STATE OF SOUTH CAROLINA

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

Accountability Report

Fiscal Year 2006-2007

Accountability Report Transmittal Form

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

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2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs

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

The individual offices of OEPP are:

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

Governor’s Office of
Executive Policy and Programs

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs

Section I - Executive Summary

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

Mission Statement – Office of Executive Policy and Programs

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

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

OEPP's organizational values are to:

- Provide exceptional customer service
- Promote open and accountable government
- Operate efficiently with fiscally responsibility
- Maintain a commitment to servant leadership

. . . *IT'S ABOUT SERVING PEOPLE!!!*

Major Achievements for FY 2006-2007

- OEPP completed their annual audit of 2006 with no findings or questioned costs.
- The Human Resources Department (HR) developed and published a new internet website. The public can now browse our website for information on working for the Governor's Office, to include employment opportunities, benefits, and orientation.
- The Guardian ad Litem(GAL) Office served 6655 children in 2006-2007 and trained 317 new volunteers.
- The Continuum of Care (COC) served 542 children during 2006-2007. 107 children/adolescents were accepted for full case management services, seven were readmitted for services, and 101 were discharged from services. This is a four percent (4%) increase in children accepted and an 11% increase in the number of children served during the previous fiscal year.
- During FY 2006-2007, the Office of Small and Minority Business Assistance (OSMBA) processed 227 applications for certification eligibility. In addition, during its outreach efforts, OSMBA has provided more than 3,000 current and potential business owners throughout South Carolina information and training related to available services, contracting opportunities and procurement procedures.
- The Crime Victims Office (CVO) and the State Office of Victim Assistance (SOVA) held the SC Crime Victims Unity Ceremony in recognition of Victims' Rights Week 2007. SOVA also co-sponsored the SC Victims' Rights Week Conference with the Victim Assistance Network.
- The Office of Veteran's Affairs (OVA) continued construction on the M.J. "Dolly" Cooper Veterans Cemetery in Anderson, SC. and the e 220-bed Veterans Victory House (nursing home) in Walterboro, SC was dedicated on 11 November 2006.
- The Foster Care Review Board's (FCRB) local foster care review boards held 436 individual local review meetings and conducted 8,467 reviews for 4,976 children. FCRB in working toward reviewing

the optimum number (12) of children per review board meeting, four additional local foster care review boards were created and became operational in January 2007.

- The Office of Economic Opportunity (OEO) obtained $20,000 from Piedmont Natural Gas to supplement the Low-Income Home Energy Assistance Program. In addition, OEO was selected to receive $500,000 in Workforce Investment Act money by the SC Workforce Development Board for competitive grants for soft skills employment training in the 2008 fiscal year.

Key Strategic Goals for Present and Future Years

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

1. To foster sense of teamwork within OEPP where offices and leaders offer support to each other and work together to provide quality services to the citizens of South Carolina.
2. To have all offices be fiscally and programmatically accountable (to the legislature and South Carolina citizens) for the services they provide.

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

Opportunities and Barriers

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

Previously each office has not been responsible for their individual financial accountability and budget. OEPP Administration has now reallocated the financial accountability to the individual offices thus giving each office the opportunity to manage their finances. With OEPP Office of Administration's support, leadership and administrative assistance, each office is now responsible for projecting financial needs, assessing where reductions could be made, etc. This provides an opportunity for each to be more responsible and accountable for their programs/services.

OEPP administrative staff are daily faced with the ever changing and diverse needs that are presented by trying to support thirteen varied and different offices. While all offices have a common thread, their goals and reasons for existing are very different, and as a result, they have different needs as for as support, supervision and technological resources.

Limited financial resources to best operate programs and to deliver services to the citizens of South Carolina is a barrier. The increasing cost of providing services (in terms of both human resources and finances) and/or the static appropriations are often a barrier faced by OEPP. Several OEPP offices are being targeted for an increase in state funding. These offices are Foster Care Review Board, Office of Veteran's Affairs, Crime Victims Ombudsman, and the Office of Small and Minority Business Assistance. The Guardian ad Litem will be requesting to stabilize existing funding. A more detailed explanation is located within each office's individual report.

How the accountability report is used to improve organizational performance

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

Section II - Organization Profile

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

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

Please refer to Table II.1 for each office's response to the above four items

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

Office	Key Services	Key Customers/ Stakeholders	Key Partners
OEPP Administration	To provide support all offices in OEPP, including but not limited to: • Financial/accounting • Human resources • Information Technology	OEPP offices: • Client Assistance Program • Continuum of Care • Correspondence • Crime Victims Office • Developmental Disabilities Council • Foster Care Review Board • Guardian ad Litem • Office of Economic Opportunity • Ombudsman's Office • Children's Affairs/Children's Case Resolution System • Small and Minority Business Assistance Office • State Office of Victim's Assistance • Veteran's Affairs Citizens of South Carolina Governor	Legislature OEPP Offices Governor

5. OEPP's operation locations

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

6. The number of OEPP employees

There are 281 employees within OEPP as of June 30, 2007. The breakdown of employee classifications is as follows:

199 Classified	19 Unclassified	3 Contract
3 Temporary	52 Temporary (Time Limited)	5 Temporary (Grant)

7. The regulatory environment under which your organization operates

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

8. OEPP's key strategic challenges

As stated in Opportunities and Barriers, a challenge has been in combining a sense of teamwork between offices while demonstrating service outcomes and financial accountability. Another challenge faced by OEPP Administration is balancing the needs of thirteen offices with the overall OEPP needs - both in terms of human resources and financial responsibility.

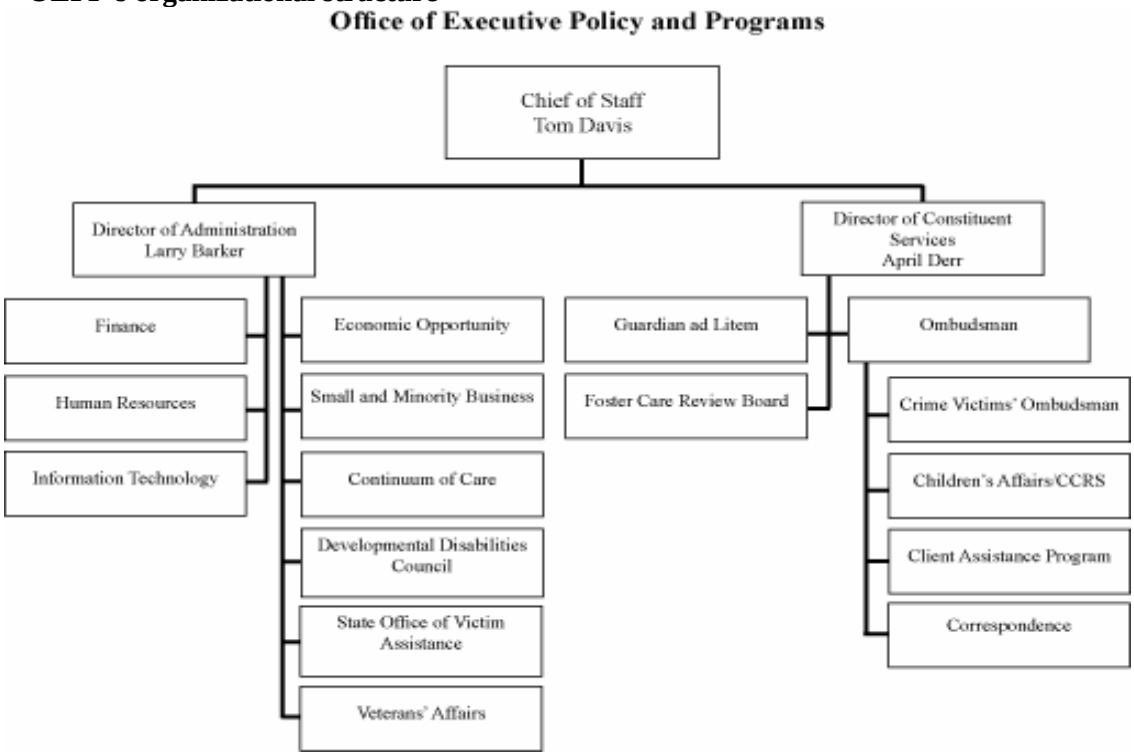
9. OEPP's performance improvement systems

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

- Introducing a new Employee Performance Management System (EPMS) Policy for the agency. The new Policy eliminated the universal review date, included a 3-level performance rating system and allowed weighting and rating of performance characteristics.
- Coordinating mandatory Supervisory Practices training for all supervisors. This training is being offered to ensure our supervisors know all the rules and regulations and how to apply them equitably to employees.
- Providing each office with a monthly report detailing all employees with performance evaluation due in the upcoming month. This is done to ensure that each office regularly provides feedback to employees on their performance, to provide consistency in the administration of the performance process throughout OEPP, and to ensure performance evaluation are not done after they are due, stressing accountability to our employees.
- Issuing a new Interviewer's Guide for managers to follow when going through the hiring process. This Guide emphasizes team interviews, focuses on diversity, and creative interview questioning techniques to aid in hiring the best candidates.
- Installing a time clock to ensure voucher are processed within specified time frames. Additionally travel vouchers are now audited by two accountants – which reduced the number of errors.
- Forming a Information Technology Planning Team to develop future plans and processes to address IT needs.
- Holding regular meetings with all OEPP office leaders. Staff meetings help increase communication among the offices; individual meetings with each office leader help provide feedback, monitoring of progress and accountability. The Director of Administration is available to all staff within OEPP.

By employing various performance improvement systems, OEPP is able to help prioritize budget requests and to advocate with the legislature for additional resources.

10. OEPP's organizational structure



11. OEPP's Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 9,311,864	$ 4,781,501	$ 9,216,462	$ 4,525,261	$ 10,771,963	$ 5,331,653
Other Operating	$ 12,954,202	$ 1,172,110	$ 14,908,050	$ 1,154,267	$ 14,999,011	$ 1,295,167
Special Items	$ 874,164	$ 819,862	$ 809,405	$ 800,215	$ 948,844	$ 948,844
Permanent Improvements						
Case Services	$ 2,422,666	$ 1,571,705	$ 2,480,175	$ 1,375,848	$ 3,713,010	$ 1,388,010
Distributions to Subdivisions	$ 39,506,686	$ 397,354	$ 31,351,011	$ 54,176	$ 32,217,655	$ 54,176
Fringe Benefits	$ 2,667,647	$ 1,349,943	$ 2,687,631	$ 1,355,512	$ 3,071,262	$ 1,388,148
Non-recurring						
Total	$ 67,737,229	$ 10,092,474	$ 61,452,734	$ 9,265,278	$ 65,721,745	$ 10,405,998

Other Expenditures

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

12. OEPP's Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Administration including Finance/Accounting, Human Resources, Information Technology	To support the offices of OEPP. (Note: 05-06 budget expenditures included the Correspondence Office)	State	2,279,289	State	1,176,550	
		Federal		Federal		
		Other	705	Other		
		Total	2,279,994	Total	1,176,550	
		% of budget:	3%	% of budget:	2%	
Client Assistance Program (CAP)	To advocate and resolve grievances of citizens regarding services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs in the State.	State		State		See individual report
		Federal	140,103	Federal	122,305	
		Other		Other		
		Total	140,103	Total	122,305	
		% of budget:	0 %	% of budget:	0 %	
Continuum of Care (COC)	To provide case management services to children under the age of 21 (and their families) who have serious emotional challenges.	State	3,820,325	State	3,785,741	See individual report
		Federal		Federal		
		Other	2,711,504	Other	2,869,762	
		Total	6,531,829	Total	6,655,503	
		% of budget:	10%	% of budget :	11%	
Correspondence	To track the status of all mail routed throughout the Governor's Office and to provide assistance in responding. NOTE: 05-06 expenditures included in Administration	State		State	301,408	See individual report
		Federal		Federal		
		Other		Other		
		Total		Total	301,408	
		% of budget:	0 %	% of budget:	0%	
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims to ensure that the State's crime victims receive top quality service at all levels of our criminal justice system.	State		State		See individual report
		Federal	24,058	Federal		
		Other	114,374	Other	160,881	
		Total	138,432	Total	160,881	
		% of budget:	0%	% of budget:	0 %	
Develop-mental Disabilities Council (DDC)	To administer and monitor federal grants to sub-grantees for services for persons with developmental disabilities.	State	110,419	State	119,120	See individual report
		Federal	1,059,627	Federal	792,072	
		Other		Other		
		Total	1,170,046	Total	911,192	
		% of budget:	2%	% of budget:	1 %	
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	38,174,983	Federal	27,559,779	
		Other	463,473	Other	463,675	
		Total	38,638,456	Total	28,023,454	
		% of budget:	57%	% of budget:	46 %	
Foster Care Review Board (FCRB)	To provide an external system of accountability and advocacy for children and families involved with the foster care system.	State	523,006	State	632,700	See individual report
		Federal		Federal		
		Other	722,792	Other	583,639	
		Total	1,245,798	Total	1,216,339	
		% of budget:	2%	% of budget:	2 %	
Guardian ad Litem (GAL)	To recruit, train and supervise volunteers who are court-appointed to advocate for the best interests of children in the child welfare system and in family court proceedings involving allegations of abuse and neglect.	State	1,017,852	State	1,063,319	See individual report
		Federal		Federal	8,771	
		Other	1,753,736	Other	2,145,876	
		Total	2,771,588	Total	3,217,966	
		% of budget:	4%	% of budget:	5%	

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Office of Children's Affairs (OCA) **Children's Case Resolution System (CCRS)**	To provide information and referrals to families regarding services for children. Assists families with problems they are having with child-serving state agencies, and responds to complaints. This office also houses the CCRS which has statutory responsibility to provide a process for reviewing cases on behalf of children for whom the appropriate public agencies collectively have not provided the necessary services.	State		State	51,302	See individual report
		Federal		Federal		
		Other		Other		
		Total		Total	51,302	
		% of budget: NOTE: 05-06 expenditures were included under the Ombudsman's Office.		% of budget:	0%	
Ombudsman's Office	The Ombudsman's Office provides constituent services to the citizens the State by identifying systematic problems in the service delivery system and working with various government agencies to make changes as appropriate. Additionally, the office compiles reports that track number of inquiries and types of complaints/ concerns of constituents for the Governor.	State	278,979	State	192,230	See individual report
		Federal		Federal		
		Other		Other		
		Total	278,979	Total	192,230	
		% of budget:	0% NOTE: 05-06 amount included Office of Children's Affairs/CCRS)	% of budget:	0%	
Small and Minority Business Assistance (OSMBA)	To administer the State of South Carolina's minority certification program. Act as an advocate for the State's minority businesses.	State	138,901	State	163,871	See individual report
		Federal		Federal		
		Other		Other	11,150	
		Total	138,901	Total	175,021	
		% of budget:	0%	% of budget:	0%	
State Office of Victim Assistance (SOVA)	• To provide compensation to eligible victims of crime. • To meet the educational, training and professional needs of victim advocates, health care professionals, SC schools, and victim service providers. • To ensure SC's crime victims receive top quality service at all levels of our criminal justice system.	State		State	37,365	See individual report
		Federal	4,789,845	Federal	3,643,988	
		Other	7,529,323	Other	10,331,897	
		Total	12,319,168	Total	13,993,250	
		% of budget:	18%	% of budget:	23%	
Veterans' Affairs (OVA)	To be the Chief Advocate for all veterans' issues in South Carolina. This includes state and federal benefits, eldercare, compensation, pension, and burial.	State	1,091,542	State	857,456	See individual report
		Federal	97,449	Federal	3,480,324	
		Other	8,481	Other	24,147	
		Total	1,197,472	Total	4,361,926	
		% of budget:	2%	% of budget:	7%	
Commission on Women	Public – Private Partnership with Columbia College	State	17,215	State	84,002	
		Federal:		Federal		
		Other:		Other:		
		Total:	17,215	Total:	84,002	
		% of budget:	0%	% of budget:	0%	
Remainder of Expenditures: **Special Items**	Remainder of Expenditure applies to: • Various fees • CCRS funds • Pass through funds • SOVA special funds	State	819,862	State	800,215	
		Federal		Federal		
		Other	54,302	Other	9,190	
		Total	874,164	Total	809,405	
		% of budget:	1%	% of budget:	1%	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

The primary mechanism used for providing feedback is the Employee Performance Management System (EPMS) process. At the senior level, feedback may be received through interaction with senior government officials.

Additional feedback comes from employee satisfaction surveys, staff meetings, exit interviews, and individual dialogue with employees. By listening and reviewing feedback from staff and customers, senior leaders can make adjustments in internal process, directives, and action plans.

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

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

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

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

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

Human Resources staff coordinates an agency-wide annual campaign for the United Way, Community Health Charities of SC and the Harvest Hope Food Bank. Senior leaders encourage staff to support charitable organizations throughout the year. Examples include sponsoring families at Christmas, volunteering with (community and state) emergency situations, etc.

Senior leadership demonstrates their support of the community through personal actions. For example, senior leadership is very actively involved in numerous community organizations and events, such as church and community activities, serving in leadership roles for Volunteers in Action, participating in Make a Wish, Rotary Clubs, Community Mediation Center, Habitat for Humanity, and Palmetto Pride Forest Cleanup.

In addition, OEPP administration staff are members of work-related associations: SC Information Technology Directors Association, SC Government Webmasters, and the SC Joint Terrorism Task Force, International Personnel Management Association and serves as a volunteer mediator in the statewide mediator's pool.

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

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

Chart III.2 Strategic Planning Chart

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

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

OEPP office's strategic plans are developed using a variety of information including enabling legislation, key legislative, customer service issues, and feedback from representatives from each OEPP office.

OEPP senior leaders are charged with creating and/or or reviewing their established goals, objectives, strategies, and action plans and updating them accordingly. Available evaluation data are reviewed and updates are incorporated based on trends, information learned, or comments from stakeholders. As stated in the individual reports, OEPP offices involve staff, customers (clients) and stakeholders (sub-grantees, advocacy organizations) to help determine the best methods to provide services.

2.2 How do you develop and track action plans that address your key strategic objectives?

Each OEPP office develops and tracks their action plan to address their specific key strategic objectives. Office leaders review these plans with the Directors of Administration or Constituent Services.

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

Overall OEPP objectives and action plans are communicated through scheduled staff meetings and individual face-to-face meetings. Performance measures are based on identified need and therefore vary between offices. Office Leaders have immediate access to the Governor's Directors to ensure communication and coordination. Each office's report outlines specific methods for communicating and deploying their strategic objectives, action plans and performance measures.

2.4 How do you measure progress on your action plans?

OEPP offices use a variety of techniques that best meets each office's needs. Please see each office's report.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Due to the diverse objectives and challenges faced by the separate OEPP offices, each office tailors their objectives to address their specific challenges. Please refer to the appendices for specific responses.

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

As part of increased accountability, OEPP Director of Administration reviews each office's strategic goals, outcomes, and process with the Office Leaders. When appropriate, the Office Leader's performance review is linked to achieving outcomes - particularly in regards to delivery of quality services and meeting federal and/or state reporting requirements.

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.

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

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

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

OEPP's key customers and stakeholders are first and foremost the residents of South Carolina. The Governor, Legislators, state government agencies, and other agencies are also customers. Each office's customers and their requirements are listed in Section II within their individual report.

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

Due to the wide variety of services delivered by OEPP, each office has developed its own specific methods for identifying changing customer needs and expectations (see individual reports). Methods include meetings with customers, public hearings, advisory councils, customer satisfaction surveys, and written or other verbal communications. Publications, training, and national information also inform offices on the changing needs and expectations on both a national and state level. In some incidences, changes in federal funding or state legislation affect needs and expectations. Significant trends or changes in customer service expectations and needs are discussed during management meetings or by OEPP internal committees, with service delivery excellence as a primary goal.

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

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

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

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

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

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

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

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

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

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

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

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

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

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

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

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

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

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

Most action plans, objectives, performance measures and indicators are reviewed throughout the year and modified as needed. OEPP offices also use feedback (from internal staff, customers and stakeholders) to adjust overall office work and assignments; these findings help Office Leaders focus on improving performance and keeping current with data and legislation, etc.

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 generally accomplished through the production of written procedural manuals, cross-training, and the duplication of material resources. Staff often support and help train new employees (formally as well as by training on-the-job). Some offices have implemented Business Rules to outline their processes; these Business Rules are a

(4.7 continued)

reference to ensure ongoing continuity when and if any particular employee, who is a part of a process, leaves the organization. Regular staff meetings also help collect and share knowledge. In addition, Human Resources maintains a current list of staff who can offer specialized trainings to others within the agency as needed.

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

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

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

Other methods of motivating and encouraging employees are: 1) staff retreats and annual meetings, 2) newsletters and intranet postings that recognize staff's work and personal achievements, 3) recognition through performance awards, 4) allowing employees to implement cost-saving ideas and 5) encouraging employees to work on team projects which cut across office lines. Individual OEPP offices implement various processes to help develop and utilize employees while encouraging and promoting office initiatives. See individual reports

OEPP's Human Resource Office (HR)hosted a drop-in for all OEPP employees for State Employee Recognition Day. This was an opportunity to thank employees for their service to the agency and the state. HR also organized and conducted OEPP's state service recognition ceremony. Fourteen employees were recognized for their dedicated service to South Carolina by presenting certificates and pins.

5.2 How do you evaluate and improve your organization's human resources-related process?

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 human resource program effectiveness. The Office of Human Resources (HR) 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, as necessary.

HR 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

(5.2 continued)

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.

Upon request of the Director of Administration, the HR office organized mandatory supervisory practices training for all supervisors in OEPP. These four-day training sessions, provided by subject matter experts at the Budget and Control Board, 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 OEPP policies and to give supervisors an opportunity to voice their concerns or ask questions about the supervisory process. Sixty OEPP supervisors learned methods for interviewing and hiring, setting goals, measuring progress, communication, motivation, discipline, as well as preparing for the grievance process. OEPP's HR office prepared and submitted the annual Equal Employment Opportunity Report to the State Human Affairs Commission. OEPP reached 92.7% goal attainment-maintaining OEPP in the top 30% of all state agencies.

HR also introduced a new EPMS Policy, after receiving feedback from employees and Office Leaders, adopting a three-level evaluation system, eliminating the four-level system, which was often vague and confusing to administer. The new EPMS Policy also eliminated the OEPP's universal review date and allowed weighting and rating (up to 10%) of performance characteristics. HR provided training sessions for all supervisors and employees to introduce the policy changes. Feedback in reaction to this new policy has been very positive.

HR created a new system for gathering data regarding employee terminations/leaving employment implemented for FY 07-08. The survey is now online and data is being stored electronically for better and more accurate reporting. This new exit interview process is user friendly and expedites data collection. HR anticipates the new system will result in better participation and more in depth data to help OEPP analyze employment practices.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do you encourage use of new knowledge and skills on the job?

As stated in 5.2, the OEPP Human Resources office (HR) organized and conducted supervisory practices training for all supervisors in the OEPP. HR also developed and conducted EPMS training for all employees to introduce the new EPMS Policy for the agency. For those who could not attend the training, HR placed all of the overview and introductory information about the new EPMS Policy on the agency's intranet website for all employees to review. To help emphasize diversity in the hiring process, HR invited the Human Affairs Commission to speak during a Directors' meeting to discuss the agency's EEO goals, why they are important, and how OEPP can make improvements in meeting the agency's EEO goals. In addition, HR arranged for representatives from the State Accident Fund to talk with OEPP Office Leaders about the workers' compensation trends.

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 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. HR reviews these documents and works to ensure that employees have access to the training identified in the planning stages. To meet specific office staff's needs, each OEPP Office Leader works with staff to arrange training opportunities for the unique needs of their staff. Some OEPP offices participate in the State Agency Training Consortium (which coordinates general and specialized training for state agencies) thus increasing the availability and range of training available. Cross training is another avenue widely used by OEPP offices.

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

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

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

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.

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

Please refer to 5.1. In summary, information mentioned included

- Training: job related, skills related, areas of interest and cross-training
- Hosting a drop-in for all OEPP 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

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

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 Office Leaders agree and encourage open communication and discussions. Employees are encouraged to go to Human Resources (HR) if there are concerns in the workplace that have not been addressed after notifying their chain of command. HR maintains an open-door policy for all employees. OEPP works hard to cultivate a culture of service to the people of South Carolina as added incentive to promote retention and employee satisfaction. 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.

5.8 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. In addition, HR arranged for representatives from the State Accident Fund to talk the Office Leaders about OEPP's workers' compensation trends and how OEPP can avoid future claims/employee injuries.

Each office is informed of evacuation procedures in the event of fire, etc., and there is a designated staff member who is instructed to take roll call in such events. Emergency and Disaster plans have been developed and are continually reviewed. New emergency preparedness topics discussed include flu pandemic and disaster relief coordination. The Director of Administration has required each office to outline a specific plan and/or steps to address job function at times of emergency or disasters, which may prevent staff from reporting to work. These plans allow each office to provide minimal service to their clients/customers at times of an emergency. Statewide emergency and disaster preparedness is coordinated through OEPP's Director of Constituent Services**,** with staff on call to assist if necessary.

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

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

OEPP offices communicate objectives, define measures, and inspect the progress and 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 efficiency service delivery. Processes within the OEPP's Information Technology, Finance and Human Resources (HR) support OEPP offices. Internal (activity reports, management reports on achievement of goals, etc.) and external (applications, budgets, etc.) processes are in place.

6.2 How do you 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?

Office Leaders review program processes for accuracy and timeliness. The HR office is responsible for formulating, implementing and administering the OEPP personnel management policies/programs. (See Category 5). As part of the accountability process, each Office is asked to provide goals for each fiscal year. These goals must be linked to OEPP's mission. Offices routinely report on the status of their goals.

The OEPP's Information Technology (IT) unit performed and implemented new practices and designs that helped prevent or alleviate problems for our customers. Efforts to continue strengthening security, while increasing productivity and communication capabilities occurred. IT installed and upgraded devises to improve communication capabilities (i.e. by consolidating the data onto one server and increasing network performance, helped efficiency by enabling data be more readily available); replaced and upgraded computers in three OEPP offices; designed and installed new audio/visual and multimedia installations. IT also redesigned web interfaces to make them more accessible for users with disabilities and procured a technology training lab. New technology has enabled databases and information systems that answer to changing customer and mission-related requirements.

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

Processes vary by office; day-to-day operations are directed to ensure that performance requirements are met. See individual reports for how each office accomplishes this task.

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

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

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

Each office's Strategic Plan identifies key support processes specific to their offices through the corresponding action items and performance measures. Staff, customers and/or stakeholders are a crucial part of the process of developing goals and action plans. Office leaders monitor the efficiency of workflow and assignments.

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

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

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

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

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

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

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

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

Audit reports for the past two years have had no finding or questioned cost.

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

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

Human Resource Trends	**2005-2006**	**2006-2007**
Job Vacancy Postings	76	82
Applications Processed	1551	1554
New Hires	68	48
Terminations	66	45
Turn-over rate (FTE)	18%	13%

EEO/Diversity:

OEPP's Human Resources Office reports their Affirmative Action Plan Goal Attainment annually to the State Human Affairs Commission. OEPP remains in the top 30% of all state agencies for goal attainment. The results for the last two reporting cycles are:

2005: **94.9%**
2006: **92.7%**

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

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

Appendix A

OEPP - Client Assistance Program

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Client Assistance Program

Section I - Executive Summary

Mission Statement

The mission of the SC CAP is to inform clients and prospective clients with disabilities of programs, projects, and facilities funded under the Rehabilitation Act of 1973, as amended, and to assist them in resolving problems they might encounter in obtaining those services. This includes pursuing the rights and benefits under the American with Disabilities Act as it relates to the Rehabilitation Act of 1973, as amended.

Vision

- Ensure that persons with disabilities receive quality services with informed choices in an atmosphere of trust.
- Provide statewide outreach to underserved populations of persons with disabilities and being sensitive and responsive to the unique needs of individuals from diverse ethnic, racial and cultural backgrounds.
- Strive for positive and productive relationships with service providers, community programs, and state government agencies.

Major Achievements for FY 2006-2007

- The CAP resolved 190 full cases without resorting to formal hearings or litigation.
- The CAP provided outreach to 2056 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 American With Disabilities Act, Title I.

Key Strategic Goals for Present and Future Years

1. Advocate and resolve CAP cases at the lowest possible level in the alternative dispute resolution system.
2. Increase outreach efforts throughout the state for underserved adult populations of persons with disabilities in the state.

Opportunities and Barriers

Opportunities:

- CAP staff continues to maintain a high level of cooperation and collaboration with various providers, community programs, and state government agencies, to help ensure the rights and dignity of persons with disabilities in employment and independent living matters.

Barriers:

- Biased attitudes regarding persons with physical and mental disabilities were often identified as a barrier to employment and/or successful independent living.
- Available transportation in rural areas is lacking, particularly transportation for persons with disabilities.

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 improvements 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

- 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.

2. Key customer segments and their key requirements/expectations – see Table II.1.1

3. Key Partners – see Table II.1.1

4. Key Suppliers and Partners – see Table II.1.1

Table II.1.1

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Client Assistance Program (CAP)	Alternative dispute resolution services provided through personal representation of the client. Information and referral services provided by telephone and personal contact. Outreach to underserved population groups with disabilities throughout the state.	Persons with disabilities and their families, and other consumer who desire information about services and benefits under the Rehabilitation Act of l973, as amended, and the American With Disabilities Act, Title 1. Clients and client applicants who are disputing services provided by the state Vocational Rehabilitation Department, Commission for the Blind, and Independent Living programs.	South Carolina Vocational Rehabilitation Department Commission for the Blind Independent Living Programs Governor's Committee on Employment of Persons with Disabilities Statewide service organizations that serve the employment needs, and/or independent living needs of persons with disabilities

5. Operation location

Governor's Office
Client Assistance Program
1205 Pendleton Street, Suite 447
Columbia, South Carolina 29201

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

2 Classified

7. The regulatory environment under which your organization operates

- The Federal Rehabilitation Act of 1973, as amended

8. Key strategic challenges

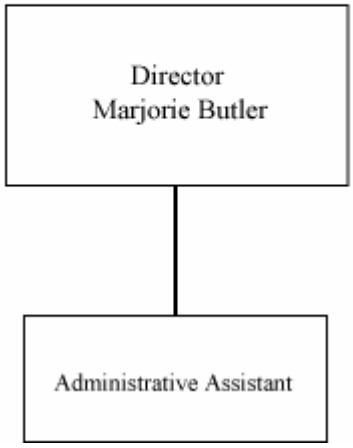
- Improved collaboration with services providers in provision of services for person with disabilities.
- Transition to paperless system as much as possible.
- Increased knowledge and training in increased complexities of client mental and physical disabilities.

9. Performance improvement systems

- Review of client satisfaction surveys
- Performance review from mandated annual Federal report
- Feedback from clients and stakeholders

10. Organizational chart

Client Assistance Program



11. **Expenditures/Appropriations Chart**

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$91,916		$79,652		$113,301	
Other Operating	$24,650		$23,120		$36,408	
Special Items						
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	$23,537		$19,533		$29,466	
Non-recurring						
Total	**$140,103**		**$122,305**		**$179,175**	

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 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		Department of Education, Rehabilitation Services Administration Table III.7.1.1 Table III.7.2.1
		Federal	140,103	Federal	$122,305	
		Other		Other		
		Total	140,103	Total	$122,305	
		% of budget:	0%	% of budget:	0%	

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

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

- Small staff allows for direct open communication for direction and trainings relating to office management and provision of client services.
- Weekly staffing allow for personal and professional development of staff.

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

- Emphasizing customer services and client confidentiality at all times.
- Verbal or written client satisfaction surveys reviewed for improvements to CAP provision of advocacy services.
- CAP staff assures that clients and consumers with disabilities are always treated with respect and dignity.

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?

- Recorded timeliness of responding to client's concern and resolution.
- Customer satisfaction reviews.

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

- Through required annual Federal reporting and audit systems.

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

- Successful case resolutions at lowest alternative dispute resolution level without litigation.
- Productive collaboration with service providing agencies with our client case.

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

- Mentoring staff for professional development.
- "Open Door" policy for open communication with staff.

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

- Personal mentoring of staff.
- Provides training opportunities for professional development.
- Counsels and guidance on staff concerns.

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

- Participating in committees that support the program's mission.
- Conducting staff reviews of program goals.
- Encouraging staff participation with events in networking with other related program staff.

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

- Active participation in various advocacy organizations such as: Governor's Committee on Persons With Disabilities, Mayor's Committee on Persons With Disabilities, Disability Action Center Project Hope, Midlands Area Consortium for the Homeless, SC Vocational Rehabilitation Business Applications Program, Midlands Interagency Human Services Network, and the Catholic Charities Taskforce for Ecumenical Action for Migrant Workers and the Hispanic and Latino Community.

- Accept leadership role for community disability related programs such as: Chairperson for the Mayor's Committee on Persons with Disabilities, Chairperson for Midlands Area Job Resource Fair, SC Vocational Rehabilitation Business Applications Program Student Mentoring, Guest Speaker Liaison for the Mayor's Committee on persons with Disabilities. Vice Chairperson for Governor's committee on Persons With Disabilities.

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

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

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

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
Advocate and resolve cases at the lowest possible level in the alternative dispute resolution system	Clients will receive appropriate services and become employed and/or live independently.	Case Management Weekly case staffing Gather and interpret data from client satisfaction surveys	Table III.7.1.1 Table III.7.2.1
Increase outreach to traditionally underserved populations of persons with disabilities in the state	More persons with disabilities will be able to access services provided by the Vocational Rehabilitation Department, Commission for the Blind, and Independent Living Programs	Exhibit and present at 8 conferences and/or groups for persons with disabilities Visit 4 different One-Stop Navigators at WIA Employment One-Stops Annual collaboration with other organizations for community Information/Job Resource Fair for persons with disabilities	Table III.7.1.1

2.2 How do you develop and track action plans that address your key strategic objectives?

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

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

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

2.4 How do you measure progress on your action plans?

- Feedback on continued professional and productive relationship with other agencies and programs.
- Analysis of the data of the annual CAP Federal report is best instrument for yearly comparison on achievements.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

- CAP has specific objectives mandated in the Federal Rehabilitation Act of 1973, as amended.

2.6 How do you evaluate and improve your strategic planning process

- Annual CAP Federal report.
- Review of client satisfaction surveys.
- 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 an address for than plan on the website.

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

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

3.1 How do you determine who your customers are and what their 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 employment and/or independent living
Persons in the state who have questions regarding services provided by the SC Department of Vocational Rehabilitation, Commission for the Blind, and Independent Living Program. Persons with questions regarding American With Disabilities Act, Title I.	Customers needing information and assistance regarding services provided by these agencies

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 a national CAP advocacy network on the internet to share current information and strategies to better serve our clients with disabilities.

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

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

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

- Review written client CAP satisfaction surveys to make any adjustments if necessary to the way we are providing services.
- Talk to clients about satisfaction with service providers as they use this information for their satisfaction reports.

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

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

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

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

- Outlined by Federal Grantee

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

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

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

- Annual Federal CAP report based on mandated Federal program requirements.
- Successful case resolutions at lowest alternative dispute resolution level without litigation
- Outreach efforts to traditionally underserved populations with disabilities in 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, timeliness, accuracy, security and availability for decision-making?

- Review yearly annual Federal CAP report information with mandated guidelines for programs.
- Participate in national CAP advocacy network with CAP program directors in other states.
- 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 employee knowledge (your knowledge assets)? How do you identify and share best practices?

- Annual Federal CAP report
- Regular internal staff meetings

Section III – Elements of Malcolm Baldrige
Category 5 Human Resources

5.1 How do you organize and manage work to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

- Through staff meetings for case management and training related to serving CAP clients.
- Attend available trainings for staff to enhance professional development
- Participation in regular meetings with other program directors.

5.2 How do you evaluate and improve your organization's human resources-related process?

- Small staff meetings with open communication on professional development and performance reviews.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

- Encouraging participation in available training through human resources.
- Encourage participation in available training enhancing knowledge related to serving persons with disabilities which is part of our Federal mandate.

5.4 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

- Feedback from employees and management on EPMS allows for open discussion on organizational goals and employee performance relating to program goals.
- Feedback allows for professional staff development opportunities.

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

- Increased opportunities for professional development within the organization.
- Participating in leadership trainings.

5.6 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

- Small staff allows for close working relationship and open line of commutation.
- Meetings with staff on performance review as needed.

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

- We try to maintain a safe and secure work environment by removing physical hazards with our small staff by complying with all safety guidelines.

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

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

- Case resolution for clients with disabilities at the lowest level of alternative dispute resolution.
- Outreach to underserved population groups with disabilities throughout the state.
- The key processes are used daily in all of our activities.

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

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

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

- Regulatory and policy-mandated requirements are provided by Federal Grantee and followed by staff.
- All processes are closely monitored on a daily basis to ensure compliance.

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

- Case resolution for clients with disabilities at the lowest level of alternative dispute resolution.
- Federal mandated annual reporting used for case reviews and program evaluation for improvements in serving clients with disabilities.

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

- Federal program annual grantee allotment dictates projected budget spending.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

- Tracking the number of CAP cases that were resolved at the lowest level in the alternative dispute resolution system without litigation.
- Number of information and referral calls and visits for persons with disabilities.

Table III.7.1.1

Performance Measure	FY 04-05	FY 05-06	FY 06-07
Number of CAP Cases	165	176	190
Number of information and referral	2050	2700	2900
Number of outreach to underserved population groups throughout the state	1700	1800	2056

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

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

Performance Measure **Goal: Clients will express satisfaction with the services they receive**	FY 04-05	FY 05-06	FY 06-07
Number of clients expressing "Very Satisfied"	38	42	55
Number of clients expressing "Satisfied"	2	1	1
Number of clients expressing "Not Satisfied"	0	0	0
Number of clients stating that they would use CAP services again	40	43	57
Number of clients stating that they would not use CAP services again.	0	0	0

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

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

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

- The Office of Human Resources (HR) has implemented services work process that measure performance levels and track trends.

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

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

Appendix B

OEPP - Continuum of Care

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Continuum of Care

Section I - Executive Summary

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

Major Achievements for FY 2006-2007

- The Continuum expanded our outreach efforts by developing a new brochure and informational materials. Staff increased outreach in the community and with other agencies through meetings, presentation, etc. Two documents were translated to Spanish as a method of outreach to South Carolina's Hispanic population.
- Ninety-six percent of families who responded to a Continuum of Care survey felt they were involved in helping make treatment decisions for their child.
- The Continuum served 542 children during 2006-2007. 107 children/adolescents were accepted for full case management services, seven were readmitted for services, and 101 were discharged from services. This is a four percent (4%) increase in children accepted and an 11% increase in the number of children served during the previous fiscal year.
- The Continuum provided 12 computers to our clients – at no cost to our clients or the Continuum.
- The Continuum piloted and implemented the Child and Adolescent Level of Care Utilization System (CALOCUS). An inter-agency waiver project later adopted use of the CALOCUS instrument. This system-wide use of the CALOCUS instrument increases the ability of all agencies to use similar criteria to assess and determine an emotionally disturbed child's appropriate level of support and/or level of therapeutic placement.
- The Continuum worked with other agencies to develop and present a training session to inter-agency staff and parents on "Working with Individuals with Autism Spectrum Disorders". This helped meet a common need of various state agencies who are working with an increasing number of Pervasive Developmental Disorder clients.
- The Information Technology (IT) staff replaced a troublesome e-mail server and upgraded our e-mail software to improve access to e-mail from any location. Additionally, the agency installed a SQL Server Database system and started migrating data to this new server thus increasing security, reliability and interoperability of databases.
- IT staff also redesigned major portions of our client database. The benefit is a reduction in data entry time and an increase in access to current client information.

Key Strategic Goals for Present and Future Years

During 2006-2007, the Continuum of Care worked toward achieving four key strategic goals for our organization.

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

(Key Strategic Goals continued)

3. 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.
4. Encourage Continuum staff to engage families of emotionally disturbed youth as leaders and active partners in their child's treatment - including the identification of services to address the child's and family's specific needs.

Opportunities and Barriers

The Continuum of Care is at a unique crossroads resulting from changes in federal regulations that affect Medicaid reimbursement and changes in the children's service delivery system. The Continuum is facing a decrease in Medicaid reimbursement for critical services we provide and purchase on behalf of the children we are mandated to serve.

Changes will be necessary in the delivery of case management services along with the need to increase state funding (appropriations) to replace lost Medicaid revenue. The barriers of decreased Medicaid reimbursement and changing regulations are presenting the Continuum with opportunities for change within our operation. Some changes being explored include:

- Reviewing aspects of our operations to better align staff and responsibilities
- Redesigning our targeted case management service provision by reclassifying some existing positions (Service Coordinators) into Service Coordinator Assistants
- Working collaboratively with other state agencies to help redesign the service system so South Carolina is compliant with federal regulations and meeting our customer's needs
- Documenting the impact of changes and how this affects specific budget areas that will require supplemental state funding
- Requesting that our Medicaid case management reimbursement rate be re-examined

Many of these changes will occur gradually (positions changing through attrition); we will be working with the Department of Health and Human Services on changes to our reimbursement rate and making changes to adjust to revenue shifts and reductions. The Continuum is committed to working through these barriers and approaching them with a proactive attitude to ensure the children and families do not experience a disruption in services.

As a result of previous cost-cutting measures (see strategic challenge – Section II question 8 number 4) and exploring and implementing the changes listed above the Continuum will utilize carry forward funds from previous fiscal conservation efforts to help operate during 2007-2008. However, the reductions in federal reimbursements (see Barriers first three bulleted items) and the depletion of carry forward funds will require additional state appropriations in the future. Therefore, the Continuum will be requesting an increase in state appropriate funds during fiscal year 2008-2009.

Other **Opportunities** for the Continuum of Care:

- The Continuum of Care was asked to chair an interagency planning group to address the issues that are impacting the system of care for emotionally disturbed children. Issues faced by this group include the changes in federal reimbursement (and the need for increased state funds to replace the lost federal dollars) and changes in how therapeutic residential services for emotionally disturbed children can be provided. The state agencies are working together to redesign the service system – to ensure the needs of emotionally disturbed children are met and to ensure that South Carolina is compliant with the federal regulations.
- The Continuum participated on several collaborative projects to enhance services for emotionally disturbed children.

(opportunities continued – collaborative projects)

- Continuum staff was active in numerous interagency workgroups related to Medicaid services for emotionally disturbed children. These workgroups focused on improving how services are provided and reimbursed, as well as, a waiver demonstration project (Home and Community-Based waiver request) aimed at serving children in the community rather than in institutions/hospitals. The waiver will allow families greater freedom of choice options and improved access to services.
- The Continuum continued participating on "The Shared Agenda" which is a collaborative effort with public and private non-profit groups. This group focused on increased coordination and collaboration among educational and mental health providers when working with an emotionally handicapped child.
- The Office Leader chaired the interagency Screening and Assessment Committee for the Department of Alcohol and Other Drug Abuse Services' grant, in addition, to being a participant in several of the subgroups. This grant focuses on standardization of screening and assessment tools and improved access to services, as well as, increasing the use of evidence based practices.
- The Continuum presided over interagency efforts to monitor (non-Medicaid) private service provider's compliance with State regulations.
- The Continuum was an active participant on three Transitional Services collaborative groups.

- The Continuum of Care continues to focus on utilizing "informal" community services. This has provided an opportunity for our clients to develop support systems with community groups and organizations.
- The Continuum Office Director participated in interagency workgroups to discuss services for children with Pervasive Developmental Disorders. An interagency curriculum to train staff (from various agencies) on Aspergers and Autism diagnosis resulted from this effort.

Barriers faced by the Continuum of Care during 2006-2007

- In the previous year, the Federal government reinterpreted some regulations impacting select requirements for residential programs serving emotionally disturbed children. Some of our stakeholders (private children's service providers) are affected. The impact of these interpretations may result in fewer services available to emotionally disturbed children, reduction/elimination of Medicaid reimbursement, and increased cost to state agencies when purchasing services.
- Changes in regulations are affecting the Continuum's ability to provide and receive Medicaid reimbursement for Targeted Case Management services. With a decrease in our reimbursement rate, Continuum must make changes in service provision, examine the rate reimbursement formulas, and approach DHHS about reconfiguring the way the Targeted Case Management rate is established.
- Federal reimbursement is decreasing without other money to replace lost revenue (see above two barriers). The changes in reimbursement relate to: Continuum's rate of reimbursement for case management being reduced by 48% and the federal "match" for therapeutic residential placements being reduced by 33% each year for 3 years until federal Medicaid reimbursement is eliminated.
- The lack of external monitoring of certain types of service providers is a barrier. By not having data available on children's treatment providers, the Continuum is unaware of changes in the private providers' service provision, compliance with standards, and most importantly overall safety of the children and community.
- Uncertainty about future service changes to our organization and the impact of various initiatives (program size, level of staff, classification of providers, etc) has been a barrier in formulating and implementing plans for necessary changes. Decisions made by funding sources influence how the Continuum will address issues and the impact upon our agency and services for our customers.

How the accountability report is used to improve organizational performance

The Continuum of Care's Office Director and Senior Managers use the annual accountability report to review performance expectations and plan for future improvements.

Section II - Organization Profile

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

Table II.1.1 provides information on Section II – numbers 1 – 4.

