

STATE OF SOUTH CAROLINA



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



Fiscal Year 2011-2012



Accountability Report Transmittal Form

Agency Name Governor's Office of Executive Policy and Programs

Date of Submission 9/12/2012

Agency Director Christine Glover – Director of Administration

Agency Director's e-mail chglover@oepp.sc.gov

Agency Contact Person Carol Smoak - Administrative Coordinator

Agency Contact Person's E-mail csmoak@oepp.sc.gov

Agency Contact's Telephone Number (803) 734-0432

2011-2012 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 services for the Governor's Office, including the Governor's Mansion and Grounds. OEPP also administers programs statutorily assigned to the Governor's Office. These programs serve the residents of South Carolina by providing a wide variety of essential services including assistance to abused and neglected children, children with emotional and behavioral issues, victims of crime, people with disabilities, veterans, small and minority owned businesses, and those in need of help with home utility expenses. The content of this report will highlight the overall process for OEPP. Specific information for the OEPP programs 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. Regardless of the assistance provided, OEPP consistently strives to meet and exceed the needs of every one of its clients.

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 2011-2012

OEPP has effectively and efficiently worked to fulfill its mission with reduced State funding despite increased numbers of caseloads and work units. While we have had numerous significant accomplishments in many areas, the following is a list of our accomplishments. Details of accomplishments, by each program, are noted in the Appendices.

- a) Since July 2010, the Cass Elias McCarter Guardian ad Litem Program, has ensured 100% of children involved in the Family Court system, due to abuse and neglect, have been appointed a volunteer advocate. For FY-12 this has involved nearly 10,500 children and 179,000 volunteer hours.
- b) The Foster Care Review Board conducted over 7,000 reviews of children in foster care. The volunteers of the review board donated over 15,000 hours reviewing these cases and helping to support children.
- c) The South Carolina Heart Gallery, a partnership between 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 2011, 23 photographers donated their time and talents to photograph 107 children at

photo shoots. There were 296 public venues featuring children in exhibits. There were 103,440 unique visitors to the South Carolina Heart Gallery website that generated 1,466 inquiries from interested families.

- d) The State Office of Victim Assistance (SOVA) recouped \$284,861 of victim assistance fines, fees and assessment funds via budget review and desk audits.
- e) SOVA saved crime victims over \$11.6 million through the bill negotiation process.
- f) Through audit efforts directed by Proviso 89.61, SOVA recouped nearly \$344,000 to be placed back in the Victim Assistance Fines, Fees and Assessment Fund.
- g) SOVA saved the agency \$286.157 in potential duplicate payments to crime victims and or service providers
- h) The Office of Economic Opportunity (OEO), weatherized nearly 3,800 dwellings, assisted nearly 40,000 homeless individuals or individuals at-risk of becoming homeless, and designated \$1.3 million in energy assistance funding specifically for elderly and disabled SC residents.
- i) During fiscal year '12, Continuum of Care provided case management or intensive case management services for 516 children with severe emotional disturbances. This was accomplished in spite of a 10% reduction in staff during the fiscal year.
- j) The South Carolina Office of Veterans' Affairs (SCOVA) educated and counseled veterans, in collaboration with the County Veterans Affairs Officers, service organizations' representatives, and the US Department of Veterans Affairs such that over \$2.4 billion in federal veterans' benefits, medical and financial, were realized in South Carolina in FY 2011. Responded to requests for assistance from over 77,364 constituent contacts. Successfully got legislation passed to add Veteran designation on drivers' license.
- k) The OEPP Human Resources Office (HR) conducted supervisory training for 94 supervisors. Conducted compliance training for 238 employees (EO, Ethics, Standards of Conduct). Conducted developmental training for 169 employees (Customer Service or Time Management).
- l) OEPP Information Technology unit consolidated two separate e-mail systems into one, and migrated all OEPP e-mail users to Microsoft Exchange and the Outlook client. In addition, the information technology unit combined to network systems into one consolidated OEPP network, thereby reducing cost through a reduction in the number of network servers and operating system licenses required.
- m) OEPP has identified and implemented numerous cost saving measures resulting in savings in excess of \$250,000. These items include:
 - Sharing resources across Programs
 - Consolidating and reducing office space
 - Evaluating the use of outside leases
 - Expanding the use of existing technology
 - Reducing duplication in systems and processes
 - Consolidating and merging positions
 - Streamlining paperwork processes

3. Key Strategic Goals for Present and Future Years

OEPP's overall goals include:

- a) To foster a sense of teamwork within OEPP where programs and leaders offer support to each other and work together to provide quality services to the citizens of South Carolina.

- b) To have all programs 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 program within OEPP for identified goals and key measures.

4. Key Strategic Challenges

- a) An unfunded mandate, in addition to reduction in the funding stream coming from the Department of Revenue (GLOPER) has resulted in a significant funding shortfall for the Guardian ad Litem program. Additional state funding and/or identification of a more sustainable revenue stream will be required in order for this program to remain viable.
- b) In addition to the 46% in budget cuts since 2008, significant rate cuts for targeted case management and home/residential contact for the Continuum of Care will result in a budget shortfall. These cuts are expected to be effective January 2013.
- c) Within OEPP several barriers are changing into opportunities. Since each OEPP program has a distinct mission and purpose, programs are prone to work independently to achieve their mission and deliver services. Unfortunately, this structure does not create opportunities for teamwork and efficiencies. This compartmentalization can be a barrier; however, OEPP leadership has increased teamwork and support by having individual programs work together and share information, ideas, best practices, and resources. 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 program directors.
 - a. The OEPP Office of Administration provides support to each program 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's administrative staff is faced daily with the ever changing and diverse needs presented by supporting eleven varied and different programs. This is especially challenging since each program 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 restructured IT functions and will further explore restructuring administrative functions during FY2012-2013.

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 program 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

OEPP houses eleven distinctly different program areas. Each program 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. OEPP's Office of Administration Services, which includes Finance, Human Resources and Information Technology, forms the basis for administrative support for each program area. These administrative and support services are also provided for the Governor's Mansion and Grounds; as well as for the Governor's Office located in the State House.

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

5. OEPP's operational locations

Most programs within OEPP are located within the Edgar Brown or Wade Hampton Buildings within the Capital Complex in Columbia, SC. However, a several OEPP programs have regional or satellite locations throughout the state that enable services/programs to be closer to customers and to increase service availability. While the number of statewide offices is fluctuating, as offices are combined; there are approximately 60 offices located throughout the state.

6. Number of employees

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

176	Classified	13	Unclassified
7	Temporary	60	Temporary (Time Limited)
22	Temporary (Grant)	0	Contract

7. Regulatory environment under which your organization operates

Various state and/or federal regulations, internal policies and procedure manuals govern OEPP programs. Each program's report includes specific applicable regulations.

8. Performance improvement systems

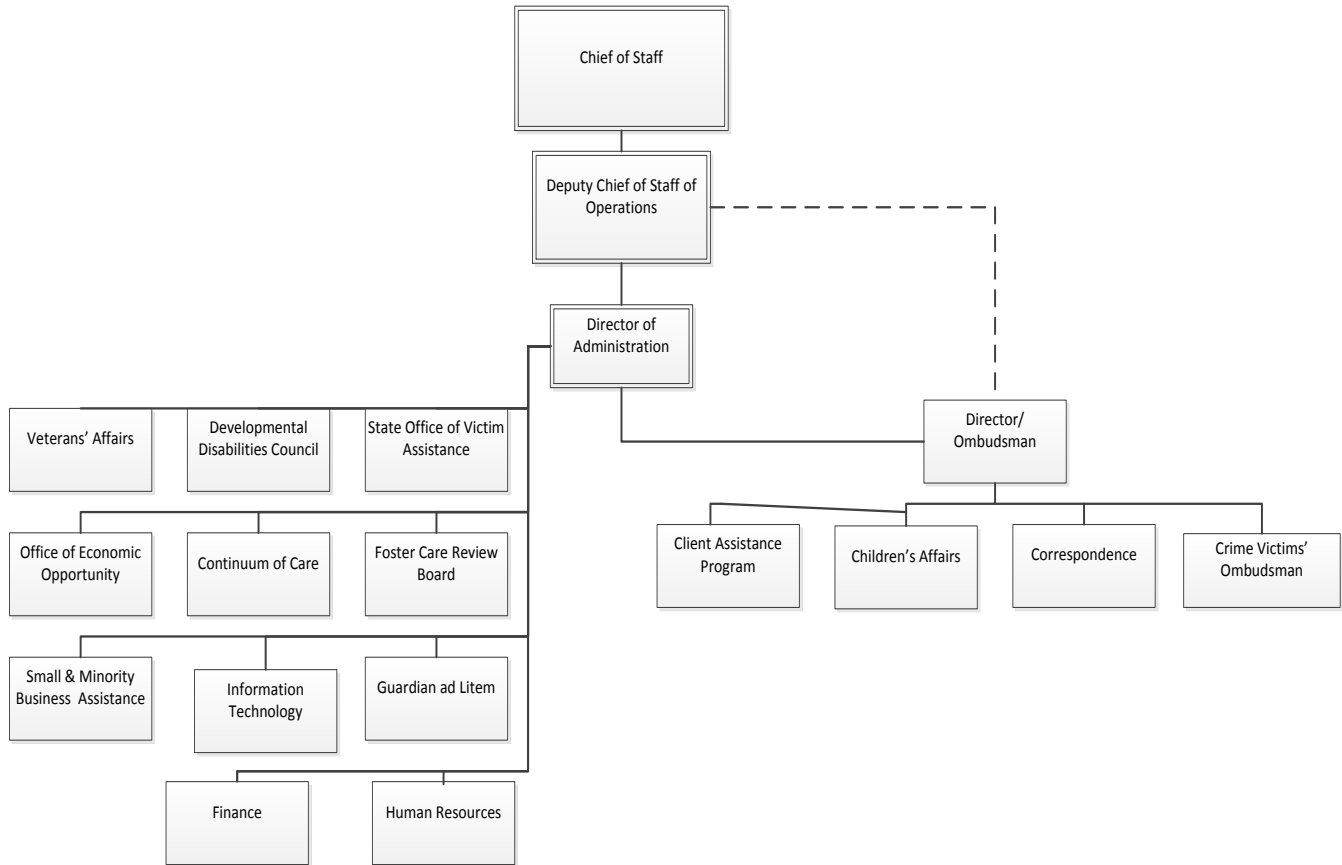
HR provides to each division a monthly report detailing all employees with performance evaluations due in the upcoming month. This is done to ensure that divisions are regularly providing feedback to employees on their performance, to provide consistency in the administration of the performance process throughout OEPP, and to ensure performance evaluations are not done after they are due, stressing accountability to our employees.

Other 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 program directors to help increase communication among the programs. Individual meetings with each program director are held to help assess any barriers to the provision of services, determine potential support needed from administration, identify resources needed and help facilitate or 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 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 9,895,754	\$ 3,140,380	\$ 9,777,808	\$ 2,866,680	\$ 12,844,405	\$ 3,467,437
Other Operating	\$ 16,125,026	\$ 782,399	\$ 14,908,122	\$ 702,138	\$ 20,838,937	\$ 463,331
Special Items	\$ 228,063	\$ 228,063	\$ 187,970	\$ 187,970	\$ 215,435	\$ 215,435
Permanent Improvements			\$ 29,000			
Case Services	\$ 1,177,454	\$ 729,701	\$ 1,194,372	\$ 595,268	\$ 2,015,666	\$ 992,885
Distributions to Subdivisions	\$ 87,632,401	\$ 184,538	\$ 69,589,003		\$ 71,833,882	
Fringe Benefits	\$ 3,244,263	\$ 1,026,476	\$ 3,183,711	\$ 932,162	\$ 4,394,538	\$ 1,210,504
Non-recurring						
Total	\$ 118,302,961	\$ 6,091,557	\$ 98,869,986	\$ 5,284,218	\$ 112,142,863	\$ 6,349,592

Other Expenditures

Sources of Funds	FY 10-11 Actual Expenditures	FY 11-12 Actual Expenditures
Supplemental Bills		
Capital Reserve Funds		\$ 20,858
Bonds		\$

11. Major Program Area Chart

Program Number and Title	Major Program Area Purpose (Brief)	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross References for Financial Results*
I.A. Administration including Finance/ Accounting, Human Resources, Information Technology	To support the programs of OEPP. Note: This total does not reflect support services (correspondence). Refer below	State:	732,564	State:	545,064	
		Federal:	521,649	Federal:		
		Other:	14,996	Other:		
		Total:	1,269,209	Total:	545,064	
		% 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:	146,543	Federal:	128,243	
		Other:		Other:	103	
		Total:	146,543	Total:	128,346	
		% 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:	2,521,887	State:	1,782,318	See individual report
		Federal:		Federal:		
		Other:	2,431,208	Other:	2,600,171	
		Total:	4,953,095	Total:	4,382,489	
		% 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:	171,429	State:	105,832	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	171,429	Total:	105,832	
		% 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:	140,762	Other:	136,866	
		Total:	140,762	Total:	136,866	
		% 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:	42,740	State:	50,316	See individual report
		Federal:	1,072,244	Federal:	1,052,647	
		Other:		Other:		
		Total:	1,114,984	Total:	1,102,963	
		% 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:	88,018,221	Federal:	69,260,986	
		Other:	72,098	Other:	318,997	
		Total:	88,090,319	Total:	69,579,983	
		% of Total Budget:		% of Total Budget:		
II.A.3.Foster Care Review Board	To provide an external system of accountability	State:	444,134	State:	390,627	See individual report
		Federal:		Federal:		

(FCRB)	and advocacy for children and families involved with the foster care system.	Other:	571,099	Other:	815,075	
		Total:	1,015,233	Total:	1,205,702	
		% 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:	884,600	State:	1,049,794	See individual report
		Federal:		Federal:	80,000	
		Other:	4,625,609	Other:	4,277,173	
		Total:	5,510,209	Total:	5,406,967	
		% 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 program 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:	17,539	State:	36,607	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	17,539	Total:	36,607	
		% 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 program compiles reports that track number of inquiries and types of complaints/concerns of constituents for the Governor.	State:	94,463	State:	126,309	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	94,463	Total:	126,309	
		% 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:	88,823	State:	114,766	See individual report
		Federal:		Federal:		
		Other:		Other:		
		Total:	88,823	Total:	114,766	
		% 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	State:		State:	176,725	See individual report
		Federal:	5,355,931	Federal:	3,891,000	
		Other:	9,146,519	Other:	10,487,515	
		Total:	14,502,450	Total:	14,555,240	

	service providers, to ensure SC's crime victims receive top quality service at all levels of our criminal justice system.	% 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:	905,892	State:	905,860	See individual report
		Federal:		Federal:		
		Other:	94,526	Other:	232,285	
		Total:	1,000,418	Total:	1,138,145	
		% 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:	187,486	State:		
		Federal:		Federal:	304,707	
		Other:		Other:		
		Total:	187,486	Total:		
		% 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 implementing cost savings and efficiencies; while supporting the individual programs. Please refer to the Appendices for each program'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 programs in OEPP dictates special approaches for communicating direction. Depending on the program, direction could be set by legislative and other customer needs or by the Director of Administration. The primary long-term direction for each program is set by enabling legislation and by the business and operating philosophy articulated by senior leaders. To ensure compliance, understanding, and effective organizational communication weekly staff meetings are conducted with program directors and the Director of Administration, 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, program leaders have maximum flexibility to serve their customers quickly, effectively and efficiently. They are encouraged to transfer empowerment to program staff. Employees are encouraged to organize work to best meet their needs and the needs of their program. The OEPP internet website contains all Governor's Office Personnel Policies and Procedures, and is available to OEPP employees. We are in the process of moving these documents to and internal intranet.

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

The goals and supporting strategies described in each program's Strategic Plan provide the primary direction and focus. The program leader's communication with the Director of Administration 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 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 management 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 program 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 programs, program leaders are relied upon to routinely review their action plans and performance measures regarding service efficiency and effectiveness. Program directors 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 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. Additionally, the Director of Administration has made a concerted effort to visit each of the 60 satellite locations on an annual basis. This allows informal interaction and feedback from employees across the state.

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

Program leaders are encouraged to help mentor staff, conduct meetings to share information and assist/support the leadership in future planning.

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 program'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. OEPP's HR Office offered a variety of training opportunities during the fiscal year for supervisors and for all employees. Training was offered at multiple locations around the state to accommodate employees statewide. Given the current expertise in HR, a variety of courses will continue to be offered to enhance the professional growth and development of employees.

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 program 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 program's mission and customers. OEPP staff participates 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 program'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 programs 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 consolidated separate networks into one, and created an environment for all OEPP users will have equal access to network resources. The OEPP HR Director is instrumental in helping the senior leaders in examining workforce capabilities and needs. All programs 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 programs' report.

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 program 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 programs. Program 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 programs within OEPP use a variety of techniques to measure progress on action plans according to strategies that work best within their program.

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

The OEPP Director of Administration reviews each program's strategic goals and outcomes with the program leaders. When appropriate, the program 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 program'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 program'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 program 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 programs on the changing needs and expectations on both a national and state level. In some cases, 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 programs 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 program 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 programs 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 program or, at the other end of the spectrum, through new legislation. The OEPP Director of Administration encourages each program 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 programs 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 programs, state and federal laws mandate certain information be obtained and reported in compliance with those laws. Several programs also have requirements issued by federal grantees, evaluation data, or required financial documents. OEPP's Finance Officer assists each individual program 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 program's diversity, data comes in a variety of quantitative or qualitative measures. Each program'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 program'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's 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 program 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 programs 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 programs have guidelines in procurement, accounting, and human resources. They must safeguard client data according to Health Insurance Portability and Accountability Act (HIPAA) guidelines. While maintaining a secure environment, Information Technology staff increased the accessibility of network resources to all OEPP users in all locations.

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 programs use feedback (from internal staff, customers and stakeholders) to adjust overall program work and assignments. These findings help program 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 programs 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, HR maintains a current list of staff who can offer specialized trainings. The OEPP Director of Administration is involved with mentoring staff to develop skills to improve performance.

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 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, 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 program lines.

OEPP's HR Office hosted a drop-in for all Governor's Office employees for State Employee Recognition Day. This was an opportunity to thank employees for their service to the agency and the state. This unit also organized and conducted the agency's state service recognition ceremony. Eight 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.

Individual OEPP programs implement various processes to help develop and use employees while encouraging and promoting program 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 is committed to providing efficient and equitable human resource services to our employees. Delegated human resource functions regarding classification, compensation, and benefits are subject to annual audits by the Budget and Control Board. Feedback from these audits improves HR program effectiveness. The HR Office relies heavily on employee feedback to improve processes. Methods used to obtain employee feedback are primarily informal meetings and exit interview questionnaires with departing employees. Exit interviews are analyzed for data on employee turnover and are shared with each program and management as necessary.

The HR Office also maintains an informal employee suggestion program which allows employees to make suggestions anonymously or in person. In addition, staff in HR participate

in human resource activities such as the state HR Advisory meetings, International Personnel Management Association meetings and training events, HR Forum, and various other human resource-related trainings to gain new ideas for improvements, share best practices, and stay updated on human resource issues.

In an effort to improve HR processes, the HR office organized mandatory supervisory practices training for all supervisors in OEPP. These one-day training sessions, provided by the OEPP HR Director, emphasize consistency, accountability and fairness when performing duties as a supervisor. This training is necessary to ensure all supervisors are familiar with state HR processes/regulations as well as Governor's Office policies and to give supervisors an opportunity to voice their concerns or ask questions about the supervisory process. Our supervisors were taught methods for interviewing and hiring the best people, setting goals for employees, measuring progress, communication, motivation, discipline, FMLA law and procedures, EPMS procedures, LWOP policy, disciplinary procedures as well as preparing for the grievance process. During this fiscal year 81 OEPP supervisors attended this training.

OEPP's HR Office prepared and submitted the annual Equal Employment Opportunity (EEO) Report to the State Human Affairs Commission (SHAC), whereby OEPP reached 98% goal attainment, and ranked number 5 of all state agencies.

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

As stated in 5.2, the OEPP HR Office organized and conducted supervisory practices training for all supervisors in the OEPP. HR also developed and conducted developmental courses in time-management, customer service and cohort diversity.

The Governor's Office 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 and posted on the agency's bulletin board when vacancies occur.

Training needs are assessed through individual interactions between supervisors and employees and are detailed in the employee's planning stage. Linking the planning stage of the EPMS to specific training opportunities provides information on what types of training employees need. The HR Office reviews these documents and works to ensure that employees have access to the training identified in the planning stages. Cross training is another avenue widely used by OEPP programs.

To meet specific program staff's needs, each OEPP Program leaders works with staff to arrange training opportunities for the unique needs of their staff. Some divisions have a very formal training plan.

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

OEPP programs 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 programs 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 HR 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 minimum 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 HR Office reviews these documents and works to ensure employees have access to training identified in the planning stages. Cross training is another avenue widely used by OEPP programs.

To meet specific program needs, each OEPP Office director 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 a 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 HR 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.

HR also developed and conducted EPMS training for all employees as needed to help them understand the agency's EPMS system. HR 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.

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 programs 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?

Please refer to 5.1 – 5.5. In summary, information mentioned included

- Training: job related, skills related, areas of interest and cross-training
- Hosting a drop-in for all Governor's Office employees for State Employee Recognition Day. This was an opportunity to thank employees for their service to the agency and the state.
- Organizing and conducting OEPP's state service recognition ceremony.
- Creating a positive atmosphere and encouraging staff to demonstrate a good work ethic and proper attitude.
- Recognizing staff individually for their expertise and accomplishments throughout the year.
- Governor's Proclamation recognizing Special Emphasis months

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 exit interview questionnaires with departing employees. Exit interviews 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. All program directors agree and encourage open communication and discussions. Employees are encouraged to go to 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. Our motto is "it's about serving people" and we encourage all of our employees to keep this mission in mind every day as our motivation.

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 programs 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 programs 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, programs 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. Health screenings at minimal cost are offered to employees. Free health workshops and distribution of health information are available.

Emergency and disaster preparedness is coordinated through OEPP's Director of Administration, with staff on call to assist, if necessary. Each program is informed of evacuation procedures in the event of fire, etc., and there is a designated staff member who is instructed to take roll call in such events. Emergency and Disaster plans have been developed and are continually reviewed.

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 programs 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 support OEPP programs. 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. HR 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 HR are key support systems provided within OEPP to our individual programs. Staff has 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 HR Office continues to provide guidance and training on complex personnel and supervisory issues.

As stated in 2.1 OEPP Information Technology consolidated and modernized the e-mail system, consolidated separate networks into one, and created an environment for all OEPP users have equal access to network resources.

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 programs, in conjunction with OEPP leadership, routinely evaluate their products and processes. This ensures programs provide quality services in keeping with the OEPP mission. The individual OEPP programs 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 programs 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, HR and IT. 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 programs 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 programs. If additional cuts are imposed, services to our consumers may be negatively affected. The Director of Administration frequently meets with each program 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 programs and it minimized the RIF of critical needs positions among numerous programs.

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 programs; the results are found in the leadership and support given to each program within OEPP. Since each program is diverse, results of their strategic goals are best provided by the individual programs 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. Additionally, the HR Office has processes in place to track human resources

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

Table 7.4.1 OEPP Employment Process:

	FY 2011-2012	FY 2010-2011	FY 2009-2010
Job Vacancy Postings:	56	65	59
Applications Processed:	6,161	7,025	8,613
New Hires:	36	49	54
	21FTE 9 Time Limited 5Temp Grant 1 Temp	17 FTE 12 Time Limited 20 Temp Grant	19 FTE 15 Time Limited 20 Temp Grant
Terminations:	44 24 FTE 9 Time Limited 11 Temp Grant	65 37 FTE 10 Time Limited 18 Temp Grant	60 43 FTE 12 Time Limited 5 Temp Grant
Turnover (FTE):	12%	16%	17%

Table 7.4.2 OEPP Termination Statistics:

Primary reasons reported for termination of employment in exit interviews. 2011-2012	
FTE	
Personal Reasons	38%
Full Retirement	29%
New job (other state agency)	21%
New job (outside state government)	8%
Returned to School	4%
Misconduct	0%
Substandard Performance	0%
Temporary Grant	
Personal Reasons	55%
Full Retirement	0%
New job (other state agency)	0%
New job (outside state government)	0%
Returned to School	0%
Misconduct	0%
Substandard Performance	0%

Loss of Grant Funding	45%
Time-Limited	
Personal Reasons	56%
Full Retirement	33%
New job (other state agency)	0%
New job (outside state government)	0%
Returned to School	0%
Misconduct	11%
Substandard Performance	0%

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:	1.71
Provided recognition on the job:	1.63
Developed cooperation and teamwork:	2.0
Encouraged/listened to suggestions:	2.14
Resolved complaints and problems:	1.86
Followed policies and procedures:	1.14
Provided clear performance expectations:	1.71
Provided feedback regarding my work:	1.57
Exit interviews revealed the following information about <u>employment with the OEPP and the employee's Division.</u>	
The rating choices were (1) Excellent, (2) Good, (3) Fair, or (4) Poor:	
Topic	Rating Average
Cooperation within your office:	2.17
Communication within your office:	2.17
Communication within OEPP	2.29
Work Environment:	2.38
Morale:	3.14
Potential for career growth:	3.5
Training opportunities:	2.86
Use of your skills/abilities:	2.57
Flexible schedule:	2.71
Work hours:	2.0
Compensation:	2.75
Benefits:	2.0
Exit interviews revealed the following information about <u>whether the employee would consider returning to employment with the Governor's Office in the future:</u>	
Yes: 100%	No: 0%

OEPP's HR Office reports their Affirmative Action Plan Goal Attainment annually to the State Human Affairs Commission. OEPP remains in the top percentile of all state agencies for goal attainment. The results for the last two reporting cycles are:

2011: **98% (ranked number 5)** 2010: **93.1% (Ranked number 12)**

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.

2011-2012 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 stated purpose, mission, vision and values:

The purpose of the Office of the Ombudsman is to help constituents resolve issues they have with state agencies.

The mission of the Office of the Ombudsman is to assist individuals who contact the Governor's Office and to provide direction and/or resolution. The mission of the Children's Case Resolution System (CCRS) is to review and mediate children's cases for which the appropriate state/public agencies have been unable to collectively provide resolution.

The vision of the Office of the Ombudsman is to resolve complaints, address constituent inquiries and provide resolution to children's case issues.

The values of the Office of the Ombudsman 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 2011-2012

- A. Worked, with the Governor, to staff over 65 Open Door cases and their outcomes
- B. Successfully handled 118 "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 is that often the assistance requested for constituents rests solely with the agency contacted, and the final outcome is beyond the control of the Office. While constituent service is always needed, there are times, for instance the holiday season, when volume can increase greatly, requiring 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 results and to identify areas needing improvement.

Section II - Organization Profile

1. Main products and/or services and the primary methods by which they 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

- 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

All customers expect appropriate assistance delivered professionally and with respect.

3. Key stakeholders groups

- Senior Staff
- Governor

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 (segmented by employee category

__1__ Classified __2__ Unclassified.

7. Regulatory environment under which your organization OPERATES

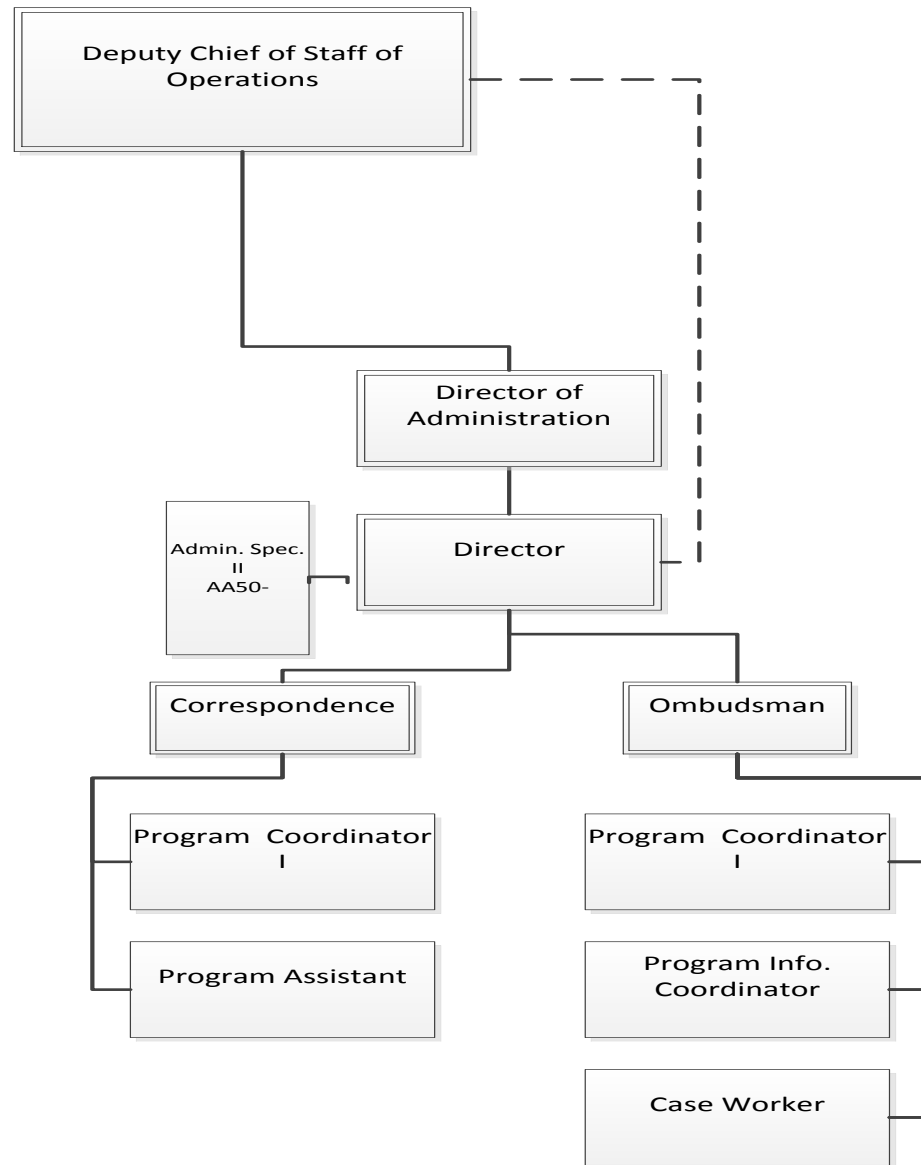
- Constituent Services and OCA are regulated by the Governor and her Senior Staff.
- CCRS operates according to Section 20-7-5210 of the South Carolina Code of Laws.

8. Performance Improvement System

- Reports generated from the mail log track casework progress through categories such as number of letters and telephone inquiries received and ensure that mail does not go unanswered. These reports are also useful in managing and balancing caseloads among staff members as well as in tracking trends in constituent inquiries. Open communication is encouraged, and the caseworkers are cross-trained in all aspects of the Office.

9. Organizational Structure

Ombudsman



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 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12- 13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 13,507	\$13,507	\$36,523	\$36,523	\$36,523	\$36,523
Other Operating	\$112	\$112	\$90	\$90	\$	\$
Special Items	\$0	\$0	0	0	\$104,054	*\$104,054
Permanent Improvements						
Case Services	0	0				
Distributions to Subdivisions	0	0				
Fringe Benefits	\$3,920	\$ 3,920	\$8,389	\$8,389	\$10,957	\$10,957
Non-recurring						
Total	\$17,539	\$17,539	\$45,002	\$45,002	\$151,534	\$151,534

Other Expenditures

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

***Dollars pass through to The Children'**

10. Appropriations/Expenditures Chart

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

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12- 13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$68,962	\$68,962	\$88,751	\$88,751	\$85,789	\$85,789
Other Operating	\$3,218	\$3,218	\$7,691	\$7,691	\$1,629	\$1,629
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$22,282	\$22,282	\$29,867	\$29,867	\$28,310	\$28,310
Non-recurring						
Total	\$189,951	\$189,951	\$126,309	\$126,309	\$ 115,728	\$115,728

Other Expenditures

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

11. Major Program Areas Chart

Program	Major Program Area Purpose	FY 10- 11 Budget Expenditures		FY 11-12 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	17,539	State	45,002	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	17,539	Total	45,002	
		% of budget: 0%		% of budget: 0%		

Program	Major Program Area Purpose	FY 10-11 Budget Expenditures		FY 11-12 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	189,951	State	126,309	7.1
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	189,951	Total	126,309	
		% of budget: %		% of budget: %		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

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

Staff receives direction through direct and open communication regarding each case as handled and meetings as needed. Timelines are set by Constituent Services senior leadership, and reports are used to ensure that performance is meeting outlined expectations. 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. Senior leadership sets the standard for ethical behavior,

in compliance with that set forth by the State Ethics Commission and the Office of Human Resources. Ethical behavior is routinely discussed and expected by senior leadership.

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

The purpose of the Office is to provide assistance to constituents, so staff keeps a constant focus on customers and other stakeholders in order to perform their duties.

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 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 are regularly reviewed by senior leaders to inform them on needed actions?

Senior leadership regularly evaluates the response time for written and telephone inquiries as well as the length of time it takes to hear back from agency referrals.

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. Staff feedback is necessary to share resources and techniques useful to efficiently perform constituent services. Feedback also facilitates cross training among staff. 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. 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?

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 and the accomplishment of strategies objectives?

Because we are a small office working closely together, open communication is encouraged, senior leaders listen to employee ideas and brainstorming occurs as necessary. Working closely with the Governor during Open Door sessions allows for specific case instruction.

- 1.9 How do senior leaders create an environment for organizational and workforce learning?**
Staff is positioned to easily share their expertise, experience, and knowledge and contribute to organizational and workforce learning. 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 do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.**
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.**
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. Senior leaders advise caseworkers daily and meet often with individual employees to determine and discuss progress and future planning for the Office. Procedures are in place to help ensure continuity in the event of an emergency.

Chart III.2.2

Strategic Planning Chart for Ombudsman, Children's Affairs, & Children's Case Resolution System

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 08-09 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Resolve concerns of constituents who contact the Governor's Office.	1.1 Listen to individuals who contact Governor's Office 1.2 Respond to written and verbal inquiries 1.3 Arbitrate through the CCRS only those cases where all efforts to resolve the case have been exhausted	<ul style="list-style-type: none"> Respond to written inquiries within 5 days or less Respond to telephone inquiries within 24 hours Track agency referral and response time. Facilitate, promote and improve communication and coordination of services between constituents and state agencies and among state agencies to prevent the need for arbitration through CCRS 	See Table 7.1.1 See Table 7.1.2
2. Maintain current information regarding services available through local, state and federal agencies; non profit and for profit organizations.	2.1 Continuously research and share information pertaining to goods, services and programs available to constituents	<ul style="list-style-type: none"> Share relevant, updated information during staff meetings and cross train all caseworkers. Information regarding available services is reviewed and updated quarterly. Any changes are relayed to applicable agencies and organizations. 	

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

Constant collection of up to date information about agencies, non profit organizations and services available, since they are always changing, prevents dissemination of erroneous information.

Encouraging open and consistent communication increases cooperation among state agencies involved in the coordination of family services.

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?

Plans are tracked through reports and supervisory meetings with senior leaders and the workforce. Since this is a small and combined staff, the entire workforce dedicates time to each action plan and strategic objective.

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

Reports are reviewed and discussed at staff meetings. These meetings help staff by providing consistent and efficient information regarding referrals, and working closely with senior leaders provides guidance to caseworkers when needed.

- 2.5 How do you measure progress on your action plans?**
Through the Governor's Mail Log, it is possible to track and measure the number of constituent contacts and agency referrals processed as well as resolution, whether positive or negative, to a constituent's inquiry.
- 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.**
The strategic plan is not available online.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

- 3.1 How do you determine who your customers are and what their requirements are?**
Customers include residents of South Carolina, government offices, non-profit organizations, for profit organizations, and non residents experiencing difficulty with SC government agencies and who 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?**
Constant communication among staff, constituents, the Governor, State House staff, OEPP Offices and other state agencies help determine changing needs and expectations.. The Governor's Open Door Policy also encourages face to face interaction with constituents.
- 3.3 What are you key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?**
The access mechanisms for customers include the internet, phone directories and word of mouth. Each of these mechanisms provides constituents with information for contacting the Governor's Office via phone, mail or 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 and 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 to meet and exceed their expectations? Indicate any key distinctions between different customer and stakeholder groups.

Staff works with state agencies to provide the most efficient problem solving referrals as well as 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 performance, 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. 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. Additionally, open communication regarding outcome measures allows for effective decision making among staff.

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

Bi- weekly performance reports show how many phone and written inquiries were handled by each caseworker. This report also tracks the number of agency responses relayed to constituents and any mail over 2 weeks old. Additional reports can be generated to show the percentage of written cases responded to within 5 days or less and the percentage of telephone inquiries responded to within 24 hours or less for each caseworker. Each caseworker is responsible for reviewing agency referrals every 30 days to make sure response and/or resolution have been provided.

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

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 locations?

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?

It promotes and encourages staff to proactively identify and prepare for potential high-volume phone call and mail times before they occur, assist with cross-training for their regular duties, adjust individual schedules when 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, and increases in phone calls 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 weekly Directors' meetings and supervisory and other trainings offered by Human Resources.

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 training needs for your workforce, including job 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. 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

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 workforce to develop and utilize their full potential?

Staff is motivated through open communication and a friendly, professional environment to help them feel comfortable, by openly expressing ideas and suggestions with other staff members, and 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 wellbeing, 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. 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?

Work areas are kept clean and sanitary. All emergency evacuation procedures are followed. Suspicious or threatening constituents are discussed with SLED. One-on-one meetings with constituents are held 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 requiring the greatest competency and capability in navigating.

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 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?

Cross training is important to maintain efficiency. As new technology is added, staff is trained accordingly. Responses are 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 processes?

Through continuous research and sharing of current information about services available to constituents, 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 service performance that are important to your customers? How do your results compare to those of comparable organizations?

CS/CCRS/Children's Affairs have several goals (See Chart 2.2) related to process effectiveness. These include responding to written and verbal inquiries and tracking agency referral and response times. Constituent Services Senior leadership has been unable to locate data for other state or 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 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
Written inquiries received	4091	6803	8776	7214	6637
Percentage answered within 5 days or less	92%	97%	98%	88%	76%
Phone inquiries received	8207	13,436	16,826	8237	10,850
Percentage answered within 24 hours or less	97%	96%	97%	98%	99%
Written agency referrals sent	408	1,446	1,747	1,356	2733
Percentage of agency referrals responded to and closed with constituent	95%	97%	98%	97%	98%

Table 7.1.2 CCRS Cases

	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
Cases receiving CCRS funds	2	1	0	0	0
Cases monitored by CCRS - no pay	6	3	1	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 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 wellbeing and are therefore able to identify and address issues early on.
- 7.5 What are your performance levels and trends or organizational effectiveness/operational efficiency, and work system?**
There are not any regulatory reports required for Constituent Services or CCRS. The South Carolina community continues to utilize Constituent Services, OCA and CCRS as an effective tool to navigate state government programs, services and resources.
- 7.6. What 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.

2011-2012 Accountability Report
Governor's Office of Executive Policy and Programs
Client Assistance Program

Section I - Executive Summary

1. Stated Purpose, Mission, Vision, and Values

Purpose

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

Mission

The SC Client Assistance Program's 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 2011-2012

- a) The CAP resolved 204 full cases without resorting to formal hearings or litigation.
- b) The CAP provided outreach to 1,555 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 in the state.

