through performance measures taken from the 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 prepares 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 through having one business center for the entire program. One office coordinates and manages operational expenses. 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 awareness 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 case work 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 post-training evaluations, county audits, County Plan production, post-case evaluations and database monitoring. The state office evaluates the business support process for efficiency and creates

work flow procedures where weaknesses are demonstrated by failures to have supplies, equipment or contracts delivered on time to county offices. Accounting for funds and controlling costs is 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 awareness team has expanded recruitment. IT equipment that allows for communication with remote offices purchased by grant 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 case load data and the trends on case load 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 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 services performance that are important to your customers? How do your results compare to those of comparable organizations?

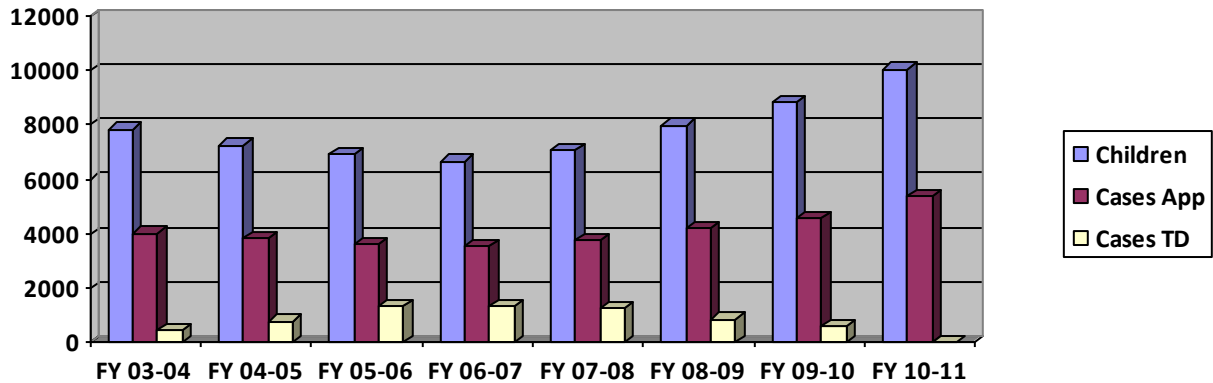
Table 7.1-1 shows the number of children and cases served by the Cass Elias McCarter Guardian ad Litem Program for the past four fiscal years, a key measure of mission performance.

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	7,080	3749
08-09	7,984 [+904 children]	4192 [+443 cases]
09-10	8,831 [+847 children]	4554 [+638 cases]
10-11	10,024 [+1,193 children]	5400 [+846 cases]

Graph 7.1-2 tracks the Program’s progress for eight years. The Program served 846 more cases this year and 1,193 more children. In addition, for FY 2010-2011, the Guardian ad Litem Program accepted 100% of all cases of child abuse or neglect. Quality advocacy for all children who require a guardian ad litem is our key measure of mission success.

Graph 7.1-2 History of Guardian ad Litem Program Service: Children served; Cases appointed; & Cases turned down



There is no comparable organization within the state. Guardian ad Litem/CASA programs vary widely in structure in the nation. Most states do not have a statewide structure and volunteer advocates are not available in all jurisdictions. Local programs frequently do not measure the number of children for whom they do not provide an advocate. It is difficult to provide a meaningful comparison to other volunteer child advocacy programs for that reason. The North Carolina GAL Program is required by statute to accept 100% of the cases. The South Carolina Program accepted 100% of cases in 2010-2011 by order of the Supreme Court of South Carolina.

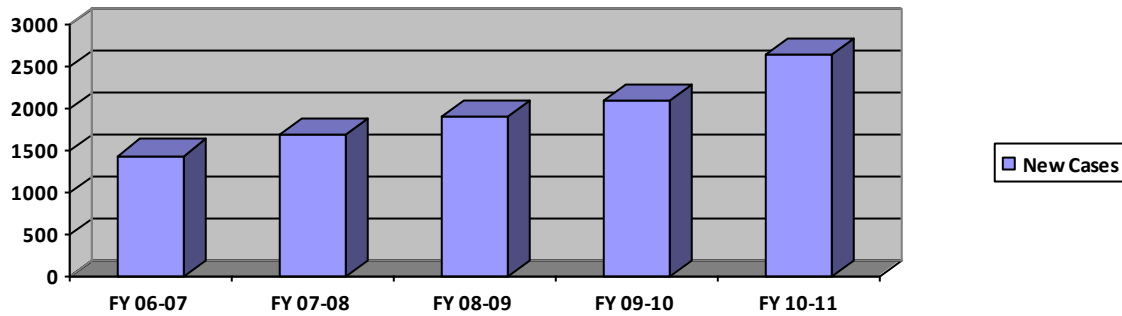
7.2 What are your performance levels and trends for the important measures of customer satisfaction and dissatisfaction? How do your results compare to those of comparable organizations?

The Cass Elias McCarter Guardian ad Litem Program is one of the oldest child advocacy programs in the United States. The statewide structure allows for more efficient use of funds because operational expenses are consolidated. South Carolina historically served a greater percentage of children with a volunteer guardian ad litem than any other state except for those which required the program to accept 100%. In FY 2010-2011, the South Carolina Program met a long-time goal of 100% acceptance of all cases. Graph 7.2-2 shows 2,644 new cases served in FY 2010-2011.

Table 7.2-1 Guardian ad Litem Program Percentage of New Cases Assigned a Volunteer

New Cases	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
Appointed	52%	58%	69%	77%	100%

Graph 7.2-2 New Cases Annual Appointment History



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

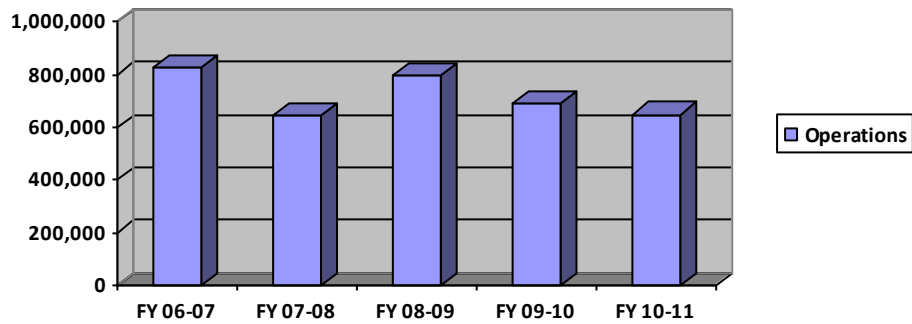
Approximately 72% of expenditures in FY10-11 were spent for staff salary and fringe. Nearly another 17% was expended on attorney contracts for representation of the volunteers in court. Attorney contracts are an integral part of quality child advocacy. Historically the SC Commission of Indigent Defense would reimburse attorneys serving in this capacity at the rate of \$100 a hearing. For the last two years, the GAL Program has paid for contracts because the SCCID has had no funds for this provision. A portion of attorney contracts, 23%, is paid with pass through IV-B funds from DSS. This is a valuable contribution to child advocacy and yet the program is absorbing the remaining expense. GAL contract attorneys appeared in 13,228 hearings for FY 10-11; reimbursement for those appearances would have costs the state over a million dollars. The contract system supports attorney representation at a greatly reduced rate; the expense, however, has strained the Program’s resources. In FY 11-12 contracts have been reduced for a savings of over \$200,000. Statute requires the volunteers to have representation, but the GAL Program may have no choice but to discontinue attorney contracts in the future.

Physical operating expenses including rent, telephone, utilities, travel, insurance and equipment contracts were 11% of the funds expended. The entire Program’s operational expenses less attorney contracts were \$648,162. Divided among the one state office and 37 county offices, the cost per office was \$17,057, \$1,655 less than in FY 09-10. For FY 2009-2010, the GAL Program paid \$195,925 and the average monthly rent for a remote office was \$441.00. The average monthly rent for county office space in FY 10-11 was \$443.00.

Graph 7.3-1 charts operating expenses for the most recent 5 years for the 37 remote offices and one state office.

FY 06-07 \$824,669	FY 09-10 \$692,336
FY 07-08 \$644,957	FY 10-11 \$648,162
FY 08-09 \$798,613	

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 had an excellent retention rate for staff. In FY 2010-2011, an evaluation of case loads indicated that there were reductions in several counties that made it necessary to reduce staff in six locations. Seven time-limited positions were ended. In addition, seven individuals left the Program due to retirement or other employment. At its highest, the Guardian ad Litem Program had 99 employees. Besides the positions closed, two other vacancies have been left unfilled. Another position was permanently moved from the Program to OEPP IT. Even with the loss of positions the Program had an 85% retention rate for FY10-11.

Tables 7.4-2 & 7.4-3 give the number of employees and volunteers in the last five fiscal years and the number whom the CEMGAL Program retained. The Guardian ad Litem Program experienced an 85% staff retention rate for FY 2010-2011. Volunteer retention is important to the ability of the GAL Program to achieve the mission and was 89% in FY 2010-2011.

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%
FY 10-11	99	85	85%

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%
FY 10-11	2893	298	2595	89%

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

The effectiveness of the Guardian ad Litem Program has been reflected in the increase in accepted cases and more children served until July 1, 2010, when the Program began 100% acceptance. FY 2010-2011 performance was measured by how well the GAL Program accomplished 100% service without increasing staff cases. Table 7.5-1 indicates the decrease in staff cases even as the percentage of cases served has risen.

Table 7.5-1 Staff Cases

Fiscal Year	Total Cases	Staff Cases	Percentage of Staff Cases
FY 08-09	4192	528	13%
FY 09-10	4554	469	10%
FY 10-11	5400	318	6%

As indicated in the key strategic goals, the program implemented a new data system in FY 2010-2011. The ETO [Efforts to Outcomes] data system is web based giving the Guardian ad Litem Program the ability to see real time statistics. The GAL Program is assisting Social Solutions, the developer, with creating reports that will yield outcome tracking while GAL staff converts to the new system.

Another measure for increased performance by the program is our involvement with finding family efforts. The Family Connections pilot project continues in the two pilot areas as part of the grant. Despite grant implementation difficulties, expansion of finding family efforts by volunteers has begun. Volunteer GALs outside of the grant areas are being trained to search at the request of DSS so that DSS can use these connections for possible permanency for youths. The GAL Program is willing to collaborate so that youths will not age out of the foster care system with no supportive connections.

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 case work 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 and supportive media coverage at the local level in each county.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Economic Opportunity

Section I - Executive Summary

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

There are approximately 676,555 people in the Palmetto State living at or below the poverty level (source: 2009 US Census, American Community Survey). Working in partnership with South Carolina communities, the Office of Economic Opportunity (OEO) administers and distributes funds that are designed to promote the economic self-sufficiency of citizens in all 46 of our counties. The programs target anti-poverty goals and permit maximum flexibility in meeting locally identified needs. These programs fund community needs such as health care, education, youth leadership development, employment, housing assistance and emergency shelter for victims of domestic violence.

Currently, the OEO administers four federally funded programs, two federal stimulus grants and one program funded by South Carolina energy companies. Programs operate on different program years and applicants must be income eligible. Household income guidelines are based on the federally issued Poverty Income Guidelines that are updated and published annually.

Mission Statement: The OEO is dedicated to revitalizing our communities by providing individuals and families with the tools necessary to achieve economic self-sufficiency.

Vision: To make South Carolina a benchmark state in community action by encouraging the partnering of public and private entities committed to the economic self-sufficiency of our citizens.

2. Major Achievements for FY 2010-2011

- A. The OEO continued to refine the statewide web-based centralized client intake system for community action agency sub-grantees through continued training, review, Help Desk support and system enhancements.
- B. The OEO, with Department of Energy (DOE) American Recovery and Reinvestment Act (ARRA) funds, and in partnership with the South Carolina Technical College System continued providing weatherization training through the seven Energy Efficiency Technical School training centers which includes the newest addition of Tri-County Technical College, Easley Campus.
- C. The OEO Weatherization and Weatherization ARRA grant shops weatherized a record of 2,548 and 823 houses, respectively, for a total of 3,371 dwellings weatherized.
- D. The Emergency Shelter Grants Program (ESGP) has provided financial and non-financial services to a total of 32,476 homeless individuals or individuals at-risk of becoming homeless.
- E. The Homelessness Prevention and Rapid re-housing Program (HPRP) has provided services to 6,949 individuals.

- F. The OEO disbursed a special allocation of \$1.3 million in Low Income Home Energy Assistance Program (LIHEAP) funds for assistance to elderly & disabled South Carolinians.
- G. The OEO has worked with challenged agencies to make them more attractive partners to private entities interested in the economic self-sufficiency of our citizens.
- H. The OEO effectively eliminated multiple instances of fraud and abuse within the community action network.

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

- a) Make South Carolina a benchmark state in the field of community action.
- b) Ensure all agency performance activities are completed according to set deadlines.
- c) Ensure that all sub-grantees are performing grant activities in accordance with federal and state regulations.
- d) Help agencies adapt to a reduction of resources due to the phasing out of ARRA and a likely reduction of other federal funding.
- e) Continue to eliminate waste, fraud, and abuse in sub-grantee agencies.

4. **Key Strategic Challenges**

The OEO must continue to support sub-grantees with efficient and meaningful monitoring, training, support, 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.
- Assisting agencies in transitioning to reduced funding levels.

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**

The OEO serves as the state pass through entity for federal grant funds aimed at increasing the self-sufficiency of low-income individuals and families. 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 Reinvestment Act. The ARRA grants are administered as separate grants but serve the same people and functions except in the case of HPRP which focuses on homelessness prevention rather than emergency shelter.