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

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Continuum of Care (COC)	Case management for children with serious emotional challenges and their families. Through case management COC: 1. develops a plan of needed services 2. advocates for the child and family 3. assesses and coordinates services 4. offers information, training and support for the family 5. maintains contact with the child, family and treatment team	• Children and adolescents with serious emotional challenges who are clients of COC • Families of children and adolescent who are COC clients • Children and families who have made application for services • State Agencies and schools who serve emotionally challenged children • Service providers who serve emotionally challenged children.	• In some instances, stakeholders are also partners. State agencies, schools, public and private (formal and informal) service providers all partner with COC to help provide services to our children and families. • The Department of Health and Human Services is another partner.

5. **Operation locations**

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

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

67	Classified	1	Unclassified
3	Temporary (Contract)	1	Temporary Grant

The above information reflects the number of positions currently filled. As of June 30, 2007, the Continuum had 23 unfilled positions (8 classified and 15 temporary grant). These vacancies are filled as funding allows. Positions for staff directly working with children and families are filled quicker than administrative positions.

7. **The regulatory environment under which your organization operates**

The Continuum of Care operates under legislative mandates, Federal and State Medicaid reimbursement 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. Key Strategic Challenges

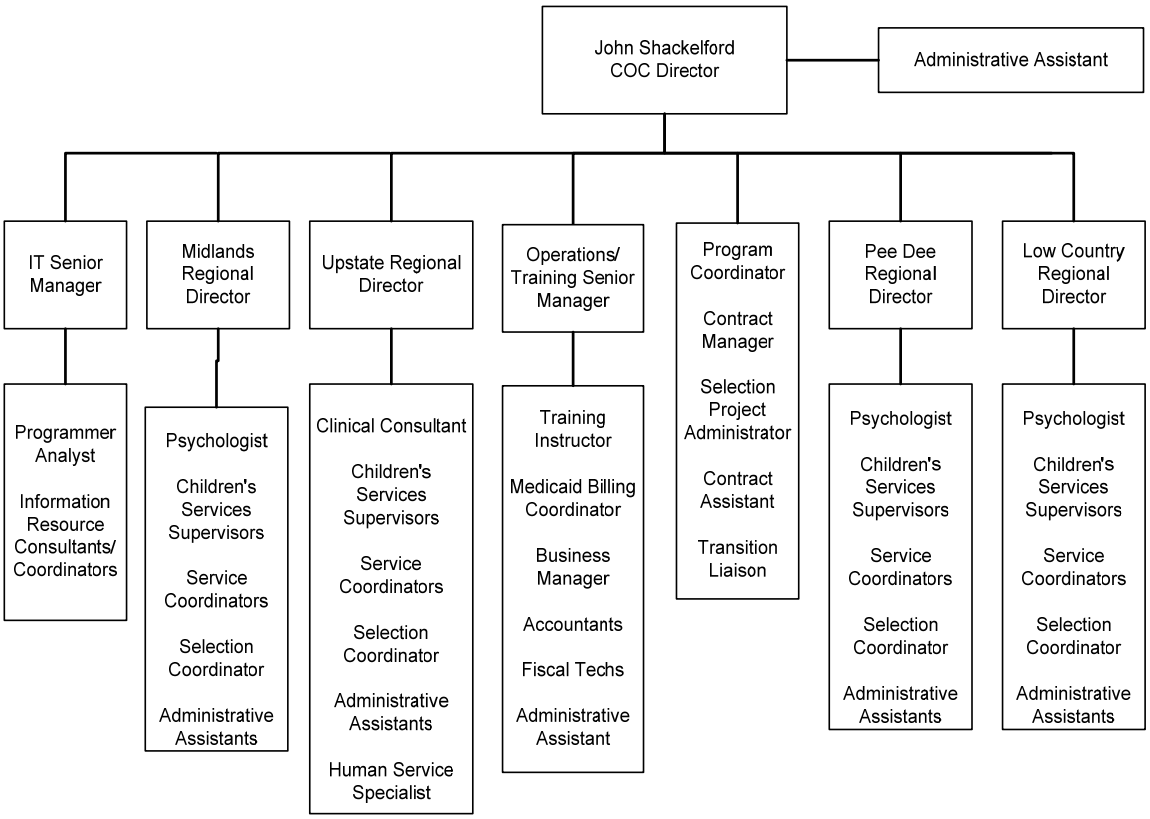
- A 48% reduction in the Continuum's targeted case management services reimbursement rate. (See Section III- category 6; question 6)
- The reduction in federal Medicaid reimbursement for therapeutic residential services (see III. 6.6)
- The more restrictive regulation interpretation imposed by funding and regulatory agencies is a challenge. Many of our partners and stakeholders may have to alter the way they provide services to emotionally disturbed children. The state agencies purchasing services for emotionally disturbed children will have increased spending in state funds when federal funds are no longer available.
- The Continuum continues to operate within past budget reductions. Since 2003 the Continuum has experienced a 43% reduction in state appropriated funds. Responses to past reductions have been evidenced by a Reduction in Force (RIF), not filling other positions, closing several satellite offices. The closing of the satellite offices continues to have an impact since the Continuum is less visible in rural and outlying areas and not geographically convenient to some of our customers.
- Service availability is a challenge faced by the Continuum of Care. The array of services available to meet the special needs of emotionally disturbed children is lacking – in specialized services, location of services, and prevention services.
- The "diagnostic" composition of our client population is changing and evolving. Continuum staff are serving an increasing number of children with Pervasive Developmental Disorders (PDD); currently nine percent of the children Continuum serves have a PDD diagnosis. This results in needing specialized training to help educate/train staff to better serve these children. There is also a lack of existing resources/services available to serve these PDD children.
- The lack of timely data by third-party monitoring entities concerning treatment providers' compliance with regulatory issues is a challenge for the Continuum. This results in staff not having current data to make the best decisions when referring and purchasing services for the children the Continuum serves.
- Due to the uniqueness of our services, there is not another state entity to compare the effectiveness of our case management services. This becomes a challenge in tracking, benchmarking, and comparing data on our case management services and needed resources.

9. Performance improvement systems

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

- Hosting four statewide Family Forums (annually)
- Requesting information/comments via Family Feedback surveys
- Obtaining comments from Teacher Feedback surveys
- Holding regularly scheduled meetings (by job types) to discuss budget issues, staff performance, process improvement and communication
- Tracking internal data on Continuum service provision

10. Organizational chart



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

OEPP – Office of the Continuum of Care

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 2,580,965	$ 1,509,449	$ 2,666,493	$ 1,614,615	$ 3,503,324	$ 1,723,324
Other Operating	$ 777,345	$ 312,089	$ 734,475	$ 311,357	$ 1,072,377	$ 322,377
Special Items	$	$	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$ 2,414,666	$ 1,571,705	$ 2,473,175	$ 1,375,848	$ 3,288,010	$ 1,388,010
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$ 765,852	$ 427,082	$ 781,359	$ 483,921	$ 945,753	$ 379,132
Non-recurring	$	$	$	$	$	$
Total	**$ 6,531,829**	**$ 3,820,325**	**$ 6,655,503**	**$ 3,785,742**	**$ 8,809,464**	**$ 3,812,843**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Continuum of Care (COC)	To provide case management services to children under the age of 21 (and their families) who have serious emotional challenges.	State	3,820,325	State	3,785,741	See tables: 7.1.1 COC child functioning 7.1.2 COC child functioning-CAFAS 7.1.3 COC service availability/delivery 7.1.4 COC level of care restrictiveness 7.1.5 transition services 7.2.1 COC customer satisfaction 7.5.1 COC compliance with regulatory standards
		Federal		Federal		
		Other	2,711,504	Other	2,869,762	
		Total	6,531,829	Total	6,655,503	
		% of budget:		% of budget:		

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

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

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

- There are several monthly meetings various staff attends where decisions about policy, updates, service provision, etc. are discussed. These include: 1) Client Services, 2) Supervisors, 3) Regional Program Directors, 4) Selection Coordinators and 5) Regional Office staff meetings.
- During 06-07 the Continuum of Care management staff revised our guiding principles, thoroughly reviewed and revised our organizational goals, strategies, evaluation measures and outcome goals.
- Quarterly, staff are informed on our agency's progress on outcomes; an Annual Organization Outcome Report is published and distributed to staff and parents.
- Newsletters, frequent e-mails, and annual meetings occur.

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

- The Continuum of Care conducts various satisfaction surveys, parent training sessions, family forums and mails newsletters to families we serve.
- The Continuum participates in quarterly meetings with private service 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 now available in Spanish to allow greater outreach to the Hispanic community.
- The Continuum has increased our focus on encouraging family involvement and participation. A strategic goal was added related to increasing family involvement.
- Public hearings were held to discuss the Home and Community Based Waiver project. This waiver will allow our customers (families) a greater freedom of choice option and improved access to services.
- The Continuum participated in inter-agency focus groups that requested and received comments from families of children with Pervasive Developmental Disorders.

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

- The Continuum of Care worked with the Department of Health and Human Services, other child serving and regulatory state agencies, and private providers to begin planning for future programming and funding changes that resulted from federal mandates.
- As stated previously, COC works with other child serving state agencies to discuss changes in policy and its impact on some of our stakeholders (private service providers). Service availability and improvement in the quality of services are the goals of interagency collaboration.
- The Continuum looks at positive changes in the child's behavior, family satisfaction, and availability of services as an indicator of the impact.

(1.3 continued)

- The Continuum provides internal monitoring of our clients and select service providers. Monitoring the client's functioning and behavior allows us to continually assess safety issues, as well as, the impact of the child's behavior on the community. The monitoring of select service providers allows staff to be more aware of the services COC children are receiving, the quality of those services, and the provider's compliance with standards – thus helping COC staff be aware of any potential impact and risks.

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

The Continuum of Care has several "checks and balances" to maintain accountability. These include:

- Conducting internal audits for the services the Continuum seeks Medicaid reimbursement (case management and wrap around services). These audits ensure the Continuum remains compliant with Medicaid contracts and program regulations. When necessary, corrective action is issued.
- Enforcing internal policy/directives that outline procedures for maintaining and handling funds
- Reviewing monthly billing reports and budget projections to keep spending in line with available designated funds. Senior leaders also discuss any needed modification and respond to budget needs.

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

Quarterly, the COC Office Director and senior managers review a variety of performance measures and progress made toward organizational goals and action plans. During 06-07, the Continuum completely reviewed and modified our overarching strategic goals, action items and desired outcomes (performance measures). The performance measures address:

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

1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization? 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. Overall, progress on client functioning is reviewed and communicated quarterly to staff.

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

- Supervision for professional licensure is offered at no cost to the staff.
- At times, management staff mentors other staff to help develop management and leadership skills.
- Through collaborative efforts with another OEPP office, the Continuum offered conflict resolution training to help enabling staff to work more effectively with our customers, stakeholders, and each other.

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

The Continuum's Office Director, senior managers, and regional leaders review our established goals, strategies, action plans, evaluation measures and related outcomes. These quarterly reviews allow COC to know the status of goal attainment.

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

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

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

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

The Continuum of Care's strategic planning process was established in 1998; the Continuum Office Director, two Senior Managers and four Regional Program Directors are key participants. The Continuum has four overriding strategic goals.

The key participants bring information/data from our clients, families, evaluation results, etc. As stated previously, during 2006-2007 our entire strategic planning process was thoroughly reviewed and revised.

Chart 2.1 **Strategic Planning Chart for Continuum of Care**

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. To ensure appropriate assessment, planning and service coordination for severely emotionally disturbed youth.	1.1 Children will demonstrate an increased ability to function in their communities while they are Continuum clients.	• Case management • Monitor child's progress at home and in the community • Utilize CALOCUS to assess need for out-of-home placements or community supports • Use "Progress in Placement" tool to conduct monitoring of client's progress in out-of-home placement. • Psychological/Transition consults • Supervisor consults • CAFAS assessments • Contact with child, family and service providers • Treatment planning meetings • Survey independent living providers to assess client's progress	Tables: 7.1.1 7.1.2 7.1.4
	1.2. Children will function better in their school environments.	• Staff participation in school IEP planning • Transition consults for children 14+ • Survey of teachers • Coordination of education support services • Case management contact with school personnel	Tables: 7.1.1 7.1.2 7.1.3
	1.3 Families will see a decrease in their child's problematic behaviors.	• Case management • Monitor child's progress at home and in the community • Supervisor consults • CAFAS assessments • Contact with child, family and service providers • Family satisfaction survey	Tables: 7.1.1 7.1.2
2. To ensure severely emotionally disturbed youth have appropriate access to a full array of community based and residential services.	2.1. Clients will receive the services they need to maximize their functioning while in the least restrictive care.	• Utilize level of care process • Psychologist/Transition consults • Supervisor consults • CAFAS assessments • Contact with child, family and service providers • Involve child, family, and service providers in treatment planning process • Interagency planning efforts • Utilize CALOCUS to assess need for out-of-home placements	Tables: 7.1.3 7.1.4 7.1.5

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
3. To increase the quality, effectiveness and efficiency of the system of care to enable emotionally disturbed children and their families to successfully transition into less intensive and develop-mentally appropriate service systems.	3.1 COC transition age clients will be better able to live independently within the community setting.	• Case management • Transition consults • CAFAS assessments • Contact with child, family and service providers • Treatment planning meetings • Survey independent living providers to assess client's progress	Tables: 7.1.2 7.1.5
	3.2 Clients with at least 1 year of service will be at the same or lower level of care after each quarter.	• Case management • Monitor child's progress at home and in the community • Utilize CALOCUS to assess need for out-of-home placements • Use "Progress in Placement" tool to conduct monitoring of client's progress in out-of-home placement • Clinical consults • Supervisor consults • Contact with child, family and service providers • Treatment planning meetings	Table: 7.1.4
4. Encourage Continuum staff to engage families of emotionally disturbed youth as leaders and active partners in their child's treatment - including the identification of services to address the child's and family's specific needs.	4.1 Families will express satisfaction with the services they receive.	• Family satisfaction survey • Family forums (one per region) • Newsletters	Table: 7.2.1
	4.2 Families will improve their advocacy skills and be active participants in the design and delivery of services for their children.	• Contact with child, family and service providers • Treatment planning meetings • Parent training	Table: 7.2.1
	4.3 Families will express an increased ability to manage the challenges presented by their children.	• Case management • Monitor child's progress at home and in the community • Clinical consults • Family feedback • Parent support groups	Tables: 7.1.1 7.2.1

2.2 How do you develop and track action plans that address your key strategic objectives?

The Continuum of Care develops and tracks our action plans on a quarterly basis, thus providing the key management and leadership staff "real time" information for review. (See 2.1).

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

See 2.1. Objectives and performance measures are reviewed in the Continuum's management/leadership group. The group members are responsible for communicating information within their region/unit; in addition, information is communicated via the Continuum (internal and external) newsletters. Annually the Continuum publishes our "report card" that summarizes the status of our goals and outcomes.

2.4 How do you measure progress on your action plans?

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

- Reports which track the amount of case management provided
- The Child and Adolescent Functioning Assessment Scale (CAFAS) is administered annually. The CAFAS reflects the child's progress in eight key areas: school/work, home, community, relationships with others, substance use, thinking, moods/emotions, and self-harm.
- Consultations with Psychologist and/or Transition Liaison
- Responses to family and teacher surveys
- Changes in level of care as indicated by the CALOCUS

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Through various consultations, supervision and community meetings, the Continuum remains aware of our customer's needs and their response or benefit to existing services. Clinical consultations help provide staff with information on diagnostic and service options.

Through collaborative interagency meetings(both regionally and State office level) staff are able to work with other child serving and regulatory agencies and/or providers to enhance service delivery as well as share information about provider's quality of services. Continuum staff are active participants on interagency workgroups to help address system issues.

COC staff participated on the workgroup for developing "waiver" services to increase the availability of community-based non-residential services as an alternative to institutional placements. To help address the challenges of increasing Autism spectrum disorders, COC staff participated in developing and presenting an interagency training.

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

Input from our customers and staff is important to this process. The Continuum completely reviewed our strategic planning documents and made revisions, additions, deletions when warranted. Comments from the family and teacher surveys and family forums are important ways to evaluate the services we provide.

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

Not at the current time.

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

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

Customer/Stakeholder	Requirements
Children (and their families) with serious emotional challenges	• To have assistance with obtaining services necessary to meet their individual needs • To reside in their home or the least restrictive environment • Other requirements are determined based on individual needs regarding treatment goals • (For clients' families) to have an avenue for input and participation
Child serving state agencies	• 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
- Various assessments on needed services, service availability, and child functioning to determine needs and expectations
- Yearly family surveys
- Regional family forum meetings
- Parent training sessions
- Hosting and attending interagency and service provider meetings to keep abreast of stakeholder needs and service availability
- Participation on state agency workgroups

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

Due to the changing and individualized needs of children the Continuum of Care serves, this is challenging. The Continuum continually assesses the services used and the child's progress using the Child and Adolescent Functioning Assessment Scale (CAFAS). The CAFAS results help drive treatment plan development and Continuum's future efforts to service development. The Continuum recently adopted the Child and Adolescent Level of Care Utilization System (CALOCUS) assessment process that will help establish a baseline measurement for all state agencies when determining the level of residential placement needed.

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

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

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

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

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

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

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

(4.1 continued)
Quarterly, key participants bring information/data from our clients, families, evaluation results, etc. Our goals, objectives, strategies, action plans, and outcomes are reviewed and updates made. The upcoming year will present challenges due to the changes in federal reimbursement; therefore operational, process systems and financial tracking systems will need close monitoring and adjustments made based on changes.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

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

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

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

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

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

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

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

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

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

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

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

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

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

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

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

5.2 How do you evaluate and improve your organization's human resources-related process?

Human resources processes are tracked through the Employee Performance Management System (EPMS). The Continuum's Office Director also meets with the Regional Program Directors to discuss human resource issues.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

The Continuum of Care provides many training opportunities:

- General agency orientation
- Detailed case management curriculum, extensive instructional and on-the-job training
- Competency evaluations and reliability ratings on select training topics occur
- Training staff attends supervisory staff meetings to ensure training is meeting staff's needs

(5.3 continued)

- Regional staff working with clients must attend training and become reliable in administering the Child and Adolescent Functioning Assessment Scale. This provides training on performing clinical assessments, which are used to measure client progress. All staff must demonstrate reliability.
- Initial and ongoing training for computer/office applications
- Internal staff (with specialized knowledge or skills) train and educate other staff.

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

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

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

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

Open communication exists between the Office Director and Regional Program Directors (RPD); likewise communication between the RPD and staff enhances performance. Information is communicated quarterly on the status of action plans and outcomes. (See 2.1 and 4.1)

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

When possible, the Continuum of Care believes in promoting from within. This often occurs with Service Coordinators entering into supervisory roles. When employees demonstrate skills or express an interest in developing skills, (when possible) job tasks are assigned to help develop or utilize areas of knowledge.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

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

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

- Each regional office has a security system and, in most cases, is located in a building/complex, which houses other businesses/agencies.
- Several mechanisms to enhance morale include: STAR outreach efforts and employee of the quarter, etc.
- Staff having direct contact with children must attend a crisis prevention course, which teaches de-escalation and proper responses to client aggression. Staff must demonstrate mastery of techniques and successfully complete a competency test.
- During 2006-2007, each operational unit and regional office developed contingency plans and procedures that outline how staff will sustain services to clients during times of abnormal or emergency circumstances or events.
- Four Continuum staff also participated in the South Carolina Emergency Management Division trainings.

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

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

The Continuum of Care has the following processes in place:

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

There are also processes to ensure clients and families receive the required services. This includes the following procedures: treatment planning requirements; minimum contact frequencies with clients, family, school, and service providers; and consultations.

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

The Continuum of Care addresses this in several ways:

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

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

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

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

The Continuum of Care accomplishes this through quarterly review of the organization and client/family goals, objectives and evaluation measures, as well as, a review of various processes.

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

Key processes are described in 6.1. There are three main methods to improve and update processes within the Continuum, these include: communication to and from staff and customers; management meetings where the strategic goals and evaluation results are reviewed; and workgroups involving staff with various job duties, customers and stakeholders.

6.6 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 projected estimates of service delivery and the year's allocation of state appropriation funds. When changes occur in either of the major sources of funding, adjustments must occur. To address previous year's reduction in state appropriations, changes were made to the administrative structure (a reduction in force occurred and realignment of duties).

(6.6 continued)

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

- All aspects of our operation to better align staff and responsibilities to adjust to the changes – this may include the redesign of our targeted case management service provision by incorporating case management assistants and freezing some administrative/operational positions.
- A request for our Medicaid case management reimbursement rate to be re-examined

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

The Continuum of Care (COC) has several goals (See chart III.2.1) related to client functioning. These are:

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

The following tables reflect the Continuum's performance levels and trends related to these goals/objectives.

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 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of parents* who felt their child's behavior at home has improved	63%	57%	57%	62%
% of teachers* who report the COC child will advance to the next grade level	84%	95%	91%	86%
% of teachers* responded that students' behaviors improved as a result of the COC's involvement	88%	83%	94%	88%
% of teachers* who stated the COC has been critical in supporting the student's educational placement and progress		87%	99%	93%
% of COC children (9th grade or above) who are on the High School diploma, Occupational Certificate or GED Education Track		51%	52%	63%

Table 7.1.2 Child Functioning (based on CAFAS assessments)

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

Performance Measure	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of clients showing a decrease in problematic behaviors in a school setting	35 %	45%	43%	40%
% of clients showing a decrease in problematic behaviors in the home	36%	51%	39%	40%
% of clients showing a decreases in problematic behaviors in the community	29%	35%	33%	32%

Table 7.1.3 Continuum of Care Service Availability/Delivery Effectiveness

Performance Measure (Many of these data points* are based on feedback provided through surveys)	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of students who have been able to remain in the classroom more consistently due to the Continuums' coordination of services* (based on teachers surveyed)	89%	81%	91%	86%
% of families* receiving WRAP services who report receiving them in the amount stated on their treatment plan	53%	42%	87%	83%
% of families* who felt services were more available to their child now that the child is a client of the Continuum	90%	75%	84%	89%
% of families* who felt that services are a higher quality now that their child is a client of the Continuum	88%	86%	85%	86%

Table 7.1.4 Continuum of Care Level of Care Restrictiveness

Performance Measure	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of children with at least six months tenure and wrap services in place who remain in their home at the end of each quarter	--	52%	54%	60%
% of clients in placement that did not require a higher level of care during the quarter	--	--	92%	93%

Table 7.1.5 Continuum of Care Transition Services

Performance Measure (data points indicated with * are based on survey results from ILS providers)	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of clients age 16+ receiving independent living skills (ILS) services that have some skills needed for employment	--	--	100%	100%
% of clients age 16+ can complete a job application	--	--	65%	53%
% of clients age 16+ have some interviewing skills	--	--	34%	39%
% of clients age 16+ have made progress on independent living skills TSP goals	--	--	90%	84%

In addition, six Continuum of Care children attended the South Carolina Youth Leadership Forum (YLF) conference in July 2007. This annual career leadership program is for high school students, with disabilities between the ages of 17-21, who have leadership potential in both their school and community. The one participant from last year was asked to serve on this year's planning committee. This conference will offer these six children the opportunity to learn about disability, community and academic resources, career options and resources thus enhancing them to grow their leadership, citizenship, and social skills.

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

The Continuum of Care utilizes two methods to verify customer satisfaction – primarily families and teachers. The Continuum's goal is: "Families will express satisfaction with the services they receive."

Table 7.2.1 Continuum of Care Customer Satisfaction Results – Family

Performance Measure All data is based on feedback provided through surveys	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of families giving Continuum an A or B rating	80%	80%	82%	88%
% of families who say they will refer other families to the Continuum	95%	80%	93%	80%
% of families more satisfied with services once their child became a COC client	84%	86%	86%	90%
% of families who report most or all needed services are being received	82%	82%	80%	80%
% of families who stated COC staff listens to their concerns when planning services	95%	96%	93%	95%
% of families who stated COC staff allows them to help in making treatment decisions for their child	--	--	--	96%
% of families who their relationship with their child has improved since they became involved with the Continuum	--		83%	86%

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

The Continuum of Care's senior managers review expenditures and pending contracted amounts at a minimum of monthly. Cost expenditures and authorized amounts are reviewed to ensure authorized costs are aligned within budget; quarterly these are reviewed with the regional offices.

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

Several aspects of our initial and clinical assessment training are competency based where Continuum staff must demonstrate a basic knowledge base and show reliability in performing the tasks. OEPP's Human Resource office tracks the work performance, satisfaction, diversity and retention, etc. of COC staff.

7.5 What are your performance levels and trends for 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 7.5.1 Continuum of Care Compliance with regulatory standards

Performance Measure	**FY 03-04**	**FY 04-05**	**FY 05-06**	**FY 06-07**
% of WRAP funds recouped by Medicaid	0%	0%	0%	0%
% of Case Management funds recoup by Medicaid (DHHS)	0%	0%	0%	0%

Appendix C

OEPP - Correspondence

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Correspondence

Section I - Executive Summary

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

Vision
The Office of Correspondence will process incoming and outgoing mail effectively.

Major Achievements for FY 2006-2007
- Received, logged and routed 26,465 pieces of correspondence
- Prepared 1,865 letters in response to constituent requests.
- Prepared 438 proclamations.
- Responded to 107 urgent, last-minute requests.
- Helped senior staff with 3,341 written responses
- Prepared certificates for 3,077 state retirees
- Handled 609 phone requests
- Managed the Governor's Citizenship program
- Managed the Reading Honor Roll program
- Assisted with the Safe Kids Calendar

Key Strategic Goals for Present and Future Years

1. Accurately log and track all mail received by the Governor's Office
2. Respond to requests and meet deadlines for letters, certificates and proclamations
3. Assist Senior Staff in responding to legislative/policy mail
4. Prepare and maintain accurate mail reports
5. Acknowledge residents' achievements with congratulatory letters

Opportunities and Barriers
Opportunities:
The staff of the Correspondence Office works mostly behind the scenes providing services to customers and stakeholders as requested. Participation in the Governor's Call Center and Citizenship Day event allows the staff to interact with constituents and other OEPP staff with a common goal of serving the people.

Through the processing of mail received and cross training in office duties, Correspondence staff gains insight into the services offered by other divisions and agencies. This increased knowledge of government operations allows staff to develop areas of further interest in education or employment opportunities.

Barriers:
As staff becomes more knowledgeable in the area of government operations, they often decide to return to school or accept other jobs in different areas, creating turnovers that can impact the efficiency of the office. Changes in staff and assignments impact the ability to handle both incoming mail and responses to legislative/policy correspondence.

Unexpected increases in the amount of mail received affects all members of the staff as they put their regular duties aside to help process the mail as it is received and, often, when it is answered. Changes in staff have contributed to inaccurate report data.

How the accountability report is used to improve organizational performance
The Accountability Report is used to review expectations and plan for future needs.

Section II - Organization Profile

Table II.1.1 – (Correspondence) Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Correspondence	Manages and maintains mail received and answered by the Governor's Office to include receiving, assigning, logging, routing, filing, monitoring and tracking Responds to letter/certificate requests including anniversary, birthday, condolence, graduation, wedding, retirement, births, special occasion, reunions, greetings, photos, scouts, miscellaneous congratulatory and etc Prepares proclamations Assists senior staff in responding to policy/legislative mail Provides receptionist duties, including walk-ins and phones, for Constituent Services and Correspondence Maintains an extensive filing system of all mail received and sent Prepares bi-weekly, quarterly and annual mail reports Prepares Issue Alerts Manages the Governor's Citizenship Award and Reading Honor Roll programs	Residents Legislators State and Federal Agencies Federal Officials Community Organizations Schools Businesses Non-residents Senior Staff OEPP Staff	OEPP staff Senior staff Governor

5. Operation locations
The Office of Correspondence is located on the first floor of the Wade Hampton Building

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

__5____ Classified _4_____Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

There is no regulatory environment for Correspondence.

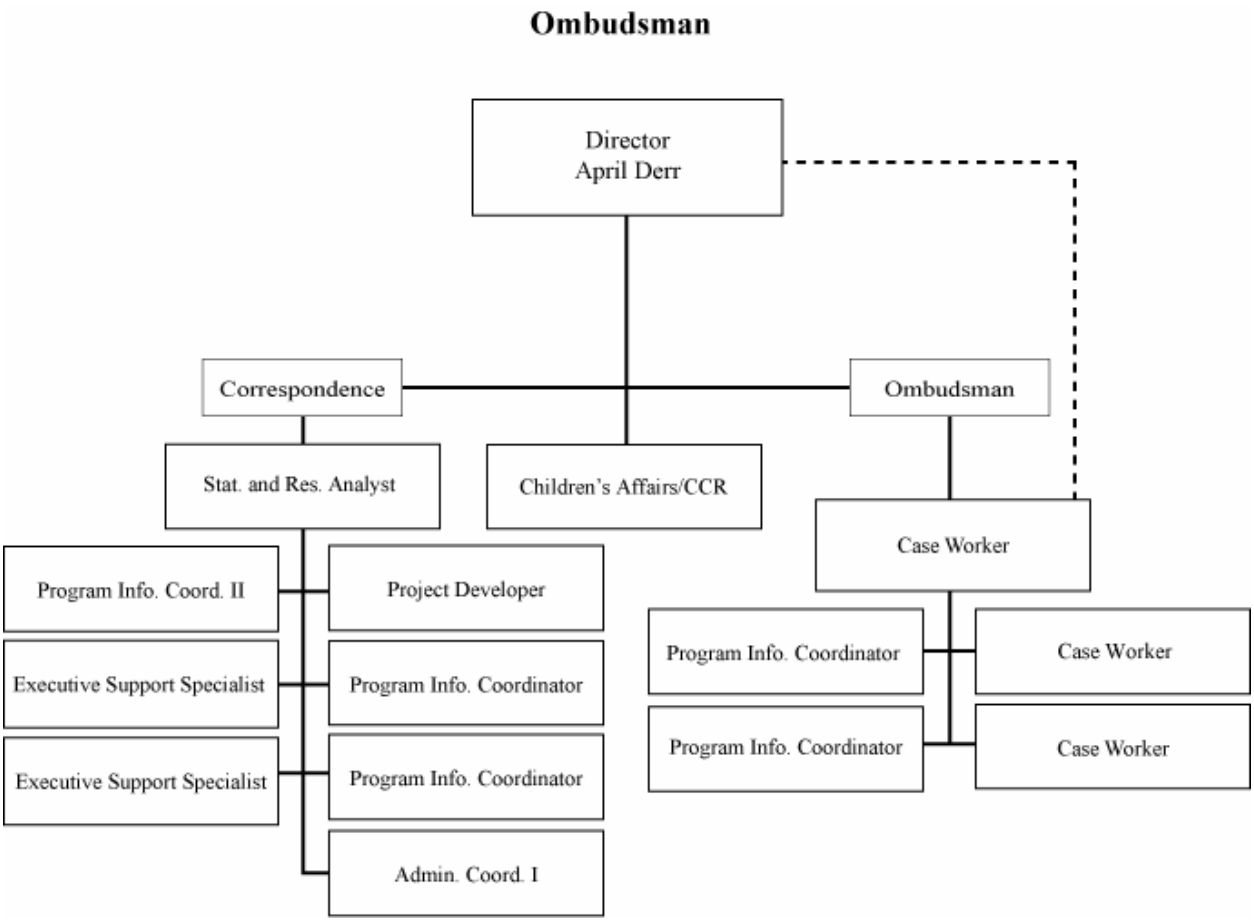
8. **Key strategic challenges**

- Unpredictable volume of mail received
- Number of last-minute requests
- Changes in staff and assignments

9. Performance improvement systems

Mail reports prepared on a bi-weekly, quarterly and annual basis enable staff members to keep track of the status of mail received. Additionally, feedback from customers and Senior Staff, as well as open communication, helps identify areas of satisfaction as well as any that may need improvement.

10. Organizational chart



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 209,605	$ 209,605	$ 218,957	$ 218,957	$ 188,225	$ 188,225
Other Operating	$ 7,159	$ 7,159	$ 15,176	$ 15,176	$ 12,000	$ 12,000
Special Items	$ 0	$	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$ 58,248	$ 58,248	$ 67,279	$ 67,276	$ 43,292	$ 43,292
Non-recurring	$	$	$	$	$	$
Total	**$ 275,012**	**$ 275,012**	**$ 301,408**	**$ 301,408**	**$ 243,517**	**$ 243,517**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Correspondence	Log, track and help respond to Governor's Office mail. Note: 05-06 expenditures included in Administration	State		State	301,408	
		Federal		Federal		
		Other		Other		
		Total		Total	301,408	
		% of budget:		% of budget:		

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

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

Correspondence staff meets regularly to address issues and procedures and establish any changes in priorities. Individual performance expectations are covered in reviews and planning stages. The Director of Constituent Services holds meetings as needed to reinforce organizational values and issues surrounding ethical behavior. Additionally, staff is encouraged to share any individual concerns they may wish to have addressed during meetings.

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

The duties of the Office of Correspondence, from logging in mail to mailing responses, are grounded in serving the customers and stakeholders. The mail log is monitored for accuracy of information and responses are individually proofed for quality and correctness.

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 Office of Correspondence relies on feedback from the public to monitor its impact on the public. Follow-up from customers, including thank you notes and calls, is shared with staff. Repeat requests for annual events also 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.

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

Senior leaders regularly review the amount and status of correspondence received and sent out from 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 and the effectiveness of management throughout the organization? How do their personal actions reflect a commitment to the organizational values?

Senior leaders encourage honest and open feedback from employees during the performance review as well as throughout the year. Employees are given the opportunity to express their opinions and offer suggestions at any time, and senior leaders are always available to address concerns of the staff.

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

Staff is encouraged to pursue additional duties and cross training.

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

Senior leaders are open to suggestions that can improve performance and are willing to implement changes that lead to a higher level of accomplishment. Staff members are encouraged to share any ideas that may help the office meet its objectives.

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

Senior leaders and staff participate in various community service programs such as the United Way, blood drives, food drives and etc.

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

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

The Director of Constituent Services meets with leaders and staff to determine immediate and long-term needs, expectations and areas for improvement. The reports, evaluations and planning stages are also used to receive feedback from all staff members as well as address individual concerns and determine overall changes or improvements that may be needed. These meetings, discussions, and reports provide vital information in all areas.

Chart III.2 Strategic Planning Chart for Correspondence

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Accurately log and track all mail received by the Governor's Office	Process management	Provide ongoing training for all staff members in order to assign and process incoming mail faster and reduce possible errors in the log.	Table III.7.1
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
3. Assist Senior Staff in responding to legislative/policy mail	Customer satisfaction	Cross-training of employees and sharing of files	Table III.7.1
4. Prepare and maintain accurate mail reports	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
5. Acknowledge residents' achievements with congratulatory letters	Customer satisfaction	Cross-training of employees and sharing of files	Table III.7.1

2.2 How do you develop and track action plans that address your key strategic objectives?

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

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

Daily interaction between staff provides the opportunity to address objectives, plans, and performance. In addition, all employees receive the reports by which they can monitor and compare their numbers.

2.3 How do you measure progress on your action plans?

Bi-weekly, quarterly and annual reports help keep track of the status of all mail received by the Office of the Governor and whether or not it is answered in a timely manner. The mail log is monitored for accuracy and additional training is provided as needed. Responses to mail are carefully proofed for quality and accuracy prior to receiving final approval, and approved language is shared between staff to facilitate the process of responding to requests. Feedback from "customers" is noted in the log and shared with appropriate staff, supervisor, and the Director of Constituent Services.

2.4 How do your strategic objectives address the strategic challenges identified in your organizational profile?

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

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

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

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.

Correspondence is not mentioned on the OEPP homepage.

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

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

Customer/Stakeholder	Requirements
Residents, Legislators, State and Federal Agencies, Federal Officials, Community Organizations, Schools, Businesses, Non-residents, and OEPP Staff	To send written correspondence to the Office of the Governor To request proclamations, certificates, congratulatory, greetings or other letters,
Senior Staff	To have drafts that need to be put in final form for mailing

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

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

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

Concerns are addressed/resolved immediately and requested changes or ideas for improvement are implemented whenever appropriate and possible.

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

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

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

Positive relationships are fostered by timely and professional responses to all requests as well as direct follow up as needed.

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?

Measurements are focused on the receipt, logging, processing, tracking, filing and responding to mail sent to the Governor's Office. Handling these tasks effectively is key to an efficient system of process management and customer satisfaction and require cross training and the sharing of files among staff.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

The bi-weekly, quarterly and annual mail reports, the logging and legislative reports, as well as customer feedback, are all used to guide decisions regarding the overall mail process and trends in constituent concerns.

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

- Correspondence Received
- Phone Requests
- Written Responses
- Proclamations
- Urgent Requests
- Legislative/Policy Responses
- State Retiree Certificates

All are reviewed through the reports issued on bi-weekly, quarterly and annual basis with adjustments in workflow and assignments made accordingly.

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

Reports are disseminated to all staff members so that individual progress can be monitored and comparisons with data from previous reporting periods can be made to identify trends and process issues that need to be addressed.

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

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

Report data is provided to all related staff members.

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

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

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?
This is accomplished through cross-training, individual and group meetings and the sharing of approved language among staff.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?
Although each staff member has regular duties, wide flexibility is used on a regular basis to determine needed changes in work distribution depending upon current staff size, mail volume and the high rate of last minute requests. Every effort is made to identify and use each person's strengths, interests and unique abilities to determine the best fit. Continuing cross training efforts help ensure that several staff members are trained to perform the key duties of several positions so that mail is processed efficiently during absences or unexpected increases in mail volume.

5.2 How do you evaluate and improve your organization's human resources-related process?
This is accomplished through evaluations, individual and group meetings and feedback from staff.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?
Monitoring the log and proofing responses for accuracy help identify areas in which additional training may be needed. Additionally, cross-training, open communication and feedback are used to determine specific areas of interest for skills development.

5.4 How does employee training contribute to the achievement of your action plans?
Employee training helps minimize errors and improve the quality of the product (letter, proclamation, etc.) received by the customer.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?
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
- 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 increases on the overall daily processes of the office.

5.6 How do you motivate your employees to develop and utilize their full potential?
Cross training is used extensively to give staff the opportunity to learn new skills and help other staff complete tasks when needed. In addition, staff is encouraged to demonstrate a good work ethic and proper attitude in a relaxed, positive atmosphere. The members of the Correspondence staff are provided opportunities throughout the year to assist with various projects such as the Citizenship Program, the Bike Ride and the Governor's Call Center, if activated.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?
Assessment methods include annual reviews, planning stages, staff meetings and regular individual communication with staff. As previously stated, while virtually uncontrollable, employee retention has been affected by several staff members who have left to return to school or re-locate to another part of the state. Correspondence has not had any formal employee grievances.

5.8 How do you maintain a safe, secure and healthy work environment?
Correspondence follows all emergency and facility procedures as directed. Should any threatening mail be received, it is turned over to SLED for evaluation.

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

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

These are determined by the nature of the requests received from customers and stakeholders. The office uses a highly detailed process for each function and duty to ensure mail is processed efficiently, and all responses are individually proofed and personally approved by the supervisor before being mailed to ensure quality and technical accuracy.

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

Feedback and other information received from staff within the Governor's Office are used to make changes or improvements whenever appropriate and feasible.

6.3 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.

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

- Bi-weekly, quarterly and annual reporting
- Rate at which requested deadlines are met
- Feedback from director, customers and stakeholders

This information is used to direct workflow changes, staff training, database updates and other changes, as indicated.

6.5 What are your key support processes, and how do you improve and update these processes to achieve better performance?
Office processes are regularly monitored for effectiveness and adjustments are made, as needed, for efficiency in assignments and workflow.

6.6 How does your organization determine the resources needed to meet current and projected budget and financial obligations?
Through careful review of projected needs and analysis of resources.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

Table III.7.1 Key Measures

	2006-2007	2005-2006	2004-2005
Correspondence Received	26,465	29,145	27,493
Phone Requests	609	361	55
Written Responses	1,865	1,826	1,932
Proclamations	438	434	482
Urgent, Last-Minute Requests	107	Not measured	Not measured
Legislative Responses	3,341	5,754	3,894
State Retiree Certificates	3,077	2,632	2,397

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

With the diversity of the Correspondence customer base, which includes constituents, legislators, local, state and federal agencies, businesses, community organizations, Governor's Office staff and others, satisfaction is measured mainly through the feedback that may be provided by the "customers," and there is no formal process in place. Every effort is made to fulfill last minute requests and, unless other arrangements are made, requests are handled within 2 weeks.

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

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

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

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

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

There are no formal measures in place for these items.

Appendix D

OEPP - Crime Victims Ombudsman

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Office of the Crime Victims' Ombudsman (CVO)

Section I - Executive Summary

Mission Statement

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

Vision

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

Major Achievements for FY 2006-2007

-Participated in an assessment by the Department of Justice's National Institute of Justice, in which CVO was declared a viable candidate to be included in a full-scale federal evaluation which would provide support of state programs that work to ensure compliance with victims' rights.

-Planned and implemented an upstate regional compliance training that received the highest evaluation ratings in CVO history.

-Planned and implemented the CVO & State Office of Victim Assistance (SOVA) 2nd Annual Crime Victims' Unity Ceremony.

Key Strategic Goals for Present and Future Years

-To efficiently resolve complaints made by crime victims.

-To ensure ethical performance and accountability.

Opportunities and Barriers

Opportunities

-Being the remedy agency within the criminal justice system that victims can receive assistance from when their rights have been violated.

Barriers

-The lack of recurring funding to CVO's budget since its inception in 1994.

-The inability to impose sanctions against violators of the Victims' Bill of Rights.

How the accountability report is used to improve organizational performance

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

Section II - Organization Profile

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

2. Key customers segments and their key requirements/expectations

3. Key stakeholders

4. Key suppliers and partners

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

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

5. Operation locations

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

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

____2__ Classified ____1__ Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

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

8. Key strategic challenges

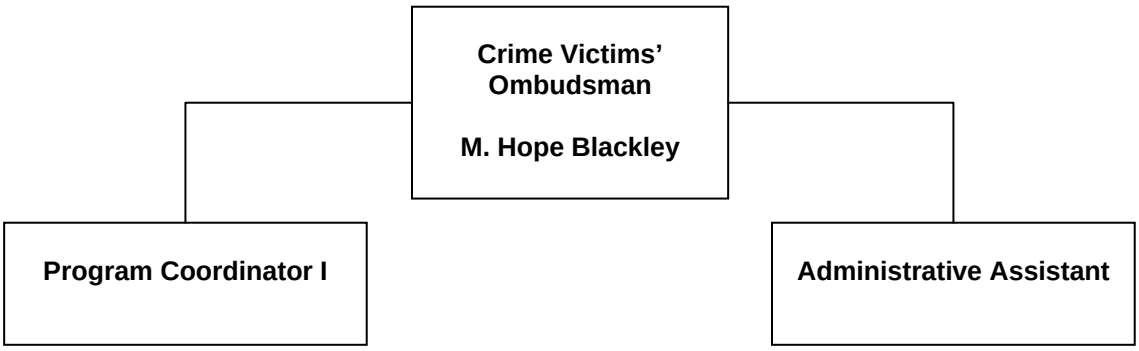
-Having limited finances and non-recurring funding from 2006-2007 increase, since CVO's inception in 1994.

-Having limited resources for violators and the need for sanctions and/or penalties when violation(s) have been proven.

9. 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.

10. Organizational chart – *Chart 1*



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 97,458	$	$ 110,621	$	$ 119,920	$
Other Operating	$12,202	$	$18,172	$	$18,700	$
Special Items	$	$	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$28,771	$	$32,088	$	$37,694	$
Non-recurring	$	$	$	$	$	$
Total	**$138,432**	**$**	**$160,881**	**$**	**$176,314**	**$**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Crime Victims' Ombudsman (CVO)	To refer, provide liaison services, and attempt to resolve complaints of crime victims.	State	0	State		See Table III.2 & Chart 2 & 3
		Federal	$24,058	Federal		
		Other	$114,374	Other	$160,881	
		Total	$138,432	Total	$160,881	
		% of budget:	0%	% of budget:	0%	

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

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

a- Short & long term direction and organizational priorities include strengthening the services of the CVO by ensuring that there is recurring funding for the next fiscal year, that there are reprimands imposed for violators in the future, and overall awareness of the CVO is increased by conducting trainings, presentations, and attending more conferences and functions geared toward victims.

b- Performance expectations are to service every crime victim that contacts the CVO to ensure that they have received the best referral, service, and resolution according to the law.

c- Organizational values are to efficiently assist each crime victim in a relevant, timely, impartial and accessible manner.

d- Empowerment and innovation comes from assisting every crime victim to get a resolution to their problem. Empowerment comes from assisting these victims in accordance to the Victims' Bill of Rights. Innovation comes after conducting and attending trainings while gaining new feedback and updates in this ever so changing field.

e- Organizational and employee learning are implemented by monthly staff meetings where an agenda is set for feedback, staffing of cases and reviewing what can be improved.

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

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

By giving full, direct attention and returning calls within a 24 hour period to assist victims with their problems or questions in an efficient and timely manner.

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

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

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

By conducting and performing the duties and functions as outlined by the enabling legislation.

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

Respondents of correspondence and formal inquiries within the time frames set forth by CVO guidelines. Specifics measurements can be found in 4.3.

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

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

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

By encouraging new and different approaches and also providing open opportunities to assist (such as approval of appropriate training) and giving experiences, advice, and guidance in the field of victim advocacy.

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

By having an open door policy and an open mind to different approaches, suggestions to solving issues, and making improvements.