4. Key Strategic Challenges

- a) Improved collaboration with service providers in provision of services for person 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 customer groups and their key requirements/expectations**
- 3. Key stakeholder groups**
- 4. Key Suppliers and Partners**

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

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Client Assistance Program (CAP)	<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. Operation location

The Client Assistance Program is located in the Wade Hampton building, 1200 Senate Street Columbia, South Carolina 29201

6. The number of employees, segmented by employee category

1 Classified
1.28 Unclassified

7. The regulatory environment under which your organization operates

The Federal Rehabilitation Act of 1973, as amended.

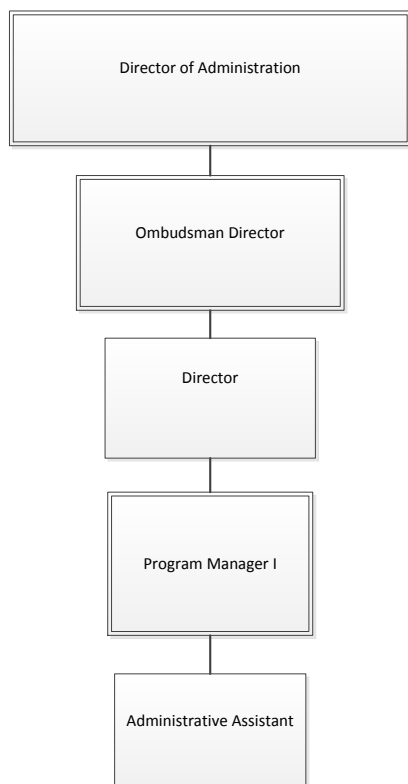
8. Performance improvement systems

- a) Review of client satisfaction surveys.
- b) Performance review from mandated annual Federal CAP report.

c) Feedback from clients and stakeholders.

9. Organizational structure

Client Assistance Program



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

OEPP – Client Assistance Program

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$81,199		\$85,641.95		\$78,000	
Other Operating	\$44,613		\$22,740.64		\$49,251	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$20,730		\$19,993.96		\$27,749	
Non-recurring						
Total	\$146,542		\$128,346.55		\$155,000	

Other Expenditures

Sources of Funds	FY 11-12 Actual Expenditures	FY 12-13 Actual Expenditures
Supplemental Bills	\$	\$
Capital Reserve Funds	\$	\$
Bonds	\$	\$

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
Client Assistance Program	To Advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs in the state.	State		State		Chart III.7.1.1 Chart III.7.2.1
		Federal	\$146,542	Federal	\$128,242.91	
		Other		Other	\$103.64	
		Total	\$146,542	Total	\$128,346.55	
		% of budget:		% of budget:		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

- 1.1 How do senior leaders set, deploy and ensure two-way communication throughout the organization and with customers and stakeholders, as appropriate for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior?**
- a) Staff weekly meetings with open communication for direction and training.
 - b) Provide staff training for professional development.
 - c) Annual staff reviews with Employee Performance Management System (EPMS).
- 1.2 How do senior leaders establish and promote a focus on customers and other stakeholders?**
- a) Customer service and client confidentiality emphasized at all times.
 - b) Review verbal and written client satisfaction surveys for program improvement.
 - c) CAP staff training ensures that clients and consumers with disabilities are always treated with respect and dignity.
 - d) Staff training on current agencies policies and laws relevant to serving persons with disabilities.
 - e) Staff participates in national CAP Advocacy Listerve 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?**
- a) Recorded timeliness of responding to client concerns and resolution.
 - b) Customer satisfaction surveys.
 - c) Feedback from agencies and programs serving persons with disabilities.
- 1.4 How do senior leaders maintain fiscal, legal, and regulatory accountability?**
- Through required annual federal reporting and audit systems.

- 1.5 What performance measures do senior leaders regularly review to inform them on needed actions?**
- a) Successful case resolutions at lowest alternative dispute resolution level without litigation.
 - b) Productive collaboration with other service providing agencies and programs.
 - c) Feedback from customer satisfaction surveys.
- 1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness, the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to organizational values?**
- a) Weekly staff meetings for client case reviews and information sharing.
 - b) “Open Door” policy for 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 leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.**
- a) Active participation in various advocacy organizations such as: the Governor’s Committee on Employment of People with Disabilities, National Governor’s Committee on Employment of People with Disabilities, Mayor’s Committee on Persons With Disabilities, Disability Action Center Project Hope Advisory Board, SC Vocational Rehabilitation Business Applications Program, Midlands Interagency Human Services Network, SC Assistive Technology Advisory Board, SC Independent Living Council, SC Commission for the Blind, Association for Education and Rehabilitation of the Blind and Visually Impaired, the National Rehabilitation Association, SC Vocational Rehabilitation Department, and other disability related community organizations.
 - b) Staff participates in available community programs such as: SC African American Heritage Commission, Hadley School for the Blind, Vision Summit, Website Tester for Assistive Technology Project, Talking Books Advisory Council and the SC Association of the Deaf.

Section III – Elements of Malcolm Baldrige Criteria

Category 2: Strategic Planning

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

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?**

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

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

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Advocate and resolve cases at the lowest possible level in the alternative dispute resolution system.	Clients will receive appropriate services and become employed and/or live independently.	<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	More persons with disabilities will be able to access	<ul style="list-style-type: none"> • Exhibit and present at 14 conferences and/or groups for persons with 	Chart III.7.1.1

with disabilities throughout the state.	services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs.	disabilities. <ul style="list-style-type: none"> • Visited 15 Vocational Rehabilitation Department Evaluation Training Centers. • Annual collaboration with other organizations for community Information and events for persons with disabilities. 	
---	---	---	--

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 than plan.

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

Section III – Elements of Malcolm Baldrige Criteria

Category 3 - Customer Focus

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

Customer/Stakeholder	Requirements
Persons with mental and physical disabilities, as defined under the Federal Rehabilitation Act of 1973, as amended.	The customers' disabilities must be an impediment to competitive employment and/or living independently.
Persons in the state who have questions regarding services provided by the SC Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs, and persons with questions regarding the Americans with Disabilities Act, Title I.	Customers needing information and assistance regarding services provided by these agencies and customers needing information on the Americans with Disabilities Act, Title 1.

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

- Research current information outlined in periodicals relating to services and persons with disabilities.
- Attend annual CAP conference and other trainings related to better serving persons with disabilities.
- Participate in national CAP advocacy listserve 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 those access mechanisms enable customers to seek information, conduct business, and make complaints?

- A CAP brochure is 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 CAP provides services. CAP mailed 140 surveys and 37 were returned.
- Review of annual Federal CAP report data.

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

- 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 expectation? Indicate any key distinctions between different customer and stakeholder groups.

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

Section III – Elements of Malcolm Baldrige Criteria

Category 4: Measurement, Analysis, and Knowledge Management

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

- a) Outlined by Federal Grantee.
- b) Required annual CAP Federal Report.

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

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, and how do you keep them current with organizational service needs and direction?

- a) Annual Federal CAP report based on mandated federal program requirements.
- b) Successful case resolutions at lowest alternative dispute resolution level without litigation.
- c) 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 yearly annual Federal CAP report information with mandated guidelines for program.

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

- a) Review yearly annual Federal CAP report information with mandated guidelines for programs.
- b) Participate in national CAP advocacy listserve with CAP program directors in other states.
- c) Attend mandated trainings by the Federal Grantee.

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

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

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

Section III – Elements of Malcolm Baldrige Criteria

Category 5: Workforce Focus

- 5.1 How does management organize and measure work to enable your workforce to: 1) develop their full potential, aligned with the organization's objectives, strategies, and action plans; and to 2) promote cooperation, initiative, empowerment, teamwork, innovation and your organizational culture?**
- a) Weekly staff meetings with open communication and mentoring.
 - b) 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 locations? 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 plan?**
- a) Feedback from employees and management on EPMS allows for open discussion on organizational goals and employee performance relating to program goals.
 - b) Feedback allows for professional staff development opportunities.
- 5.6 How does your development and learning system for leaders address the following: a) development of personal leadership attributes b) development of organizational knowledge c) ethical practices d) your core competencies, strategic challenges, and accomplishment of action plans?**

- a) 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 allows for open communication in all areas of program competencies and challenges.

- 5.7 How do you identify and address key developmental training needs for your workforce, including job skills training, performance excellence training, diversity training, management/leadership development, new employee orientation, and safety training?**
Staff training opportunities offered through Human Resources, current computer/office applications, general staff meetings.
- 5.8 How do you encourage on-the-job use of new knowledge and skills?**
Staff discussions and sharing of new knowledge.
- 5.9 How does employee training contribute to the achievement of your action plan?**
Staff must have the educational background and expertise to deal with the specialized population for the CAP program.
- 5.10 How do you evaluate the effectiveness of your workforce and leader training and development system?**
Staff 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 pull potential?**
Increased opportunities for professional development within the organization.
- 5.12 What formal and/or informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances?**
 - a) Small staff allows for close working relationship and open line of communication.
 - b) Meetings with staff on performance review as needed.
- 5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organizations?**
Staff continuing education to pursue future career goals.
- 5.14 How do you maintain a safe, secure and healthy work environment?**
CAP maintains a safe and secure work environment by removing physical hazards and complying with all safety guidelines.

Section III – Elements of Malcolm Baldrige Criteria

Category 6: Process Management

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

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

Category 7 - Results

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

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

- b) Number of information and referral calls and visits for persons with disabilities.

Chart III.7.1.1 Performance Measures for the Client Assistance Program

Performance Measure	FY 09-10	FY 10-11	FY 11-12
Number of CAP Cases	184	207	204
Number of information and referral	3285	4000	3,005
Number of outreach to underserved population groups throughout the state	2765	2200	1,555

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

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

Performance Measure Goal: Clients will express satisfaction with the services they receive	FY 09-10	FY 10-11	FY 11-12
Number of clients expressing "Very Satisfied"	48	30	26
Number of clients expressing "Satisfied"	9	11	7
Number of clients expressing "Not Satisfied"	1	4	4
Number of clients stating that they would use CAP services again	57	44	34
Number of clients stating that they would not use CAP services again.	0	1	3

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

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

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

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

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

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

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

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

2011-2012 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 which will ensure that all children with severe emotional disturbance receive the services they need to maximize their functioning while in the least restrictive and most appropriate environment possible."

Values:

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

2. Major Achievements for FY 2011-2012

- a) 98% of families who responded to a Continuum of Care survey felt they were involved in helping make treatment decisions for their child. Additionally, 90% of families who responded stated they will refer others families to the Continuum.
- b) The Continuum served 516 children during FY 2011-2012, which is a 10% (approximately 60 children) decrease from FY 2010-2011. However, the Continuum was able to serve over 500 children with an approximately 10% decrease in staff. During FY 13, staffing levels are expected to increase thus allowing us to serve more children.
- c) There were 135 children/adolescents accepted for full case management services compared to FY 2010-2011 in which there were 117 children/adolescents accepted for full case management.
- d) The average number of days an applicant was on Continuum's selection list (days between completed application and selection) was 157 during the FY 2011-2012. Of those selected, 58% were on the selection list less than 90 days.
- e) Efforts to curb spending while maintaining services included restructuring the state office staff with personnel cost savings of \$70,293. Moving the regional office in the Columbia area to the State Office building was accomplished for a cost savings of \$30,264. Additionally, a separate email system for the Continuum was eliminated and moved to the Governor's office e-mail system.
- f) A new business model for the Continuum was designed in order to improve services and to prepare for changes brought about in targeted case management requirements by the Department of Health and Human Services. These changes include: 1) increasing the hours of targeted case management to be billed each month by staff; 2) eliminating the second child services supervisor in each region to increase efficiency; 3) revising the intake process for all clients to improve the services received and reduce the waiting period; 4) adding two additional licensed clinical consultants in order to improve the quality of assessment, diagnostic and consultative services; 5) developing an assessment for all clients to aid with appropriate development of the client service plan with re-assessment to occur every 90

- days; 6) moving supervision of the clinical consultants from the State Office to the Regional Program Directors in order to ensure comprehensive utilization of staff resources; 7) revising the service standards in order to provide case management services based on the client need as opposed to a one-size fits all approach; 8) eliminating one job classification for staff titled, “Service Coordinator Assistants” who will be unable to bill under the new targeted case management requirements. Staff who filled these positions moved to other jobs or were transferred to other positions within the agency; 9) providing discharge planning to all clients at an early phase in services.
- g) The Continuum continued to utilize 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.
 - h) 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 2011-2012, on average, 80% of our children were living at home, compared to 61% three years ago.
 - i) The Continuum continues to partner with other child-serving agencies by participating in the South Carolina Joint Council on Children and Adolescents. The Continuum has administered over 50 Global Assessment of Individual Needs–Short Screener (GAIN-SS) assessments and participated in other No Wrong Door initiatives. The No Wrong Door Core Curriculum Trainings are always available to our staff on the Share Point site. Some of the No Wrong Door Core Trainings include: “Childhood and Adolescent Development Core Competencies”, “Co-occurring Disorders”, “Families and Communities as Partners” and many more. 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, and joint training opportunities for improved clinical knowledge, skills, and abilities.
 - j) During the FY 2011-2012, two 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.
 - k) This year, the Continuum secured field placements for Human Services students from Greenville Tech. These internships provided clinical experience for the interns and productive support workers for Region B.
 - l) All job descriptions have been revised and were updated in order to align with the Continuum’s new business model.
 - m) In an effort to continue working toward our mission, the Continuum implemented a Family Advisory Board. The Family Advisory Board includes representation from families of Continuum children and stakeholder consumer groups such as NAMI, and Federation of Families. The Family Advisory Board will allow Continuum families an opportunity to assist in the Continuum planning process and express ideas for improving services to children and their families.

3. Key Strategic Goals for Present and Future Years

During FY 2011-2012, 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) Since 2008, the Continuum has seen a reduction of 46% of its budget which has significantly impacted operations and personnel. With DHHS implementing targeted case management rate cuts as early as 1/1/13, the Continuum faces budget shortfalls.
- b) The Department of Health and Human Services (DHHS) is implementing a new separate State Plan Amendment for at-risk children with a proposed effective date of 1/1/13. Medical necessity will be defined and prior authorization required prior to providing targeted case management. Higher productivity is expected and is set at 50%. Case managers and case manager supervisor qualifications have been defined. New targeted case management rates have been set at \$15.00 for 15 minutes of office contact per service unit and \$20.00 for 15 minutes of home/residential contact per service unit. The rate cuts will cause a significant loss of revenue for the Continuum as our current rate per 15 minutes is \$35.05 representing a decrease of 57% for office contact and 43% for home/residential contact.
- c) 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. The Continuum and DHHS have partnered together to research instances of inappropriate billing and solutions to this problem.
- d) The Continuum has been challenged by staff turnover and retirements in the state office this year of up to 50%. In November, a new agency director was hired and positions have been filled.
- e) There continues to be a lack of certain rehabilitative 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.
- f) 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.
- g) Again this year, the Continuum was able to utilize carry forward funds from previous fiscal conservation efforts to help operate during 2011-2012. However, reductions in Federal reimbursements (Medicaid) as stated in Section I a) - b), in the Continuum's budget, and the depletion of the carry forward fund 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

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

10. Key customers groups and their key requirements/expectations

11. Key stakeholders groups

12. Key suppliers and partners

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

Office	Key Services	Key Customers/ Stakeholders Groups	Key Suppliers and Partners
Continuum of Care (COC)	Case management for children with serious emotional challenges and their families. Through case management COC: 1. identifies needed services 2. advocates for the child/family 3. assesses and coordinates services 4. offers information, training and support for the family 5. maintains contact with the child, family and treatment team	<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

47 Classified

0 Temporary

9 Temporary Grant

The above information reflects the number of filled positions. As of June 30, 2012, the Continuum had 19 unfilled FTE positions and 10 unfilled Temporary Grant Positions. Vacancies are filled as funding allows—with positions for staff directly working with children being our first priority.

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.

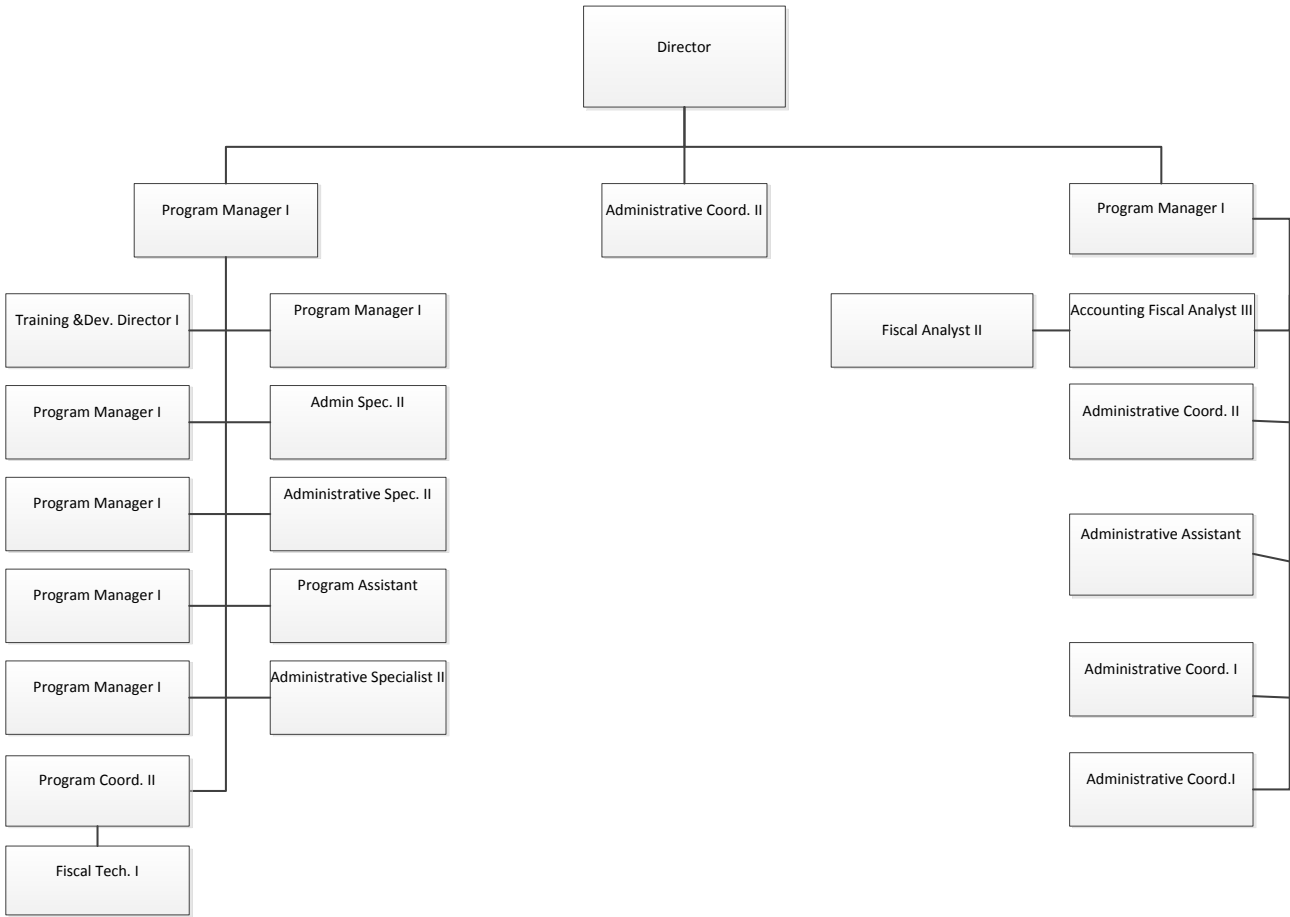
8. Performance improvement systems

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

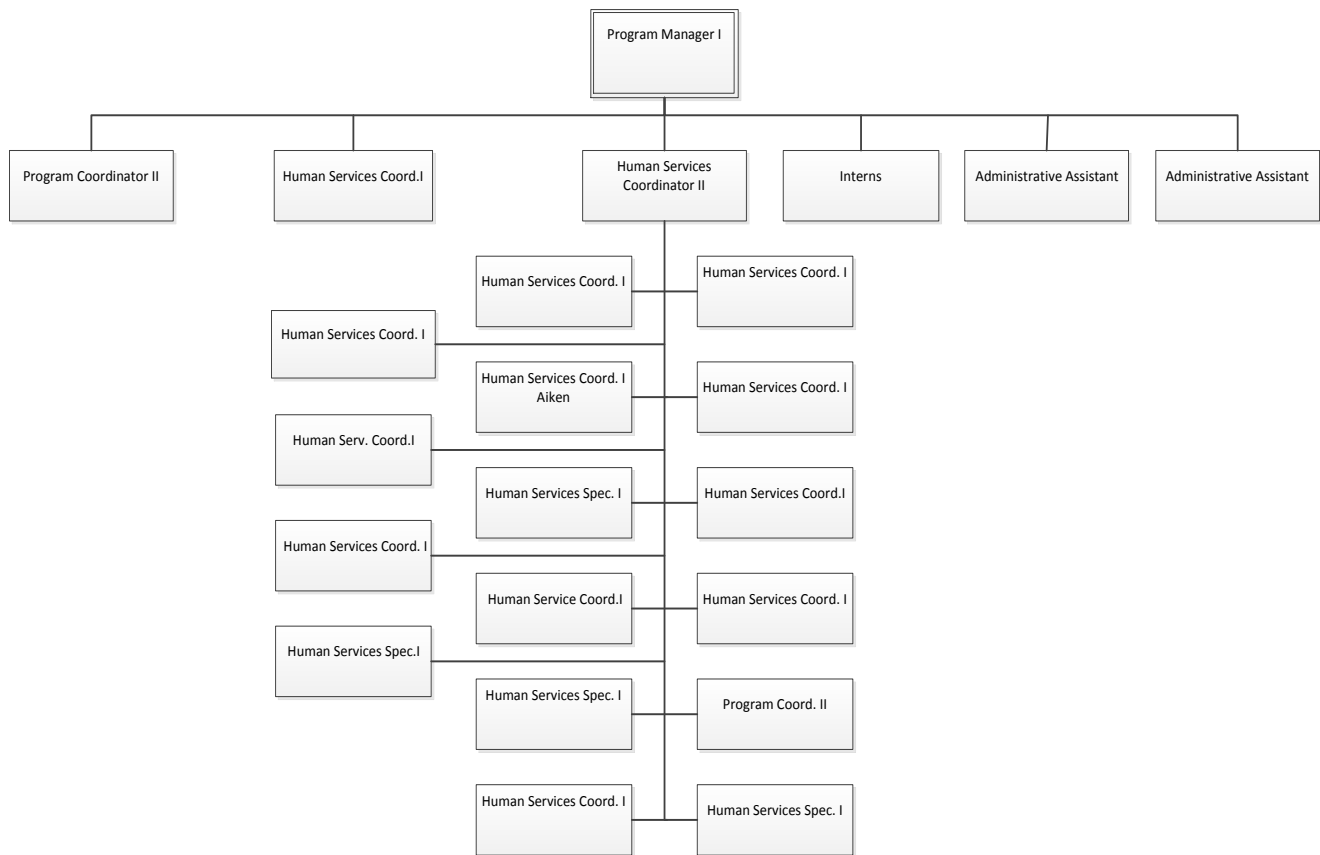
- a) Family Advisory Board (quarterly)
- b) Requesting information/comments via Family Feedback surveys
- c) Obtaining comments from Teacher Feedback surveys
- d) Holding regularly scheduled meetings to discuss budget issues, staff performance, process improvement and communication
- e) Tracking data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

9. Organizational Charts

Continuum of Care

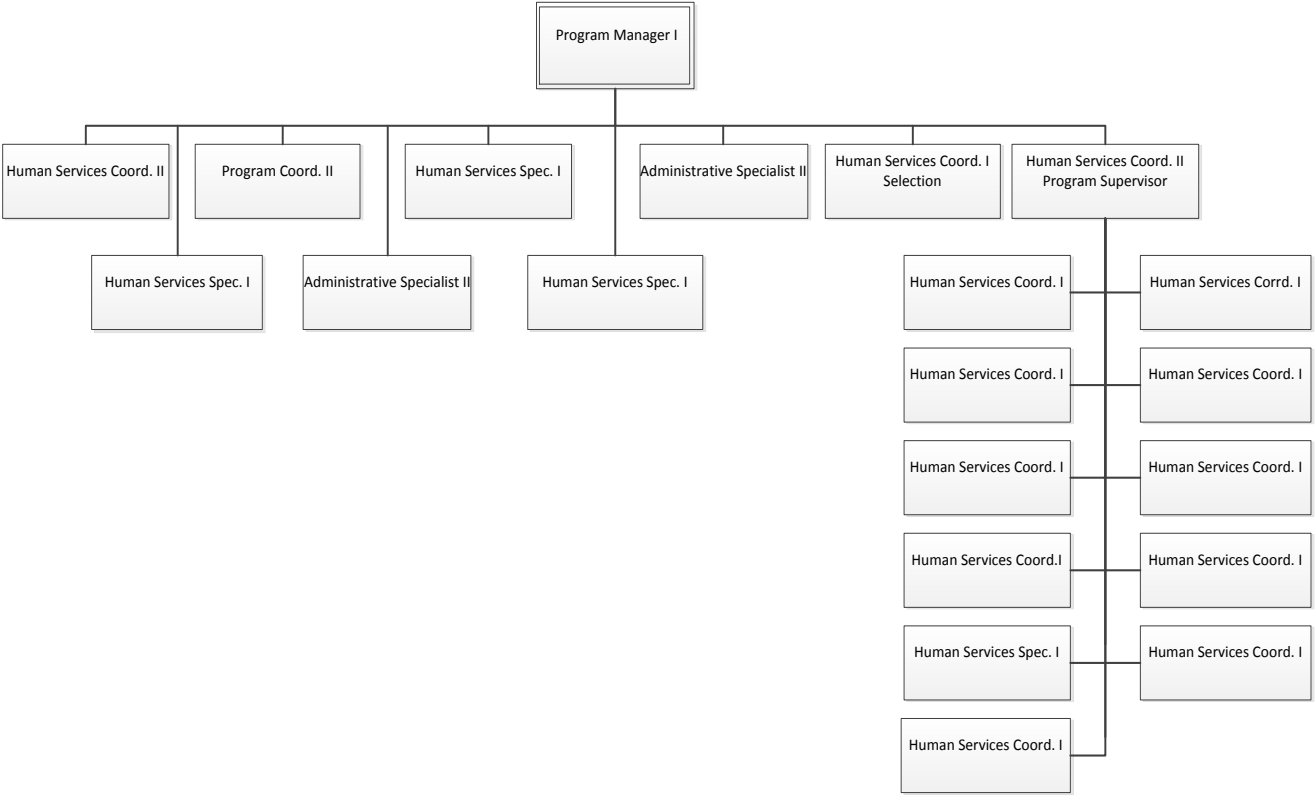


(Region 1—Midlands)



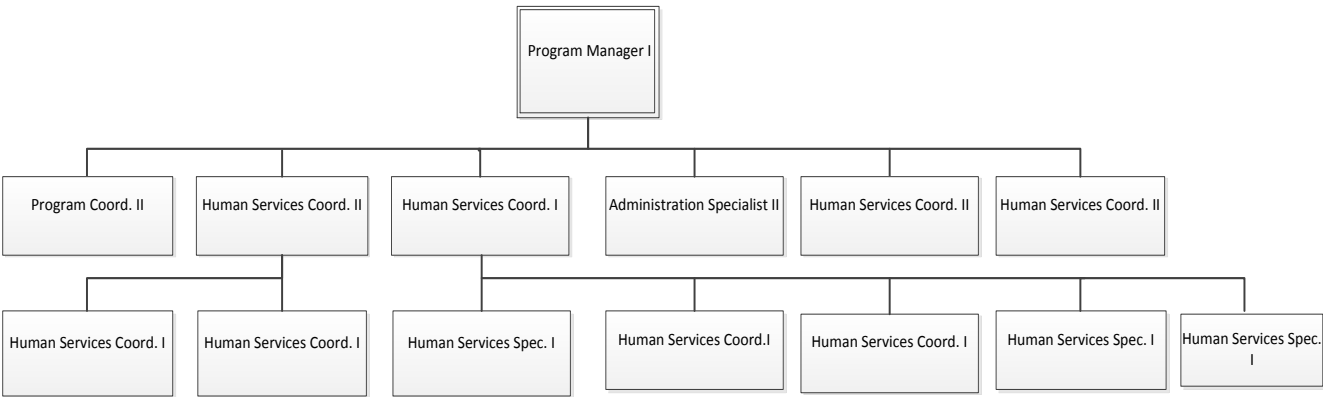
Continuum of Care

(Region 2—Piedmont)



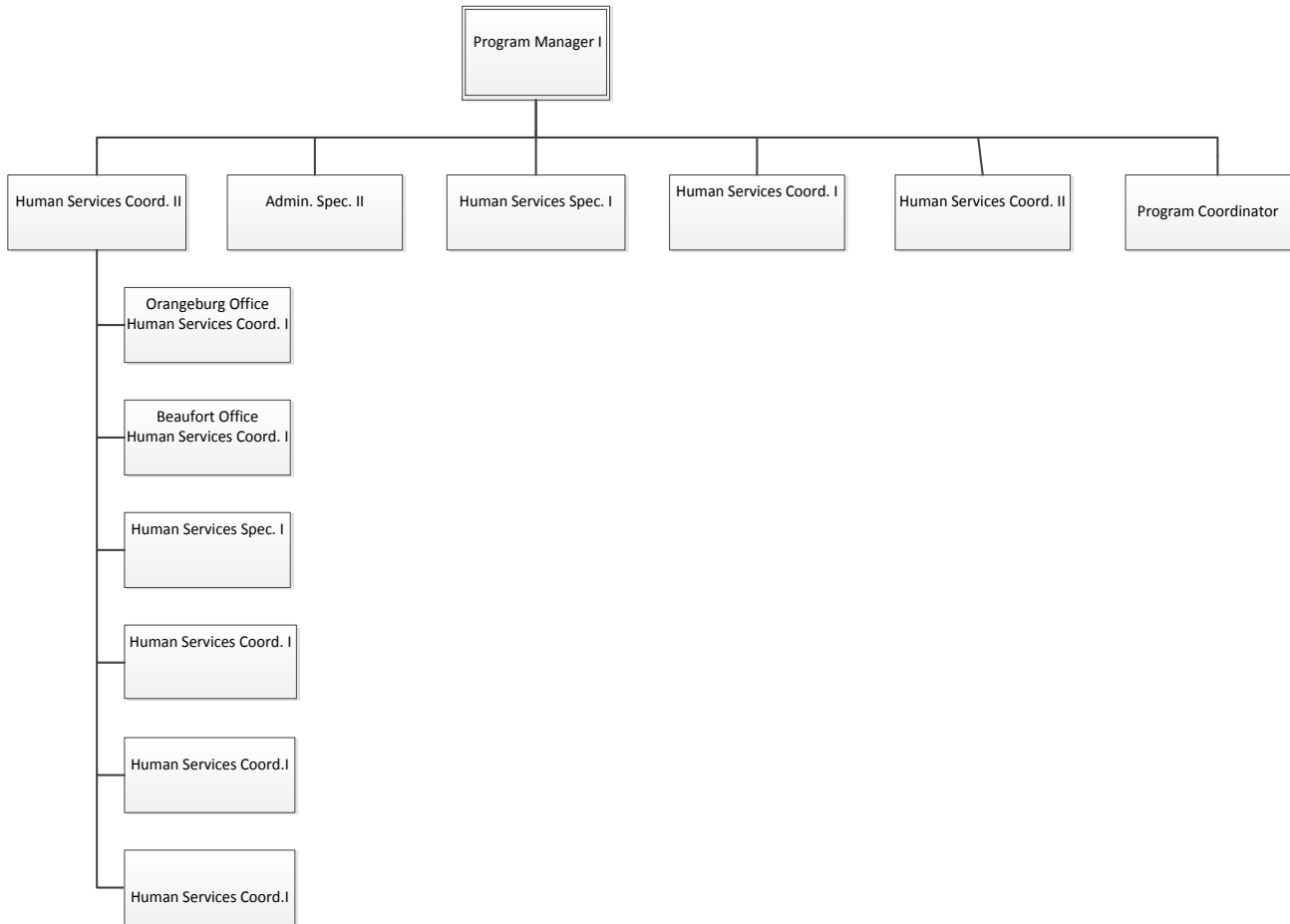
Continuum of Care

(Region 3—Pee Dee)



Continuum of Care

(Region 4—Coastal)



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 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12- 13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 2,198,902	\$ 909,275	\$ 2,061,110	\$ 868,205	\$ 3,288,700	\$ 1,318,700
Other Operating	\$ 671,174	\$ 372,845	\$ 601,971	\$ 27,435	\$ 894,890	\$ 144,890
Special Items						
Permanent Improvements						
Case Services	\$ 1,181,147	\$ 729,701	\$ 1,036,526	\$ 595,268	\$ 1,465,666	\$ 992,885
Distributions to Subdivisions	\$ 184,538	\$ 184,538	\$	\$		
Fringe Benefits	\$ 737,347	\$ 319,569	\$ 682,883	\$ 291,410	\$ 907,708*	\$ 694,708*
Non-recurring						
Total	\$ 4,973,108	\$ 2,515,928	\$ 4,382,490	\$ 1,782,318	\$ 6,556,964	\$ 3,151,223

Other Expenditures

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

*Estimated fringe based on 36% of current annual salaries

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
Continuum of Care (COC)	To provide case management services to children under the age of 21 (and their families) who have serious emotional challenges.	State	\$2,515,928	State	\$1,782,318	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	\$2,457,180	Other	\$2,600,171	
		Total	\$4,973,108	Total	\$4,382,489	
		% of budget:		% of budget:		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Leadership, Governance, and Social Responsibility

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

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

- There are several staff meetings where decisions about policy, updates, service provision, etc. are discussed. 1) OEPP Directors meet weekly with the Director of Administration to discuss issues and concerns within the various branches of the Governor's Office. 2) COC conducts State office staff meetings monthly to discuss, plan and execute changes within the Continuum. 3) Weekly, the Director and Senior Managers meet to ensure issues are addressed with a coherent plan. 4) Regular monthly meetings are held with the Regional Program Directors and the Director to communicate and address the agency's direction, system changes, and implementation of initiatives. 5) The Client Services Director, Regional Program Directors, and Clinical Consultants meet monthly to assess staff/customer needs and statewide policy development. 6) 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. 7) Supervisors meet to discuss and resolve implementation barriers
- Staff is informed of our agency's progress toward outcomes on a quarterly basis.
- An annual Organization Outcome Report Card is published and distributed to staff and parents.
- One statewide meeting has 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 focus on customers and other stakeholders?

- The Continuum of Care conducts various satisfaction surveys, publishes and distributes parent handbooks, coordinates the Family Advisory Board 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 products, 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, mandates and policy changes.
- 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
6. Quarterly reports of client status

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

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

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

The team approach to case management (implemented in 2009) provides greater opportunity for career advancement. Service Coordinators have the opportunity to be promoted into Service Coordinator supervisors. 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 on a case-by-case basis. Continuum staff who are working on an advanced degree has been allowed to flex work schedules to allow time to attend classes and participate in internships.

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

Established goals, strategies, action plans, evaluation measures and related outcomes are reviewed by senior leaders. This review allows the Continuum to continually be aware of the status of services and goal attainment.

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

Senior leaders encourage staff to explore new approaches to performing their jobs. 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. Additionally, the Continuum continues to partner with other child-serving agencies by participating in the South Carolina Joint Council on Children and Adolescents. (See I, 2, i)

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 Section III 1.7 and 1.8. The Continuum implemented a new business model during FY 12 with certain phases to be implemented in FY 13. The Regional Program Directors, Clinical Consultants and representative Service Coordinators and Intake Coordinators participated in monthly or ad hoc meetings to develop these recommended changes. During FY 12 an All-Staff meeting was held to provide orientation and training for these upcoming changes. All changes involved staff buy-in and participation.

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

- Staff members participate and volunteer in community activities. Examples include: pet therapy at nursing homes in Lancaster, SC, Church Activities, Lexington School District 1 volunteer, volunteering at the local soup kitchen (Manna House), providing meals for the less fortunate, clothing drive donations to the Transition House, visits to sick persons at local hospitals (McLeod Hospital and Carolina Hospital), yearly participation in Muscular Dystrophy Association Lock Up, and Habitat for Humanities.
- Staff members participate on various councils and boards– Examples include: Muscular Dystrophy Association, Greenville Safe Communities, Cherokee County Transition Cooperative, Greenville Transition Cooperative, Youth Empowerment Programs, Mental Wellness Partnership, Greenville Tech Advisory Board, Anderson District 1 Case Management Team, Beckman MHC Community Meeting, Greenville DJJ Community Council, COSY project in Beaufort, Advisory Board for Dorchester Children's Center, and member of the Cross Health Care Center Advisory Board.
- 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), Quarterly Meetings with all DMH Centers (WMH, SWMH, Tri-County and PDMH), Horry County Roundtable, Provider Oversight Council (COC, DDSN, DJJ, DMH, DSS), Community Residence Program Review (COC, DJJ), Project BEST and MASS Board with Dorchester County School District #2.

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's strategic planning process was established in 1998. The Continuum Office Director, Senior Staff 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 11-12 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. To ensure appropriate care coordination through assessment and service planning 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 Service planning meetings Survey independent living providers to assess client's progress GAIN-SS screening 	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 screening 	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 service planning • Interagency planning efforts • Utilize CALOCUS to assess need for out-of-home placements • GAIN-SS screening 	Tables: 7.1.3 7.1.4 7.6.2

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 11-12 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 • Service 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 • Service planning meetings 	Table: 7.1.4
4. Encourage Continuum 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 Advisory Board • 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 • Service 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 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 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 administering the Child and Adolescent Functioning Assessment Scale (CAFAS), which reflects the child's progress in eight key areas: school/work, home, community, relationships, substance use, thinking, moods/emotions, and self-harm.
- 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 Advisory Board 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 decision making participation
Child serving state agencies	<ul style="list-style-type: none">• To work together to help improve services available to children in South Carolina

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

- Regular contact with the children and their families
- Yearly family and teacher surveys
- Quarterly Family Advisory Board 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 handbook with a complete listing of information on the Continuum, resources and services. The regional offices are encouraged to address issues in their office; but when needed, the Continuum Director is available to assist. A Family Advisory Board was initiated this year with a representative family from each of the regions participating to provide input into the Continuum's planning. 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/satisfaction and dissatisfaction, and use this information to improve?

Annually, the Continuum 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. (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 service 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 groups.

The Continuum participates in statewide interagency meetings and local collaborative groups. The surveys conducted by the Continuum initiate dialog with stakeholders. The Continuum is an active participant in the Joint Council on Children and Adolescents with other state agencies, advocacy organizations, parents and community 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 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 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)-changing to 90 day evaluation starting August 1, 2012 Initial Diagnostic Assessment (during intake process) Follow-up Assessment (quarterly) Case management (weekly) Clinical Consultations (quarterly) Stakeholder/customer surveys (annually) Child and Adolescent Level of Care Utilization System-CALOCUS (at intake and when changes in placement are considered) Total Service Plan Review Meeting (quarterly) Progress in Placement Tool (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 Advisory Board (quarterly) Family/Parent feedback surveys (annually) Teacher feedback surveys (annually)
Compliance with Regulatory Standards	Internal audits (bi-annually)
Family Involvement	Family feedback surveys (annually) Family Advisory Board (Quarterly) 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:

- Measuring data on action statements and child/family outcome goals
- 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, 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?

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. Additionally, staff growth is developed through objectives defined in the employees’ annual employee performance management system.

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 OEPP 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.

Further, the Continuum will achieve effective communication and best practices across agencies with the integration of the new electronic health record system, SCHIEx (South Carolina Health Information Exchange). This system will allow employees to search client records more immediately and will enable the Continuum to more efficiently communicate with agencies regarding the client's previous, current, and future clinical information, decisions, and treatment. This system will also enable the Continuum's employees to send and receive direct messages with other agencies to allow the secure sharing of requested client documents without the time lapse as with calling or faxing.