- Community Services Block Grant (CSBG) – The US Department of Health and Human Services funds local initiative programs focusing on, for example, employment and education plus emergency services such as rent, mortgage, and food assistance (ARRA portion ended 9/30/10).
- Low-Income Home Energy Assistance Program (LIHEAP) – The US Department of Health and Human Services funds programs that provide assistance to address energy needs for low-income individuals.

- Weatherization Assistance Program (WAP) – The US Department of Energy funds weatherizing dwellings of low-income persons to increase energy efficiency (ARRA portion ends 3/31/12).
- Emergency Shelter Grants Program (ESGP) – The US Department of Housing and Urban Development funds client assistance and operating expenses for homeless shelters.
- Homeless Prevention and Rapid Re-housing Program (HPRP) – The US Department of Housing and Urban Development funds client assistance to prevent homelessness (ARRA funds exclusively, ends 7/14/12).

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.

Section II. 2, 3 & 4 –Office of Economic Opportunity Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/ Stakeholders	Key Partners
Community Services	Community Action Agencies, vulnerable low-income residents, federal funding sources, Governor, and General Assembly	US Department of Health and Human Services, South Carolina Association of Community Action Partnerships, SCDSS, and 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, and 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, and SCDSS
Compliance monitoring	Community Action Agencies, homeless shelters, federal funding sources, Governor, and General Assembly	South Carolina Association of Community Action Partnerships and SC Head Start Collaboration Office

5. Operational locations

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

6. The number of employees

<u>14</u> Classified	<u>1</u> Unclassified	<u>0</u> Contract
<u>0</u> Temporary	<u>9</u> Temporary (Grant)	<u>0</u> Temporary (time-limited)

7. 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.

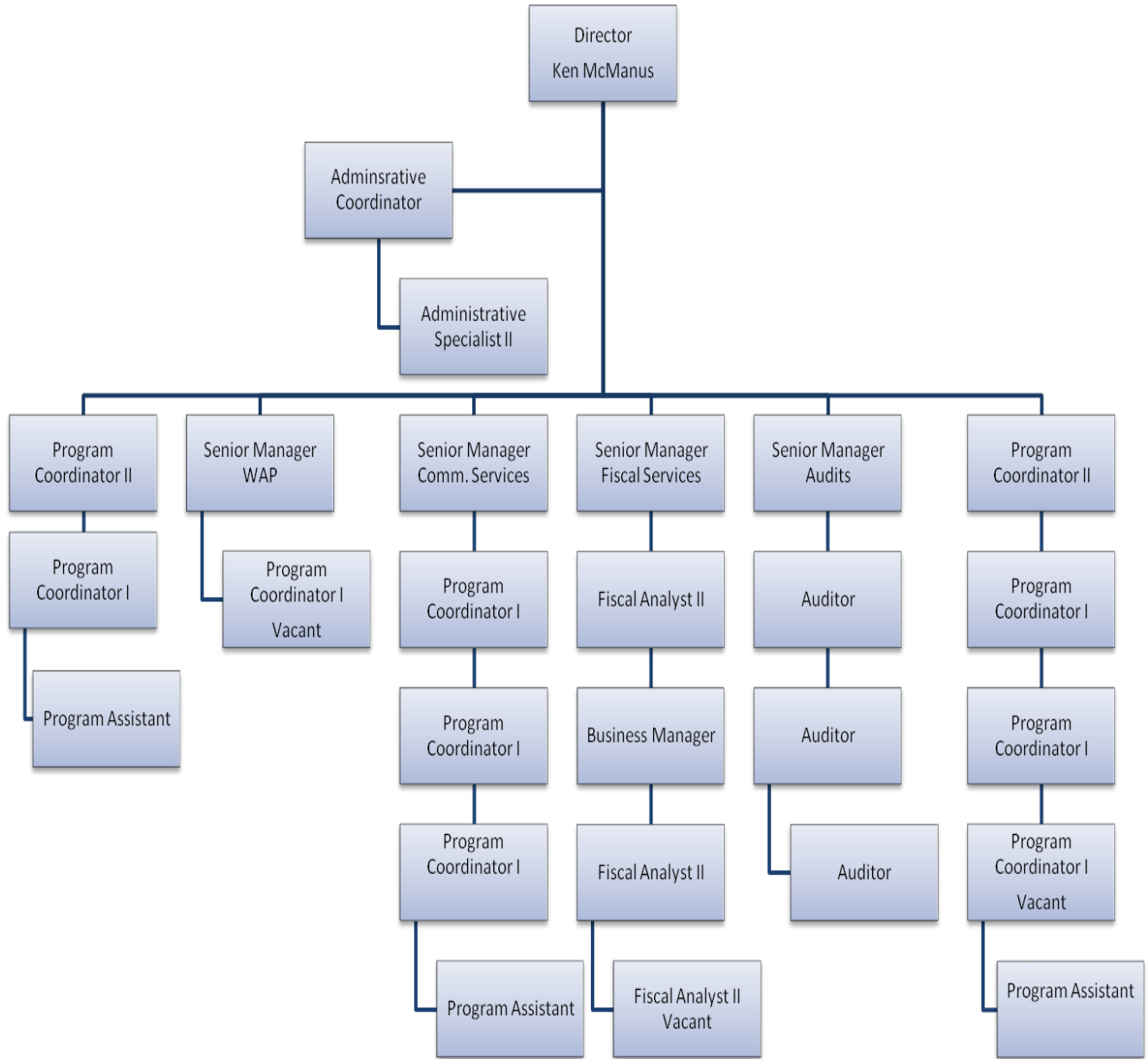
8. Performance improvement systems

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 Structure

Office of Economic Opportunity



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	1,054,476		968,497		1,195,229	
Other Operating	2,424,146		1,377,390		3,459,528	
Special Items	0		0		0	
Permanent Improvements						
Case Services	0		0		0	
Distributions to Subdivisions	97,205,727		85,423,926		70,915,463	
Fringe Benefits	242,998		320,506		265,198	
Non-recurring						
Total	\$100,957,347		\$88,090,319		\$75,835,418	

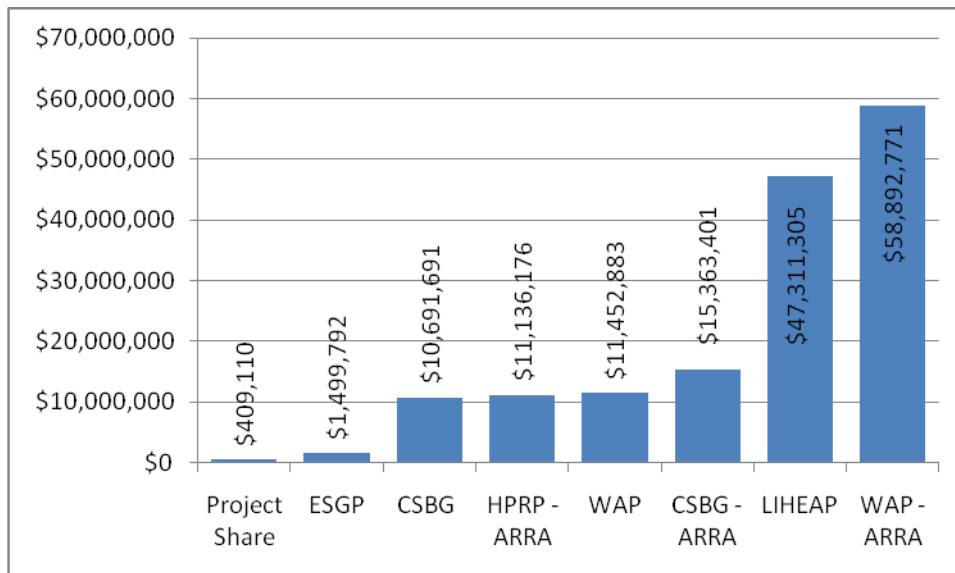
Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Office of Economic Opportunity*	Major Program Area Purpose	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
* 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, ESGP, Stimulus: CSBG ARRA, WAP ARRA & HPRP ARRA)	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	100,864,959	Federal	88,018,221	
		Other	92,388	Other	72,098	
		Total	100,957,347	Total	88,090,319	
		% of budget:		% of budget:		

PY2010 - Funding by Program



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 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?

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, technical assistance memoranda, and Fiscal Guidance Manual for sub-grantees. Organizational values are facilitated through an open door discussion policy that encourages empowerment and innovation. Ethical behavior is encouraged through internal controls routing work output through each division manager.

1.2 How do senior leaders establish and promote 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 leads by example in placing emphasis on being responsive to constituents and sub-grantees.

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?

Data, including demographics, goals, and outcomes achieved, is maintained on the number of low-income persons served through community action agencies and the number of homeless persons served through OEO funded emergency shelters. Grant status is continually monitored during the program year to assess grant compliance and possible program modifications.

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

Fiscal compliance is maintained through the OEPP Finance office which oversees all draw downs/disbursements issued by the OEO. Legal and regulatory accountability are maintained through a 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. These reports are tracked in a data base that reflects sub-grantee grant activity by grant component. Disbursements are processed based on a percentage-expended formula to ensure compliance with the federal Cash Management Act.

1.5 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
- # of low-income people achieving self-sufficiency on a variety of scales
- # of low-income people whose emergency situations are alleviated
- # of homeless persons and people at risk for homelessness whose immediate and long-term needs are addressed
- # of homes weatherized

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?

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

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

The OEO encourages the use of federal training dollars to increase employee knowledge and help them develop into future organizational leaders. Staff attending trainings must train staff not attending upon completion of that training. In addition, the OEO attempts to promote from within 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 strategic objectives?

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

1.9 How do senior leaders 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. OEO Management and staff are required to attend grant mandated National training provided by the funding source to increase grant knowledge, compliance and job skills.

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?

Employees are empowered by encouraging independence and decision-making, as appropriate and with increasing degree, as capabilities are demonstrated. Employees are rewarded through recognition by leadership individually and during staff meetings. Sub-grantees are motivated and rewarded through an annual awards program recognizing achievement and best practices.

1.11 How does senior leaderships 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.

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 (NASCSPP)
- 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 operating activities. Involvement is based on support for anti-poverty initiatives.

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

2.1 What is your Strategic Planning process, including key participants, and how does it address: a) your 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.

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 sub-grantees.

Section III Strategic Planning Chart for the Office of Economic Opportunity

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 10-11 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 to meet service and expenditure goals.	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 partners to increase the 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

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

Strategic objectives are designed to overcome challenges 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.

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?

Action plans to achieve strategic objectives are developed in conversation with the SC community action network to ensure input from all involved parties. Tracking plan development and achievement is accomplished through an in-house filing and tickler system and division calendar that allows managers to stay on task and achieve office objectives.

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

Objectives/action plans/performance measures are communicated through 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.

2.5 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.

2.6 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.

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 public can access current State Plans governing all OEO funded programs via our website at www.oep.sc.gov/o eo.

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

3.1 How do you determine who your customers are and what their key 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. Funds are awarded based on a competitive grant method.
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. Monthly reporting by the sub-grantee provides monitoring of funds.

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

Changes in federal funding source expectations are communicated in writing from the funding source and/or via national associations. 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.

3.3 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 location information 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.

3.4 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 logged.

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

Information garnered through polls and public hearings is incorporated in final drafts of state plans and is used to offer appropriate training and technical assistance. Feedback from monitoring visits is used to draft training modules for two annual statewide training events.

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 customers and stakeholders are encouraged through an inclusive decision-making process in designing and implementing state plans for the various programs funded.

Section III – Elements of Malcolm Baldrige

Category 4: Measurement, Analysis and Knowledge Management

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

OEO revenue and expenditure schedules are prepared monthly for review by the Director, program and audit staff and quarterly issued to sub-grantees to ensure accurate reporting. 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.

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

Census data is used to determine agency allocations and client program eligibility. In addition, national indicator data is used to assess the effectiveness of local programs designed in response to community needs assessments. Quarterly cumulative reporting is required on all stimulus grants via Federal Reporting.gov. Detailed vendor payment information is collected from sub-grantees to complete the 1512 reporting which is accessible to the public.

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

OEO key measures reviewed and rate of review

Key Measure	Review Methods (Time Frame)
Timely expenditure and disbursement of funds according to the Federal Cash Management Act	Monthly
# of low-income people achieving self-sufficiency on a variety of scales	Quarterly and annually
# of low-income people whose emergency situations are alleviated	Quarterly and annually
# of homeless persons and people at risk for homelessness whose immediate and long-term needs are addressed	Quarterly and annually

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

Comparative data is obtained through national associations for OEO administered grants that post best practices from across the country via the web.

4.5 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 desk 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.

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

Sub-grantees develop corrective action plans in response to weaknesses and/or findings indicated via the monitoring process. The OEO encompasses these needs when identifying overall network training needs.

4.7 How do you collect, transfer and maintain organizational and workforce knowledge (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 is 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**

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 staff is divided into grant specific divisions, in addition to the fiscal, and audit 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 training designed to increase agency knowledge.

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

Senior staff meets regularly to discuss program initiatives and discuss goals that cross grant divisions. Skills and best practices among community action agencies are shared via annual training events. All grant divisions, fiscal, and audit share practices and provide training in OEO. Uniformity of those practices make for a common language between grant divisions.

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 access your workforce capability and capacity needs, including skills, competencies, and staffing levels?

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.

5.5 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.

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?

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 by example. Each manager is responsible for their staff training, review and performance compliance.