1.9 How does senior leaderships actively support and strengthen the communities in which the organization operates? Include how senior leaders and employees contribute to improving these communities.
By conducting routine grant funded training in reference to compliance and by serving on numerous boards and councils such as the South Carolina Victim Assistance Network (SCVAN) Board, South Carolina Department of Probation, Parole and Pardon (SCDPPPS) Services Victims' Advisory Council, Mother's Against Drunk Driving (MADD) State Operations Council, Parents of Murdered Children (POMC) Community Advisory Board, State Victim Assistance Training Academy (SCVAA) Steering Committee, and Victim Service Coordinating Council (VSCC).

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

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

a- The CVO strengths include being the only legislatively mandated victim service provider to ensure the rights of crime victims are upheld according to the Victims' Bill of Rights. The CVO's main weakness is the inability to impose sanctions and/or penalties as well as inadequate funding to run the office.
b- The potential risk of financial, regulatory, societal would include insufficient funding of the CVO.
c- There are no major issues at this time with shifts in technology or regulatory environment.
d- Human resource capabilities and needs are met by the HR director and staff.
e- Opportunities of the CVO include a one-time award for increased funding by the General Assembly. One main barrier would include the ability to impose sanctions and/or penalties for those who have clearly violated the rights that have been set forth.
f- The CVO's business continuity in emergencies would be followed through by the CVO's Pandemic Procedure Plan that's been set forth.
g- The CVO's ability to execute the strategic plan would be by gaining permission from supervisory staff to seek funding on a recurring cycle and accepting invitations for presentations and training by outside entities.

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

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To efficiently resolve complaints made by crime victims	By receiving and responding to all crime victims' complaints in a timely and efficient manner with the best overall resolution.	Refer & provide liaison services.	See chart 2 & see Table 7.1:1 & 2
To ensure ethical performance and accountability	By acting as a neutral third party that ensures all crimes victims are served justly, equitably and fairly by SC criminal justice system organizations.	Review & attempt to resolve complaints by crime victims.	See charts 2 & 3

2.2 How do you develop and track action plans that address your key strategic objectives?
By referring to our case management software that statistically keeps how the CVO resolves crime victims' complaints.

2.3 How do you communicate and deploy your strategic objectives, action plans, and related performance measures?
By performing the duties outlined in the enabling legislation to ensure that all objectives, action plans, and performance measures have been met.

2.4 How do you measure progress on your action plans?

By the number of complaints received each fiscal year and focusing on the major complaint during training and presentations.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

By showing that these challenges need to be addressed to ensure overall effectiveness and accountability by requesting recurring funding from the previous one-time increase and working on a solution to incorporate penalties and/or sanctions.

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

By reviewing and implementing new procedures/plans as necessary according to changes in the field of crime victims' issues, such as changing of laws and requests by victims and their providers.

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 agency's plan is not currently available via internet.

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

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

By enabling legislation that requires us to serve crime victims.

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

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

By listening to the feedback of the constituency the CVO comes in contact with and then evaluate what needs to be improved upon.

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

By making the appropriate changes when needed to better serve crime victims.

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

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

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

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

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

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

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?
By reviewing data/information on a monthly basis, then determining where the CVO is as far as strengths and weaknesses. After this, the actions of the CVO are to improve on the weaknesses that have been identified.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?
Key measures* are reviewed on a monthly basis and compared with current needs and/or positive reviews from customers. This helps keep the CVO current on the needs of crime victims.

***Key Measures**
-Percent of correspondence responded to within a 48 hour time period -goal is 95%
-Percent of all formal inquiries conducted within a 4 month period -goal is 90%
-Number of trainings per employee per fiscal year -goal is 2
(Results of this can be found in Category 7 Section III Tables 7.1:1 & 1:2)

4.4 How do you select and use key comparative data and information to support operational and strategic decision-making and innovation?
Selective comparative data and information by the overall involvement of crime victims is used as a whole. Once selected, it is used to compare and decide in what direction the CVO needs to go and how we can better serve customers.

4.5 How do you ensure data integrity, timeliness, accuracy, security and availability for decision-making?
By maintaining the office case management system, FileMaker Pro.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?
By acting on these findings in an objective way, with the focus being on improving performance in new ways with current data and legislation.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?
By reviewing case management statistics, cases, and the process of how to handle difficult complaints through monthly meetings and being readily available to answer any and all questions.

Section III – Elements of Malcolm Baldrige
Category 5 Work Force Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

By listening to employee suggestions and opinions, assigning calls and cases, and reviewing cases with staff on a monthly basis to ensure that all are in accordance with carrying out the duties of the CVO.

5.2 How do you evaluate and improve your organization's human resources-related process?

By keeping constant contact with HR for updates and advice on human resource issues.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

By requiring at least two trainings (in-house or out-of-house) per year for each employee. This is done by requesting that staff members search for appropriate training that "fits" their job description and duties. Then each staff member will be asked to convey their training knowledge to other staff members after their attendance at the requested and approved training.

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

By sharing the education of an employee's training with other staff members, which is then implemented into daily use when necessary for improvement of the CVO.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

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

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

By being attentive to each employee's ideas /suggestions and implementing them whenever possible. Outside favorable training, if an employee shows an interest, is encouraged as well.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

By having a one-on-one meeting with employees, which gives every employee a chance to verbalize their thoughts and feelings to the director directly. By documenting these meetings and keeping this information in each employee's file. All retention and grievances are done in the same manner, within a private setting, and documented.

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

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

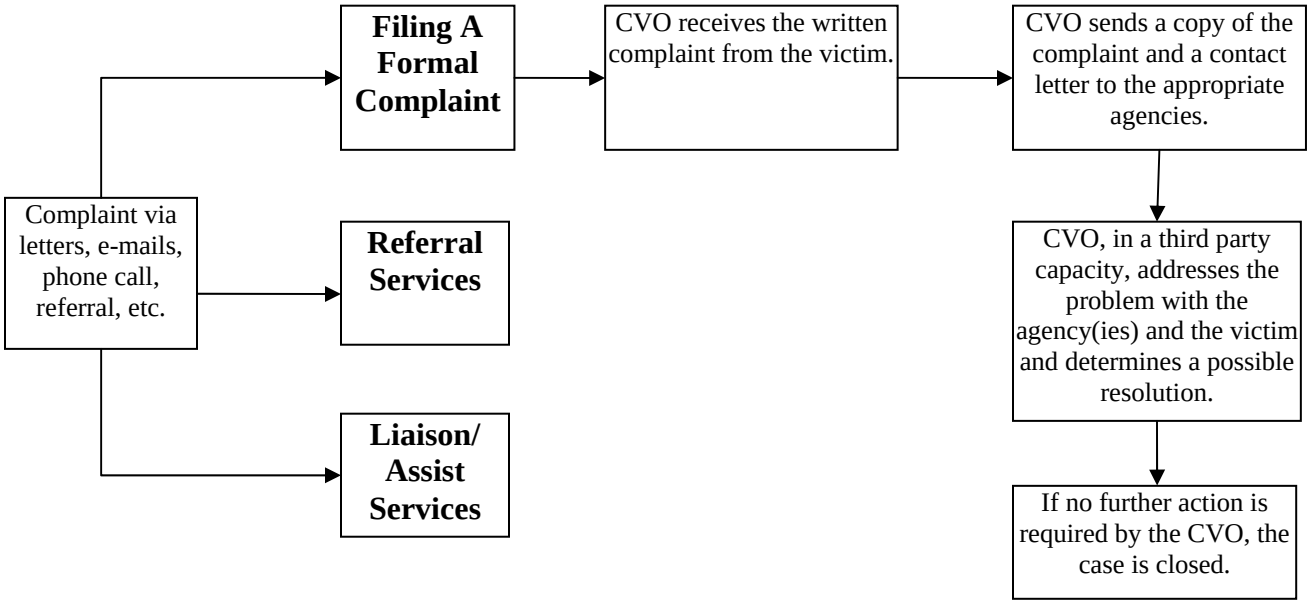
Section III – Elements of Malcolm Baldrige
Category 6: Process Management

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

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

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

How Complaints are Handled in the CVO - General Overview



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

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

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

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

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

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

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

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

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

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

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

Performance measures:

Table 7.1:1

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

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

Table 7.1:2

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

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

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

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

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

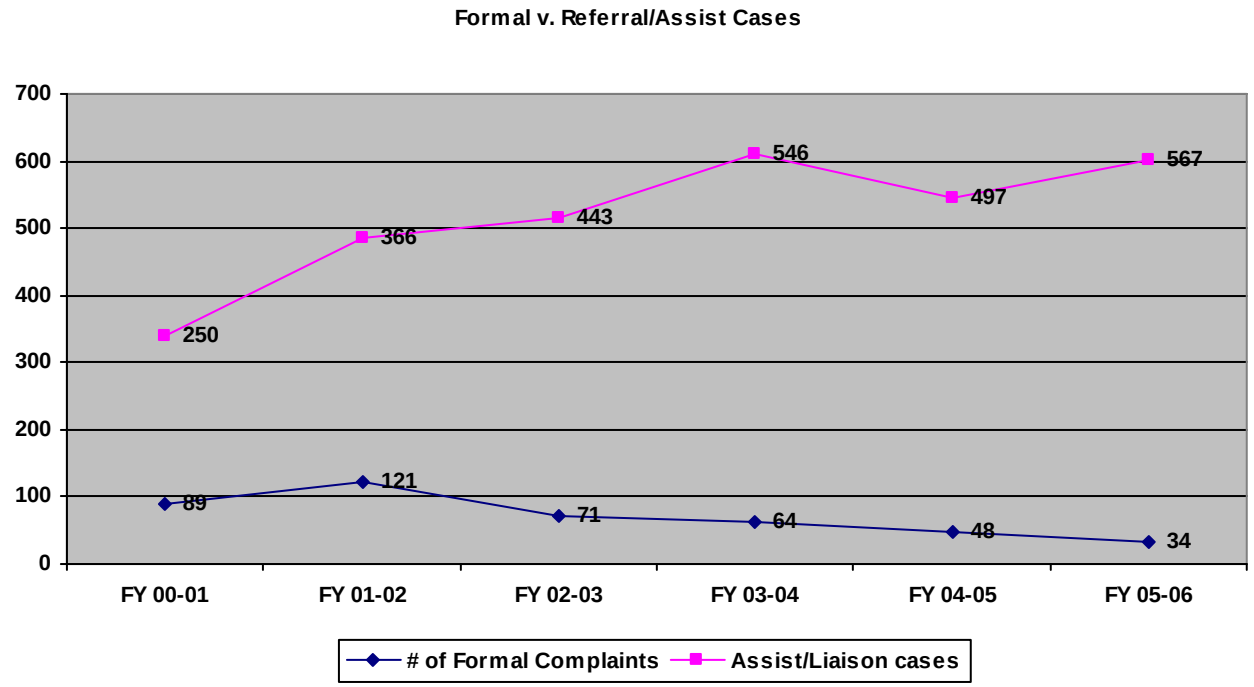
To not go over the CVO's approved budget. This is done by cutting cost as much as possible and investigating cost effective ways to reduce the budget instead of increasing it.

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

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

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

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



Appendix E

OEPP - Developmental Disabilities Council

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Developmental Disabilities Council

Section I - Executive Summary

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

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

Major Achievements for FY 2006-2007

- Each year the Developmental Disabilities Council publishes a summer recreation guide. This year the guide was expanded to include recreational events such as camps, sporting activities and other summer programs, happening year round. In addition, the council partnered with South Carolina Parks Recreation and Tourism to add a section to the guide to include recreational activities for people with disabilities through state parks. Also, the guide was distributed at all of the South Carolina welcome centers. Nearly 6,000 copies were distributed across the state.
- Through the York County Department of Special Needs Board's Healthy Choices Project, a grant through the Developmental Disabilities Council, a registered dietician and an intern from Winthrop University designed menus to accommodate individuals with developmental disabilities diet needs. Also, through this grant project, clients are taught alternatives to unhealthy food choices. Some persons with disabilities through diet and exercise were able to better control their blood-sugar levels and were able to reduce or eliminate insulin infections. By making better choices for healthier lifestyles through diet and exercise, 224 consumers lost a total of 803 pounds in one year.
- Through another grant, the South Carolina Developmental Disabilities Council, in cooperation with Clemson University, Youth Learning Institute and 12 other Piedmont Disabilities and Special Needs Boards provided a quality recreational camp to include weekends and week long camps for 400 people with special needs through grant funding provided to the Emerald Center Multi-County Board for Disabilities and Special Needs through the Recreation/ Social Inclusion Program for Individuals with Disabilities and Special Needs.
- Through the Spartanburg School District Seven PROWL, Providing Relevant Occupational Work-based Learning program, funds allowed the school district to provide 42 students with special needs the vocational courses in conjunction with the regular vocational classes to meet the needs of individuals with disabilities to prepare them for employment. Students were able to participate in integrated vocational training and community-based training experiences such as, building and home repair, which includes welding. Also students learned about welding, customer service, and food service. Out of 42 students, 12 have paid employment. One student was able to get a job making $40,000 per year and another close to $60,000 after leaving the PROWL program.

Key Strategic Goals for Present and Future Years

Through a competitive application process, the Developmental Disability Council will provide grant funding to support new programs in these areas of Employment, Health, Quality Assurance, and Community Supports. These are areas identified in the Developmental Disability Council's Five Year State Plan.

- People with disabilities who want to work, work in places of their own choosing.
- Individuals and their families know and understand their rights to make informed choices.
- Improve the wellness of people with developmental disabilities in South Carolina and prevent the occurrence of secondary debilitating conditions.

Through a competitive application process, the Developmental Disability Council will provide grant funding to support new programs in these areas of Employment, Health, Quality Assurance, and Community Supports. These are areas identified in the Developmental Disability Council's Five Year State Plan.

Opportunities and Barriers

The Developmental Disabilities Council is just beginning the implementation of a new 5-year state plan. As a result, the DDC has the opportunity to take on new types of projects in the areas of employment, health, quality assurance, and community supports. This could also be a barrier in that the council is looking at funding projects that it has never been involved with before. Other barriers include breaking down the stereotypes associated with individuals who have disabilities.

How the accountability report is used to improve organizational performance

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

Section II - Organization Profile

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

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

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

5. **Operation Location:** The DDC is located at 1205 Pendleton Street, Columbia, SC in the Edgar Brown Building, Room 453

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

____5___ Classified ____1___ Unclassified _____Contract

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

7. **The regulatory environment under which your organization operates**

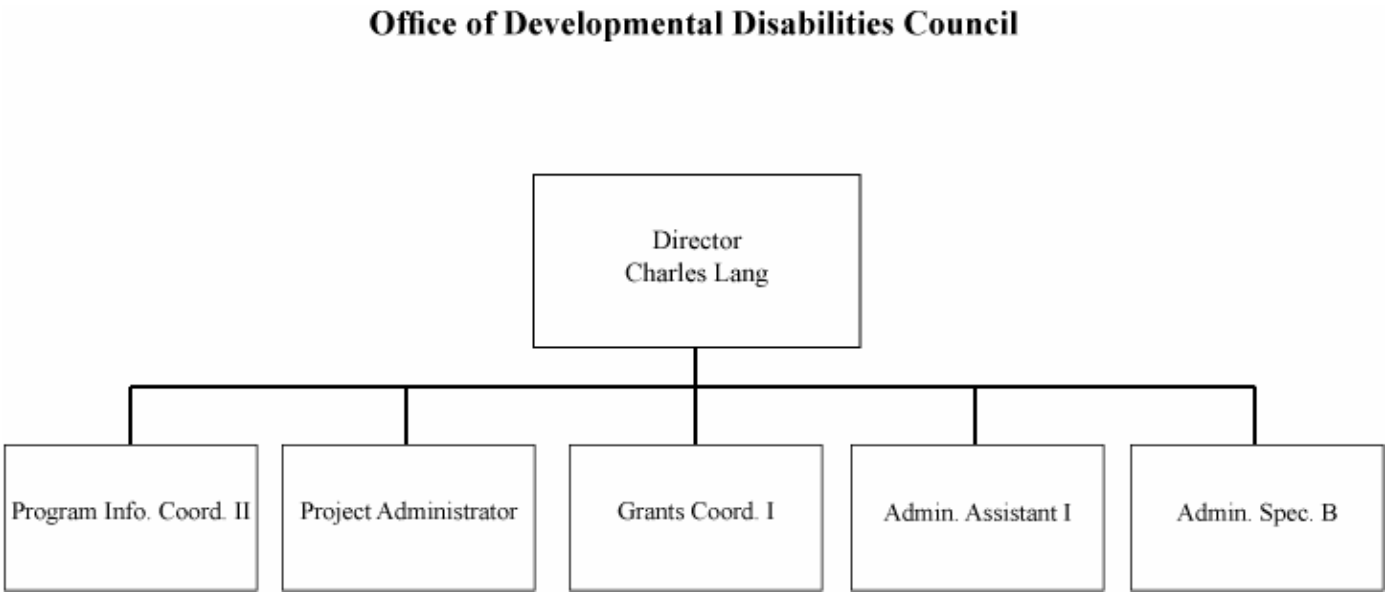
The Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402), which is Federal Public Law.

8. **Key strategic challenges**
   - People with disabilities who want to work often find difficulties in finding jobs of their own choice.
   - People with developmental disabilities and their family members often do not know their rights or how to make informed choices.
   - People with developmental disabilities often find it difficult to have the knowledge to improve their wellness and/or to prevent the occurrence of secondary debilitating conditions.
   - The Developmental Disabilities Council has recently implemented a new 5-Year State Plan. As a result, the DDC's priority areas have changed, as well as the way sub-grantees are chosen.

9. **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 successful.

10. Organizational chart



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 227,288.95	$33838.59	$ 200,990.97	$ 39,787.40	$ 236,917	$ 37,385
Other Operating	$65,722.52	$10,448.43	$48,335.38	$11,583.99	$91,862	$14,862
Special Items	$6,812.36	$1,703.08	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$805,257.23	$54,176.00	$559,519.32	$54,176.00	$ 1,704,176	$ 54,176
Fringe Benefits	$64,964.94	$10,252.53	$48,335.38	$11,583.99	$	$
Non-recurring	$	$	$	$	$	$
Total	**$1,170.046**	**$110,418.63**	**$857,181.05**	**$117,131.38**	**$ 2,032,955**	**$ 106,423**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
DD Council	To administer and monitor federal grants funding to sub-grantees, providing services for persons with Developmental Disabilities.	State	110,418.63	State	117,131.38	
		Federal	1,059,627	Federal	740,049.67	
		Other	0	Other	0	
		Total	1,170,046	Total	857,181.05	
		% of budget:		% of budget:		

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

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

- Council meetings are held quarterly. Those in attendance include: 1.) staff, 2.) consumer members of the DDC, 3.) parents, 4.) state agency representatives, 5.) representatives from various advocacy organizations.
- During 2006-07, the DDC revised organizational goals, strategies, evaluations measures and outcome goals through the writing of a Five Year State Plan.
- Quarterly, through DDC meetings, staff and council members are informed on progress of outcomes.
- Newsletters, frequent e-mails, and the distribution of other publications such as the Recreation Guide, brochures, the DDC's Executive Summary, and legislative updates occur.

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

- The DDC conducts various satisfaction surveys, training sessions, forums, and mails various publications to those served through council efforts.
- The DDC holds quarterly meetings with council members to discuss relevant issues, policies, etc. related to services for individuals with developmental disabilities.
- Through the DDC's new Five Year State Plan, goals were written to include four areas of emphasis: Quality Assurance; Community Supports; Employment; and Health.

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

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

The senior leader of the Developmental Disabilities Council maintains fiscal, legal, and regulatory accountability through a careful review of all requests for reimbursement from sub-grantees and through site visits.

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

The Developmental Disabilities Council has four priority areas which include health, employment, community supports, and quality assurance. Senior leaders measure key indicators yearly while compiling data for the annual performance report which is submitted to the federal government.

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

The DDC director and staff communicated and provide feedback on individual, as well as, organizational items. By listening and reviewing feedback from staff and sub-grantees, senior leaders are able to make adjustments in internal processes, directives, and action plans. Overall, progress on sub-grantees is reviewed and communicated to staff.

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

The Developmental Disabilities Council's senior leader is involved in training through the National Association on Developmental Disabilities. Members of the association have regular discussions on managerial issues and share information with staff members to discuss how to improve management techniques as needed.

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

To create an environment for performance improvement, accomplishment of strategies, objectives, and innovations, council staff and senior leaders have group discussions and brain storming is encouraged. In addition, during the review process, the director works with staff to identify training needs to provide additional training.

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

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

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

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

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

Chart III.2 Strategic Planning Chart for Developmental Disabilities Council

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

2.2 How do you develop and track action plans that address your key strategic objectives?

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

2.3 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 and this information is included in other printed materials.

2.4 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. Sub-grantee progress is measured through monthly financial status and program status reports, quarterly reports, and an annual close-out review.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Grants give individuals with developmental disabilities the opportunity for meaningful work and inclusion in their communities.

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

This process is developed by staff and presented to the council's executive committee for review. After approval, recommendations are presented to the full council to receive comments. After public hearing and an extensive public comment period, council is divided into committees based on the four priority areas which include Health, Quality Assurance, Community Supports, and Employment, the council members begin developing our 5-year State Plan by writing goals and outcomes. The process takes about a year and a half. For our most recent plan that was completed last year, the council used an outside facilitator. When the draft plan was completed, it was made available for public comment The final version of the plan was submitted to the Administration on Developmental Disabilities and was approved as submitted. The council is now implementing this plan.

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.

www.scddc.state.sc.us

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

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

Customer/Stakeholder	Requirements
People with disabilities who want to work, work in places of their own choosing.	Funding through DDC grants to provide services
Individuals with developmental disabilities get to make their own choices	Funding through DDC grants to provide services
Sub-grantees	Funding through DDC grants to provide services

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

Changes in federal funding sourced expectations are communicated in writing from the funding source and/or via national associations. Sub-grantee needs and expectations are assessed through face –to-face meetings, polls, and public hearings on draft state plans. Needs and expectations are delineated and updated through the annual local needs assessment process.

3.3 How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?
Information garnered through polls and public hearings is incorporated in final drafts of state plans and is sued to offer appropriate training and technical assistance. Feedback from monitoring visits is used to draft training modules for other sub-grantees.

3.4 How do you measure customer/satisfaction and dissatisfaction, and use this information to improve?
Dissatisfaction is assessed based on complaints/requests for hearings received.

3.5 How do you build positive relationships with customers and stakeholders? Indicate any key distinctions between different customer 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?
This is required by the Developmental Disabilities Assistant Bill of Rights Act (P.L. 106-402), which is Federal law.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?
The council uses feedback from customer satisfaction surveys and council member feedback during the annual review process of the council's state plan.

4.3 What are your key measures, how do you review them, how do you keep them current with your needs and direction?
The following key measures come from our current 5-year State Plan. Each year, these measures are reviewed by staff and council, to determine any changes that need to be made.

Employment

- Increase the number of people who are employed competitively by 10 percent.
- Increase by 10 percent the number of individuals who are able to have transportation.

Formal/Informal Community Supports

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

Quality Assurance

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

Health

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

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 DDC administered grants that post via the web best practices from across the country.

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

- Uses many data sources from federal sources and rely on their reliability for many considerations.
- Receives routine monthly and semi-annual reports from sub-grantees.

4.6 How do you translate organizational performance review findings into priorities for continuous improvement?
Sub-grantees develop corrective action plans in response to weaknesses and /or findings indicated via the monitoring process. The DDC encompasses these needs when identifying overall network training needs.

4.7 How do you collect, transfer and maintain organizational and employee knowledge (your knowledge assets)? How do you identify and share best practices?
Staff are cross-trained within divisions to ensure retention of organizational and employee knowledge. Manuals and/or administrative guides have been developed outlining the general procedures and requirements of each grant. Staff is encouraged to contact and participate in trainings with other agencies and states to share best practices.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?
The staff is divided into grant specific responsibilities, in addition to the fiscal and audit responsibilities. Staff work products are routed through that grant manager, as well as through audit, fiscal, and the director, to ensure fiscal and programmatic cooperation in the administration of federal funds. The staff is encouraged to participate in training designed to increase knowledge of their assigned duties.

5.2 How do you evaluate and improve your organization's human resources-related process?
Human resource processes are evaluated through staff feedback and exit interviews.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?
Internal training needs are identified and addressed through the EPMS process. Sub-grantee training needs are assessed through the monitoring process and subsequent improvements in sub-grantee processes and performance are used to assess the effectiveness of training.

5.4 How does employee training contribute to the achievement of your action plans?
Meeting training needs allows employees to work more efficiently and effectively. It also improves job performance and job satisfaction.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?
Employees are considered stakeholders in the day to day operation of the office

5.6 How do you motivate your employees to develop and utilize their full potential?
Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?
Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. The DDC also encourages staff to attend trainings to improve their skills and enhance office procedures.

5.8 How do you maintain a safe, secure and healthy work environment?
A safe, secure, and healthy workplace is maintained through compliance with state and federal regulations on workplace requirements.

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

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

- DDC 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)
- DDC external management (applications 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 (Health and Human Services, Administration on Developmental Disabilities)

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

Employees are cross-trained to ensure retention of organizational knowledge through staff changes. New technology is assessed and incorporated.. State procurement guidelines are followed by the DDC and sub-grantee procurement guidelines are modeled after the state guidelines to ensure cost are competitive.

6.3 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.

6.4 How do you systematically evaluate and improve your key product and service related processes?
Processes are evaluated through the monitoring assessment tools for each grant. In addition, in FY 06, the DDC underwent a process review utilizing an external consultant that specializes in DDC processes. Recommendations provided from this review were incorporated into DDC procedures.

6.5 What are your key support processes, and how do you improve and update these processes to achieve better performance?
Key processes include the development of state plans, evaluation of sub-grantee application budgets and work plans, monitoring, and training and technical assistance. These activities are evaluated annually in the development of new state plans by examining obstacles from the previous year and best practices of other states.

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

Staff members of the Developmental Disabilities Council review budgets from past years to determine long-term trends in spending. The DDC uses those trends to project spending based on staffing and the training needs of the staff. Budgets for council grants are determined by the council by reviewing grant application and funding determination.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

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 Five Year State Plan. Priority is given to those grants that meet the goals and objectives identified in the state plan.

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

We have required that a customer satisfaction piece be a component of the grant review process. Each subgrantee is required to develop a customer satisfaction survey based on the goals and objectives of the grant. Council staff reviews the results of each survey for each grant. Overall, the customer satisfaction surveys have shown positive results. This year, reports indicate 750 individuals receiving services through DDC funding were very satisfied, 53 were somewhat satisfied and 11 individuals were not satisfied.

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

We review quarterly reports from sub-grantees and measure against requirements for reimbursement. Fiscal matters are reviewed when application is submitted. Reimbursements are sent in quarterly along with a fiscal report which is reviewed on a quarterly basis. Also, staff monitors on a yearly basis to review grant projects for expenditures. Back-up documentation is required to support reimbursement.

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

Discussions are held with employees during the EPMS process.

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

This is done through our sub-grantee process. Staff makes regular on-site visits. Performance levels are reviewed when application is submitted. Progress reports are sent in quarterly which are reviewed on a quarterly basis. Also, DDC staff monitors grant site on a yearly basis to review grant projects for compliance.

Appendix F

OEPP - Office of Economic Opportunity

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Economic Opportunity

Section I - Executive Summary

There are approximately 547,869 persons in the Palmetto State living at or below the poverty level (2000 US Census, Table STF 3 Profile). Working in partnership with the South Carolina community, the Office of Economic Opportunity* (OEO) administers and distributes funds for local initiatives in all 46 counties that are designed to appreciably impact the causes of poverty. The programs accomplish anti-poverty goals and permit maximum flexibility in meeting locally identified needs. Programs sustain the entire range of life necessities, including health care, education, employment, and housing assistance. Currently, the OEO administers five federally funded programs and one other-funded program; total annual funding is approximately $24 million. Each program operates on a different program year and applicants must be income eligible. Household income guidelines are based upon the federally issued Poverty Income Guidelines that are updated and published annually. Monthly household incomes cannot exceed 125% for Community Services and 150% for Energy Services, based upon the number of persons who reside in each household.

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

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

Major Achievements for FY 2006-2007

- The OEO received a Partnership Award from the SC Association of Community Action Partnerships for enhancing the partnership with South Carolina Electric and Gas, through the Winter Assistance Fund and through collaborative efforts giving South Carolina community action agencies access to the SCE&G system to make online pledges.
- The OEO supported and participated in the 2007 Homeless Count.
- Sponsored Results Oriented Management and Accountability (ROMA) and case management training for subgrantees. Over 75 individuals were trained in case management. Over 30 individuals participated in ROMA training.
- Obtained $20,000 from Piedmont Natural Gas to supplement the Low-Income Home Energy Assistance Program.
- The OEO was selected to receive $500,000 in Workforce Investment Act money by the SC Workforce Development Board for competitive grants for soft skills employment training in the 2008 fiscal year.
- In FY06-07, the OEO underwent a process review utilizing an external audit firm that specializes in federal grants management. Recommendations provided from this review were incorporated into OEO procedures

Key Strategic Goals for Present and Future Years

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

Opportunities and Barriers

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

How the accountability report is used to improve organizational performance?

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

Section II - Organization Profile

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

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

CSBG, LIHEAP, and WAP services are delivered via a network of 15 community action agencies (CAAs) serving all 46 counties in the state. LIHEAP is supplemented through Project Share, a fund consisting of donations from SCE&G, Progress Energy, Duke Energy, and Piedmont Natural Gas.

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

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

5. Operation locations

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

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

___19__ Classified ___1__ Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

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

8. Key strategic challenges

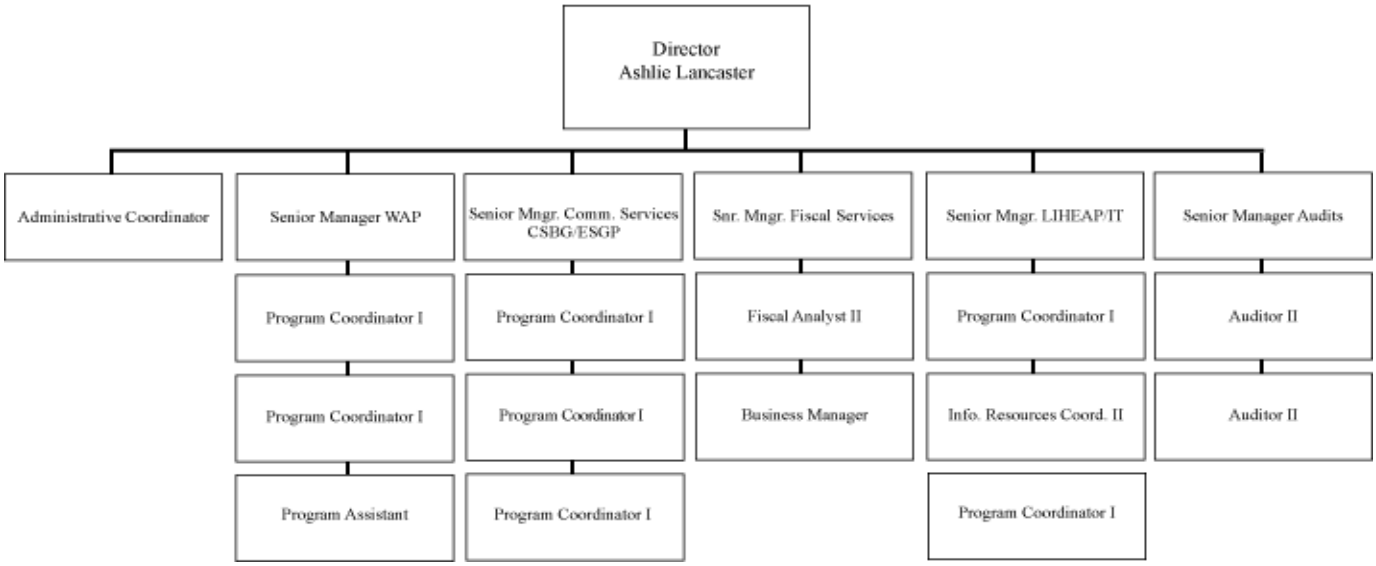
- Working with subgrantees to encourage and implement best practices among South Carolina's community action network.
- Ensuring subgrantee compliance with state and federal regulations while promoting a culture of cooperation through advocacy, training, and technical assistance.

9. 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.

10. Organizational chart

Economic Opportunity



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	670,040	$	761,243	$	865,500	$
Other Operating	302,406	$	479,519	$	340,000	$
Special Items	0	$		$		$
Permanent Improvements		$		$		$
Case Services	0	$		$		$
Distributions to Subdivisions	37,471,323	$	26,568,111	$	29,724,000	$
Fringe Benefits	194,687	$	214,582	$	273,705	$
Non-recurring		$		$		$
Total	38,638,456	**$**	28,023,454	**$**	31,203,205	**$**

Other Expenditures

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

12. Major Program Area Chart

Office of Economic Opportunity*	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
* expenditures reported are based on the state fiscal year whereas OEO revenue sources are appropriated on the federal fiscal year	Grants Administration – state pass through entity for federal funds aimed at promoting self-sufficiency among low-income populations (CSBG, LIHEAP, WAP, and ESGP)	State	0	State		See tables in section 7 – the numbers in section 7 reflect all funding including carry forward and supplemental appropriations as opposed to expenditures only and correspond to the federal fiscal year.
		Federal	38,174,983	Federal	27,559,779	
		Other	463,473	Other	463,675	
		Total	38,638,456	Total	28,023,454	
		% of budget:	57%	% of budget:		

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

OEO is an active member of the National Association of State Community Services Programs and the National Community Action Partnership. The OEO Director also often speaks and/or brings greetings at local community action agency events. In addition, the OEO staff serves on the following:

Cross-Cultural Conference Planning Committee
Council on Aging
State Citizen Corps Council
Interagency Council on Hazard Mitigation
Interagency Council on Homelessness
State Emergency Response Team
National Energy Assistance Director's Association
Government Finance Officers Association
State Energy Advisory Council
Human Trafficking Task Force

In addition, the OEO donates all old technology equipment to community action agencies and emergency shelters to support operating activities.

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

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

Manager's meet on a regular basis to establish short and long term goals and then work with support staff to implement procedures necessary to achieve those goals. Office strengths, weaknesses, and needs are assessed through the EPMS process, regular manager's meetings, and feedback from subgrantees.

Chart III.2.2 Strategic Planning Chart for the Office of Economic Opportunity

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To make South Carolina a benchmark state in the field of community action.	Current: Begin the process of the State Based Pathways to Excellence Initiative. (accomplished) New: Complete Phase 1 of the State Based Pathways to Excellence Initiative with the 5 participating agencies by May 31, 2008.	Solicited and obtained commitment of the necessary five agencies to begin program.	7.1
To ensure all OEO performance activities are completed according to set deadlines	Current: Bring all outstanding desk audits up to date by June 1, 2007. (accomplished) New: Sponsor two CAA network personnel in becoming certified ROMA trainers.	Revamped OEO organizational structure and revised audit requirements and procedures to better assess OEO and subgrantee financial performance.	7.1
To develop in cooperation with subgrantees a centralized intake system for a more holistic assessment of both client needs and agency performance.	New: Determine requirements and delineate the scope and authority of the statewide technology committee.	Sponsored multiple software demos for subgrantees to delineate data requirements for all CAA programs to promote central intake and integrated reporting of outcomes.	

2.2 How do you develop and track action plans that address your key strategic objectives?

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 accomplishment through an in-house filing and tickler system that allows managers to stay on task and achieve office objectives.

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

Objectives/action plans/performance measures are communicated through staff meetings, EPMS, written correspondence to subgrantees, and meetings with subgrantee leadership through the SC Association of Community Action Partnerships.

2.4 How do you measure progress on your action plans?

Progress is measured internally via the achievement of employee goals through EPMS as they are directly related to office goals. Community action agency subgrantee progress is measured through monthly financial status and program status reports, quarterly ROMA reports, and an annual Information Systems Report.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Strategic objectives are designed to overcome challenges identified through inclusion of all interested policies in the development of the action plans designed to achieve these objectives. For example, funding challenges that could negatively impact achievement of benchmark status through the Pathways Initiative would be resolved through group analysis of how available resources should be prioritized.

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

The strategic planning process is evaluated through staff development brainstorming with staff suggestions incorporated in the creation of future goals.

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

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

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

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

Customer/Stakeholder	Requirements
Federal funding sources	Requirements are determined through enabling legislation in the Code of Federal regulations and through Information Memoranda issued by the funding source. Standard requirements include submission of State Plans for review and accurate reporting of OEO and subgrantee expenditures and program activities.
Subgrantees/ 15 community action agencies/ 30-40 Homeless Shelters	Requirements are determined through federally approved State Plans and codified in annual work plans, budgets, and grant agreements. Compliance as well as training and technical assistance needs are determined through fiscal and programmatic monitoring.
Governor/ General Assembly	Requirements are determined through issued agency policies regarding personnel, travel, etc.
Low-income residents	Requirements are determined through local needs assessments, federal census data, and correspondence from individual clients.
Local electric companies	Requirements include timely vendor payments and accountability for supplemental funds.

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

Changes in federal funding source expectations are communicated in writing from the funding source and/or via national associations. Subgrantee needs and expectations are assessed through face-to-face meetings, polls, and public hearings on draft state plans. Client needs and expectations are delineated and updated through the annual local needs assessment process.

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

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

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

Dissatisfaction is assessed based on complaints/requests for hearings received.

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

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

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

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

OEO revenue and expenditure schedules are prepared monthly for review by the Director. Subgrantees submit monthly Financial Status reports to monitor local grant expenditures. Quarterly and annual data collection is governed through the Results Oriented Management and Accountability (ROMA) national indicators set by the federal government. Agencies report outcomes on predetermined national indicators to show progress in achieving performance target outcomes associated with those indicators. Performance target outcomes are determined at the subgrantee level based on their needs assessment and approved by the OEO.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

Census data is used to determine agency allocations and client program eligibility. In addition, national indicator data is used to assess the effectiveness of local programs designed in response to community needs assessments.

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

OEO key measures reviewed and rate of review

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

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

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

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

The SC ROMA software system utilized by all SC community action agencies ensures the accuracy, security, and availability of data. Data input takes place at the subgrantee level but the server and statewide data are maintained at the OEO. The South Carolina Association of Community Action Partnerships also has access to state level data as an internal control/data integrity check mechanism. Data on homeless shelters is collected through the HUD mandated HMIS and reported through the HUD mandated IDIS software systems.

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

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

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

Staff are cross-trained within divisions to ensure retention of organizational and employee knowledge. Manuals and/or administrative guides have been developed outlining the general procedures and requirements of each grant. Staff is encouraged to contact and participate in trainings with other agencies and states to share best practices.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

The staff is divided into grant specific divisions, in addition to the fiscal and audit divisions. Staff work products are routed through that grant manager, as well as through audit, fiscal, and the director to ensure fiscal and programmatic cooperation in the administration of federal funds. The staff is encouraged to participate in training designed to increase knowledge of their assigned duties.

5.2 How do you evaluate and improve your organization's human resources-related process?

Human resource processes are evaluated through staff feedback and exit interviews.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

Internal training needs are identified and addressed through the EPMS process. Subgrantee training needs are assessed through the monitoring process and subsequent improvements in subgrantee processes and performance are used to assess the effectiveness of training.

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

Employees are required to justify training requests in terms of how they contribute to the attainment of goals for the organization.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

Managers are expected to set an example for high performance and are held accountable through the EPMS process for achievement of action plans.

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

Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. The OEO also encourages staff to attend trainings to improve their skills and enhance office procedures.

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

A safe, secure, and healthy workplace is maintained through compliance with state and federal regulations on workplace requirements.

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

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

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

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

Employees are cross-trained to ensure retention of organizational knowledge through staff changes. New technology is assessed and incorporated via a statewide technology committee with OEO and subgrantee membership. Changing grant requirements are conveyed from the federal funding source to the state; the state then conveys to subgrantees via technical assistance memoranda. State procurement guidelines are followed by the OEO and subgrantee procurement guidelines are modeled after the state guidelines to ensure costs are competitive.

6.3 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.

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

Processes are evaluated through the monitoring assessment tools for each grant. In addition, in FY06-07, the OEO underwent a process review utilizing an external audit firm that specializes in federal grants management. Recommendations provided from this review were incorporated into OEO procedures.

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

Key processes include the development of state plans, evaluation of subgrantee application budgets and work plans, monitoring, and training and technical assistance. These activities are evaluated annually in the development of new state plans by examining obstacles from the previous year and best practices of other states.

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

This is determined through close management of resources and monthly financial status reports from subgrantees. Federal award expenditures are reconciled to the state accounting system on a monthly basis to ensure accurate tracking of budgets.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

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 2006 Program Year. There were no major findings or areas of non-compliance. The OEO also sponsored Results Oriented Management and Accountability (ROMA) and case management training for subgrantees. Over 75 individuals were trained in case management. Over 30 individuals participated in ROMA training. In addition, the OEO received special funding from the US Department of Energy to conduct Hot-Climate Whole House Weatherization Training for subgrantee personnel, enhancing the expertise of the network in assisting our low-income residents. Over 30 participants were trained in Hot Climate measures for site built dwellings and mobile homes.

Subgrantees reported outcomes relating to mission accomplishment as follows:

Table 7.1.1

Goal: Low-income People Become More Self-Sufficient.	# Participants Enrolled	# Achieving Outcome in Reporting Period	% Achieving Outcome in Reporting Period
Unemployed and obtained a job	4984	1791	86%
Obtained pre-employment skills/competencies and received training program certificate or diploma	1727	1400	81%
Obtained safe and affordable housing in support of family stability needed to gain or retain employment	1472	1369	93%

Goal: The conditions in which low-income people live are improved through increased affordable essential services.	# Projects	# of Opportunities or Community Resources Created or Preserved
Accessible, safe, and affordable child care or child care placement opportunities for low-income families created or saved from reduction or elimination	15	2153

Goal: Emergency Needs of Households in Crisis are Ameliorated.	# Seeking Assistance	# Receiving Assistance	% Receiving Assistance
Emergency Vendor Payments, including fuel and energy bills and rent/mortgage payments	79,407	65,751	83%

Goal: Partnerships among supporters and providers of service to low- income people are achieved.	# Organizational Partnerships Created or Sustained
	9,144

In addition, working with the South Carolina Association of Community Action Partnerships, the OEO has solicited and obtained the commitment of the necessary five agencies to begin the State-based Pathways to Excellence program.

All outstanding desk audits have been completed and the OEO Audit Division is up to date.