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

See 5.11. OEPP Human Resource (HR) department advertises vacant job positions on the State HR web page. The Continuum has internal procedures for communicating 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 on a daily basis.

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 is regularly informed of service delivery hours and progress in clients' functioning and service 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?

The Continuum'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.
- Child and Adolescent Functioning Assessment Scale utilized to measure client progress.
- Computer/office applications and ongoing training as needed.
- Internal offerings with specialized staff, 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 through a formal training needs assessment tool.

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. The No Wrong Door Core Curriculum Trainings are always available to our staff on the Share Point site. Some of the No Wrong Door Core Trainings includes: "Childhood and Adolescent Development Core Competencies", "Co-occurring Disorders", "Families and Communities as Partners" and many more. Other trainings are being prepared for staff to attend such as the Trauma Initiative sponsored through SAMHSA. The Trauma Initiative will inform staff on the prevalence of trauma and recommend methods to reduce re-traumatization.

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 the Regional Program 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 on a case-by-case basis. 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, and 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, service planning to monitoring of 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, assessment, 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 factors such as cycle time into your process design and delivery?

The Continuum addresses this in several ways:

- An experienced trainer who has provided case management services for emotional disturbed children oversees the training of new staff. Training involves instruction as well as on the job training (See 5.4). Staff members with the direct knowledge of the issues also offer specialty training.
- An online CAFAS system has been implemented. This system increases 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 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, service 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 occurs 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 as reviewed in Section I, 2, e) and f). To address previous reductions in State appropriations, and anticipated Medicaid reductions anticipated in 1/1/13, changes were made in the Continuum's business model (See Section I, 2, f) and positions remain unfilled.

The Continuum continues to refine a process to better utilize resources in serving clients given anticipated Medicaid rate cuts. 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 the parent's home if placement is necessary.
- Monitoring the length of stay to ensure children do not remain in placements any longer than clinically necessary.
- Cost Share-Sharing client cost with other state agencies and school districts.

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

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

The following tables reflect the Continuum's performance levels and trends related to these goals/objectives. 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 08-09	FY 09-10	FY 10-11	FY 11-12
% of teachers* who reported the COC child will advance to the next grade level	87%	90%	85%	84%
% of teachers* who responded that students' behaviors improved as a result of the	75%	84%	87%	77%

COC's involvement				
% of teachers* who stated the COC has been critical in supporting the student's educational placement and progress	94%	91%	97%	87%

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 08-09	FY 09-10	FY 10-11	FY 11-12
% of clients showing a decrease in problematic behaviors in a school setting	41%	41%	34%	32%
% of clients showing a decrease in problematic behaviors in the home	32%	28%	29%	31%
% of clients showing a decrease in problematic behaviors in the community	37%	35%	32%	30%

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 08-09	FY 09-10	FY 10-11	FY 11-12
% 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)	89%	84%	79%	81%
% of families* report receiving services in the amount stated on their treatment plan	88%	92%	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	88%	91%	84%	88%

Table 7.1.4 Continuum of Care Level of Care Restrictiveness

Performance Measure	FY 08-09	FY 09-10	FY 10-11	FY 11-12
% of children with at least six months tenure and RBHS services in place who remain in their home at the end of each quarter	68%	81%	83%	80%
% of children in placement <u>not</u> requiring a higher level of care during the quarter	93%	85%	85%	87%

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 utilizes two groups to verify customer satisfaction—primarily families and teachers. The Continuum's goal is: "Families will express satisfaction with the services they receive. Comparable organization results are unknown. (See 7.1)

Table 7.2.1 Continuum of Care (COC) Customer Satisfaction Results – Family

Performance Measure All data is based on feedback provided through surveys	FY 08-09	FY 09-10	FY 10-11	FY 11-12
% of families giving COC an A or B rating	93%	94%	92%	98%
% of families who say they will refer other families to the COC	94%	99%	94%	90%
% of families more satisfied with services once their child became a COC client	92%	94%	87%	90%
% of families who stated COC listens to their concerns when planning services	96%	98%	97%	96%
% of families who stated COC allows them to help in making treatment decisions for their child	98%	98%	92%	98%

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 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 09-10	FY 10-11	FY 11-12
% 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 08-09	FY 09-10	FY 10-11	FY 11-12
Number South Carolina vendors used to provide service	54	46	44	55
Number of out-of state vendors used to provide services	1*	2*	2*	1*

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

2011-2012 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 Office of the Governor.

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 2011-2012

- Received, logged and routed 36,962 pieces of correspondence
- Prepared 1,285 letters and certificates in response to constituent and Senior Staff requests.
- Prepared 262 proclamations.

3. Key Strategic Goals for Present and Future Years

- a) Process Management
 - Accurately log and track all mail received by the Governor's Office
 - Assist Senior Staff in responding to legislative/policy mail
 - Maintain accurate mail log systems, including mail received as well as mail generated by the Governor
- b) 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. The increased availability of and access to electronic communications, as well as online newsgroups and government activism sites, make it much easier for constituents to contact the Governor. An unusually large amount of mail on any given day is problematic in all phases of the Office's operations.

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, Crime Victims' Ombudsman, and Correspondence
- Maintains an extensive filing system of all mail received and sent
- Maintain a log of correspondence generated by the Governor.

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)

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

7. Regulatory environment under which your organization operates

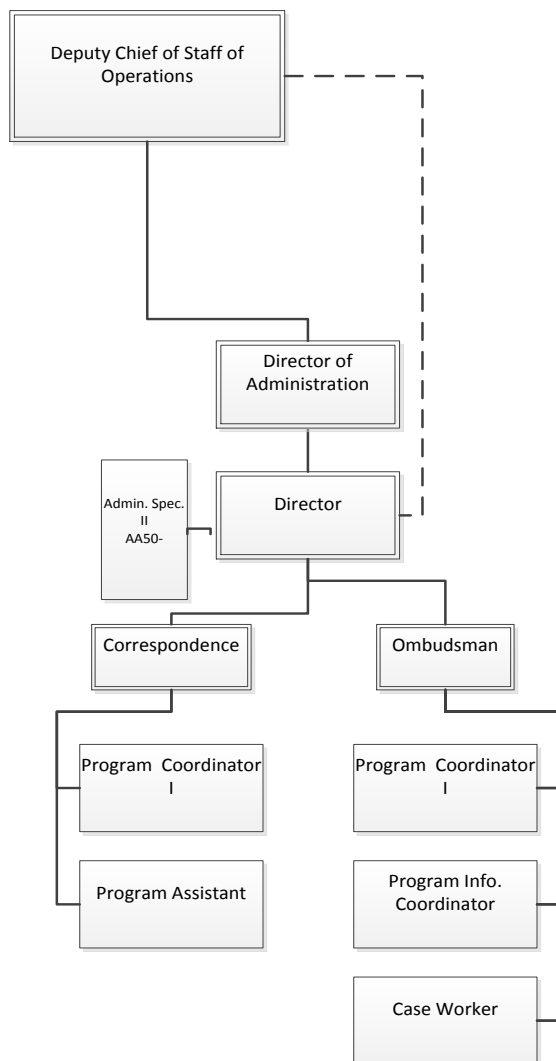
There is no regulatory environment for Correspondence.

8. Performance improvement systems

The mail log is monitored on a regular 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.

10. Organizational Structure

Ombudsman



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 126,844	\$ 126,844	\$	\$ 71,577	\$ 127,000	\$ 127,000
Other Operating	\$ 4,984	\$ 4,984	\$	\$ 5,259	\$ 5,000	\$ 5,000
Special Items	\$	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 39,601	\$ 39,601	\$	\$ 28,996	\$ 44,450	\$ 44,450
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$ 171,429	\$ 171,429	\$	\$ 105,832	\$ 176,450	\$ 176,450

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
Correspondence	Log, track and help respond to Governor's Office mail.	State	171,429	State	105,832	
		Federal		Federal		
		Other		Other		
		Total	171,429	Total	105,832	
		% of budget:	0%	% of budget:	0%	

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

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

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

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 correctness.

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 efficiency and 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 similar 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 individuals, businesses, organizations, and government agencies that 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, with 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. The small staff requires cross training in an effort to ensure that mail is processed efficiently.

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 need to be logged in or answered. Proofing mail and monitoring the log help 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

	2011-2012	2010-2011	2009-2010
7.1.1 Correspondence Received	36,962	30,572	44,370
7.1.2 Written Responses	1,285	1,021	2,233
7.1.3 Proclamations	262	212	355
7.1.4 Urgent, Last-Minute Requests		98	98
7.1.5 Legislative Responses			14,153

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

With the diversity of the Correspondence customer base, which includes constituents, legislators, local, state and federal agencies, businesses, community organizations, Governor's Office staff and others, satisfaction is measured mainly through the feedback that 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

2011-2012 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:

The mission of the Office of the Crime Victims' Ombudsman (CVO) is to ensure that victims of crime are served justly, equitably and fairly by the South Carolina Criminal Justice System and its' victim service organizations. Additionally, the Office of the Crime Victims' Ombudsman provides oversight of training, education and certification for victim service providers.

Vision:

The vision of the CVO is to provide crime victims and members of the criminal justice system a fair and equitable solution for every complaint including viable sanctions for violations of the SC Victims' Bill of Rights. It is also the vision of the CVO/OVSEC program to become a centralized, efficient and primary source of education and training oversight for victim service providers in South Carolina.

2. Major Achievements for FY 2011-2012

- Gained additional funding through Proviso 72.18 for \$71,000.00 to be used for annual administrative and operational support and the OVSEC program.
- Provided certification, eligibility, and oversight to training to Victim Service Providers (VSP), Notifiers and Summary Court support staff throughout the state about the Victim's Bill of Rights, victim services and statutory laws.
- Obtained temporary assistance through the use of the VET SUCCESS – NPWE (Non-paid work employment) program administered by the Department of Veterans' Affairs.
- Provided notifier/support staff training to individuals of the court system and detention centers.

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 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 develop a method of holding violators of the Victims' Bill of Rights accountable.
- To obtain increased, recurring funding that will be used to support the mission of the CVO and OVSEC programs.

4. Key Strategic Challenges

- The lack of recurring funding to CVO's budget since its inception in 1994 to provide quality service.
- The potential lack of cooperation from key partners as it relates to installing and implementing possible sanctions for violators of the Victims' Bill of Rights.

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

The accountability report is used as a guide on how to track, maintain and improve services.

Section II. Organization Profile

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

- To receive and respond to crime victims complaints by phone, mail, or in person.
- To provide appropriate oversight to victim service trainings and ensure proper certification to victim service providers.

2. Key customer groups and their key requirements/expectations

- Crime Victims—to resolve their complaints
- Victim Service Providers—eligibility, certification and training to assist crime victims

3. Key stakeholder groups

- Crime Victims
- Victim Service Providers

4. Key suppliers and partners

- Local and state criminal and juvenile justice agencies
- State agencies
- Non-profit organizations

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

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and review/attempt to resolve complaints from crime victims.	Crime Victims	Local/state criminal & juvenile justice agencies
Office of Victim Services, Education and Certification (OVSEC)	To provide appropriate oversight for victim service trainings and ensure proper certification to victim service providers.	Victim Service Providers	Local, and State agencies, and non-profit organizations

5. Operation locations

Statehouse Grounds, Wade Hampton Building, 1st Floor Governor's Office

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

1 Classified

1.28 Unclassified

1 Contract

1.25 Temporary

0 Temporary (Grant)

0 Temporary (time-limited)

7. Regulatory environment under which your organization operates

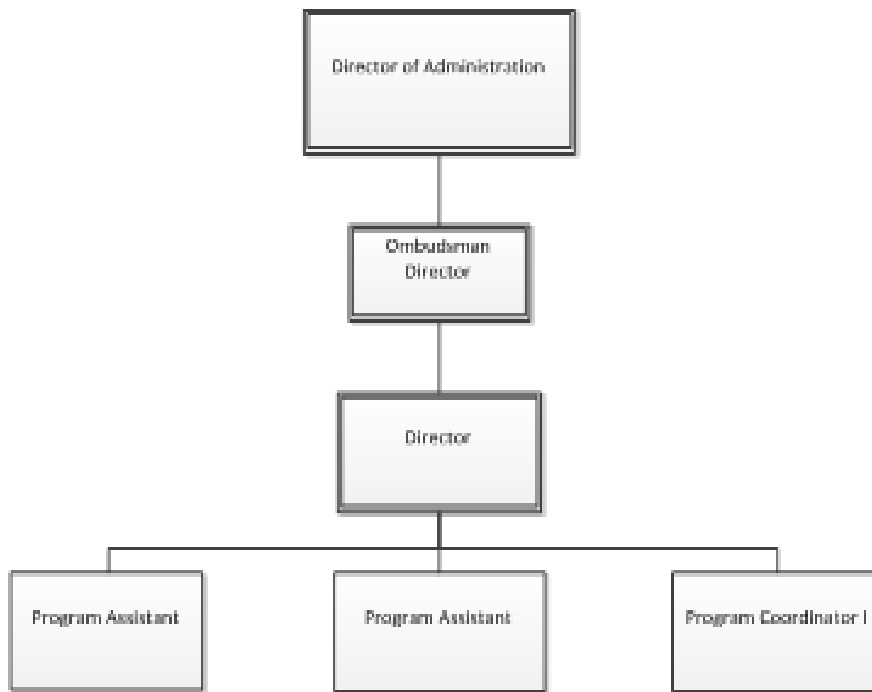
The CVO is statutorily mandated by legislation passed in 1994, specifically S.C. Code Sections 16-3-1610 thru 16-3-1670. The OVSEC program was signed into law June 4, 2008 and is found in S.C. Code Section 16-3-1620 (C) and (D).

8. Performance improvement systems

- By reviewing statistical data kept each fiscal year in FileMaker Pro to see what recurring violations exist and working to improve this data with the appropriate violators.
- By qualifying the eligibility and certification of VSPs and determine accreditation of training presentations that meet the VSCC guidelines.

9. Organizational chart

Crime Victims' Ombudsman



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart
Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 98,601	\$	\$ 100,845	\$	\$138,398	\$
Other Operating	\$ 13,833	\$	\$ 9,233	\$	\$ 8,640	\$
Special Items	\$	\$	\$	\$	\$	\$
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 28,327	\$	\$ 27,210	\$	\$ 28,188	\$
Non-recurring	\$	\$	\$	\$	\$	\$
Total	\$140,761	\$	\$137,288	\$	\$ 175,226	\$

Other Expenditures

Sources of Funds	FY 10-11 Actual Expenditures	FY 11-12 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 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
Crime Victims’ Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims.	State		State		See Table III.2 & Chart 2
		Federal		Federal		
		Other	\$140,761	Other	\$134,651	
		Total	\$140,761	Total	\$134,651	
		% of Budget 0%		% of budget: 98%		
Office of Victim Services Education and Certification (OVSEC)	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	\$	Other		
		Total	\$	Total	\$2,637	
		% of Budget 0%		% of budget: 2%		

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.**

Since the CVO is a small office (2 individuals are assigned to CVO and 1 full time individual is assigned to OVSEC), communication throughout the organization for short and long term organization direction and priorities, performance expectations, organizational values and ethical behavior is done individually or at staff meetings. As to the CVO's key stakeholders, the above is communicated to each crime victim and victim service provider on an individual basis as well as providing each with information about CVO and OVSEC in brochures, our website and trainings.

- 1.2 How do senior leaders establish and promote focus on customers and other stakeholders?**
- By returning calls and/or emails within a 24 hour period.
 - By conducting inquiries at the request of crime victims in a 4 – 6 month period.
 - By handling referrals and assists from crime victims within a 24 hour time frame.
 - By assisting VSPs with their problems or questions about education, certification and training 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?**

The CVO submits an annual report to the Governor, General Assembly, elements of the criminal and juvenile justice systems, and victim assistance programs summarizing its 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.

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

The CVO maintains legal and regulatory accountability by adhering to and performing the duties as outlined in the enabling legislation. The CVO attempts to maintain fiscal accountability by reviewing operational and administrative costs on a frequent basis and conferring with the finance department. Additionally, due to the source of the CVO's funding, the CVO is subject to auditing by the State Office of Victim Assistance to ensure that expenses are used appropriately.

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

Senior leaders on an on-going basis review case status and case updates. In the OVSEC program, senior leadership maintains constant communication with program personnel to identify trends, questions and/or issues that should be addressed by management.

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

Senior leaders listen, review and compare past reviews then ensure improvements are 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?

- Senior leadership encourages new and different approaches and provides opportunities to assist with managerial tasks. Senior leadership by experience advises and guides workforce in the victim advocacy.
- Senior leadership also reviews staff EPMS quarterly so they may participate in the planning and development process.

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

- Senior leadership has an open door policy and keeps an open mind to different approaches, suggestions to solving issues, and making improvements.
- Senior leadership assesses 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?

CVO leadership encourages staff to attend in-house trainings as well as training for specific crime victim services. When time permits, staff is directed to train with other victim service professionals as to what role their organization plays in the criminal justice system.

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 meet regularly with workforce to listen, engage, and implement, when possible, the ideas and suggestions offered by them. When new procedures are implemented based on the actions of the workforce they are commended by oral and written praise. Senior leaders also, on an individual basis, provide encouragement and praise for well completed tasks.

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

The CVO holds a unique place in the victim services community. It is neither an advocate for the crime victim nor a defender of the criminal justice system. However, the CVO strives to maintain viable relationships with individuals and agencies in the criminal justice community to encourage cooperation and open dialogue. The CVO participates in Victims' Rights Week and is a member of the Victim Services Coordinating Council. The CVO also is a participant in developing a collaborative effort to respond to the needs of victims of ID Theft in South Carolina. In each of these instances, the CVO meets with Statewide and local representatives from the criminal justice community. Finally, the CVO conducts training on a quarterly basis for victim service providers and on an as needed basis for notifier/support staff. The training provides the legislative basis from which these VSP's and notifiers operate as well as give them an opportunity to review and assess their own services.

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 CVO's strategic planning process (for OVSEC also) is to define its core objectives as it relates to the mission statement. Assess the CVO's current ability to obtain these objectives. Develop and implement a strategy for each of the objectives. Track the progress of each strategy and hopefully evaluate and readjust for maximum success. Key participants include senior leadership, organizational management and workforce.

- a) CVO's strengths lie in the legislation that created the office in 1994. This legislative mandate is the basis for the organization's core objectives. A current weakness is the lack of the organization's manpower to address the strategic planning process in a timely, efficient manner.
- b) At present the only financial risk to pursuing any strategic planning process is the lack of increased, recurring funding for CVO and OVSEC.

- c) Shifts in technology and customer preferences will be monitored and considered as the CVO employs its strategy. The most recent technological shift is the use of social media. It is not currently used by the CVO and there are no plans to implement it.
- d) As noted in (a) the organization's current workforce capability is at a diminished capacity. The speed at which any strategic planning process occurs is hampered by the lack of workforce.
- e) Should the strategic process be delayed, postponed or stopped, CVO and OVSEC will continue as long as the legislation remains in place.
- f) The CVO currently has the ability to execute any strategic plan, however other variables such as funding and support from key partners and stakeholders will have an influence on the implementation of strategic planning.

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

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 08-09 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
<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.</p> <p>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?

CVO continues to pursue its' strategic objectives despite the financial challenges. The objectives are adjusted so they can be accomplished within cost constraints. The CVO also maintains its' neutral, third party position in order to ensure that all crime victims are treated justly, equitably, and fairly by all criminal and juvenile justice agencies.

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

Frequent review of the current case management software is the basis for any action plan the CVO undertakes. CVO allocates resources should the need arise as a result of evaluating and readjusting the strategic plan.

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

CVO communicates the strategic objectives, action plans and performance measures verbally either in individual or staff meetings.

2.5 How do you measure progress on your action plans?

CVO measures progress on action plans by looking at accomplished tasks. For example, if the action plan is to increase the percentage of calls returned in 48 hours, CVO would track this statistic for the next 2 weeks. Compare the number to the initial number. If it is higher, it would mean progress is continuing.

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

CVO reviews and assesses the planning process on a periodic basis. Based on this information the CVO may implement new procedures/plans 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 agency's plan is not currently available via internet. However the mission statement, response to victims for referrals, assistance and addressing complaints are available on our website www.oepp.sc.gov/cvo. The agency's plans to assist VSPs are on the website link under OVSEC.

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

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

Customers in CVO and OVSEC are defined by legislation.

Customer/Stakeholder	Requirements
Crime Victims	Must be a crime victim who needs assistance with the criminal justice system in South Carolina.
VSPs	Employed by local government, state agency. Job Duties include providing victim assistance as mandated by law. May also be employed by private non-profit organizations whose mission is in victim advocacy or assistance.
Notifiers/Support Staff	Usually employed by the court system or detention center. Job Duties, as it relates to victim assistance, are to notify crime victims.

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

The CVO listens to feedback from customers and stakeholders and then evaluating what, if any of the feedback needs to be addressed. The CVO also provides an online survey for feedback purposes.

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 the key customer access mechanism. CVO also receives letters by mail and email. These methods enable the customer to speak directly with CVO staff and in most cases obtain a remedy to their complaint or certification in a timely and efficient manner. These mechanisms also apply to the OVSEC program.

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

CVO listens to satisfied and dissatisfied customers' opinions and thoughts and then documents for reviewing purposes. These concerns are then incorporated into trainings and presentations, as a learning tool for those who assist victims within the criminal justice system.

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

CVO makes 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?

The key to building and maintaining positive relationships with customers and stakeholders is communication. The CVO contacts customers on a periodic basis until the conclusion of his/her case. The CVO actively listens to customer concerns and provides answers, solutions and/or resolutions when necessary.

The CVO maintains the same type of communication with stakeholders.

Section III – Elements of Malcolm Baldrige

Category 4 Measurement, Analysis and Knowledge Management

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

Processes for measuring financial performance are a function that rests with the Finance Department.

The current software system used to measure operational performance is based on data in the Filemaker system. This data is integral to successful action plans and strategic objectives.

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 CVO reviews data/information on a monthly basis. This data is based on the legislative mandates for the CVO. The information is then used to substantiate decision making within the organization.

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

Key measures for the CVO are the number of referrals, assists and complaint resolutions. Key measures for OVSEC are the number of VSP's that register; the number of VSP's that complete annual certification and the number of approved trainings for accreditation.

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 – goal is 90

(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?

The data selected and used to make decisions is based on CVO and OVSEC's legislative mandate.

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

CVO and OVSEC data is stored in Filemaker Pro software system. The software system is located within the OEPP database which is protected according to Information Technology standards. Data integrity and reliability is increased when workforce immediately enters the information upon receipt.

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

If performance reviews are poor, CVO then improvement becomes top priority. Conversely if performance reviews are good or remain the same, improvement is still a goal but not top priority.

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?

CVO reviews case management statistics, cases, and the processes of how to handle difficult complaints. The CVO then relates this information to workforce in monthly meetings and/or individual meetings. Data for the fiscal year is evaluated against previous years to determine and implement best practices for the organization.

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?

Since the CVO's workforce is small, it is easier for management to address an employee's full potential on an individual basis. Management makes an initial assessment, if applicable, sets a baseline for work performance in an EPMS and encourages the employee to exceed those expectations. Management promotes cooperation, initiative, empowerment, teamwork and innovation on a daily and individual basis by keeping communication open between management and employee.

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

By maintaining and receiving contact with HR for updates and advice on human resource issues. Such as being updated on new and current positions by viewing the vacancy listing and inquiring when an interested party, based on the requirements listed mentioned is available.

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

Management is only able to recruit and hire if funds are available. Should funding become available management would post a vacancy through Human Resources and interview appropriate candidates. Management would try to maintain employee retention through providing a good work climate and possibly offer merit raises.

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

Assessing workforce capabilities is on an individual basis. Management makes an initial review of an employee's competency, capability and skill set. Using this information, management makes recommendations for additional training, specific to each 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?

In an office of the CVO's size, feedback from workforce is on a daily basis. CVO does conduct occasional staff meetings but communication of feedback to management and from the workforce is better done on an individual basis.

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?

CVO identifies developmental training needs for employees based on previous, current experiences and the changes in current legislation and victim services. CVO also bases training needs from community reports about emerging issues in the victim assistance field.

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

CVO encourages employees to use their new skills and knowledge to help victims of crime and assist stakeholders. CVO believes that this knowledge will help others in the field to be more productive.

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

Any training, in-house or external, is a benefit for the employee and the employer. Training in any subject allows the employee to gain more knowledge that may assist in the implementation of action plans.

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

CVO reviews feedback on closed cases from customers to determine workforce effectiveness. Should workforce be afforded the opportunity for leader training, effectiveness would be evaluated based on the execution of additional leadership responsibilities.

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

CVO listens to employees' ideas/suggestions and implementing them whenever possible. CVO also encourages training that will assist the employee in attaining skills for upper management.

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?

CVO has one-on-one meetings with employees, which gives every employee a chance to verbalize thoughts and feelings to the Director directly. These meetings are documented and filed. 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?

CVO leadership keeps 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?

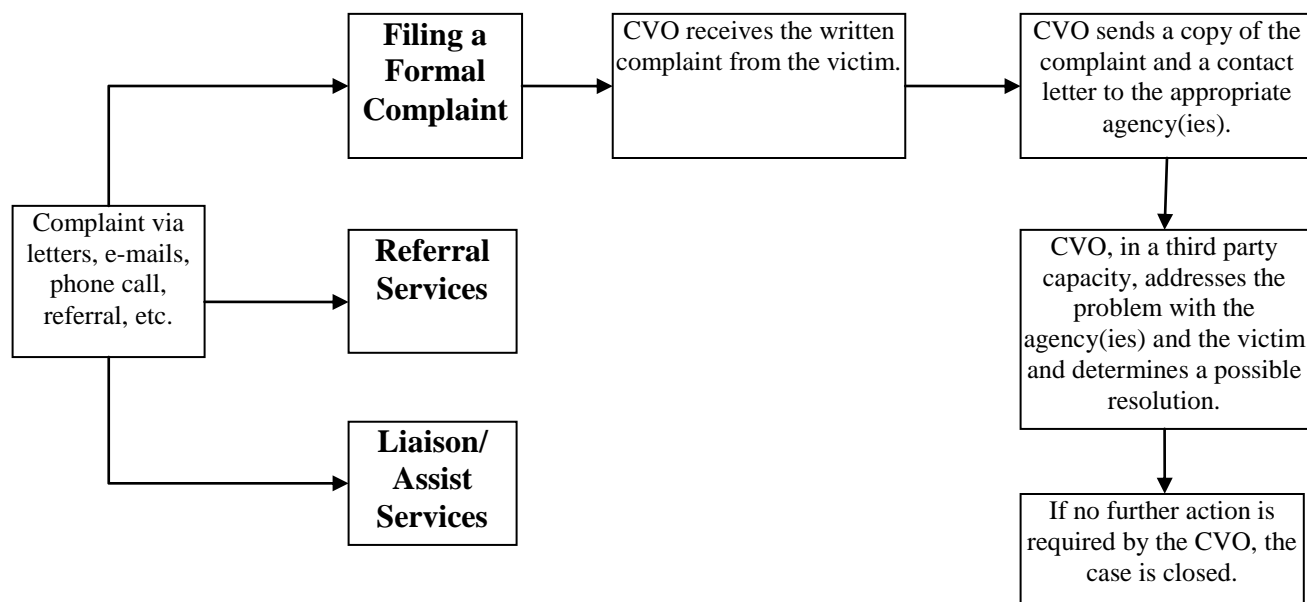
- The organization's core competencies are determined by individual staff performance and customer feedback and evaluations. These competencies may be a certain skill set and/or behavior required accomplishing the CVO's mission. Core competencies for CVO and OVSEC are integrity, judgment, reliability, good customer service and teamwork.
- Integrity – CVO and OVSEC conduct their work with integrity in order to provide credibility to its key customers

- Judgment – CVO must have good judgment when making decisions regarding complaints, the next steps in an inquiry. OVSEC must use good judgment in assessing and accrediting courses for credit
- Reliability – CVO and OVSEC are expected to arrive to work in a timely manner. Work diligently, efficiently and effectively on a daily basis.
- Customer Service – CVO and OVSEC are required to address the issues and concerns of key customers by listening, responding and offering solutions and/or answers where necessary.
- Teamwork – The organization is so small that the ability to work well with each other is very important to a successful 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 determined by legislation. The CVO is statutorily mandated to receive complaints from victims of crime. These complaints can be handled informally in a ‘referral’ or ‘assist’ capacity or formally as an inquiry.

Chart 2- How Complaints are handled in the CVO - General Overview



OVSEC is mandated to provide certification for qualified victim service providers (VSP's) and notifier/support staff. The following is the process for VSP's.

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?

While organizational knowledge remains a constant, new technology to enhance processes is always emerging. As time allots the CVO, within its cost constraints, researches possible software that may improve the efficiency and effectiveness of databases for CVO and OVSEC.

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

Whether it is receiving and responding to complaints from crime victims or questions and concerns from victim service professionals, these processes make performance more timely, efficient and effective. The day-to-day update of these processes is integral to CVO and OVSEC's performance.

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

The CVO is always open to listening to customers' comments about the CVO's performance as well as comments received from outside entities. The CVO then evaluates these comments, confers with staff, determines if any changes are necessary and if so, implements them.

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. In addition, evaluations from CVO trainings are reviewed as well to determine if any changes, improvements should be made to training sessions.

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

The CVO reviews monthly, financial reports as well as prior and projected fiscal year reports in order to ensure the budget is balanced and all financial obligations are met. Financial resources are as mandated by legislation and as provided for by proviso. The CVO has researched and continues to research sources for increased, recurring funding.

Section III – Elements of Malcolm Baldrige

Category 7: Results

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

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

FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
98%	98%	97%	96%	91%

Table 7.1:2

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

FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
93%	98%	98%	89%	41%

As noted in the above tables, the trend for responding to phone calls and closing out inquiries in the CVO has fallen. These key measures are more indicative of a lack of quantitative performance as opposed to a qualitative performance. The decrease in timely responses to CVO mission objectives is due to the personnel transition during the last fiscal year.

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. CVO requests a response from the complainant attempts to resolve the issues and prepares 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 forfeiture, and impose a fine up to \$1000 for intentional violations.

Since the OVSEC program collects data on an annual year basis, the following numbers are from 2009, 2010 and 2011.

	<u>2009</u>	<u>2010</u>	<u>2011</u>
Number of active VSP's	1074	1015	976
Number of active Notifiers/Support Staff		778	920
Number of accredited trainings	174	222	250

As a result of S.C. Code Section 16-3-1400 (1)(b), in 2010, judges were no longer considered victim service providers. However, notifiers/support staff located in the court system and detention centers were given a 2-hour training track instead of a 12-hour VSP requirement.

There are no comparable programs to OVSEC in the nation. It is unique in the victim services field.

7.2 What are your performance levels and trends for your key measures on customer satisfaction and dissatisfaction (a customer is defined as an actual or potential user of your organization's product or services)? How do your results compare to those of comparable organizations?

CVO uses an online customer satisfaction survey, and an on-line complaint form to gather information of customer satisfaction. CVO also listens to customers' feedback after an inquiry of their complaint. CVO also uses evaluations from core trainings to determine areas of improvement.

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

CVO has access to expenditures for prior fiscal years as well as month to month data for the current year to determine fiscal soundness. Spending trends are monitored using these financial reports and analyses of past fiscal spending. Cost containment and finding cost efficiencies is priority in CVO since funding is not consistent and at low levels.

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

Since the CVO is a small office, performance levels are measured on an individual, daily basis for workforce engagement, satisfaction, retention and climate. As a small workforce, the climate is key to workforce satisfaction and retention. Leadership maintains a positive, encouraging climate for the current workforce and provides an "open door" policy for two-way communication as it relates to workforce development.

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

Again, with such a small workforce, organization effectiveness/operational efficiency must be maintained at high level. There is no depth to CVO, i.e. personnel backup, so processes are in place to ensure work output is timely and efficient. This includes responses to emergency drills and exercises. Additionally, the size of the office lends itself to immediate input from the workforce as to improvements or critiques.

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

Legal compliance is according to the statutory mandates of the CVO. Performance levels must meet these requirements. The members of the criminal justice system and victim advocacy community continue to provide strong support for the existence of the CVO/OVSEC program.

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.

FY 11-12....CVO fielded 1,234 calls, OVSEC fielded 833 calls for a TOTAL of 2,067 calls
FY 10-11....1960
*FY 09-10....CVO fielded 1,274 calls, OVSEC fielded 1441 calls for a TOTAL of 2,715 calls
FY08-091250
FY 07-08.....1457

*This is the first year of the OVSEC program.

CVO assisted and referred the following incoming phone calls.

FY 11-12....522
FY 10-11....504
FY 09-10....526
FY 08-09....578
FY 07-08....625

OVSEC gathers data on an annual basis rather than fiscal year. In 2011, 217 victim service providers registered with the office, bringing the total number of active VSP's to 1,074. 61 notifiers/support staff registered with OVSEC, bringing the total number of active notifiers/support staff to 920.

In addition, there were 250 approved trainings held in 2011 applications received for VSPs to become certified. Victim service advocates, Judges, court administration, detention center staff, and volunteers for victim rights organizations make up the largest population of certified VSPs. Changes in legislation and recommendations from the Victim Services Coordinating Council (which created OVSEC) will dictate the impact OVSEC will have on the VSPs service delivery and the victim service community.

2011-2012 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 2011-2012

- a) Heads Up! SC is a program developed through the Brain Injury Association of South Carolina. Through this project, athletic professionals including athletic directors, athletic trainers, coaches, parents, and athletes are educated about concussion identification and management within their athletic programs in order to reduce sports related brain injuries. More than 350 individuals have been served through this project.
- b) Hope Unleashed is a program that began to use dogs as an innovative tool to help children, youth, and young adults with autism develop appropriate communications, social, and behavioral skills, leading ultimately to more independent, productive, and happy lives. The program has incorporated dogs into therapy sessions and classes to develop a protocol for replication of this process. The program also includes providing individualized and inclusion-based dog training classes and the use of webinar/video workshops for families dealing with autism to give strategies for using their own dogs to build skills and to strengthen relationships. Approximately 270 individuals have been served through this program.
- c) The Laurens County Disabilities and Special Needs Board continues to serve individuals through Collaborative Employment Services Mentoring. Through this program, students with severe developmental disabilities in the self-contained program at Laurens High School receive training and employment services. 20 students between the ages of 14 and 22 have been served by this program.

- 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 15th 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. Several graduates are currently being recommended for DD Council membership.
- 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 effort this year was the creation of a Self-Advocacy Team and participation in a summit to enhance self-advocacy in South Carolina. The team brought the network partners together with self-advocates and advisors from around the state to create a plan for enhancement, make recommendations for national initiatives and policy development. We also continue to work on the Spot Abuse campaign and voting as well as other initiatives.

3. Key Strategic Goals for Present and Future Years

a) Health

- i. Promote the health and well-being of people with Intellectual Disabilities/Developmental Disabilities in South Carolina

b) Employment

- i. Obtain long-term, competitive employment for individuals with Intellectual Disabilities/Developmental Disabilities in South Carolina
- ii. Those with Intellectual Disabilities/Developmental Disabilities are given equal employment educational opportunities in public/private schools as students without Intellectual Disabilities/Developmental Disabilities

c) Community Supports

- i. Individuals will have access to supports and services they need to exercise choice
- ii. Remove barriers to Olmstead implementation in South Carolina

d) Quality Assurance

- i. Self-Advocates determine how to live their lives and how to be supported

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.
- 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 health.

- 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 – Organizational 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 stakeholder Groups

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 Intellectual and Developmental Disabilities (AIDD) is the federal administering agency for the DD Act programs and thus provides the direct oversight and monitoring of the Council. AIDD 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 AIDD. These reports require approval by AIDD. Program Performance Reports are required to be submitted annually. Reporting on activity-specific outcomes is required through this reporting mechanism.

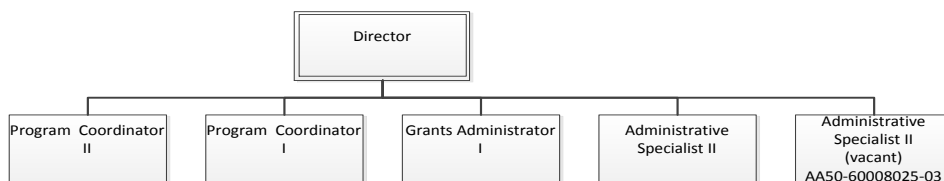
Council sub-grantees are required to submit quarterly progress reports. This is in addition to onsite visits. Each sub-grantee is required to develop a customer satisfaction report that meets required elements. These reports are reviewed by staff to see if the program being offered is meaningful to participants. 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 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$221,827	\$24,301	\$213,920	\$33,891	\$324,318	\$34,658
Other Operating	\$69,944	\$11,417	\$47,491	\$5,387	\$98,496	\$6,154
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	\$790,106	\$0	\$763,028	\$0	\$1,650,000	\$0
Fringe Benefits	\$68,119	\$7,021	\$78,524	\$11,038	\$13,688	\$9,188
Non-recurring	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$1,149,996	\$42,739	\$1,102,963	\$50,316	\$2,086,502	\$50,000

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 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
DD Council	To administer and monitor federal grant funding to sub-grantees, providing services for persons with DD.	State	\$42,739	State	\$50,316	
		Federal	\$1,107,257	Federal	\$1,102,963	
		Other	0	Other	0	
		Total	\$1,149,996	Total	\$1,153,279	
		% of budget:		% of budget:		

Section III – Elements of Malcolm Baldrige Criteria

Category 1: Senior Leadership, Governance, and Social Responsibility

1.1 How do senior leaders set, deploy and ensure two-way communication 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 Stage of EPMS for employees and through the development of our State Plan that guides Council direction for grant funding. Ethical behavior is in accordance with 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 Intellectual and 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 interacts with the Administration on Intellectual and 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 brainstorming is encouraged. In addition, during the review process, the director works with staff to identify organizational expectations.

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

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

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

Monthly staff meetings are held to discuss staff projects. Group discussions are encouraged. Staff ideas and input are freely encouraged. This is also done through the EPMS process.

