

Memorandum



Date: August 6, 2009

To: Phyllis Tynes-Saunders, Director
Department of Human Services

From: George M. Burgess
County Manager 

Subject: Florida Sterling Challenge Assessment Process

I would like to commend you for your dedication to excellence by completing the Florida Sterling Challenge assessment process.

During these difficult economic times, it is extremely important that we take advantage of every opportunity to maximize resources and explore innovative approaches for service delivery. The Sterling Challenge is an effective management tool paralleling our objectives and providing an independent perspective to identify potential performance enhancements and align services with community priorities. I recognize your management team's commitment and hard work required to complete this comprehensive evaluation process. In addition to benefits from actually going through this process, the resulting Challenge Feedback Report identifies your department's strengths compared to top benchmark practices as well as opportunities of improvement.

I am pleased the report recognized several key strong points, including your executive team's development of a clear vision and set of values consistently communicated through a variety of methods. Your department was also commended for effectively focusing on grant compliance review, successfully resulting in never losing a grant due to non-compliance. As you know, this is extremely important since approximately 82% of your services are grant supported. Your department was also acknowledged for its commitment to constituents and ability to respond to their priorities, with programs such as the Coordinated Victims Assistance Center providing a "one stop" approach to social services. These strengths as well as others included in the report are extremely important.

In order to fully benefit of this assessment process, please submit a Sterling Action Plan including initiatives and measures to address improvement areas identified in the Feedback Report. Initiatives should include specific tasks, milestones and an implementation time frame. They are also to be entered into the County's ActiveStrategy Enterprise (ASE) and included at all Strategic Management Meetings. The plan should be submitted to your Assistant County Manager within 60 days.

Based on your success with the Sterling Challenge, I encourage you to take the next step and pursue the full Governor's Sterling Award. Additional Sterling information is available at http://www.floridasterling.com/performanceimprovement_sterling_awardrecipients.html.

By pursuing the Challenge, you have taken the lead in Miami-Dade County and shown your commitment to the ideals and philosophy we have worked so hard to adopt and make the foundation of our organization. Thank you again for continually striving for *Delivering Excellence Every Day*.

c: Honorable Carlos Alvarez, Mayor
Denis Morales, Chief of Staff, Office of the Mayor
Irene Taylor-Wooten, Special Assistant, Social Services
Jennifer Glazer-Moon, Special Assistant/Director, Office of Strategic Business Management

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INTRODUCTION

The mission of the Florida Sterling Council is “To enhance Florida’s competitive edge and quality of life through promotion, assessment, and recognition of performance excellence.” The goal of the Governor’s Sterling Award process is to improve organizational performance excellence throughout the State of Florida by using a proven world-class management system that applies to public and private sector organizations. The Award is designed not only to recognize organizations that are leaders in performance excellence and can serve as role models for others, but also to provide a self-assessment opportunity to help your organization optimize its operations and results.

Your organization has completed its Sterling Challenge application, and a team from the Florida Sterling Council Board of Examiners has been on site to verify and clarify the information presented. This Feedback Report is the culmination of the Examiners’ site visit findings.

Managing for quality does not end with receiving this report or even receiving an award, but compels an organization to maintain and continuously improve upon its position of excellence. Consistent with this philosophy, the following report is intended to identify the vital few areas of strengths and opportunities for improvement on which an applicant organization may wish to take action. The Feedback Report also provides an **Executive Summary** of the observations of the Examiners regarding the organization’s key strengths and opportunities for improvement. In addition, this report includes a scoring range for each item. This percentage range is based upon the scoring guidelines, which describe the characteristics typically associated with each percentage.

This report does not prescribe specific programs or techniques with which to improve. The intent is to reflect the views of Sterling Examiners *relative to the requirements of the Sterling Criteria for Organizational Performance Excellence* at the Challenge level. These views are expected to enhance your organization’s ability to analyze its continuous improvement effort and to achieve consistently higher levels of performance. Ultimately, the success of Florida depends on the success of your organization; by taking your organization to the next level, you are helping make Florida “a state of excellence.”