Subgrantees exceeded the PY 2006 goal of 516 homes by 47%, with a total of 964 homes weatherized. The following table details the number of homes weatherized by county:

Table 7.1.2

WAP PY 2006 Dwellings Completed

County	Quota	# Wx'd
Aiken/Barnwell		
Aiken	19	33
Allendale	3	6
Bamberg	4	10
Barnwell	5	17
Calhoun	2	4
Greenville	39	79
Hampton	4	10
Lexington	19	64
Richland	40	102
SUB TOTAL	135	325

Berkeley-Dorchester		
Berkeley	15	16
Dorchester	8	8
Colleton	7	7
SUB TOTAL	30	31

Carolina		
Chester	5	5
Fairfield	4	4
Lancaster	7	7
Union	4	4
York	15	15
SUB TOTAL	35	35

Charleston CHS		
Beaufort	11	11
Charleston	46	56
Jasper	4	4
SUB TOTAL	61	71

CMEOC		
Chesterfield	8	18
Darlington	13	23
Dillon	7	7
Marlboro	5	10
SUB TOTAL	33	58

County	Quota	# Wx'd
GLEAMNS		
Abbeville	8	13
Anderson	9	10
Edgefield	3	8
Greenwood	3	8
Laurens	1	4
McCormick	6	8
Newberry	3	8
Oconee	18	52
Pickens	7	14
Saluda	13	29
SUB TOTAL	71	154

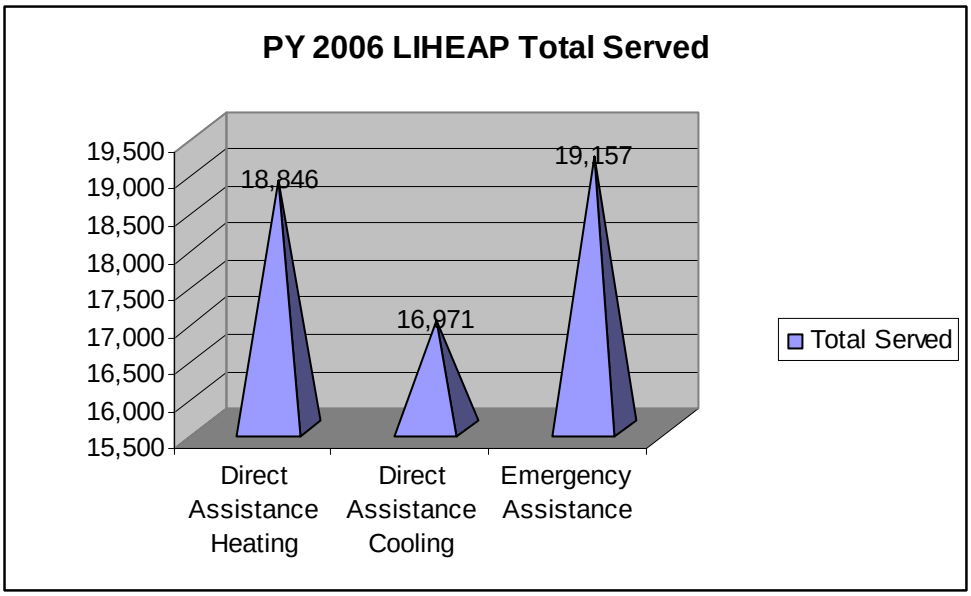
Piedmont		
Cherokee	7	10
Spartanburg	28	40
SUB TOTAL	35	50

Waccamaw		
Georgetown	9	9
Horry	22	23
Williamsburg	9	8
SUB TOTAL	40	40

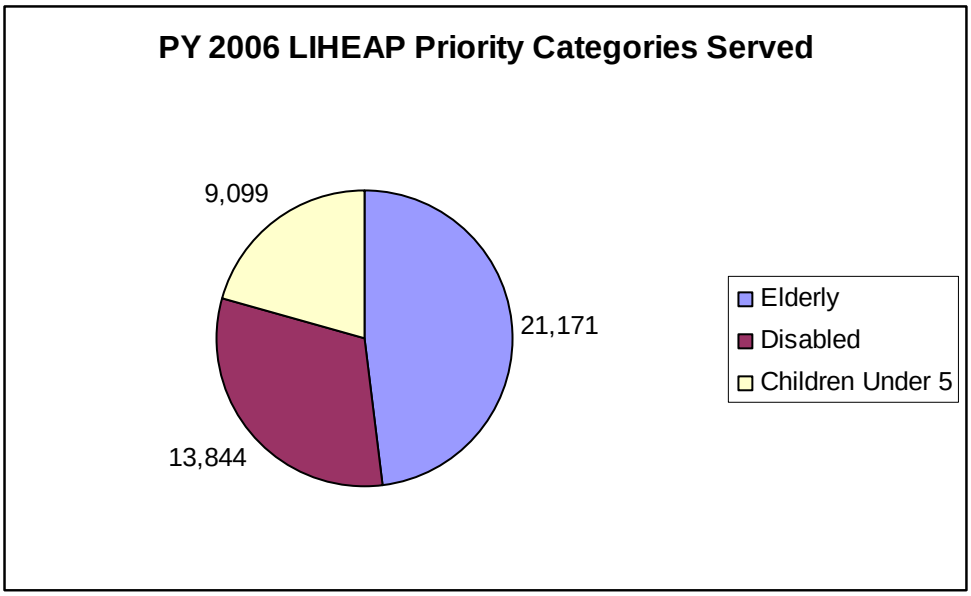
Wateree		
Clarendon	7	15
Florence	19	47
Kershaw	6	19
Lee	4	12
Marion	8	20
Orangeburg	17	47
Sumter	15	40
SUB TOTAL	76	200

GRAND TOTALS	**516**	**964**

The Low-Income Home Energy Assistance Program (LIHEAP) provides both direct assistance and emergency crisis intervention for those in danger of utility termination. Pursuant to the LIHEAP State Plan, subgrantees must show priority in service to the elderly, disabled, and households with a high energy burden, high energy usage, or children under the age of five.



Of the 54,974 total served through LIHEAP in PY 2006, 21,171 households had an elderly member, 13,844 had a disabled member, and 9,099 had at least one child under the age of 5.



During FY 06-07, Emergency Shelter Grants Program (ESGP) funds were used to provide operating expenses for 37 emergency shelters and support services for approximately 68,532 homeless individuals, thereby alleviating their emergency situations and helping to move them toward self-sufficiency.

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

Subgrantees: The OEO was recognized with a Partnership Award from the SC Association of Community Action Partnerships for efforts to enhance relationships with local utility companies.

Low-Income Residents: There were no appeals or requests for hearings from denied clients during the 2006 program year. In addition, client interviews conducted during subgrantee monitoring indicated clients were generally pleased with the service received.

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

The OEO obtained $20,000 from Piedmont Natural Gas to supplement the Low-Income Home Energy Assistance Program.

The OEO was selected to receive $500,000 in Workforce Investment Act funds by the SC Workforce Development Board for competitive grants for soft skills employment training in the 2008 fiscal year.

The OEO received $30,000 in special funding from the US Department of Energy to conduct Hot-Climate Whole House Weatherization Training for subgrantee personnel, enhancing the expertise of the network in assisting our low-income residents.

Below is information regarding revenue and expenditures for OEO programs. Funding information provided follows the federal fiscal year.

Chart 7.3.1

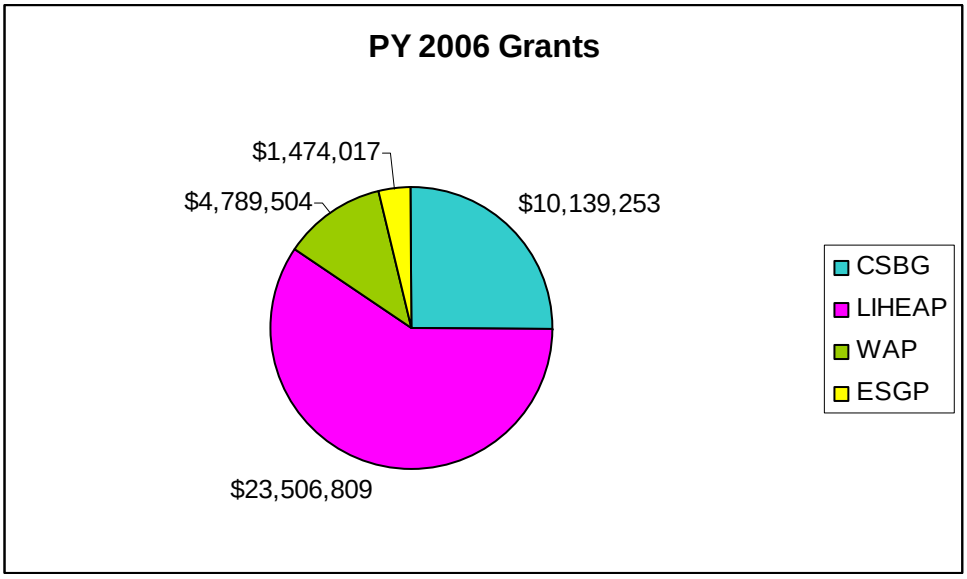


Chart 7.3.2

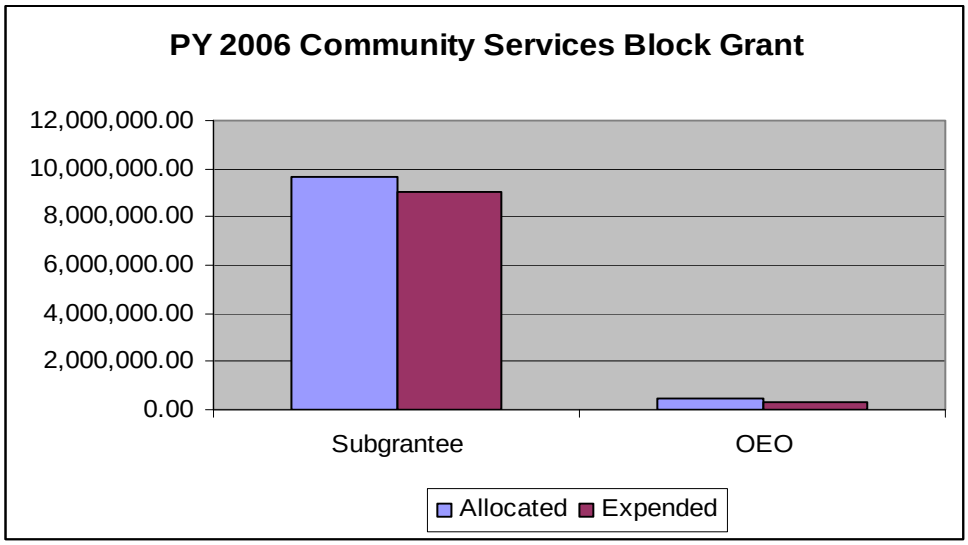


Chart 7.3.3

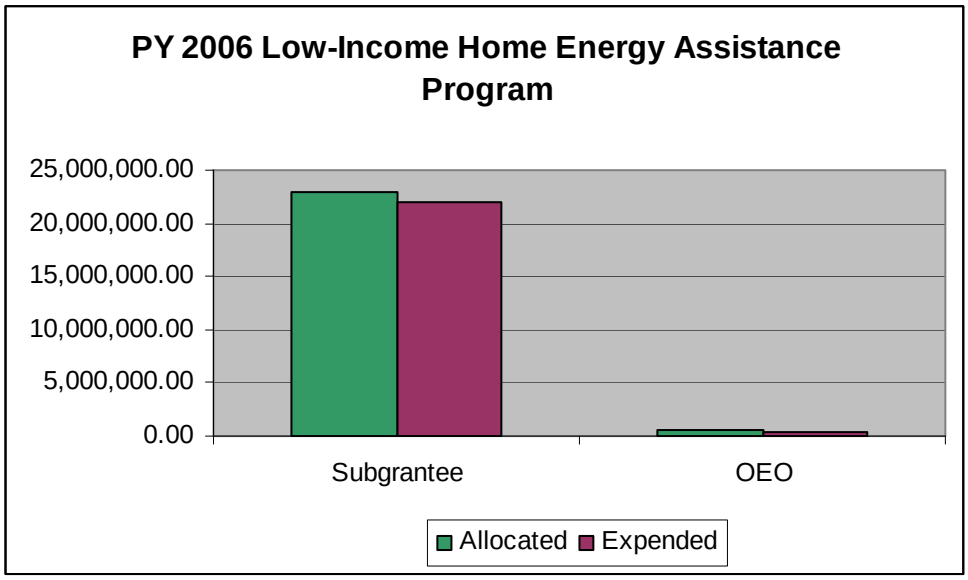


Chart 7.3.4

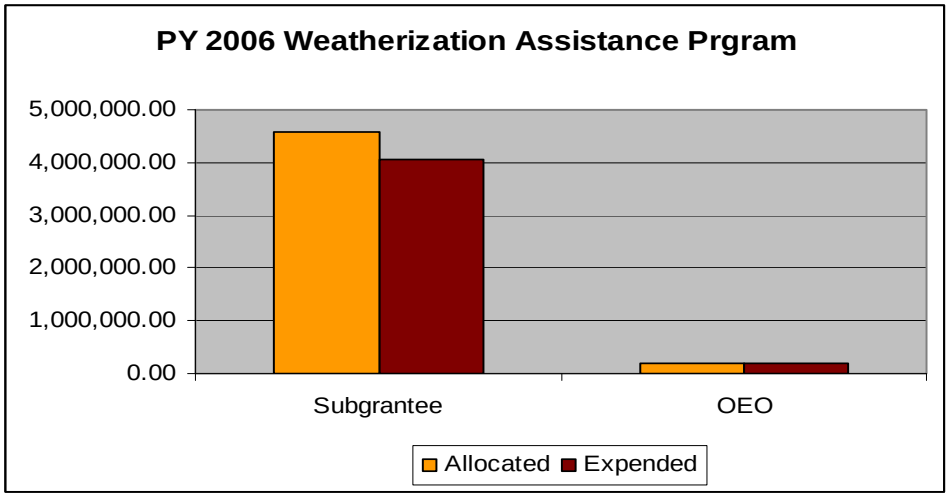


Chart 7.3.5

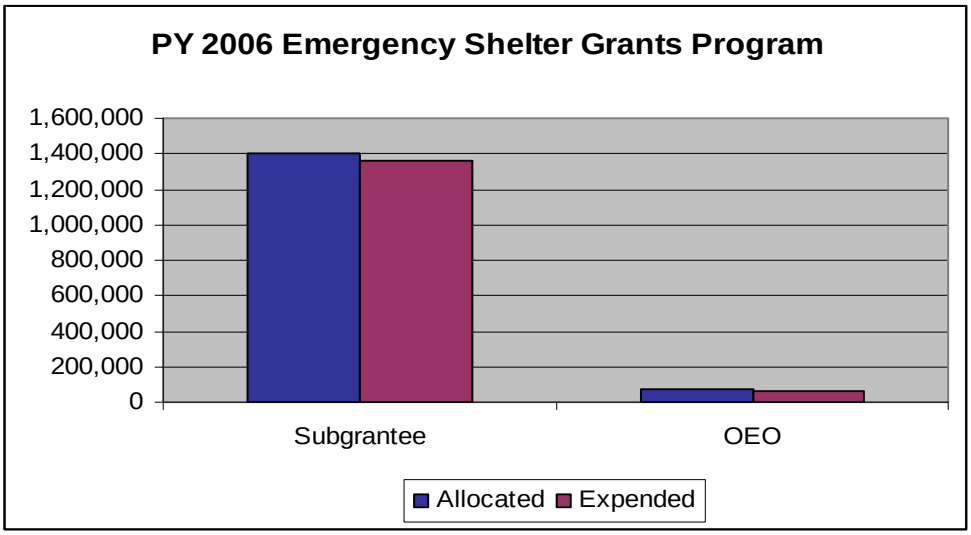
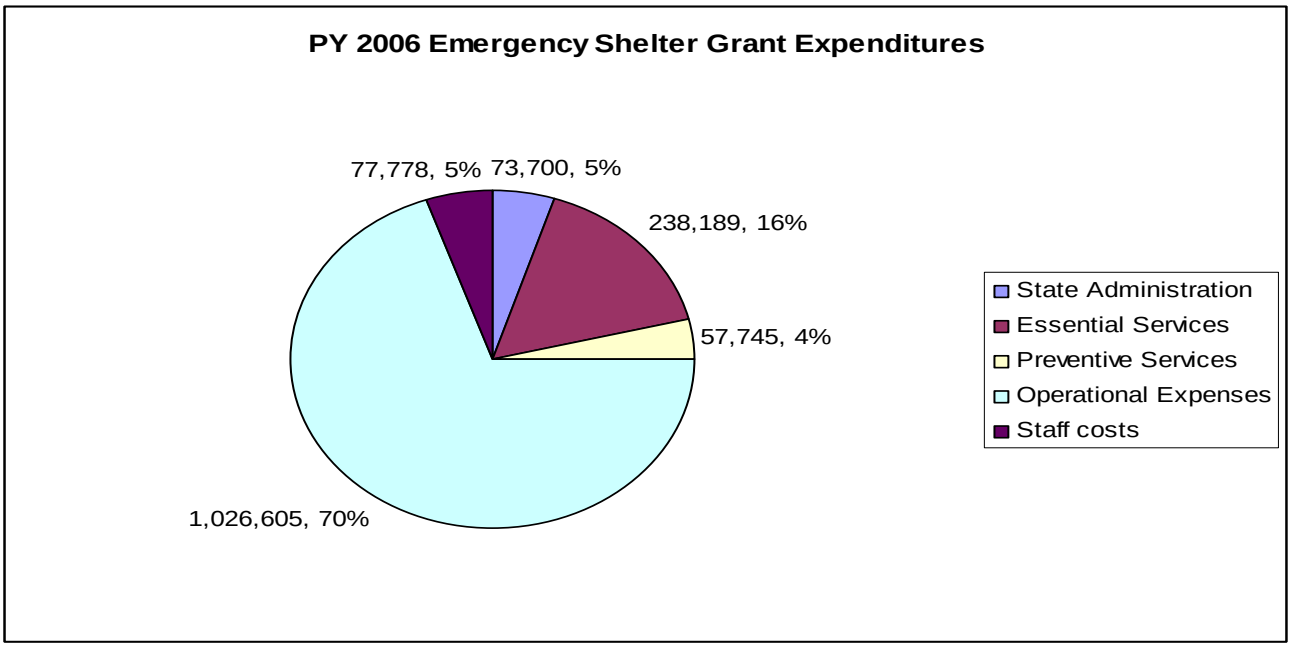


Chart 7.3.6 – Funds for the ESGP were spent according to the following categories:



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

One OEO staff member completed CPA licensure. In addition, five OEO Program Coordinators attended federally sponsored training in their respective grant areas. Three employees attended environmental review training with the US Department of Housing and Urban Development, and two employees attended OMB Circular training.

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

All federal and state reporting requirements were met according to the designated timelines. Each program was monitored at least once during the program year. The LIHEAP and CSBG programs were selected for review during the OEPP single audit with no findings. In addition, the OEO staff participated in the Statewide Homeless Count to show support for this project in assessing homelessness in our state.

Appendix G

OEPP - Foster Care Review Board

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Children's Foster Care Review Board

Section I - Executive Summary

Mission Statement

The mission of the Children's Foster Care Review Program is to provide an external system of accountability and advocacy for children and families involved with the foster care system. The Division utilizes panels of community volunteers to promote safe, permanent homes for children in foster care in a timely manner and to increase public awareness regarding the impact of child abuse and neglect.

Vision

The Children's Foster Care Review Board's vision is for all children in South Carolina to have permanent, safe, loving homes.

Major Achievements for FY 2006-2007

- Local foster care review board volunteers donated 13,115 hours in service to children and families involved with the foster care system.
- Local foster care review boards held 436 individual local review meetings and conducted 8,467 reviews for 4,976 children.
- Local foster care review boards established relationships and communicated with their local partners. Review board members participated in 88 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.
- Local foster care review boards kept their elected official informed of the status of children in foster care in their counties. Five local review boards presented the 2005 – 2006 South Carolina Children's Foster Care Review Board Annual Report to their county legislative delegations. Fourteen local review boards regularly submitted reports to their local legislative delegations, outlining issues and trends noted during case review meetings.
- Local foster care review boards demonstrated their commitment to supporting children and the system that serves them by completing twenty-five service projects this year. These service projects provided many "extra's" 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.
- Working toward reviewing the optimum number (12) of children per review board meeting, four additional local foster care review boards were created and became operational in January 2007.

Key Strategic Goals for Present and Future Years

1. Increase public knowledge and understanding about the role and responsibilities of the South Carolina Children's Review Board through the State Board of Directors and local foster care review boards.
2. Collaborate with state and national partners to improve the many systems that impact children in foster care.

Opportunities and Barriers

Opportunities

1. Local foster care review boards meet quarterly with county partners to address systemic deficiencies, issues, and needs of the foster care system.
2. Local foster care review boards continue to educate local legislative delegations regarding the status and needs of the foster care system by reporting review activities and through presentations of the South Carolina Children's Foster Care Review Board Annual Report
3. Local foster care review boards appear more frequently in Family Court with Review Board legal staff, enabling the Review Board to more effectively advocate for children reviewed.

Barriers

If the Review Board is to build on the progress made by Review Board volunteers in achieving annual goals, as well as continuing to meet the legal mandate of review for an increasing number of children in foster care, the Division must recoup base State funding lost to mandatory budget cuts. Dramatic cuts to basic operating costs have made it difficult to fully implement current opportunities and manage the increasing population of children in foster care requiring case review. Additional funding is still needed to support the growing body of work being done by local review boards in order to meet legal mandates and continue effective advocacy efforts for the children reviewed. Additional legal staff is needed to increase the frequency of local review boards presence in the Family Court and current funding is inadequate to expand that segment of the program. Requests for additional funding to address these barriers will be included in upcoming budget requests.

Section II - Organization Profile

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

- The South Carolina Children's Foster Care Review Board was created in 1974 by the General Assembly to monitor the progress in achieving permanent placements for children in foster care. SC Code of Laws, § 20-7-2376, et seq.
- The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system through the use of citizen volunteers.
- Each of South Carolina's sixteen judicial circuits must have at least one local volunteer citizen foster care review board. There are 42 local foster care review boards currently serving 4,976 children.
- 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.
- The Children's Foster Care Review Board is supported by a seven member State Board of Directors. 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.
- The Children's Foster Care Review Board is comprised of a Division Director, a Program Director, two Program Supervisors, two Attorneys, a Research and Planning Administrator, a Business Manager, 10 Review Board Coordinators, and two Administrative Assistants.

2. Key customers segments 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 the State Board of Directors are primary customers of the staff of the Children's Foster Care Review Board.

3. Key stakeholders

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

4. Key suppliers and partners

Local foster care review board members and Review Board staff partner with other public and non-project child welfare agencies to serve children and families in the foster care system. Partners include The SC Department of Social Services, the SC Foster Parent Association, the Volunteer Guardian ad Litem Program, the SC Department of Mental Health, the SC Department of Disabilities and Special Needs, the SC Department of Alcohol and Other Drug Abuse Services, the SC Association of Children's Homes and Family Services, the SC Department of Health and Human Services, the SC Department of Juvenile Justice, the SC Heart Gallery, Prevent Child Abuse South Carolina, the Children's Trust Fund, and VOICES for South Carolina's Children.

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

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Children's Foster Care Review Board (FCRB)	FCRB monitors progress in achieving permanent placements for children in foster care by providing an external system of accountability and advocacy for children and families involved with the foster care system through citizen volunteers. There are 42 local foster care review boards currently serving 4,976 children.	• Children and families involved in the foster care system in South Carolina are the primary customers. • Volunteers appointed to serve on local Review Boards and the State Board of Directors. • Stakeholders are public and non-profit child welfare agencies that partner with the Review Boards and local communities across the state.	• SC Dept of Social Services • SC Foster Parent Association • Volunteer Guardian ad Litem Program • SC Dept of Mental Health • SC Dept of Disabilities and Special Needs • SC Dept of Alcohol and Other Drug Abuse Services • SC Association of Children's Homes and Family Services • SC Dept of Health and Human Services • SC Dept of Juvenile Justice • SC Heart Gallery • Prevent Child Abuse SC • Children's Trust Fund • VOICES for SC's Children

5. Operation locations

The Children's Foster Care Review Board is located in Room 436, Edgar Brown Building, Columbia, SC.

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

__19___ Classified ___1___ Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

- The South Carolina Children's Foster Care Review Board was created in 1974 by the General Assembly to monitor the progress in achieving permanent placements for children in foster care. Each of South Carolina's 16 judicial circuits has at least one local foster care review board. Each local foster care review board consists of five volunteers, appointed by the Governor, from the community. SC Code of Laws, § 20-7-2376, et seq.
- 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.

- The Children's Foster Care Review Board has a State Board of Directors that provides oversight for the programmatic duties and responsibilities of the agency, as described by statute.
- The Children's Foster Care Review Board statute requires the production of an Annual Report reflecting the deficiencies in the child welfare system in SC. The Review Board gathers extensive data at each child's review in order to carefully target specific systemic barriers to permanence for children in foster care.
- The Children's Foster Care Review Board receives extensive programmatic and operational funding from one contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.

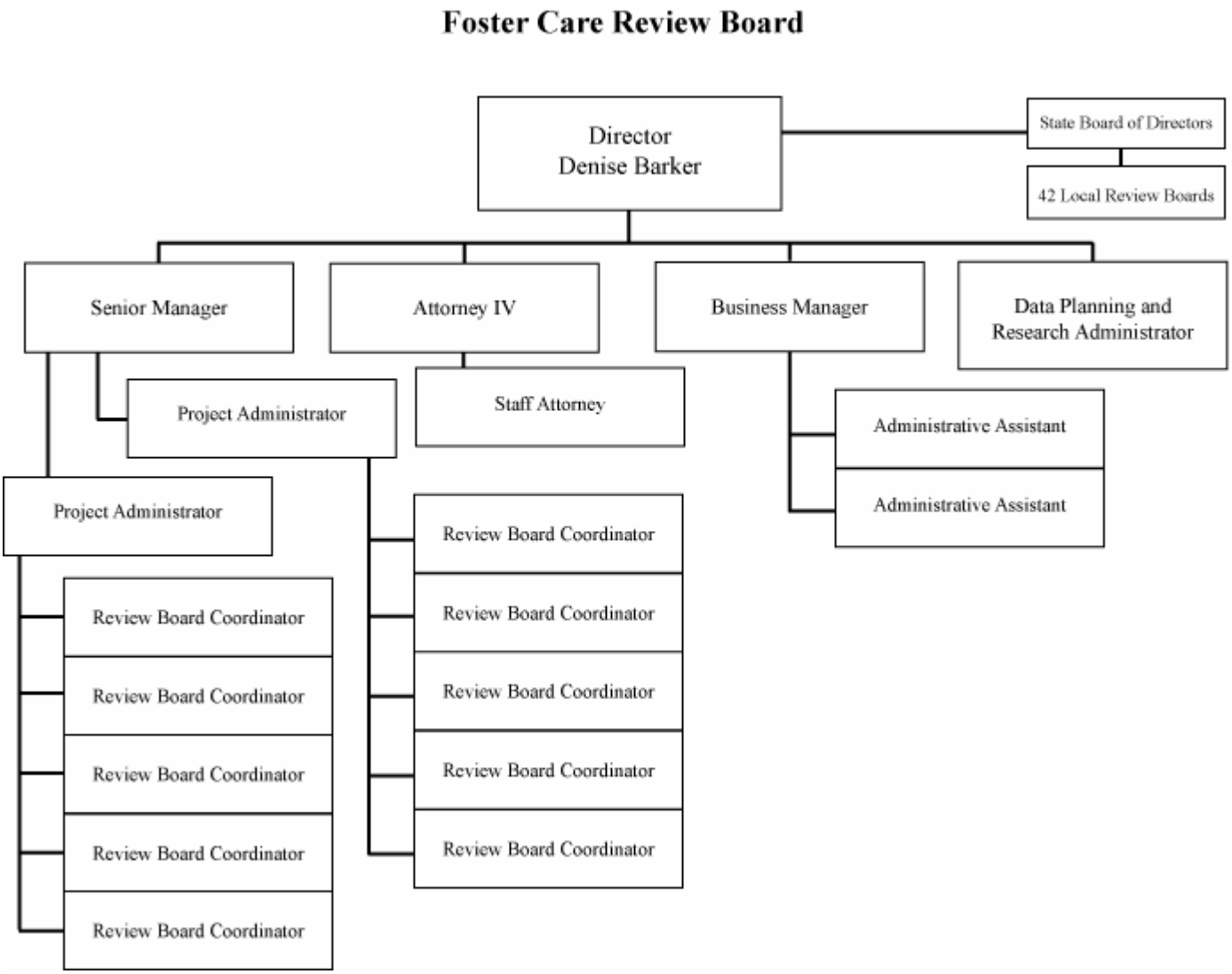
8. Key strategic challenges

- Recruiting and maintaining qualified, professional staff and securing the appointments of qualified and dedicated citizen volunteers in order to meet statutory mandates.
- Acquiring additional State funding in order to maximize the Review Board's ability to draw down federal dollars through the Title IV-E contract. These funds would be used to pay for additional legal staff and the costs associated with the operation of 4 additional local review boards.
- Additional State FTEs are required to expand the current legal staff. Additional legal staff would allow the Review Board to more adequately address the increased legal needs of the agency and local review boards that have occurred due to the growing number of children entering the foster care system and reviewed by local review boards.

9. Performance improvement systems

- Post training evaluations for every training presented.
- Staff evaluations.
- Periodic customer surveys.
- Accurate monitoring of numbers of children reviewed to ensure balanced caseloads.
- 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.
- Clean OEPP financial audit outcomes.
- Satisfactory management and audit outcomes for the programmatic contract resulting in renewal and/or increase in contracted dollars.
- Timely preparation of Annual Report.
- Review Board member and staff exit interviews.

10. Organizational Chart



11. Base Budget Expenditures and Appropriations

Accountability Report Appropriations/Expenditures Char
Base Budget Expenditures and Appropriationst

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 800,227	$ 405,315	$ 778,077	$ 402,735	$ 1,005,247	$ 402,085
Other Operating	$ 225,349	$ 6,411	$ 225,173	$ 118,522	$ 363,300	$ 213,300
Special Items	$ 297,938	$ 297,938	$ 297,938	$ 297,938	$ 297,938	$ 297,938
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$ 220,222	$111,280	$ 213,089	$ 111,443	$ 245,837	$ 88,459
Non-recurring	$	$	$	$	$	$
Total	**$1,543,736**	**$820,944**	**$1,514,277**	**$ 930,638**	**$ 1,912,322**	**$1,001,782**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Children's Foster Care Review Board	The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system	State	820,944	State	930,638	Table II.4.1 Table III.2.1 Table III.2.41 Table III.2.42 Table III.7.1 Table III7.2
		Federal		Federal		
		Other	722,792	Other	583,639	
		Total	1,543,736	Total	1,514,277	
		% of budget:		% of budget:		

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

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

- Staff training and development workshops
- Mandatory, on-going training for all review board volunteers
- Weekly and monthly staff meetings
- Routine written and oral communication both written and electronic, perform annual EPMS rating and planning sessions with all staff, strict adherence to HR policy
- Shared decision making and brainstorming sessions with all levels of staff on planning, process initiatives
- One-on-one annual goal setting meetings between each staff member and agency director
- Require that ethical and professional behavior be modeled by all staff at all times

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

All staff and volunteer training is focused on agency mission which addresses the targeted customer – children in foster care in South Carolina. Senior Review Board staff members also participate in many collaborative opportunities with specific State partners (i.e. the SC Department of Social Services, the Children's Law Office, the South Carolina Bar Association, non-profit organizations and other child welfare agencies). Senior staff 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 the program staff, the State Board of Directors, and at the Annual Conference 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?

- The Children's Foster Care Review Board has a State Board of Directors that provides oversight for the programmatic duties and responsibilities of the agency, as described by statute.
- The Review Board statute requires the production of an Annual Report reflecting the deficiencies in the child welfare system in SC. The Review Board gathers extensive data at each child's review in order to carefully target specific systemic barriers to permanence for children in foster care.
- The Review Board receives extensive programmatic and operational funding from one contract with an outside agency – accountability and fiscal responsibility are necessary for continued operation under this contract.

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

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 of these measures are detailed in Section III, Category 7.

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

- Weekly senior staff meetings with Division Director
- Monthly full staff meetings with information sharing from all departments; any staff who have attended training or relevant outside meetings provide other staff with overview of information, reproduce handouts, etc.
- Monthly Review Board Coordinator meeting; program and direct-line staff meeting to divulge information from recent training, share other information and receive updates, i.e. legal, national best practice
- Annual staff goal sharing meetings with Division Director, followed by six-month updates

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

When funding is available, all professional staff are given the opportunity to participate in the Certified Public Manager program, Executive Institute and Leadership South Carolina, based on seniority and length of time with the agency. As a part of their annual EPMS planning session, staff is given the opportunity to request specific types of training and these requests are honored when possible, according to course and funding availability. Staff share the responsibility of conducting and organizing the monthly staff meetings – this involves planning activities, speakers and facilitation of the meeting.

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

Shared decision making is a vital part of the Division Director's management style – staff are treated as professionals and respond in kind by participating in all planning sessions and communicating freely with supervisory and upper-management staff. Without this input, the Review Board would be unable to accomplish any of their stated objectives. For the past 4 years, Review Board staff have worked hard to empower the State Board of Directors and local review board members to become more active and involved in their local communities to facilitate change for children. This has been a very effective approach and excellent results continue.

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

Executive Director:	National appointee to the Permanency Planning Committee of the National Council of Juvenile and Family Court Judges; steering Committee of the National Foster Care Review Coalition; Ex-officio Chair, Board of Directors, Prevent Child Abuse South Carolina; Ex-officio Chair, Community Mediation Center; Bench/Bar Joint Task Force; SC DSS Children and Family Services Review Stakeholders Advisory Committee; SC DSS Independent Living Advisory Committee; Columbia College Social Work Advisory Committee; Children's Trust Fund Advisory Board; Columbia College Alliance for Women Organizational Committee; Social Indicators Focus Group, University of South Carolina Indicators Project, Institute for Public Service and Policy Research.
General Counsel	Executive/Host Committee and Volunteer Chairperson, *Art-A-Must*, Prevent Child Abuse SC; SC Bar Children's Committee
Program Director	Serves on Conference Committee for 200 volunteers from five agencies/organizations that work with SC's youth; Participate in monthly State-level Partner's Meetings (SCDSS); Program Oversight Committee; Quarterly Medicaid Provider Meetings; Provides training to various groups upon request; Serves on Certified Public Manager Advisory Committee.
Program Supervisor	Citizen Review Panel committee, Certified Auditor - US Children's Bureau - Children and Family Services Review, Certified Public Manager Graduate, Chairperson, Child Welfare Advisory Committee - Subcommittee on Foster Parent Recruitment and Retention, Member - South Carolina Citizen's Review Panel - Midlands Region.
Program Supervisor	SC Victim Assistance Network; Children's Legislative Committee; Education Subcommittee of the SCDSS Independent Living Committee; Grants Reviewer for the SC Children's Trust Fund; volunteer for ArtaMust fundraiser for Prevent Child Abuse SC; FCRB Training for DSS county foster care staff .

Review Board staff maintain a high percentage of staff giving through participation in the United Way payroll deduction campaign.

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

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

In October of 2006, the State Board of Directors and senior management staff held a two day planning session with an outside facilitator to evaluate and review progress of the five year Strategic Plan developed in 2005. The State Board revised and updated specific goals, objectives and outcomes, encompassing activities of local review boards, the State Board of Directors, and Review Board staff. The Strategic Plan is evaluated annually to review progress and determine additional future goals and objectives.

Table III.2.1 Key Agency Action Plan/Initiative

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
Increase public knowledge and understanding about the role and responsibilities of the Review Board through the State Board of Directors and local Review Boards.	1. To build strong relationships between the State Board of Directors and local Review Boards through routine telephone contact and regular personal attendance at local review board meetings.	1.1 Routine telephone contact and personal attendance at local review board meetings 1.2 Quarterly reporting at the State Board meeting on the progress and effectiveness of the phone calls and visits, discussion of issues and possible solutions. 1.3 State Board members will attend Annual Chairperson's Training and will participate on the agenda of that meeting.	Table II.4.1 Table III.2.41 Table III.2.42 Table III.7.1 Table III.7.2
	2. To develop a uniform message conveying to the public the role of the Review Board and foster care in South Carolina.	2.1 Pubic relations/legislative committee created and active. 2.2 State Data related to children in foster care is reviewed and analyzed. 2.3 A clear message regarding the Review Board and how the Review Board impacts the child welfare system as a whole will be presented to the State Board. 2.4 A plan is created and implemented to disseminate the message. 2.5 The effectiveness of the public awareness plan will be reviewed and evaluated.	
	3. Use print and broadcast media to share the message.	3.1 Methods for meeting this goal will be finalized in FY 2007-2008.	

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
Collaborate with state and national partners to improve the many systems that impact children in foster care.	1. Enhance and broaden relationships between local review boards and the Department of Social Services (DSS) county directors, volunteer Guardians ad Litem, and foster parents to address issues and deficiencies as they arise.	1.1 Attend quarterly community stakeholders meetings and State DSS meetings. 1.2 Reports are made available and issues are discussed monthly at the state level. 1.3 On-going training of stakeholders about the role of the Foster Care Review Board.	
	2. Work with county DSS directors to improve the quality of legal representation for children in foster care.	2.1 The Review Board developed and administered a survey of county directors to determine barriers to quality legal representation for children in foster care. 2.2 The results of the survey were shared at the state level	
	3. Meet with members of the SC congressional delegation.	3.1 Committee members scheduled meetings with each member of the SC congressional delegation. Meetings will continue in FY 2007-2008.	
	4. Work with other administrators of State Review programs to enhance the participation of foster care reviewers in the second round of CFSRs.	4.1 The Executive Director of the Foster Care Review Board is a standing member of the National . . . Committee.	

2.2 How do you develop and track action plans that address your key strategic objectives?

The Strategic Plan is reviewed quarterly at each State Board of Director's meeting. Annually, the State Board holds a planning retreat to evaluate the plan objectives, goals, and outcomes. The Review Board Leadership Team has an annual retreat to evaluate objectives, goals, and outcomes from the previous year and to prepare their planning ideas for the coming year for the State Board to consider at their retreat.

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

- Annual Report
- Bi-Annual newsletter
- Division website
- Annual Facts About Foster Kids (statewide and county specific demographic data and performance measures)
- Quarterly State Board of Directors' meetings
- Quarterly State Board contacts with local Review Boards
- Weekly senior staff meetings
- Monthly Leadership Team meetings
- Monthly full staff meetings
- Annual Chairperson training/meetings
- Annual Review Board member training
- Regional Trainings for local Review Boards (as needed)
- List-serve for all Review Board members with on-line capabilities
- Monthly Review Board business meetings
- Staff Retreats
- State Board Planning Retreat

2.4 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.2.41 Key Performance Measures for Increasing Public Knowledge and Understanding about the Role of the Children's Foster Care Review Board

➢ Reference 1.1 State Board Members Call and Visit Local Review Boards	Completed for FY 2006-07
➢ Reference 1.2 Quarterly Reports at State Board Meetings	Completed for FY 2006-07
➢ Reference 1.3 State Board Members Attend Chairperson's Training	Completed for FY 2006-07
➢ Reference 2.1 Formation of Public Relations/Legislative Committee	Meeting Quarterly for FY 2006-07
➢ Reference 2.2 Review of State Data	FY 2006-07 Annual Report and 2007 Facts about Foster Kids Reports
➢ Reference 2.4 Create and Implement Plan to Disseminate Message	FY 2007-2008
➢ Reference 2.5 Evaluate Public Awareness Plan Effectiveness	FY 2007 - 2008

Table III.2.42 Key Performance Measures for Collaborating with State and National Partners to Improve Systems that Impact Children in Foster Care.

➢ Reference 1.1 Number Quarterly Stakeholder Meetings and Monthly State DSS Meetings	Review Board members and Review Board staff attended 88 stakeholder meetings
➢ Reference 1.2 Number of Reports Submitted to State Office	14 reports submitted
➢ Reference 1.3 Number of External Trainings for Stakeholders	28

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

The challenges to obtaining many of the strategic objectives are defined in Section II #8. Without increased state funding to improve the federal match currently available, as well as additional staff, some of the steps spelled out in the action plan may not be possible. An attempt has been made to address each of the objectives in some manner, but additional advocacy efforts on behalf of the increasing foster care population will require resources not currently available and without which stated outcomes may not be achieved.

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

The State Board of Directors reviews the strategic plan at each quarterly meeting. Annually, the State Board meets for two days to review, evaluate, and revise the strategic plan to reflect the current needs and issues of the Review Board.

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

The Strategic Plan is available on the Children's Foster Care Review Board web-site, www.oepp.sc.gov/fcrb and can be accessed by selecting the State Board link.

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

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

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

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

Review and analysis of foster care review data, training evaluations, annual surveys and self-assessments. The Executive Director is also evaluated annually by the State Board of Directors.

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

The review data and findings both statewide and county based are reviewed by local boards, their assigned staff, the Leadership Team and the State Board of Directors. Programmatic and systemic changes identified by the trends and findings in this data are brought to the attention of appropriate parties both at the state and local level.

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

Review Board stakeholder surveys are conducted every other year in even years. A stakeholder survey of county Department of Social Services workers, Family Court Judges, Guardian ad Litems, Foster Parents, Birth Parents, and other interested parties, will be completed in 2007. The results of that survey will be shared at the Annual Conference held in April of 2008. In addition, local review boards are actively involved in self-assessments, providing reports to Review Board Leadership Staff for review and analysis.

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

Quarterly community stakeholder meetings, educational Annual Conferences and other trainings, participation in legislative delegation meetings, community presentations, personal involvement with public and non-private agencies, boards, and commissions – all serve as means to establish on-going working relationships that will enhance our ability to facilitate systemic improvement.

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

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

By legislative, statutory, mission and regulatory authority

4.2 How do you use data/information analysis to provide effective support for decision making 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 is required to report annually to the Governor and the General Assembly on

- **Demographics --** how many children there are in foster care, their characteristics and whether their prevalence is increasing or decreasing;
- **Areas of Concern --** legal and program shortcomings identified at monthly citizen reviews; and
- **Progress Measures --** length of time in care, number of placements, achieving permanency, and recidivism rates. Information is collected from local volunteer citizen review boards that review the cases of children who have been in foster dare 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. Data is also collected and analyzed on an ad hoc basis when requested by 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 that bears on statutes and policies related to permanence for children in the foster care system. Programmatic requirements for federal funds that come into SC's foster care program are also tracked for compliance, as well as specific categories of information used by federal auditors in the Children and Family Services Review process and those targeted for improvement in the SC Program Improvement Plan.

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

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

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.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

Regional caseloads are routinely checked to insure that caseloads are evenly balanced among program staff and that each judicial circuit is operating with adequate review boards for the population of children in foster care. Supervisory staff evaluate staff strengths to insure that the specific needs of local boards or counties are paired with the best staff member to address these issues. All staff members are routinely involved in planning and programmatic development.

5.2 How do you evaluate and improve your organization's human resources-related process?

The Division coordinates all human resource activities with the OEPP Office of Human Resources. Supervisors are provided on-going training to ensure compliance with agency policy and procedures.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

Supervisory staff routinely travel with and/or observe their staff members on the job to assess their competence and level of professionalism. EPMS planning meetings and rating discussions are conducted as per HR personnel standards for all staff. After any member of program staff attend training, they are responsible for presenting the content of these training to other staff members at the next full staff meeting and discussion is shared about how what was learned can be of use to program staff. As staff rotate 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 also make requests for specific training needs as a part of their EPMS planning session.

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

The Review Board's commitment to on-going training opportunities for staff insures that all staff who meet and work in conjunction with local review board members have the most current, most beneficial information available, which in turn provides quality oversight for the children in foster care in South Carolina.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

Because the Review Board performs an auditing function for the Department of Social Services, it is imperative that we maintain high standards of performance for our staff. We attempt to insure that this is happening through on-going quality supervision and by involving all staff in the development of annual strategic plans, local review board self-assessments, and local board annual evaluations of assigned staff.

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

Through support, quality supervision and training, and through an expectation of high standards of performance in each segment of the office.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

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

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

By being good listeners, supervisors and team players. We make an effort to consider staff's personal and family situations by offering flexible work schedules.

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

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

- Review Board Meetings
- State Board of Directors
- Distribution of Review Board Recommendations
- System of accountability provided by third party, citizen review

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

See Section 1.1

6.3 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.

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 our customers and stakeholders and by being good team players both internally and externally.

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

- Coordination and facilitation of third party citizen reviews for all children in foster care in SC.
- Through these reviews we are able to advocate for children in foster care, identify barriers to permanence for children in care and facilitate systemic change as necessary to limit the amount of time children spend in foster care in order to achieve permanent, stable living situations.
- See 1.1 for our "how-to"

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

Through routine assessment of the caseload of children placed in foster care and by continually addressing the degree of difficulty faced by staff and local review boards in monitoring and advocating for these children. If the Review Board is not adequately staffed and supported, it becomes impossible for the agency to achieve its statutory mission.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

The mission of the Children's Foster Care Review Board is to provide an external system of accountability and advocacy for children and families involved with the foster care system, promoting safe, permanent homes for children in foster care in a timely manner, while increasing public awareness about the impact of child abuse and neglect. Program Measures for the past seven years are attached in Table III.7.1. The number of children residing in foster care in South Carolina has seen a steady increase since 2000. The number of reviews completed and the number of children review have also increased.

Other significant trends are Areas of Concern cited, the amount of time children spend in foster care, the average number of placements children experience while in child care, the percentage of children achieving permanency either through a consummated adoption or return to their natural parent, and the number of children that re-enter foster care. In 2006 the total number of Areas of Concern cited has increased. The length of time children spend in foster care has decreased 25% since 2002, and the number of placements has decreased 38%. These are significant improvements for children and families in the foster care system. However, permanency has not improved for children and the percentage of children re-entering foster care remains above 20%.

The stated goals for FY 2006-2007 address increasing public knowledge and awareness about the foster care system, and collaborating with partners to improve the system for children in foster care. Tables III.2.41 and III.2.42 (Section III, Category 2: Strategic Planning) outline performance measures that will be used to evaluate progress in these areas.

Table III.7.1 Foster Care Review Program Measures

Measure	1999	2000	2001	2002	2003	2004	2005	2006
Number of Reviews Completed	8,169	8,097	8,075	8,305	8,443	8,232	8,317	8,464
Number of Children Reviewed	4,679	4,665	4,771	4,856	4,800	4,810	4,853	4,976
Number of Review Board Meetings	410	423	416	434	431	440	431	436
Number of Coordinators	9.50	9.25	9.00	8.10	8.00	8.00	8.00	10.00
Number of Volunteer Hours	9,919	9,890	9,781	9,668	10,031	10,155	10,574	11,630
Children Reviewed per Meeting	19.9	19.1	19.4	19.1	19.6	18.7	19	19
Reviews per Coordinator	860	875	897	1,025	1,055	1,029	1,040	940
Volunteer Hours per Review	1.21	1.22	1.21	1.16	1.19	1.23	1.27	1.37
Volunteer Hours per Child	2.12	2.12	2.05	1.99	2.09	2.11	2.17	2.33
Number of Areas of Concern Cited	10,521	10,096	8,623	8,543	10,415	10,270	9,816	11,168
Areas of Concern per Review	1.29	1.25	1.07	1.03	1.23	1.25	1.18	1.32
Reviews Continued or Rescheduled	298	258	206	225	386	321	316	410
Reviews Not Held Timely	159	219	198	177	205	228	229	333
Average Number of Years in Care	3.5	3.5	3.3	4.5	4.1	3.8	3.6	3.3
Average Number of Placements	3.5	3.5	3.6	5.4	4.9	4.3	4.0	2.8
Percent Achieving Permanency	66%	64%	64%	64%	58%	59%	59%	63%
Percent Recidivism	22%	18%	22%	18%	27%	24%	22%	24%
Percent of Reviews Completed Timely	98.1%	97.3%	97.5%	97.9%	97.6%	97.8%	97.7%	97%
Number of Advocacy Referrals Initiated *	1,396	1,406	1,275	1,254	562	727	821	436
Number of Training Sessions Conducted for Staff & Review Board Members	Not Measured	Not Measured	10	8	7	9	11	10
Number of Presentations Given for Outside Entities	Not Measured	Not Measured	17	18	12	13	23	28

* For FY 2006-2007 the Administrative Contract for Medicaid Review with Health and Human Services was discontinued.