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

Council's senior leader serves on various committees which include:

- Disability Inclusion Council
- South Carolina Act Early Team
- Lifespan Respite State Advisory Council

- SC Brain Injury Leadership Council
- SC Assistive Technology Advisory Council
- SC Transition Education Service Team
- Department of Disabilities and Special Needs 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 Intellectual and 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 11-12 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Promote the health and well-being of people with Intellectual Disabilities/Developmental Disabilities (ID/DD) in South Carolina	<p>1. Assist collaborative efforts in the state to improve the health status of people with ID/DD using evidence-based approaches to wellness promotion and prevention of secondary conditions</p> <p>2. Establish baseline and explore opportunities to improve access to primary care and periodic preventive services</p> <p>3. Develop strategies so youth have successful transitions from pediatric to adult health care.</p> <p>4. Collect and disseminate information on accessible recreational, prevention, wellness and exercise programs.</p> <p>5. Collaborate with universities and technical schools/programs to incorporate courses on health and disability into their curricula.</p>	<p>Develop approach to work with partners to support and influence policies to improve health, wellness and prevention programs and activities</p> <p>Collect data, develop a surveillance system, monitor access.</p> <p>Collect information, establish baseline and monitor progress. Work with partners.</p> <p>Expand the Council's recreation guide.</p> <p>Plan and implement a workshop to engage universities and colleges to develop programs.</p>	Outlined in state plan

Obtain long-term, competitive employment for individuals with Intellectual Disabilities/Developmental Disabilities in South Carolina	<ol style="list-style-type: none"> 1. Obtain baseline state and national data. 2. Review state practices and policies on employment. 3. Explore what other states are doing that have successful programs. 4. Hold statewide self-advocacy conference focusing on employment. 5. Increase awareness of public of the value of hiring people with ID/DD. 6. Provide meaningful input into existing state practices/policies that will enhance successful employment outcomes. 7. Obtain state and national data of employment rates. 8. Launch a statewide campaign to improve employment rates by 15%. 	<p>Identify, collect and review reports.</p> <p>Review and make recommendations.</p> <p>Collect and review reports of high-performing states.</p> <p>ID planning group, collect information, identify a plan. Conference will be the kick-off.</p> <p>ID materials, use media to inform.</p> <p>Review and use information to determine strategies.</p> <p>Develop strategy and implement.</p>	Outlined in state plan
Those with Intellectual Disabilities/Developmental Disabilities are given equal employment educational opportunities in public/private schools as students without Intellectual Disabilities/Developmental Disabilities	<ol style="list-style-type: none"> 1. Educate the Committee on SCEEDA. 2. Meet with State Superintendent of Education to discuss collaborative efforts for employment for students. 	<p>Members will research the act and summarize for the group. Determine approach.</p> <p>Hold meeting, explore alternative diploma option.</p>	Outlined in state plan

	<p>3. Develop RFP for school districts to increase by 10%</p> <p>4. Evaluate success of proposal and adjust.</p>	<p>Collect information to develop RFP. Release RFP.</p> <p>Evaluate and disseminate information.</p>	
Individuals will have access to supports and services they need to exercise choice	<p>1. Support individuals to make informed choices.</p> <p>2. Support individuals in becoming active participants in their communities.</p> <p>3. Support development of improved practices broadly across the state.</p>	<p>Strategically solicit and fund creative initiatives that promote choice and inclusion.</p> <p>Fund model demonstration.</p> <p>Provide support for emerging issues.</p>	Outlined in state plan
Remove barriers to Olmstead implementation in South Carolina	<p>1. Support efforts to evaluate current compliance.</p>	<p>Request plans, develop strategy, support public awareness.</p>	Outlined in state plan
Self-Advocates determine how to live their lives and how to be supported	<p>1. Establish and support a statewide leadership network of self-advocates.</p> <p>2. Secure and implement competency skills training for self-advocates.</p> <p>3. Develop and begin implementation of a regional training plan.</p>	<p>Assign staff, facilitate network to develop goals, measure.</p> <p>Enhance Youth Leadership Forum. Select tool, identify TA and secure.</p> <p>Establish process for training.</p>	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 staff 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.scdde.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 the Administration on Intellectual and Developmental Disabilities 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 State Plan working committees and 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 Intellectual and 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 key requirements are?

Who the customers are is determined by public law and are listed below.

Customer/Stakeholder	Requirements
People with Intellectual Disabilities/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.
Parents, guardians and family members of persons with Intellectual Disabilities/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 performance, 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 on Intellectual and Developmental Disabilities (AIDD). 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 AIDD.

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) Health

- i. Promote the health and well-being of people with Intellectual Disabilities/Developmental Disabilities in South Carolina

b) Employment

- i. Obtain long-term, competitive employment for individuals with Intellectual Disabilities/Developmental Disabilities in South Carolina.
- ii. Those with Intellectual Disabilities/Developmental Disabilities are given equal employment educational opportunities in public/private schools as students without Intellectual Disabilities/Developmental Disabilities.

c) Community Supports

- i. Individuals will have access to supports and services they need to exercise choice.
- ii. Remove barriers to Olmstead implementation in South Carolina.

d) Quality Assurance

- i. Self-Advocates determine how to live their lives and how to be supported.

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 State Plan Working Committees and 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, as appropriate?

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 leader works 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. If barriers are encountered, Council's senior leader works within guidelines to address them.

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. Council staff may attend national events pertinent to 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. Additional training has been offered through Human Resources as well.

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 development 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 on Intellectual and Developmental Disabilities (AIDD) provides guidelines for Council's action. Areas of focus must be within these guidelines.

6.8 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 Intellectual and 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?

The senior leader values the insight and knowledge of longer term employees but constantly studies 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 service performance that are important to your customers? How do your results compare to those of comparable organizations?

Most of what Council accomplishes is done through the grant process. Council members make sure the new grants will meet the Council needs based on the 5-Year State Plan. Priority is given to those grants that meet the goals and objectives identified in the State Plan. There are no comparable organizations in this state. However, each state has a Developmental Disabilities Council and each council is a member of the National Association of Councils 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
Individual 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. There was no change in our satisfaction percentages from what was reported last year.

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.

2011-2012 Accountability Report
Governor's Office of Executive Policy and Programs
Children's Foster Care Review Board

Section I - Executive Summary

1. Stated Purpose, Mission, Vision, and Values

A. Mission Statement

The mission of the 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 forever families.
- (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, independent review.

2. Major Achievements for FY 2011-2012

- A. Local foster care review board volunteers donated 15,230 hours in service to children and families involved with the foster care system.
- B. Local foster care review boards held 432 individual local review meetings and conducted 7,149 reviews for 4,427 children.
- C. Local foster care review boards established relationships and communicated with their local partners. Twenty-nine 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. Twelve local review boards facilitated the presentation of the 2010 – 2011 South Carolina Children's Foster Care Review Board Annual Report to their county legislative delegations. Twenty-six 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-six 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. Two hundred and forty-four children in foster care and reviewed by local review boards in 2011, were represented by Review Board legal staff at 108 court hearings across South Carolina. Review Board program staff also provided in-depth, post-review, supplemental advocacy on behalf of 1,225 children.
- G. The South Carolina Heart Gallery, a partnership between 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 2011, 23 photographers donated their time and talents to photograph 107 children at photo shoots. There were 296 public venues featuring children in exhibits. There were 103,440 unique visitors to the South Carolina Heart Gallery website that generated 1,466 inquiries from interested families.

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

- A. Fully utilize data and information gathered from independent reviews of the foster care system to ensure children in foster care are safe and thriving with life-long families.
- B. Achieve the “Target Advocacy Goal” for calendar year 2012 of increasing finalized adoptions for legally free youth between the ages of 15 and 17.

4. **Key Strategic Challenges**

- A. The Child Welfare Division of the Department of Social Services has increased its focus on data to manage performance – which has in turn, increased the demand for the Division of Foster Care Review’s data. In addition to that, more sophisticated data analysis is being done internally and externally. While the effective use of data and analysis is a high-leverage that will improve things for children and families, it is challenging for the Division of Foster Care Review because the Data and Research Manager also serves as the Business Manager in order to save taxpayer money. Unfortunately, not having at least one staff member fully dedicated to data management and analysis means that the work takes longer than necessary, which ultimately increases the length of time children spend in foster care.
- B. Establishing a Target Advocacy Goal for the Division and review board volunteers has brought focus to the Division; however, it also is challenging because it requires a shift in the mindset of Division staff and volunteers. Having buy-in from staff and volunteers is critical to accomplishing the Target Advocacy Goal and it is not clear at this time whether all staff buy-into the goal. To add to that, before the 2012 Target Advocacy Goal is met, senior staff have to begin planning and setting a Target Advocacy Goal for 2013. This is a challenge that the Division leaders embrace and will ultimately makes the senior staff stronger leaders.

5. **Improvements Achieved Through the Accountability Report**

The Accountability Report provides an opportunity to do short-term and long-term planning that might otherwise not be done because of the day-to-day running of a Division. It also serves a reminder to take a closer look at routine activities to see if they link to the overall mission of the Division. Finally, it helps guide the budget process which is crucial to keeping

the Division operational which is necessary since the Division of Foster Care Review serves as the federally mandated case review system for South Carolina.

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 independent foster care review board. There are 42 local foster care review boards currently serving 3,332 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, two Heart Gallery Recruitment Specialists, one Heart Gallery Program Assistant, and two Administrative Assistants.

2. Key customers groups and their key requirements/expectations

Children and families involved in the foster care system in South Carolina are the primary customers of the Children's Foster Care Review Board program. Volunteers appointed to serve on local foster care review boards and members of the State Board of Directors are primary customers of the staff of the Children's Foster Care Review Board.

3. Key stakeholder Groups

Stakeholders are public and non-profit child welfare agencies that partner with the local foster care review boards and local communities across the state. Local stakeholders most effectively address the issues surrounding child abuse and neglect at the local level.

4. Key suppliers and partners

Local foster care review board members and Review Board staff partner with other public and non-profit child welfare agencies to serve children and families in the foster care system. Partners include the SC Department of Social Services, the SC Foster Parent Association, the Volunteer Guardian ad Litem Program, Richland County CASA, the SC Department of Mental

Health, the SC Department of Disabilities and Special Needs, the SC Department of Alcohol and Other Drug Abuse Services, the SC Association of Children's Homes and Family Services, the SC Department of Health and Human Services, the SC Department of Juvenile Justice, and the Children's Trust of South Carolina.

Table II.4.1-1 Children's Foster Care Review Board Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/Stakeholders	Key Partners
Children's Foster Care Review Board (FCRB)	<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 volunteers.</p> <p>There are 42 local foster care review boards currently serving 3332 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 • The Children's Trust 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)

18 Classified 1 Unclassified _____ Contract

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

7. The regulatory environment under which your organization operates

- A. The South Carolina Children's Foster Care Review Board was created in 1974 by the General Assembly to monitor the progress in achieving permanent placements for children in foster care. Each of South Carolina's 16 judicial circuits have 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.

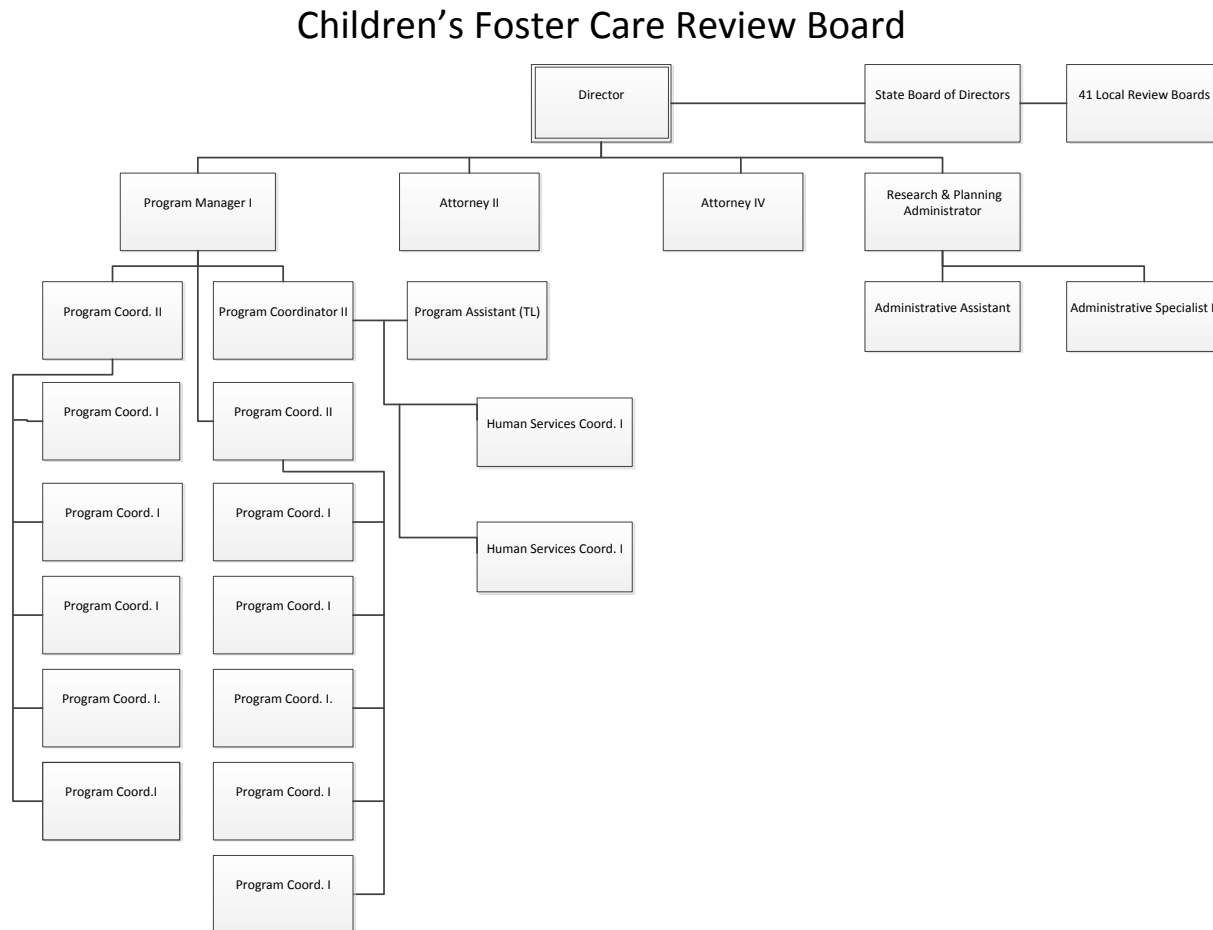
- B. Each local foster care review board must be provided sufficient staff to perform its function as set forth in statute with funds provided in the annual state general appropriations act.
- C. The Children's Foster Care Review Board has a State Board of Directors that provides oversight for the programmatic 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 South Carolina. 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 a contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.
- F. The Governor's Office of Executive Policy and Programs provides administrative, fiscal, and human resource support and oversight which is necessary because it would be cost-prohibitive for the Division to operate as a stand-alone entity.

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. Evaluations from Professional Development are collected.
- 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 and Accountability Report within specified timeframes.
- I. Review Board member and staff exit interviews.

9. Children's Foster Care Review Board Organizational Chart



10. Expenditures and Appropriations Chart

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$613,678	\$256,211	\$765,972	\$253,179	\$891,501	\$250,768
Other Operating	\$95,715	\$39,961	\$330,769	\$56,234	\$217,766	\$49,924
Permanent Improvements	\$	\$	\$	\$	\$	\$
Case Services	\$	\$	\$	\$	\$	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$204,037	\$85,186	\$108,961	\$81,214	\$294,195	\$82,753
Non-recurring	\$	\$	\$	\$	\$	\$
Review Board Budget Total	\$913,430	\$381,358	\$1,205,702	\$390,627	\$1,403,462	\$383,445

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 10-11 Budget Expenditures		FY 11-12 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	\$381,358		\$390,627		Table II.4.1-1
		\$532,072		\$815,075		Table III.2.1.1
		\$913,430		\$1,205,702		Table III.2.5.1
		% of budget:		% of budget:		Table III.2.5.2
						Table III.7.1.1
						Table III.7.2.1

Section III – Elements of Malcolm Baldrige Criteria

1. Senior Leadership, Governance, and Social Responsibility

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

A. Within the Organization

- (1) Provide staff with opportunities to participate in professional development as budget allows
- (2) Monthly staff meetings
- (3) Routine written and oral communication
- (4) Hold monthly “parking lot” meetings between supervisors and 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.
- (5) Perform annual EPMS rating and planning sessions with all staff according to HR policy
- (6) Shared decision-making and brainstorming sessions with all levels of staff on planning and process initiatives
- (7) One-on-one goal setting meetings between each staff member and Division director
- (8) Periodic 360 Degree evaluation to get staff feedback and perspective
- (9) Staff at all levels models ethical and professional behavior – including being legally required to protect confidential information

B. Customers

- (1) Provide statutorily-mandated Orientation training for all review board volunteers and on-going professional development for volunteers as budget allows
- (2) Quarterly State Board of Directors meetings

- (3) Regional Professional Development (as budget and staff time allows)
- (4) Interested parties invited and encouraged to attend Review Board reviews
- (5) Routine emails to Review Board members
- (6) Respond to constituent correspondence and calls
- (7) Routine review of data relating to outcomes for children

C. Stakeholders

- (1) Bi-monthly state-level partners meetings
- (2) Quarterly partners meetings
- (3) Routine FCRB Huddles with DSS staff
- (4) Weekly telephone calls between Division Director and DSS Deputy Director for Human Services
- (5) Regular attendance and participation at Palmetto Power (P2) meetings
- (6) FCRB Staff provide training to stakeholders as needed and when requested
- (7) Division director participation on the Bench/Bar Committee

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

All staff and volunteer training is focused on the Division mission addressing our targeted customer – children in foster care in South Carolina. Senior Review Board leaders also participate in many collaborative opportunities with specific State partners (i.e. the SC Department of Social Services, the Children’s Law Center, the South Carolina Bar Association, non-profit organizations and other child welfare agencies). Senior staff leaders also encourage and monitor partner interactions between local stakeholders and local review board volunteers that take place at the county level.

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

Analysis of data collected from a survey of critical stakeholders was shared with program staff, the State Board of Directors, and at the Annual Professional Development Day 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 South Carolina. 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.

- (4) The Governor's Office of Executive Policy and Programs provides administrative, fiscal, and human resource support and oversight

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

The Review Board Leadership Team routinely reviews established performance measures and reports regarding service efficiency and effectiveness. The Review Board maintains action plans and related performance measures to support OEPP's mission. A description of each measure is detailed in Section III.7.1.

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

- (1) Weekly senior staff meetings with Division Director.
- (2) Monthly full staff meetings with information sharing from all departments. Any staff who have attended outside trainings or relevant outside meetings provide other staff with an overview of information and reproduced handouts, etc.
- (3) Review Board Coordinator meetings as needed 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) Staff goal setting meetings with Division Director.
- (5) Periodic 360 Degree staff evaluation.

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 works very hard at encouraging professional growth of all staff. 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. Finally, the Division is fortunate to be housed within the Governor's Office of Executive Policy and Programs where the Human Resources Division provides excellent training for all levels of staff.

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 members are treated as professionals and respond in kind by participating in planning sessions and communicating freely with supervisory and upper-management staff. Without this input, the Review Board would be unable to accomplish 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. Finally, by setting a Target Advocacy Goal for 2012, positive peer pressure and recognition of individual accomplishments toward the goal encourages the low performing staff to improve.

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 the organization operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.

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; Chairperson, Judicial Qualifications Committee of SC Bar; Member, Children's Committee of the SC Bar Association; Member, Bench/Bar Committee; 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.
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.
Staff Attorney:	Member, Children's Law Committee, SC Bar Association

2. Strategic Planning

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

The Division has procedures in place that ensure adequate and effective strategic planning. Through weekly executive staff meetings and monthly leadership and full staff meetings, the Division discusses issues, analyzes existing processes, and implements new or revised processes for delivery of services. In addition to that, the Division was fortunate to participate in the Covey Four Disciplines of Execution training at no cost to the Division. The leadership staff participated in the training which lead to the development of the Target Advocacy Goal. Then all staff participated in the Four Disciplines training where the Target Advocacy Goal was discussed and lead measures were developed to achieve the Target Advocacy Goal.

In conjunction with the OEPP IT Division, 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 12-13 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Fully utilize data and information gathered from independent reviews of the foster care system to ensure children in foster care are safe and thriving with life-long families.	1. Reduce administrative time spent planning and preparing for statutorily-mandated, independent reviews.	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 Explore the development of an automated scheduling process for Review Board reviews.	Table II.4.1-1 Table III.2.5-1 Table III.2.5-2 Table III.2.5.3 Table III.7.1-1 Table III.7.2-1
	2. Build the capacity of local review boards to advocate for connecting children to forever families	1.2.1 Earlier review of cases when the child or children have re-entered foster care. 1.2.2 Continue staff and board member participation at Palmetto Power (P2) meetings. 1.2.3 Staff and review board member participation at P3 meetings. 1.2.4 Plan Annual Professional Development Day for 2013	

Key Strategic Goal	Supported Division Strategic Planning Goal/Objective	Related FY 12-13 Key Division Action Plan/Initiative(s)	Key Cross References for Performance Measures
2. Achieve the “Target Advocacy Goal” for calendar year 2012 of increasing finalized adoptions for legally free youth between the ages of 15 and 17	2. Utilize the resources of the South Carolina Heart Gallery	2.1 Feature Teen of Week on Facebook 2.2. E-blast Teen of Week to Foster Care Review Board Members 2.3 Increase number of children photographed 2.4 Expedite home studies for children in target advocacy group	Table II.4.1-1

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

Working with DSS Data personnel to obtain access to CAPPs and more automated reports should reduce the workload on the Data and Research Administrator. Once the Target Advocacy Goal is achieved, staff should buy into the concept which will help with the 2013 Target Advocacy Goal.

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 reviews the progress of action plans. The Review Board leadership team will have an professional development in 2012 to evaluate objectives, goals, and outcomes from the previous year and to prepare planning ideas for the coming year. Senior leaders are also keeping track of each individual staff member’s contribution to the Target Advocacy Goal.

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 professional development/meetings (suspended 2008-2012)
- (10) Annual Review Board member professional development (reinstated 2012)

- (11) Regional professional development for review boards (suspended 2008-2012)
- (12) E-blast list-serve information dissemination for Review Board members
- (13) Monthly Review Board business meetings
- (14) Staff professional development
- (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 fully utilizing data and information gathered from independent reviews of the foster care system to ensure children in foster care are safe and thriving with life-long families.

Reference 1.1 Work with SCDSS data personnel to obtain automated, monthly report of children entering and leaving foster care.	Ongoing FY 2012-2013
Reference 1.2 Work with SCDSS data personnel to obtain read-only access to CAPPS in order to populate certain FCRB data fields.	Ongoing FY 2012-2013
Reference 1.3 Explore the development of an automated scheduling process for Review Board reviews.	Pending FY 2012-2013
Reference 1.2.1 Earlier review of cases when the child or children have re-entered foster care.	Pending FY 2012-2013
Reference 1.2.2 Continue staff and board member participation at Palmetto Power (P2) meetings.	Continue FY 2012-2013
Reference 1.2.3 Staff and review board member participation at P3 meetings.	Pending FY 2012-2013
Reference 1.2.4 Plan Annual Professional Development Day	Pending FY 2012-2013

Table III.2.5-2 Key Performance Measures for achieving the “Target Advocacy Goal” for calendar year 2012 of increasing finalized adoptions for legally free youth between the ages of 15 and 17

Reference 2.1 Feature Teen of Week on Facebook	Continue FY 2012-2013
Reference 2.2. E-blast Teen of Week to Foster Care Review Board Members	Continue FY 2012-2013
Reference 2.3 Increase number of children photographed	Continue FY 2012-2013
Reference 2.4 Expedite home studies for children in target advocacy group	Continue FY 2012-2013

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 Target Advocacy Goal. Goal setting meets are held with each staff member to ensure full participation in the planning process. At annual professional development for staff the strategic plan is reviewed and updated as necessary.

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

The Strategic Plan is available to the public upon request.

3. Customer Focus

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

Customer/Stakeholder	Requirements
Children and families involved in the foster care system.	By statute, each of South Carolina's 16 judicial circuits must have at least one local review board. Review boards meet monthly to review cases of children who have been in foster care for longer than four consecutive months. The role of the Review Board is to advocate for permanent homes for all foster children and to monitor the progress of children in the foster care system.
Public, private, and non-profit child welfare agencies.	By statute, all public and private agencies and facilities which provide for or arrange foster care for children shall cooperate with the board of directors and local review boards by making available for review records as may be requested.
Review Board volunteers	By statute, the appointment and training needs of these volunteers must be addressed by staff
State Board of Directors	By statute, coordination of meetings and facilitation of appointments to the State Board of Directors must be handled by the Division Director

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

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

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

Customers may contact the Review Board by telephone, email, website, letter, walking into the office, attending the review of a child's case (if invited), and attending a

quarterly State Board of Directors meeting which are open to the public. More specifically, customers are able to access the Review Board by telephone, through the “Contact Us” link on the Review Board website and through participation in regular review board meetings. All staff members have assigned e-mail addresses and personal voice mail and can be contacted through either means. The Division even has a general email address that a customer can utilize if he or she is not sure who to contact at the Division. The Review Board office is open and accessible during regular business hours and the front desk is equipped to handle and direct all calls coming into the main telephone line.

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

Review Board stakeholder surveys are conducted every other year. Pending availability of funding, the next stakeholder survey will be completed for FY 12-13.

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

Local Review Board members, the State Board of Directors, staff, and the leadership team review both statewide and county-specific data and findings. Programmatic and systemic changes identified by the trends and findings in this data are brought to the attention of appropriate parties at the state and local level.

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

The Division builds positive relationships with customers and stakeholders through quarterly community stakeholder meetings, educational professional development trainings and other relevant child welfare trainings, participation in legislative delegation meetings, community presentations, and personal involvement with public and non-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.

4. Measurement, Analysis and Knowledge Management

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

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

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

Data is collected and routinely analyzed. Results are shared and discussed with Leadership Staff, the State Board of Directors, and local review board members to assist in management, program decisions and creation and deletion of local boards as needed.

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

By statute, the Review Board reports annually to the Governor and the General Assembly on:

Demographics -- how many children there are in foster care, their characteristics and whether their prevalence is increasing or decreasing,

Areas of Concern -- legal and program shortcomings identified at monthly independent reviews, and

Progress Measures -- length of time in care, number of placements, achieving permanency, and recidivism rates. Information is collected from local volunteer independent review boards that review the cases of children who have been in foster care at least four consecutive months; each case is then reviewed every six months thereafter until the child leaves care.

Under the direction of the State Board of Directors and the Review Board program staff, additional data may be collected and evaluated for trend analysis to determine where and what changes or adjustments need to be made in appropriate programmatic areas. Additional data is also collected and analyzed when requested by staff, review board members and other stakeholders.

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

To comply with statutory requirements, the Review Board tracks all data relative to statutes and policies on permanence for children in the foster care system. Programmatic requirements for federal funds that come into SC's foster care program are also tracked for compliance, as well as specific categories of information used by federal auditors in the Children and Family Services Review process and those targeted for improvement in the SC Program Improvement Plan.

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

Routine and ad hoc reports are generated on review data to check for accuracy and timeliness. Standards for data collection and data entry have been established. Regular supervision ensures that standards are being met. Data for the Review Board is stored on a wide area network server. The Information Technology Division of the OEPP is responsible for service maintenance, and data security and availability. Information compiled from Review Board data is compared to similar data gathered by the Department of Social Services and Family Court to determine accuracy and consistency.

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

Data and trends are studied to determine what barriers are the most prevalent in preventing children from moving through the foster care system and into permanent homes in a timely manner. Advocacy efforts for system change or correction are targeted to those areas, which will vary from county to county. Any statewide similarities in this data or trend analysis are dealt with from a statewide, systemic perspective.

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

The collection, transfer, and maintenance of accumulated employee knowledge are accomplished through the production of written policies and regulations, cross training, and the duplication of material resources. Staff often support and help train new staff (formally as well as by on the job training). A detailed Review Board Coordinator handbook ensures uniform process implementation. Regular staff meetings also help collect and share knowledge.

5. Workforce Focus

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

Regional caseloads are routinely checked to ensure that caseloads are evenly balanced among program staff and that each judicial circuit is operating with adequate review boards for the population of children in foster care. Supervisors monitor and develop staff strengths to ensure that the specific needs of local boards or counties are paired with the best staff member to address these issues. All staff members are routinely involved in planning and programmatic development. Additionally, management assist program staff in reaching their full potential through increased responsibility and encouragement to become active participants in a variety of stakeholder groups that meet to assess and implement systems change.

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

The Division communicates by a combination of face-to-face meetings, internal professional development, 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 professional development 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.

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

Workforce capability is assessed through the monthly meetings between staff and employees, the annual EPMS evaluation, and the planning stage. Staffing levels correlate with the caseload of children in foster care and also driven by the availability of funding.

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

The Review Board performs an auditing function for the Department of Social Services and it is imperative that high standards of staff performance be maintained at all times. This is addressed through on-going quality supervision, local review board self-assessments, annual evaluations of assigned staff by local boards, and timely EPMS evaluations.

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

(1) development of personal leadership attributes

Staff at all levels is engaged in developing, assessing and accepting responsibility for successful Division outcomes. While engaged in the on-going group decision-making process, staff is routinely evaluated on leadership and teamwork. All program staff is required to exhibit strong personal leadership through their work with local review boards and they are evaluated on this skill annually through the EPMS process.

(2) development of organizational knowledge

Strong communication skills by supervisory and leadership staff set a tone for overall organizational knowledge in that information is routinely shared up and down the structure of the Division in order to maintain a sound knowledge base.

(3) ethical practices

Due to the nature of the extremely confidential information monitored by the Review Board, unethical behavior of any type is not tolerated. It is incumbent on leadership staff to monitor and model the strictest of ethical standards in order to protect the children and families served.

(4) your core competencies, strategic challenges, and accomplishment of action plans

Through development of a sound Annual Report and by empowering local review board members to become strong advocates with their local partners and legislators, Review Board staff and the State Board of Directors have worked together to establish the need for and the advantages of an strong review system in South Carolina.

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

Supervisory staff routinely observe their staff members on the job to assess their competence and level of professionalism. EPMS planning meetings and rating discussions are conducted according to HR personnel standards for all staff. As staff rotates the responsibility of planning monthly full staff meetings, they are free to bring in any speaker or subject matter that they may want additional information about, and can make requests for specific training needs at any time or 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, independent oversight for South Carolina's children in foster care.

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

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

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

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

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

In addition to annual EPMS evaluation meetings and planning sessions, each staff member meets annually with the Division director for a one-on-one goal planning session. All issues that come up in these meetings are cataloged and discussed with supervisory staff and overall concerns or issues are addressed by senior management staff. Priorities for improvement are made based on the problem's relativity to permanence for children in foster care and the impact that the problem is having on staff's ability to focus on our mission of advocating for children in foster care.

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

Persons suitable for effective career progression are easily discernable by leadership staff through their participation in Division activities and overall commitment to the Division's mission and the children they serve. However, opportunities for career advancement within the Division are limited because it is a small Division.

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

The Division has a safe, secure, and healthy work environment by maintaining a strong management team made up of individuals who are good listeners, team players and committed to establishing a positive workplace for the people who work for them. One core strength of the Review Board management team is that they respond to staff first as people, then as employees.

6. Process Management

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

- (1) Review Board Meetings
- (2) State Board of Directors
- (3) Distribution of Review Board Recommendations
- (4) System of accountability provided by third party, independent 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 independent 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 independent review and the Division strives to build on those successes.

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

This is covered in Section III.1.

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

All processes are linked to meeting statutory requirements and are mission driven.

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

Through routine self and external assessments that are in place, by being open to the requests and needs of Review Board customers and stakeholders and by being good team players both internally and externally.

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

- (1) Coordination and facilitation of third party independent 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 challenging for the Division to achieve its statutory mission.

7. Results

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

The mission of the Children's Foster Care Review Board is to provide external accountability for the foster care system and to advocate on behalf of children in foster care. Program Measures for the past eight years are in Table III.7.1-1. The number of children residing in foster care in South Carolina, as reported by the South Carolina Department of Social Services, decreased in 2011. The number of reviews completed and the number of children reviewed have also decreased.

The decrease in the number of children in foster care means that our staff has more time to collaborate to ensure more children are safe and thriving with life-long families. In addition to that, the number of volunteer hours by review board members has increased which directly impacts the safety and well-being of children in foster care.

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	2004	2005	2006	2007	2008	2009	2010	2011
Number of Reviews Completed	8,232	8,317	8,464	8,981	9,068	8,961	8,130	7,149
Number of Children Reviewed	4,810	4,853	4,976	5,347	5,384	5,424	4,986	4,427
Number of Review Board Meetings	440	431	436	464	465	450	434	432
Number of Coordinators	8.00	8.00	10.00	10.00	10.00	9.0	9.0	9.0
Number of Volunteer Hours	10,155	10,574	13,115	16,474	15,082	16,403	14,928	15,230
Children Reviewed per Meeting	18.7	19	19	19	19	20	19	17
Reviews per Coordinator	1,029	1,040	846	898	907	996	903	794
Volunteer Hours per Review	1.23	1.27	1.54	1.83	1.66	1.83	1.83	2.13
Volunteer Hours per Child	2.11	2.17	2.63	3.08	2.80	3.0	3.0	3.4
Number of Areas of Concern Identified *	10,270	9,816	11,168	14,864	16,649	17,669	12,153	9,089
Areas of Concern per Review *	1.25	1.18	1.32	1.65	1.83	1.83	1.5	1.3
Reviews Continued or Rescheduled	321	316	410	393	418	339	200	165
Reviews Not Held Timely	228	229	333	409	339	303	163	160
Average Number of Years in Care	3.8	3.6	3.3	2.7	2.8	2.6	2.4	2.4
Average Number of Placements	4.3	4.0	2.8	3.3	3.2	3.0	2.7	2.9
Percent Achieving Permanency	59%	59%	63%	60%	62%	65%	66%	64%
Percent Recidivism	24%	22%	24%	26%	25%	23%	21%	21%
Percent of Reviews Completed Timely	97.8%	97.7%	97%	97%	96%	97%	98%	98%
Number of Advocacy Referrals Initiated	727	821	436	1,641	1,228	1,251	950	1,225
Number of Training Sessions Conducted for Staff & Review Board Members	9	11	10	13	7	11	5	5
Number of Presentations Given for Outside Entities	13	23	28	17	57	29	22	22

* In 2010 the definitions and categories for Areas of Concern were amended so data comparisons may be misleading.

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 2011, the Foster Care Review Board surveyed 175 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, 76 were completed and returned (response rate of 43%). Forty of the 42 review boards had at least one member respond to the survey. Survey responses were reviewed by program staff and the results will be used for future review board member and staff training preparation and evaluation.

Table III.7.2-1 Foster Care Review Customer Satisfaction Results: FY 11-12 (July 2010-June 2011)

Performance Measures	Number	Dates
Timely Preparation of Annual Report (statistical research and recommendations)	500 copies distributed	09/01/2012
Review Board Member Survey	76 responses	11/01/2012
Review Board Member Exit Interviews	15 completed	On-going
Evaluation: New Board Member and Staff Orientation	75 responses	8/15/11, 11/11/11, 2/27/12, 5/14/12
Evaluation: Foster Care Review Board Annual Professional Development	64	2/3/2012
Stakeholder Survey (bi-annual)	N/A	pending for FY 12-13

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

Clean OEPP audit and satisfactory management and audit outcomes for the programmatic contract resulting in renewal and/or increase in contract dollars.

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

All EPMS ratings are reviewed annually and low performance areas are addressed as possible training needs during EPMS planning sessions. Each member of program staff receives annual reviews from volunteers and problem areas and training needs are frequently identified from these evaluations. General well-being and satisfaction are addressed during the Division Director's annual goal setting meetings with staff, as well as during staff professional development, 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 professional development. General well-being and satisfaction are addressed during the Division Director's annual goal setting meetings with staff, as well as during staff professional development, travel with staff, review observations and strategic planning sessions. Review Board volunteers and county and state partners are an on-going source of information when determining specific areas for system improvement.

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

Tables III.7.1-1 and III.7.2-1 include indicators for regular/legal compliance performance levels. Percent of reviews held timely has remained extremely high at 98% or better for the past ten years. The Annual Report has been completed timely. Volunteers and staff have been adequately training according to policy.

2011-2012 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, hereafter referred to as GAL, 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, which is a program of the Governor's Office of Executive Policy and Programs (OEPP), is charged by the legislature with providing the family court, through its court-appointed volunteers, recommendations, based on the guardians' ad litem 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 2011-2012

- South Carolina is one of several states in the nation that serves 100% of all children in child abuse and neglect cases.
- According to The National Center for Charitable Statistics, Court Appointed Special Advocates (CASA)/Guardian Ad Litem (GAL) ranks in the top 25 out of 902,270 public charities nationwide that efficiently and effectively serve children directly.
- Completed the National CASA self-assessment process. The State Self-Assessment ensures that our organization is delivering high-quality services to our local GAL programs. Our local GAL programs completed a similar process to ensure the delivery of high-quality services to abused and neglected children.
- Served 10,441 children in 2011-2012, 417 more children than in 2010-2011
- 2,661 Volunteers donated over 179,000 hours to SC abused and neglected children.
- 531 new Volunteers were trained as Guardians ad Litem

- Volunteers represent a diverse group including 21% African American, 77% Caucasian, and less than 1% each Asian American, Bi-Racial, Hispanic/Latino, and Native American. 80% of volunteers are female, 20% are male.
- 61% of GALs have a college degree or higher (South Carolina's rate overall is 24.5%)
- GAL received \$233,199 in reimbursement from IV-E funding for over 13,000 documented hours of county staff time for training volunteers.
- Was awarded \$35,950 National Court Appointed Special Advocates Association (NCASA) state grant.
- Was awarded \$86,371.00 Victims of Crime Act (VOCA) grant for the purchase of equipment to promote volunteer recruitment and county operations.
- Total New Cases: 2,581
- Volunteers, staff and attorneys attended 8,417 hearings
- Since the GAL Public Relations Staff has created a Facebook page, there have been 1,200 citizens who have supported GAL's mission.
- Volunteer Newsletter is now available online to all volunteers and the public.
- There have been over 500 inquiries via the internet since November, 2011
- Decreased the need for court-appointed attorneys: 43 GAL contract attorneys absorbed all GAL attorney appointments for DSS child abuse and neglect actions filed in FY2011-12. Without GAL attorneys, family courts would have been required to appoint more than 2,000 attorneys to represent GALs in these cases.
- Cost-effectiveness of GAL attorneys: Saved the state—nearly \$150,000 through its county-based attorney contract system.
- Quality assurance of GAL attorneys: Ensured quality attorney representation of GALs by providing child welfare continuing legal education to attorneys in partnership with the Children's Law Center (CLC), as well as other services by the GAL Program's general counsel and the CLC.
- Instituted Peer Mentor Program which is higher level of training and child welfare expertise for current volunteers.
- Volunteer Retention Rate was 82%
- Use of webinars for staff and volunteers to reduce cost and still ensure adequate training.
- Fostering Connections is a DSS grant-funded program targeting older youth who are aging out of the foster care system find relatives that they can potentially connect with upon approaching adulthood. This program is housed within The GAL program and is currently in its final phase. Results are being documented by both GAL grant staff and SCDSS. Results will not be available until 2012-2013 report.
- Trained 54 volunteers throughout the state via the Fostering Connections grant program, to find family members for youth aging out of foster care.

3. Key Strategic Goals for Present and Future Years

- a) Recruit sufficient volunteers to support 100% child abuse and neglect case appointment without staff cases.
- b) Increase GAL volunteer retention through case management support and continuing education that improve volunteer performance and enhances positive outcomes for children.
- c) Increase staff competency in use of Efforts to Outcomes data system, hereafter referred to as ETO, which collects and tracks child outcomes.
- d) Improve tracking of face to face visits with children, tracking of volunteer hours and tracking of time spent on volunteer training.
- e) Increase recruitment of male and African American volunteers
- f) Retain and strengthen contract attorney system to ensure quality legal representation.
- g) Ensure transparency of GAL Program with a meaningful complaint review process.

4. Key Strategic Challenges

- a) 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.
- b) 2. Lack of adequate resources to fund staff to support the volunteers and ensure quality supervision of a growing number of child advocates. The inability to fund vacant positions is resulting in very high caseloads in some counties.
- c) 3. Lack of adequate funds to compensate contract attorneys, taking into consideration number of cases and hearing frequency.
- d) 4. Loss of CASA grant funding for Public Awareness/Training Coordinator positions will take additional state resources.
- e) 5. Some funds received via The South Carolina Department of Revenue, which have no correlation to child welfare and depend on income tax overpayments vary greatly from month to month. Additionally, this funding is not guaranteed recurring money.
- f) 6. There is some funding that is matched by the federal government and channeled via DSS to the GAL program (IV-E funding). This funding also varies and is not guaranteed recurring money. If there is a shortfall, GAL would no longer receive this money.