- 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. All supervisors are required to participate in supervisory skills training. New employee orientation is handled through the OEPP Human Resources office.
- 5.8 How do you encourage on-the-job use of new knowledge and skills?**
Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.
- 5.9 How does employee training contribute to the achievement of your action plans?**
Training is geared toward skills needed by employees to achieve action plans.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?**
The effectiveness of training is based 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.
- 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/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 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.
- 5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the 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.
- 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. 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

- 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 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?

- OEO internal management (internal transaction activity reports, quarterly management reports on achievement of internal and external goals, monthly and close-out reconciliations for all open grants, interim and final reporting)
- OEO external management (application budgets, monitoring, financial and program status reports)
- Governor’s Office of Finance internal management (budgets, draw-downs, coding)
- State level accounting management (SC Comptroller General’s Office)
- Federal level management (US Departments of Energy, Health and Human Services, Housing and Urban Development)

6.3 How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process design and delivery?

Communication between grant division managers and internal promotion is encouraged to ensure retention of organizational knowledge through staff changes. 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.

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

These processes are designed to monitor regulatory compliance with grant parameters. Budget and financial status reports are reviewed to ensure allowable expenditures. Program status reports assess agency progress in reaching program goals. Performance problems can therefore be identified early and training can be provided to overcome obstacles.

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

6.6 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 and audit division that supports each grant program.

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

This is determined through close management of resources and monthly financial status reports from sub-grantees. Federal award expenditures are reconciled to the state accounting system

on a monthly basis to ensure accurate tracking of budgets. Financial reporting is provided by the OEPP Financial Division. These reports are reviewed to ensure accurate grant balances.

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 services 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 2010 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 seven Energy Efficiency Training Centers. The number of individuals trained through these schools is another key measure of performance.

Sub-grantees reported outcomes relating to mission accomplishment as follows:

Table 7.1.1 CSBG Assistance

<i>Goal: Low-income People Become More Self-Sufficient.</i>	# Achieving Outcome PY2008	# Achieving Outcome PY2009	# Achieving Outcome PY2010
Unemployed and obtained a job	1556	2237	4748
Obtained pre-employment skills/competencies and received training program certificate or diploma	1331	2065	2803
Obtained safe and affordable housing in support of family stability needed to gain or retain employment	1070	615	1949
<i>Goal: The conditions in which low-income people live are improved through increased affordable essential services.</i>	# of Opportunities or Community Resources Created or Preserved PY2008	# of Opportunities or Community Resources Created or Preserved PY2009	# of Opportunities or Community Resources Created or Preserved PY2010
Accessible, safe, and affordable child care or child care placement opportunities for low-income families created or saved from reduction or elimination	3831	2039	3274
<i>Goal: Emergency Needs of Households in Crisis are Ameliorated.</i>	# Receiving Assistance PY2008	# Receiving Assistance PY2009	# Receiving Assistance PY2010
Emergency Vendor Payments, including fuel and energy bills and rent/mortgage payments	48,355	56,737	162,388

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	# of homes weatherized	# of ARRA homes weatherized
2006	964	NA
2007	402	NA
2008	429	NA
2009	790	969
2010	823	2,548

In the Weatherization PY 2010, 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 the 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, 2011, the following seat counts have been delivered to the CAAs and their approved subcontractors:

EPA Certified Renovator (CR) certifications –	140	
USDOE Lead Safe Weatherization (LSW) –	294	
Hot Climate – Whole House Mobile Home –	345	
Hot Climate – Whole House Site Built –	355	
BPI Envelope Professional-	31	
BPI Building Analyst		18
BPI – Insulation and Air Sealing	13	
BPI – Manufactured Housing	10	
Combustion Appliance Safety	106	
Safe Work Practices		269
Heating Systems Fundamentals	37	
Duct Testing & Air Sealing	34	
Respirator Safety		19
Total Students	1,671	

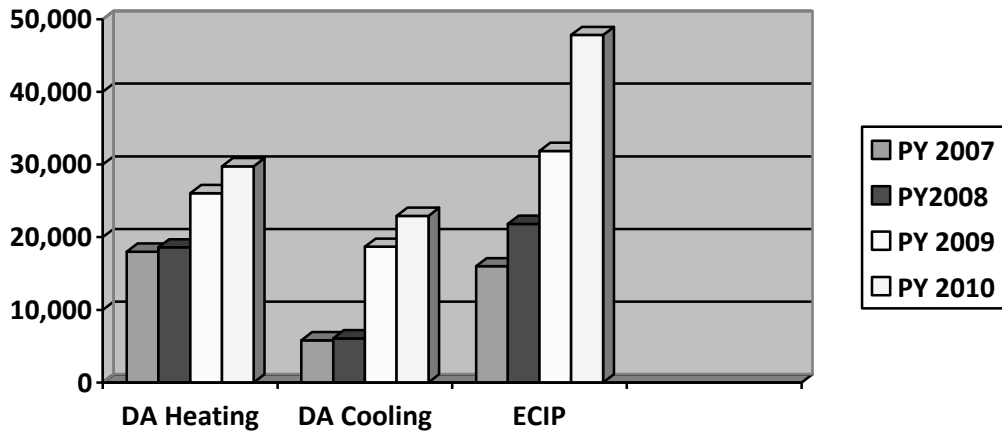
The CR and LSW classes are made available to ensure that USDOE lead safety standards are met for both workers and clients in the weatherization process. The Hot Climate classes are designed to produce quality results by tightening and sealing site built houses and mobile homes to reduce energy consumption 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 2010 was 133 houses. There were 823 homes done, for an 84% increase over the targeted goal. In the second year of the 3 year ARRA weatherization grant, 2,548 houses were completed. Altogether, 3,371 houses have been weatherized. This provides a substantial savings to low-income individuals in their energy costs 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 (Emergency Crisis Intervention Program) 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. (PY2010 - Direct Assistance Heating served 29,767, Cooling served 22,943 and ECIP served 47,814) The following table shows service for the past four years – 2007, 2008, 2009, and 2010.

Graph 7.1.3 LIHEAP Assistance



During PY 2010, Emergency Shelter Grant (ESG) Program funds were used to provide operating expenses for 33 emergency shelters and support services for more than 32,476 individuals, thereby alleviating their emergency situations and helping to move them toward more stable housing. ESG recipients provided financial and non-financial services to a total of 32,476 individuals. Financial services were provided to 2,957 individuals and 31,902 of these individuals received non-financial services such as emergency or transitional shelter services. Financial services allowed 574 individuals statewide to maintain permanent housing. Overall leveraged funds above the dollar-for-dollar match totaled \$6,919,048.98.

During PY 2010, the Office of Economic Opportunity continued to work with the nineteen (19) funded agencies that were granted 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.

Table 7.1.4 Homeless Prevention & Rapid Re-housing: September 1, 2009 – June 30, 2011

Section 2: Program Performance												
A. Number of Persons and Households Served												
1. Total Persons and Households Served												
	Homelessness Prevention				Homeless Assistance				TOTAL			
	Persons		Households		Persons		Households		Persons		Households	
	Q	GTD	Q	GTD	Q	GTD	Q	GTD	Q	GTD	Q	GTD
Total Served	1,527	6,382	500	2,394	235	806	101	367	1,762	7,188	601	2,761
2. Total Persons and Households Served by Service Provided												
	Homelessness Prevention				Homeless Assistance				TOTAL			
	Persons		Households		Persons		Households		Persons		Households	
	Q	GTD	Q	GTD	Q	GTD	Q	GTD	Q	GTD	Q	GTD
Financial Assistance												
Rental assistance	1,189	5,517	384	2,033	171	564	76	256	1,360	6,081	460	2,289
deposits	157	1,091	58	385	80	563	40	247	237	1,654	98	632
Utility payments	301	1,762	145	631	57	260	22	105	358	2,022	167	736
Moving cost assistance	7	16	3	5	6	27	3	12	13	43	6	17
Motel & hotel vouchers	6	14	2	7	10	59	3	27	16	73	5	34
Total-Financial Assistance	1,409	6,174	461	2,312	195	644	87	291	1,604	6,818	548	2,603
Housing Relocation & Stabilization Services												
Case management	1,491	6,034	470	2,246	233	805	97	363	1,724	6,839	567	2,609
Outreach and engagement	446	1,717	115	556	15	141	5	61	461	1,858	120	617
Housing search and placement	147	573	26	176	35	281	12	114	182	854	38	290
Legal services	1	1	1	1	2	3	2	3	3	4	3	4
Credit repair	0	60	0	16	0	32	0	10	0	92	0	26
Total-HRS Services	1,491	6,183	485	2,319	234	805	98	363	1,725	6,988	583	2,682
Section 3: Financial Information												
HPRP Expenditures	Homelessness Prevention				Homeless Assistance				TOTAL			
	Q		GTD		Q		GTD		Q		GTD	
Financial Assistance	\$577,444.31		\$3,635,382.82		\$134,549.14		\$742,867.21		\$711,993.45		\$4,378,250.03	
Housing Relocation & Stabilization Services	\$295,546.80		\$1,578,926.32		\$100,882.86		\$669,140.81		\$396,429.66		\$2,248,067.13	

Data Collection & Evaluation					\$41,746.10	\$285,378.37
Admin					\$36,727.30	\$253,682.09
TOTAL	\$872,991.11	\$5,214,309.14	\$235,432.00	\$1,412,008.02	\$1,186,896.51	\$7,165,377.62

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 OEO has a system for cataloging complaints for service delivery by Community Action Agency. Complaints of a routine nature are relayed to the appropriate CAA. Complaints of fraud and abuse are handled personally by the OEO Director. 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 your key measures of financial performance, including measures of 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 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?

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 is thoroughly trained on safety and health information and techniques. All employees successfully completed their EPMS Planning Stage requirements during the 2010 year.

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

Section II – Table II.1.1 - DIRECTORY OF SOUTH CAROLINA COMMUNITY ACTION AGENCIES

Aiken/Barnwell Counties Community Action Commission, Inc.

291 Beaufort Street, N.E., Post Office Box 2066, Aiken, SC 29802-2066

Beaufort-Jasper Economic Opportunity Commission, Inc.

1905 Duke Street, Suite 250, Post Office Drawer 9, Beaufort, SC 29901-0009

Carolina Community Actions, Inc.

138 S. Oakland Avenue, Post Office Box 933, Rock Hill, SC 29731-6933

Charleston County Human Services

1069 King Street, Post Office Box 20968, Charleston, SC 29413

Chesterfield-Marlboro Econ. Opp. Council, Inc.

318-322 Front Street, P. O. Box 877, Cheraw, SC 29520

Darlington Co. Community Action Agency

904 S. Fourth St., Hartsville, SC 29550

GLEAMNS Human Resources Comm., Inc.

237 Hospital Street, Post Office Box 1326, Greenwood, SC 29648

Lowcountry Community Action Agency, Inc.

319 Washington Street, Post Office Box 1726, Walterboro, SC 29488

Orangeburg-Calhoun-Allendale-Bamberg (OCAB) CAA

1822 Joe Jeffords Highway, Post Office Drawer 710, Orangeburg, SC 29116-0710

Pee Dee Community Action Agency

2685 South Irby Street, Post Office Drawer 12670, Florence, SC 29505

Piedmont Community Actions, Inc.

300A South Daniel Morgan Ave., Post Office Box 5374, Spartanburg, SC 29306

Sunbelt Human Advancement Resources, Inc.

1200 Pendleton Street, Post Office Box 10204, Greenville, SC 29603

Waccamaw Economic Opportunity Council, Inc.

1261 Hwy. 501 East, Suite B, Post Office Box 1467, Conway, SC 29528-1467

Wateree Community Actions, Inc.

13 South Main Street, Post Office Box 1838, Sumter, SC 29151-1838

SOUTH CAROLINA HPRP AGENCIES CONTACT INFORMATION

ACCESS Network, Inc

5710 Okatie Hwy, Ste B, Ridgeland, SC 29936

Cooperative Ministry

3821 W. Beltline Blvd, Columbia, SC 29204

Crisis Ministry

P.O Box 20038, Charleston, SC 29413-0038

Darlington Community Action Agency

904 South Fourth Street, Hartsville, SC 29550-0704

Family Services, Inc

4925 Lacross Road #215, N. Charleston, SC 29406

Hope in Lancaster

P.O Box 166 P, Lancaster, SC 29721

Humanities Foundation, Inc

474 Wando Park Blvd, Suite 102, Mt. Pleasant, SC 29464

Laurens County Safe Home

P.O Box 744, Clinton, SC 29325

Lighthouse Ministries

319 Washington Street, 201 E. Elm Street, Florence, SC 29506-3079

Lowcountry Community Action Agency, Inc

P.O Box 1726, Walterboro, SC 29488

OCAB

2685 South Irby Street, Orangeburg, SC 29116

Pee Dee Community Action Partnership

P.O Box 12670, Florence, SC 29505

Pilgrim's Inn, Inc

P.O Box 11328, Rock Hill, SC 29731

Salvation Army-Columbia

P.O Drawer 2786, Columbia, SC 29202

Salvation Army-Greenville

417 Rutherford Street, Greenville, SC 29609-5311

Samaritan House

1580 Middleton Street, Orangeburg, SC 29115

United Way of Kershaw County

P.O Box 737, Camden, SC 29021

Upstate Homeless Coalition

P.O Box 211, Greenville, SC 29615

Wateree Community Action Agency, Inc

P.O Box 1838, Sumter, SC 29151-1838

ESG 2010 CONTACT INFORMATION

Anderson Interfaith Ministries

1202 South Murray Avenue, Anderson, SC 29624

Anderson Sunshine House

605 College Heights, Anderson, SC 29621

****Confidential****

Citizens Opposed to Domestic Abuse

Mailing Address: P.O. Box 1775, Beaufort, SC 29901

Cooperative Ministry

3821 West Beltline Blvd., Columbia, SC 29204

Crisis Ministries

573 Meeting Street, Charleston, SC 29403

Cumbee Center to Assist Abused Persons, Inc.