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

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

In October 2006, the Foster Care Review Board surveyed local Review Board members and Foster Care Review Board staff. Each group was asked to agree or disagree with twenty-five statements, using a scale of 1 to 5 where strong agreement scored a 1 and strong disagreement scored a 5. 168 surveys were mailed, with a response rate of 61%. The average score for all statements was 1.61; nearly 66% of all scores were “strongly agree”, while 10% of all scores were “strongly disagree”.

The State Board of Directors completes a self-assessment annually use their results at their annual planning retreat. Local Review Boards completed self assessment plans for the year. The results were collected and analyzed in October, 2006. These results will be reviewed by the State Board at their annual planning retreat.

Table III.7.2 Foster Care Review Customer Satisfaction Results: FY 06-07 (July 2006-June 2007)

Performance Measures	Number	Dates
➢ Timely Preparation of Annual Report (statistical research and recommendations)	950 copies distributed	9/22/2006
➢ Review Board Member Survey (Bi-Annual in even years)	103 responses	11/01/2006
➢ Review Board Member Exit Interviews	24 completed	throughout year
➢ Evaluation: New Board Member and Staff Orientation	36 responses	09/25/06, 2/26/07, 3/26/07, 5/14/07
➢ Evaluation: Chairpersons' Training	42 responses	Jan 2007
➢ Evaluation: Regional Training for Board Members	87 responses	Sept-Oct 2006
➢ Evaluation: Foster Care Review Board Conference	84 responses	4/20/2007
➢ Stakeholder Survey (bi-annual)		Will be completed in FY 2007-2008

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

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 Human Resources Results (i.e. work system performance, employee learning and development, well-being, employee satisfaction, diversity, and retention?)

All EPMS ratings are reviewed annually and low performance areas are addressed with training needs during EPMS planning sessions. All program staff receive annual reviews from volunteers and problem areas and training needs are frequently identified from these evaluations. General well-being and satisfaction are addressed during the Executive Director's annual goal setting meetings with staff, as well as during staff retreats, travel with staff, review observations and strategic planning sessions.

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

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

Appendix H

OEPP- Guardian Ad Litem

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Guardian Ad Litem Program

Section I - Executive Summary

Mission Statement:
The mission of the South Carolina Guardian ad Litem Program is to recruit, train and supervise volunteers who are court-appointed to represent and advocate for the best interests of children in the child welfare system and in family court proceedings involving allegations of abuse and neglect.

Vision:
To provide a well-trained, appropriately motivated, competent volunteer child advocate for every child in South Carolina involved in a Department of Social Services case of abuse or neglect in family court and to have a well-trained, highly-motivated staff to support the volunteers in their mission by providing the volunteers with supervisors, on-going training and otherwise assisting them in being an integral part of child welfare systems improvement.

Major Achievements for FY 2006-2007

- Implemented the new Circuit Case Worker position in the 8th Circuit
- Trained 317 new volunteers
- Reduced cases assigned to staff members who serve as volunteers from 13.3% to 12%
- Served 6,655 children in 2006-2007
- Accurately calculated the percentage of children in child abuse and neglect cases served by the South Carolina Guardian ad Litem Program to be 52%
- Developed and implemented County Plans in 45 counties that designate specific county goals and objectives
- Developed county-specific public relations kits for recruitment efforts
- Implemented contracts for county attorneys who represent the volunteer guardians ad litem statewide
- Coordinated with the Children's Law Center on the Court Improvement Project grant for training attorneys representing and serving as guardians ad litem.
- Developed a Memorandum of Agreement with the Charleston School of Law to provide Guardian ad Litem training at the law school for both law students as part of the students' pro bono service requirement, as well as members of the public.
- Successfully supported county attorneys in defending two difficult appeals of termination of parental rights
- Successfully sought anonymity for child victims in the appeals in which the SCGAL Program was involved
- Established an agreement to be a placement resource for the University of South Carolina School of Social Work for interns on an on-going basis and set up the first two internships with USC for the 2007-2008 school year
- Awarded a $50,000 National Court Appointed Special Advocates (NCASAA) grant for 2007-2008 to fund a full-time Public Relations Coordinator to facilitate volunteer recruitment
- Awarded an $85,000 Victims of Crime Association (VOCA) grant for the purchase of new computers for the statewide program
- Implemented pilot projects in Aiken and Greenville Counties for high speed internet access

Key Strategic Goals for Present and Future Years

1. Hire a fourth Regional Supervisor for better statewide support of staff
2. Create a second Circuit Case Worker position
3. Make time-limited employees FTEs
4. Increase SCGAL Program acceptance of cases by an additional 20%
5. New supply delivery system to remote offices

Opportunities and Barriers

How the accountability report is used to improve organizational performance

At this time the South Carolina Guardian ad Litem program serves 45 of 46 counties. Only Richland County is a separate program. The entire state is divided among three Regional Supervisors, each of whom has approximately 15 counties in which they assist with training, public relations, case resolution, staff supervision and staff hiring and function as liaisons to the state office. The expanse of geography that each must cover is a deterrent to efficient, effective management. The SCGAL Program would be better served by dividing the state into quadrants. Regional Supervisors would have less area to cover, more time with the counties they support and a better ability to focus on volunteer and staff development. Having too few persons in management hinders volunteer support and therefore hinders volunteer recruitment and retention.

The ability to relieve current staff of cases on which they are personally appointed is an obstacle to achieving adherence to child welfare best practices and standardization statewide. Placement of the Circuit Case Worker, a pilot project position in the 8th circuit has been slow to get off the ground this year. However, when appropriately staffed, this position did a wealth of good for taking the burden off of county staff and proved to be a great boon to the children who had a consistent guardian ad litem in an overburdened area. The need exists in at least 2 other areas. One new Circuit Case Worker would help the Program achieve its goal of assisting more abused and neglected children while building the volunteer pool.

The SCGAL Program employs 78 persons at this time, plus the grant positions funded through the National Court Appointed Special Advocates Association. Of this number 23 are FTEs. 56 staff members are classified as time-limited. The designation neither fits the positions nor the needs of the SCGAL Program. Eighteen are County Coordinator positions, integral to the fundamental working of the Program. The rest are Case Managers or Administrative Specialists, who are also essential for the running of the Program. The Program needs enough FTE slots to appropriately staff the Program throughout the state.

The South Carolina Guardian ad Litem Program will always have a goal of serving more of the abused and neglected children of South Carolina who need an advocate until we are serving at least 90% of the cases. The current staff maintains day-to-day operations, but is insufficient to recruit and train new volunteers. This is an obstacle to serving more children. The goal of recruiting more volunteers relates to the need for a fourth Regional Supervisor and an additional Circuit Case Worker. No County Guardian ad Litem Program should be serving fewer than 70% of the children who need a volunteer advocate and 13 of our counties served less than 50% of these children in the fiscal year 2006-2007. This year's addition of a full-time Public Relations Coordinator through the National Court Appointed Special Advocates Association (NCASAA) grant should assist with meeting this goal.

Staff stationed in county offices has had to pick up supplies in Columbia at staff meetings for a number of years. Shipping supplies to 30+ locations was cost prohibitive, especially in years when funds for essential staff were missing. Through an audit process, the Program was informed of a resource, Agency

Mail Services, that would potentially allow for delivery of supplies without the expenses formerly experienced for shipping. The Program is also researching shipment directly to county office through state contract vendors for supplies. Either solution or a combination of them will make for greater efficiency.

Section II - Organization Profile

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

The South Carolina Guardian ad Litem Program recruits, trains and supervises volunteers who speak for the best interests of abused and neglected children in family court proceedings. This is our primary mission. Abused and neglected children involved in family court cases brought to court by the Department of Social Services are our clients. Advocacy for the children is done directly by appointed volunteers, who are trained at the county level by SCGAL Program staff. Volunteer supervision is accomplished in the local county office with assistance from Regional Supervisors and state office. Public education about the prevalence of abuse and neglect of children is a secondary mission.

2. Key customers segments and their key requirements/expectations

Our customers include the children for whom our volunteers are appointed. The children should be receiving informed advocacy in the family court and in all aspects of the DSS case. The family court bench is another customer. Statute indicates that our volunteers are supposed to be collecting information to give to the judges in family court in order for the Court to be more fully informed in its decision making. Volunteers are required to supply the Court with a written report that includes recommendations in every court hearing. Defendants in the family court cases are also customers. The volunteer guardian ad litem is required to speak for the child's or children's best interest; however, the defendants should expect the volunteer to do an independent investigation and include the defendants' information in the collection of information. The defendants should expect that the volunteer advocate will diligently speak for their minor children. The volunteer guardians ad litem are a customer of the South Carolina Guardian ad Litem Program. The volunteers should receive quality training that prepares them for their appointed role, quality in-services that keep them informed on child welfare and advocacy topics, and support for their functions both in and out of court as child advocates.

3. Key stakeholders

Every case in which the SCGAL Program is involved is one that originates with a DSS action. That makes DSS an important stakeholder for the Program. Others include all child welfare organizations that have the improvement of the lives of children touched by child abuse or neglect. This would include service providers such as the Department of Mental Health, the Department of Disabilities and Special Needs, the Department of Juvenile Justice and the Department of Alcohol and Drug Abuse Services. Foster Care Review Board, the Children's Law Center, Court Administration, the Foster Parents' Association, the Citizen's Review Panel and the Children's Trust Fund are examples of other stakeholders. Every citizen of South Carolina has a stake in the welfare of its children and certainly is a stakeholder for the abused and neglected children of the state.

4. Key suppliers and partners

The South Carolina Bar has been a generous partner in supplying legal representation to our volunteers. The Finance, Accounting and Human Resources Departments of OEPP are all essential to running the SCGAL Program. The Information Technology Department of OEPP has been a very supportive partner. The National Court Appointed Special Advocates Association (NCASAA) has been a key partner, supplying a $50,000 state grant each year since 2000 as well as training support and materials, public relations materials and staff development through its conference.

Table II.1.1 – Guardian ad Litem Program Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
State Office	Administrative functions, to include lease management, attorney contracts, utility payments, travel reimbursement, and equipment contracts	County Guardian ad Litem offices	Office of Executive Policy and Programs
State Office	Legal consultation, case work support, program policy and best practices development, legislative liaison, public relations coordination and human resources functions	County Guardian ad Litem office, and the volunteers	Office of Executive Policy and Programs Human Resources office; NCASAA best practices and public relations departments
34 County Guardian ad Litem Program offices	Recruit, train and supervise volunteer child advocates for DSS abuse and neglect cases in family court	Abused and Neglected children, Volunteers, DSS and the family court bench	Public Relations Coordinator, SCGAL Senior staff and the Statehouse
34 County Guardian ad Litem Program offices	Assist volunteers to produce written reports for every court hearing in which a volunteer guardian ad litem is appointed for the family court judge and monitor compliance to provisions of the court order	Abused and neglected children, DSS and the family court bench	The Volunteer Guardians ad Litem

5. Operation locations

The South Carolina Guardian ad Litem Program has one state office in Columbia and 34 remote, county locations. See office locations below. The State Office location is 1205 Pendleton Street, Suite 477, Columbia, SC 29201.

County Offices

Abbeville/Greenwood
Aiken
Anderson
Bamberg/Barnwell
Beaufort
Berkeley
Charleston
Cherokee
Chester/Fairfield
Chesterfield
Clarendon
Colleton
Darlington
Dillon
Dorchester
Florence
Georgetown
Greenville
Hampton/Allendale
Horry
Kershaw
Lancaster
Laurens
Lee
Lexington
McCormick
Marion
Marlboro
Newberry
Oconee
Orangeburg/Calhoun
Pickens
Spartanburg
Sumter
Williamsburg
York

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

___23___ Classified ___1___ Unclassified ___41___ Contract

_____ Temporary _____ Temporary (Grant) ___56___ Temporary (time-limited)

7. The regulatory environment under which your organization operates

The South Carolina Guardian ad Litem Program operates under the statutory guidelines of the Family Code Chapter 7, Section 20. The Program's originating statute, 20-7-110, mandates a guardian ad litem for every child involved in a case of abuse or neglect proceeding in family court. Statutes 20-7-121 through 20-7-127 create the South Carolina Guardian ad Litem Program and define the role, rights and responsibilities of the volunteers that the Program recruits, trains and supervises. The volunteers are appointed to serve as the advocates for the children.

Volunteer guardians ad litem are also subject to the rules of family court. They are appointed by court order and must follow the provisions of the appointment order. Reports provided to the family court by volunteer guardians ad litem are subject to the rules of evidence.

The South Carolina Guardian ad Litem Program is an affiliate of the National Court Appointed Special Advocates Association (NCASAA) and has met its compliance requirements, a major achievement. National child advocacy best practices and child welfare best practices are measured by NCASAA and the SCGAL Program's policies and procedures are derived from those best practice standards. Each county office is provided with a printed copy of the updated policy manual. Regular updates are disseminated by email. All staff is expected to adhere to program best practices and policy. Volunteers are made aware of program policy at pre-service training and sign an agreement to adhere to Program policy before being assigned the first case. Volunteers sign a confidentiality agreement outlining specific policies to which they will abide at the beginning of each case to which they are assigned.

8. Key strategic challenges

- Creating 2 new positions for a fourth Regional Supervisor and a second Circuit Case Worker
- Gaining FTE slots for existing staff members who are now classified as time-limited
- Applying consistent public relations efforts for recruitment in counties with the highest rates of non-acceptance of cases to increase volunteer appointment for abused and neglected children
- Coordinating purchase and delivery of supplies to 34 county offices with procurement and finance departments of the Office of Executive Policy and Programs, with assistance of the Director of Administration, and in compliance with state procurement contracts

9. Performance improvement systems

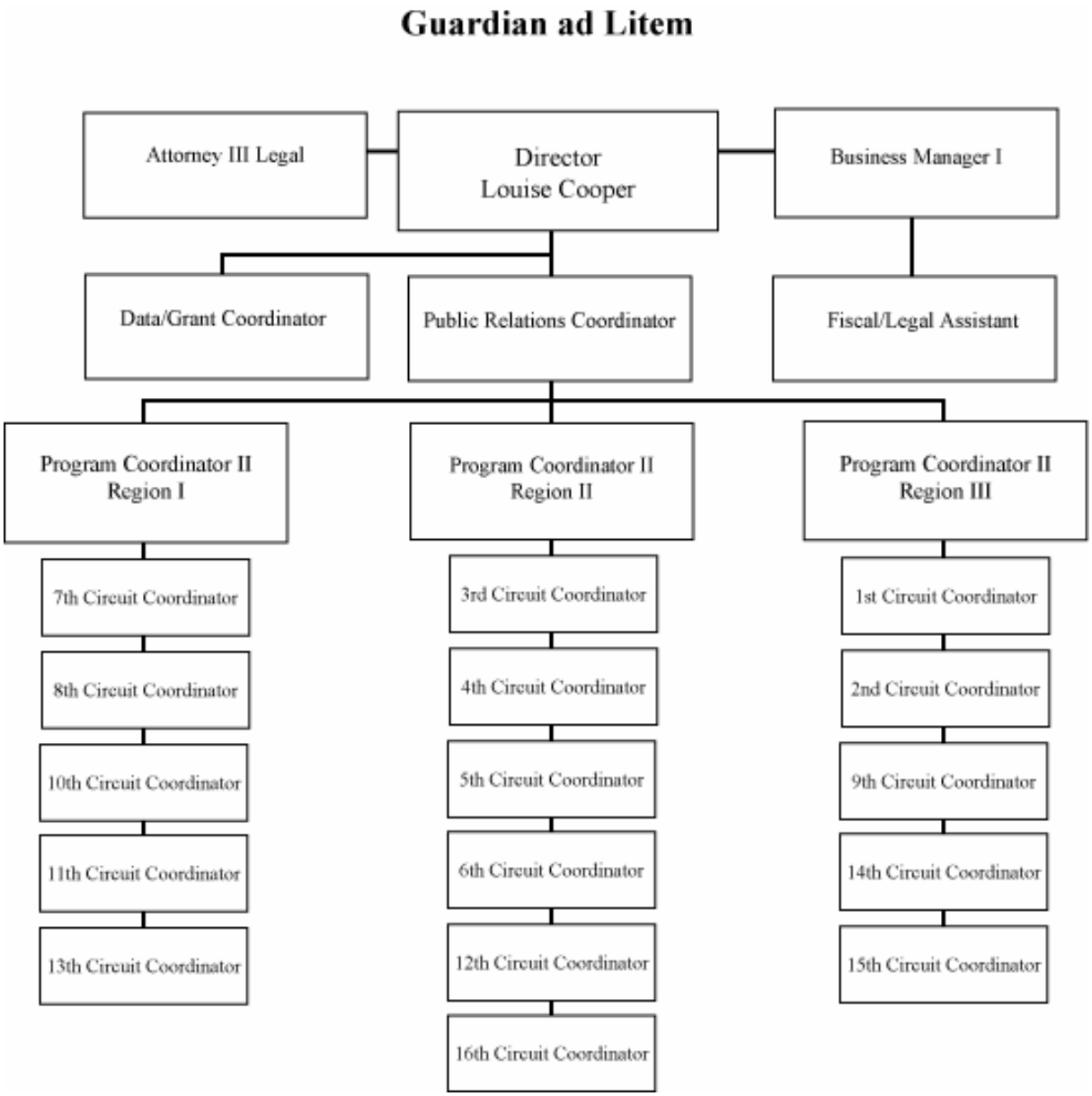
Each office reports monthly from information in its county database on the number of cases received by that office, number of cases accepted, number of volunteers assigned, number of volunteers resigning, number of children served and number of court hearings attended. A statewide report is aggregated from that information and sent to every office. Every county office has the opportunity to see how it is performing with respect to important measures such as case acceptance, and has the chance to compare its performance with other counties of like size.

Acceptance rate is calculated by the state office and Regional Supervisors bi-annually. Data collection from Court Administration on numbers of child abuse and neglect cases files by county is compared to database information collected by the county Guardian ad Litem offices to ascertain if all cases are being counted by the GAL Program. An individual county plan was developed for each county last year by a specific format to designate recruitment and case acceptance goals. As the initial plan, goals were designed to alert offices to the direction in which the county office should be striving in order to meet the needs of children who find themselves in the family court system due to abuse or neglect. Regional Supervisors met with each County Coordinator to discuss the plan and modify it based on county input.

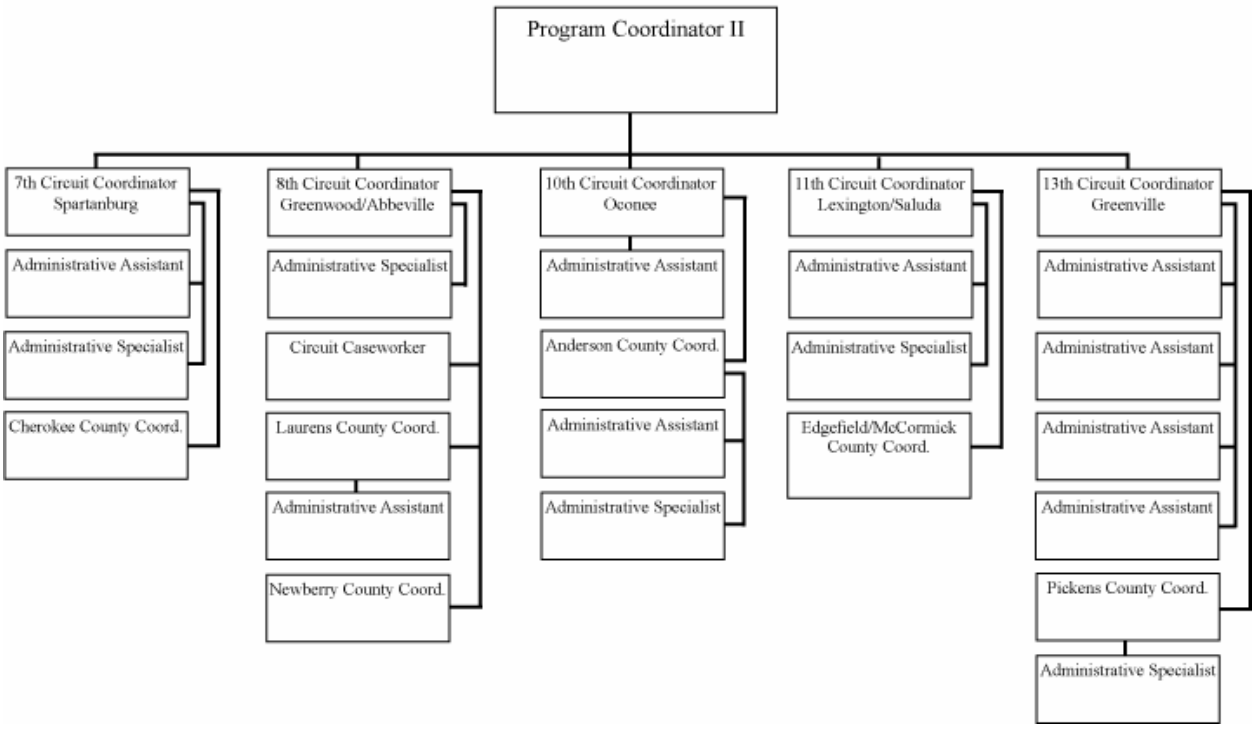
A cycle for auditing has been implemented this year as well. Previously audits were conducted infrequently because of the time and staff necessary to completely audit the complex case files and the COMET database. Audits are now conducted bi-monthly on no more than 3 parameters and on up to 25 randomly selected case files. County Coordinators receive a follow-up letter after the audit that outlines the finding of the audit and requests a response on corrective measures from the county. All correspondence is copied to state office and filed for the county.

All counties should be moving towards case acceptance rates of 90%, with no volunteer serving on more than a maximum 5 cases. Staff should not be assigned to more than 10% of cases statewide and that measure should be reduced over the next five years. These goals are regularly communicated via county plan meetings and statewide staff meetings which are held every other month in Columbia.

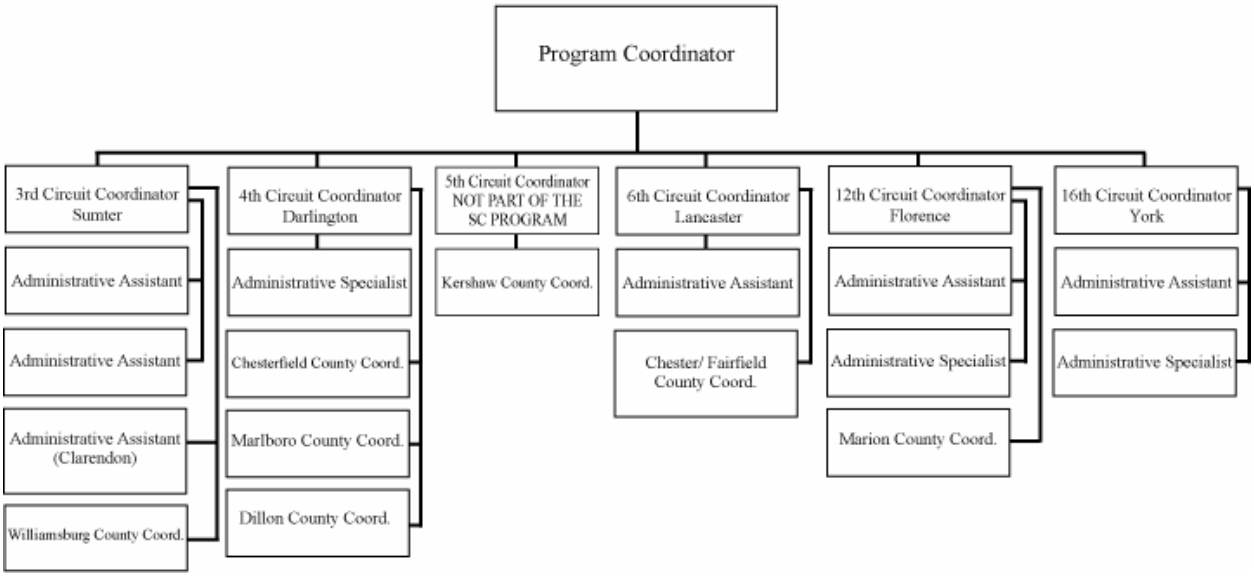
10. Organizational chart

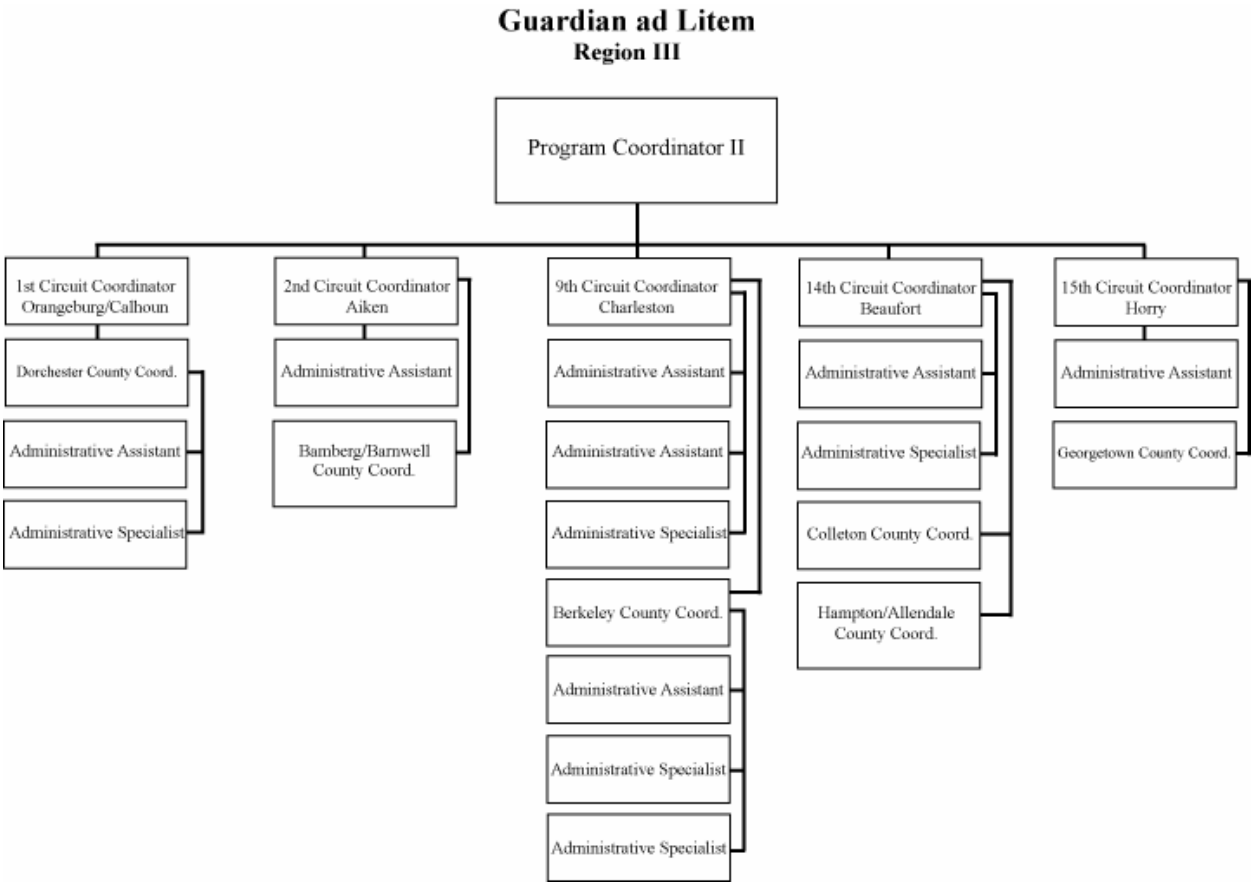


Guardian ad Litem
Region I



Guardian ad Litem
Region II




Guardian ad Litem
Region III
Program Coordinator II
1st Circuit Coordinator Orangeburg/Calhoun
Dorchester County Coord.
Administrative Assistant
Administrative Specialist
2nd Circuit Coordinator Aiken
Administrative Assistant
Bamberg/Barnwell County Coord.
9th Circuit Coordinator Charleston
Administrative Assistant
Administrative Assistant
Administrative Specialist
Berkeley County Coord.
Administrative Assistant
Administrative Specialist
Administrative Specialist
14th Circuit Coordinator Beaufort
Administrative Assistant
Administrative Specialist
Colleton County Coord.
Hampton/Allendale County Coord.
15th Circuit Coordinator Horry
Administrative Assistant
Georgetown County Coord.

11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$1,682,363	$ 663,956	$ 1,859,545	$ 741,960	$ 1,459,871	$ 1,071,894
Other Operating	$ 639,465	$ 176,052	$ 824,669	$ 108,254	$ 1,195,329	$ 176,492
Special Items	$	$	$	$	$	$
Permanent Improvements	$	$	$	$	$	$
Case Services	$	$	$	$	$	$
Distributions to Subdivisions	$	$	$	$	$	$
Fringe Benefits	$ 449,761	$ 177,844	$ 533,752	$ 213,105	$ 372,966	$ 243,800
Non-recurring	$	$	$	$	$	$
Total	**$ 2,771,588**	**$ 1,017,852**	**$ 3,217,966**	**$1,063,319**	**$ 3,028,166**	**$ 1,492,186**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
South Carolina Guardian ad Litem Program	Recruit, train and supervise volunteer guardians ad litem in child abuse and neglect proceedings brought to family court by the Department of Social Services	State	1,017,852	State	1,063,319	Table III.7.1.1 Table III.7.2.1 Table III.7.3.1 Table III.7.4.1
		Federal		Federal	8,771	
		Other	1,753,737	Other	2,145,876	
		Total	2,771,588	Total	3,217,966	
		% of budget:	4%	% of budget:		

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

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

a) short and long term direction and organizational priorities:

Senior staff members, including the State Director, three Regional Supervisors and General Counsel, meet monthly to discuss trends in the Program and set priorities for movement towards goals. The goals of the South Carolina Guardian ad Litem Program have not wavered from meeting the needs of 90% of the children in South Carolina who need a volunteer advocate in a child abuse or neglect proceeding for three years. Besides this overarching goal, there are many intermediate goals that are designed to facilitate the mission and to assist the entire child welfare system in making improvements. Staff meetings held every other month in Columbia offer the opportunity for staff to hear and discuss the direction of the Program and have input into the goals set.

b) performance expectations:

Staff members have a copy of their job descriptions that outline the activities required in each position. Each month every office receives the aggregated database report that shows the performance of the county for a number of parameters. Every county has a county plan that outlines goals and performance objectives, and County Coordinators participate in the plans' creation. Employee evaluations are conducted annually.

c) organizational values:

The Policy and Procedures Manual sets forth best practice standards for child advocacy and volunteer supervision. Organizational values that impact child advocacy are a part of the volunteer training that every employee of the SCGAL Program must also attend. The values include placing the best interest of children first in all case work decisions. The Human Resources policy of the Office of Executive Policy and Programs sets standards for employee relations.

d) empowerment and innovation:

The employees and volunteers who work within the Guardian ad Litem Program are taught through the 30-hour volunteer pre-service training how to advocate. This includes having the role of speaking for another who cannot speak for himself or herself. GAL training consists in part of learning to act in the child welfare system to achieve a child's best interest and to look at problems and situations creatively and from a child's viewpoint. Empowerment and innovation are hallmarks of Guardian ad Litem program staff and volunteers.

e) organizational and employee learning:

Staff members inform the leadership of concerns and educational needs. Guest speakers are engaged for the bi-monthly staff meetings. Staff is encouraged to attend the Children's Law Center annual conference and a small number of staff members are able to attend the annual NCASAA conference for continuing education. As staff identifies conferences and workshops that are of interest, requests for attendance are made and accommodated, as funds allow.

f) ethical behavior:

Open conversation about ethical matters is part of the culture of the Guardian ad Litem Program where there are no easy answers to complex family circumstances. Staff and volunteers are encouraged to discuss their thoughts and ideas with supervisors at every level. Modeling thoughtful consideration of ethical dilemmas by senior staff is one way that the process is encouraged.

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

Through continuous concentration on the child's best interest in every case, the volunteers and staff remain focused on our key customers, abused and neglected children. The Program focus is narrow and specific which makes maintaining that mindset easier. Continuous collaboration with the Department of Social Services and other child welfare entities who are stakeholders is modeled by senior staff through monthly partners meetings held at state DSS that are mirrored in meetings held quarterly at the county level. Senior staff recognizes volunteers as customers of the SCGAL Program. Attempts to promote focus on the volunteer guardians include providing support through the Regional Supervisors as an extension of the Coordinators' roles and through state office research of legal matters pertinent to case work.

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 Guardian ad Litem impacts communities by assisting children who have been abused and neglected to reach a safe, permanent home as quickly as possible. One associated risk could be to have volunteers who are not adequately trained for the complex task for which they are assigned. To combat that risk the Program provides a 30-hour free training, interviews the volunteers extensively before service, and provides in-service hours of continuous education. Volunteers also have required record checks for previous criminal or child abuse findings.

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

Fiscal accountability is regulated through the finance and accounting offices of the Office of Executive Policy and Programs division of the Governor's Office. The state office of the Guardian ad Litem program processes all office leases, utilities payments for the 34 offices and other program-related expenditures such as travel reimbursement and equipment purchase. However, procurement and accounting in OEPP handle the final payment. All purchases of equipment are reviewed by the Director of Administration. The SCGAL Program is responsible for operating within its budget and has consistently had carryover from its 2% fund for the last three years.

Legal and regulatory accountability is maintained through audits in the county offices by Regional Supervisors and through interaction with the family court bench and Program contract attorneys. The Program's General Counsel researches and presents recent court decisions that impact child welfare to senior staff and county staff.

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

Each month for each county the SCGAL Program measures the number of children served, number of cases accepted, number of cases turned back and the number of current volunteers through the COMET monthly report. The Program also maintains the number of Termination of Parental Rights actions filed in cases for which there is an appointed volunteer guardian ad litem and the number of volunteers who have left volunteer service that month. These are all on the monthly report that all staff receive and are derived from the COMET database.

The number of cases held by staff members is monitored but not monthly. That figure is part of the County Plans and reviewed in annual reviews of the counties and of the staff members. Regional Supervisors also assess the number of staff cases on an on-going basis in contacts with the counties.

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

Through National CASAA self-assessment at the state level and county levels, the SCGAL Program measured its compliance to national best practices. The outcome of the assessments led the Program to develop the county plan process for regular and consistent evaluation of county programs. County staff completed the assessments so that the results were driven by on-site staff. Senior staff demonstrates commitment to the Program's organizational values by being present in the county offices and affirming the mission and goals of the SCGAL Program to having well-trained volunteer child advocates.

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

A major focus of the South Carolina Guardian ad Litem Program over the past three years has been to codify and update policy and procedures and then develop means for measuring compliance in a graduated process. Senior staff has been asked to review and rewrite portions of the Policy and Procedure Manual, assist with updates on the volunteer training manual and identify county staff that can contribute to those efforts. As new procedures and increased processes for analyzing data are developed, these are preserved through the computer system's shared drive in the state office where all state staff on-site can access them. The SCGAL Program has suffered in the past by a loss of Program history and knowledge of the Program when only one or two persons had the information and it was not readily accessible. The goal is to ensure that should any staff member leave, the business of children will not be lost and that the business of the Program can carry on. The emphasis on the COMET database's accuracy is part of that effort. Emphasis on standardization of forms and file format are also based on the need to be able to bring new staff on board and up to productivity as quickly as possible.

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

Regional Supervisors involve County Coordinators in the development of the individual County Plans. County Coordinators have the opportunity to see an objective measure of their goal performance. Through this process the county staff can identify particular county obstacles and opportunities. The Plan can be a direct reflection of the County Coordinator's own programmatic goals. Effective tools and procedures can be shared for possible statewide implementation.

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

Each Guardian ad Litem county program strengthens its community by helping its vulnerable children. Further, the county SCGAL Programs work to make every facet of the local child welfare system more effective. Support for the county programs by the senior staff assists them in their child advocacy functions. Regional Supervisors provide assistance with training, with case resolution, and with public relations efforts. State staff also assists with public relations, production of materials for publicity, legal research and interagency interactions. Every community is improved when it better understands the danger to its children that exists.

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

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

The strategic plan for the South Carolina Guardian ad Litem Program is updated each year as part of the grant application for the National Court Appointed Special Advocates (NCASAA) state grant. The grant is written by the state director, with assistance from the Data Coordinator and the Business Manager. The SCGAL Program General Counsel and three Regional Supervisors are consulted about annual programmatic goals. The strategic plan is divided into 5 sections, each with a specific goal and supporting objectives. The first section is Staff and Volunteer Development; the second is Public Relations and Education; third is National Affiliation; fourth is Legal Representation; and the last is Foundation and Board Enhancement and/or Creation.

a) organization's strengths, weaknesses, opportunities, & threats: In every section of the strategic plan the objectives either set a goal for improvement on a measure of performance or identify a goal of maintaining performance levels. The Program's strengths are recognized by maintaining performance; weaknesses are reflected in new performance measure goals. Opportunities are addressed by adding goals based on existing positives and threats are minimized by planning activities that will reduce their impact on the program.

b) financial, regulatory, societal, and other potential risks: Under Staff and Volunteer Development, objective E, the plan is to "Disseminate current information to local GAL programs regarding federal and state legislation, policy changes, trends in child welfare and court improvement as well as court decisions that impact the work of GAL programs." Four steps to make that feasible follow in the plan.

c) shifts in technology or regulatory environment: The SCGAL Program strategic plan does not address technology changes. Changes in any statutes are addressed as relates to making staff aware of the changes. The current strategic plan does not have plans for seeking statutory changes.

d) human resources capabilities and needs: the strategic plan has objectives and steps for training staff and volunteers, providing updates on new information, support for key county program performance measures through senior staff and volunteer recruitment and retention.

e) opportunities and barriers: as noted in section a), the strategic plan recognizes the barriers to goal achievement and sets goals for improvement where needed. The plan also notes where the Program is performing well and recommends maintenance in those areas.

f) business continuity in emergencies: the strategic plan reference in this section does not deal with emergency preparedness. However, the SCGAL Program has submitted an emergency plan to NCASAA that considers the Program's actions during a natural disaster or epidemic. The SCGAL Program is compiling a list of its children that need priority evacuation in the event of an emergency for submission to the Governor's emergency management division. The staff will be responsible for removing its data to a safe location in emergencies and child location is a priority data field. Senior staff and the Data Coordinator, in the event of an emergency, will have a statewide data set that is externally stored and portable for removal to a safe location. The purpose is to ensure that the Program can return to operation as quickly as possible and assist with safeguarding children.

g) your ability to execute your strategic plan: the strategic plan as currently written can be accomplished through the COMET database collection, County Plan development, and county and state staff commitment to the Program's goals. The plan focused on achievement of the main mission to field well-trained and sufficient advocates for abused and neglected children. Every goal supports that mission, making the strategic plan relatively narrow in its focus and objectives.

Chart III.2. Key Agency Action Plan/Initiative

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
Hire a 4th Regional Supervisor	Staff and Volunteer Development/ Support the appropriate staffing of existing GAL county programs	More ably assist county staff with recruitment and training of new volunteers. Audit staff files and data more consistently.	TableIII.7.1.1 TableIII.7.2.1
Create and hire 2nd Circuit Case Worker position	Staff and Volunteer Development/ Support the appropriate staffing of existing GAL county programs	Provide advocacy services for children in circuits where the SCGAL Program has been required to serve in all cases and ensure other county staff is meeting its mission of recruitment, training and supervising of volunteers.	TableIII.7.1.1 TableIII.7.2.1
Change time-limited employees to FTE positions	Staff and Volunteer Development/ Support the appropriate staffing of existing GAL county programs	Create stability and value for the positions within the Guardian ad Litem program, ensuring that the Program attracts and retains valuable staff members.	TableIII.7.4.1
Increase volunteer acceptance of child abuse and neglect cases by 20%	Public Relations and Education/ Increase awareness of GAL work and the needs of abused and neglected children by providing information to targeted groups and the public	Increase production and use of public relations materials generated through the NCASAA grant to increase volunteer recruitment.	TableIII.7.1.1
New supply delivery system to county offices	Staff and Volunteer Development/ Support and provide technical assistance to local GAL programs	Implement direct purchasing where possible and continue to research and implement avenues to have supplies shipped directly or purchased locally.	N/A

2.2 How do you develop and track action plans that address your key strategic objectives?

Monthly assessment of statistics and feedback from county staff offer the information needed to determine where additional staff may be needed and what kind of staff that should be. Regional Supervisors provide additional information about the areas where they act as training and recruitment support for the counties. Two of the five key goals will require new positions and that requires additional funds in personal services. The decision to request these positions comes after analyzing the budget of the Guardian ad Litem Program for a year and determining that the Program can sustain the additional expenses and that the positions are necessary to perform our basic mission.

The change of staff from time-limited to FTE would be at negligible expense to the state because the current time-limited positions are already positions with benefits. The goal was developed in response to the awareness that the current time-limited designation is incorrect. The goal will be tracked through the legislative session.

More accurate tracking of case rejections and acceptances have resulted in determining that the Program is accepting less than 50% of child abuse and neglect cases in 13 county programs. The goal to increase acceptance statewide by another 20% was developed as a result of the county plan process, where county staff are participating in commitment to recruitment and retention of volunteers. The goal will be tracked monthly by the database information in conjunction with Court Administration data on numbers of abuse and neglect cases filed.

Commitment to develop a delivery system for supplies in the county offices became a key goal upon learning that there were means to accomplish it without it being cost prohibitive to the Program. Various methods have been proposed and one or a combination will be attempted. Success of the goal will be monitored by the Business Manager through the year.

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

Information is communicated via email, bi-monthly staff meetings and face-to-face meetings in county locations. The above objectives have been shared in staff meetings. Goals for performance improvements are a part of County Plan development.

2.4 How do you measure progress on your action plans?

Each month a monthly statistical report measures key performance numbers for each county and is totaled for the state. An annual report is done on the calendar and fiscal year for bi-annual reports. County Plans are re-developed and assessed annually at the beginning of the fiscal year. They are due for completion by the end of August. Grant based activities, such as the public relations goals set for the NCASAA grant are monitored through the grant term with monthly reporting and bi-annual reports on goal achievement.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Our greatest and most significant challenges center on providing adequate child advocacy for every abused and neglected child in South Carolina with a DSS family court case. All of our objectives are designed to recruit adequate numbers of volunteers, train them well, and support them through the cases. Adding a fourth Regional Supervisor and a new Circuit Case Worker will provide more staff and volunteer support and directly assist more children. When the volunteer numbers grow such that staff will no longer need to take cases, staff can focus on recruitment and training to ensure that as long as there is a need for volunteer child advocates, the SCGAL Program is providing them.

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

By matching the strategic plan and its stated goals to the accomplishments for the year, the program gets a good idea of how applicable the plan was and how effectively the goals were met. The strategic plan is improved by being more specific and outcome based. Each year National CASAA requires its grant recipients to evaluate their attainment of strategic goals and encourages the recipients to write more measurable goals.

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

The Strategic Plan of the South Carolina Guardian ad Litem Program is not part of 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 requirements are?

Customers of the South Carolina Guardian ad Litem program include the persons whose lives are impacted by involvement in family court because of abuse or neglect of a child.

Customer/Stakeholder	Requirements
Abused and neglected children in DSS cases brought to family court	Well-trained advocates who conduct independent assessments of the facts of the cases and speak for the children in all court hearings through written reports and possibly testimony.
Family Court Bench	Volunteer guardians ad litem who can present to the court reports with recommendations that inform the judge of facts which he needs in order to render the best judgment.
The Department of Social Services (and other child welfare entities)	Child advocates who can collaborate with other agencies and share information about the cases to which they are assigned for the purposes of assuring that abused and neglected children receive safety and stability as quickly as possible, as well as appropriate treatment services.
The volunteer guardians ad litem	Training that will prepare them for their role as volunteer guardians ad litem, staff support throughout the cases and staff assistance with court preparation.
Defendants in the family court abuse and neglect cases	An advocate that will interact with them sufficiently to hear the defendants' perspective and present to the court a balanced child-centered report that speaks to the child's best interest.

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

Staff members attend in-services and conferences that hone case management skills. Bi-monthly staff meetings often have a time for a staff member to present an example of difficult case resolution for discussion. Our affiliation with the National Court Appointed Special Advocates Association (NCASAA) provides us with information on trends in the field including case management.

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

Volunteer feedback when they must leave the Program is valuable as a means for determining if we are providing adequate support to them. The family court bench can and does give us valuable feedback both formally and informally. The SCGAL Program meets monthly at the Department of Social Services with other stakeholders to discuss any concerns. Issues as they are brought up inform the discussions of senior staff with county staff and function to keep us sensitive as to how we can improve our advocacy.