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:

- Over 2,600 volunteers advocate for abused and neglected children in family court.
- The volunteers visit the children wherever the children are residing.
- If a child is placed outside of the original county and the volunteer is unable to travel the distance to visit with the child, GAL staff in the new placement will visit the child.
- Many volunteers travel great distances to remain connected the child.
- 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.
- Local Coordinators in 37 county offices supervise the volunteers.
- Staff documents the efforts of the volunteers in the ETO database system.
- Staff provides feedback and guidance to volunteers to improve the quality of their child advocacy.

- The county staff and Regional Supervisors create individual county plans to set goals for improving child advocacy in each county.
- Public Awareness/Training staff assist county staff by preparing detailed recruitment plans before each training, and assisting with materials and events. They produce in house all marketing materials, press releases, volunteer magazines, recruitment videos and PowerPoint presentations. They manage state and county websites and social media. They also produce training materials for the ETO data system.
- Public Awareness, Regional and County staff members conduct 30-hour pre-service trainings for volunteers.
- 43 contract attorneys provide representation for all GALs across the state.
- General Counsel coordinates with Children's Law Center to provide continuing legal education and other support to contract attorneys and serves as a liaison between attorneys and staff/volunteers.

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. Defendants can expect to be treated with dignity and respect, even if their position is not in agreement with that of the volunteer GAL.
- DSS can expect a trained volunteer to be appointed when cases are brought to Family Court. DSS can expect competent and courteous staff members who supervise volunteers, and encourage collaborative efforts in the best interest of children.
- 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.
 - The contract attorneys are a customer group of the Guardian ad Litem Program. They can expect to receive quality continuing legal education opportunities delivered by the Children's Law Center and support services from the GAL Program through its general counsel. The general counsel will serve as a liaison between the volunteers/GAL county offices and the contract attorneys. In addition, contract attorneys can expect to receive technical support from the general counsel on legal issues, including research, assistance with appeals and case preparation, to name a few.

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
- The Department of Social Services

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 and contract attorneys	Office of Executive Policy and Programs Human Resources, Finance, IT, & 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, volunteers, and contract attorneys	Office of Executive Policy and Programs Human Resources office; NCASAA best practices and public relations departments , Children's Law Center
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.

GUARDIAN AD LITEM COUNTY OFFICE LOCATIONS:

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
Georgetown
Greenville
Union

Sumter
Williamsburg
York

6. The number of employees (as of 6/30/12)

25 Classified, 1 Unclassified, 1 Temporary, 3 Temporary (Grant), 54 Temporary (time-limited)

5 Unfilled Vacancies: 5 Temporary (Time Limited)

7. Regulatory environment under which your organization operates

- The Cass Elias McCarter Guardian ad Litem Program operates under the statutory guidelines of the Children's 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.
- 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 South Carolina Children's Code at 63-7-2560 mandates a guardian ad litem for every child who is subject to a termination of parental rights action.
- The South Carolina Children's Code at 63-7-1620 mandates an attorney represent a guardian ad litem at every judicial proceeding.
- The South Carolina Supreme Court mandates that the Cass Elias McCarter Guardian ad Litem Program provide a guardian ad litem for every child involved in an abuse and neglect action.
- 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 (NCASA) 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:

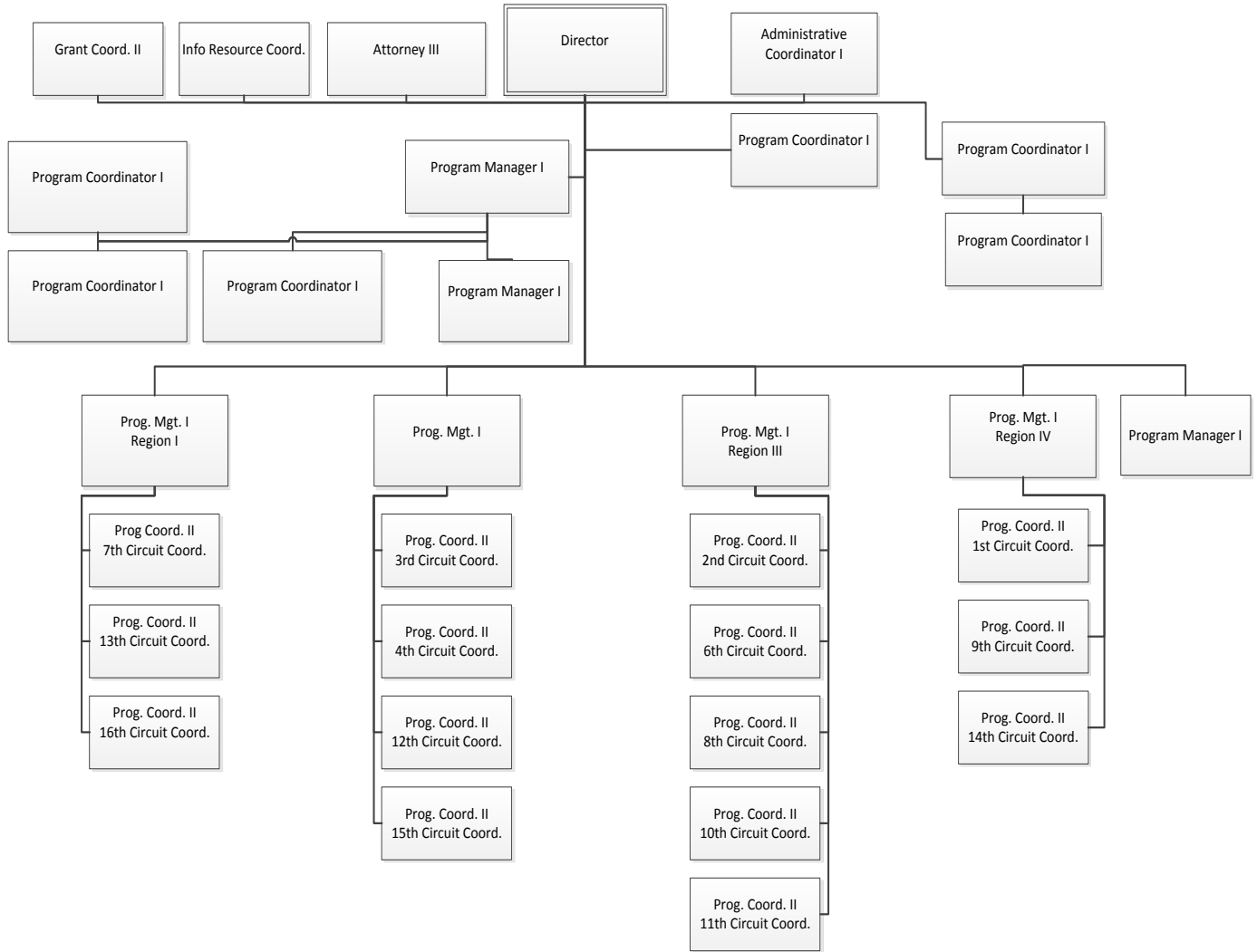
Number of cases received
Number of children served
Number of volunteers trained
Number of court hearings attended

Number of cases accepted
Number of volunteers assigned
Number of volunteers who resigned
Number of staff cases

- 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 with goals to improve child advocacy.
- A detailed plan for volunteer recruitment is developed for training sessions in each county.
- The Public Awareness team travels to individual counties and assists with direct implementation of recruitment plans and pre-service volunteer training.

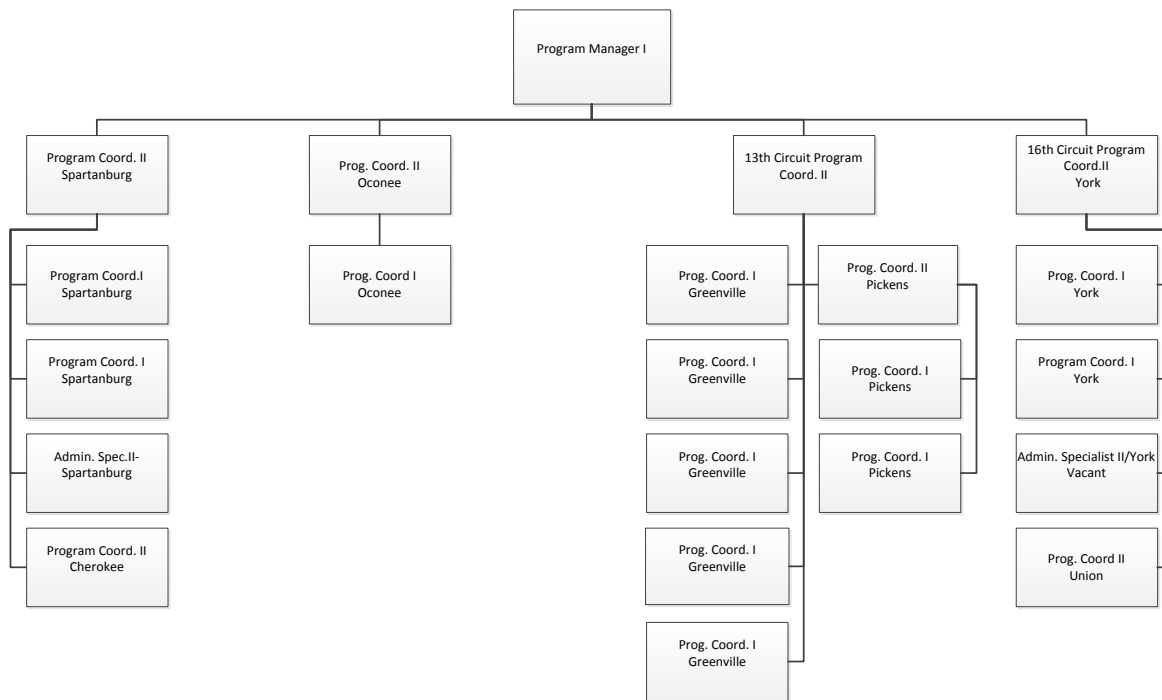
9.

Guardian ad Litem



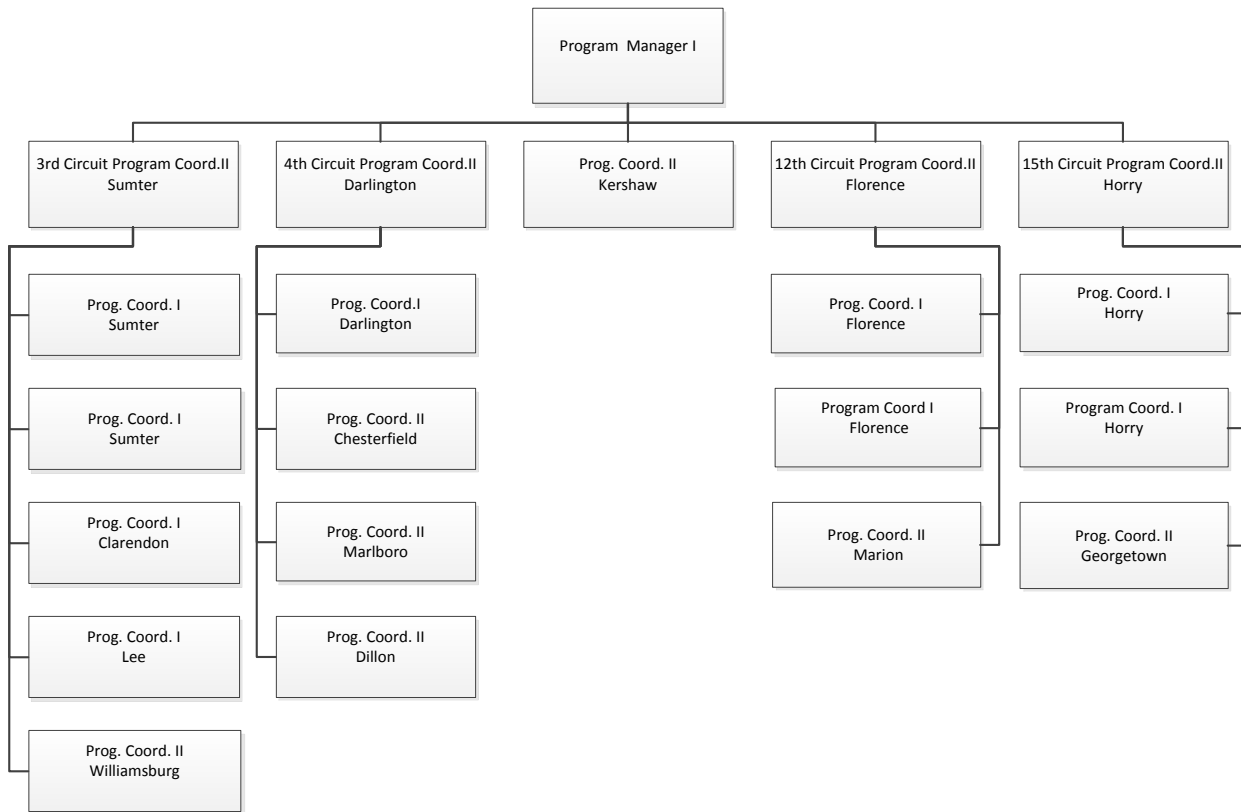
Guardian ad Litem

Region I



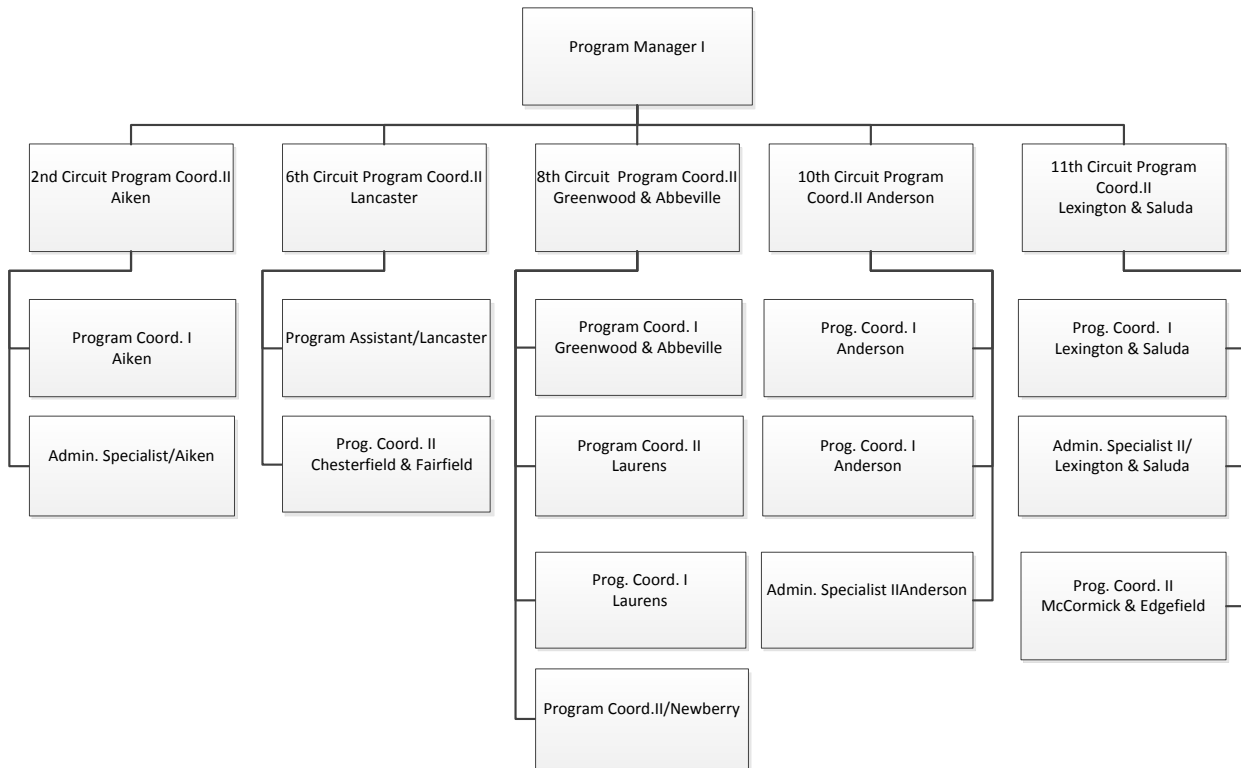
Guardian ad Litem

Region II



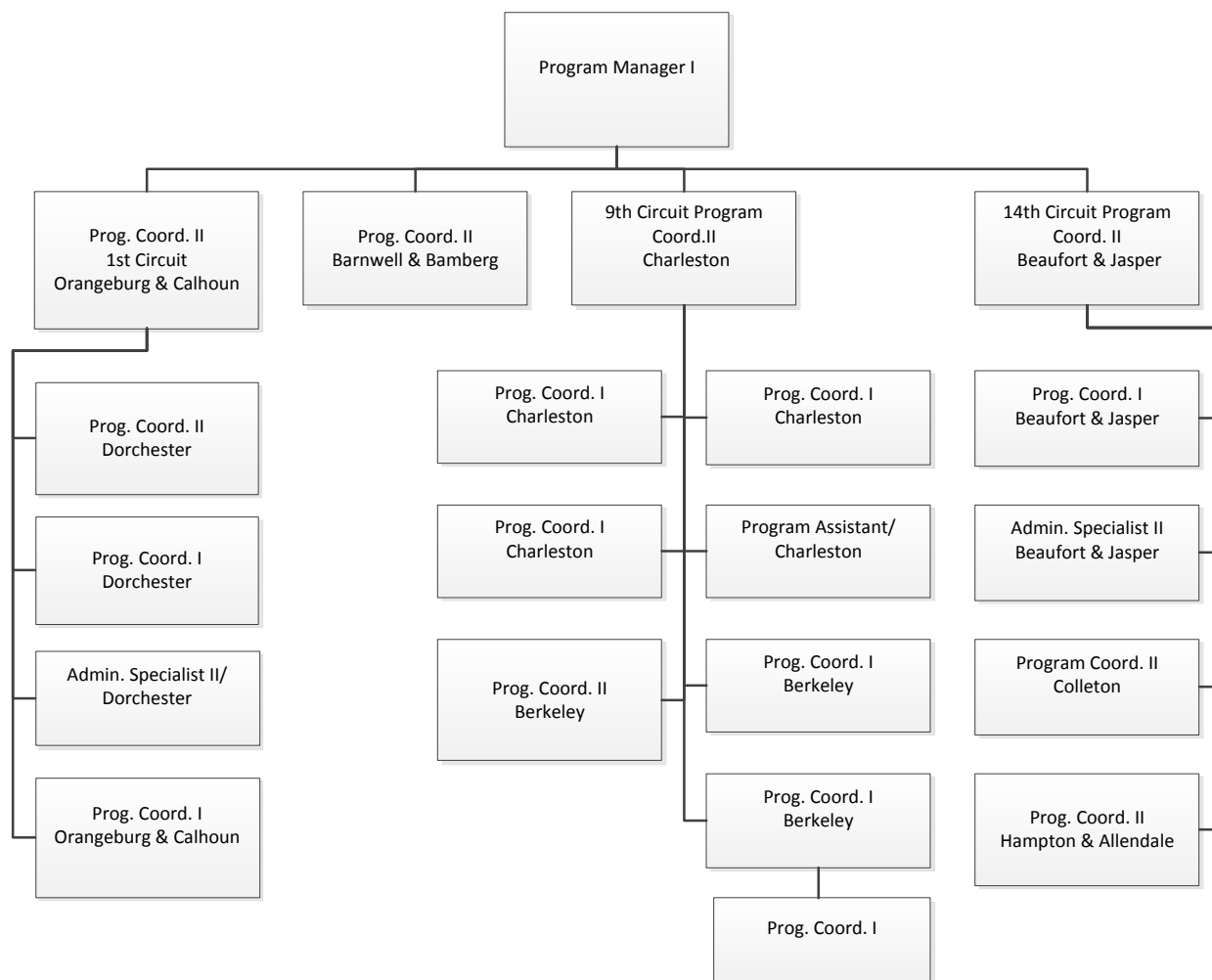
Guardian ad Litem

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 10/11 Actual Expenditures		FY 11/12 Actual Expenditures		FY 12/13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$2,998,778	\$641,808	\$3,049,709	\$494,311	\$3,602,509	\$498,788
Other Operating	\$1,535,389	\$45,104	\$1,360,315	\$386,305	\$2,760,099	\$45,170
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$976,042	\$197,688	\$996,943	\$164,178	\$1,188,828	\$164,600
Non-recurring						
Total	\$5,510,209	\$884,600	\$5,406,967	\$1,049,794	\$7,551,436	\$708,558

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 Number and Title	Major Program Area Purpose (Brief	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross References for Financial Results*
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	\$884,600	State	\$1,049,794	Table 7.1.1 Table 7.2.1 Table 7.3.1
		Federal		Federal	\$80,000	
		Other	\$4,625,609	Other	\$4,277,173	
		Total	\$5,510,209	Total	\$5,406,967	
		% 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 County Operations Manager. **These leaders:**

- Meet monthly to discuss program goals for child advocacy
- Consistently examine the impact of the trends within partner agencies
- 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.
- County and Circuit Coordinators participate in the production of the plan.
- Generate a monthly report from the ETO database that indicates the success of the local offices is distributed to all staff to monitor performance.
- Initiate communications concerning goals and priorities occur via email, telephone, meetings and trainings.
- Performance expectations for individuals are contained in job descriptions and via the Employee Planning Management System.

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 outline best practice standards for child advocacy and volunteer supervision
- The Human Resources policy of the Office of Executive Policy and Programs (OEPP) set standards for employee relations.

Ethical issues of major concerns for the Guardian ad Litem Program include:

- Maintaining confidentiality in case work
- Ensuring face-to-face contact with children
- Investigating the facts of the cases sufficiently to inform the Court with accurate information
- Adhering to the mandated reporter statutory requirements.
-

To demonstrate that GAL senior staff is fully aware of the importance of these concerns, the following mechanisms are put in place to maintain the integrity of the program:

- Providing volunteer pre-service training
- Providing continuing education opportunities for volunteers
- Creating and disseminating written policy that address these concerns based on child welfare best practices model.
- Staffing cases along with the volunteers is one means of communicating the continuing duty to the ethical framework of child welfare work.
- GAL General Counsel also informs staff and contract attorneys 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 SCDSS and other child welfare entities who are stakeholders is modeled by senior staff through monthly partners meetings held at state DSS that are mirrored in meetings held quarterly at the county level.

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.

The most difficult risk associated with training volunteers thoroughly for the complex task of acting as a court-appointed advocate. Along with that is aiding them in adjusting to outcomes that are different from what they have recommended to the court.

To combat that risk the GAL Program provides:

- A 30-hour free course on the child welfare process, the family court system and the importance of collaborative relationships with child welfare stakeholders
- An extensive pre-service interview
- Continuing education opportunities
- On-going court-related assistance
- Case staffings with volunteers
- Technological support and guidance
- Annual trainings
- Volunteers must also submit to record checks, including national criminal record checks and state Central Registry of Child Abuse and Neglect checks.

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

- Fiscal accountability is regulated through the OEPP Finance Office.
- 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 43 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:

Number of children served

Number of volunteers trained

Number of current volunteers

Number of termination of parental rights actions filed in cases with an appointed volunteer guardian ad litem; when those cases are scheduled for hearing

Number of volunteers who have resigned that month

Number of staff appointments to cases

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.
- County and Circuit Coordinators provide 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 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 Employee Performance Management System, (EPMS), conduct evaluations and make relevant observations.
- Senior staff members are asked to identify strengths in employees.
- This skill identification and the efforts demonstrated to promote it enhance employee satisfaction and give 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. Promotion from within is used when employees have demonstrated leadership potential.

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

- County Coordinators develop **SMART goals** for their counties as part of an annual County Plan. **SMART** stands for **S**pecific, **M**easurable, **A**ttainable, **R**elevant, and **T**ime-bound. The plans cover 5 areas that are consistent with the strategic objectives: Recruitment, Retention, Quality of Advocacy, Auditing and Diversity. An example of a SMART goal to increase diversity in recruitment would be: "I will post new profiles of 3 volunteers on our web page/social media, including at least one male and one African American by October 1, 2012."
- The public awareness team assists county staff members with recruitment efforts while preserving county ownership of goals.
- EPMS evaluations were updated this year to incorporate the SMART goal concept. Staff members now have objective measures of job performance that are comparable state wide. As part of the EPMS evaluations, staff members select 1-2 objectives of personal interest that they can focus on in addition to the standard performance indicators.

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.
- Regional Staff meetings, which incorporate all of the GAL staff in an entire geographic area of the state, are held quarterly.
- Regional Supervisors and County staff conduct volunteer continuing education.
- Data training is conducted in county regions as needed. A series of 15 minute online webinars have been developed to address the data training. These are also being recorded so that they will be available at any time for new staff or for remedial trainings.
- Web meetings and webinars are being implemented to provide onsite training in a more efficient and cost effective way.
- The General Counsel coordinates with the Children's Law Center to provide continuing legal education learning opportunities for its contract attorneys and provides them in-house support.

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, as well as the entire GAL agency.
- Employees also receive positive feedback through the EPMS review process.

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

The Cass Elias McCarter Guardian ad Litem Program is an active member of the National Court Appointed Special Advocate Association (NCASA).

In addition GAL staff members participate in the following:

The Bench/Bar Committee

Children Come First

The Children's Justice Act Task Force

Fostering Connections Grant Partner (DSS, USC Center for Children and Family Studies, & the South Carolina Association of Children Homes and Family Services)

Foster Parent Training Collaborative

DSS Partner's Meetings

South Carolina Immigrant Victims Network (SCIVN)

The USC Masters of Social Work Intern Program

Project Best [Trauma-Focused Cognitive Behavioral Therapy broker training]

Multi-Disciplinary Team Meetings (MDT)

Citizens Review Board Meetings

Child Advocacy Center Staffings

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.
- 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:

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. Lack of adequate resources to fund staff to support the volunteers and ensure quality supervision of a growing number of child advocates. The inability to fund vacant positions is resulting in very high caseloads in some counties.
3. Lack of adequate funds to compensate contract attorneys, taking into consideration number of cases and hearing frequency. Contract attorneys provide client representation at considerably lower rate than private-sector attorneys.
4. Loss of CASA grant funding for Public Awareness/Training Coordinator positions will take additional state resources.

5. Existing funding source (IV-E) is unpredictable as to the amounts, making it difficult to budget.
6. Existing funding source (state funding) is unpredictable as to the amounts, making it difficult to budget.

The strategic objectives of the Guardian ad Litem Program are grounded in one main goal: to have a well-trained, appropriate volunteer for every abused or neglected child. The other strategic objectives flow from the main objective.

- Consistently recruiting 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. 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.
- Cost cutting measures have been implemented as a strategic objective to address the lack of funding.
- A number of staff positions remain unfilled at this time. In addition, the following measures have been implemented:
 - a. Rental costs have been reduced by combining GAL offices with other OEPP agencies where possible. Less expensive rental space is being sought in other areas.
 - b. GAL has reduced travel by staff members by over 50%
 - c. GAL is moving towards paperless office procedures where possible
 - d. Reusing volunteer training manuals and reducing the size of the manual
 - e. Reducing postage costs by using scanning/email technology for document distribution
 - f. Reviewing all leases on copiers and other office equipment for possible renegotiation with leasing company
 - g. Developing county level budgets to determine areas that are using above average levels of supplies so that this cost can be reduced.
 - h. Using Graduate level interns, Law Students, VetSuccess Initiative Trainees , and trained volunteers in office staffing

In addition, a final strategic objective is that GAL will seek additional funding through these measures:

- Increasing the number of training hours eligible for IV-E reimbursement
- Seeking additional funding from the Commission on Indigent Defense to support payment of GAL attorney fees
- Applying for additional grants
- Requesting appropriate funding in the OEPP Budget for FY13-14

Chart III.2-2 Strategic Planning Chart for the Guardian ad Litem Program

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 11-12 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 Table 7.2-1 Table 7.5-1
Increase volunteer retention through case management support &	Enhanced contact with volunteers through social media. Regional and state staff increased case management participation with	Began consistent continuing education programs in the counties. Began participation in DSS permanency	Table 7.4-2 Table 7.4-3

continuing education that improve volunteer performance and enhances positive outcomes for children.	volunteers.	roundtables for positive outcomes for children.	
Increase staff competency in use of ETO 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
Improve tracking of face to face visits with children, tracking of volunteer hours and tracking of time spent on volunteer training.	County audits will establish a baseline of information being recorded from monthly monitoring reports. Staff will receive training to reinforce proper methods of recording hours and visits in the data system.	Regional supervisors received audit training, and started audit processes in counties. Weaknesses were identified, along with plans for corrective action. This area was a focus for improvement in the county plans, with specific target numbers set for increases in visits and hours.	
Increase recruitment of male and African American volunteers	Baseline measurements were determined by reviewing county, state, volunteer, staff and population demographic data. A goal was set to increase the number of African American volunteers from 392 to 490 by October 31, 2013, and increase the number of male volunteers from 374 to 468 by end of October 31, 2013.	A CASA grant has been applied for to support this goal. Results of that application will be available later this year. Press releases and other PR materials will focus on this goal during the year, with periodic review of data to determine effectiveness. County plans include specific goals in these target areas for each county.	
Retain and strengthen contract attorney system to ensure quality legal representation.	Ensured maximizing funds in addition to those appropriated by the legislature, accessing federal funding through DSS to pay attorney fees and utilizing 2% funds pursuant to an existing proviso, the latter which related to income tax overpayments. Facilitated efforts to encourage attorney retention, including provision of on-going training and technical support to contract attorneys. Contracted with attorneys to provide attorney representation for FY12-13, in amounts that took into consideration caseload, frequency of hearings, and ways to consolidate county attorney representation, as was possible and appropriate.	Participated in a legislative study committee that made recommendations related to the importance of retaining and strengthening the contract attorney system in order to advocate effectively for abused and neglected children. Discussed additional attorney contract funding possibilities with DSS. Requested to meet with OID during summer 2012, to discuss potential funding for FY 12-13. Met with Governor's Office to explain the legal requirements for GAL attorney representation and the importance of the GAL attorney to ensure effective advocacy for abused and neglected children.	
Ensure transparency of GAL Program with a meaningful complaint review process.	Ensured review of complaints filed with GAL Program pursuant to the Program's complaint review processes. Took appropriate action related to complaints, which ranged from no action, to counseling/retraining, to requesting GAL to ask the court to relieve him/her as GAL on the particular case, to petitioning the court to remove the GAL as GAL on the particular case, to discontinuing future case assignments. Ensured notification of Governor's Office of complaints and legal actions.	Participated in a legislative study committee that examined ways to ensure transparency of the GAL Program, as part of which there were recommendations related to complaint review processes.	

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.
- Hours of continuing education reported in each county are measured and compared statewide. Retention tracking will be the success measure for the objective.
- This data is used by County Coordinators to develop their County Plans that support the strategic objectives.
- Regional and Circuit staff review the plans and allocate resources when available to assist in meeting the objectives.

The ETO (Efforts to Outcomes) data system implemented in 2010 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. In November of 2012, a new ETO project manager was hired by Social Solutions and has brought about a significant change in the system. It is now more user-friendly and the GAL program currently has additional reports that were needed.

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 Plan, Recruitment plan, and EPMS development. Regional Supervisors meet with county staff to develop county plans that support the strategic objectives. The Strategic Plan is available on the website for public view.

2.5 How do you measure progress on your action plans?

- The monthly ETO database statistical report measures key performance numbers for volunteer recruitment and other objective data measurements.
- 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 volunteer training in each county.
- 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.oepsc.gov/gal/state/scresources.html> or www.sccgal.org/resources.

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:

<u>Customer</u>	<u>Requirements</u>
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.
Volunteer 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.
GAL Contract Attorneys	Requirements include the GAL Program ensuring that each GAL has attorney representation in all judicial proceedings in accordance with 63-7-1620 and 63-7-2560. In addition, the GAL Program, through its general counsel, serves as a liaison between the volunteer/GAL county office and the attorney, as part of which the GAL Program assists county attorneys with legal-related matters. In addition, the general counsel ensures that the contract attorneys have opportunities to receive training to develop expertise in child welfare law.

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. 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**, other child welfare stakeholders, along with the Guardian ad Litem staff, meet monthly/quarterly 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.

- **Contract attorneys** have full access to GAL Program general counsel regarding matters related to representation of volunteers and coordination with GAL county offices.

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.
- Other actions the GAL Program may take regarding complaints include: requesting GAL to ask the court to remove him/her from serving as GAL on a particular case, petitioning the court to remove the GAL as GAL on the particular case, and discontinuing future case assignments to the GAL. The complaint procedures were clarified this year, with improved record keeping put in place.

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 a 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.
- GAL Program facilitates training for contract attorneys through its partnership with the Children's law Center. The Children's Law Center relies on its expertise to develop relevant continuing legal education and solicits input from the contract attorneys and the GAL Program about needed areas of training.
- General Counsel is available to contract attorneys to address concerns with GALs/county offices and other stakeholders.
- GAL state director and senior administrators have informal relationships with the same level of staff of stakeholder organizations to ensure that issues are resolved systematically and not in isolation. This harmonious collaboration of decision-makers ensures that there is a clear and concise resolution for all youth in the foster care system.

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.

- 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 stakeholders, 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.
- To build a positive relationship with the contract attorneys, GAL Program facilitates relevant continuing legal education in partnership with the Children's Law Center and ensures that its general counsel is available to address concerns and assist with case preparation or other legal matters.

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:

- Number of children served;
- Number of cases served;
- Number of volunteers trained and resigned;
- Number of termination of parental rights (TPR) cases filed;
- Number of volunteer hours of service.

Guardian ad Litem Program operational measures:

- Staff ratio to volunteers;
- Number of staff cases;
- Number of court hearings attended per county.

This year GAL completed a two-part Self-Assessment process for NCASA. The State Self-Assessment ensures that our organization is delivering high-quality services to our local GAL programs. Our local GAL programs completed a similar process to ensure the delivery of high-quality services to abused and neglected children. The process is required by NCASA every 4 years.

It included meeting standards for the State program in the following areas:

1. Mission
2. Governance, Ethics and Compliance with Laws and Regulations
3. Planning, Assessment and Evaluation
4. Human Resource Management
5. Financial and Risk Management
6. Public Relations
7. Quality Assurance
8. National CASA Affiliation
9. Inclusiveness and Diversity

It also includes meeting standards for the Local programs in the following areas:

1. CASA/GAL Program Mission and Purpose
2. CASA Program Governance

3. National Affiliation
4. State Affiliation
5. Human Resources Management
6. Volunteer Management
7. Financial, Facility, and Risk Management
8. Public Relations
9. Planning Evaluation
10. Record Keeping
11. Inclusiveness and Diversity

We are in compliance with all NCASA standards as applicable to our state office and all 45 local offices.

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. Analysis is done on the number of children served by an office, and number of hearings attended, compared to the number of staff members to support decisions regarding staffing patterns throughout the state. County Operations Manager and Regional Supervisors review data monthly to evaluate the effectiveness and caseloads of staff members in their region.

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

- Number of new cases
- Number of children in new cases
- Number of cases closed
- Number of children in closed cases
- Number of staff assigned cases
- Number of all cases served
- Number of all children served
- Number of volunteers trained
- Number of volunteers resigned
- Number of volunteer service hours
- Number of all volunteers

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

- The Guardian ad Litem Program uses national best practices measures which provide comparative data against which to measure performance.
- Data indicate where the need for staff is greatest, due to heaviest caseloads and largest geographic areas.
- In addition to the information we collect, we use Kids Count demographic data 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.

- County Plans compare demographic information on children, volunteers, staff and county populations to identify imbalances and focus recruitment efforts in underserved populations. This data formed the basis for our goal to increase male and African American recruitment, enhancing our ability to serve children.
- **An additional comparative data measure was implemented in the County Plans this year: number of hours per child.** This is a measure of the quality of service that the child can expect from their GAL volunteer.

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 using a sample case study. Our training staff have developed 15 minute webinars on key topics for new staff and for remediation. These webinars are now being recorded and will be available online for future trainings.
- Our training staff have also developed an SCGAL training manual, giving step by step instructions for all procedures including screen shots.
- 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. Regional Supervisors have been trained in new audit procedures. The ETO audits can now be done remotely, allowing more audits to be performed, and giving prompt feedback to counties on areas that need correction.
- Data security of our case data is ensured by being backed up off site by Social Solutions. It is web based and Social Solutions has a tiered backup procedure. So they have more than one backup of our data.
- For the remaining data that resides on desktop computers in the county offices, each staff member backs up at the close of each day and this is sent to the office host computer. The staff member that has the host computer backs up their data every week and takes the backup device off site.

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. EPMS performance review findings give individuals specific areas of improvement for the coming year.

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 accessible by all GAL staff 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 on a shared drive, accessible to GAL 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?

- 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
- The state office assists with difficult case resolution
- General Counsel conducts legal research and provides support to county GAL contract attorneys.
- Grants writing and management and data collection is coordinated through the state office.
- The remote offices are organized by judicial circuit. Each circuit, with exception of the 5th Circuit due to current vacancy, 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 to aid in serving all children in an effective and proficient manner
- Perform data collection and extrapolation,
- Write and teach well,
- 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 County Operations Manager and the Grants Administrator. The County Operations Manager was created this year in order to bring a unified approach to operations throughout the state.
- Using data measurement in a more systematic approach to management has brought better accountability on the county level, and ensured that standards are applied fairly statewide.

Volunteers are considered part of the GAL team.

- The volunteer application asks each applicant if there are other areas besides being the GAL for which the applicant would like to volunteer.
- Volunteers assist with training
- Volunteers act as speakers for recruitment purposes

- Volunteers have designed and implemented a study on court continuances
- Perform clerical duties.
- Aid GAL in a host of other tasks and endeavors that promote the mission of the agency.

GAL contract attorneys are considered part of the GAL team and they provide legal representation to all GALs in the 45 counties served by the GAL Program.

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 continuing legal education (CLEs) and Coordinators received required continuing education.
- Regional and state meetings are used to distribute best practices and increased job skills. Email, websites, volunteer newsletters, staff newsletters, and conferences attendance contribute to knowledge sharing.
- The OEPP Human Resources Director has provided all supervisory staff with Supervisor Training. All staff members attended Regional Training on OEPP Disciplinary and Discrimination Policies, and Time Management Skills. Other topics covered during regional meetings included use of SMART goals in county planning, and documentation of IV-E training hours.
- Web meetings are now being used to communicate training information. Web meetings were held this year in each region to share information in the development of county plans. All coordinators were given the opportunity to share their plan in progress, and receive guidance and ideas from other staff members.

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. **The staff retention rate was 89% this fiscal year.**

Barriers to retention center around the content of the work. Child abuse and neglect can be difficult to deal with on a day-to-day basis. Very high caseloads in some counties will affect retention rates.

5.4 How do you assess 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 2,600+ volunteers supervised by a staff of 84 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 and Circuit Coordinators evaluate volunteer performance after every case closure. Volunteers voice their thoughts about the support they receive on an on-going basis.
- The EPMS of OEPP gives every employee a chance to review annually his or her performance. This year, EPMS evaluations were updated to incorporate objective measurements of best practices in county management. All staff members now have increased focused on the specific objectives they need to accomplish in their duties, and how those will be measured.
- 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.
- GAL Program enters into one-year contracts with attorneys for GAL representation. The GAL Program consults with county/circuit coordinators and regional supervisors before entering into or renewing contracts. Contracts set forth the responsibilities of attorneys and the GAL Program and include provisions that allow for early termination by both parties in certain circumstances.

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?

- Senior leaders attended the Franklin Covey Focus Training on Accountability this year for leadership development.
- Continuing education provides the opportunity for knowledge and skill expansion. An interactive case study training was introduced this year for staff and volunteers. This gave practical knowledge in case management skills. Additional modules are being developed for advanced training topics.
- 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.
- 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.

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.
- The OEPP Director also completes Time Management Training for all staff members at Regional Meetings.
- 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.