135 Lancaster Street, Aiken, SC 29802

Darlington County Community Action Agency

904 South Fourth Street, Hartsville, SC 29550

Family Promise of Beaufort

164 Bluffton Road, Bluffton, SC 29910

Family Shelter

2411 Two Notch Road, Columbia, SC 29204

House of Hope of the Pee Dee

1020 W. Darlington St., Florence, SC 29501

Laurens County Safe Home

613 Barnes Road, Laurens, SC 29360

Lowcountry Community Action Agency, Inc.

319 Washington Street, Walterboro, SC 29488

Meg's House

201 Lee Street, Greenwood, SC 29648

Mental Health of Aiken

117 Waterloo Street, Aiken, SC 29801

Midlands Housing Alliance

1901 Main Street, Suite 250, Columbia, SC 29201

Pee Dee Community Action Agency

2685 S. Irby Street, Florence, SC 29505

****Confidential****

Pee Dee Coalition

220 South Irby Street, Florence, SC 29503

Pilgrim's Inn

P.O. Box 11328, Rock Hill, SC 29731

Safe Harbor

429 N. Main Street, Greenville, SC 29602

****Confidential****

SAFE Homes Rape Crisis

236 Union Street, Spartanburg, SC 29302

Safe Passage

349 Hampton Street, Rock Hill, SC 29731

Salvation Army – Aiken

322 Gayle Avenue, Aiken, SC 29801

Salvation Army – Greenville

417 Rutherford Street, Greenville, SC 29609

****Confidential****

Sistercare

P.O. Box 1029, Columbia, SC 29202

St. Lawrence Place

2400 Waites Rd., Columbia, SC 29204

Sunbelt Human Advancement Resources, Inc. (SHARE)

1200 Pendleton Street, Greenville, SC 29603

The Haven, Inc.

458 North Church Street, Spartanburg, SC 29304

The Haven Men's Shelter

1435 Archive St., Rock Hill, SC 29731

Upstate Homeless Coalition

150 Executive Center Drive, Greenville, SC 29615

Women's Shelter

3425 N. Main Street, Columbia, SC 29203

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Small and Minority Business Assistance

Section I - Executive Summary

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

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 2010-2011

During FY 2010-2011, OSMBA processed 189 applications for certification eligibility and more than 200 minority contracting reports from agencies.

- A. 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, and federal agencies, plus corporations.
- B. In conjunction with the SCEIS staff, the development of an online state agency Minority Business Enterprise (MBE) expenditure reporting system is still in process of being completed by 2011-2012.
- C. In an effort by the OSMBA staff to improve accuracy of information, an automated file tracking system was implemented.

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.

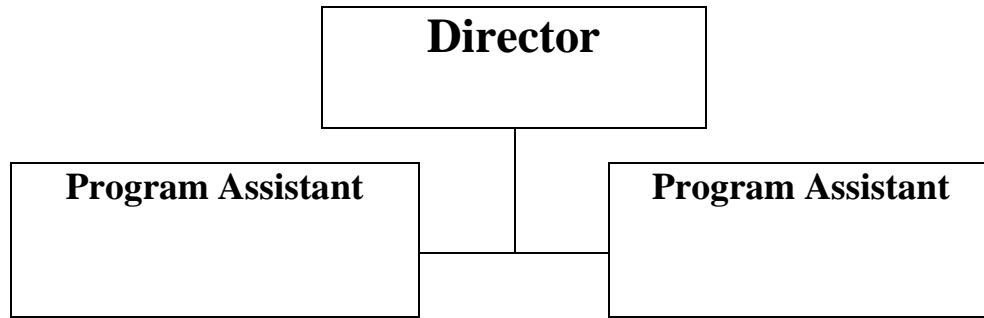
B. Quality Assurance

- 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.

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 surveys are utilized to assess customer satisfaction with OSMBA processes (i.e. application, on-site visits, certification).

9. Organizational chart



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11- 12 Appropriations Act	
	Total Funds	General Funs	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 77,924	\$ 77,924	\$ 54,876	\$ 54,877	\$ 84,642	\$ 84,642
Other Operating	\$ 20,813	\$ 20,813	\$ 13,983	\$ 13,983	\$ 13,061	\$ 13,061
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	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Fringe Benefits	\$ 23,086	\$ 23,086	\$ 19,962	\$ 19,962	\$ 29,625	\$ 29,562
Non-recurring	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$ 121,823	\$ 121,823	\$ 88,822	\$ 88,822	\$ 127,328	\$ 127,328

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 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 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross Reference
		State	Federal	State	Federal	
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	121,823	State	88,822	See Section III, category 7 Area 7.3
		Federal		Federal		
		Other		Other		
		Total	121,823	Total	88,822	
		% 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 brainstorming within OSMBA. Direction and organizational priorities, performance expectations, and organizational values are determined by enabling legislation, and the goals, strategic plans and values of the Governor.

OSMBA operations include OEPP's organizational values. Key values identified as important to the organization are integrity, accountability, customer service, innovation, leadership and efficiency. The Employee Performance Evaluation process incorporates individual employee performance expectations relating to these values. Guidelines for ethical behavior are listed in the Employee Handbook that is given to all new OEPP employees. In addition, OSMBA staff 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 a 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 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 ensures understanding of program and legal responsibilities.
- 1.5 What performance measures do senior leaders regularly review to inform them on 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, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to the organizational values?**
The 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.

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

2.2 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 the number of attendees of OSMBA-sponsored training and networking events for business owners and agency procurement officials.
- D. Increasing the number of procurements issued to certified minority businesses;
- E. Increasing 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 a website address for that plan.

Our strategic plan is not available on our website, www.oepp.sc.gov/osmba

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?

Key customers and stakeholders are the residents of South Carolina. The Governor, Legislators, state government agencies, and other agencies are also customers.

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 issues and solutions, then, if possible, develop methods to implement improved services or programs.

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

OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. If major stakeholders input 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

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, reliability, 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 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?

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?**
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-to-day 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 offices 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 your 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?

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 06-07	FY 07-08	FY 08-09	FY09-10	FY10-11
#Certifications	30	33	49	84	96
#Re-certifications	30	27	41	46	35
\$ Spent by Agencies w/Certified Minority & Women Businesses	\$28,424,530	\$19,331,692 *incomplete agency reports	\$16,316,653 *incomplete agency reports	\$14,149,625* incomplete agency reports	19,975,184 *incomplete agency reports

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?

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.

7.3 What are your performance levels for your key measures of financial performance, including measures of 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 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?

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 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 the key measures of 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.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
State Office of Victim Assistance

Section I. Executive Summary

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

Mission Statement:

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 2010-2011

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.

- A. Co-sponsored the 2011 SC Victims' Rights Week Conference with the SC Victim Assistance Network.
- B. Saved crime victims over \$6.4 million through the bill negotiation process.
- C. Continued the pre-authorization procedure for paying dental bills, eye glasses and other minor medical procedures allowing uninsured victims to receive immediate services.
- D. Published the 2011 Payment and Reimbursement Guide for crime victims, service providers, and victim advocates.
- E. Launched the distribution of the SOVA outreach newsletters
- F. Developed the first training manual for outreach staff to use for training purposes
- G. Developed and implemented the first peer shadowing training program for outreach staff
- H. Developed a Directory of Help Resource Guide Brochure for service providers
- I. Developed the SOVA 4th Judicial Circuit Outreach Volunteer Program
- J. Developed a new Compensation and Sexual Assault Brochure

- K. Developed Magistrate and Municipality publications for distribution regarding Victim Assistance Fines, Fees and Assessment Funds to be distributed at training events and upon request
- L. Coordinated and held successful meetings with sheriffs and chiefs of police as it relates to providing customer service, technical assistance and support regarding their Victim Assistance Fines, Fees, and Assessment Fund
- M. Recovered \$337,765 in restitution funds. If this hadn't happened SOVA would have lost \$207,685 in funds in duplicate payments.

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 **electronic workflow 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

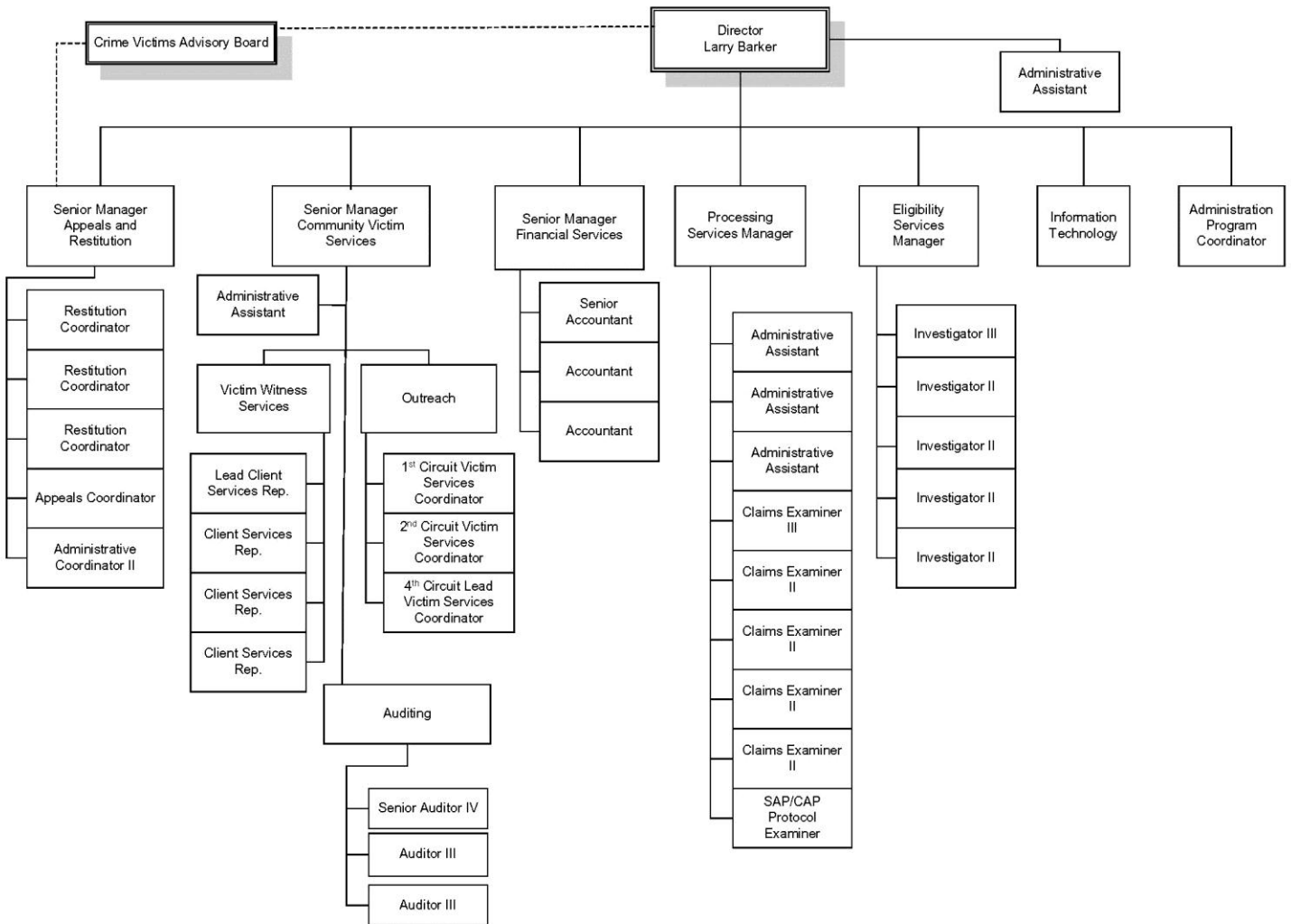
The data collected and analyzed in this report provides the basis for goals for the upcoming year to ensure continuous process improvement. Goals are then reviewed quarterly by team leaders to ensure adequate progress.

Section II - Organization Profile

- 1. 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**

9. Organizational Structure

**State Office of Victim Assistance
Organizational Chart**



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11- 12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	1,349,959		1,408,958	0	1,951,846	0
Other Operating	11,913,614	14,397	11,963,381	0	\$15,060,596	0
Special Items	222,341	222,341	187,486	187,486	176,725	176,725
Permanent Improvements	0	0	0	0	0	0
Case Services	0	0	0	0	0	0
Distributions to Subdivisions	823,000	0	650,000	0	1,175,479	0
Fringe Benefits	395,237	0	480,111	0	670,046	0
Non-recurring	0	0		0		0
Total	14,704,151	236,738	14,689,936	187,486	19,064,692	176,725

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$ 0	\$ 0
Capital Reserve Funds	\$ 0	\$ 0
Bonds	\$ 0	\$ 0

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose	FY 09-10 Budget Expenditures			FY 10-11 Budget Expenditures		
		State:			State:		
	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.	236,738			187,486		
		4,668,817			5,355,931		
		9,798,596			9,146,519		
		14,704,151			14,689,936		
					% of Total 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 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?

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 a 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 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, 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 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 strategic 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 when it is held.

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?

Employees are rewarded through recognition during regular staff meetings. Management also provides employees with meals as rewards at these meetings. Management provides flexibility to staff and their work schedules. Group luncheons are held regularly.

1.11 How does senior leaderships 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.

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 was 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
- 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 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.