Applicant organizations read and use feedback comments in different ways. We have gathered some tips and practices from prior applicants for you to consider:

- Take a deep breath and approach your Sterling feedback report with an open mind. You applied to get the feedback. Read it, take time to digest it, and read it again.
- You know your organization better than the Examiners know it. There might be relevant information that was not communicated to them or that they did not fully understand. Therefore, not all their comments may be equally accurate.
- Although we strive for perfection, we do not achieve it in every comment. If Examiners have misread your application or misunderstood your staff during interviews on a particular point, do not discount the whole feedback report. Consider the other comments and focus on the most important ones.

- Celebrate your strengths and build on them to achieve world-class performance and a competitive advantage. You have worked hard and should congratulate yourselves.
- Use your strength comments to understand what the Examiners observed you do well and build upon them. Continue to evaluate and improve the things you do well. Sharing those things you do well with the rest of your organization can speed organizational learning.
- Prioritize your opportunities for improvement. You cannot do everything at once. Think about what is most important for your organization at this time and decide which things to work on first.
- You may decide to address all, some, or none of the opportunities in a particular Item. It depends on how important you think that Item or comment is to your organization.
- Use the feedback as input to your strategic planning process. Focus on the strengths and opportunities for improvement that have an impact on your strategic goals and objectives.

Executive Summary

The Miami-Dade County Department of Human Services is in the beginning stages of building a fact-based performance improvement system and has made considerable progress in the areas of Leadership and Workforce Focus. Some of the most important strengths include:

- Senior leaders have established a clear vision of “Delivering Excellence Every Day” and this vision is communicated by senior leaders through meetings, printed materials, and everyday activities. Senior leaders have established the goal of “reinventing” the Department, and staff at all levels credit leaders with providing a renewed focus on providing excellent service to customers. This focus on excellence also helps the Department ensure sustainability through its strong relationships with partners and collaborators, its human resource policies supporting skills development and training, and an emphasis on securing and maintaining grants through a regular evaluation of customer needs and requirements.
- The Department has established a number of formal and informal relationships within the community, providing a valuable network for referrals necessary to meet customers' holistic needs. Staff at the Coordinated Victims Assessment Center has established a systematic process by which these partnerships are utilized to help victims of violent crimes by providing legal assistance, housing and shelter information, crisis counseling, parenting classes, and vocational training. In addition to the referrals received from these partners, the organization's services are promoted through a number of methods such as radio and television ads, the use of a county-wide social services phone hotline, and printed materials available in English, Spanish, and Creole.
- The Department has shown a commitment to the needs of its staff through its professional development opportunities, reward and recognition programs, and its workforce performance management system. The County's Professional Development Clinic Program includes classroom and scenario-based training in: leadership, motivation, delegation, problem solving, employee recognition, meeting management, conducting performance appraisals, team building, and conflict resolution. Employees achieving high-performance are regularly recognized by senior leaders through the receipt of gift certificates, congratulations letters, and certificates of appreciation. The Department's workforce performance management system provides employees with opportunities for feedback during regular meetings, monthly conferences, and annual evaluations. Through these forums, employees are provided guidance to help further their development opportunities, and also have the ability to discuss with management their own ideas for process improvements.

There are opportunities for improvement that include:

- The Department's performance measurement system does not provide managers with a consistent set of measures necessary to manage by fact and successfully evaluate the overall health of the organization. Beyond the evaluation of grant requirements, which fluctuate frequently and do not allow for the analysis of trends, the organization's performance measurement system does not include the delivery of service provided for each of its customer segments such as Child Development; Elderly, Disability, and Veteran Services; Rehabilitative Services; and Targeted Services to specialized populations. Although performance is systematically reviewed by senior leaders, the focus is on “red” measures – those already out of compliance and needing immediate attention. These reviews do not lead to the analysis of root causes or the implementation of process

improvements, and may not provide the information necessary to ensure sustainability through the continued ability to respond to the needs of troubled and vulnerable citizens.