- Access to Webinars and Web Meetings have offered an additional avenue for training that is more cost effective.
- The Children's Law Center (CLC) conducts training for contract attorneys on topics pertinent to child welfare and evolving legal issues. The CLC consults with the Program's General Counsel and contract attorneys about areas of interest.

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

Acquiring 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 conduct more efficient case resolution.
- Well-trained staff can manage a greater number of volunteers and cases.
- Knowledgeable employees recruit and produce well-trained volunteers, who feel secure in performing their duties.
- Well-trained staff conduct more effective pre-service volunteer training, which is the first and best volunteer retention tool.
- GAL staff members receive specialized training for teaching adult learners, which enables the volunteers to listen and learn more attentively.

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.
- Evaluations are completed after all pre-service and continuing education sessions for staff members and volunteers.
- The evaluations are reviewed by senior staff members and used to plan future sessions.

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** and staff members empower the volunteers to be the voice for abused and neglected children through comprehensive training and supportive case management, while ensuring that volunteers understand the boundaries of the role.
- GAL staff strives to develop the advocacy potential of our volunteers by staffing cases with them to encourage critical thinking and assisting them with questions.
- Circuit and County Coordinators provide case oversight before volunteer reports are submitted to the court.

- The general counsel ensures that contract attorneys have opportunities for continuing legal education that is both pertinent and fundamental to effective GAL representation.
- The general counsel is also a consistent and available resource for contract attorneys.

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?

All of the following are considered important measures of stability for the Program.

- Employee retention is measured as part of self-assessment by NCASA and for our own information.
- Employees are part of the county planning process and speak to their own satisfaction during annual reviews.
- GAL Program attorney contracts are for one year with a renewal option and have early termination provisions available to both the GAL Program and the attorneys.
- Senior staff members review and discuss retention of employees, volunteers and contract attorneys.
- Grievances and dissatisfaction voiced by staff, volunteers or contract attorneys 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 84 employees who are housed in 37 locations. Each location has a small number of paid positions, with 16 offices having one staff person only.

- 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 State 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 each hearing
 - Monitor the child(ren)'s progress throughout the pendency of the case
 - Monitor the defendants' progress towards reunification throughout the case
- **Training and assisting contract attorneys to:**
 - Promote timeliness of judicial proceedings and other legal processes.
 - Heighten accountability of other parties during pendency of cases.
 - Gain knowledge and expertise in child welfare law and related judicial proceedings.
- 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).

GAL staff ensures that these processes are used by analyzing results in the following manners:

- Positive volunteer performance is produced through pre-service 30-hour training, continuing education, and staff supervision.
- We ensure that all GAL staff functions are performed by providing training through the Program.
- GAL Senior supervisory staff perform audits at all GAL locations.
- Child advocacy best practices are the core for GAL 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 methods for incorporating all of the above factors is by 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, housed within the Office of Executive Policy and Programs, it can consolidate production of training materials, benefit from an in-house

finance department, human resources department and Information Technology department, which allow GAL to 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 houses a grants coordinator, who writes and manages grants that provide new computer equipment, travel funds and training for the entire state program. These grants have been instrumental in providing new technology which includes such items as web cameras, and a subscription to GOTO Meeting/Webinars, which allows staff to speak face to face via the computer and eliminates at least 50% of the expenses incurred by actually traveling to 45 counties for meetings. This has enabled GAL to meet with appropriate frequency and consistency. It also allows GAL senior staff to provide assistance needed in an expedited manner, eliminating cumbersome travel logistics that previously prolonged the time needed to actually arrive at the county office which needed assistance.

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:

- Pre-training evaluations
- County audits,
- County Plan production,
- Post-case evaluations
- 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.
- Maintaining and improving technology and all other internet-based functions are done with the support of Information Technology division of OEPP.
- Staff development, training, evaluations, disciplinary and all other related matters are done by Human Resources division of OEPP.

The measures listed above performed by the GAL staff, along with the above-referenced divisions of OEPP; involve working together to establish effective training and processes and procedures that ensure that staff members have the appropriate tools needed to improve the 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 of volunteers to advocate for abused and neglected children.
- IT equipment that allows for communication with remote offices purchased by grant funding, allows for increased frequency of staffing meetings, 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 and hearing frequency 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 (employees and contract attorneys); 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.
- Beginning this fiscal year (July 1, 2012 to June 30, 2013), county budgets were implemented, under the guidance of the OEPP Finance division, to capture expenditures by county. This process also allows for greater control over supply disbursements, travel expenditures and the budget management processes overall.

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 five 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	4192
09-10	8,831	4554
10-11	10,024	5400
11-12	10,441	5613

- Quality advocacy for all children who require a guardian ad litem is our key measure of mission success.
- **During this past fiscal year, The Guardian Ad Litem Program served 213 more cases this year and 417 more children, than the previous year. The number of children served and cases handled by GAL has steadily increased since 2007.**
- There is no comparable organization within the state. The South Carolina GAL Program is required by statute to accept 100% of the cases. Starting July 1, 2010, by order of the Supreme

Court of South Carolina, the South Carolina Program began accepting 100% of all new cases of abused and neglected youth who came into the foster care system.

- 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.

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.

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

	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
New Cases						
Appointed	52%	58%	69%	77%	100%	100%

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

- Approximately 75% of expenditures in FY11-12 were spent for staff salary and fringe.
- Nearly another 13% was expended on attorney contracts for representation of the volunteers in court. Consistent legal representation by skilled attorneys is an integral part of quality child advocacy. The GAL Program's attorney contract system makes this possible. 43 GAL contract attorneys appeared at 8,417 hearings for FY 11-12, saving the family court from having to appoint thousands of attorneys pursuant to court rules of indigent representation. Historically the SC Commission of Indigent Defense (CID) 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 without CID funding because the CID has had no funds for this provision. A portion of attorney contracts, 28%, is paid with pass through IV-B funds from DSS. This is a valuable contribution to child advocacy but does not fully fund the costs of attorney representation. The GAL Program must absorb the remaining expense. Attorney contracts in FY11-12 totaled just under \$700,000. This was a savings to the state as a whole by the amount of \$150,000. Payment at the CID rate would have cost the state nearly \$850,000. While the GAL attorney contract system saves the state money, it does so by straining the Program's own resources. Many of the GAL attorneys have also made financial sacrifices: 35% of GAL attorneys agreed to be paid less in the coming fiscal year, while 42% agreed to represent GALs at the same amount as they did in FY11-12. Those contracts which increased did so only to make up for substantially increasing caseloads. 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 included rent, telephone, utilities, travel, insurance and equipment contracts were 12% of the funds expended.
- The entire Program's operational expenses less attorney contracts were \$661,051.

- Divided among the one state office and 37 county offices, the cost per office was \$17,396.
- The average monthly rent for county office space in FY 11-12 was \$542.

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

Table 7.3-1 Operating Expenses for the Guardian ad Litem Program

	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
Operating Expenses	\$824,669	\$644,957	\$798,613	\$692,336	\$648,162	\$661,051

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. Ten individuals left the Program due to retirement or for other reasons. There are 5 unfilled vacancies as of June 30, 2012. The Program's retention rate was 89% for FY11-12.

Tables 7.4-1 & 7.4-2 provide the number of employees and volunteers in the last five fiscal years and the number whom the GAL Program retained. Volunteer retention is important to the ability of the GAL Program to achieve the mission and was 82% in FY 2011-2012.

Table 7.4-1 Guardian ad Litem Staff Retention

Fiscal Year	Total Employees	Employees Retained	Retention Percentage
FY 07-08	83	74	89%
FY 08-09	84	72	86%
FY 09-10	90	79	88%
FY 10-11	99	85	85%
FY 11-12	94	84	89%

Table 7.4-2 Guardian ad Litem Volunteer Retention

Fiscal Year	Total Volunteers	Volunteers Resigned	Volunteers Retained	Percentage Retained
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%
FY 11-12	2661	469	2192	82%

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%
FY 11-12	5613	191	3%

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 has been consistently assisting Social Solutions, the developer, with creating reports that will yield outcome tracking while GAL staff converts to the new system.

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.
- The program is undergoing another cycle of self-assessment at this time.
- Community support and response to recruitment efforts spearheaded by the Public Awareness Staff is evident in the growing number of volunteers and supportive media coverage at the local level in each county.
- Volunteer guardians ad litem and staff are required to operate subject to law and court rules. Laws governing the responsibilities of a GAL, confidentiality, and mandated reporting in child welfare cases govern Program work.
- GAL contract attorneys and the GAL Program general counsel help ensure that GALs and staff adhere to law and court rules.

2011-2012 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Economic Opportunity

Section I - Executive Summary

1. Organization 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 and one program funded by South Carolina energy companies. Additionally, the OEO is in the process of closing out two grant programs that are ending due the expiration of federal stimulus funding. 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 2011-2012

- C. The OEO continued to refine the statewide web-based centralized client intake system for community action agency subgrantees through continued training, review, Help Desk support and system enhancements.
- D. 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 seven Energy Efficiency Technical School training centers.
- E. The OEO Weatherization and Weatherization ARRA grant shops weatherized 806 and 2,973 dwellings, respectively, for a total of 3,779 dwellings weatherized.
- F. The Emergency Solutions Grants Program (ESGP) has provided financial and non-financial services to a total of 10,830 homeless individuals, individuals at-risk of becoming homeless and/or victims of domestic violence.

- G. The Homelessness Prevention and Rapid re-housing Program (HPRP) has provided services to 9,431 individuals.
- H. The OEO disbursed a special allocation of \$700,000 in Low Income Home Energy Assistance Program (LIHEAP) funds for assistance to elderly & disabled South Carolinians and assisted a total of 60,582 clients.
- I. 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.
- J. The OEO, working with the statewide data base provider, DBA, initiated, developed and trained all subgrantees in an online budget and financial reporting system. Effective 2012, the CSBG, LIHEAP and WAP programs' subgrantees are required to submit budgets and financial reporting using the online system.
- K. Effectively managed a 33% reduction of agency staff commensurate with the expiration of multiple grant-funded temporary positions.

3. Key Strategic Goals for Present and Future Years

- 1. Make South Carolina a benchmark state in the field of community action.
- 2. Ensure all agency performance activities are completed according to set deadlines.
- 3. Ensure that all subgrantees are performing grant activities in accordance with federal and state regulations.
- 4. Help agencies adapt to a reduction of resources due to the phasing out of ARRA and a likely reduction of other federal funding.
- 5. Continue to identify and eliminate waste, fraud, and abuse in subgrantee agencies.

4. Key Strategic Challenges

The OEO must continue to support subgrantees with efficient and meaningful monitoring, training, support, and programmatic guidance.

- Working with subgrantees to encourage and implement best practices among South Carolina's Community Action Network and Emergency Solutions agencies.
- Ensuring subgrantee 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.

- Completing the successful close-out of recently expired grants with the associated reduced staffing 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:

The OEO serves as the state oversight entity for federal grant funds aimed at increasing the self-sufficiency of low-income individuals and families. As the oversight entity, the OEO is responsible for the following: preparation of the state plans, monitoring of grant expenditures and activities by subgrantees, and training and technical assistance. The OEO administers four federal grants, three of which have received additional funds as part of the American Recovery and Reinvestment Act in recent years. The ARRA grants are administered as separate grants but serve the same people and functions except in the case of HPRP which focused on homelessness prevention rather than emergency shelter. The HPRP stimulus grant expired 7/14/12 and the WAP ARRA grant expires 9/30/12.

- ❖ 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.
- ❖ Emergency Solutions Grants Program (ESGP) – The US Department of Housing and Urban Development funds client assistance and operating expenses for shelters serving the homeless and victims of domestic violence.
- ❖ Homeless Prevention and Rapid Re-housing Program (HPRP) – The US Department of Housing and Urban Development funded client assistance to prevent homelessness as a stimulus supplement to the ESGP.

CSBG, LIHEAP, and WAP services are delivered via a network of 14 community action agencies (CAAs) which serves 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, SC Head Start Collaboration Office

5. Operation locations

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

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

16 Classified 1 Unclassified _____ Contract
 _____ Temporary 2 Temporary (Grant) _____ Temporary

7. The regulatory environment under which your organization operates

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

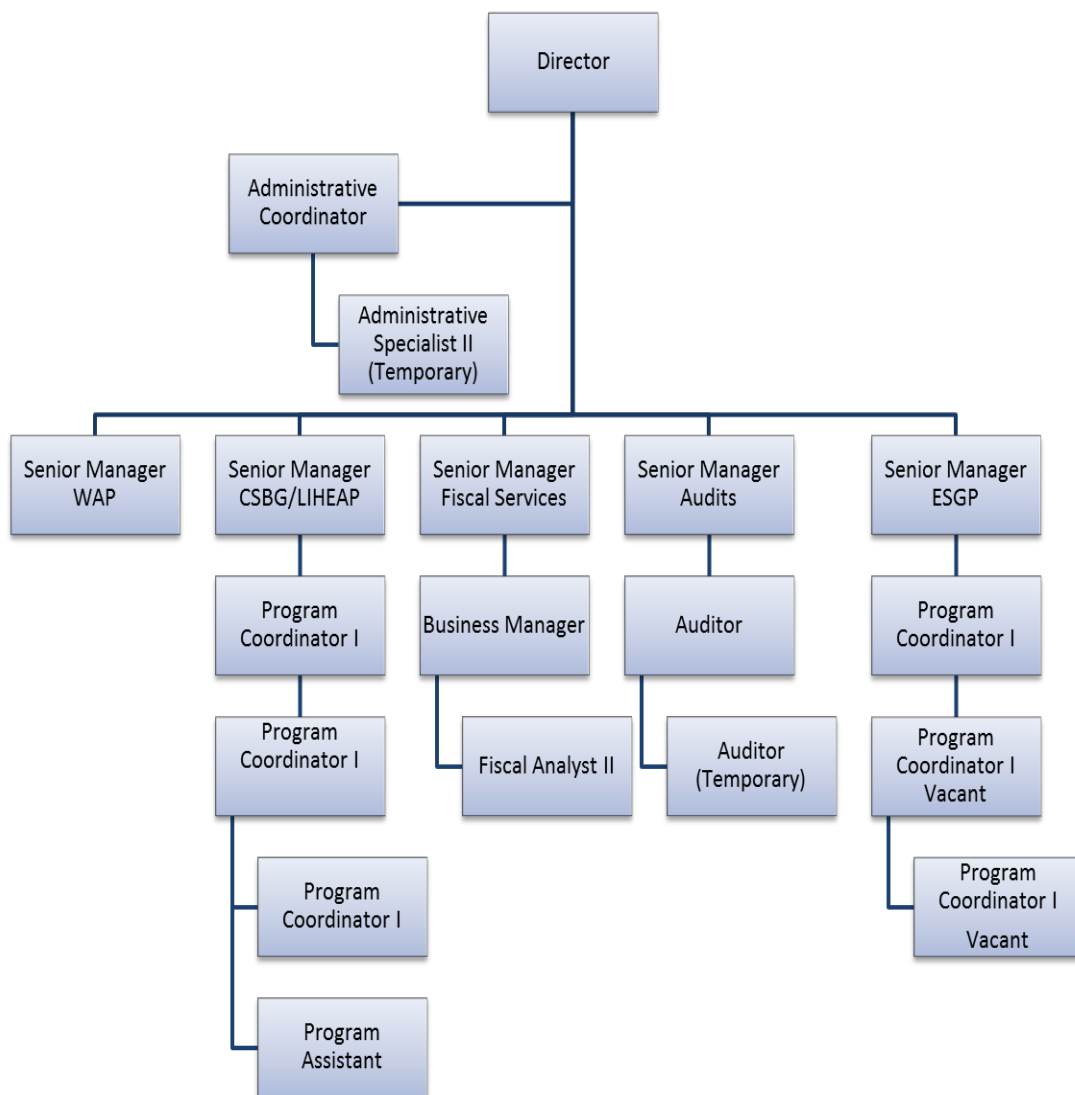
8. Performance improvement systems

OEO performance is measured internally through deadlines for the submission of State Plans, budgets, and federal reports. Internal performance by individual staff members is monitored and gauged using the state EPMS. OEO performance with regard to monitoring, training and technical assistance is also reflected in the performance of subgrantees and the outcomes achieved by clients served. For example, monitoring reports provide performance data for areas of compliance and

non-compliance. Recommendations for areas of concern are shared with subgrantee staff and reports are used to ensure corrective plans of action are followed. Monitoring reports also highlight best practices and identify training needs. In addition, data is collected on outcomes achieved by clients served, including the number of clients whose emergency situations are alleviated, the number of clients obtaining a higher education, and the number of clients gaining employment.

9. Organizational Chart

Office of Economic Opportunity



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 968,497		\$ 938,419		\$ 1,195,229	
Other Operating	\$ 285,414		\$ 482,303		\$ 3,459,528	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions	\$86,719,638		\$ 67,859,268		\$ 67,959,405	
Fringe Benefits	\$ 320,505		\$ 299,992		\$382,473	
Non-recurring						
Total	\$88,294,054		\$ 69,579,983		\$ 72,996,635	

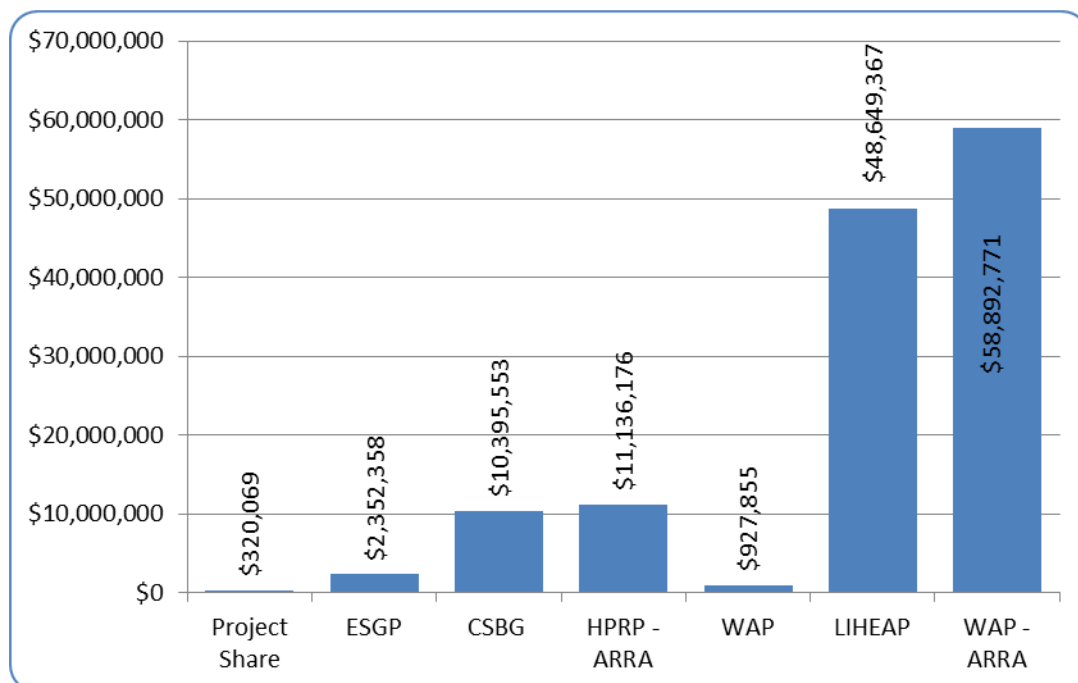
Other Expenditures

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 Number and Title	Major Program Area Purpose (Brief)	FY 10-11 Budget Expenditures	FY 11-12 Budget Expenditures	Key Cross References for Financial Results*
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 - 93.569, LIHEAP - 93.568, WAP - 81.042 & HESG - 14.231). Other funds are the Project Share funds.	State: 0.00 Federal: 87,884,944.00 Other: 409,110.00 Total: 88,294,054.00 % of Total Budget	State: 0.00 Federal: 69,260,986.00 Other: 318,997.00 Total: 69,579,983.00 % of Total Budget:	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.

PY2011 - Funding by Program



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 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 subgrantees. Organizational values are facilitated through an open door discussion policy that encourages empowerment and innovation. Ethical behavior is encouraged through internal controls routing work output through each division manager.

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

OEO staff members receive regular customer-oriented trainings, to include workshops on changing federal regulations to assist subgrantees with compliance, train-the-trainer, and through the exploration of other states' best practices. Senior staff leads by example in placing emphasis on being responsive to constituents and subgrantees.

- 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. Subgrantees 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 subgrantee 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 homeless 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 subgrantees.

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

The OEO encourages the use of 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 strategies objectives?

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

1.9 How do senior leaders 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. Subgrantees are motivated and rewarded through an annual awards program recognizing achievement and best practices.

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

OEO is an active member of the National Association of State Community Services Programs and the National Community Action Partnership. In addition, the OEO donates all old technology equipment to community action agencies and emergency shelters to support operating activities. Involvement is based on support for anti-poverty initiatives.

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

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

- a. your organization's strengths, weaknesses, opportunities and threats;**
- b. financial, regulatory, societal and other potential risks;**
- c. shifts in technology 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 subgrantees.

Section III Strategic Planning Chart for the Office of Economic Opportunity

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 11-12 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 subgrantees 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 identified in your Executive Summary?

Strategic objectives are designed to overcome challenges by providing tangible assistance to subgrantees 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 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 subgrantees, and meetings with subgrantee leadership through the SC Association of Community Action Partnerships.

2.5 How do you measure progress on your action plans?

Progress is measured internally through monthly statistical reports on numbers of clients served through specific grants. Community action agency subgrantee progress is measured through monthly financial status and program status reports, quarterly ROMA reports, and an annual Information Systems Report.

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

The strategic planning process is evaluated through 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 an address for that plan on the website.

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

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

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

Customer/Stakeholder	Requirements
Federal funding sources	Requirements are determined through enabling legislation in the Code of Federal Regulations and through Information Memoranda issued by the funding source. Standard requirements include submission of State Plans for review and accurate reporting of OEO and subgrantee expenditures and program activities.
Subgrantees: 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 energy companies	Requirements include timely vendor payments and accountability for supplemental funds. Monthly reporting by the subgrantee 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. Subgrantee needs and expectations are assessed through face-to-face meetings, polls, and public hearings on draft state plans. Client needs and expectations are delineated and updated through the annual local needs assessment process.

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

Services are accessed via a network of 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 and 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 subgrantees to ensure accurate reporting. Subgrantees submit monthly Financial Status reports to monitor local grant expenditures. Quarterly and annual data collection is governed through the Results Oriented Management and Accountability (ROMA) national indicators set by the federal government. Agencies report outcomes on predetermined national indicators to show progress in achieving performance target outcomes associated with those indicators. Performance target outcomes are determined at the subgrantee level based on their needs assessment and approved by the OEO.

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

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

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

OEO key measures reviewed and rate of review

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 homeless whose immediate and long-term needs are addressed	quarterly and annually

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

Comparative data is obtained through national associations for OEO administered grants that post 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 subgrantee 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?

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

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

Staff are cross-trained within divisions to ensure retention of organizational and employee knowledge. Manuals and/or administrative guides have been developed outlining the general procedures and requirements of each grant. Staff 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 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 Managers 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 locations? 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 assess 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 subgrantee 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. Subgrantee training needs are assessed through the monitoring process. Subsequent improvements in subgrantee processes and performance are used to assess the effectiveness of training. Employees are required to justify training requests in terms of how they contribute to the

attainment of goals for the organization.

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

Managers are expected to set an example for high performance and are held accountable through the EPMS process for achievement of action plans. To obtain this standard, they are allowed the opportunity to make decisions and supervise their grant divisions, with support of the director. The program's mission and goals are shared with managers, who in turn help to refine them. Ethical practices are set by leadership 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 subgrantees via technical assistance memoranda. State procurement guidelines are followed

by the OEO and subgrantee procurement guidelines are modeled after the state guidelines to ensure costs are competitive.

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

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

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

Processes are evaluated through the monitoring assessment tools for each grant and feedback from subgrantees and the federal government. Internally, grant managers conduct on-going assessments of service delivery to subgrantees 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 subgrantee application budgets and work plans, monitoring, and training and technical assistance. These activities are evaluated annually in the development of new state plans by examining obstacles from the previous year and best practices of other states. 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 subgrantees. 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 service performance that are important to your customers? How do your results compare to those of comparable organizations?

The primary mission of the OEO is to aid subgrantees in administering programs that help move individuals out of poverty and into self-sufficiency. The OEO monitors subgrantees for grant compliance and provides training and technical assistance. All agencies were monitored at least once during the 2011 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.

Subgrantees reported outcomes relating to mission accomplishment as follows:

Table 7.1.1 CSBG Assistance

<u><i>Goal: Low-income People Become More Self-Sufficient.</i></u>	# Achieving Outcome PY2009	# Achieving Outcome PY2010	# Achieving Outcome PY2011
Unemployed and obtained a job	2,237	4,748	1,437
Obtained pre-employment skills/competencies and received training program certificate or diploma	2,065	2,803	316
Obtained safe and affordable housing in support of family stability needed to gain or retain employment	615	1,949	1,406
<u><i>Goal: The conditions in which low-income people live are improved through increased affordable essential services.</i></u>	# of Opportunities or Community Resources Created or Preserved PY2009	# of Opportunities or Community Resources Created or Preserved PY2010	# of Opportunities or Community Resources Created or Preserved PY2011
Accessible, safe, and affordable child care or child care placement opportunities for low-income families created or saved from reduction or elimination	2,039	3,274	3,828
<u><i>Goal: Emergency Needs of Households in Crisis are Ameliorated.</i></u>	# Receiving Assistance PY2009	# Receiving Assistance PY2010	# Receiving Assistance PY2011
Emergency Vendor Payments, including fuel and energy bills and rent/mortgage payments	56,737	162,388	58,574

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
2011	806	2,973

The OEO funds equipment and pays tuition to support Weatherization training programs at our state's technical colleges. As of July 1, 2012, the following seat counts have been delivered to the CAAs and their approved subcontractors, since the program began in 2009:

EPA Certified Renovator (CR) certifications	140
USDOE Lead Safe Weatherization (LSW)	294
Hot Climate – Whole House Mobile3	359
Hot Climate – Whole House Site Built	373
BPI Envelope Professional	31
BPI Building Analyst	62
BPI – Insulation and Air Sealing	13
BPI – Manufactured Housing	10
Combustion Appliance Safety	106
Safe Work Practices	278
Heating Systems Fundamentals	37
Duct Testing & Air Sealing	34
Ventilator Standards	151
Respirator Safety	19
Total Students	1,907

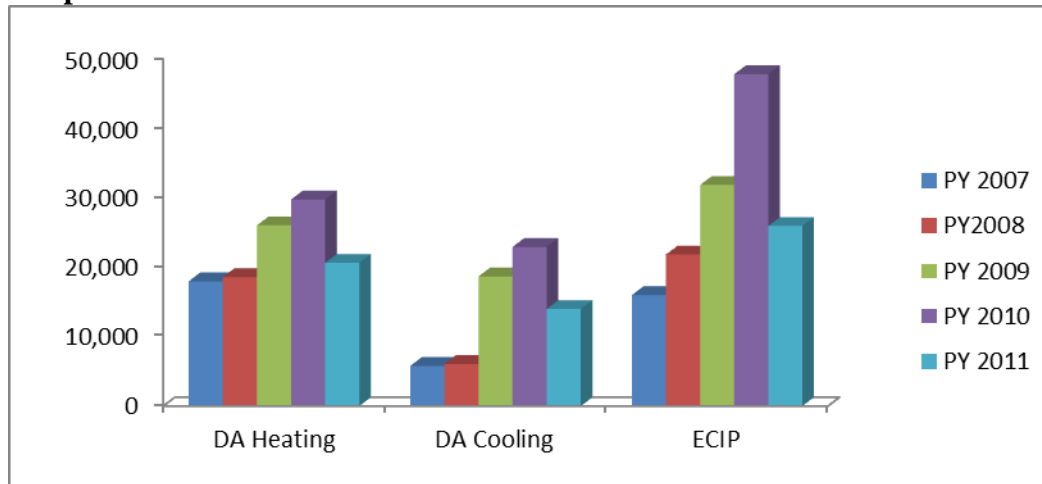
The CR and LSW classes are made available to ensure that USDOE lead safety standards are met for both workers and clients in the weatherization process. The Hot Climate classes are designed to produce quality results by tightening and sealing site built houses and mobile homes to reduce energy consumption 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 2011 was 189 houses. There were 806 homes completed. In the final year of the three-year ARRA weatherization grant, 2,973 houses were completed. Altogether, 3,779 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 (DA) and Emergency Crisis Intervention (ECIP). In Program Year 2011, DA Heating served 20,636 clients, DA Cooling served 14,000, and the Emergency Crisis Intervention Program served 25,946. Pursuant to the LIHEAP State Plan, subgrantees must show priority in service to the elderly, disabled, and households with a high energy burden, high energy usage, or children under the age of five. The following table shows service for the past four years – 2007, 2008, 2009, 2010, and 2011.

Graph 7.1.3 LIHEAP Assistance



During FY 10-11, Emergency Solutions Grant (ESG) Program funds were used to provide operating expenses for 28 emergency shelters and support services for more than 10,830 individuals, thereby alleviating their emergency situations and helping to move them toward more stable housing. Financial services were provided to 1,695 individuals, while 9,135 of these individuals received non-financial services such as emergency or transitional shelter services. Financial services allowed 1901 individuals statewide to maintain permanent housing.

During FY 10-11, 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 was September 1, 2009- July 14, 2012 and the grant to South Carolina was \$11,136,176.

Chart 7.1.4 Homeless Prevention & Rapid Re-housing: September 1, 2009 – July 14, 2012

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	661	8,280	261	3,336	115	1,219	51	525	743	9,431	310	3,860
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	527	6,772	221	2,716	85	844	41	407	612	7,616	262	3,123
deposits	64	1,513	33	563	45	853	24	387	109	2,366	57	950
Utility payments	62	1,957	26	758	20	373	9	167	82	2,330	35	925
Moving cost assistance	8	33	2	11	0	36	0	17	8	69	2	28
Motel & hotel vouchers	3	30	1	13	0	72	0	34	3	102	1	47
Total-Financial Assistance	575	8,324	242	3,277	101	1,037	46	486	686	9,361	288	3,763
Housing Relocation & Stabilization Services												
Case management	548	8,003	230	3,108	98	968	43	475	646	8,971	273	3,583
Outreach and engagement	61	1,687	23	601	9	46	3	50	70	1,733	26	651
Housing search and placement	56	637	19	228	22	250	10	94	78	887	29	322
Legal services	0	2	0	2	0	2	0	2	0	4	0	4
Credit repair	0	68	0	19	0	36	0	10	0	104	0	29
Total-HRS Services	628	8,003	261	3,336	115	1,219	49	525	743	9,431	310	3,860
Section 3: Financial Information												
HPRP Expenditures	Homelessness Prevention				Homeless Assistance				TOTAL			
	Q		GTD		Q		GTD		Q		GTD	
Financial Assistance	\$349,370		\$5,312,518		\$64,322		\$994,296		\$413,692		\$6,306,814	

Housing Relocation & Stabilization Services	\$233,308	\$2,658,269	\$72,089	\$911,286	\$305,397	\$3,569,555
Data Collection & Evaluation					\$34,212	\$444,458
Admin					\$104,446	\$522,808
TOTAL	\$582,678	\$7,970,787	\$136,411	\$1,905,582	\$857,747	\$10,843,635

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

The OEO instituted a system in-house of cataloging complaints for service delivery per Community Action Agency. The number of complaints was less than 1% of clients served. 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 subgrantees, 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 10-11 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.

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.

2611 Forest Drive, Suite 115, Columbia, SC 29204

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

2611 Forest Drive, Suite 115, Columbia, SC 29204

ESG 2011 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 Lancaster

P.O. Box 854, Lancaster, SC 29721

Family Promise of York

404 E. Main Street, Rock Hill, SC 29730

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

Pee Dee Community Action Agency

2685 S. Irby Street, Florence, SC 29505

****Confidential****

Pee Dee Coalition

220 South Irby Street, Florence, SC 29503

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

Samaritan House

1580 Middleton Street, Orangeburg, SC 29115

Salvation Army – Aiken

322 Gayle Avenue, Aiken, SC 29801

Salvation Army – Columbia

P.O Drawer 2786, Columbia, SC 29202

Salvation Army – Greenville

417 Rutherford Street, Greenville, SC 29609

****Confidential****

Sistercare

P.O. Box 1029, Columbia, SC 29202

SPIHN

899 S. Pine Street, Spartanburg, SC 29303

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

2011-2012 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 2011-2012

- L. During FY 2011-2012, OSMBA processed 159 applications for certification eligibility and more than 200 minority Utilization Plans from agencies.
- M. 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.
- N. In conjunction with the SCEIS staff, OSMBA was able to develop an online state agency Minority Business Enterprise (MBE) expenditure reporting system. The system allows us now to receive electronic reports and to begin phasing out paper reports.
- O. During its outreach efforts, OSMBA staff attended several training workshops that were useful in determining and deciphering information provided to our stakeholders. Also, OSMBA gathered information and training materials related to available services, contracting opportunities and procurement procedures.
- P. During FY 2011-2012, OSMBA implemented a new database for processing applications. The new database allows us to keep track of new certifications, denials, and pending applications, which will allow OSMBA to better track potential stakeholders that are seeking certification.
- Q. OSMBA has begun a process to more accurately notify stakeholders of bids. Project for bid that are sent to our office, have been forwarded to potential vendors who fit the need of the project
- R. During FY 2011-2012 OSMBA reported that the average time from receiving a completed application, to being notified of a decision was 31 days. In FY 2011-12 we were able to reduce it even further. Now the average time to be notified of a decision is 27 days.
- S. OSMBA in conjunction with SCDOT was able to agree upon a Memorandum of Understanding. The MOU allows stakeholders who apply for DBE certification with SCDOT, to now have the option of applying for WBE/MBE certification, simultaneously.

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.
- OSMBA is planning on doing a quarterly newsletter for our vendors and state agencies. The newsletter will be a vehicle to keep certified vendors and state agencies up-to-date on projects for bid, newly certified vendors and other office news.

B. Quality Assurance

- In the past fiscal year, OSMBA developed a new database to ensure better tracking of incoming applications. The database makes it easier for the staff to keep track of the documents stakeholders have sent in, along with the amount of time the application has been waiting for a decision.

4. Key Strategic Challenges

- Limited resources to conduct more outreach services for stakeholders, such as training & awareness.
- Increase cooperation and coordination among stakeholders to support the services provided by OSMBA to its customers.
- Improve the public image of OSMBA and increase awareness of its programs.
- Improve the OSMBA website to be a leading resource for certification process and link to available trainings for small minority and women-owned businesses.

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

The expected outcome of preparing this report is the constant effort to improve OSMBA's efficiency of operations while adhering to its goals, the Governor's Office of Executive Policy and Programs' (OEPP) Strategic Plan and the Governor's values.

Section II - Organization Profile

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

Table II.1.1 Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Office of Small and Minority Business Assistance	<p>Administers South Carolina's minority certification program. OSMBA also supports state agencies' missions and goals by providing assistance in developing policies and procedures to facilitate awarding contracts to small and minority firms. Activities are focused on helping small and minority businesses to:</p> <ul style="list-style-type: none"> • Maximize contracting opportunities • Develop organizational alliances to provide technical assistance • Develop and sponsor procurement and management training • Encourage participation in the procurement process • Serve as a point of contact for information. 	<p>Residents of South Carolina State's Small, minority and women-owned businesses Government agencies Procurement officials Business and contracting communities</p>	<p>Government agencies Procurement officials Business and contracting communities</p>

5. Operation locations

Administrative offices are located within the Edgar Brown Building, Columbia, SC 29201. However, our business site visits, outreach and training programs are conducted in all counties of South Carolina.

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

3 Classified

0 Unclassified

0 Contract

0 Temporary

0 Temporary (Grant)

0 Temporary (time-limited)

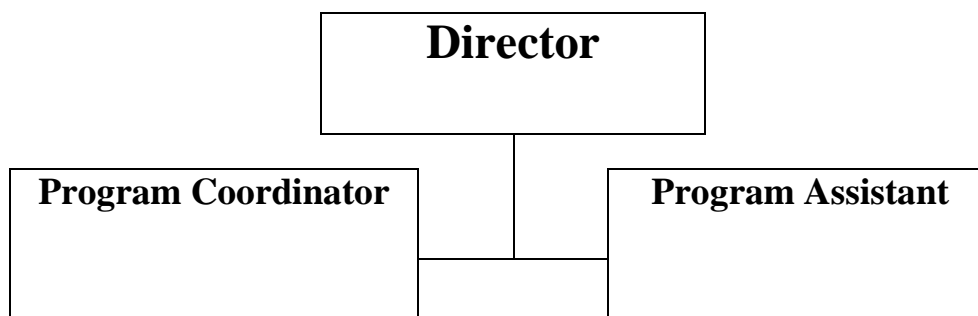
7. The regulatory environment under which your organization operates

South Carolina Code of Laws Consolidated Procurement Code and Regulations; US Code of Regulation 13 C.F.R. Section 121 (June 30, 2006) 49 CFR Part 26, Subpart D (2006).

8. Performance improvement systems

Participants of outreach activities are surveyed to provide feedback on services and programs. Internally, staff workload is monitored to measure output of services rendered. Monitoring reports highlight best practices and identify training needs. Agency reports measure the State's overall effectiveness in the implementation of the MBE program and the success of our outreach efforts.

9. Organizational chart



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 11-12 Appropriations Act	
	Total Funds	General Funs	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 54,876	\$54,877	\$ 78,709	\$ 78,709	\$ 84,642	\$ 84,642
Other Operating	\$ 13,983	\$13,983	\$ 11,381	\$ 11,381	\$ 13,062	\$ 13,062
Special Items	\$ 0	\$ 0			\$ 0	\$ 0
Permanent Improvements	\$ 0	\$ 0			\$ 0	\$ 0
Case Services	\$ 0	\$ 0			\$ 0	\$ 0
Distributions to Subdivisions	\$ 0	\$ 0			\$ 0	\$ 0
Fringe Benefits	\$19,962	\$ 19,962	\$ 24,676	\$ 24,676	\$ 27,932	\$ 27,932
Non-recurring	\$0	\$0			\$0	\$0
Total	\$ 88,822	\$ 88,822	\$114,766	\$114,766	\$ 125,636	\$ 125,636

Other Expenditures

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

11. Major Program Area Chart

Program	Major Program Area Purpose	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross Reference
Office of Small & Minority Business Assistance (OSMBA)	To administer the State of South Carolina's minority certification program. Act as an advocate for the State's small & minority businesses.	State	88,822	State	114,766	See Section III, category 7 Area 7.3
		Federal		Federal		
		Other		Other		
		Total	88,822	Total	114,766	
		% 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 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 surveys annually at the Trade Fair and offering community training/outreach 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 regular communication and a review of performance expectations.
- Conducting internal team review of applications, which serves as a cross training tool for existing staff. Also, staff members are aware of applicants' needs and can address them with telephone contact and/or letters.

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

Honest and open dialogue with our customers, stakeholders and partners allows information to flow to the Governor and/or legislators from the Directors of Administration or Constituent Services.

1.4 What key performance measures do senior leaders regularly review to inform them of needed actions?

OSMBA Director reviews the following quarterly and annually: the number of certification applications received and processed within departmental deadlines, onsite visits conducted within newly established deadlines, the number of certifications awarded to MBE firms; the types of businesses that apply for certifications; the number of OSMBA outreach and training activities; the number of attendees of outreach programs; the number of reports received from state agencies; the number of agencies submitting annual MBE goals and their compliance; the actual expenditures by state agencies with MBE firms; the number of MBE firms state agencies contract with during each fiscal year; and the comparison of actual expenditures with MBE firms to other fiscal years

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

The primary mechanism used for obtaining feedback regarding leadership effectiveness is the Employee Performance Management System (EPMS) process. Additional feedback comes from employee satisfaction surveys, staff meetings, exit interviews, and individual dialogue with employees. By listening to and reviewing feedback from staff and customers, senior leaders make adjustments in internal process, directives and action plans.