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 Goal/Objective	Related FY 10-11 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina	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.	<ul style="list-style-type: none"> • Restitution Recovery • Trainings • Enhance customer satisfaction through faster eligibility determination. • Created Certification Program for victim service providers 	<ul style="list-style-type: none"> • Reduction in Spending Program/Creation of remote access system to obtain restitution information for court-based victim advocates. • 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 you identified in your Executive Summary?

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 the 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 a website address for that plan.

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 key 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/stakeholder 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 to meet and exceed their expectations? 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 organization service needs and directions?

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, reliability, 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 workforce knowledge (knowledge assets)? How do you identify, share and implement best practices, as appropriate?

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 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 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 location? Give examples.

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 access 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 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?

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/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 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 the 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 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 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, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process 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 work processes?

Processes are evaluated through regular management and staff meetings.

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

Key processes include the 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 services 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.

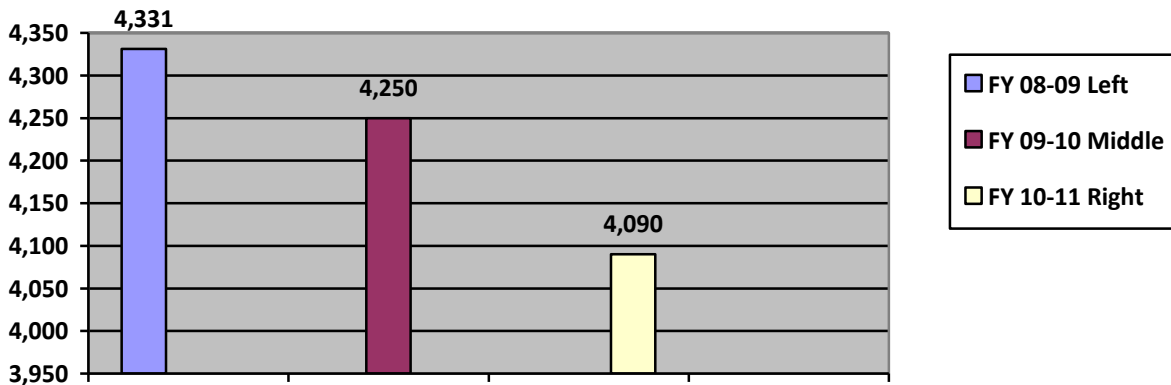


Chart 7.1.1.b: Walk-ins: The victims assisted through the intake office are considered walk-in victims. They are assisted by the Client Service Representative and provided with support and advocacy, aided in filing their crime victims' compensation application and provided with case status information. Also, the walk-ins will provide the agency with requested documentation needed in processing their file. The chart below reflects the number assisted.

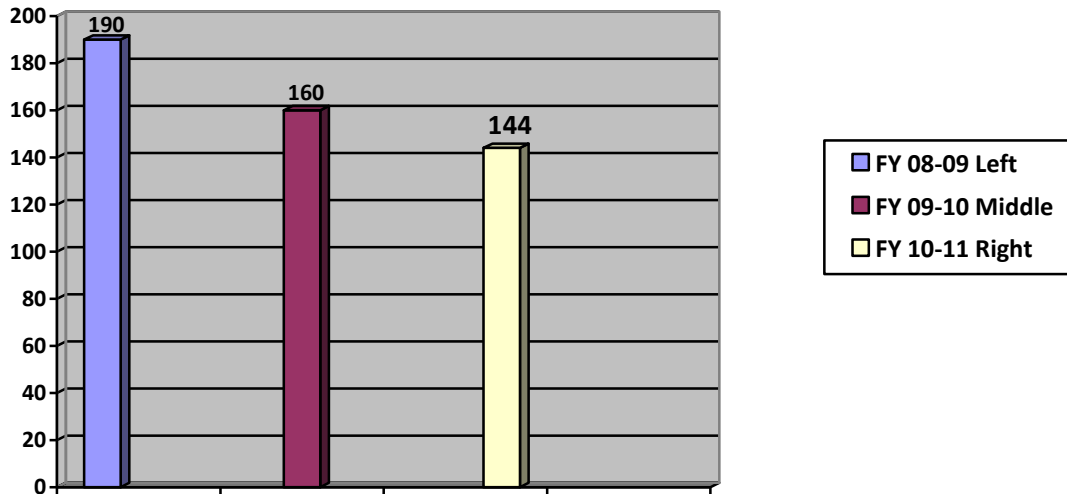


Chart 7.1.2: Incoming Calls: The calls received through the switchboard at the receptionist's area reflect crime victims calling to get case status information, asking general questions about the compensation program, asking for assistance as it relates to other victim related agencies that may be able 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.

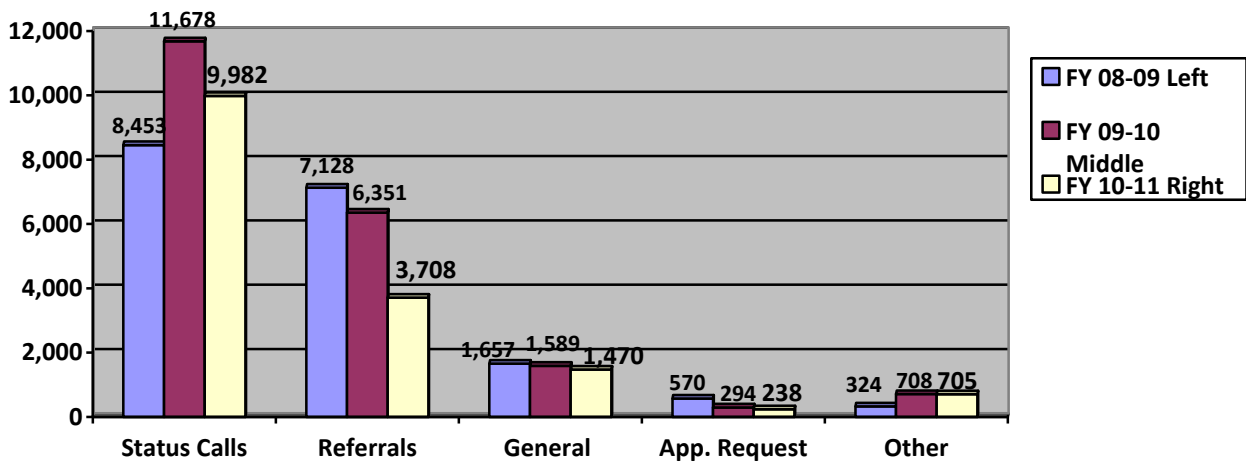


Chart 7.1.3: Tracking Incoming and Outgoing Mail: The Victim Witness Services Section is responsible for receiving all incoming mail for the agency. Upon receipt of the mail, all mail will be counted and then “looked up” in the computer database to see which section the file is in or if we have a file 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.

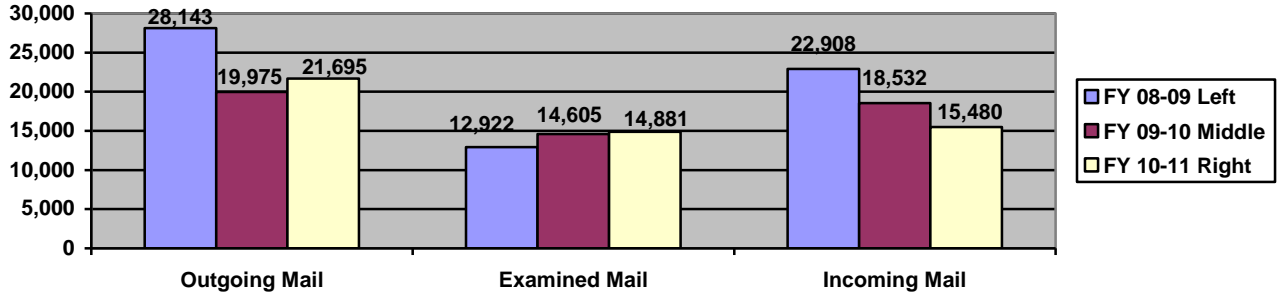


Chart 7.1.4.a: Training: The Victim/Witness Department also provides training and publication items to raise awareness of compensation and other victim services.

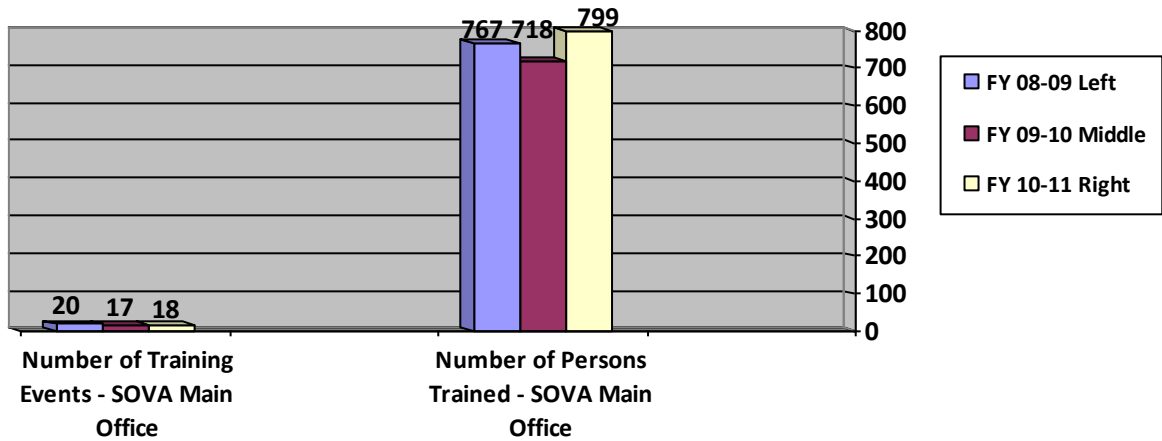


Chart 7.1.4.b (Training continued)

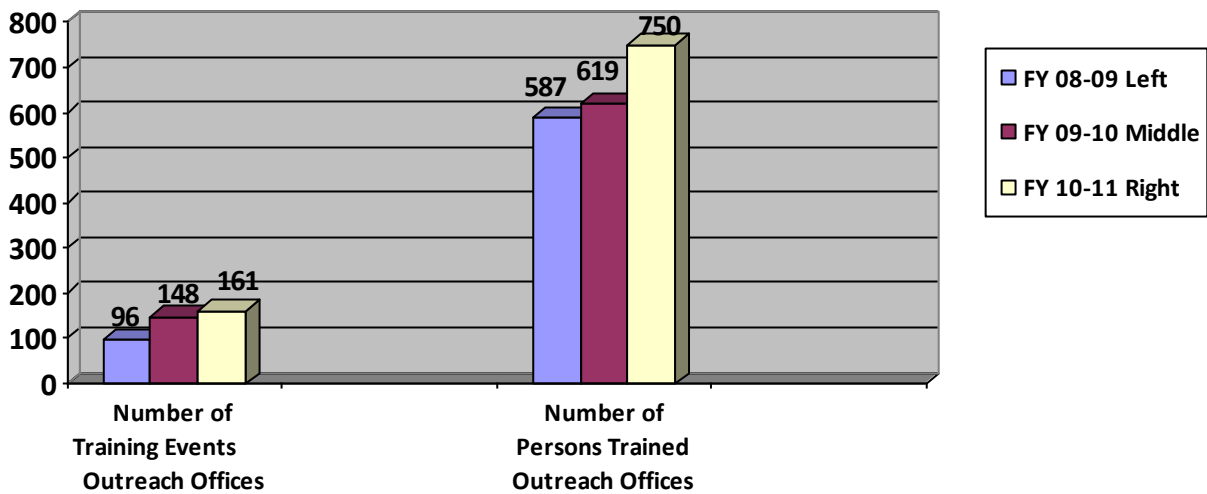


Chart 7.1.5: Publications Distributed: Various publication items to include but not limited to brochures, applications, flyers, posters etc are distributed to advocates, crime victims and service providers statewide to assist them in filing for crime victims compensation and also for public awareness purposes.