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

A formal survey of customers was conducted five years ago. Since that time we have measured customer satisfaction where judges, other child welfare agencies, and Defendants are concerned by the number of complaints. Volunteer satisfaction is measured obliquely by retention. Our retention rate in South Carolina exceeds the national average. It is difficult to measure the satisfaction of our children. The best measure we have is when a child says thank you or asks a volunteer to stay involved in his or her life after a case closes. When children become safe and are in a permanent home, we hope they have been well-served by their volunteer guardian ad litem.

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

As stated above, the relationship with the children may be the hardest to measure, but the key to building a positive relationship is the easiest. The way to build a positive relationship with our children is to visit them at least monthly and let them know you will be consistent in seeing them.

The way to build a positive relationship with the family court bench is to be present for court, with a report that is fact-based and pertinent to the needs of the child. The volunteers build credibility for themselves and more importantly for the child each time they demonstrate that they have done an independent investigation into the case.

To build a positive relationship with DSS or other child welfare agencies may not be as clear cut. The SCGAL Program holds a commitment to collaborate for the benefit of children. The relationship with DSS is solid and professional in some counties and far from cordial in others. The Program holds a value that our volunteers and staff will conduct themselves for the best interest of children and promotes that attitude to staff and volunteers. The relationship with other agencies is as positive as we can make it on our behalf.

Building a positive relationship with Defendants in a child abuse and neglect case is not impossible. The SCGAL Program has a value that supports treating all individuals with respect and conducting our case work on the assumption that we must ask the questions before we can have answers. Understandably, in a situation where a volunteer or staff member recommends that a child not return home, defendants are often unhappy. Treating the defendants fairly and being straightforward with them assists with as positive a relationship as may be had. In cases where families are reunited and lives improved, defendants often feel very positively towards the volunteer guardian ad litem.

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

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

The South Carolina Guardian ad Litem Program tracks through its COMET database the measures of child advocacy that have previously been mentioned. These include: number of children served, number of cases served, number of volunteers trained and resigned, number of cases rejected. These and other measures are collected both monthly and bi-annually. Based on these measures, the Program makes decisions about where to place personnel and where to request additional personnel. National best practices suggest that there should be a full-time staff person for every 30 volunteers that are supervised. This guidance and our collections of numbers of cases and volunteers, along with knowledge of the geographic territories over which some personnel are working, determine our placement and request for human resources. Operationally the SCGAL Program operates efficiently. Rent, utilities, supplies and travel per county office and state office are among the items tracked for expenditure.

Seventy-five percent of the SCGAL budget has been expended on personnel expenses because those resources are essential to conduct advocacy for abused children. The Program has kept operational expenses low and seeks to minimize expenditures by seeking rent-free office space through county government where possible and funding special projects for recruitment through state and county grants.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

The above-mentioned measures from the COMET database tell us if the Program is meeting its mission. The outside parameter of the SCGAL mission is not determined by the Program – it is determined by the number of children who enter the child welfare system because of DSS family court actions for child abuse or neglect. The Program responds to the need and continuously analyzes the changing needs by county. The County Plan is meant to assist County Coordinators in setting goals for performance that will meet the needs of the children coming into the system. The parameters of the county plans include the number of volunteers that would be needed to be recruited to serve every case, the number of cases expected to be received in the county in that year, the number of trainings that need to be scheduled, and the retention of existing volunteers that is occurring and needed.

4.3 What are your key measures?

Key Measures

New Cases	**Number of Children**
Closed Cases	**Number of Children**
Number of Cases Served	**Number of Children Served**
Volunteer Total	**Number of Volunteers Who Resigned**
Number of Volunteers Trained	**Total Volunteer Hours Collected**
Number of Cases Turned Back	**Number of children in Cases Turned Back**
Number of Cases Assigned to Staff	

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

National best practices suggest the data measures collected. Data indicate where the need for staff is greatest, due to heaviest caseloads and largest geographic areas. In addition to the information we collect, we use Kids Count demographic data, Court Administration data on child abuse and neglect cases filed, and information from the Department of Social Services to balance our picture of the needs of each county and judicial circuit throughout the state. Innovation derives from analyzing the data and recognizing that traditional means have not produced solutions to problems of recruitment of volunteers in a particular area. New recruitment ideas and staffing plans have been implemented based on the current data and projected caseloads that current data suggest will be in the near future.

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

New staff is trained on the use of the COMET database by the Data Coordinator. County and state staff is trained and updated on the COMET database system as it evolves and new versions are produced. The Data Coordinator monitors data input by counties randomly and through the monthly reports. These are submitted by the 10th of the next month. The statewide report is then aggregated by the Data Coordinator, who has been housed in the state office in Columbia for two years. As a check and balance measure, the SCGAL Program compares its case acceptance and turn-back total with numbers of child abuse and neglect cases filed through Court Administration. Any discrepancies are explored.

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

The County Plans were implemented for the first time this past fiscal year. These plans are designed to give county programs a set of attainable goals for a specific period of time. The system of auditing each county every month for a limited number of items creates a rotating performance review and allows a county to focus on correction to its operations on a manageable level.

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 South Carolina Guardian ad Litem Program has a policy and procedures manual for program-specific issues and relies upon the human resources division of the Office of Executive Policy and Programs for human resources policy. Both are available to staff through the intranet, as well as in written manuals. Organizational and employee knowledge is maintained through development of a shared drive at the state office to collect and organize information for the smooth running of the Program. These include business information, county specific expenditures, DSS policies and the GAL Program training manual. New management should have immediate access to all of this preserved material.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

The South Carolina Guardian ad Litem program is a state organization that serves 45 of 46 counties. The state office is responsible for all business matters, including office leases, contracts for attorneys, payment of operational expenses, ordering supplies, and budget matters. The state office also coordinates standardization of child advocacy throughout the state and assists with case resolution and legal research and support. All data management is coordinated through the state office. Grants are written and managed by the state office. The remote offices are organized by judicial circuit. Each circuit, except the 5th Circuit, has a Circuit Coordinator who participates in the supervision of the counties within the circuit. Regional Supervisors supervise Circuit and County Coordinators, who in turn supervise Case Managers and Administrative Specialists.

Positions within the SCGAL Program require flexibility and creativity. As specific talents are recognized among staff members, those gifts are utilized for the whole of the circuit or region. In some instances those talents have resulted in a state-wide position such as the Public Relations position that is funded by the NCASAA grant.

5.2 How do you evaluate and improve your organization's human resources-related process?

The SCGAL Program works closely with the Human Resources division of OEPP to ensure that the Program operates according to accepted human resources policy.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

Through the audit process and day-to-day supervision of staff training needs are identified. These include the needs for staff to be trained as a staff supervisor, volunteer manager and as a case manager. Training is performed in bi-monthly staff meetings and through specific training held as a stand-alone

seminar, such as the supervisors training that OEPP Human Resources held this year. Effectiveness of the continuing education is evaluated by post-training evaluations and by observation of changes in performance. Staff is encouraged to bring to the attention of the state office training opportunities available locally that are of interest or need. Staff is encouraged to attend the Children's Law Center Conference annually and a small number of staff attends the National CASAA Conference each year. Staff members who have attended seminars are encouraged to present at staff meetings to share information and to gain better presentation skills.

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

Better trained staff is able to recruit and produce well-trained volunteers. Staff who understands the mission of the Program and the necessity of multiplying the number of child advocates can reach a wider audience in the public who will be willing to speak up in family court for abused children.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

The EPMS (employee performance management system) of OEPP gives every employee a chance to review annually his or her individual performance. At the review, employees can participate and write comments and make suggestions for objectives they would like included on their next review. The County Plan system within the SCGAL Program evaluates the county program and sets goals for attainment within a specific time frame. All goals set are based on attaining the goals of the Program and action plans are designed to facilitate reaching the goal of serving children who need an advocate in abuse and neglect proceedings.

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

Supervisors make recommendations to employees as to projects that tap into the skills observed in employees and suggest how those skills can be used within the job description. Employees are given time to attend seminars that are specific to particular interests and employees are asked to join task forces and other organizations that hold interest for them and are of interest to the Program's mission.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

Employee retention is measured as part of self-assessment by NCASAA. Employees are part of the county planning process and speak to their own satisfaction during annual reviews. The state office has analyzed and standardized pay rates for each position description. As able and as needed, employees have been given additional hours and upgraded job descriptions. Plans to add an additional Regional Supervisor for assistance to county offices and another Circuit Case Worker are intended to improve the work environment for staff. The move to have time-limited position to FTE status is another attempt to improve employee satisfaction.

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

The SCGAL Program follows the policies of Human Resources that cover health and safety regulations. 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 key processes that produce, create or add value for your customers and your organization? How do you ensure that they are used?

Our key processes are:

a) Independent investigation of the facts in a child abuse or neglect case
b) Production of a written report and recommendations for the family court at each hearing
c) Monitoring of the child(ren)'s progress throughout the pendency of the case
d) Monitoring of the defendants' progress towards reunification throughout the case
e) Supervision of the volunteer advocates as they perform the above duties
f) Recruiting and training the volunteer advocates
g) Compiling the statistical data that indicates the outcomes for children involved in the family court system

The Program ensures that the volunteer functions are produced through pre-service 30-hour training, in-service trainings, and staff supervision of volunteers. We ensure that the staff functions are performed by supervision by other staff, training through the Program, and auditing. The value for the customers is that children have a voice in family court; interaction with stakeholders and children demonstrate the value. The key processes are determined by statutory requirements (20-7-122).

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

We incorporate all of the above via staff meetings, email communications to remote county offices, and through specialized training sessions.

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

Volunteers are trained pre-service and taught the requirements of performing as a volunteer guardian ad litem. The entire 30-hour training is designed to teach the role of the volunteer GAL. Once trained, volunteers are supervised by staff who have been trained in the same manner. All staff is required to take the 30-hour volunteer training and Case Managers and Coordinators are required to take at least one case in order to experience advocating directly. COMET data is required to be submitted to the state Data Coordinator monthly. Daily performance of case work and meeting best practices for volunteer supervision ensure that the key processes are met.

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

Via audits, County Plan production and COMET database monitoring.

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

Circuit Coordinators support and supervise County Coordinators. Regional Supervisors support and supervise Circuit and County Coordinators. State office staff supports all of the above. County and Circuit Coordinators support and supervise Case Managers. All staff supports the volunteers and volunteers have access from their administrative staff up to the state director. The new rotating audit and county plan process are new methods implemented in the past year to improve performance and support better performance.

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

The need for current and projected budget needs is calculated by analyzing the data on case loads and the trends on case load growth in each county. Distribution of staff is monitored and effectiveness of recruitment per staff is figured. Retention of staff is noted in each county and reasons for any trends explored.

Best practices standards of staff to volunteer ratio are included in the analysis. The amount of expenditure for personal services and operating expenses over the last year is calculated based on the amount that would be spent if all positions were filled for an entire year without vacancies. The number of additional hours for now part-time positions and the amount of new positions needed are then discussed with state staff including Regional Supervisors. County by county state staff determines where the needs are critical. The areas where operational expenses may increase or decrease are then discussed.

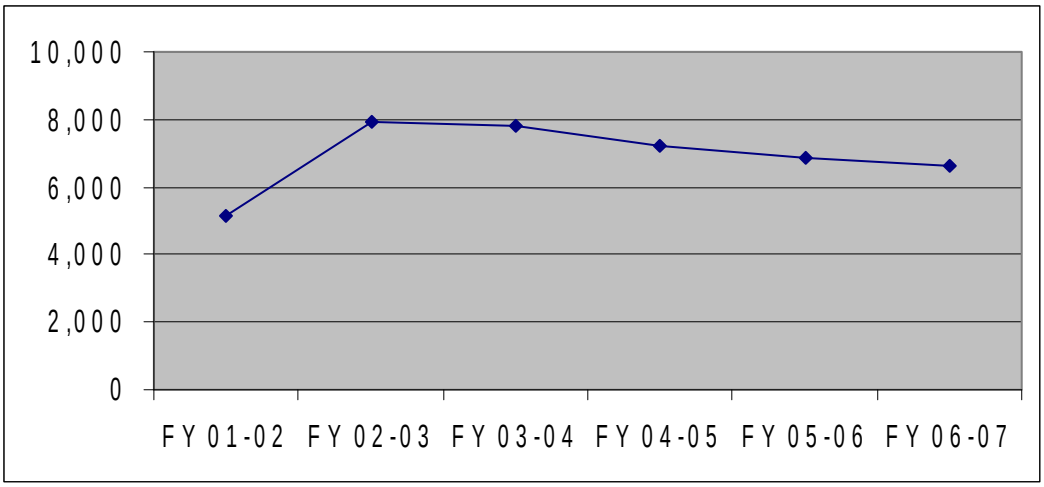
The SCGAL budget is lean. There have been no state or 2% funds earmarked for recruitment, public relations, manual printing, training, or new equipment. All of these needs have been met through grants. Requests for funds have been focused on personnel needs because that is the greatest need in meeting our mission to recruit, train and supervise volunteer advocates for abused and neglected children.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

The chart below shows the number of children served by the South Carolina Guardian ad Litem Program for the past six fiscal years. The number of children we serve is a key measure of mission performance. The South Carolina Guardian ad Litem Program served 50% of the children of South Carolina who needed a guardian ad litem for an abuse or neglect case in 2005-2006. In 2006-2007 that number increased to 52%. This level was not accurately reported before 2005-2006 due to difficulties with obtaining the figures on how many cases were actually filed.

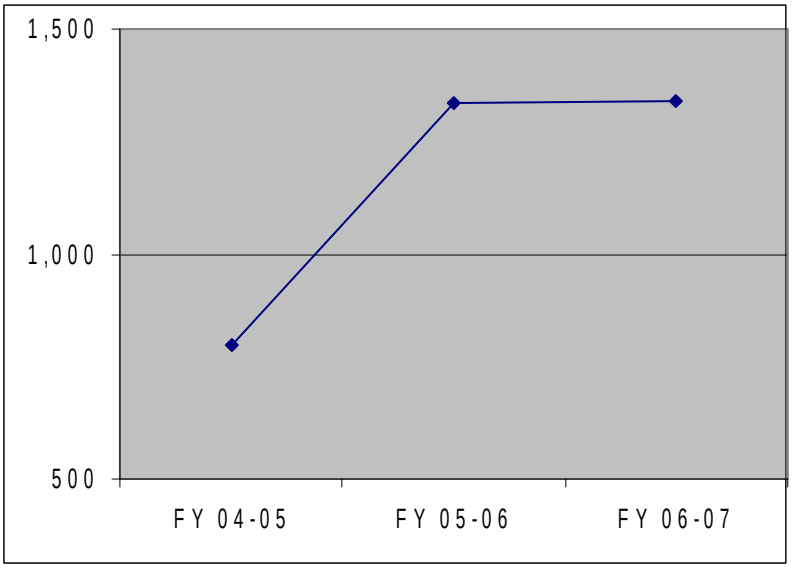
Table III.7.1.1 Children appointed a volunteer Guardian ad Litem



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

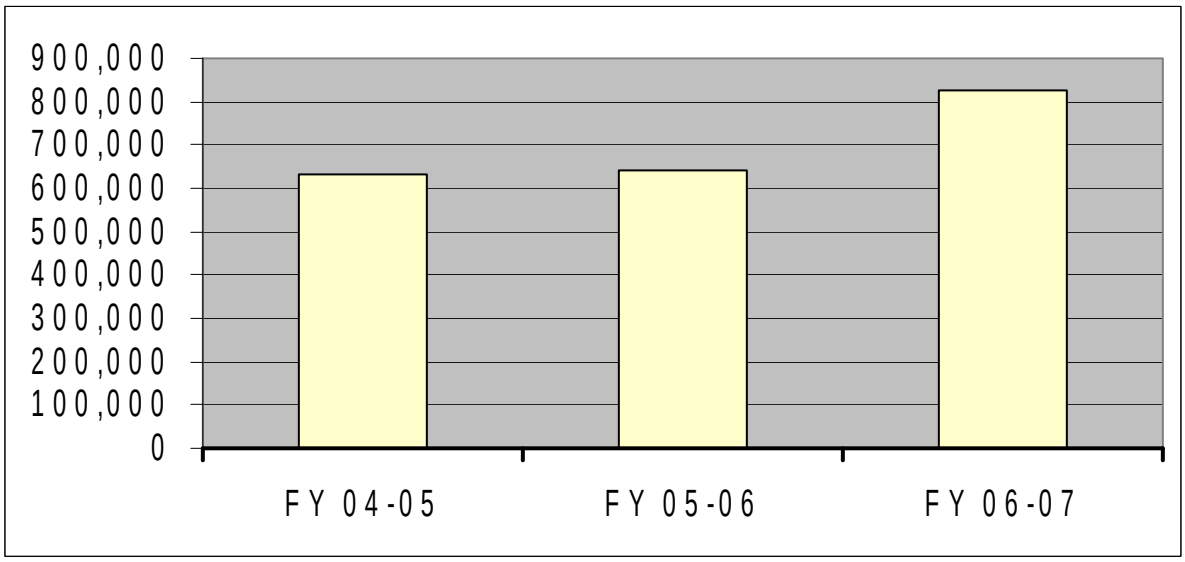
The chart below shows that although, in the years charted, an increasing number of cases have not had a volunteer guardian ad litem available, the trend has leveled off as the SCGAL Program has focused on assigning cases in compliance with best practice standards. These standards are that no volunteer have more than 5 cases and that staff members have no more than 2 cases. Implementing this standard should free staff to meet its mission of recruitment and training of new volunteers. Only 2 more cases were not accepted in 2006-2007 than in 2005-2006.

Table III.7.2.1 Cases not appointed a volunteer Guardian ad Litem



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

Table III.7.3.1 Operating Expenses for 35 Guardian ad Litem Program offices



The operating expenses for FY 04-05 were 634,080. For operating expenses for FY 05-06 were 639,465. Operating expenses for FY 06-07 were 824,669. Average operating expenses for each year per office are as follow:

FY 04-05 18,116
FY 05-06 18,270
FY 06-07 23,561

These figures are for the 34 remote offices and one state office. The expenses included are rent, telephone, utilities, travel, insurance and equipment contracts and attorney compensation. Most of the increase from 2005-2006 to 2006-2007 is the amount awarded the SCGAL Program through an IOLTA (Interest on Lawyers' Trust Accounts) grant of $150,000. All of this money went for attorney contracts in the county offices.

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

The South Carolina Guardian ad Litem Program has several factors that contribute to employee turn-over. The content of our work, child abuse and neglect, is difficult and there are some employees who find the content too disturbing over time. In addition, the Program had gone through budget down turns that meant there were too few individuals trying to accomplish the work. Furthermore, the majority of staff members are not FTE positions, but time-limited. Employees often leave in order to find employment with greater job security.

The following gives the number of employees in the last three fiscal years and the number whom the SCGAL Program retained.

Table III.7.4.1

Fiscal Year	Total Employees	Employees Retained	Retention Percentage
FY 04-05	60	47	78%
FY 05-06	71	56	78%
FY 06-07	77	65	84%

Diversity in the South Carolina Guardian ad Litem Program is improving. The Program currently is 93% female staff. Male staff is only 7% of the SCGAL Program staff. 82% of the staff is Caucasian and 18% is African- American. The trend is to diversify the staff in accordance with the needs of the children we serve, along with always hiring the best available candidate.

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

The South Carolina Guardian ad Litem Program met compliance with the National Court Appointed Special Advocates Association (NCASAA) self-assessment. This covered best practices for case work and child advocacy, human resources, financial practices, staff and volunteer diversity planning, emergency response planning, and strategic planning. The Program does not have a numerical measure for compliance to legal/regulatory compliance. The Program operates under statutory mandates and each appointed volunteer is responsible for meeting the responsibilities of a volunteer guardian ad litem. We have no measure for community support other than recruitment. The SCGAL Program trained and assigned cases to 317 new volunteers in 2006-2007.

Appendix I

OEPP - Ombudsman's Office and Children's Affairs/Children's Case Resolution System

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Ombudsman, Office of Children's Affairs, & Children's Case Resolution System

Section I - Executive Summary

Mission Statement

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

Vision:
To resolve complaints, address constituent inquiries and provide CCRS.

Major Achievements for FY 2006-2007

- Successfully managed the Volunteer Awards and United Way Campaign.
- Worked, with Governor Sanford, to staff 152 Open Door cases and their outcomes.
- Successfully handled 126 Walk-in's
- Completed a South Carolina Voluntary Organizations Active in Disaster (SCVOAD) resource book
- Maintained active membership in the SCVOADs
- Assisted with the development of an on-line donation/volunteer system to be used during natural disasters
- Assisted with the training of all cabinet agencies assigned to ESF-18. ESF-18 coordinates and facilitates the delivery of donated goods and volunteer services as support relief efforts in disaster areas.
- Trained 122 OEPP staff members for the Governor's Call Center
- Developed a plan and schedule for the Governor's Call Center to ensure week day and weekend coverage
- CCRS has one active case. This number decreases yearly, demonstrating that CCRS encourages collaboration between state agencies related to children's services.

Key Strategic Goals for Present and Future Years

1. Resolve concerns of constituents who contact the Governor's office
2. Maintain current information regarding services available through local, state and federal agencies; non profit and for profit organizations.
3. ESF-18 will organize the coordinate donated goods and volunteer services in order to provide easy delivery during the time of a disaster.

Opportunities and Barriers

Barriers:

- The inability to predict the volume of calls and correspondence received at any given time
- The influx of complaints/concerns requiring resolution beyond the Governor's scope of influence or jurisdiction.
- During FY 06-07, the Office experienced the loss of 2 trained caseworkers, which helps justify why all recorded calls were not responded to within 24 hours 100% of the time. These positions remained

unfilled until the end of FY 06-07, which caused experienced, trained staff to handle an increase in caseload.

- Due to the high visibility of this office, other opportunities for advancement frequently become available.
- Future Medicaid cuts will increase the requests for CCRS monies to assist with placement payments in 2007.
- ESF-18 has made great strides in the state's disaster plan but in turn has increased staff workload

Opportunities:

- The Open Door policy instituted by Governor Sanford allows caseworkers and the Governor to meet with constituents face to face.
- This office has become well known as a trouble shooting entity across the state
- Governor's Office has devoted staff to ESF-18 and the other 13 OEPP offices have participated
- Completion of the National Incident Management System (NIMS) 100, 200 and 700 by staff members, which is a Federal Emergency Management Administration (FEMA) requirement
- Staff attended WebEOC and Hurricane training at the Emergency Management Division (EMD)
- Staff participated in the State Full Scale Exercise at the EMD as well as the Governor's Call Center

How the accountability report is used to improve organizational performance

This report is used to assess performance expectations and identify areas needing improvement.

Section II - Organization Profile

Table II.1.1 –Ombudsman, Children's Affairs & CCRS Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Ombudsman, Children's Affairs, CCRS*	• Listen to individuals who contact Governor's office • handles written and telephone inquiries • meets with constituents when necessary	Residents, non-residents, City, County, State, Federal Government offices, Non-profit and for-profit organizations	Governor, OEPP Offices, City, County, State, Federal Government offices, Non-profit and for-profit organizations
	• ESF- 18 facilitates the delivery of volunteer services to support relief efforts in disaster areas	SC Residents	Governor, OEPP Offices, EMD, FEMA, and SCVOAD's

*South Carolina residents only.

5. Operation locations

The Ombudsman, Office of Children's Affairs, and CCRS are located in the Governor's office on the First floor of the Wade Hampton Building on the State House Office Complex.

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

___1___ Classified ___4___ Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

Section 20-7-5210 of the South Carolina code of laws created the Children's Case Resolution System, referred to in this article as the System, which is a process of reviewing cases on behalf of children for whom the appropriate public agencies collectively have not provided the necessary services. The System must be housed in and staffed by the Governor's Office.

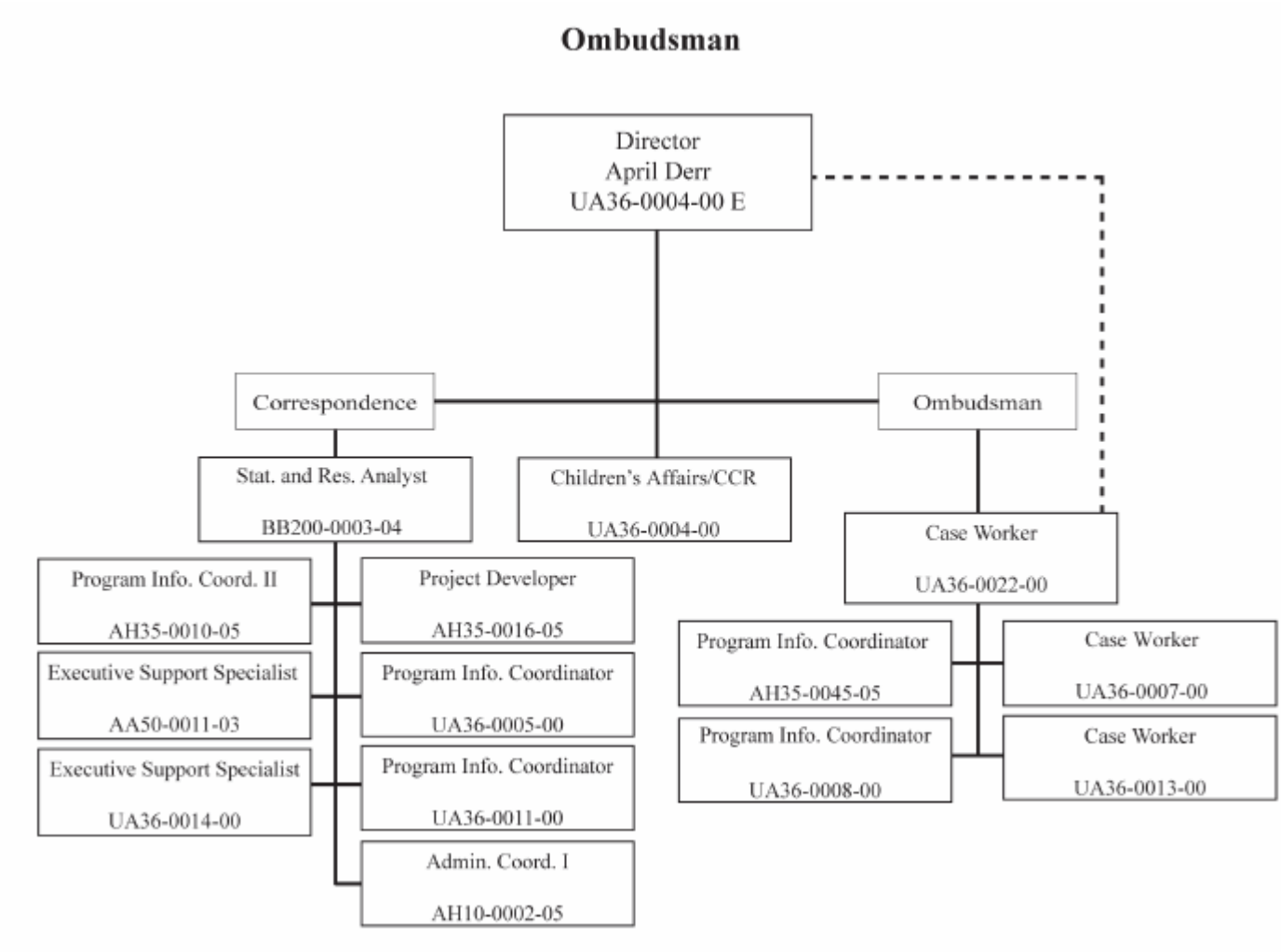
8. Key strategic challenges

- Continuously collect up to date information about agency and non profit programs/organizations and services available since they are always changing.
- Staff Ombudsman office with appropriate number of trained caseworkers
- Inability to intervene with decisions made in the judicial system
- Decreased cooperation among state agencies regarding cost share for clients. Recent Medicaid cuts are likely to exacerbate this tension.
- Acquire additional services and cooperation at the EMD county level
- Staffing ESF-18 and Governor's call centers with trained volunteers

9. Performance improvement systems

- Bi-weekly, quarterly and annual reporting system that tracks casework progress through categories such as number of letters and telephone inquiries received and total number of mail unanswered.
- EPMS reports are used to track individual progress and are also reviewed during annual employee performance evaluations. Reports are useful for supervisory staff to manage and balance caseloads among staff members.
- Open communication during regular staff meetings
- Tracking trends in constituent inquiries
- Cross training caseworkers
- Working collaboratively with state and federal legislator's offices
- Full Scale EMD exercise and training of the Governor's Call center volunteers

10. Organizational chart



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 159,300	$ 159,300	$ 137,835	$ 137,835	$ 160,188	$ 160,188
Other Operating	$ 10,613	$ 10,613	$ 9,650	$ 9,650	$ 15,850	$ 15,850
Special Items	$ 0	$ 0				
Permanent Improvements						
Case Services	$ 0	$ 0				
Distributions to Subdivisions	$ 0	$ 0	$ 44,746	$ 44,746	$ 35,242	$ 35,242
Fringe Benefits	$ 52,992	$ 52,992				
Non-recurring						
Total	**$ 222,905**	**$ 222,905**	**$ 192,230**	**$ 192,230**	**$ 211,280**	**$ 211,280**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 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	274,064	State	192,230	
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	274,064	Total	192,230	
		% of budget:	0%	% of budget:	0%	

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 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	0	State	51,302	
		Federal	0	Federal	0	
		Other	0	Other	0	
		Total	0	Total	51,302	
		% of budget:	0%	% of budget:	0%	

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

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

a. Short and long term direction

Staff receives direction through monthly meetings (or as needed), direct and open communication regarding each case as handled.

b. Performance expectations

Time lines are set by Constituent Services senior leadership. Bi-weekly and quarterly reports are used to ensure that performance is meeting these expectations.

c. Organizational values

Staff is 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 values yearly.

d. Empowerment and innovation

Bi-weekly staff meetings are held to further promote open communication among staff members. Constituent Services staff strives to promote new lines of communication between our office and other state agencies.

e. Organizational and employee learning

Staff members share updated information regarding key stakeholders and partners during bi-weekly staff meetings

f. Ethical behavior

Senior leadership sets the standard for ethical behavior, in compliance with that set forth by the State Ethics Commission and the Office of Human resources. Ethical behavior is routinely discussed and expected by senior leadership.

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

- Encourage positive morale among staff through open communication
- Complete Employee Performance Management System (EPMS) evaluations yearly
- Complete Bi-weekly, quarterly and annual performance reports

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

Our office addresses impact on the public mainly through constituent and agency feedback, Daily Press Briefings and News Releases received from the Governor's staff, and following legislation

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

The Office of Constituent Services and Office of Children's Affairs/CCRS submit quarterly Minority Business Expenditures reports.

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

Senior leadership regularly evaluates the percentage of written inquiries responded to within 5 days or less, the percentage of telephone inquiries responded to within 24 hours, and the percentage of agency referrals which have not received a response within 30 days. The number of ESF-18 and Governor's Call Center trainings provided and employees trained is also examined.

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

Key performance values are incorporated as performance measures for the EPMS evaluation. EPMS values demonstrate where progress is needed by staff and senior leadership. Staff feedback is necessary to share resources and techniques useful to efficiently perform constituent services. Feedback also facilitates cross training among staff. Bi-weekly meetings allow staff to share thoughts, concerns and information. Bi-weekly performance reports enable senior leadership to balance caseloads.

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

Because we are a small office, working closely together, mentoring is a daily activity.

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

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

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

Leadership and employees participate in United State Employee Campaign, Co-Occurring State Incentive Grant (COSIG) with the Department of Mental Health, Offering Assistance, Stability and Intensive Support (OASIS) for Families, Program Oversight Committee (POC), SCVOAD's, Governor's Volunteer Awards, Citizenship Awards, Carol Lighting Ceremony, and the Governor's Family Fitness Challenge.

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

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

- Our office utilizes the Employee Performance Management System evaluation period and the planning stage to address each individual staff member's strengths, weaknesses and progress. The bi-weekly and quarterly reports are also assessed during the review period to evaluate progress and productivity and develop a plan for the upcoming Planning Stage.
- The supervisor meets regularly with the Director of Constituent Services and individual employees to determine and discuss progress and future planning for the office.
- Reports track progress and caseloads.

Chart III.2.2 Strategic Planning Chart for Ombudsman, Children's Affairs, & Children's Case Resolution System

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Resolve concerns of constituents who contact the Governor's office	1.1 Listen to individuals who contact Governor's office 1.2 Respond to written and verbal inquiries 1.3 Arbitrate through the CCRS only those cases where all efforts to resolve the case have been exhausted	• Respond to written inquiries within 5 days or less • Respond to telephone inquires within 24 hours • Track agency referral and response time. • Facilitate, promote and improve communication and coordination of services between constituents and state agencies and among state agencies to prevent the need for arbitration through CCRS	See Table 7.1.1 See Table 7.1.2
2. Maintain current information regarding services available through local, state and federal agencies; non profit and for profit organizations.	2.1 Continuously research and share information pertaining to goods, services and programs available to constituents 2.2 Continuously update information regarding services available through ESF-18 to SC citizens during a disaster.	• Share relevant, updated information during Bi-weekly staff meetings and cross train all case workers. • Information regarding available services is reviewed and updated quarterly. Any changes are relayed to applicable agencies and organizations. • Train OEPP staff regarding changes in any available information volunteer services to support relief efforts in disaster areas	

2.2 How do you develop and track action plans that address your key strategic objectives?

As mentioned in 2.1 objectives and strategic plans are tracked through annual EMPS reports, Bi-weekly Performance reports, Annual reports, and supervisory meetings with the Director of Constituent Services and individual employees

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

Through Bi-weekly, quarterly and annual reports are reviewed and discussed at monthly meetings. Staff meetings help staff provide consistent, efficient information and referral.

2.4 How do you measure progress on your action plans?

- Achieved resolution to constituent's inquiry
- Number of constituent contacts and agency referrals received.
- Bi-weekly, quarterly, annual reports
- Feedback from full scale EMD and governor's call center training and exercise was provided by survey administered to OEPP staff.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Collecting up to date information about agency and non profit programs/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. Continuous training for OEPP staff participating in ESF-18 encourages cooperation with the EMD.

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

The strategic plan is available at the OEPP website http://www.oepp.sc.gov/, by selecting the Ombudsman and/or Children's Affairs link.

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

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

Customer/Stakeholder	Requirements
Residents of South Carolina , Government offices, non-profit organizations, for profit organizations, and non residents experiencing difficulty with SC government agencies.	Customers are those that seek assistance or information from the Governor's office.

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

- Through constant communication among staff, constituents, the Governor, State House staff, OEPP Offices and other state agencies. The Governor's Open Door Policy also encourages face to face interaction with constituents.
- The OCA/CCRS coordinator is a member of the Program Oversight Committee (POC). The POC is made up of state agency representatives. They work to address needs of a special population of children who are in need of specialized services and to ensure consistent service standards. The committee also meets with statewide care providers on a quarterly basis to provide information, listen to providers concerns and attempt to find resolution to these concerns.
- The OCA/CCRS coordinator is a member of the Offering Assistance, Stability and Intensive Support for families (OASIS) committee. The goal of OASIS is to increase the flow and access to care and/or services for children, adolescents and their families who deal with mental health and substance abuse challenges

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

Continuously update files so information is readily available for customers in need of assistance or referral. Staff remains receptive to periodic program changes and updates from state agencies regarding services they provide and other programs.

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

The Office of Constituent Services and Children's Affairs/CCRS continuously measures customer satisfaction or dissatisfaction through constituent and state agency feedback. Feedback is continuously relayed to Ombudsman caseworkers.

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

- Work with state agencies to provide the most efficient problem solving referrals. Provide up-to-date knowledge and information about state, local and non-profit programs to constituents.
- The OCA/CCRS coordinator's involvement in POC and the OASIS Committee encourages positive relationships by building interagency collaboration
- The Governor's Open Door After Four Program increases collaboration between the Governor and constituents.

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

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

Based on the key goals outlined in Section 2.2, this office is able to track progress via the bi-weekly and quarterly reports based on the number of written and telephone inquiries, agency referrals, number of unanswered mail, number of letters answered. Staff performance is measure annually through EMPS and unclassified evaluations. The financial operations are tracked through quarterly Minority Business Expense Reports. CCRS operations, processes, and systems are mandated by Section 20-7-5210 of the South Carolina code of laws.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

As discussed in 2.3, open communication regarding outcome measures allows for effective decision making among staff.

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

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

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

Data is computed Filemaker Pro. Reports are sent to staff members so that they may track their individual caseload and progress. The office also works collaboratively with other ombudsman offices to determine the most efficient methods for handling casework.

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

The Office staff works closely with the Office of Correspondence to ensure that data entered into Filemaker Pro is accurate. Staff is expected to maintain chronological records of cases so that they may be easily accessed. Bi-weekly reports ensure that mail is answered by phone or written correspondence.

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

Data trends addressed in Section I 1.3 show which barriers are most relevant. Staff, state agencies, OEPP offices, and constituent feedback are frequently communicated through email and telephone correspondence and bi-weekly meetings. Suggestions and changes to casework procedure are incorporated as necessary.

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

The accumulated employee knowledge is accomplished through cross-training and staff meetings.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

- CS staff is very dependent on the accuracy and efficiency of Filemaker Pro and manual correspondence filing systems in place.
- Any suggestions for organizing files and improving the overall flow of CS cases is 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 evaluate and improve your organization's human resources-related process?

Personnel Office – please answer for all of OEPP

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

- Cross training of different duties performed in the Office of Constituent Services/ Children's Affairs is encouraged among staff members. Employees are also encouraged to identify and express when they have an area of interest.
- Open communication is promoted so specific skills and areas of interest can be identified, in order to relay newly acquired information, and identify areas lacking information/training.
- Staff rotate participation in various organizational meetings to gain a deeper understanding of the extent to which OEPP and the Governor's Office are involved in the community

5.4 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.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

- EPMS evaluations identify and support areas of high performance as well as areas that can be improved.
- Based on the information acquired through EMPS evaulations, goals for the upcoming Planning Stage are identified and agreed upon. This information also allows productivity and overall performance based on management's expectations can be reviewed and adjusted when necessary.

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

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

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

- Annual Employee Performance Review and Planning Stage agreement.
- Staff meetings promote open communication.
- Open communication is a part of EPMS which allows employees to express their likes and dislikes. This helps determine priorities for improvement
- Priorities for improvement are also determined by reviewing the performance expectations and bi-weekly/quarterly reports.
- Turnover with CS/Children's Affairs occur because opportunities provided by this position are seized. No grievances have been filed.

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

- Strive to keep work areas clean and sanitary.
- Follow all emergency evacuation procedures.
- Maintain healthy volume levels when speaking on the phone with constituents.
- Report suspicious or threatening constituents to South Carolina Law Enforcement Division (SLED) Detail.
- Hold one on one meetings with constituents in an open room where other co-workers are easily accessible.
- Volunteer training and coordination of resources related to ESF-18 and the Governor's Call Center secures the readiness of resources necessary during the time of disaster. This preparation eliminates the need to gather last minute supplies and/or volunteers once a disaster has occurred; thus increasing public safety and decreasing recovery time.

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

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

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

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

- As mentioned earlier, cross training is important to maintain efficiency.
- New technology is often added and staff is trained accordingly.
- Outgoing correspondence is e-mailed whenever possible; limiting the cost of postage.
- Because of the open lines of communication in this office, changes can be made easily to the referral system when necessary through staff meeting, memo and email contact.

6.3 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.

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

- Bi-weekly, annual and quarterly reporting.
- Continuously research and share current information about services available to constituents
- Customer feedback from the Director of Constituent Services as well as customer feedback.

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

- Cases handled by written referral are reviewed by Constituent Services staff. Thus, input from colleagues is provided for all correspondence.
- All processes of our office are intermittently reviewed and improvements/adjustments are made as necessary.
- Customer feedback is discussed openly among senior leadership and caseworkers.

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

Based on the volume of calls, written inquiries, and outside projects, this office looked at staff responsibility to determine that a part time employee would be upgraded to a full time employee (FTE).

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

CS/CCRS/Children's Affairs have several goals (See Chart 2.2) related to organizational effectiveness. These are:

- Respond to written inquiries
- Respond to verbal inquiries
- Track agency referral and response time

Table 7.1.1 Constituent Services and Children's Affairs Case Work.

Performance Measure	FY 03-04	FY 04-05	FY 05-06	FY 06-07
Written inquiries received	2175	6338	5888	5569
Percentage answered within 5 days or less	67%	83%	89%	99%
Phone inquiries received	105	4740	6093	8632
Percentage answered within 24 or less	90%	98%	97%	98%
Written agency referrals sent	543	1384	628	387
Percent responded to and closed	0%	55%	62%	61%

Table 7.1.2 CCRS Cases

	*FY 03-04	FY 04-05	FY 05-06	FY 06-07
Cases receiving CCRS funds	4	2	1	1
Cases monitored by CCRS - no pay	2	2	2	1

*Due to change in CCRS Administrator between FY 03-04 and FY 04-05, these are estimated numbers.

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

Our measure of customer satisfaction comes directly from customer feedback.

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

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

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

There are no performance levels and trends for key measures of Human resources in the office. The Annual Employee Performance Review process, along with systematic reporting, staff meetings and direct communication among staff members and supervisors are used to determine and maintain all of these factors.

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

There are not any regulatory reports required for Constituent Services or CCRS.

Appendix J

OEPP – Office of Small and Minority Business Assistance

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
Office of Small and Minority Business Assistance

Section I - Executive Summary

Mission Statement

The mission of the Governor's Office of Small and Minority Business Assistance (OSMBA) is to promote the interest of small and minority businesses as a part of the free enterprise system; thereby, enhancing economic growth and development in South Carolina.

Vision

OSMBA is the state's leading advocate to ensure that an equitable portion of State procurement contracts be awarded to small and minority contractors.

Major Achievements for FY 2006-2007

- During FY 2006-2007, OSMBA processed 227 applications for certification eligibility.
- The statewide small and minority business forum and trade fair had a record attendance of 500 procurement officials and business owners. 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.
- In conjunction with the SC Association of Governmental Purchasing Officials, OSMBA planned and implemented the first Minority Networking event during the association's annual conference.
- In an effort by the OSMBA staff to improve accuracy of information, more than 200 dated business listings of expired certifications were removed from the online directory.
- OSMBA staff has received FOIA, Ethics and basic procurement training through the Materials Management Office.
- During its outreach efforts, OSMBA has provided to more than 3,000 current and potential business owners throughout South Carolina information and training related to available services, contracting opportunities and procurement procedures.

Key Strategic Goals for Present and Future Years

1. Administer the State of South Carolina's minority certification program while supporting state agencies in achieving their missions and goals. Support agencies in developing and achieving MBE goals.

2. Act as an advocate for the State's Minority Business Enterprise (MBE) Program and promote the interests of South Carolina's small and minority businesses.

3. Increase collaboration of efforts with state, local agencies and community partners to improve and increase training, networking and contracting opportunities of small and minority businesses.

Opportunities and Barriers

Opportunities:

1. OSMBA has coordinated outreach efforts with agencies, corporations and business organizations to help defray outreach effort's expenses.

2. SC.Gov and South Carolina Enterprise Information System (SCEIS) offices are collaborating on the development of an online reporting system for agencies and upgrade of the electronic database of certified minority businesses. The collaborative online reporting system will result in more accurate and consistent reporting data.

3. OSMBA has initiated the development of a Minority Business Enterprise (MBE) liaison training program for agency procurement officials and directors to increase the effectiveness and efficiency of agency reports, their understanding, implementation and support of the MBE program.

Barriers:

Perceptions and/or involvement of the public
There has been a lack of uniformity and consistency in the data collected from the agency reports, mostly because OSMBA has never initiated a training program for agency MBE liaisons preparing agency reports.

Lack of understanding of the MBE program, certification benefits and OSMBA's roles results in the minimal coordination of small business information by agencies and business organizations. The result is a decrease in the resource assistance available to all businesses and possible duplication of publications and guides.

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

Table II.1.1 –(Office name) Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
Office of Small and Minority Business Assistance	Administers South Carolina's minority certification program. OSMBA also supports state agency's missions and goals by providing assistance in developing policies and procedures to facilitate awarding contracts to small and minority firms. Activities are focused on helping small and minority businesses to: • Maximize contracting opportunities • Develop organizational alliances to provide technical assistance • Develop and sponsor procurement and management training • Encourage participation in the procurement process • Serve as a point of contact for information.	• Residents of South Carolina • State at South Carolina • Small, minority and women-owned businesses • Government agencies • Procurement officials • Business and contracting communities	• **Government agencies** • **Procurement officials** • **Business and contracting communities**

5. Operation locations

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

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

__2___ Classified ___1___ Unclassified _____Contract

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

7. The regulatory environment under which your organization operates

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

8. Key strategic challenges

- Insufficient resources to meet the needs of stakeholders.
- Need for additional staff to meet the increasing demand and scope of mandated services.
- Limited budget allocations for delivery of services and compliance to statutory responsibilities.
- Continual need to provide outreach services and training for procurement officials, contractors and business owners.
- Minimal cooperation and coordination among stakeholders challenges the service provided by OSMBA to its customers.
- The ability to maintain consistency in MBE reporting format and information submitted by agencies.
- Maintaining a culture of cooperation amongst stakeholders.