1.6 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.

1.7 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.

1.8. How do senior leaders create an environment for organizational and workforce learning?
With the OSMBA staff being small, there are many challenges. Employees are encouraged to engage in any training that is offered, along with having an open door policy with the director.

1.9. 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 program effectiveness.

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

Senior leaders review plans, goals, and objectives with the Director of Administration on a monthly basis. Action plans are tracked by using statistics and reports of OSMBA and agencies activities.

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

Communication of OEPP's Strategic Plan is provided by the Directors of Administration and Constituent Services. Senior leader has immediate access to the Governor's Office Directors to ensure communication and coordination. Some of the methods of communication include performance reviews, staff meetings, office website, published statistical annual reports and other means of communication with stakeholders and partners.

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

OSMBA measures success by comparing the current activities to those of previous years. The following indicators measure success:

- A. Combining all agencies expenditures with certified minority firms during the fiscal year, meeting and/or exceeding the 10% goal. Realizing an increase in the State's expenditures with minority businesses and the number of certifications awarded.
- B. Increasing each year the number of new qualified applications received for certification.
- C. Increasing in the number of attendees of OSMBA-sponsored training and networking events for business owners and agency procurement officials.
- D. Increasing in the number of procurements issued to certified minority businesses;
- E. Increasing in the accuracy of data received from agencies.
- F. Obtaining 100% compliance of state agencies submitting their reports and meeting their 10% goal of expenditures with certified businesses.
- G. Reducing wait time for processing of applications, site visits and notification of certification status.

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

Staff training will ensure proper knowledge and intent of laws affecting the program, expected conduct of staff and services available to meet the customers' needs. Challenges affecting the successful obtainment of strategic objectives are identified through the development of the organizational profile. Evaluation and improvement of processes are the result of reviewing key measures and comparing current information with previous fiscal years. In addition, feedback from stakeholders as to the success of efforts will also prompt OSMBA to re-evaluate goals, efforts and processes.

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

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

Section III – Elements of Malcolm Baldrige

Category 3: Customer Focus

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

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

Customer/Stakeholder	Requirements
OSMBA/Citizens of South Carolina	Must desire information regarding business resources and minority certification program in South Carolina.
Small, woman- and minority-owned businesses	Must need information or services from OSMBA.
State government agencies	By statute, agencies must report their expenditures with certified minority-owned businesses.
Business and contracting communities	Must be established businesses duly licensed and permitted to conduct business in the State.

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

Methods developed to facilitate monitoring changing needs include trade fairs, networking events, meetings with customers, public hearings, advisory councils, customer satisfaction surveys, and written or verbal communications. National and state level changes are noted through publications, training, and conferences. Changes in federal and state legislation affect needs and expectations. Significant trends or changes in customer service expectations and needs are discussed during management meetings internally and with major stakeholders, with service delivery excellence as a primary goal.

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

Input from our customers is received verbally through one-on-one conversations, written correspondence, emails and through our website. These options allow all customers an avenue to communicate with OSMBA.

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

Customer surveys and other communication methods such as written correspondence and verbal conversations are used to evaluate our effectiveness. Staff will assess the validity of suggestions, solicit additional feedback, research issue and solutions, then, if possible, develop methods to implement improved services or program.

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

OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. If major stakeholders input are required in the decision-making process, senior leader will include them in the discussion. When appropriate, input and approval is obtained from the Director of Administration prior to implementing any recommended improvements.

Primary methods for obtaining data on customer satisfaction include direct feedback received from the Governor, ECOS, legislators, agency directors and managers, and surveys administered during the annual Trade Fair. 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. 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, timeliness, accuracy, security and availability for decision-making?

To ensure accuracy and data quality, all work products flow from employee to director for approval. Agency reports are date-stamped upon receipt for measuring timeliness. Checks and balances are utilized to increase the reliability and quality of data. OSMBA staff received training in Ethics and FOIA requirements to ensure security of data received. Information analysis helps to ensure that customer needs drive the decision-making process.

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

Keeping our customers, strategic goals and objectives in mind, OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, and its impact on program goals and objectives of OSMBA and major stakeholders.

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

The collection, transfer and maintenance of accumulated employee knowledge are accomplished through cross-training, sharing of information and reports, and the development of on-line internal information systems. Files are kept organized and clearly labeled to eliminate interruption of operations in the event a staff member is absent or unavailable. Systems are constantly reviewed for best practices to determine whether it is user friendly and can readily provide needed information. Procedure manuals are being updated to provide instruction for current processes and systems. A flow chart tracking the certification process was developed to ensure all staff understand the process and can effectively communicate it with customers. New relevant program information is exchanged and shared with all staff. Reference and resource material are readily available for all staff to assess.

Section III – Elements of Malcolm Baldrige

Category 5 Workforce Focus

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

OSMBA’s director delegates assigned work according to staff areas of responsibility, with a focus on objectives, strategies and action plans. Staff members are provided opportunities to utilize creativity and self-initiative.

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

OSMBA staff is small, so it is imperative that all employees are familiar with the responsibilities of each other and share information so that all functions can be completed. Staff members are encouraged to share copies of handouts from presentations or trainings they have attended, disseminate pertinent information found on websites, and provide a debriefing when conducting site visits or outreach events to ensure that everyone is aware of issues that may arise.

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

OSMBA is committed to develop programs that foster individual growth for employees, identify staff for advancement, and assist in creating a diverse workplace. OSMBA makes every effort to promote from within. Employees are alerted of job openings within the office, and emails and job postings are sent out when there are vacancies in other departments within OEPP. Advertisements for openings are announced through the Human Resources department, which forwards email announcements to all OEPP staff, ensuring fairness.

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

Training needs are assessed through individual interactions between director and employees and detailed in the employee’s planning stage. Because the Office of Human Resources provides human resource services for the Governor’s Office in partnership with the Budget and Control Board (B&CB), OSMBA shares in the wide variety of education, training and development opportunities offered by the B&CB and benefits from B&CB expertise in personnel issues. In addition, staff members participate in relevant training that will sharpen the skills of OSMBA staff and increase knowledge of current developments in areas related to the operations of the program. Some of the types of training staff have attended include ethics training by the Ethics Commission, FOIA, legal and procurement training offered by the B&CB and the state purchasing association, and disadvantaged enterprise program training offered by SC Department of Transportation and the Federal Highway Administration. Information obtained is shared. This information directly impacted office activities by enabling them to be more efficient in the evaluation of applications for certification.

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

Certification-related training directly impacts staff members' activities by enabling them to have a better understanding of the MBE program, increase efficiency in the evaluation of applications for certification, and improve customer service with stakeholders by effectively communicating guidelines and providing accurate information in response to customer inquiries, while protecting the information submitted by the applicants. Procurement and business resource related training allows staff members to efficiently respond to inquiries from customers on how to conduct business with the state and identify the appropriate agency (state, local or federal) they may be seeking for assistance. Additional training programs are selected to increase the efficiency of services related to the submittal and processing of MBE reports submitted to OSMBA for processing.

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

OSMBA has an open-door policy that allows staff to communicate concerns, suggestions or questions with the director. The open-door policy also allows everyone to contribute to the overall work system. Employee feedback and suggestions are encouraged. Staff members have opportunities to pursue relevant new projects. Staff members have received training on the EPMS system.

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

With our open-door policy, staff is encouraged to provide suggestions for improving systems, and several have been implemented. OSMBA staff is small and has budget challenges; therefore, individuals who are selected for hire have many basic skills and training prior to employment with OSMBA. Staff members are allowed to attend relevant training (within budget guidelines) and represent the agency during community outreach efforts. Variable work schedules help employees balance personal and professional lives. Employee feedback, via informal meetings and exit interviews, provide staff assessments of program and operations. The employee grievance policy, detailed in the Employee Handbook, provides for mediation and appeal to the State Human Resources Director. Determination of priorities for improvement is assessed based on the suggestion relevancy to the goals, objective strategy and available resources of the office and OEPP.

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

OSMBA staff members are encouraged to be creative and utilize one another to improve work efficiency. Suggestions for improvement by all staff are welcomed.

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

OSMBA staff must stay abreast of the needs of the customers, their expectations and methods to improve the efficiency of activities. Any new method or training that will improve activities is welcomed. OSMBA seeks opportunities to utilize relevant and cost effective trainings offered by our partners.

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

The effectiveness of workforce is evaluated by input from our customers through a feedback mechanisms that include an annual survey administered at the annual Trade Fair and requests for feedback through our quarterly newsletter.

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

Since the number of OSMBA member's staff is low and the advancement opportunities are very limited, it is critical to the success of this office to hire employees who are self-motivated and have a high personal commitment towards excellence in their performance. Opportunities are available for staff to attend relevant outreach events, representing the office. Suggestions for program enhancements developed by staff are welcomed and often implemented.

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

Open communication is critical to the success of this office. Staff is frequently asked for feedback and opinions on how to improve the office, leadership style and operations. However, because staff often develop very useful and marketable skills, many leave for better paying positions within five years. Exit interviews are conducted by the Office of Human Resources.

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

OSMBA has only three positions, which limit the career advancements within. However, the skills obtained by the workforce are transferable and highly desirable by other agencies.

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

Hazard Communication Policy is given to all employees at new hire orientation sessions. Program director has received safety training and shared information with staff. Any adjustments of operational procedures that will improve safety of staff are implemented. OEPP and Human Resources ensure that the facilities are inspected accordingly. Wellness information, free health workshops, health screenings information and training sessions are posted routinely for employees by Human Resources. Emergency and disaster preparedness is coordinated through the Constituent Services Office, with staff on call to assist if necessary. Employees are informed of and are trained in evacuation procedures in the event of fire, etc. and director has been instructed to take roll call in such events.

Section III – Elements of Malcolm Baldrige

Category 6: Process Management

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

Key processes are selected by referring to OSMBA's mission, goal and objectives etc. 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 office through the corresponding action items and performance measures inputted. Staff members crucial to particular projects are part of the process of developing goals and action plans for those projects and are included when changes are necessary. Staff regularly attends relevant training on program-related issues affecting these projects.

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

OSMBA's key support processes involve the intake and processing of certification applications, agency reports, and outreach activities (including training). Due to the increasing number of applications received, the number of agency reports to process, requests to provide training and outreach events, OSMBA is working with other agencies to design electronic systems to reduce the manual processing time of agency reports and certification application, so that we can provide other critical services to our customers, including training and outreach events.

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

Due to the longevity of the program, staff can estimate what is needed to provide services and programs based on historical information. Many of the activities are cyclical and consistent from year to year. Volume of activity may vary from year to year, but it still allows for a degree of predictability for budget projections.

Section III – Elements of Malcolm Baldrige

Category 7: Results

7.1

Measures	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY11-12
#Certifications	30	49	84	96	116
#Re-certifications	30	41	46	35	22
\$ Spent by Agencies w/Certified Minority & Women Businesses	\$19,331,692	\$16,316,653	\$14,149,625 *incomplete agency reports	\$19,975,184 *incomplete agency reports	\$11,208,338 *incomplete agency reports

7.2 What are your performance levels and trends for your key measures on customer satisfaction and dissatisfaction (a customer is defined as an actual or potential user of your organization's products or services)? How do your results compare to those of comparable organizations?

A. Business Competitive Intelligence analysis was conducted in 2009 by USC's School of Library and Information Science to assess who our competitors are in South Carolina and a comparison of services provided. The study indicated that we have a unique advantage over comparable organizations, and the major factor is that we certify women and minority-owned firms, our service is free, and we are an advocate for all small businesses in South Carolina.

C. The following table summarizes certification and re-certification data for recent years and illustrates recent progress in performance:

Average decision time	FY 08-09	FY09-10	FY10-11	FY11-12
Number certified	49	84	96	116
Average days from application until certification	296	71	31	27
Application Received	64	97	112	137
Number re-certified	55	46	35	22
Average days from application until re-certification	190	36	12	7

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

OSMBA continues to find new and creative ways to promote increased efficiency and deliver vital services in light of tight economic times and budget constraints. OSMBA has increased the number of partners utilized to assist in the delivery of outreach and training services to

customers. To reduce the number of mailings of requested items, additional forms and information have been added to the website, allowing OSMBA to continue to provide services to its customers.

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

OSMBA complies with Human Resources objectives of performance levels and trends.

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

OSMBA's goal is to process certifications within 45 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 has been able to beat our goal of processing applications under our 45 day goal. OSMBA has been proactive in contacting stakeholders via phone, email and mailings to explain to potential stakeholders what is needed to complete their application. Our proactive approach has led to a substantial decline in processing time.

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

OSMBA monitors the compliance of state agencies in the timely submittal of reports and percentage of their budgets spent with certified minority businesses.

2011-2012 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: 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:

PRACTICE a community- and victim-centered approach to proactively assist crime victims and their families in need

PROMOTE collaboration at all levels of victim services 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 to better meet the needs of South Carolina's crime victims.

SEEK to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system 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.

2. Major Achievements for FY 2011-2012

- T. Recouped \$284,861 of victim assistance fines, fees and assessment funds via budget review and desk audits
- U. Saved crime victims over \$11.6 million through the bill negotiation process
- V. Recovered \$343,876.08 in restitution funds
- W. Saved the agency \$286,157.04 in potential duplicate payments to crime victims and or service providers
- X. Co-sponsored the 2012 SC Victims' Rights Week Conference with the SC Victim Assistance Network. SOVA sponsored 58 Victim Scholarships. The largest sponsored in several years. The victims expressed their heart felt gratitude for the assistance/service SOVA provided to them and as well as to their families
- Y. Co-sponsored the Unity Ceremony with the Victim Service Coordinating Council
- Z. Co-Sponsored the 2012 Children's Advocacy Day
- AA. Published the 2012 Payment and Reimbursement Guide for crime victims, service providers, and victim advocates
- BB. Developed an Auditing Tool Kit to assist the SOVA Auditing Section with technical assistance and support and used during training events
- CC. Developed additional agency publication items (posters)
- DD. Revised the Outreach Initiatives and Victim Witness Services Section Training Manual

EE.Enhanced SOVA website

FF. Added all victim advocates in the sheriff, police and solicitor's offices to the remote access, agency database which allows them to check the basic status of a crime victim's claim

GG. Made several field visits and held meetings with Chiefs of Police, Investigators, Detectives and Victim Advocates to train and advise them on the Compensation Program and the proper documents needed to process crime victims' compensation claims.

HH. Provided in-house training to SOVA staff members on the eligibility process and other victim related issues

II. Met numerous times with victim advocates and service providers across the state to build mutually beneficial partnerships to provide services to crime victims

3. Key Strategic Goals for Present and Future Years

1. Maintain open and effective communication with crime victims, law enforcement agencies, advocates, solicitors, service providers and other interested parties.
2. To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina.
3. To ensure accountability in the expenditure of all funds designated for crime victim assistance.

4. Key Strategic Challenges

To be efficient and responsive in serving crime victims, SOVA needs the support and cooperation of victim advocates and service providers across the state. This requires building mutually beneficial partnerships in the provision of services and continued outreach initiatives.

Educating crime victims, service providers, and other interested parties regarding SOVA's payer of last resort status remains an ongoing 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

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

6. Key customers groups and their key requirements/expectations

7. Key stakeholders groups

8. Key suppliers and partners

Table II.1.1 –State Office of Victim Assistance - Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/ Stakeholders	Key Partners
Compensation for eligible victims of crime for medical, counseling, lost wages, and burial	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	National Association of Crime Victim Compensation Boards
Training for victim advocates and service providers on the SOVA process and other services for crime victims	Crime Victims; Law Enforcement; Victim Advocates; Solicitors; Medical Providers; Governor; General Assembly	National Crime Victims Research and Treatment Center; Commission on Prosecution Coordination; SC Victim Advocate Forum; SC LEVA Association; SC Department of Probation, Parole, and Pardon Services; SC Department of Public Safety
Advocacy, Outreach, Support, and Referrals	Crime Victims; Law Enforcement; Victim Advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Association of Child Advocacy Centers; SC Association Against Domestic Violence and Sexual Assault; South Carolina Victim Assistance Network
Restitution and Recovery	Crime Victims; Law Enforcement; Victim Advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Department of Corrections; SC Summary Courts Association
Auditing Victim Assistance Fines, Fees and Assessment Funds across the state	State Auditor's Office; State Treasurer's Office; Chiefs of Police; Sheriffs; Victim Advocates	SC Victim Service Coordinating Council; State Treasurer's Office; State Auditor's Office

5. Operational locations

Main Office: Edgar Brown Bldg., Room 401, 1205 Pendleton Street, Cola, SC with Outreach Offices in Orangeburg, Bamberg, and Bennettsville

6. The number of employees

29 Classified

2 Temporary

1 Unclassified

10 Temporary (Grant)

0 Contract

0 Temporary (time-limited)

7. Regulatory environment under which your organization operates

SOVA is governed by the following:

1. SC Constitution – Article I, Section 24 Victims’ Bill of Rights (Constitutional Amendment)
2. SC Code of Laws – Title 16, Chapter 3
 - Article 13 Compensation of Victims of Crime (SOVA laws)
 - Article 14 Victim/Witness Assistance Program (SOVA laws)
 - Article 15 Victim and Witness Service
 - Article 16 Crime Victims’ Ombudsman of the Office of the Governor
3. SC Code of Regulations – Chapter 132
 - Chapter 132 SC Crime Victim’s Advisory Board (SOVA reg.)
4. Laws Governing the Collection/Disbursement of Crime Victim Monies at the Municipal & County Levels

See Sections 14-1-203, 14-1-204, 14-1-205, 14-1-206, 14-1-207

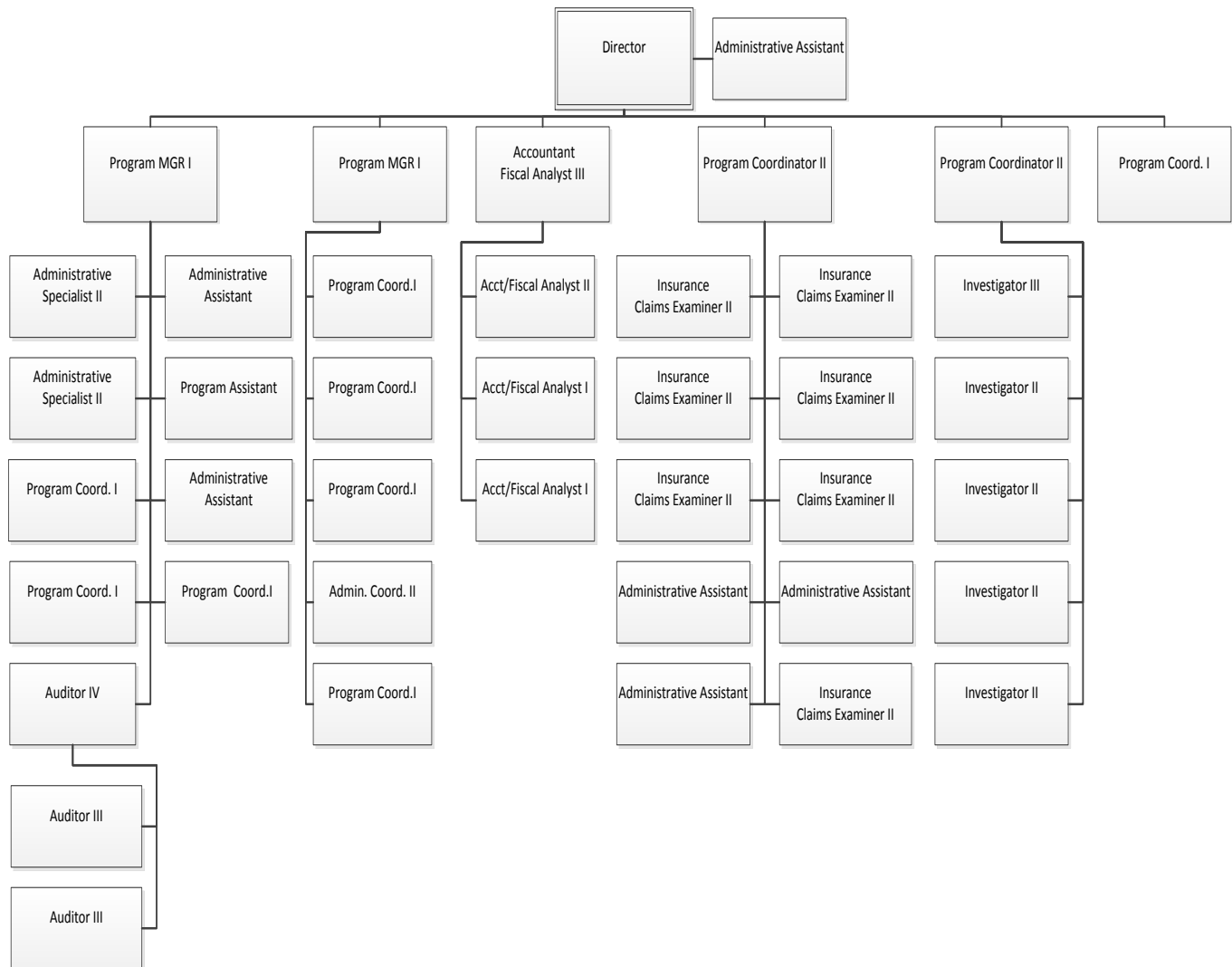
5. Proviso 89.61 – Relates to SOVA Auditing of the Victim Assistance Fines, Fees and Assessment Fund

8. Performance improvement systems

SOVA performance is evaluated through weekly manager’s reports on the number of claims input in the PROGRESS computer database system, the number deemed eligible, the number of claims examined and paid, and the amount of funds recovered through restitution/subrogation.

9. State Office of Victim Assistance – Organizational Chart

State Office of Victim Assistance



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 1,408,958	\$ -	\$ 1,390,931		\$ 1,981,846	
Other Operating	\$11,963,381	\$ -	\$ 11,873,341		\$ 13,133,376	
Special Items	\$ 187,486	\$ 187,486	\$ 176,725	\$ 176,725	\$ 44,022	\$ 44,022
Permanent Improvements	\$ -	\$ -	\$ -	\$ -		
Case Services	\$ -	\$ -	\$ -	\$ -		
Distributions to Subdivisions	\$ 650,000	\$ -	\$ 650,000	\$ -	\$ 1,175,479	
Fringe Benefits	\$ 480,111	\$ -	\$ 464,243	\$ -	\$ 663,918	
Non-recurring		\$ -	\$ -	\$ -		
Total	\$14,689,936	\$ 187,486	\$ 14,555,240	\$ 176,725	\$ 16,998,641	\$ 44,022

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

Major Program Areas

Program Number and Title	Major Program Area Purpose (Brief)	FY 10-11 Budget Expenditures	FY 11-12 Budget Expenditures	Key Cross References for Financial Results*
	By providing compensation to victims of crime who are eligible, and meeting the educational, training and professional needs of victim advocates, health care professionals, South Carolina schools, and victim service providers, the State Office of Victim Assistance seeks to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system.	State: \$ 187,486.00 Federal: \$ 5,355,931.00 Other: \$ 9,146,519.00 Total: \$ 14,689,936.00 % of Total Budget:	State: \$ 176,725.00 Federal: \$ 3,891,000.00 Other: \$ 10,487,515.00 Total: \$ 14,555,240.00 % 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 and educational information on victim service issues. Regular field visits are made to promote partnerships with law enforcement and court based victim advocates. These visits encourage cooperation and as such increase the efficiency and accuracy of processing claims. Managers are charged in their Planning Stages with exploring other states' best practices.

1.3 How does the organization address the current and potential impact on the public of its 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 and confidentiality 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 of claims 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. Also, there are times in which staff is cross trained within each department as well as within other departments as it relates to processing victim claims.

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 hours for new employees hired after January 1, 2009. Staff is encouraged to attend certified training events across the state to assist with their VSP certification as required by law. SOVA also assist staff in receiving the VSP hours by hosting “in-house” training events that have been approved for credit hours.

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 and birthday celebrations are done in accordance to the agency birthday calendar to help motivate staff and to promote good morale within the agency.

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 Victim Service Coordinating Council, SOVA assisted in the coordination of the annual SC Crime Victims’ Unity Ceremony. In addition, SOVA outreach staff accompanied victims to court when a court-based advocate was not available to ensure the victims’ needs were provided in a timely manner. 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
- 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.**

Director meets 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 11-12 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.	Worked closely with the Victim Service Coordinating Council (VSCC) to improve coordination of victim 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"> • Monitored Restitution Recovery • Conducted Trainings • Enhanced customer satisfaction through faster eligibility determination. • Created Certification Program for victim service providers 	Reduction in Spending Program/Creation of remote access system to obtain restitution information for court-based victim advocates.	7.3, 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 the Director as well as meetings between management and staff.
- 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. Also, via SOVA website and the internet, SOVA receives and responds to various correspondences that are often inquiries and questions about the victims' claim(s) and their rights.

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 and 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, Outreach and Auditing, 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. Internal training is provided as it relates to their job duties.

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

Capability and capacity needs are assessed through the EPMS process and meetings with local advocates.

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

Internal training needs are identified and addressed through the EPMS process. Advocate training needs are assessed through the application submission process. Employees are required to justify training requests in terms of how they contribute to the attainment of goals for the organization.

- 5.6 How does your development and learning system for leaders address 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 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. For example, rewarding staff via recognition during group meetings and allowing staff to participate in various training events, meetings and certain Board participation etc.
- 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. The agency also has incorporated staff in-services on victim issues.
- 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. Also, various departments have developed a safety plan to use within their department in the event of an emergency situation. Also, coordinating with other agencies and law enforcement on safety issues assist in this area and help make staff feel more secure.

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 charts outlined in this report shows performance levels and trends of the agency compared to previous fiscal years. The statistical data captured displays the areas of importance to the agency in each area listed. The information is kept on file to review in the event that the statistical data will need to be compared to other national compensation programs that process claims for crime victims.

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 7.1.1a: 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.

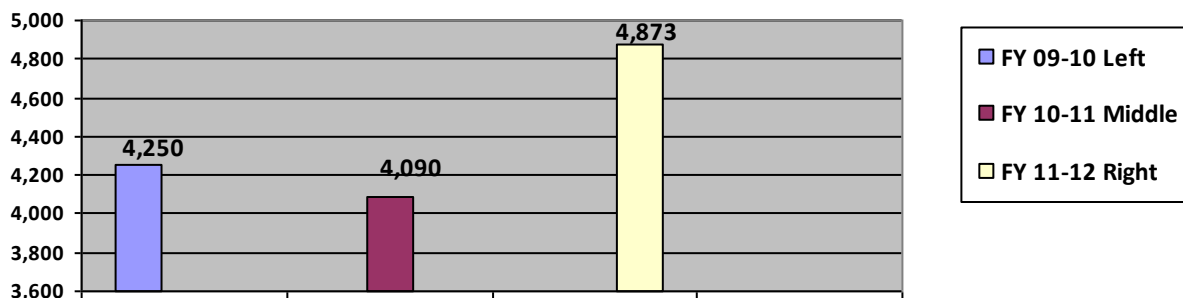


Chart 7.1.1.b: Walk-ins: The victims assisted through the intake office are considered walk-in victims. They are assisted by the Client Service Representative and provided with support and advocacy, aided in filing their crime victims' compensation application and provided with case status information.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

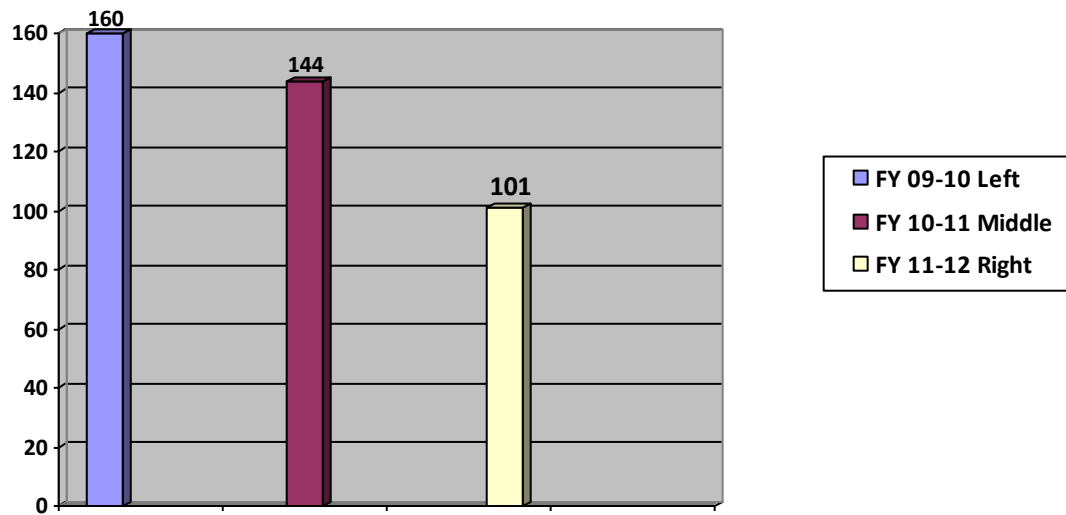


Chart 7.1.2: Incoming Calls: The calls received through the switchboard at the receptionist's area reflect crime victims calling to get case status information, asking general questions about the compensation program, asking for assistance as it relates to other victim related agencies that may be able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

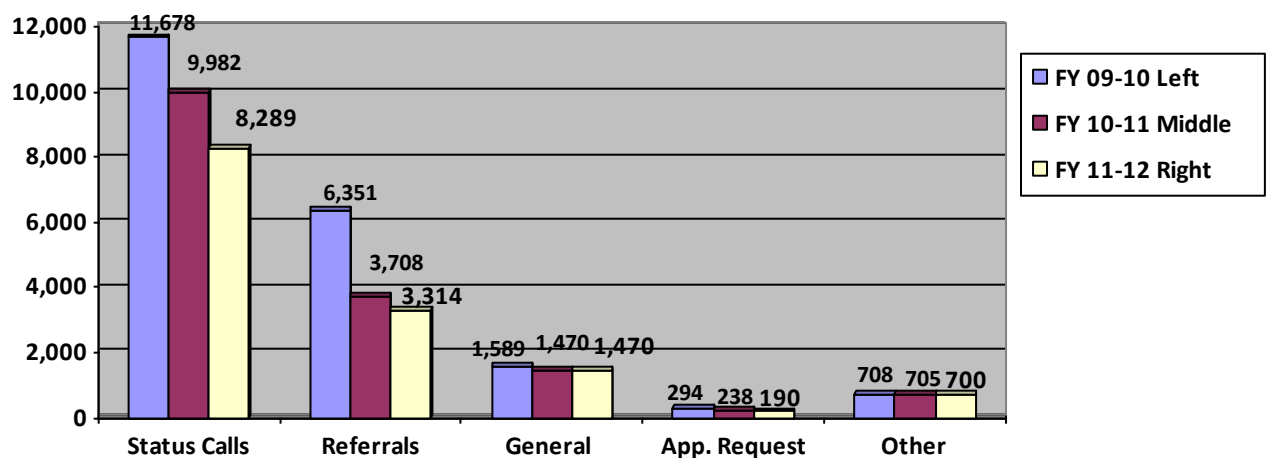


Chart 7.1.3: Tracking Incoming and Outgoing Mail: The Victim Witness Services Section is responsible for receiving all incoming mail for the agency. Upon receipt of the mail, all mail will be counted and then “looked up” in the computer database to see which section the file is in or if we have a file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

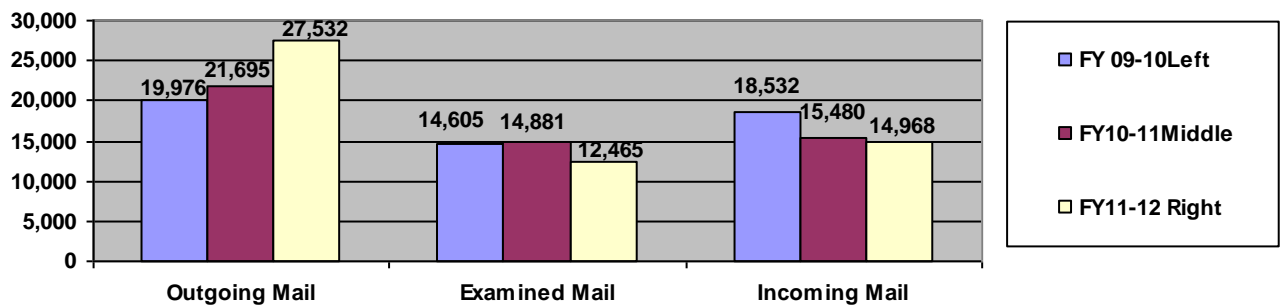


Chart 7.1.4a: Training: The Victim/Witness Department also provides training and publication items to raise awareness of compensation and other victim services.

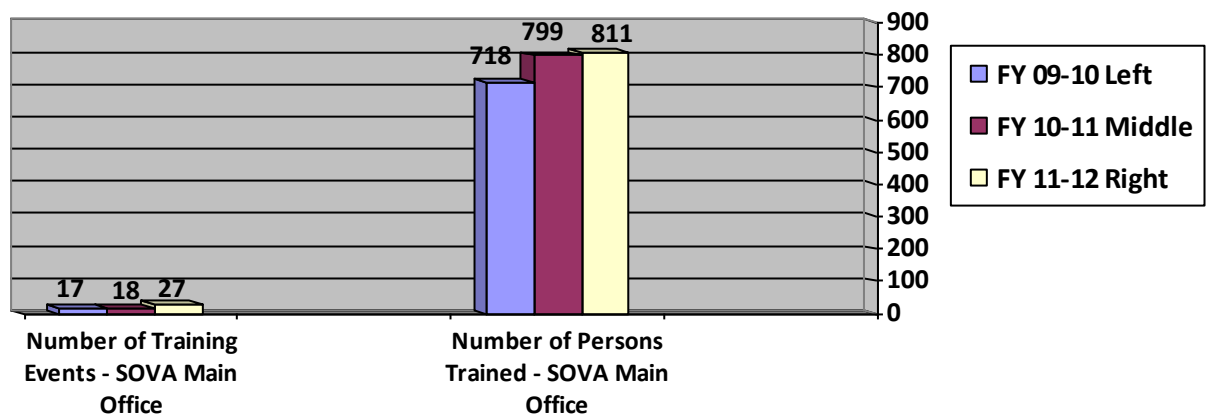


Chart 7.1.4b: (Training Continued)

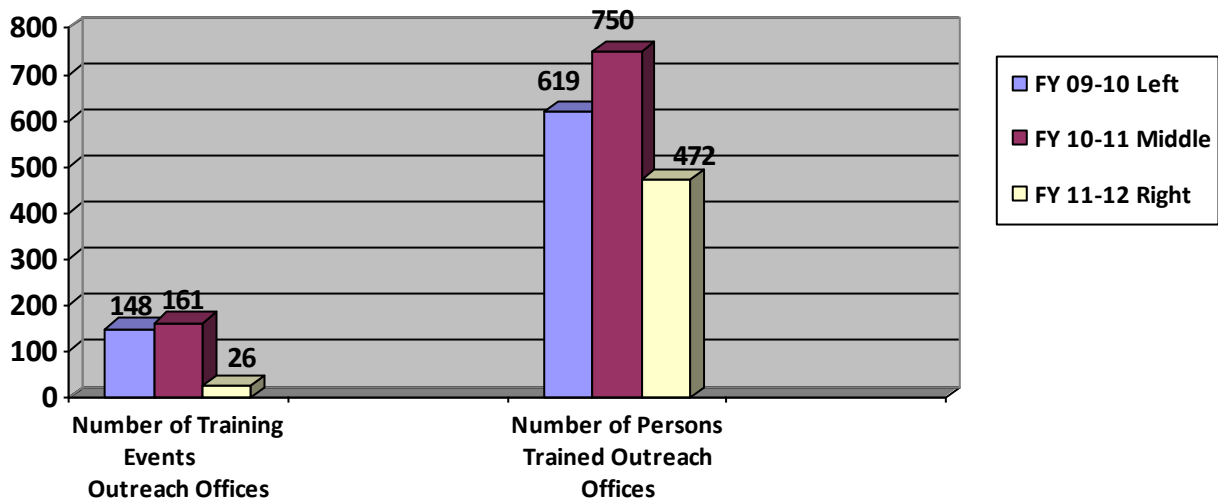


Chart 7.1.5: Publications Distributed: Various publication items to include but not limited to brochures, applications, flyers, posters etc. are distributed to advocates, crime victims and service providers statewide to assist them in filing for crime victims compensation and also for public awareness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

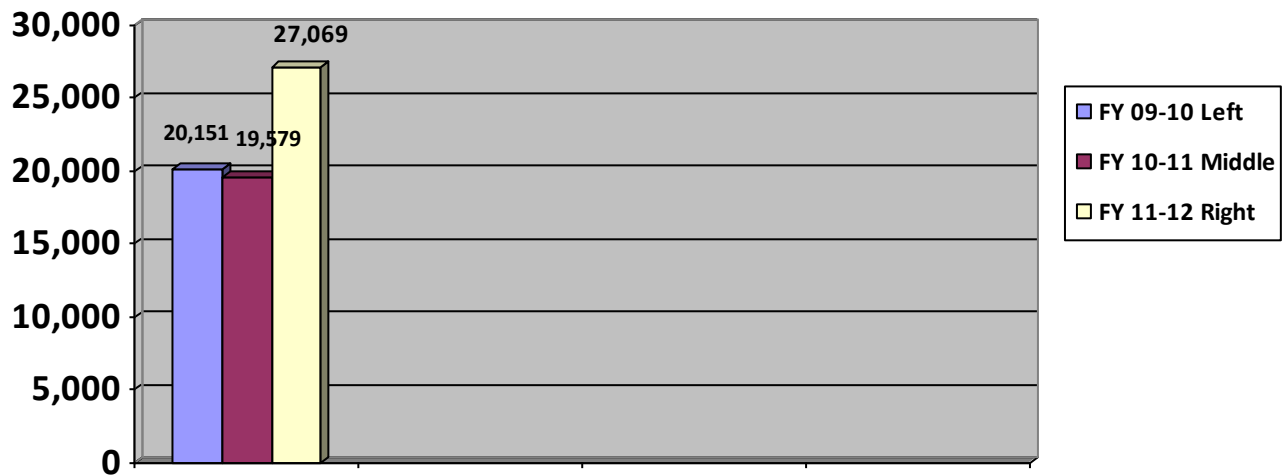
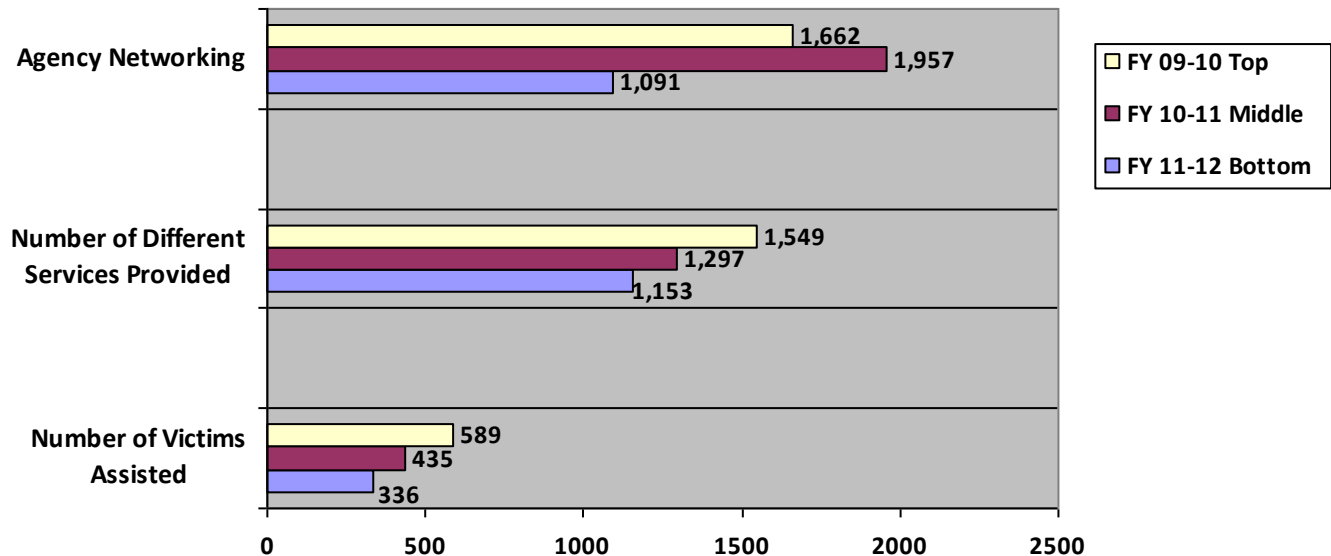


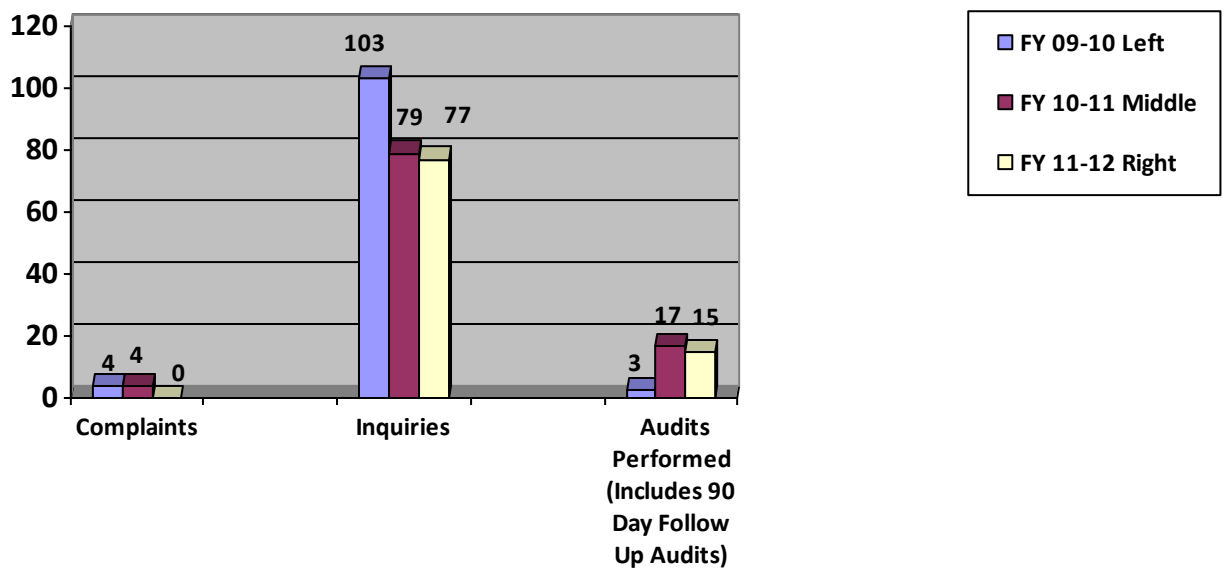
Chart 7.1.6: SOVA Outreach Performance: SOVA Outreach Offices reported the following measures of mission accomplishment for FY 2010-2011 as compared to prior fiscal years. The services provided are to a diverse group of crime victims to include but not limited to sexual assault, domestic violence, homicide,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



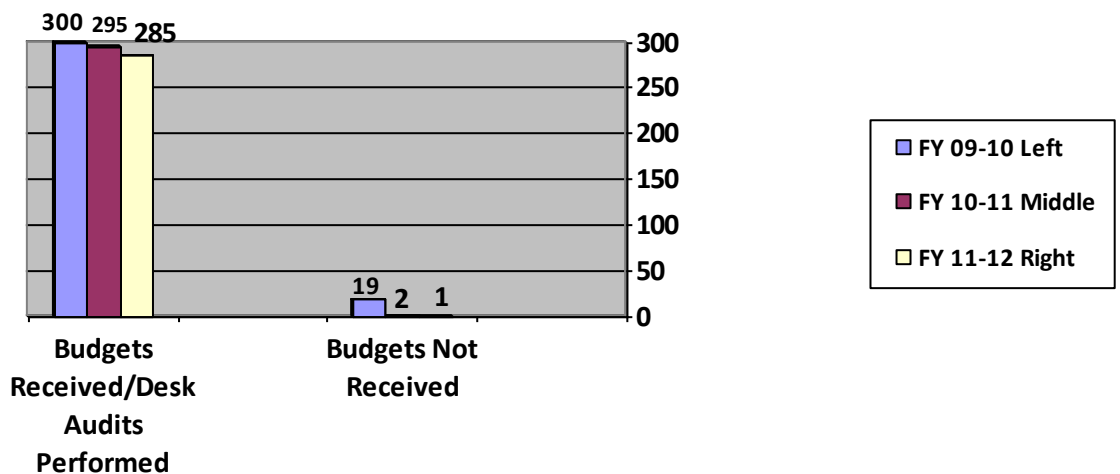
Due to the low number of registered participants, the 2010-2011 SC Victim Assistance Academy was canceled. Therefore, for 2011-2012, the agency reassessed the need for an Advanced Academy and researched advanced topics. Upon the completion of the research, it was determined that an Advanced Academy was warranted to meet the needs of service providers such as our victim advocates statewide. So, for 2012-2013, an advanced academy will be planned and coordinated to meet those needs; thereby, ensuring that crime victims receive the best quality of services.