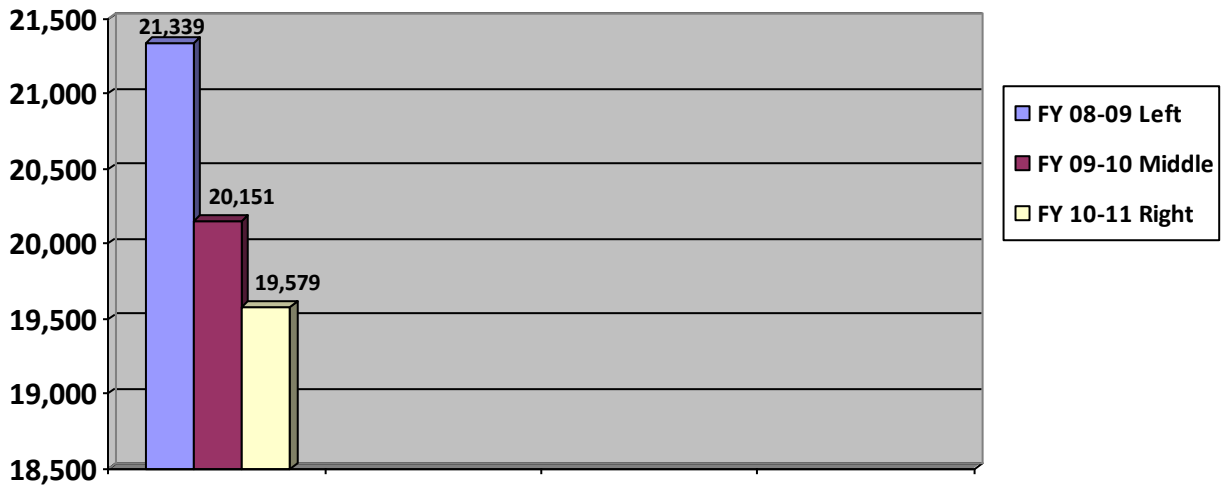
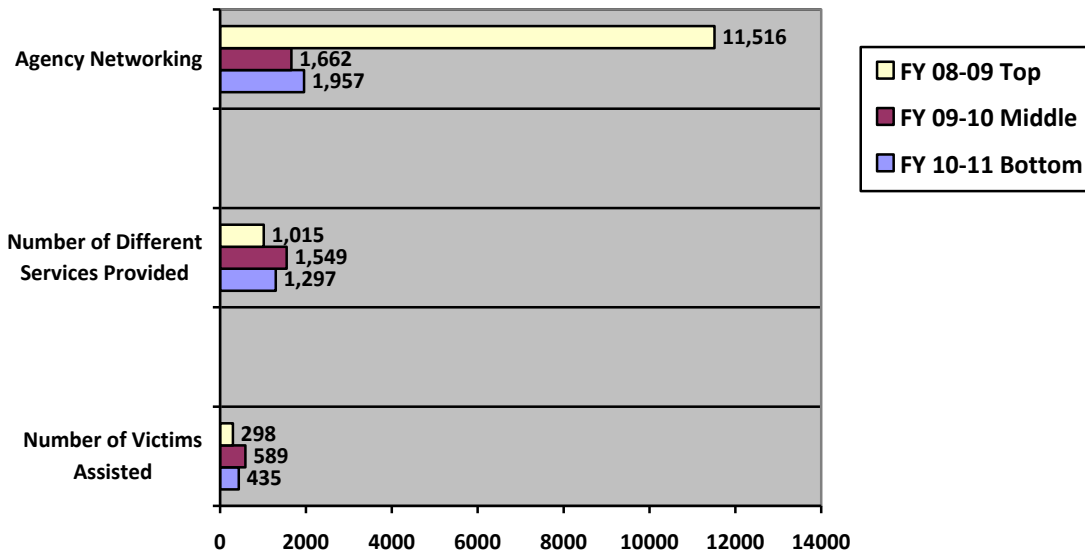


Chart 7.1.6:SOVA Outreach Performance: SOVA Outreach Offices reported the following measures of mission accomplishment for FY 2010-2011 as compared to prior fiscal years. The services provided are to a diverse group of crime victims to include but not limited to sexual assault, domestic violence, homicide, 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 coordinates and collaborate with on a daily basis in providing quality services to the victims.

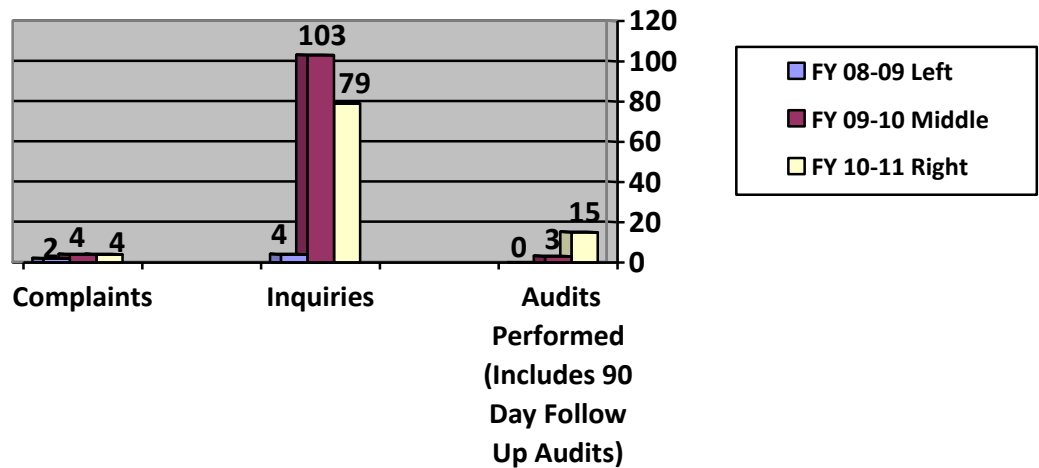


Due to the low number of registered participants, the 2010–2011 SC Victim Assistance Academy was canceled. However, there continues to be statewide training in which advocates and service providers can attend and receive victim service provider certification credit hours. Interest in having the Academy will be reviewed next year to determine whether or not one will be held.

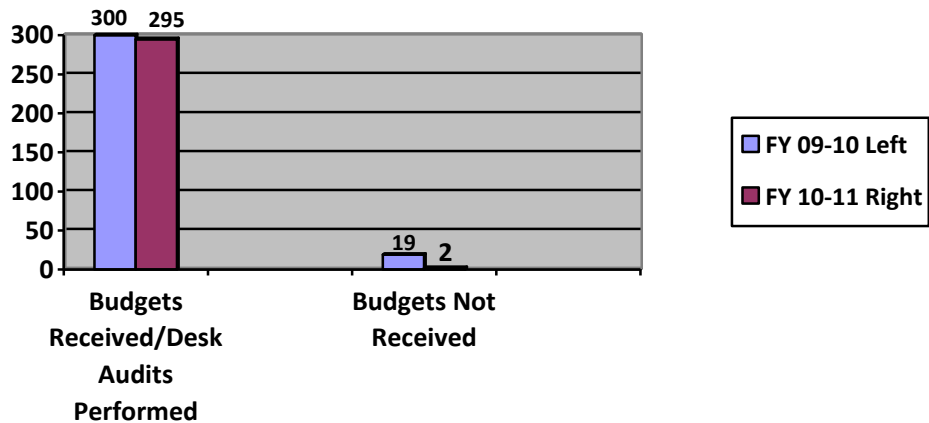
The Victim Services Coordinating Council was formed in FY06-07 to promote coordination among all agencies involved in victim/witness and domestic violence services. The Council produced a report recommending needed legislation for improving victim services in South Carolina. This report along with other 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: SOVA Auditing Section - Fines, Fees and Assessment Fund: 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. However, the State Office of Victim Assistance's responsibility regarding this section was enhanced by a new Proviso that legislatively mandated SOVA to perform audits. The new Proviso is 89.70 which established a new SOVA Auditing Section. The charts below indicate the continued efforts to capture not only the complaints and inquiries but the audits performed via site visits and desk audits of budgets received, 90-day follow up audits, budget and audit recoupment of funds as well as training provided.

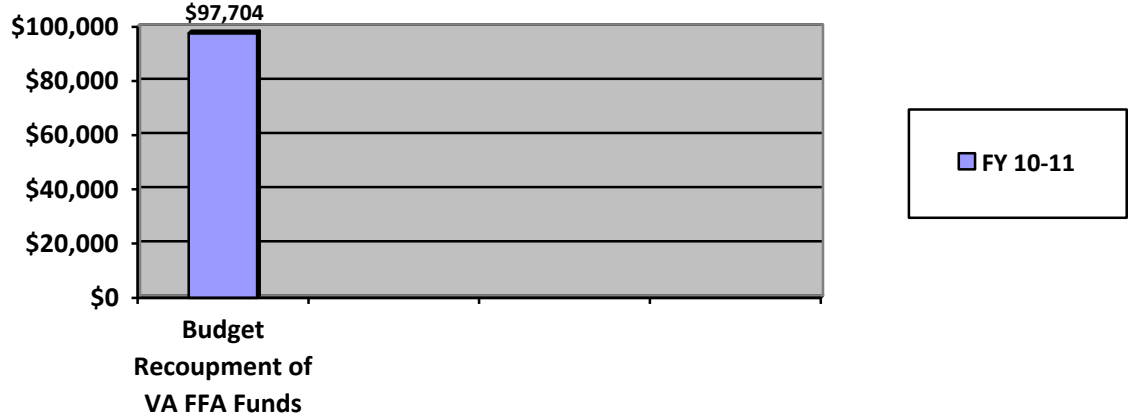
7.1.7 A



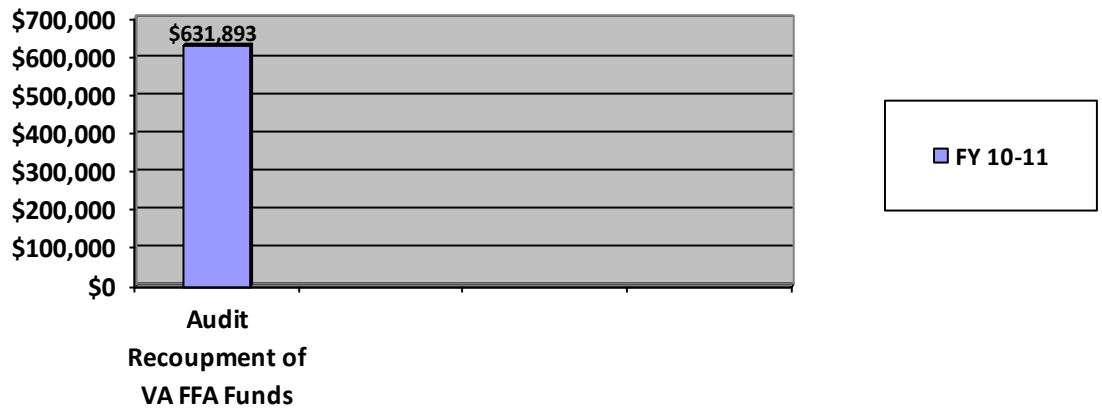
7.1.7 B



7.1.7 C The chart below displays the amount of funds placed back into the Victim Assistance Fines, Fees and Assessment Fund Accounts across the state as a result of the SOVA budget reviews/desk audits performed. These funds were initially spent on unauthorized expenditures and or placed in the general fund. However, documentation showing that the funds were placed into the proper account as a result of the SOVA budget reviews/desk audits has been provided.



7.1.7 D The chart below displays the amount of funds placed back into the Victim Assistance Fines, Fees and Assessment Fund Accounts across the state as a result of the SOVA audits performed. These funds were initially spent on unauthorized expenditures and or placed in the general fund. However, documentation showing that the funds were placed into the proper account as a result of the SOVA audits performed have been provided.



7.1.7 E: The chart below indicates the number of SOVA auditing training events/presentations held during this reporting period in an effort to educate and inform county/city officials, victim advocates and other state agencies on Proviso 89.70 and now 89.61 regarding the SOVA Auditing responsibilities and procedures.

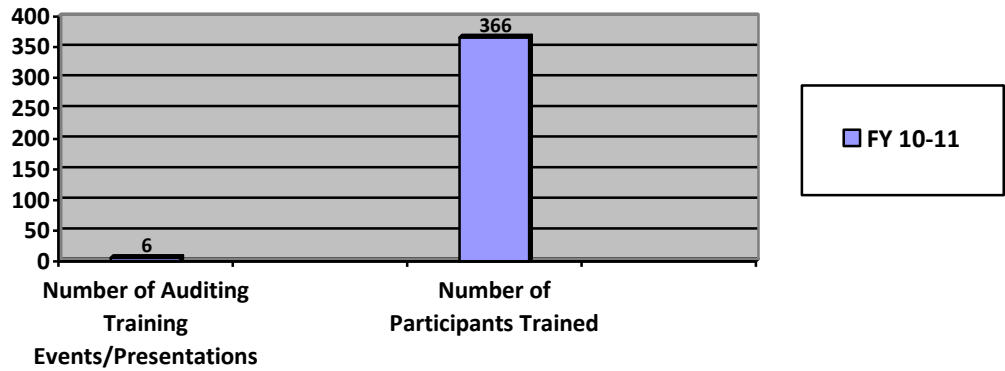
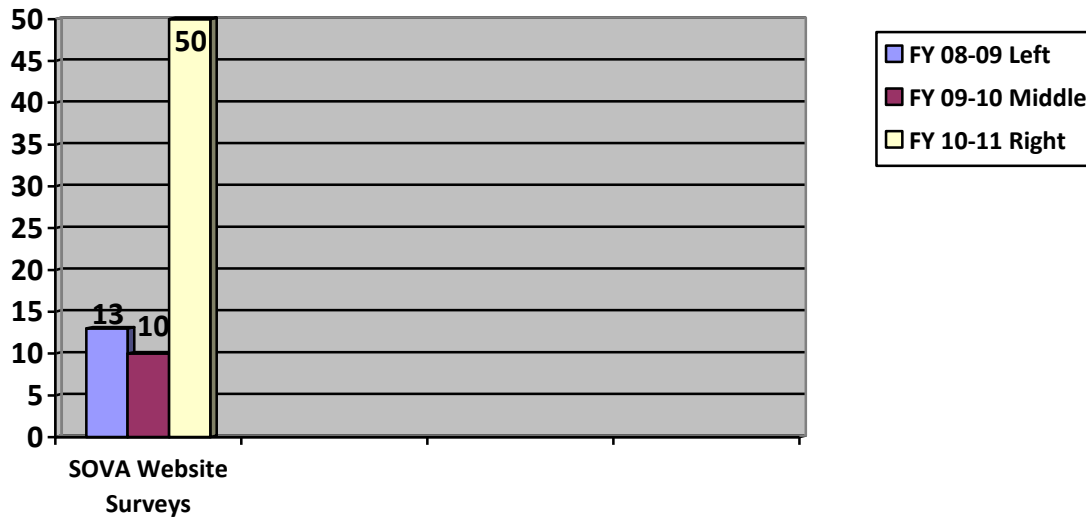


Chart 7.1.8: SOVA Surveys: Websites were developed and used to measure the effectiveness of services provided and to document how service providers and crime victims learned of the agency's services and benefits.