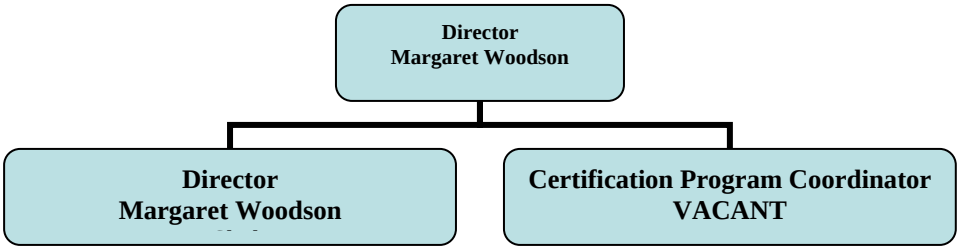
9. Performance improvement systems

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.

10. Organizational chart

Office of Small and Minority Business Assistance



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 91,447	$ 91,447	$ 104,339	$ 104,339	$ 83,647	$ 83,647
Other Operating	$ 25,176	$ 25,176	$ 44,445	$ 33,295	$ 18,797	$ 18,797
Special Items	$ 0	$	$ 0	$	$ 0	$
Permanent Improvements	$ 0	$	$ 0	$	$ 0	$
Case Services	$ 0	$	$ 0	$	$ 0	$
Distributions to Subdivisions	$ 0	$	$ 0	$	$ 0	$
Fringe Benefits	$ 22,277	$ 22,277	$ 26,236	$ 26,236	$ 18,403	$ 18,403
Non-recurring	$	$	$	$	$	$
Total	**$ 138,901**	**$ 138,901**	**$ 175,020**	**$ 163,871**	**$ 120,847**	**$ 120,847**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 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	138,901	State	163,871	See Section III, category 7 Area 7.3
		Federal		Federal		
		Other		Other	11,150	
		Total	138,901	Total	175,020	
		% of budget:	0	% of budget:	0	

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

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

An open-door policy, informal discussions and training facilitates communication and brainstorming within OSMBA. Direction and organizational priorities, performance expectations, and organizational values are determined by enabling legislation, and the goals, strategic plans and values of the Governor.

OSMBA operations include OEPP's organizational values. Key values identified as important to the organization are integrity, accountability, customer service, innovation, leadership and efficiency. The Employee Performance Evaluation process incorporates individual employee performance expectations relating to these values. Guidelines for ethical behavior are listed in the Employee Handbook that is given to all new OEPP employees. In addition, OSMBA staff has attended Ethics and Freedom of Information Act (FOIA) training provided by the Materials Management Office.

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 provides a primary direction and focus on customer services. Communication with the Governor's Directors of Administration and Constituent Services ensures that key customer needs and concerns are identified and quickly addressed.

Specific methods used to promote focus on customers and stakeholders include:

- Administering various satisfaction surveys and offering community training sessions.
- Increasing customer focus and involvement through the streamlining of documents, and outreach efforts.
- Meeting with stakeholders and partners to discuss issues, concerns, regulations, compliance, etc.
- Conducting customer-oriented training.
- Establishing workflow processes focused on meeting deadlines and quick responses to issues.
- Establishing regular communication and a review of performance expectations.

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

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

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

OSMBA certification review board assesses applications to determine compliance with guidelines and statutory requirements. Utilization of procurement, legal, FOIA and Ethics training classes offered by the Materials Management Office ensure understanding of program and legal responsibilities.

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

OSMBA director reviews quarterly and annually: the number of certification applications received and processed; the number of certifications awarded to MBE firms; the types of businesses that apply for certifications; the number of OSMBA outreach and training activities; the number of attendees of outreach programs; the number of reports received from state agencies; the number of agencies submitting annual MBE goals and their compliance; the actual expenditures by state agencies with MBE firms; the number of

MBE firms state agencies contract with during each fiscal year; and the comparison of actual expenditures with MBE firms to other fiscal years.

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

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

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

Some of the methods employed to facilitate succession and future development of leaders, include mentoring, providing training opportunities, cross-training and encouragement of creativity.

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

Performance improvement priorities are set and communicated through OEPP's mission, through legislative mandate, and through meetings between the Governor and senior staff. Those meetings communicate customer enhancement opportunities to senior leaders for action. Specific methods used include:

- Fostering a work environment that allows for the accomplishment of objectives and innovations. It provides staff with direct control over their own work processes.
- Encouraging and being receptive to free and open communication between staff, customers and other stakeholders.
- Conducting reviews of established goals, strategies, action plans, evaluation measures and related outcomes. If modifications are necessary, frank and open discussion by all is encouraged, and changes are made, allowing for new processes or innovative ideas to be incorporated.
- Participating in committees (internal and external) that support OSMBA and the Governor's goals.

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

Leadership is demonstrated through personal support of community efforts and organizations. Some examples of community leadership include serving as: board member of the Midland Carolinas Minority Supplier Development Councils; committee chair for the SC Association of Governmental Purchasing Officials; member of the National Institute of Governmental Purchasing Officials; co-chair of Procurement Procedures Committee. In addition to sponsoring several minority trade fairs and networking events, OSMBA staff participates in a variety of advocacy activities sponsored by civic and professional organizations.

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

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

Senior staff uses a strategic planning process to ensure that individual office goals are met. Plans were developed using a variety of information including enabling legislation, key legislative and customer service issues, and feedback from staff. Participation and cross-functional coordination in the development of the strategic plans help ensure organizational alignment, necessary financial and human resource allocations, and minimal risk to OSMBA's customers. As action plans are developed, coordination with partners or stakeholders is assured before finishing action plans. For example, the Procurement Procedures Committee has met to discuss areas of improvement in services offered to stakeholders by OSMBA.

Chart III OSMBA Action Plan

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 05-06 Key Agency Action Plan/Initiative(s)	Key Cross References for Performance Measures
OSMBA Administer the State of South Carolina's minority business enterprise (MBE) program.	Provide leadership. Process, manage and analyze information.	• Maintain regulatory and legal compliance and ethical business practices. • On a quarterly basis, compile and maintain data of MBE expenditures and procurement activities by agencies for reporting purposes.	See Section III 7.1
Support agencies in developing and achieving MBE goals.	Provide leadership and enhance customer satisfaction.	• Maintain regulatory and legal compliance, and ethical business practices. • Determine and meet the needs and expectations of partners and stakeholders • Provide accurate information to agencies about certified MBE's, for contracting opportunities • Provide agency training on best practices for implementation of their activities and tracking performance.	See Section III 7.1
Act as an advocate for SC's small and minority businesses	Provide leadership	• Ensure that small and minority businesses in South Carolina have the opportunity to fully participate in the overall procurement process of the State. • Offer training and networking opportunities throughout SC to encourage and promote contracting with MBE's. •	See Section III 7.1
Promote the MBE program, its stakeholders and increase collaboration of efforts with community partners	Provide leadership and customer satisfaction	Focus on facilitating agencies awarding more contracts and subcontracts to minority business firms in order to enhance minority capital ownership and overall state economic development, and to reduce dependency.	See Section III 7.1

2.2 How do you develop and track action plans that address your key strategic objectives?

Senior leader reviews plan, goals, and objectives with the Director of Administration. Action plans are tracked by using statistics and reports of OSMBA and agencies activities.

2.3 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.

2.4 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: 1) 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; 2) Increasing each year the number of new qualified applications received for certification; 3) Increase in the number of attendees of OSMBA-sponsored training and networking events for business owners and agency procurement officials; 4) Increase in the number of procurements issued to certified minority businesses; 5) Increase in the accuracy of data received from agencies; and 6) Obtaining 100% compliance of state agencies submitting their reports and meeting their 10% goal of expenditures with certified businesses.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Staff training will ensure proper knowledge and intent of laws affecting the program, expected conduct of staff and services available to meet the customer's needs. Challenges affecting the successful obtainment of strategic objectives are identified through the development of the organizational profile.

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

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.

OSMBA's strategic plan can be found on its website, www.oepp.sc.gov/osmba.

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

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

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

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

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

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

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

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

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

Primary methods for obtaining data on customer satisfaction include direct feedback received from the Governor, ECOS, legislators, agency directors and managers, the Ombudsman's Office and the Correspondence Office. Surveys are utilized to measure customer satisfaction/dissatisfaction. OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. Other methods include meetings with customers, advisory councils, written and verbal communication.

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

Strong customer communication is critical to building positive relationships. Staff listens to and respects the opinions and suggestions of each customer and stakeholder. OSMBA is a proud advocate for small and minority businesses inclusion in the procurement process, not only with government agencies, but with corporations. Networking events provide an opportunity for procurement officials (corporate and government) and business owners to meet one-on-one and discuss potential procurement opportunities. An award is issued to agencies as an acknowledgement of their outstanding award of contracts to certified businesses.

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

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 use data/information analysis to provide effective support for decision making throughout your organization?

OSMBA reviews and discusses information provided for improvement to determine the merit, benefits, need for additional resources or program restructuring required, its impact on program goals and objectives of OSMBA and major stakeholders. When appropriate, input and approval is obtained from the Director of Administration prior to implementing any recommended program improvements.

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

Key measures are indicated below. Reports are generated tracking the data as they are provided. Information is updated and reviewed frequently during a quarter by staff and OSMBA director.

OSMBA	# of certifications and recertifications issued	Annually
	# of qualified certification applicants	Annually
	# of attendees for OSMBA sponsored events & training	Annually
	# of agencies submitting quarterly reports	Quarterly and Annually
	# of agencies submitting annual MBE Plan and Goal	Annually
	# of agencies meeting 10% MBE Goal	Annually
	$ spent with certified minority businesses	Annually
	Increase in $ spent with MBEs as compared to previous FY	Annually

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

Most of the information cited in 4.3 is mandated for OSMBA to collect. The information provided in those reports measures the effectiveness of OSMBA efforts and also identify why OSMBA may not be reaching some objectives. For example, by collecting data on each agency's MBE expenditures and goals, one can quickly identify which agencies are not in compliance, and provide an explanation of why the State may not reach its 10% collective goal of expenditures with certified minority businesses.

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 has 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, its impact on program goals and objectives of OSMBA and major stakeholders.

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

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

OSMBA director delegates assigned work according to staff areas of responsibility, with a focus on objectives, strategies and action plans. Staff is provided an opportunity to utilize creativity and self-initiative.

5.2 How do you evaluate and improve your organization's human resources-related process?

All program areas within OEPP utilize the Employee Performance Management System and adhere to the policies established by the Human Resource Office. Program director has an opportunity to share any concerns staff may identify to the HR Director for evaluation and determination of any policy changes.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

OSMBA is committed to develop programs that foster individual growth for employees, identifying staff for advancement, and assisting in creating a diverse workplace. OSMBA is committed to promoting from within. Employees are alerted of job openings within the office, and emails and job postings are sent out when there are vacancies in other departments within OEPP.

Training needs are assessed through individual interactions between director and employees and detailed in the employee's planning stage. Because the Office of Human Resources provides human resource services for the Governor's Office in partnership with the Budget and Control Board (B&CB), OSMBA shares in the wide variety of education, training and development opportunities offered by the B&CB and benefits from B&CB expertise in personnel issues. In addition, staff participates in relevant training that will sharpen the skills of OSMBA staff and maintain knowledge of current developments in areas related to the operations of

the program. Some of the types of training staff have attended include ethics training by the Ethics Commission, FOIA, legal and procurement training offered by the B&CB and the state purchasing association, and disadvantaged enterprise program training offered by SC Department of Transportation and the Federal Highway Administration. Information obtained is shared. This information directly impacted office activities by enabling them to be more efficient in the evaluation of applicants for certification.

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

Certification related training directly impacts staff activities by enabling them to have a better understanding of the MBE program, its processes, increase efficiency in the evaluation of applicants for certification, and improve customer service with stakeholders by effectively communicating guidelines and providing accurate information in response to customer inquiries, while protecting the information submitted by the applicants.

Procurement and business resource related training allows staff to efficiently respond to inquiries from customers on how to conduct business with the state and identify the appropriate agency (state, local or federal) they may be seeking for assistance.

Additional training programs are selected to increase the efficiency of services related to the submittal and processing of MBE reports submitted to OSMBA for processing.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

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

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

With our open-door policy, staff is encouraged to provide suggestions for improving systems, and several have been implemented. Staff is allowed to attend relevant training and represent the program during community outreach efforts. Variable work schedules help employees balance personal and professional lives.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

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 maintain a safe, secure and healthy work 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 key processes that produce, create or add value for your customers and your organization? How do you ensure that they are used?

Key processes are selected by referring to OSMBA's strategic plan, mission and objectives to determine whether or not it is in compliance with them. OSMBA communicates objectives, define measures, and inspect progress and achievement of objectives through teamwork of staff. New and revised databases and electronic tracking systems monitor the intake and dispersal of program service processes, allowing for greater coordination and efficiency in the delivery of services and tracking of quarterly and annual reports. OSMBA and OEPP reviews annually the effectiveness of program activities and compliance with objectives, strategic plan, and Office mission.

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

Staff crucial to particular projects are a part of the process of developing goals and action plans for those projects and are included when improvement in processes and delivery are needed.

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

Focus on day-to-day operations is maintained on our core goals and objectives to ensure performance requirements are met.

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

Staff continuously reevaluates and updates processes to improve services through meetings with key partners. Before initiating new activities, OSMBA evaluates whether or not it is consistent with its strategic plan, mission and objectives.

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

OSMBA's Strategic Plan identifies key support processes for all office through the corresponding action items and performance measures inputted. Staff crucial to particular projects is part of the process of developing goals and action plans for those projects and are part of the process of developing goals and action plans for those projects and are included when changes are necessary. Staff regularly attends relevant training on program related issues affecting these projects.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

Timely submittal of annual MBE reports - For fiscal years prior to FY 06/07, only 50% of agencies submitted annual MBE goals of 10% or more.
As a result of an amendment to the SC Consolidated Procurement Code, approximately 90% of the agencies have submitted annual goals for FY 06/07.

Measures	FY 01-02	FY 02-03	FY 03-04	FY 04-05	FY 06-07
#Certifications	129	223	184	100	100
#Recertifications	70	59	29	99	
# Minority Business Events, Outreach & Training Events	2	2	1	1	36
$ Spent by State Agencies with Certified Minority & Women Businesses	$28,254,910	$28,283,492	$30,303,947	Not available	Not available

7.2 What are your performance levels for key measures of financial performance?

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.

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

OSMBA complies with Human Resources objectives of performance levels and trends.

7.4 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.

Appendix K

OEPP - State Office of Victim Assistance

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
State Office of Victim Assistance

Section I - Executive Summary

Mission Statement The State Office of Victim Assistance (SOVA) is dedicated to efficiently channeling payments to crime victims in crisis through the Victim's Compensation Fund, while providing information, training and technical assistance to victim services providers statewide.

Vision In the interest of justice to all victims of crime whose injuries, pain, suffering and loss warrant our intervention and support, the State Office of Victim Assistance will: promote collaboration at all levels, in order to restore justice to eligible crime victims who are in need of advocacy and financial assistance; provide a network environment in which we work closely with victim service agencies and providers across the state to render advocacy, support, programs, services, information, referrals, training and technical assistance, thereby ensuring that together we are equipped to meet the needs of South Carolina's crime victims; practice a community and victim centered approach to proactively end violent crimes statewide, and assist crime victims and their families in need. By providing compensation to victims of crime who are eligible, and meeting the educational, training and professional needs of victim advocates, health care professionals, South Carolina schools, and victim service providers, the State Office of Victim Assistance seeks to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system.

Major Achievements for FY 2006-2007

- SOVA developed an outreach system for solicitor advocates to access payments made by SOVA when requesting restitution.
- SOVA issued an RFP and awarded a contract to the University of South Carolina to create a SC Victim Services Coordinating Council.
- Held SOVA Statewide Training Event on April 2, 2007
- Crime Victims' Ombudsman Training – March 30, 3007
- Held the SC Crime Victims' Unity Ceremony in conjunction with the Crime Victim's Ombudsman in recognition of Victims' Rights Week 2007
- Co-sponsored the SC Victims' Rights Week Conference with the Victim Assistance Network
- Held the First and Second South Carolina Victim Assistance Academies in partnership with the SC Victim Assistance Network and the Medical University of South Carolina
- Instituted a new process for negotiating bills on behalf of victims
- Revised process for requesting approval of additional funds for victims to allow for Board approval by email, thus reducing the time for victim payments

Key Strategic Goals for Present and Future Years

1. To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina.
2. To ensure accountability in the expenditure of state funds designated for victim assistance.

Opportunities and Barriers

To be efficient and responsive in serving crime victims, SOVA will need the support and cooperation of victim advocates throughout the state. This will require building mutually beneficial partnerships in the provision of services.

How the accountability report is used to improve organizational performance

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

Section II - Organization Profile

Table II.1.1 –State Office of Victim Assistance - Key Services, Customers/Stakeholders and Partners

Key Services	Key Customers/ Stakeholders	Key Partners
Compensation for eligible victims of crime for medical, counseling, lost wages, and burial	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	National Association of Crime Victim Compensation Boards
Training for victim advocates and service providers on the SOVA process and other services for crime victims	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	National Crime Victims Research and Treatment Center; Commission on Prosecution Coordination; SC Victim Advocate Forum; SC LEVA Association; SC Department of Probation, Parole, and Pardon Services; SC Department of Public Safety
Advocacy, outreach, support, and referrals	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Association of Child Advocacy Centers; SC Association Against Domestic Violence and Sexual Assault; South Carolina Victim Assistance Network
Restitution and recovery	Crime victims; Law enforcement; Victim advocates; Solicitors; Medical Providers; Governor; General Assembly	SC Department of Corrections; SC Summary Courts Association

5. Operation locations

1205 Pendleton Street, Cola, SC

Outreach Offices: Orangeburg, Bamberg, and Bennettsville

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

____26_ Classified _____ Unclassified ____1___Contract

___1___ Temporary ___4___ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

SOVA is governed by the following:

1. SC Constitution – Article I, Section 24 Victims' Bill of Rights (Constitutional Amendment)
2. SC Code of Laws – Title 16, Chapter 3
   - Article 13 Compensation of Victims of Crime (SOVA laws)
   - Article 14 Victim/Witness Assistance Program (SOVA laws)
   - Article 15 Victim and Witness Service
   - Article 16 Crime Victims' Ombudsman of the Office of the Governor
3. SC Code of Regulations – Chapter 132
   - Chapter 132 SC Crime Victim's Advisory Board (SOVA reg.)
4. Laws Governing the Collection/Disbursement of Crime Victim Monies at the Municipal & County Levels
   - See Sections 14-1-203, 14-1-204, 14-1-205, 14-1-206, 14-1-207

8. Key strategic challenges

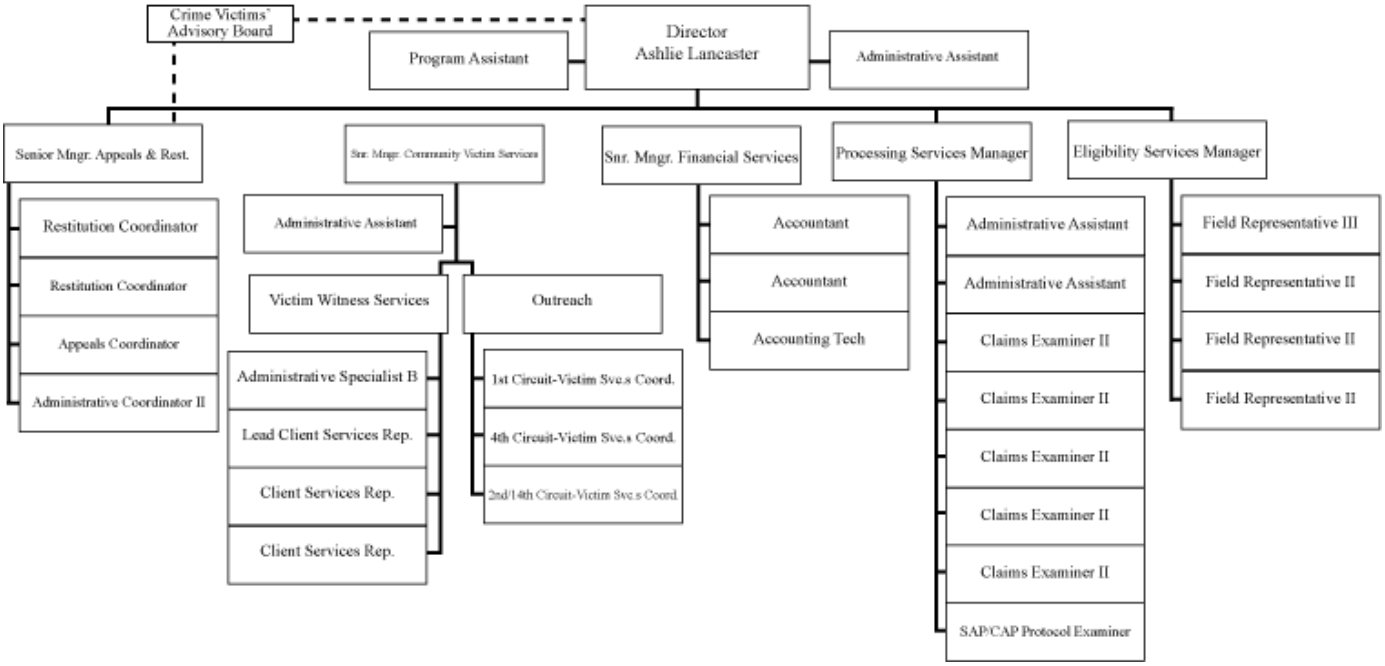
SOVA has faced many human resource challenges; however, recent restructuring efforts have begun to facilitate a team approach among SOVA personnel. This team atmosphere will continue to be pursued to increase productivity and employee morale.

9. Performance improvement systems

SOVA performance is evaluated through weekly manager's reports on the number of claims input in the PROGRESS system, the number deemed eligible, the number of claims examined and paid, and the amount of funds recovered through restitution/subrogation.

10. Organizational chart

State Office of Victim Assistance



11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

SOVA

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	873,976	0	1,025,799		1,370,918	
Other Operating	10,359,346	0	11,876,334	37,365	11,354,791	41,892
Special Items	321,253	321,253	279,353	279,353	279,361	279,361
Permanent Improvements						
Case Services	0	0				
Distributions to Subdivisions	789,479	0	789,479		789,479	
Fringe Benefits	296,367	0	301,638		426,392	
Non-recurring						
Total	12,640,421	321,253	14,272,603	316,717	14,220,941	321,253

Other Expenditures

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

12. Major Program Area Chart

Program Number and Title	Major Program Area Purpose	FY 05-06 Budget Expenditures			FY 06-07 Budget Expenditures		
SOVA	By providing compensation to victims of crime who are eligible, and meeting the educational, training and professional needs of victim advocates, health care professionals, South Carolina schools, and victim service providers, the State Office of Victim Assistance seeks to ensure that South Carolina's crime victims receive top quality service at all levels of our criminal justice system.	**State:**	0		**State:**	37,365	
		Federal:	4,789,845		**Federal:**	3,643,988	
		Other:	7,529,323		**Other:**	10,311,897	
		Total:	12,319,168		**Total:**	13,993,250	
		% of Total Budget:		18%	**% of Total Budget:**		0

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

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

Short and long term direction is set through regular managers' and full staff meetings. Performance expectations are set in Planning Stages for employees and through written policies and procedures. Organizational values are facilitated through an open door discussion policy that encourages empowerment and innovation. Ethical behavior is encouraged through internal controls that separate payment preparation from funds disbursement.

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

SOVA staff members are encouraged to attend customer-service trainings. Regular field visits are made to promote partnerships with law enforcement and court based victim advocates. These visits encourage cooperation and as such increase the efficiency and accuracy of processing claims. Managers are charged in their Planning Stages with exploring other states' best practices.

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

Data is maintained on the number of clients served and denied, as well as the types of crimes committed, the amount of funds paid out by county and by victim. Training team impact is assessed through participant evaluation forms.

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

Fiscal compliance is maintained through the OEPP Finance office which oversees all disbursements issued by SOVA. Legal and regulatory accountability are maintained through a complex filing system that backs-up a computerized data collection system. All denied claimants receive appeal packets.

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

- Number of claims input in the PROGRESS system
- Number deemed eligible
- Number of claims examined and vouchers ordered/paid
- Amount of funds recovered through restitution/subrogation

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

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

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

Staff attending trainings must train staff not attending upon completion of that training. In addition, SOVA attempts to promote from within as much as possible to encourage retention and continued growth of organizational knowledge.

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

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

In conjunction with the Crime Victims' Ombudsman, SOVA hosts an annual SC Crime Victims' Unity Ceremony. In addition, SOVA outreach office staff will accompany victims to court when a court-based advocate is not available. The Outreach staff has also coordinated emergency response teams to be available to assist in a mass victim incident.

SOVA or SOVA staff is a member of or involved with the following organizations:

- National Association of Crime Victim Compensation Boards
- South Carolina Association of Child Advocacy Centers
- South Carolina Victim Assistance Network
- Interagency Council on Homelessness
- South Carolina Coalition Against Domestic Violence and Sexual Assault

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

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

Manager's meet on a regular basis to establish short and long term goals and then work with support staff to implement procedures necessary to achieve those goals. Office strengths, weaknesses, and needs are assessed through the EPMS process, regular manager's meetings, and feedback from staff. In addition, the SOVA staff participates in an annual staff development day during which time goals are discussed and prioritized.

Chart III.2. Strategic Planning Chart for State Office of Victim Assistance

Key Strategic Goal	Supported Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
To be efficient and responsive in serving the financial and emotional needs of crime victims in South Carolina.	Create a Victim Service Coordinating Council to improve coordination of services.	RFP awarded to USC Center for Child and Family Studies.	7.1
To ensure accountability in the expenditure of state funds designated for victim assistance.	• Restitution Recovery • Trainings • Enhance customer satisfaction through faster eligibility determination.	• Reduction in Spending Program/Creation of remote access system to obtain restitution information for court-based victim advocates. • State Victim Assistance Academy • Increase productivity by 10% in Eligibility Services.	7.3/ 7.1, 7.2 7.1 7.1, 7.2

2.2 How do you develop and track action plans that address your key strategic objectives?

Action plans to achieve strategic objectives are developed through annual staff development strategic planning exercises and are adapted as needed through particular duties assigned to staff members through the EPMS Planning Stage process. In addition, action plans are tracked and regularly evaluated through manager's meetings to ensure goals are being met.

2.3 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.

2.4 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.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Efforts to increase the number of claims processed are being guided through employee input on work procedures in an effort to increase employee morale and hopefully reduce human resource issues.

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

The strategic planning process is evaluated through staff development brainstorming with staff suggestions incorporated in the creation of future goals.

2.7 If the agency's strategic plan is available to the public through the agency's internet homepage, please provide an address for that plan on the website.
The strategic plan is not available via the web.

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

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

Customer/Stakeholder	Requirements
Victims	Efficient and compassionate processing and payment of claims; appropriate referrals and resource information
Victim Advocates	Training on the SOVA application process and other victim services
Hospitals and Service Providers	Training on the SOVA application process and other victim services; timely and accurate processing of payments.
Solicitors	Training on the SOVA application process and other victim services; Assistance in the coordination of standards for victim/witness programs
Law Enforcement	Training on the SOVA application process and other victim services

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

Changing customer needs and expectations are assessed through training surveys and calls and correspondence received. Correspondence is tracked through a database to determine patterns in customer needs.

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

Information gathered from surveys, calls, and correspondence is evaluated by managers and changes to policies and procedures are incorporated as appropriate.

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

Dissatisfaction is assessed based on complaints received, and processes are adapted as necessary. In addition, satisfaction with trainings and with treatment of victims during the appeal process is assessed through surveys.

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

Positive relationships are built through meetings with victim advocate associations, public presentations, and the newly formed SC Victim Services Coordinating Council.

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

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

Operations essential to performing SOVA's mission are measured, to include the number of claims processed, the number deemed eligible, and the number and amount of payments made, as well as restitution recovered and amounts saved through bill negotiation.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

Decisions on the workability of internal processes are made based on the output shown through weekly manager's reports. Financial data is tracked to show increases/decreases in types of claims paid and budget requests are adjusted accordingly.

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

Key measures include the number of claims received, processed, and paid, the number of training events provided, the number of informational materials distributed, and the amount of subrogation/restitution collected. As the office undertakes new initiatives, key measures are adapted to include these initiatives.

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

Data is gathered from other states with similar compensation programs to assess and implement best practices. In addition, the National Association of Crime Victims' Compensation Boards provides comparative data in controversial issues, as well as updates on state Supreme Court cases involving compensation programs around the country.

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

All claims data is entered into an electronic database to ensure its long term integrity and availability. Accuracy of data is ensured through management oversight.

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

Performance review findings are used to assess internal processes and promote continuous improvement by finding ways to adapt procedures to alleviate any concerns identified.

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

Organizational and employee knowledge is collected and shared through written policies and procedures.

Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

The staff is divided into process specific divisions, intake, eligibility, recovery, processing, financial services, and outreach. Staff work products are routed through the division manager. The staff is encouraged to participate in training designed to increase knowledge of their assigned duties.

5.2 How do you evaluate and improve your organization's human resources-related process?

Human resource processes are evaluated through staff feedback and exit interviews.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

Internal training needs are identified and addressed annually through the EPMS process. Training needs may also be identified when substandard performance occurs. Employees attending training are expected to train other staff upon their return.

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

Employees are required to justify training requests in terms of how they contribute to the attainment of goals for the organization.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?

Managers are expected to set an example for high performance and are held accountable through the EPMS process for achievement of action plans.

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

Employees are motivated to develop and utilize their full potential through an organizational culture that rewards exceptional performance and new ideas.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

Employee well-being, satisfaction, and motivation are assessed daily through close management and an interactive environment. SOVA also sponsors an annual staff development to encourage collaboration among departments and to provide training identified for all SOVA staff. In 06-07, all SOVA staff participated in training on workplace stress.

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

A safe, secure, and healthy workplace is maintained through compliance with state and federal regulations on workplace requirements.

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

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

- SOVA internal management (weekly and quarterly management reports on achievement of internal and external goals, monthly and close-out reconciliations for all funding, interim and final reporting)
- SOVA external management (training team presentations)
- Governor's Office of Finance internal management (budgets, draw-downs, coding)
- State level accounting management (SC Comptroller General's Office)
- Federal level management (US Departments of Justice)

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

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.

6.3 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.

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

Processes are evaluated through regular management and staff meetings.

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

Key processes include the processing and payment of claims, recovery of restitution and subrogation, and training and technical assistance. These processes are regularly evaluated and other states are contacted to ensure best practices are incorporated.

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

This is determined through close management of resources and steps under the law to ensure solvency of the compensation fund such as the ability to reduce claims across the board if funds are short.

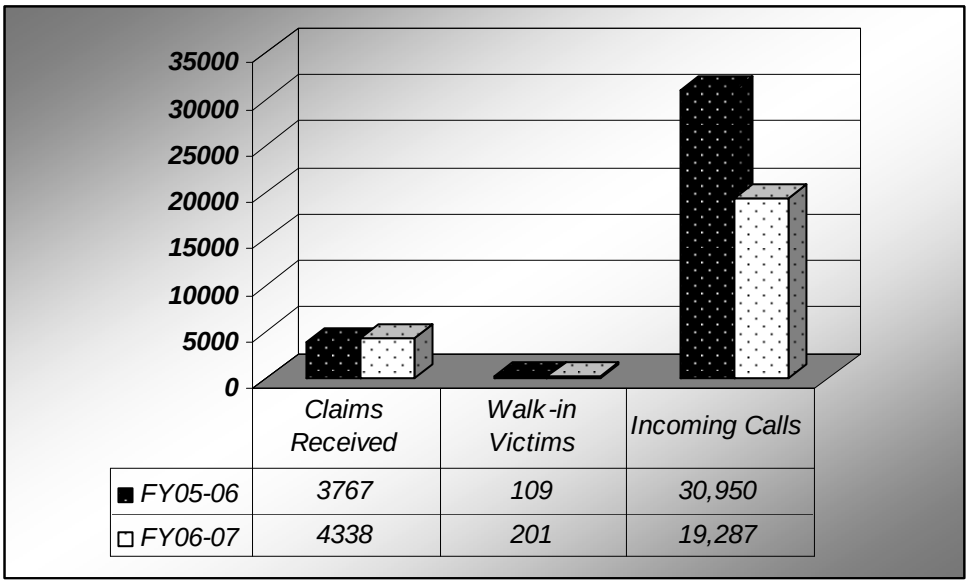
Section III – Elements of Malcolm Baldrige
Category 7: Results

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

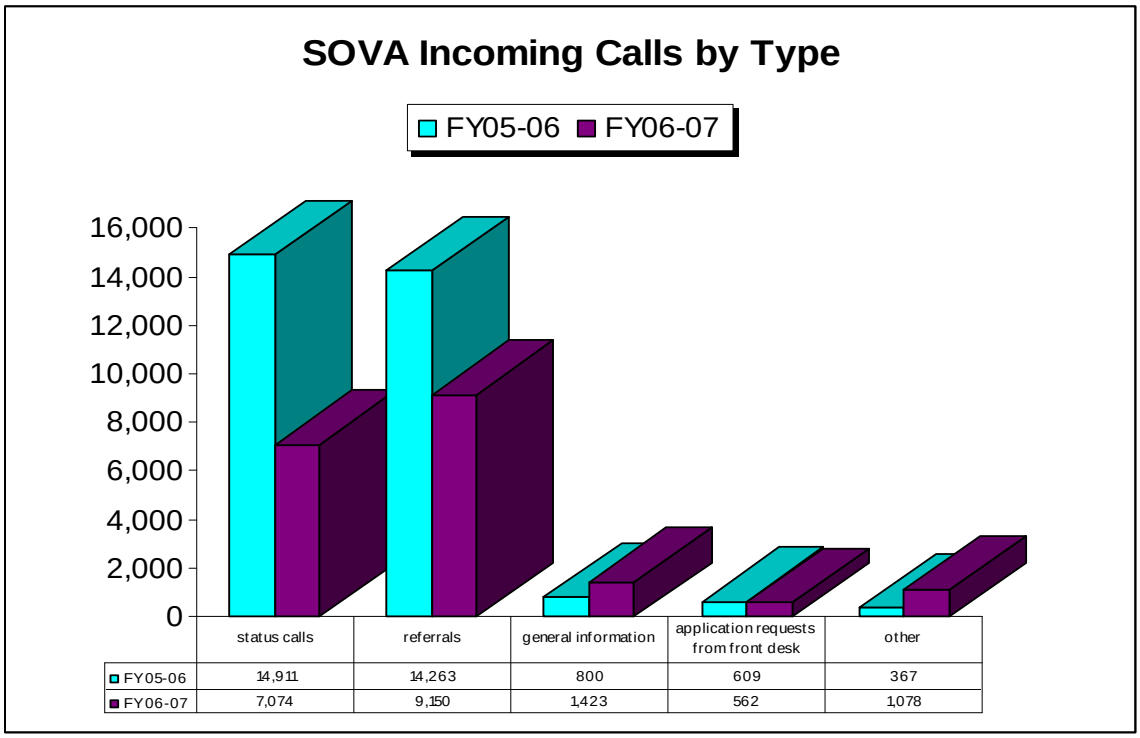
Outcome measures for SOVA's Victim/Witness Assistance Services Department:

The Victim/Witness Department processes all incoming mail and calls and assists victims with both the application and appeal processes.

Chart 7.1.1

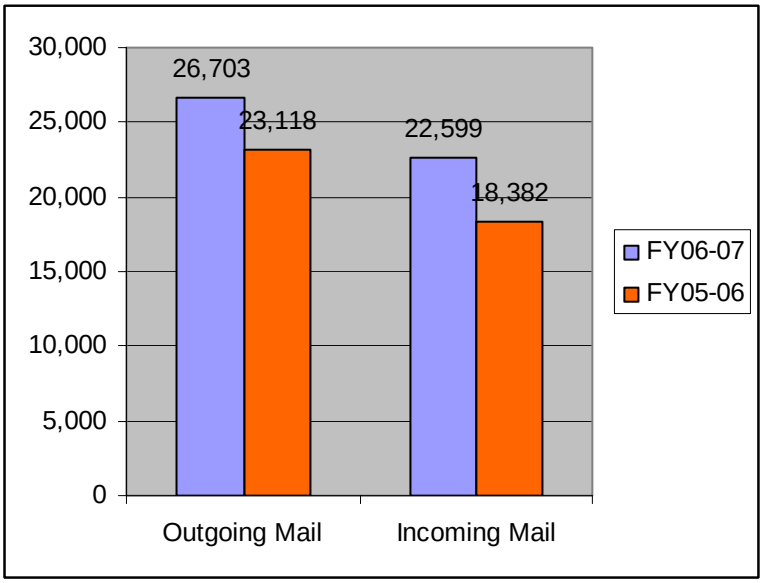


Calls received were categorized as follows:
Chart 7.1.2



Tracking incoming and outgoing mail:

Chart 7.1.3



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

Chart 7.1.4

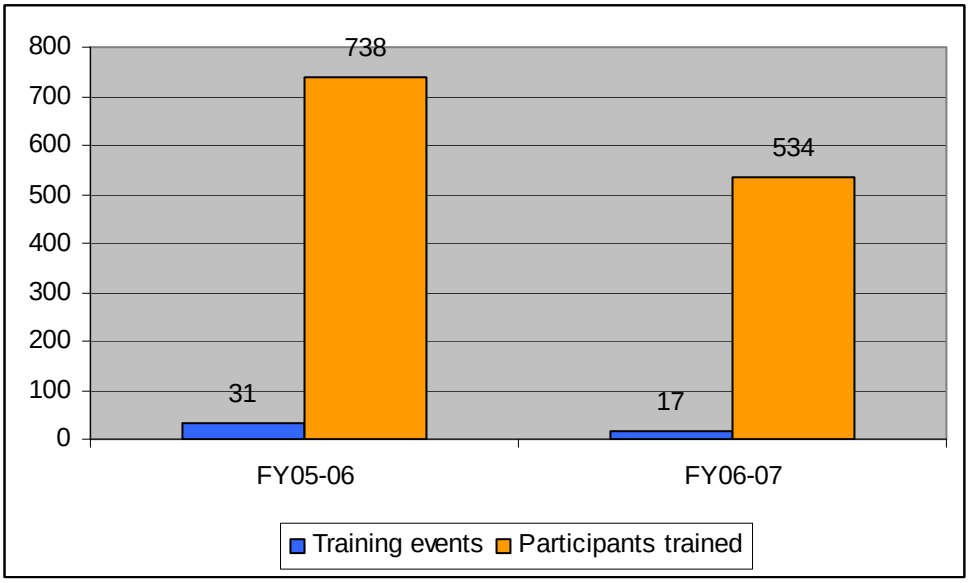
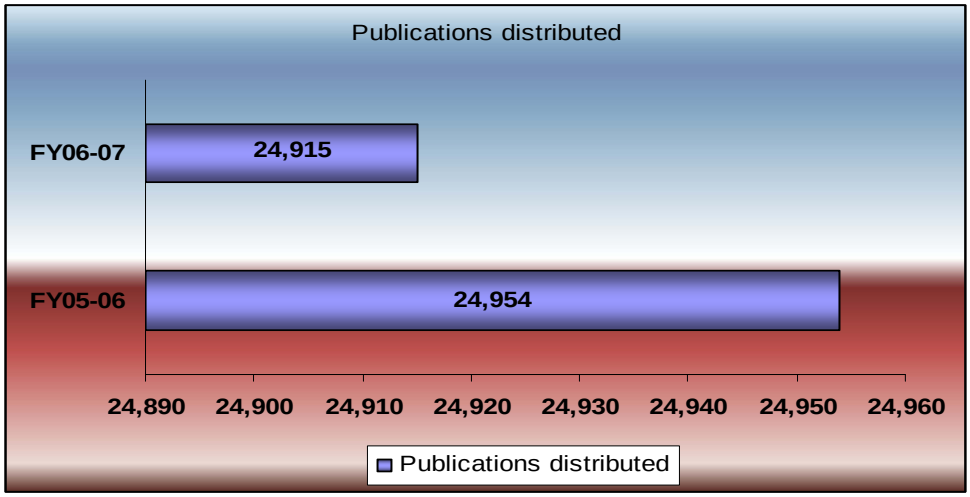
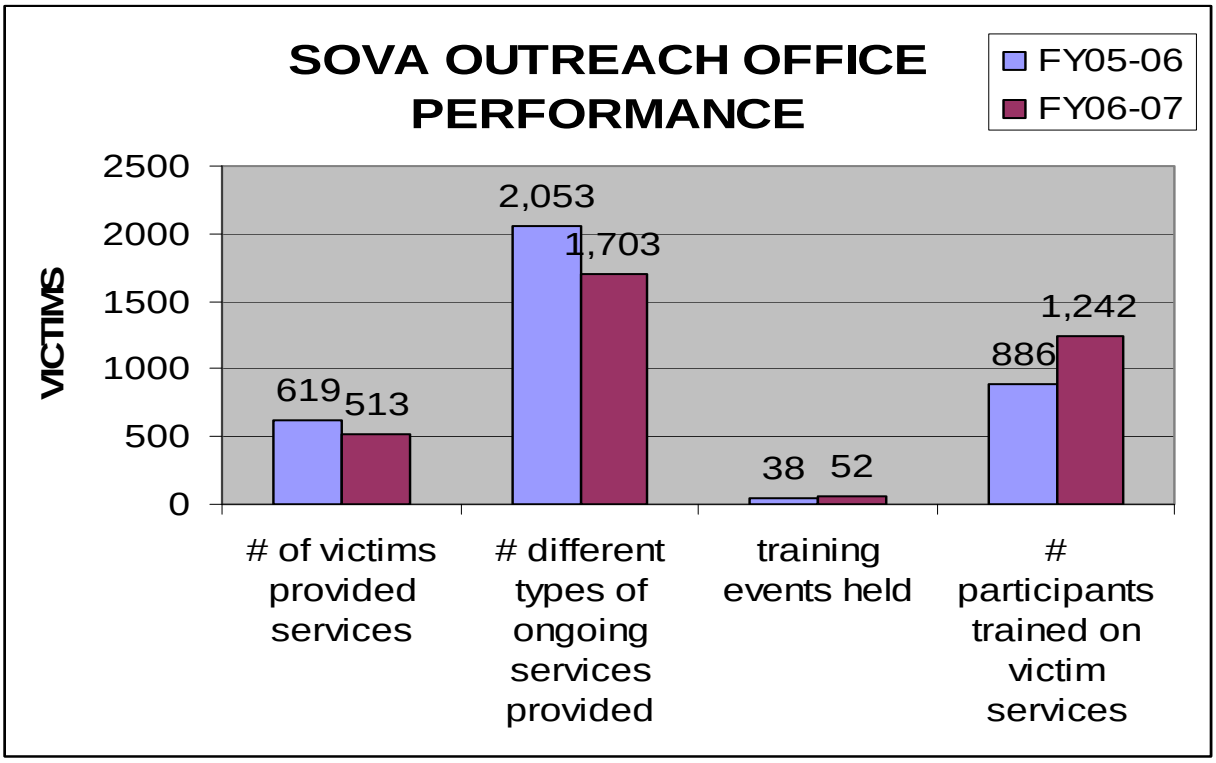


Chart 7.1.5



SOVA Outreach Offices reported the following measures of mission accomplishment for FY 2006-2007 as compared to FY 2005-2006:

Chart 7.1.6

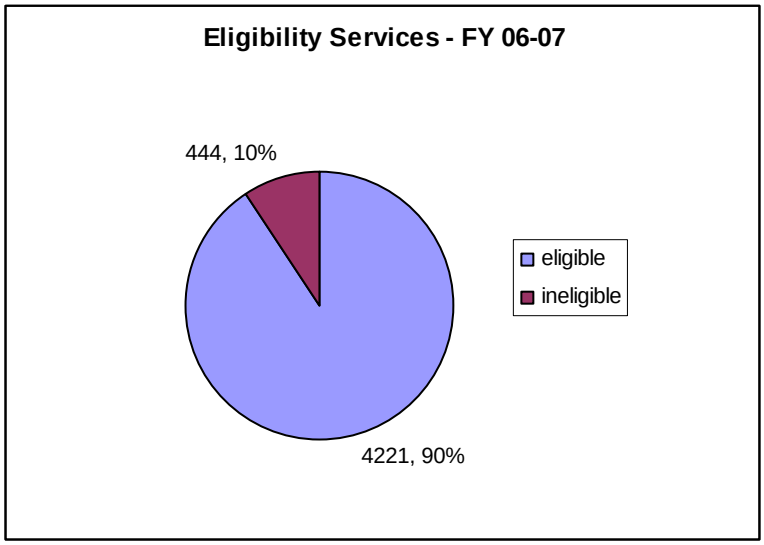


In addition, SOVA held the First and Second South Carolina Victim Assistance Academies in partnership with the SC Victim Assistance Network and the Medical University of South Carolina in August 2006 and June 2007 with 115 victim service providers trained. The Academies provided attendees with forty credit hours toward certification through the National Organization for Victim Assistance.

Compensation: Eligibility and Processing Services

The Eligibility Services Department processed 4,665 claims during FY 06-07, 90 % of which were deemed eligible:

Chart 7.1.7



Additionally, the Eligibility Services Department increased productivity by 60% as indicated in 7.2. There were 14 denials appealed to the Crime Victims' Advisory Board. Of those, 10 were upheld and 4 were overturned with full or reduced awards.

The Processing Services Department processed 8,515 vouchers for payment. In addition, 5,391 Sexual Assault and Child Abuse Protocols were processed. Despite these benefits, many victims are left with large balances they cannot pay. This year, Processing Services instituted a new initiative to negotiate bills on behalf of victims, saving victims approximately 1.4 million in out-of-pocket expenses since this process began.