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 Proviso that legislatively mandated SOVA to perform audits. The Proviso is 89.61 but was initially 89.70. The Proviso 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 and training.

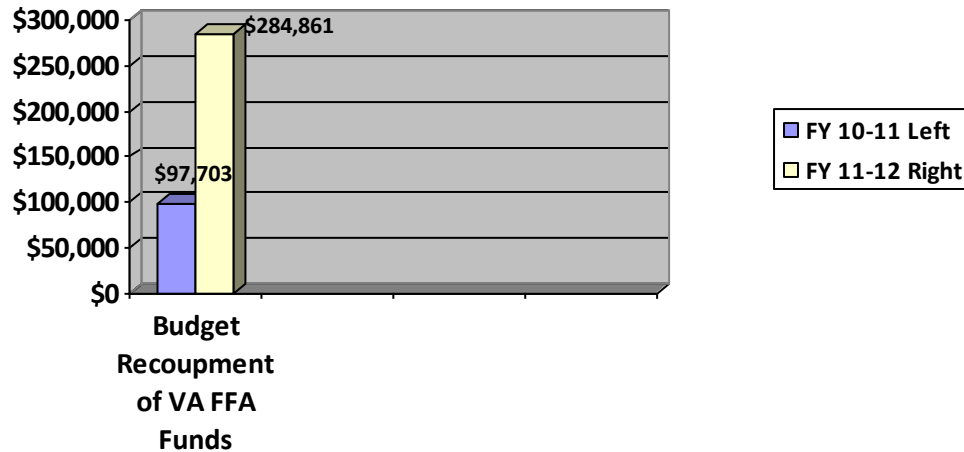
7.1.7 A



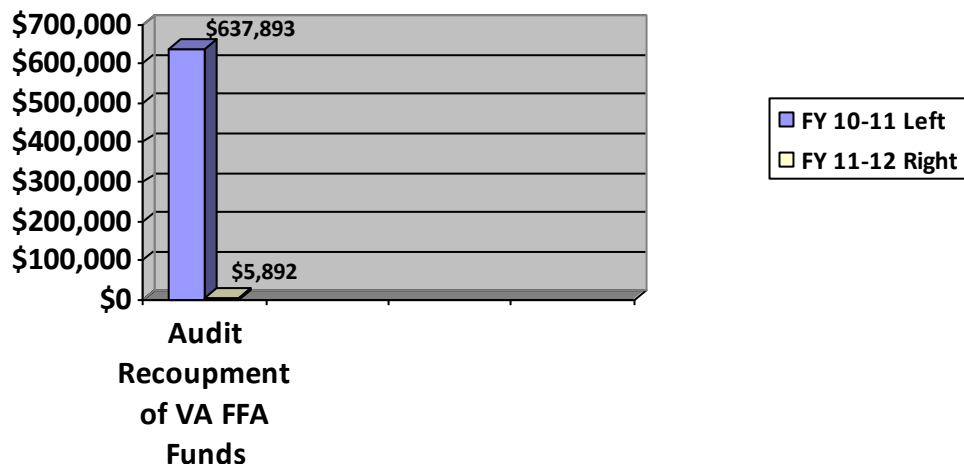
7.1.7 B



7.1.7c: 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. For this fiscal year, the budget recoupment amount has doubled the amount recouped since last fiscal year. This is mainly due to training and technical assistance provided to municipalities as it relates to Time and Activity Forms and salary recoupments.



7.1.7d: 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 has been provided.



7.1.7e: The chart below indicates the number of SOVA auditing training events and or 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.

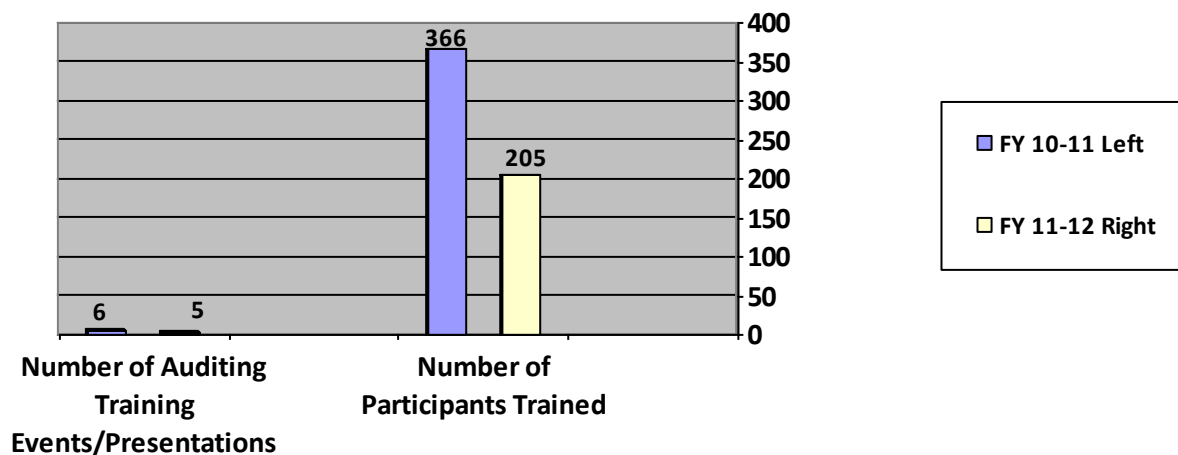
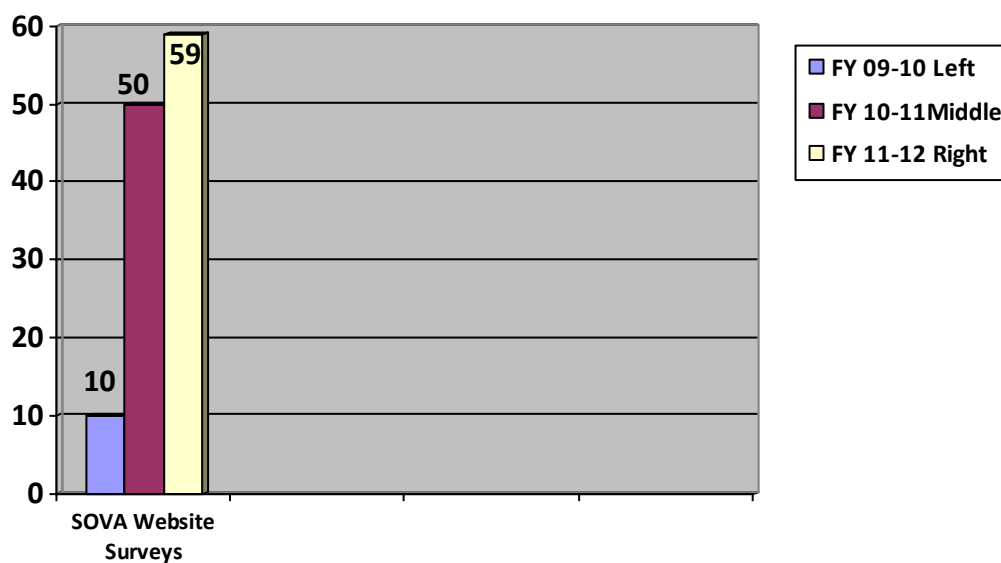


Chart 7.1.8: SOVA Surveys: Websites were developed and used to measure the effectiveness of services provided and to document how service providers and crime victims learned of the agency's services and benefits.



Compensation: Eligibility & Processing Services

The Eligibility Services Department processed 5,359 claims during FY 11-12, 89.8% of which were deemed eligible. The two charts below reflect the data for claims processed in Eligibility Services.

Chart 7.1.9 a: Eligibility Services: This chart reflects the number of claims Received and Processed in the Eligibility Services Department during FY 2009-2012.

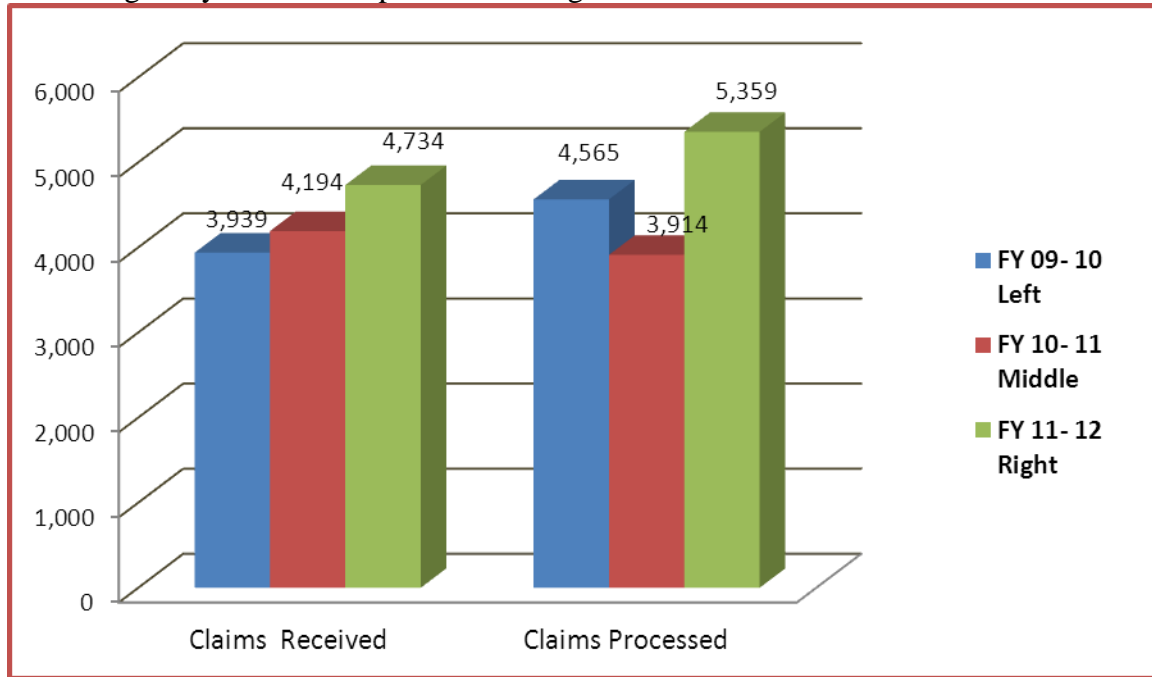
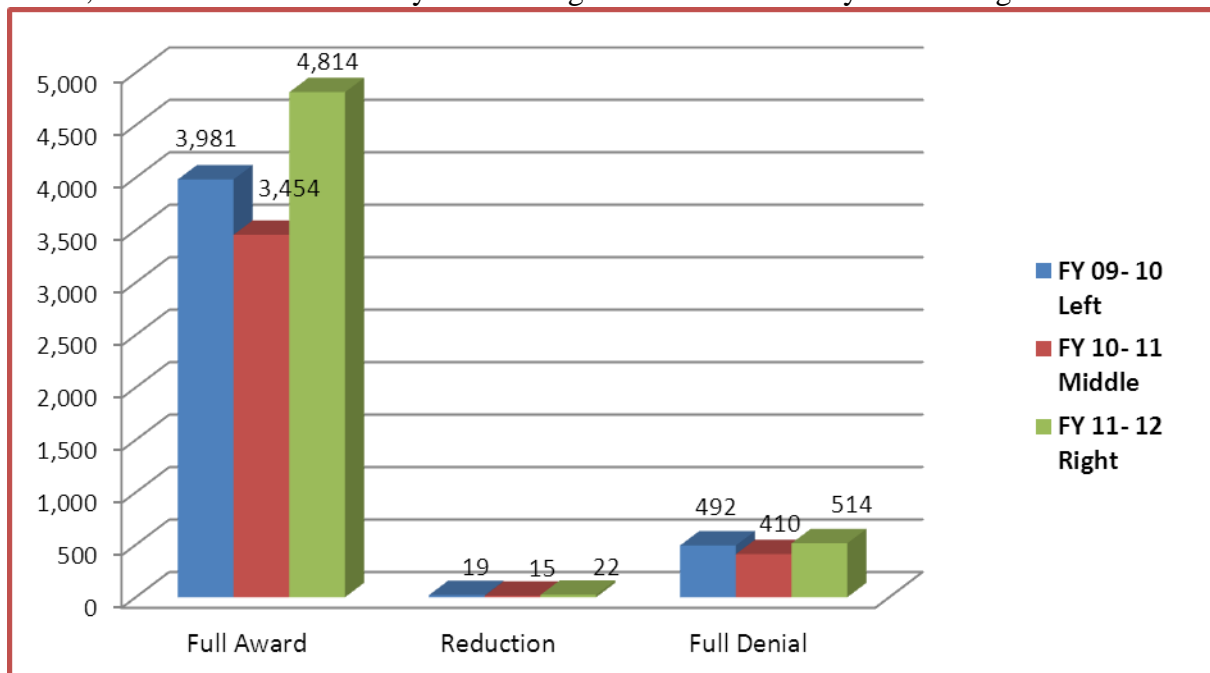


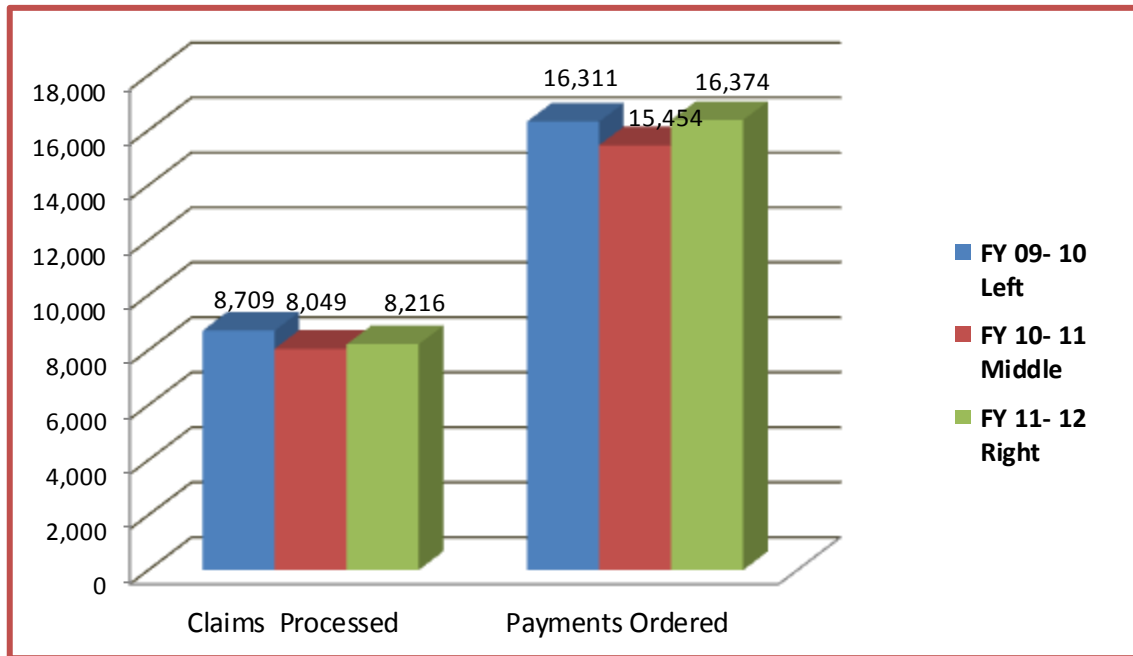
Chart 7.1.9 b: Eligibility Services: This table reflects claims that have recommended for a full award, a reduction or a denial by the investigators and affirmed by the staffing team members.



Processing Services Department:

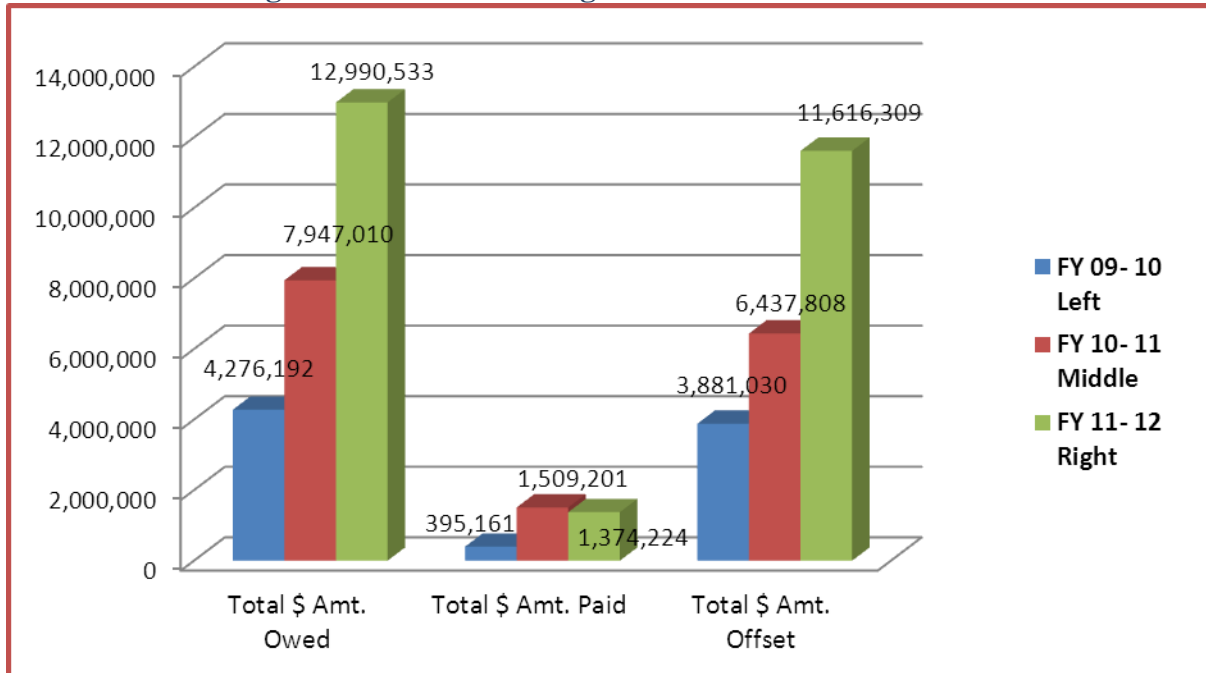
The Processing Services Department processed 8,216 claims and ordered 16,374 payments (Data is presented in chart 7.1.10 a). Under the Compensation Program, 9,844 payments were ordered and under the Sexual Assault and Child Abuse Protocol Program 6,530 payments were ordered. Despite these benefits, many victims are left with large balances they cannot pay.

Chart 7.1.10 a: Claims Processed & Payments Ordered



This year under the Compensation Program, Processing Services continued initiatives to negotiate bills on behalf of crime victims. Approximately \$12,990,533.00 of crime related bills were identified and negotiated. On those bills, SOVA paid \$1,509,201.00 to providers with a condition that providers not “balance bill” the victims for the difference. By providers accepting the negotiated agreements, SOVA saved crime victims approximately \$11,616,309.00 in out-of-pocket expenses (Data is presented in chart 7.1.10 b).

Chart 7.1.10 b: 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, victims and/or claimants, law enforcement officials, attorneys and service providers. Fully trained, professional and law enforcement experienced staff members have demonstrated impeccable performance which resulted in an increase of 1,360 claims deemed eligible in FY 11-12, an increase of 72% from FY 10-11. There has also been a significant decrease in the number of claims “on hand” at the end of June 2012 (386) compared to those “on hand” at the end of June 2011 (911). Though we are still dealing with high turnover with law enforcement officials, victim advocates with little to no experience, and increased crime rates, SOVA Training Team and the investigators have taken significant measures to train and educate new victim advocates on the agency’s policies and procedures. Better communication, better education and the diligence of staff members have been key measures resulting in the success and the increase of productivity.

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 11-12, the Processing Services Department processed 16,374 individual payments for a total of 11.4 million dollars 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 \$11.6 million in out-of-pocket expenses.

Restitution/Recovery Services

In FY11-12, SOVA recovered over \$343,876.08 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. The Restitution Recovery Program implemented the remote system in all 16 Circuit Solicitor's offices along with all Sheriffs and Police Departments. This program has proven to be very successful.

Fifty-two (52) claimants requested and received additional funds from the Crime Victims' Advisory Board for a total increase in award amounts of \$ 520,000.

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 \$ 343,876.08 was recouped from the restitution/recovery program from July 1, 2011 to June 30, 2012.

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 \$ 286,157.04 in potential duplicate payments in FY 11-12.

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. All employees are offered certified staff in-service training to assist in their VSP certification hours. They are also afforded the opportunity to attend various training events across the state to assist and aid in their workplace growth as it relates to providing victim services. 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.

2011-2012 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 a trusted and credible advisor to the Governor, General Assembly and other state activities.
- 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 an accountable steward of the resources allocated to us, and programs under our trust.

2. Major Achievements for FY 2011-2012

- A. 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 over \$2.4 billion in federal veterans' benefits, medical and financial, were realized in South Carolina in FY 2011.
- B. Responded to requests for assistance from over 77,364 constituent contacts.
- C. Successfully got legislation passed to add Veteran designation on driver's license.

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 2011 total of \$2.4 billion.
- B. Secure 2.9 million dollar federal grant to expand and improve the M.J. "Dolly" Cooper Veterans Cemetery.
- C. Honor the service and memory of deceased veterans, and their families by:

- 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, Department of Defense, and State 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 to preserve funds.

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.
 - Keeping the first state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery, as one of the best in the nation in providing 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 for the State Cemetery.
 - Establish a long term Capital Equipment Program to prepare for the replacement of the high cost equipment at the cemetery.
 - Leveraging technology to enhance the efficiency and effectiveness of our offices by creating a paperless environment.
- 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 every veteran in the state of 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 are available to attend training opportunities presented by state and national experts.
 - in-state training programs are fully supported and funded.

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 \$2.09 billion to \$2.4 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 (\$2.4 billion in FY 2011) 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 2011 over \$6.07 million of tuition credit was awarded to eligible students.
- **Burial and memorial services:**
 - honorable burial of 233 veterans and 49 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 to address veterans' issues.
- **SC Military Family Relief Fund** – manage and administer this fund to South Carolina National Guard and Reservists.
- **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; \$2.4 billion in FY 2011.
 - 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 1 Unclassified _____ Contract

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

The above information reflects the number of filled positions. As of June 30, 2012 the Office of Veterans' Affairs had 4.43 unfilled classified positions.

7. Regulatory environment under which your organization operates

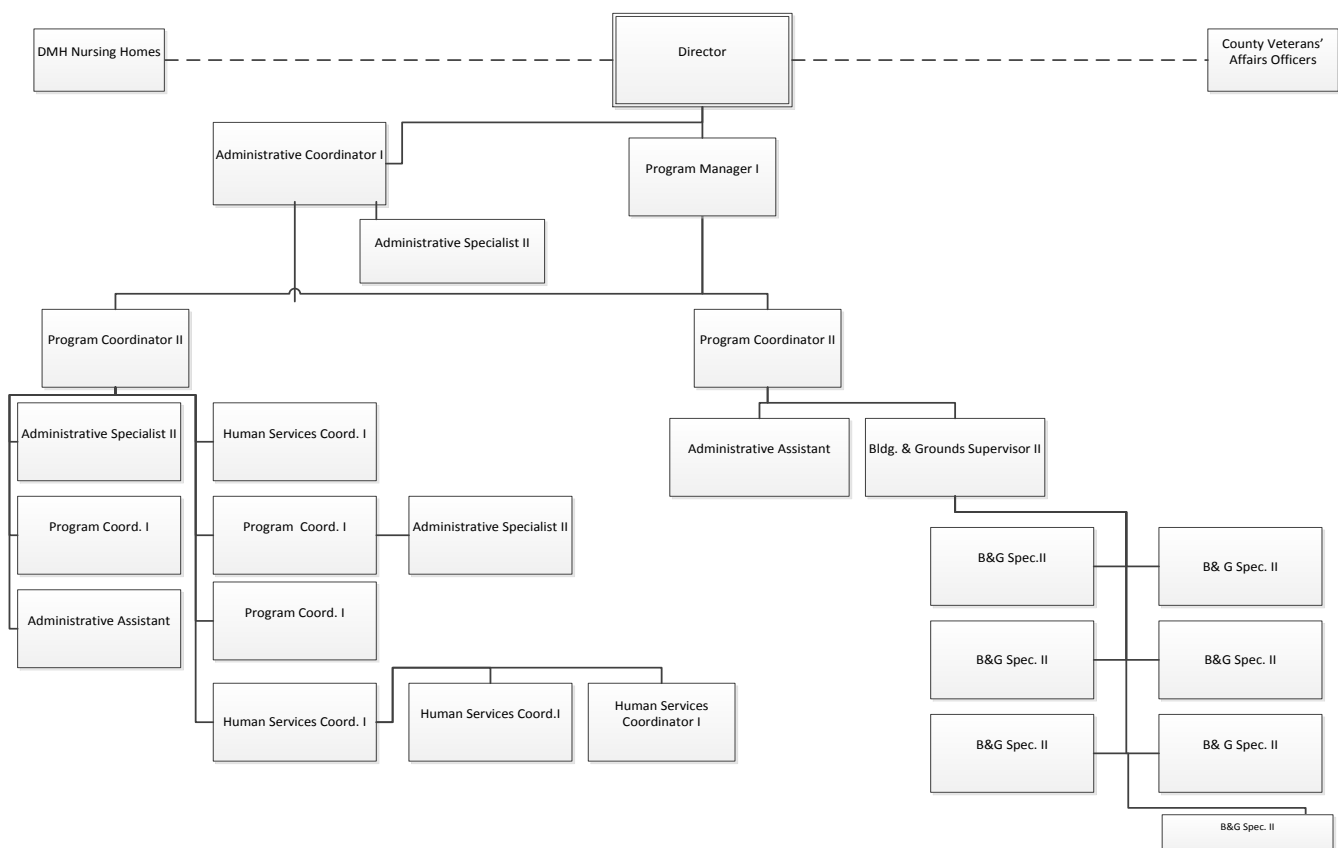
- USC Title 38
- USC Title 10
- South Carolina Code of Laws

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.

12. Organizational Structure

South Carolina Office of Veterans' Affairs



10. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart Base Budget Expenditures and Appropriations

Major Budget Categories	FY 10-11 Actual Expenditures		FY 11-12 Actual Expenditures		FY 12-13 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$ 588,341	\$ 588,341	\$ 580,825	\$ 580,825	\$ 642,174	\$ 642,174
Other Operating	\$ 103,931	\$ 87,905	\$ 111,739	\$ 88,313	\$ 15,590	\$ 15,590
Special Items	\$ 37,359	\$ 37,359	\$ 11,246	\$ 11,246	\$ 67,359	\$ 67,359
Permanent Improvements	\$	\$	\$ 29,000	\$	\$	\$
Case Services	\$ 78,500	\$	\$ 159,000	\$	\$ 550,000	\$
Distributions to Subdivisions	\$	\$	\$	\$	\$	\$
Fringe Benefits	\$ 192,287	\$ 192,287	\$ 225,477	\$ 225,477	\$ 244,026	\$ 244,026
Non-recurring	\$	\$	\$ 20,858	\$	\$	\$
Total	\$ 1,000,418	\$ 905,892	\$ 1,138,145	\$ 905,861	\$ 1,519,149	\$ 969,149

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 Number and Title	Major Program Area Purpose (Brief)	FY 10-11 Budget Expenditures		FY 11-12 Budget Expenditures		Key Cross References for Financial Results *
III.A.2 Program Management	1. To operate a veterans cemetery. 2. To provide financial relief to SC National Guard/Reservists and their families.	State	316,660	State	417,164	Tables 7..3-1, 7.3-2
		Federal		Federal		
		Other	78,500	Other	229,334	
		Total	395,160	Total	646,498	
		% of Total Budget: 35%		% of Total Budget: 57%		
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	37,359	State	222,420	Tables 7..3-1, 7.3-2
		Federal		Federal		
		Other		Other	2,694	
		Total	37,359	Total	225,114	
		% of Total Budget: 24%		% of Total Budget: 20%		
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	551,873	State	245,159	Tables 7..3-1, 7.3-2
		Federal		Federal		
		Other	16,026	Other		
		Total	567,899	Total	245,159	
		% of Total Budget: 39%		% of Total Budget: 21%		

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	21,117
	Federal		Federal	
	Other		Other	257
	Total		Total	21,374
	% 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); State Workforce Investment Board; VetSuccess; Veterans Policy Academy; Task Force Marshall; we also participate in faith-based workshops and 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 11-12 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
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	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

Strategic Planning *			
Program Number and Title	Supported Agency Strategic Planning Goal/Objective	<u>Related FY 11-12 and beyond</u> Key Agency Action Plan/ Plan/Initiative(s) and Timeline for Accomplishing the Plan (s)	Key Cross References for Performance Measures*
	Veterans Affairs Officers, and state and federal legislators		
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 assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?

We assess skills by observation, periodic testing, and customer feedback. Staffing levels are monitored constantly and needs are articulated to leadership. Obstacles to proper staffing include a significantly increased workload caused by the war, hiring freezes, salary levels, and a lack of understanding by resource providers as to the significant positive impact our staff makes on South Carolina’s economy.

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

By focusing on the missions and goals of the organization, staff performance objectives are developed and monitored. At a minimum, discussions are held with supervisors and staff semiannually to discuss performance progress.

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

A large number of our staff have extensive backgrounds in military leadership positions and use these to develop subordinates. Organizational knowledge is imparted from formal and informal training, on the spot correction, after action reviews, and sharing experiences across the organization. Ethical behavior is demanded of supervisors and imparted to subordinates. We have a zero tolerance policy for violations. Core competencies, strategic challenges, and action plans are frequently discussed with organizational leadership and passed down to subordinates.

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

Review of available data and feedback from staff and customers results in training needs and opportunities. Claims Representatives and/or Field Office Supervisors receive training to further develop their knowledge of VA laws and the VA claims process which is conducted by the Office of Veterans' Affairs 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 \$242 million to a total of \$1.328 billion.

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:

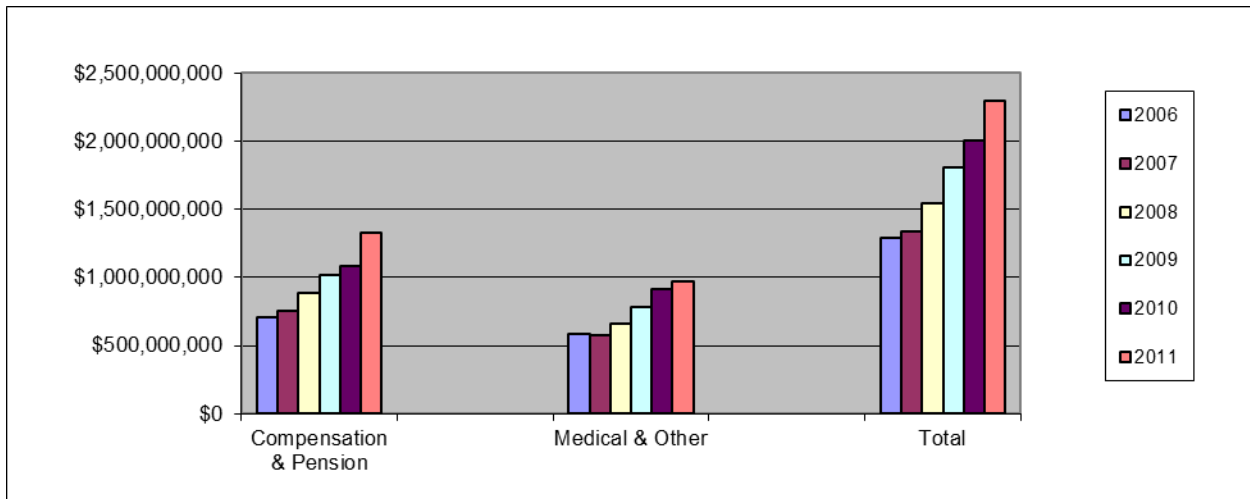
Table 7.2.1 – Veterans' Affairs Free Tuition Program Measures

Measure	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12
# Students Applying	414	371	395	404	447	463	507
# Students Approved	311	241	291	299	323	315	363
# Students Enrolled	1095	1409	1660	1696	1918	1951	2161

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

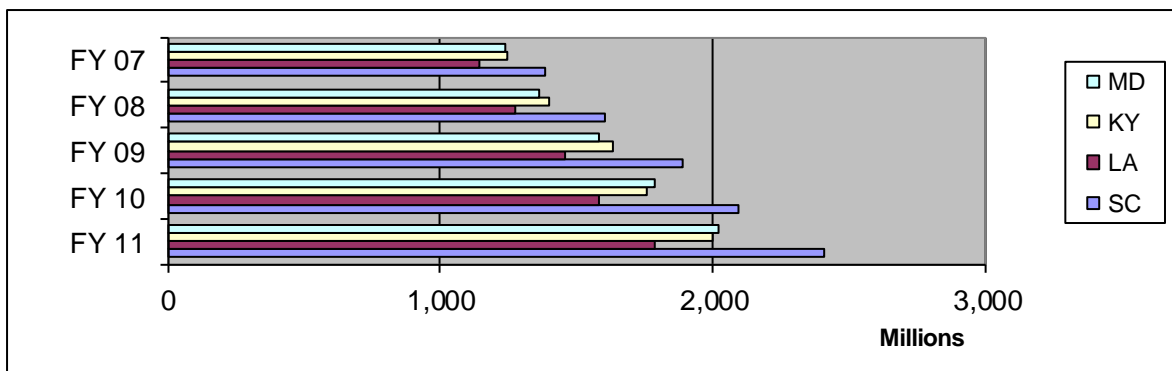
Figure 7.3-1 – Federal VA Expenditures in South Carolina



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 2011 — SC - \$2.406 billion (403,975 veterans)
 LA - \$1.785 billion (297,658 veterans)
 KY - \$1.995 billion (331,022 veterans)
 MD - \$2.023 billion (465,727 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 2010-2011 data. VA expenditures for South Carolinians increased over 22% over the previous year due to Vietnam-era veterans retroactive disability payments. 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.