COMPENSATION: Eligibility & Processing Services

The Eligibility Services Department processed 3,914 claims during FY 10-11, 88% of which were deemed eligible:

Chart 7.1.9: Eligibility Services: This chart reflects the number of claims Received and Processed in the Eligibility Services Department during FY 2009-2011.

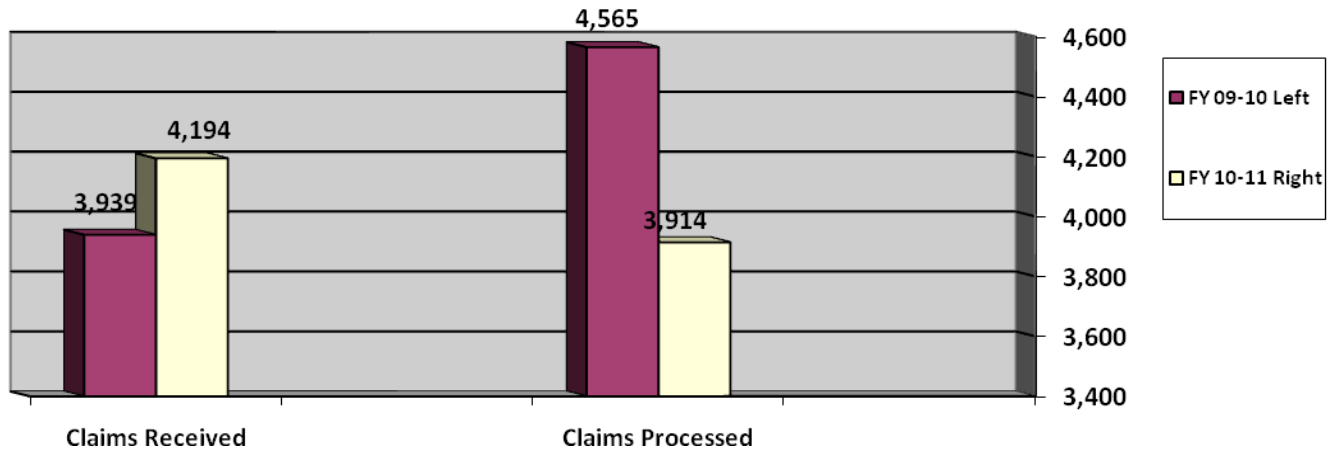
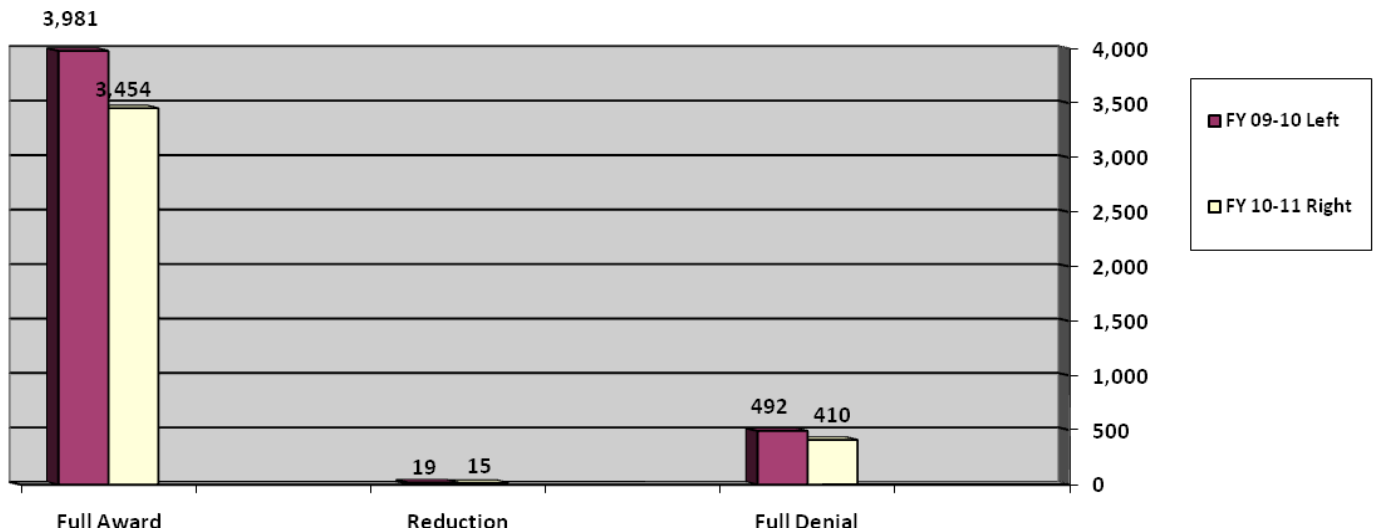


Chart 7.1.10 Eligibility Services: This table reflects claims that have been recommended for a full award, a reduction or a denial by the investigators and the staffing team members.



The Processing Services Department processed 8,049 claims and ordered 15,453 payments (Data is presented in chart 7.1.10). Under the Compensation Program, 8,612 payments were ordered and under the Sexual Assault and Child Abuse Protocol Program 6,841 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 \$6.4 million in out-of-pocket expenses (Data is presented in chart 7.1.11).

Chart 7.1.11: Claims Processed & Payments Ordered

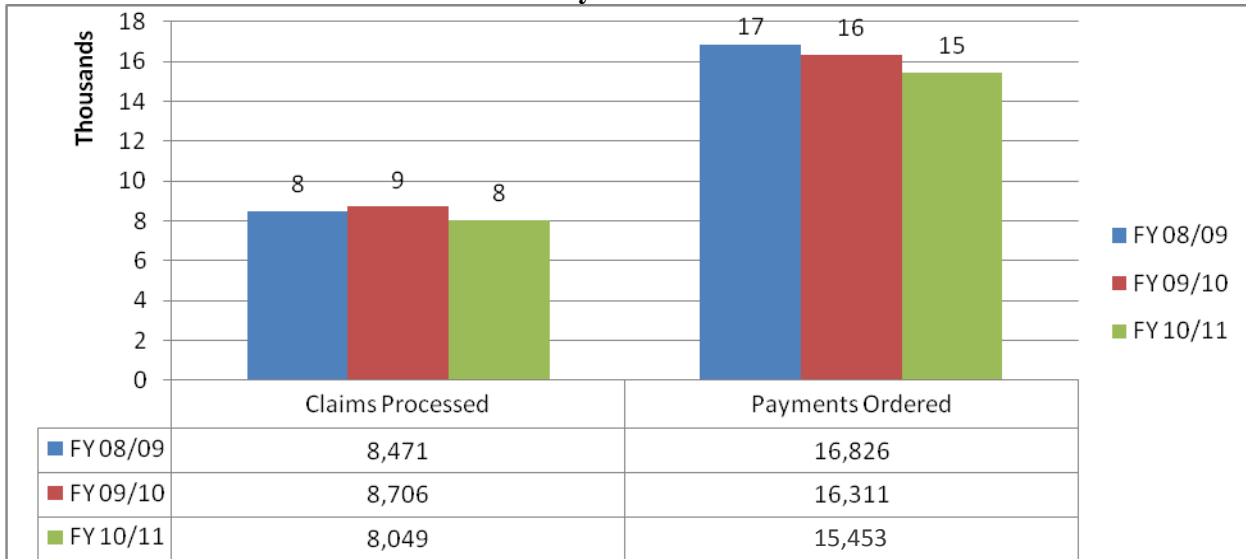
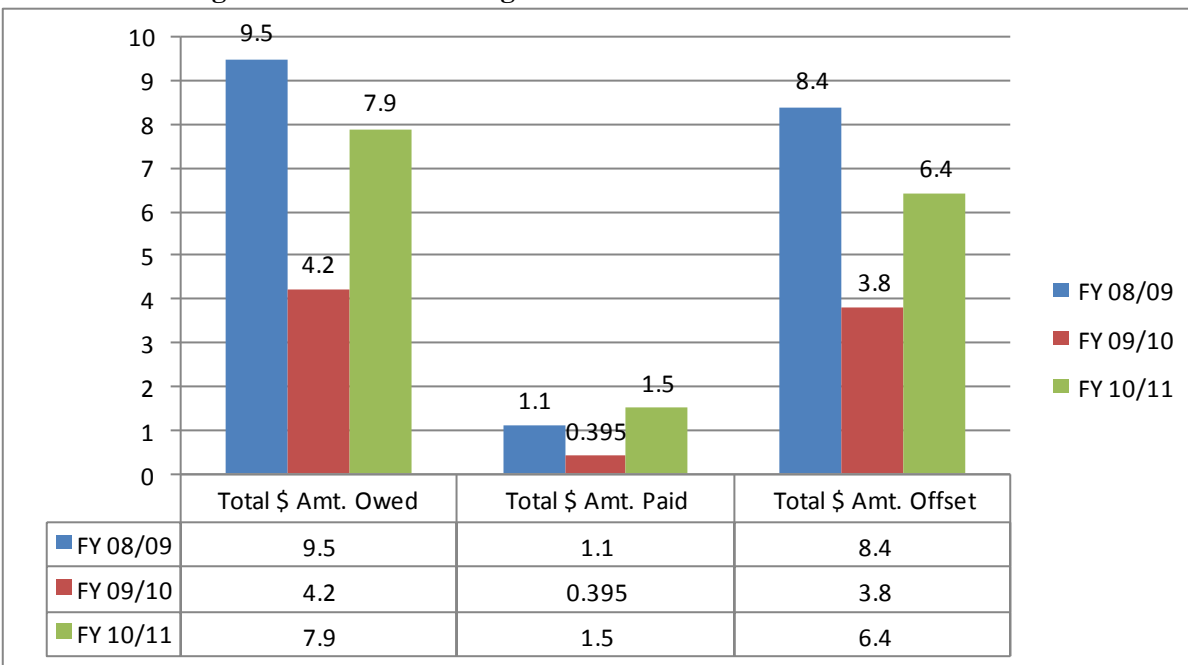


Chart 7.1.12: Negotiation /Settlement Agreements



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?

A key measure of customer satisfaction for victims is how quickly claims are deemed eligible or ineligible. Information is processed by the documents received and communication between staff, victim or claimant, law enforcement officials, and service providers. External staff (law enforcement officials, victim advocates) turnover resulting in little to no experience, internal policy changes, increased challenges in the investigation of claims and staff related issues have resulted in a decrease in the number of claims processed. In addition to receiving 255 more claims in 2010-2011 than 2009-2010, there has been an increase in the number of claims on hand at the end of June 2011.

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

A key measure for financial performance is measured in claims processed and dollars spent on eligible claims for the Compensation and Sexual Assault Program. . In FY 10-11, the Processing Services Department processed 8,049 vouchers or 15,453 individual payments for a total of \$10.5 million in benefits for eligible victims of crime. Another key measure for financial performance is in negotiations and settlement agreements with service providers. The agency saved victims of crime approximately \$6.4 million in out-of-pocket expenses.

Restitution/Recovery Services

In FY10-11, SOVA recovered over \$337,765.11 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 claimants requested and received additional funds from the Crime Victims' Advisory Board for a total increase in award amounts of \$ 330,000.

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 \$ 337,765.11 was recouped from the restitution/recovery program from July 1, 2010 to June 30, 2011.

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 \$ 207,685.10 in potential duplicate payments in FY 10-11.

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. 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?

All claims were processed according to internal processes and procedures and VOCA grant guidelines.

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. SOVA has been monitored by the Department of Public Safety, Office of Justice Programs for its State Victim Assistance Program grant with no findings.

2010-2011 Accountability Report
Governor's Office of Executive Policy and Programs
South Carolina Office of Veterans' Affairs

Section I. Executive Summary

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

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 2010-2011

- A. Responded to requests for assistance from over 85,890 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 \$2.09 billion in federal veterans' benefits, medical and financial, were realized in South Carolina in FY 2010.

3. Key Strategic Goals for Present and Future Years

- A. Improve upon an already excellent service of advocacy and assistance to our State's 420,970 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 2010 total of \$2.09 billion.
- B. Honor the service and memory of deceased veterans, and their families by:
 - o Successfully operating the state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery.

- 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.
- F. 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 420,970 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 \$1.889 billion to \$2.09 billion.
- The Accountability Report process requires and allows the SCOVA to critically review our goals and objectives, and “take inventory” of where we are. It makes us take time to conduct a “sanity check” of our purpose, direction and our progress in these areas. We validate or revise operational measurements that indicate mission performance, to monitor progress throughout the year, and report results. Insufficient progress in any area is reviewed, validated and then addressed by directing additional attention and/or resources to that specific area.

Section II - Organization Profile

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

- **Veterans advocacy and assistance** to 420,970 SC veterans, their family members, and survivors in informing them of their earned benefits (\$2.09 billion in FY 2010) 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 2010 over \$5.35 million of tuition credit was awarded to eligible students.
- **Burial and memorial services:**
 - honorable burial of 211 veterans and 35 spouses/dependent children 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 this commission which is chartered to confirm and compile the list of ex POWs of South Carolina.

2. Key customers 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 420,970 veterans in South Carolina.
 - awareness of the economic impact of the veterans in SC; \$2.09 billion in FY 2010.
 - 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 stakeholders 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. Operational 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)
6437 Garners Ferry Road, Suite 1126
Columbia, South Carolina 29209

Charleston VA Medical Center (SCOVA)
109 Bee Street
Charleston, South Carolina 29401

Dorn VA Medical Center (SCOVA)
Building 100, Room 1B109
6439 Garners Ferry Road
Columbia, South Carolina 29209-1649

Augusta VA Medical Center (SCOVA)
1D 264 Downtown Division
1 Freedom Way
Augusta, Georgia 30910

The M.J. “Dolly” Cooper Veterans Cemetery
140 Inway Drive
Anderson, South Carolina 29621

6. The number of employees

18 Classified _____ Unclassified _____ Contract

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

The above information reflects the number of filled positions. As of June 30, 2011 the Office of Veterans’ Affairs had 6.13 unfilled positions (5.13 classified, 1 unclassified).