Table 7.1

Total $ Amount Owed to Providers	Total $ Amount Paid	Total $ Amount Offset
1,884,720.97	**446,846.24**	**1,437,874.73**

The Victim Services Coordinating Council was formed in FY06-07 to promote coordination among all agencies involved in victim/witness and domestic violence services. The Council produced a report recommending needed legislation for improving victim services in South Carolina. This report can be viewed at the Council website at http://www.sc.edu/ccfs/research/VicServCouncil.htm.

Restitution/Recovery Services

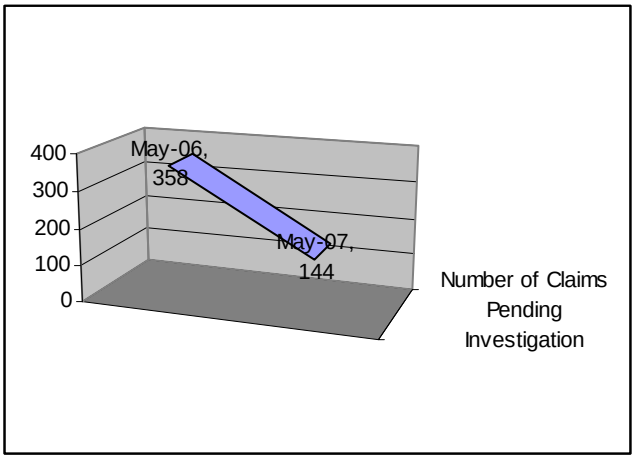
In FY 06-07, SOVA recovered over $380,000 through restitution and subrogation (7.3). In addition, the Restitution Department worked with court-based advocates to create an outreach system for advocates to obtain information on benefits paid by SOVA on behalf of victims in order to assist with recouping those funds. This system will be tested and released in the Fall of 2007.

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

A key measure of customer satisfaction for victims is how quickly claims are deemed eligible or ineligible. The Eligibility Services Department has reduced processing time for claims by 60% as shown by the decrease in back-

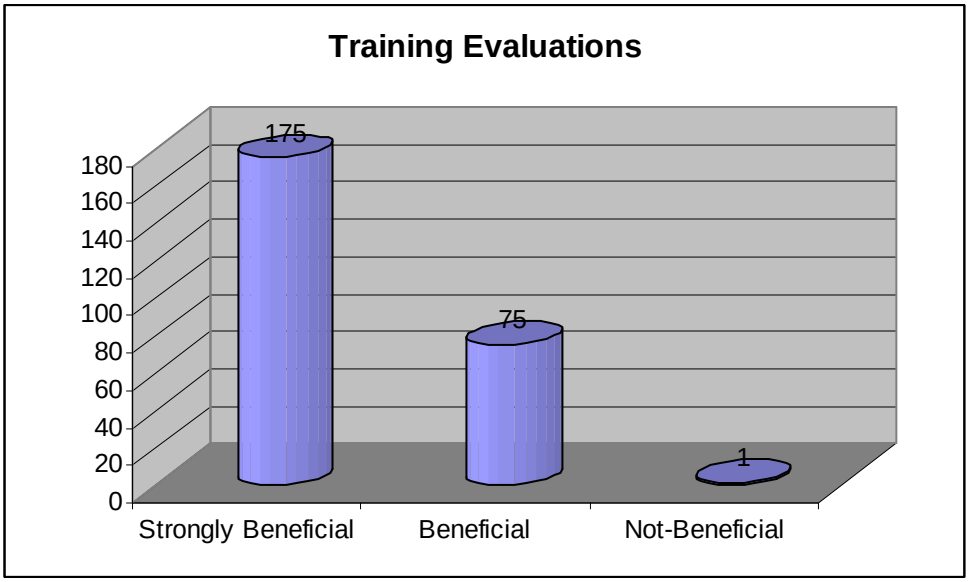
logged claims. In May 2006, the claim balance in Eligibility was 358; in May 2007, it was 144, for a difference of 214 claims.

Chart 7.2.1



The SOVA Training Team and Outreach Office training events received good ratings for training to law enforcement, solicitors, schools, hospitals, and other service providers: The 279 evaluations completed were overwhelming positive, indicating the training provided was clearly beneficial:

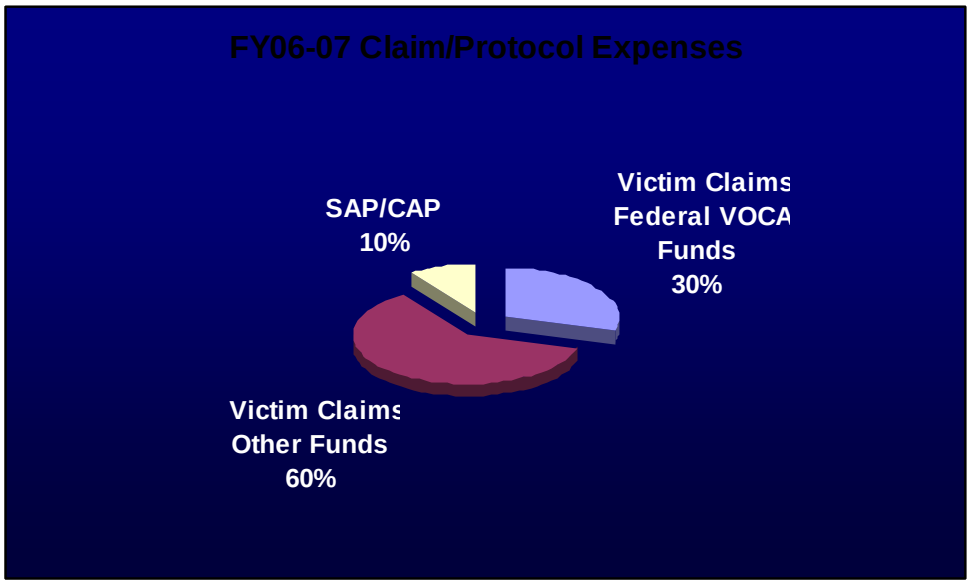
Chart 7.2.2



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

In FY06-07, the Processing Services Department processed 8,515 vouchers for payment for a total of $11.5 million in benefits for eligible victims of crime, as opposed to a total payout of 10.9 million in FY 05-06. Benefits paid for compensation claims and for Sexual Assault/Child Abuse Protocols (SAP/CAP) were as follows:

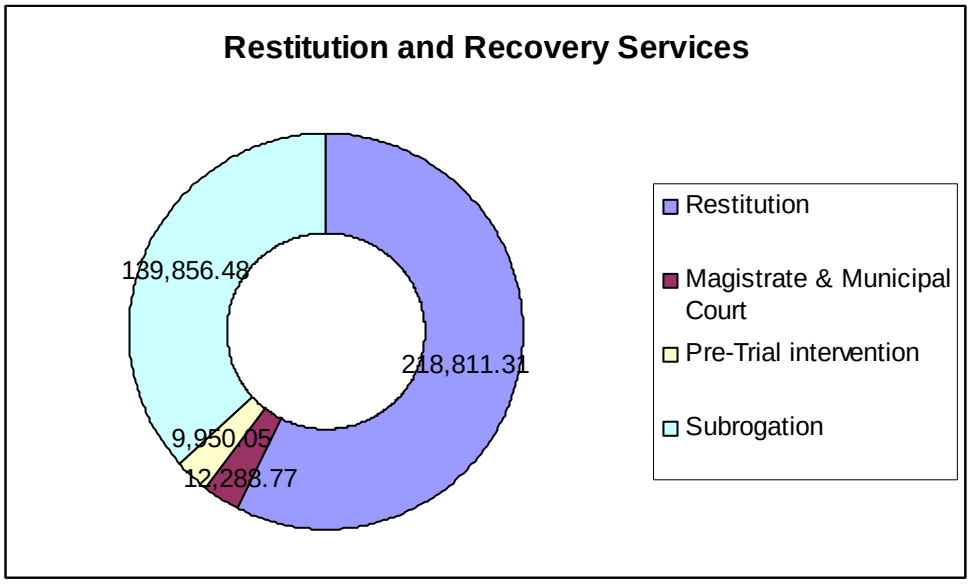
Chart 7.3.1



Forty-six (46) claimants requested and received additional funds from the Crime Victims' Advisory Board for a total increase in award amounts of 275,000.00.

The Restitution Program is designed to recoup funds from offenders for benefits paid on behalf of eligible crime victims. In this way, SOVA can help ensure the continued solvency of the compensation fund. A total of $380,906.61 was recouped from the restitution/recovery program from July 1, 2006 to June 30, 2007. Funds were recouped from the following sources:

Chart 7.3.2



The Restitution and Recovery Services Department instituted a "Reduction in Spending" program to track funds offset through the tracking of restitution payments by offenders or through subrogation. In cases such as these where a victim is receiving benefits for medical or other services through another source, SOVA will monitor the claim and delay payment to determine any remaining balances owed. These efforts saved $ 313,459.89 in potential duplicate payments in FY 06-07.

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

All employees attended SOVA's annual staff development where they participated in strategic planning and received training in workplace stress management. Two employees were promoted through the internal selection process. One employee applied for and received certification through the National Organization for Victim Assistance. Eight (8) employees attended the SC Victim Assistance Academy and are also applying for certification. .

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

All federal and state reporting requirements were met according to the designated timelines. SOVA was monitored twice by the Department of Public Safety, Office of Justice Programs for its State Victim Assistance Program grant with no findings. In addition, SOVA received a positive Legislative Audit Council review during FY06-07. .

Appendix L

OEPP – Office of Veterans Affairs

2006-2007 Accountability Report
Governor's Office of Executive Policy and Programs
South Carolina Office of Veterans' Affairs

Section I - Executive Summary

Mission Statement

The mission of the South Carolina Office of Veterans' Affairs is to advocate for all veterans and their family members, and to assist them in obtaining earned financial, health, and death benefits; establish uniform methods and procedures, and provide training, assistance, and instruction to county veterans' affairs officers; manage the state veterans' cemetery; administer the South Carolina Military Family Relief Fund; maintain the South Carolina War Roster; provide administrative and logistical services to the South Carolina POW Commission and Veterans' Trust Fund (Title 25, SC Code of Laws); and participate in the policies, management and operation of the South Carolina veterans nursing homes (Sec 44-11-30).

Vision

The vision of the South Carolina Office of Veterans' Affairs is to:

- be an efficient and dynamic service delivery network that exceeds statutory and moral obligations to serve those who served our Nation.
- be a proud veteran's organization, characterized by excellence and integrity for the fulfillment of our duties to our nation, state and to one another.
- strive to ensure that veterans will live the highest quality of life with dignity and honor, and also receive the honor due them at the time of interment.
- be a trusted and credible advisor to the Governor, General Assembly and other state activities.
- be an accountable steward of the resources allocated to us, and programs under our trust.

Major Achievements for FY 2006-2007

1. Continued construction on the M.J. "Dolly" Cooper Veterans Cemetery in Anderson, SC.
2. Dedicated and opened the 220-bed Veterans Victory House (nursing home) in Walterboro, SC on 11 November 2006.
3. Accelerated the compilation of the list of SC veterans who have served since WWII, "The War Roster," through the use of temps and work-studies.
4. Responded to requests for assistance from over 50,000 constituent contacts.
5. Educated and counseled veterans, in collaboration with the County Veterans Affairs Officers, service organizations' representatives, and the US Department of Veterans Affairs, such that **$1.29 billion in federal veterans' benefits**, medical and financial, were realized in South Carolina in FY 2006.

Key Strategic Goals for Present and Future Years

1. Improve upon an already excellent service of advocacy and assistance to our State's 410,000 veterans and their family members by enhancing training programs for staff and County Veterans Affairs Officers. Increase the federal benefits received by SC veterans over the FY 2006 total of $1.29 billion.
2. Honor the service and memory of deceased veterans, and their families by:
    - successfully opening and operating the new the state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery.
    - attending the funerals of South Carolina service members killed in support of the Global War On Terrorism (GWOT).
3. Continue to research and compile the South Carolina War Roster.
4. Enhance communication among federal VA and Department of Defense agencies, the veterans' service organizations, County Veterans Affairs Officers, members of the General Assembly, and the Governor's Office.
5. Work toward a practical, paperless work environment.

Opportunities and Barriers

- Opportunities:
    - Federal and State leadership directives and resources have been directed toward veterans and their families in support of the Global War on Terrorism (GWOT). A challenging opportunity is to focus efforts and resources to serve, transition, and honor GWOT veterans and their families, and all veterans of South Carolina.
    - Enhanced collaboration with the VA, Department of Defense (DoD), SC state agencies and county and local agencies, to support and service veterans and families is present due to the GWOT.
    - The scheduled opening of the first state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery, in the Fall of 2007 presents an exceptional opportunity to provide these well deserved and needed services to veterans and eligible family members. The major barriers that could negatively affect this project are funding and staffing at the necessary levels.
        - Recommendation – allow any unexpended current year funding to be carried over to the succeeding fiscal year.
        - Establish a long term Capital Equipment Program to prepare for the replacement of the high cost equipment at the cemetery.
    - To enhance the efficiency and effectiveness of our offices by leveraging technology toward a paperless environment is desired and possible.
- Barriers:
    - A complete understanding of the impact of the 410,000 veterans, and their family members in South Carolina.
    - A method to identify and track military reserve service members who are activated to support GWOT; National Guard service members are more easily tracked.
    - Inadequate funding and staffing to ensure that:
        - training programs are made available to necessary staff and CVAOs.
        - travel funds to visit county offices and veterans service organizations around the state.
        - travel funds to attend training opportunities presented by state and national experts.
        - training funds to support in-state training programs that require travel, and program support funds.

How the accountability report is used to improve organizational performance

- The previous year's report is reviewed to determine progress made as required by the report. Variances are identified and addressed. Examples are:
    - Cemetery – Goal was to have the cemetery opened in May 2007. We did not meet this goal, but have determined that construction delays and change orders delayed the turnover of the property to the Office of Veterans' Affairs.
    - Veterans Nursing Home in Walterboro – Goal was to have it opened and operational in 2006; it opened in November 2006.
    - Compilation of the SC "War Roster" – progress has been made, since last year 2 FTEs have been identified to work this important database.
    - Federal impact of veterans' benefits – the total funds from the federal government realized in dollars and/or services in South Carolina increased from $1.16 billion to $1.29 billion.
- The Accountability Report process requires and allows the SCOVA to critically review our goals and objectives, and "take inventory" of where we are. It makes us take time to conduct a "sanity check" of our purpose, direction and our progress in these areas. We validate or revise operational measurements that indicate mission performance, to monitor progress throughout the year, and report results. Insufficient progress in any area is reviewed, validated and then addressed by directing additional attention and/or resources to that specific area.

Section II - Organization Profile

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

- **Veterans advocacy and assistance** to 410,000 SC veterans, their family members, and survivors in informing them of their earned benefits ($1.29 billion in FY 2006) and in developing, filing, presenting, and prosecuting to final determination all claims for benefits under terms of federal and state legislation.
- **The South Carolina Free Tuition Program** provides free tuition to in-state public colleges and universities for children of certain eligible veterans. In 2006 over $7 million if tuition credit was awarded to eligible students.
- **Burial and memorial services:**
  - through the construction and operation of the first state veterans' cemetery in Anderson, SC, the M.J. "Dolly" Cooper Veterans Cemetery."
  - by attending the funerals of SC service members killed supporting the GWOT.
- **Nursing home care to veterans**; this office collaborates with the Department of Mental Health (DMH) in providing appropriate care for elderly veterans in our three state veterans nursing homes.
- **The "War Roster"** of South Carolina veterans.
- **A comprehensive training program** for staff and the county veterans' affairs officers that ensures thorough initial and refresher training in accordance with SC law.
- **Veterans Trust Fund –** manage and administer this trust fund.
- **SC Military Family Relief Fund –** manage and administer this fund.
- **Ex POW Commission -** administratively support his commission which is chartered to confirm and compile the list of ex POWs of South Carolina.

2. Key customers segments and their key requirements/expectations

- Veterans and their family members:
  - Provide them with awareness of benefits and assistance in filing claims for eligible benefits.

- The Governor and the General Assembly, provide:
  - awareness of the presence of the 410,000 veterans in South Carolina.
  - awareness of the impact of the economic veterans on SC; $1.29 billion in FY 2006.
  - awareness of the articulated needs of SC veterans and families.
  - consultation and research regarding issues affecting veterans in SC.
  - good stewardship of the SC resources allocated to this office to serve veterans.
  - effective and efficient operation of the State's Veterans' Cemetery.

- County Veterans Affairs Officers (CVAOs):
  - Appointment of CVAOs, in conjunction with the appropriate County Delegation.
  - CVAO accreditation training in order to be able to file claims for, and represent veterans.
  - CVAO refresher training to maintain claims officer credential and proficiency in claims processing.
  - Guidelines in operational issues.
  - Support of, and participation in veterans and military recognition events.

- State and federal agencies:
  - Require coordination and cooperation in supporting efforts serving military, veterans and their families.
  - Work with the US Armed Forces transition programs for service members.

- Veterans service organizations:
  - Maintain an effective communication link to veteran service organizations.

- Support the monthly Veterans Advocacy Council which is made up of the leadership of the major veteran service groups in SC.
- Support, and participate in veterans' recognition events.
- As appropriate, present veterans concerns and issues to the attention of the Governor and the General Assembly.

- General public:
  - Provide an awareness to the public of the veterans in the state of South Carolina.
  - Perform as a good steward of the resources provided to this office to serve veterans and their families.
  - Respond to inquiries from citizens regarding veterans in SC.

3. Key stakeholder

- Veterans and their family members
- The Governor and the General Assembly
- County Veterans Affairs Officers (CVAOs)
- State and federal agencies
- Veterans service organizations
- General public

4. Key suppliers and partners

- Veteran service organizations
- U.S. Department of Veterans Affairs (Veterans Benefits Administration, Veterans Health Administration, and National Cemetery Administration)
- Department of Defense
- Department of Labor
- Department of Mental Health
- South Carolina National Guard and South Carolina Reserve Component Units
- National Association of State Directors of Veterans Affairs (NASDVA)

Table II.1.1 – South Carolina Office of Veterans Affairs Key Services, Customers/Stakeholders and Partners

Office	Key Services	Key Customers/ Stakeholders	Key Partners
SCOVA	Veterans advocacy and assistance	Veterans and family members, the Governor's Office and the General Assembly, VA and DOD	VBA, VHA, DOD, Veterans Service Organizations, Governor's Office and General Assembly
SCOVA	The South Carolina Free Tuition Program	Families of Purple Heart Recipients and 100% total and permanently disabled veterans	Commission on Higher Education, Veteran Service Organizations
SCOVA	Provide burial and memorial services	SC veterans and their families, the Governor's Office and the General Assembly	National VA Cemetery Administration, Veterans Service Organizations, funeral homes
SCOVA	Compile the "War Roster" of South Carolina veterans	SC veterans and their families	DOD, VA, veterans and County Veterans Affairs Officers
DMH and SCOVA	Provide nursing home care to veterans	Veterans, family members, the Governor's Office and the General Assembly	VHA, SC DMH, veterans and their families, veterans service organizations

5. Operation locations

Primary Location: Governor's Office – Office of Veterans' Affairs
1205 Pendleton Street, Suite 369
Columbia, South Carolina 29201

Satellite Locations:

VA Regional Office (SCOVA)
1801 Assembly Street, Room 141
Columbia, South Carolina 29201

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

Dorn VA Medical Center (SCOVA)
Building 101, Room 1C111
6439 Garners Ferry Road
Columbia, South Carolina 29209-1649

Augusta VA Medical Center (SCOVA)
5A 170 Downtown Division
1 Freedom Way
Augusta, Georgia 30910

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

VA Community Based Outpatient Clinic
205 Piedmont Blvd.
Rock Hill, South Carolina 29730

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

__15__ Classified __5__ Unclassified _____Contract

__2__ Temporary _____ Temporary (Grant) _____ Temporary (time-limited)

7. The regulatory environment under which your organization operates

- USC Title 38
- USC Title 10
- South Carolina Code of Laws

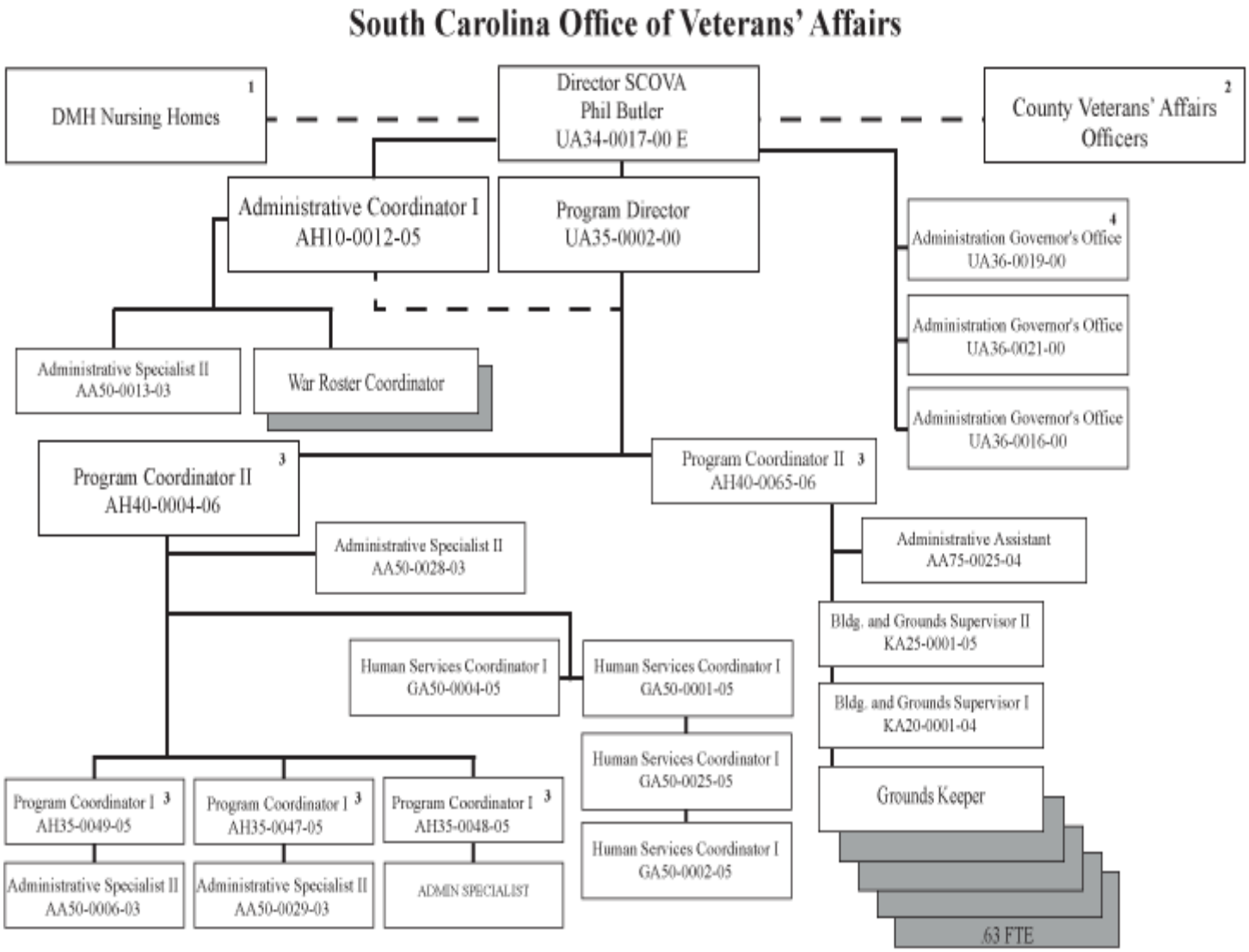
8. Key strategic challenges

- The Global War on Terrorism continues to produce more veterans. These honorable veterans increase the demand for services from our staff. Additional resources may be required to meet this increasing need.
- The opening and successful operation of the M.J. "Dolly" Cooper Veterans Cemetery in Anderson, SC.
- The necessity to improve communication with the Veterans Advocacy Council, the Governor and the General Assembly.
- The ongoing successful operation of the Veterans Victory House, and the other two veterans nursing homes, in collaboration with the SC Department of Mental Health.
- Completion of the South Carolina War Roster.
- Transition to a paperless operation as much as practical.
- Identifying relevant, appropriate, and affordable services and benefits for veterans and families of SC.

9. 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.

10. Organizational chart



(1.) Per SC Law, SECTION 44-11-30, SC Mental Health Commission shall consult with the Division of Veterans' Affairs, Office of the Governor, concerning policies, management, and operation of veterans' homes.

(2.) Per SC Law, SECTIONS 25-11-40 through 25-11-60 define appointment, training, certification, activity reporting requirements, and other relationships among the Office of the Director, SCOVA and the CVAO's.

(3.) All Field Office Supervisors and the Cemetery Superintendent respond to requirements of the Director when needed to represent the Director or SCOVA as required.

(4.) Vet Service Officers are paid staff of SCOVA, but work under a joint agreement with SCOVA and the service organization.

11. Expenditures/Appropriations Chart

Accountability Report Appropriations/Expenditures Chart

Base Budget Expenditures and Appropriations

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07- 08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	$ 529,613	$ 629,613	$ 619,236	$ 619,236	$ 883,085	$ 883,085
Other Operating	$ 62,145	$ 61,664	$ 130,691	$53,441	$78,578	$78,578
Special Items	$19,517	$19,517	$31,654	$31,654	$78,924	$78,924
Permanent Improvements	$	$	$	$	$	$
Case Services	$8,000	$	$7,000	$	$425,000	$
Distributions to Subdivisions	$440,627	$343,178	$3,420,220	$	$	$
Fringe Benefits	$157,087	$157,087	$184,779	$184,779	$294,279	$294,279
Non-recurring	$	$	$	$	$	$
Total	**$1,216,988**	**$1,111,059**	**$4,393,580**	**$889,109**	**$1,759,866**	**$1,334,866**

Other Expenditures

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

12. Major Program Area Chart

Program	Major Program Area Purpose	FY 05-06 Budget Expenditures		FY 06-07 Budget Expenditures		Key Cross Reference
Veterans' Affairs	The mission of SCOVA chief advocate for all veterans' issues in South Carolina. This includes state and federal benefits, eldercare, compensation, pension, and burial.	State	$ 1,091,542	State	857,456	Indicate where supporting data is located. See Tables 7..3-1, 7.3-2
		Federal	97,449	Federal	3,480,324	
		Other	8,481	Other	24,147	
		Total	$ 1,197,472	Total	4,361,926	
		% of budget: 2		% of budget:		

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

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

- SCOVA staff meetings involving all the SCOVA staff (from around the state) are held twice a year.
- Organizational priorities, policies, expectations are introduced or re-emphasized at these times.
- Frequent direct communications (via email, telephone) take place throughout the year.
- Performance monitoring and discussions take place semi-annually, with an annual evaluation completed.
- Supervisory chain of command is encouraged to be used to express concerns; however, an open door policy is in place to see the Director if appropriate.

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

- Constant reminders of our primary mission; to be advocates for the veterans and their families.
- Customer service training of staff.
- Feedback, positive and negative from stakeholders, is shared with staff.

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

- By scrutinizing the issues, researching possible approaches, and taking appropriate action with close coordination and constant communication with our 46 County Veterans Affairs Officers, state resource personnel, Veterans Service Organizations, Veterans Health Administration (VHA) and Veterans Benefits Administration (VBA), and other state veterans' offices.

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

- With knowledge of the current laws, and reference to the specifics of such laws, and request for interpretation when necessary, prior to action being taken.
- Regular monitoring of this office's budget, with specific review of variances to determine reason and appropriateness.
- The SC Office of Veterans' Affairs provides national certification accreditation training, and refresher training, to its staff on an annual basis, in accordance with SC law. This training and certification program is also made available to each County Veteran Affairs Officer.
- The Veterans' Trust Fund of South Carolina has an appointed Board of Directors that provides oversight as prescribed by statute.

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

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

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

- By using and reviewing information provided to us directly by veterans, and through the many veterans' service organizations and County Veterans Affairs Officers; and by reviewing national statistics provided by the VA and the National Association of State Directors of Veterans Affairs, the SCOVA monitors our progress with performance effectiveness.
- Personal involvement of the leaders of this office is evidence by presence at Veterans Service Organizations' meetings, local veterans' Town Hall Meetings, and many individual meetings with representatives of all of our stakeholders as required and appropriate.

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

- Actively look for opportunities to hire staff (permanent or temporary) that can be given an opportunity to learn and progress within the workforce (e.g. work study employee, young college graduates).
- Challenge these staff with responsibilities and guidance to help them progress, while providing them with training and guidance to assist with their success.

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

- Encourage and support an environment of open communications, inclusion, consideration and feedback.
- Encourage the sharing of best practices and lessons learned throughout the organization.
- Conduct after action report processes to record opportunities for improvement for future activities.

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

By involvement in Veterans Trust Fund of South Carolina; American Legion, including Department Service Officer for Claims and Department Rehabilitation Sub-Committee; Disabled American Veterans; Veterans of Foreign Wars; Veterans Advocacy Council, POW Commission, Veterans Day Parade Committee (Columbia), Alston Wilkes Veterans Home, Military Officers Association of America; Knights of Columbus, Blue Star Mothers of America, Inc. – Midlands Chapter; National Association of State Directors of Veterans' Affairs (NASDVA); VA Mental Health Advisory Board; Admissions Board for DMH Veterans Nursing Homes; Palmetto Health Hospice Volunteer; Non-Commissioned Officers Association; Prison Out-Reach Ministries; Fort Jackson Retiree Council; Clemson University ROTC Alumni Association; Richland One School District Mentoring Program; Rotary; Palmetto SeniorCare Board of Directors (PACE Service for Veterans); we also participate in multiple patriotic community events throughout the state.

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

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

The SCOVA considers the strategic planning guidance from the Governor's Office and the Director of Administration of OEPP and incorporates that in with the vision and mission of this office. Our staff meets semiannually and strategic and short terms plans are identified and guidelines put in place to accomplish these objectives. Progress on these objectives is monitored and addressed as necessary, and also at the semiannual meetings.

Chart III.2 Strategic Planning Chart for South Carolina Office of Veterans Affairs

Key Strategic Goal	Supported Agency Strategic Planning Goal/Objective	Related FY 06-07 Key Action Plan/Initiative(s)	Key Cross References for Performance Measures
1. Improve upon an already excellent service of advocacy and assistance to our State's 410,000 veterans and their family members by enhancing training programs for staff and County Veterans Affairs Officers. Increase the federal benefits received by SC veterans over the FY 2006 total of $1.29 billion.	1. Provide opportunities for education and training of staff and the state's veterans to positively impact the amount of federal funds awarded to South Carolina veterans and their families. a. Update and maintain the SCOVA internet website. b. Attend local veterans-related events, e.g. veterans' celebrations and Town Hall Meetings. c. Provide appropriate training to staff and County Veterans Affairs Officers.	1. Inquire of staff of training needs they have identified. a. Work closely with customers and staff, and supporting IT Graphics Designer, to maintain an effective, user friendly website. b. Maintain close relationships with VA, DOD, state, and local activities to ensure that gatherings such as these are held. c. Schedule at least one accrediting class and two refresher training classes this year.	Tables 7.3-1; 7.3-2
2. Successfully open and operate the new the state veterans' cemetery, the M.J. "Dolly" Cooper Veterans Cemetery.	2. Working with the National Cemetery Administration and the State Budget and Control Board, open the first state's veterans' cemetery and operate it efficiently and effectively.	2. Dedicate and open the state veterans' cemetery in September 2007.	See paragraph 7.1
3. Continue to research and compile the South Carolina War Roster.	3. Bring on appropriate staff to continue the compilation of this important database.	3. Recruit and hire the 2 authorized FTE to compile the "War Roster."	
4. Enhance communication among federal VA and Department of Defense agencies, the veterans' service organizations, County Veterans Affairs Officers, and members of the General Assembly	4. Encourage and facilitate open communications with these activities. Participate in opportunities to enhance sharing of information.	4. Continue to attend meetings of these organizations, and look for opportunities for continuous collaboration.	

and the Congressional Delegation.			
5. Work toward a practical, paperless work environment.	5. Improve the efficiency, effectiveness and security of operations concerning documents by working toward a paperless system, supported by current technology. Start with the veterans claims case files maintained in our locations.	5. Specifically identify functional, operational areas within our organization that lends itself to a paperless operation, and work with the OEPP IT staff to pursue this.	

2.2 How do you develop and track action plans that address your key strategic objectives?

- Monitor regularly the status of these initiatives.
- Work diligently, collaboratively and proactively with the veterans' service organizations, federal and state government agencies and veterans and their families to accomplish our objectives.
- Document and track the status of projects, issues and meetings.

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

- Leveraging technology as much as practical to ensure effective communication.
- Making frequent leadership visits to field offices.
- Reviewing and measure accomplishments and status of issues against stated goals, historical trends and other similar state's veterans' affairs offices.
- Conducting semi-annual meetings of the Office of Veterans' Affairs staff to more formally communicate current issues and concerns, and to receive feedback from staff regarding improving our services.

2.4 How do you measure progress on your action plans?

Constantly review and compare our effectiveness against stated goals (e.g. opening of the new nursing home and state cemetery) and timelines.

2.5 How do your strategic objectives address the strategic challenges identified in your organizational profile?

Very well, they are tailored directly to our challenges.

2.6 How do you evaluate and improve your strategic planning process

Critically review and learn from After Action Reviews of significant events.

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

Not at this time.

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

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

Customer/Stakeholder	Requirements
Veterans and their family members, as identified by the US Dept of Veterans Affairs (DD-214), DOD and local authorities	Personal interview with veterans and their families.
Veterans advocacy groups	Constant communications and monthly meetings.
Federal, State, and County (County Veterans Affairs Officers) agencies and activities	Periodic meetings, training sessions, and frequent communication, and outreach efforts.
General public	Frequent attendance at community events and through correspondence

3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations? The South Carolina Office of Veterans affairs:

- works closely with the 46 County Veterans Affairs Officers.
- hosts monthly meetings with veterans' advocacy groups and frequently talk with veterans at the grass roots level.
- receives and responds to a large volume of issues and inquiries through the internet.
- attends local, state and national conferences addressing veterans' issues and needs.
- maintains close, continuous, and effective liaison with state and federal authorities and agencies.

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

Working with stakeholders and supporting agencies, appropriate initiatives are planned and held to address concerns, e.g. Town Hall Meetings, Job and Health Fairs for veterans and families, etc.

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

- By meeting monthly with the Veterans Advocacy Council which provides input and feedback from veterans throughout the state.
- By attending the semi-annual statewide County Veterans Affairs Officer's Conference and receiving and presenting information that is used to adjust our services to improve our services to veterans and their families.

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

- The SCOVA staff values and appreciates the veterans, their service, and their families. We use frequent and open discussions with veterans' groups.
- Throughout the year the staff attend, and participate in a multitude of veterans' activities (e.g. Veterans Day Ceremony, Memorial Day, speaking engagements with veterans' service organizations, etc.).
- The SCOVA staff work closely with the federal VA agencies (VHA, VBA and VA Cemetery Administration) to ensure that we work in concert with their goals and approaches to servicing veterans and families.
- The SCOVA staff work closely with DoD activities (e.g. Fort Jackson, Moncrief Army Hospital. Shaw AFB, and McIntyre National Guard Base) to ensure that we support the active duty force and help with the transition from active duty to veteran status.

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

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

- First, we comply with the law and our higher headquarters' requirements to monitor and track identified programs.
- Also, major programs of responsibility, the operation *M.J. "Dolly" Cooper Veterans Cemetery*, completion of the S.C. *War Roster*, the Veterans' Trust Fund, are examples of programs that are monitored regularly.
- Veterans' claims services are monitored monthly to determine the services provided to our veterans, the volume of applications for VA benefits, and the resulting impact on the economy of South Carolina.

4.2 How do you use data/information analysis to provide effective support for decision making throughout your organization?

Review within timeframe stated and adjust accordingly.

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

Key measures are reviewed as necessary, but at a minimum, quarterly. Feedback received from partners and stakeholders, coupled with results of internal reviews validate that the correct key measures are being followed, or that it is necessary to revise these measures. The following represents our key measures:

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

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

The SCOVA staff:

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

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

The SCOVA staff:

- use many data sources from federal sources and rely on their reliability for many considerations.
- receive routine monthly and semi annual reports from staff and the County Veterans Affairs Officers.

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

- Working with the Director of Administration through routine meetings and as needed, performance review findings are passed with appropriate dialogue to plan improvements.
- Within the SCOVA, semi annual meetings of the entire staff address the status and progress being made regarding our goals and objectives. During these meetings, and throughout the year, adjustments to our approach to improving our services and mission accomplishments are made.

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

- An effective communication culture has been established within the SCOVA and between our Director of Administration, and our stakeholders. This encourages and facilitates the sharing of successes and requirements for improvement throughout the organization throughout the year.
- Additionally, "organizational memory" has begun to be collected electronically to facilitate continuity of operations and direction.
- The SCOVA staff also are in communication with organizations from other states, with which we exchange our best practices and opportunities for improvement.

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Section III – Elements of Malcolm Baldrige
Category 5 Workforce Focus

5.1 How do you organize and manage work: to enable employees to develop and utilize their full potential, aligned with the organization's objectives, strategies, and action plans; and to promote cooperation, initiative, empowerment, innovation and your organizational culture?

Employees receive opportunities to develop and exercise their potential in support of the Governor's and SCOVA's objectives through several formal and informal mechanisms. The formal method of developing and evaluating employees is through the Employee Performance Management System (EPMS). The employee and supervisor develop a planning stage for reach employee with input from both. This planning stage allows for individual development plans within the employee's position. Additionally, a less formal approach is through training opportunities offered by the Governor's Office, the State Budget and Control Board, the Cabinet Agency Training Consortium, other state agencies and the private sector. For example SCOVA had 7 staff members complete Supervisory Training course presented by the HR trainers from the State Budget and Control Board this year.

5.2 How do you evaluate and improve your organization's human resources-related process?

SCOVA is committed to providing efficient and equitable human resource consideration to our employees. We rely heavily on employee feedback to improve staff relationships. Methods used to obtain feedback are primarily informal opportunities; however, the formal EPMS process offers a formal opportunity to benefit from supervisor–subordinate communication.

5.3 How do you identify and address key developmental and training needs, including skills training, performance excellence training, diversity, training, management/leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do encourage use of new knowledge and skills on the job?

Review of available data and feedback from staff and customers, results in training needs and opportunities. Claims Representatives and/or Field Office Supervisors receive training to further develop their knowledge of VA laws and the VA claims process which is conducted by the Office of Veterans' Affairs, and Washington, DC and Indianapolis, Indiana. This information is then passed on to other staff to enhance their proficiency. This training sharpens those skills needed by staff in preparing and presenting appeals cases before the U.S. Department of Veterans Affairs Regional Office and, in some cases, before the Board of Veterans Appeals in Washington. The office staff also attend local and/or regional training provided by the VA Regional Office and/or the VA Medical Centers.

5.4 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.

5.5 How does your employee performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?
By 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 do you motivate your employees 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.

5.7 What formal and informal assessment methods and measures do you use to determine employee well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you determine priorities for improvement?

- 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.

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

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

The SCOVA staff:

- monitor and conduct functional reviews of the process and the need. We then have discussion with the specialty experts (e.g. IT, human resources, finance, etc.) to collaboratively determine the approach to be taken to enhance, or design and deliver new technology/practices.
- have an effective communication network among our staff to facilitate the sharing of information.

6.3 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.

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

The Office of Veterans' Affairs evaluates our processes based upon mission, our history and the performances of our peers and adjust processes accordingly.

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

The Office of Veterans' Affairs continuously monitors the status of various individual veterans' applications for resolution.

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

- First, the staff review historical data and performance. If performance was not acceptable and the cause was insufficient resources, we request additional resources, with justification.
- For new missions, the staff determine if accomplishing these additional or changed missions require additional resources. If not, we adjust available accordingly; if additional resources are required, we prepare an objective justification to pursue obtaining those resources.

Section III – Elements of Malcolm Baldrige
Category 7: Results

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

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 $75.3 million to a total of $711,738 million**.

Additionally, progress on the construction and equipping of the cemetery is monitored daily by the SCOVA staff assigned to the cemetery and in the staff in Columbia. Weekly meetings are held with the cemetery staff, the Budget and Control Board Project Manager, and the contractor. These meetings are detail oriented and compared to the construction timeline for progress.

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

In the Office of Veterans' Affairs, the Free Tuition Program provides free tuition to in-state public colleges and universities for children of certain eligible veterans. The program is completely state funded throughout each public college and university. Data for the past five fiscal years are as follows:

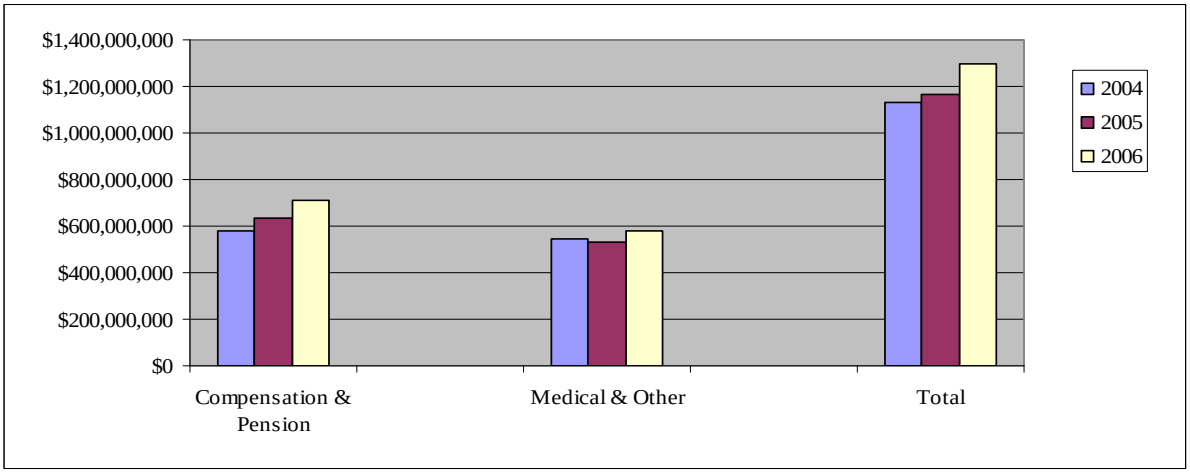
Table 7.2 – Veterans' Affairs Free Tuition Program Measures

Measure	FY 01-02	FY 02-03	FY 03-04	FY 04-05	FY 05-06	FY 06-07
# Students Applying	635	581	512	540	414	371
# Students Approved	387	449	388	381	311	241
# Students Enrolled	502	711	1182	1049	1095	1409

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

The Office of Veterans' Affairs provides client assistance to all veterans, their dependents, and survivors in developing, filing, presenting, and prosecuting to final determination all claims for benefits under terms of federal and state legislation. The U.S. Department of Veterans Affairs expends millions of dollars in South Carolina as demonstrated by figure 7.3-1

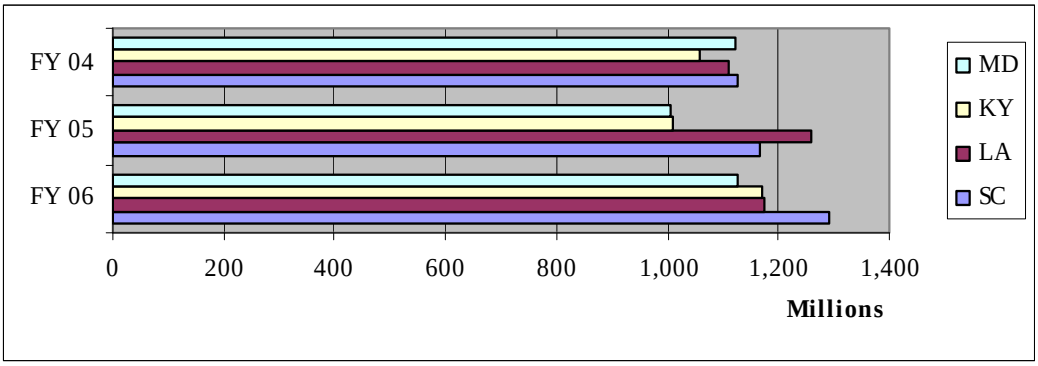
Table 7.3-1 – Federal VA Expenditures in South Carolina



Compared with Kentucky, Louisiana, and Maryland (states with comparable veteran populations), VA expenditures in South Carolina have increased over the past three federal fiscal years and exceeded comparison state's expenditures as evidenced by Figure 7.3-2. This positive trend is a result of the Governor's Office of Veterans' Affairs dedicated advocacy efforts on behalf of South Carolina veterans.

FY 2006 – SC - $1.293 million (410,084 veterans)
LA - $1.174 million (356,461 veterans)
KY- $1.169 million (351,185 veterans)
MD- $1.125 million (470,722 veterans)

Figure 7.3-2 VA Expenditures Comparison Data



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

The SCOVA complies with the OEPP Human Resources policies and direction. Additionally, SCOVA selects staff based on job requirements, and matching applicant skills and experiences.

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

The SCOVA complies with the OEPP Human Resources policies and direction. Additionally, SCOVA selects staff based on job requirements, and matching applicant skills and experiences.