7. Regulatory environment under which your organization operates

- USC Title 38

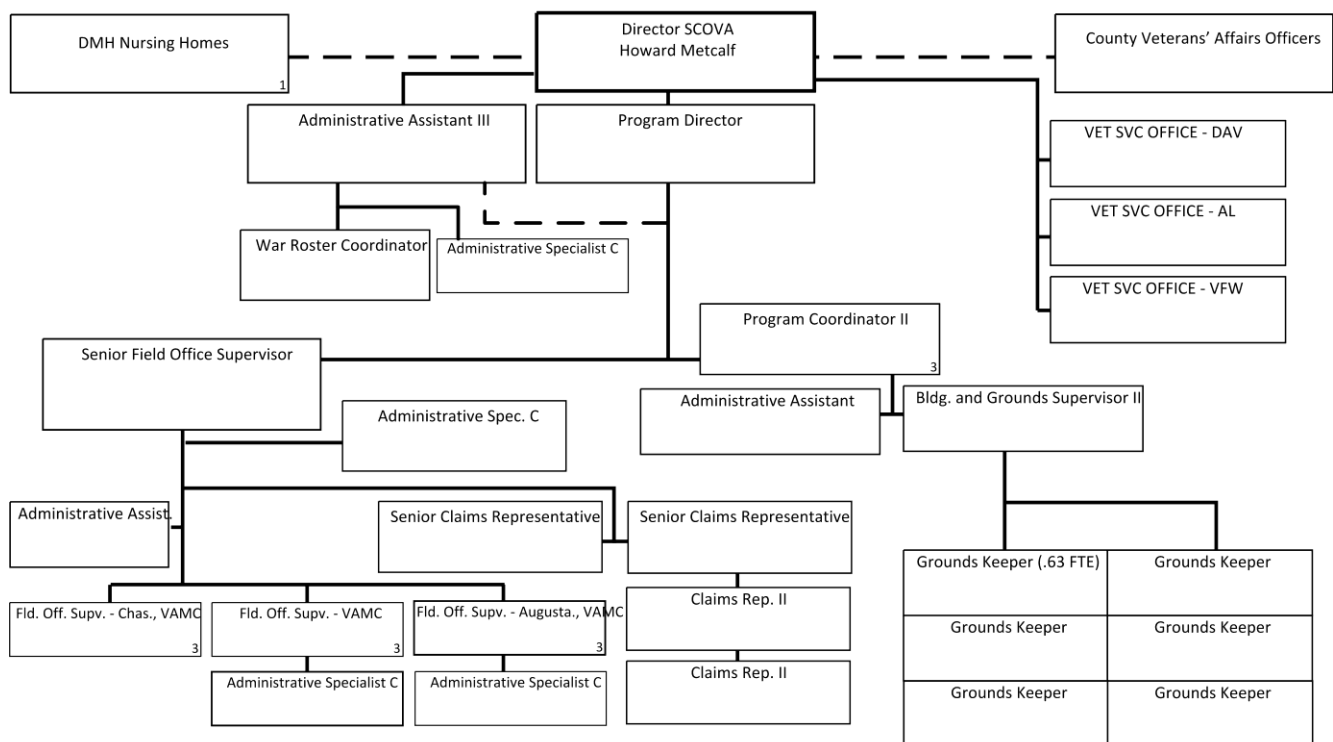
- USC Title 10
- South Carolina Code of Laws

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 Structure

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 delineate 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 09-10 Actual Expenditures		FY 10-11 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 646,934	\$ 646,934	\$ 588,341	\$ 588,341	\$ 613,813	\$ 613,813
Other Operating	\$ 59,876	\$ 59,381	\$ 103,931	\$ 87,905	\$ 15,590	\$ 15,590
Special Items	\$ 6,763	\$ 6,763	\$ 37,359	\$ 37,359	\$ 67,359	\$ 67,359
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$ 47,877	\$	\$ 78,500	\$	\$ 550,000	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 213,739	\$ 213,739	\$ 192,287	\$ 192,287	\$ 214,835	\$ 214,835
Non-recurring	\$	\$	\$	\$	\$750,000.00	\$
Total	\$ 975,189	\$ 926,817	\$ 1,000,418	\$ 905,892	\$2,211,597	\$ 911,597

Other Expenditures

Sources of Funds	FY 09-10 Actual Expenditures	FY 10-11 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 09-10 Budget Expenditures		FY 10-11 Budget Expenditures		Key Cross References for Financial Results *
		State	Federal	State	Federal	
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	316,660	State	316,660	Tables 7.3-1, 7.3-2
		Federal	495	Federal		
		Other	47,877	Other	78,500	
		Total	365,032	Total	395,160	
		% 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	6,763	State	37,359	Tables 7.3-1, 7.3-2
		Federal		Federal		
		Other		Other		
		Total	6,763	Total	37,359	
		% 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	603,394	State	551,873	Tables 7.3-1, 7.3-2
		Federal		Federal		
		Other		Other	16,026	
		Total	603,394	Total	567,899	
		% 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		State	
	Federal		Federal	
	Other		Other	
	Total		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: 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?

- 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:
 - Veteran contacts for benefits' information (medical, educational, etc...).
 - Claims filed for VA benefits for service connected conditions.
 - Dollars returned to South Carolina in the form of federal VA medical care and disability payments to veterans.
- Veteran resident census of the three State Veterans Nursing Homes.
- Review of conduct of operations at the M.J. "Dolly" Cooper Veterans Cemetery.
- Progress on the compilation of the "War Roster."
- Status of the Veterans Trust Fund, and ex POW Commission.
- Number of staff and county veterans affairs officers accreditations awarded and renewed.
- Monitor and review free tuition program.

- 1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, 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 strategic 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 part of the whole team concept.
- 1.11 How does senior leaderships 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 community 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 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 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

Strategic Planning *			
Program Number and Title	Supported Agency Strategic Planning Goal/Objective	<u>Related FY 10-11 and beyond</u> Key Agency Action Plan/ Plan/Initiative(s) and Timeline for Accomplishing the Plan (s)	Key Cross References for Performance Measures*
III.A.2 Program Management	1. Work with National Cemetery Administration to efficiently and effectively operate first state's veterans' cemetery. 2. Research and compile the South Carolina War Roster.	1. Upgrade and modernize state veterans' cemetery. 2. Recruit and hire 2 authorized FTE to compile the "War Roster."	See paragraph 7.1

Strategic Planning *			
Program Number and Title	Supported Agency Strategic Planning Goal/Objective	<u>Related FY 10-11 and beyond</u> Key Agency Action Plan/ Plan/Initiative(s) and Timeline for Accomplishing the Plan (s)	Key Cross References for Performance Measures*
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.
- Review 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 a 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?

- 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 or 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, how do you keep them current with organization 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:
 - Veteran contacts for benefits' information (medical, educational, etc.).
 - Claims filed for VA benefits for service connected conditions.
 - Dollars returned to South Carolina in the form of federal VA medical care and disability payments to veterans.
- Veteran resident census of the three State Veterans Nursing Homes as appropriate.
- Review of conduct of operations at the M.J. "Dolly" Cooper Veterans Cemetery.
- Progress on the compilation of the "War Roster."
- Status of the Veterans Trust Fund and ex POW Commission.
- Number of staff and county veterans affairs officers' accreditations awarded and renewed.
- Monitor and review free tuition program.

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

The SCOVA staff:

- use many data sources from federal sources and rely on their reliability for many considerations.
- compare federal services and dollars awarded to SC veterans with states of similar veterans' makeup: Louisiana, Kentucky, and Maryland. (see Table 7.3-2).
- also routinely communicate with the other state directors and staff.

4.5 How do you ensure data integrity, 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 to 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 each employee with input from both. This planning stage allows for individual development plans within the employee’s position. Additionally, a less formal approach is through training opportunities offered by the Governor’s Office, the State Budget and Control Board, the Cabinet Agency Training Consortium, other state agencies and the private sector.

5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and location? 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 share 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 access 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 in 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 and 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 organization’s 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 your 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 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 \$65 million to a total of \$1.086 billion.

Additionally, although 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), there are several tasks that were left incomplete and will have to be addressed in the future.

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?

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:

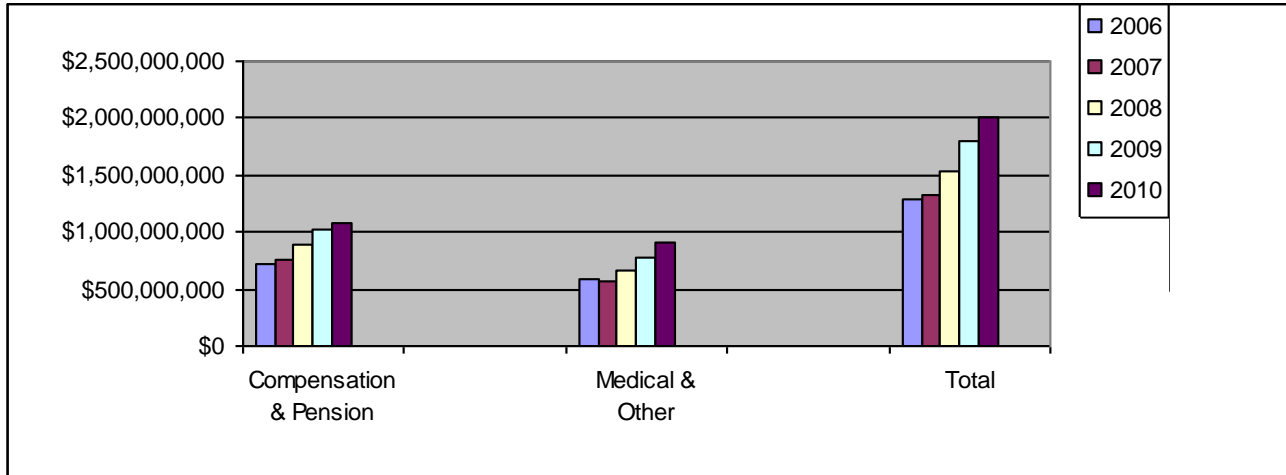
Table 7.2.1 – Veterans' Affairs Free Tuition Program Measures

Measure	FY 04-05	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11
# Students Applying	540	414	371	533	544	583	616
# Students Approved	381	311	241	291	299	323	315
# Students Enrolled	1049	1095	1409	1660	1696	1918	1951

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

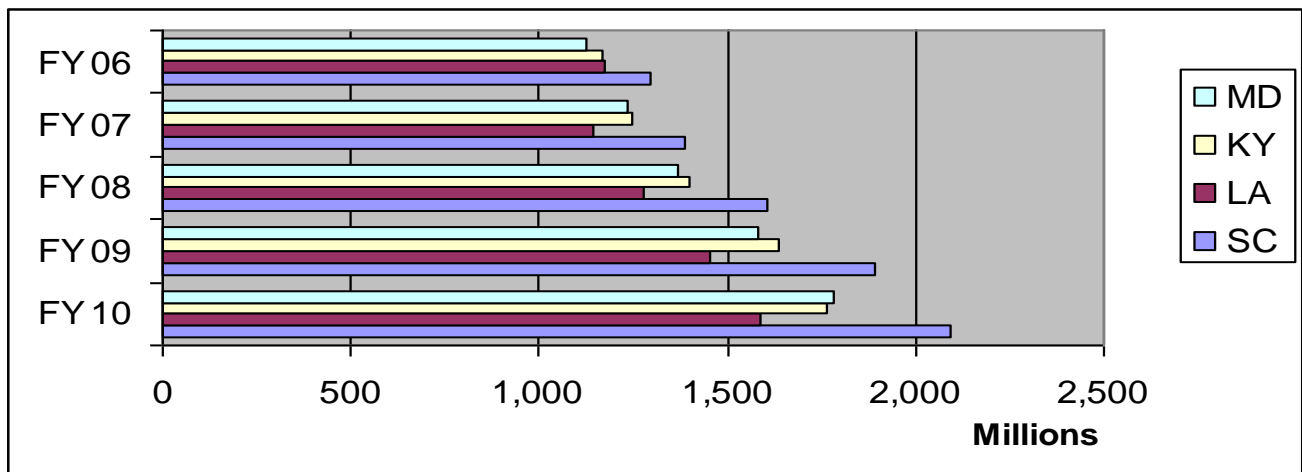
Figure 7.3-1 – Federal VA Expenditures in South Carolina



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 2010 — SC - \$2.093 billion (406,729 veterans)
 LA - \$1.585 billion (304,889 veterans)
 KY - \$1.761 billion (335,670 veterans)
 MD - \$1.784 billion (471,238 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, workforce climate including workplace health, safety, and security?

The SCOVA creates a “family environment” that allows each employee to reach his/her full potential therefore, allowing for leaders to rise to the top and job satisfaction to be the focus point. The SCOVA also complies with the OEPP Human Resources policies and direction.

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

Our performance levels, measured in dollars received and services provided, have shown a consistent increase over 2009-2010 data. VA expenditures for South Carolinians increased over 6% 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 actively engages the community in our mission by holding faith-based workshops, participating in community recognition programs and soliciting feedback from organizations outside of the office. The SCOVA complies with the OEPP Human Resources policies and direction and strictly adheres to legal directives.