- The Department's Business Planning process does not address internal strengths, weaknesses, opportunities, or threats, and the organization does not identify or consider its own strategic advantages or challenges in the development of its business plan. Objectives are identified at the County level through the development of a County strategic plan, and the Department creates action plans designed to align to those objectives. However, those action plans are not regularly evaluated and are not easily modified should funding or grant requirements change. In addition, this process does not allow for the systematic consideration of customer requirements, departmental challenges, or department-level priorities, and may not provide a realistic context for the development of strategies necessary for sustainability in an environment threatened by privatization and decreases in funding for social services.
- The organization does not systematically evaluate workforce engagement and satisfaction or the success of its efforts toward personal development. Although one employee satisfaction survey was completed several years ago, and another survey is scheduled, there is no indication that the results of the prior survey were used to implement improvements or to help determine the factors that lead to employee engagement. Although anecdotal information is used to evaluate its leadership development programs, there is no systematic review of the effectiveness of these programs in preparing employees for increased responsibility and continued employment. In a Department in which a high percentage of employees will be eligible to retire in the near future, these factors may make it difficult to continue to leverage its strategic advantage of having an experienced and qualified workforce.
- The Department has not identified its core competencies or key processes, and has no systematic approach to process or work system improvement. Although work process flow-charts have been used successfully by some units, such as the Mail-In Redetermination Unit, the Department itself has not identified and mapped processes in an effort to find opportunities for improvement. The Department's Performance Quality Improvement (PQI) systems, including the use of Peer Case Reviews, have only been used to discover errors in isolated areas within individual work units. These systems have not been deployed to all units and are not being used to manage most key processes. These key processes also do not relate to the Department's core competencies and, therefore, do not allow the Department to leverage its strengths to meet its strategic challenges.

The Organizational Performance Results category assesses Miami-Dade County Department of Human Services' trended and comparative performance in those areas of importance to the organization's key business factors. Some of the strengths and opportunities for improvement in the organization's results include:

- The organization has positive results and trends in some areas of product and service delivery during the past fiscal year, including Summary of Children Served for Child Care by DHS remaining over 42,000, and Summary of Children Processed by DHS for Child Care, with as many as 136,395 children processed in a quarter sustained throughout the 2007-2008 fiscal year.
- Customer service performance results show positive results and trends in the areas of service delivery sustained above 95% for each of the past five quarters and the Secret Shopper Score was maintained at 3.6 out of 4 for each of the past five quarters.

- Leadership results related to compliance for the Council on Accreditation Standards show sustained or improving levels of performance in the areas of Individuals Placed in Treatment and Farm Worker Migrants Employed. The Percent of Eligible Children Enrolling and Attending Child Care has improved from 94% to 99.9%, with sustained levels above 99% for the last two fiscal quarters of fiscal year 2007-2008 and the first quarter of fiscal year 2008-2009.
- No results reported have comparisons to similar agencies or best-in-class benchmark organizations. Although the organization has indicated that valid comparative data is not relevant and is not readily available, comparative measures related to child care, senior meal delivery, substance abuse outcomes, and veteran's services could be used to better determine the level of service being provided to customers. In addition, the organization's accreditation with the national Council on Accreditation could also be used as a source of comparative data and to benchmark against other high-performing social service organizations.
- Results are not reported for several measures related to product and service performance and the effectiveness of work systems. The organization has identified a number of measures regularly reviewed by senior leaders, including accessibility of human services programs, utilization of neighborhood-based facilities, and access to services by people with disabilities and special target populations. However, there are no results reported that provides this data. Although the organization has identified processes that include prioritizing customer needs, identifying needed tools and resources, establishing a viable funding source and budget, ongoing monitoring and adjustments, and the formation and maintenance of sound business partnerships, there are no results provided that could be used to evaluate the effectiveness of these work systems and work processes.

In order to help the Miami-Dade County Department of Human Services' management move to the next level on its journey for performance excellence, the Sterling Examination Team recommends the following:

- Prioritize data to provide a "snapshot" of overall performance to be reviewed by senior leaders on a regular and consistent basis, in the same way leaders currently review Active Strategies Enterprise data for some areas of performance. Include the most critical indicators of the organization's overall health, and include segmentation, as necessary, to allow meaningful analysis. Include in-process measures to provide the ability to predict performance issues rather than having to react to them.
- Identify the specific core competencies that provide the Department with its competitive advantage. Align the individual work processes developed by the Department to both the core competencies and the strategic objectives or challenges, and regularly evaluate them to ensure that the service being provided to the customer meets the Department's vision of "Delivering Excellence Every Day."
- Look within and outside of the Department for benchmark processes and best practices to be emulated Department-wide and provide the impetus for breakthrough improvement. Information from this benchmarking process can be a source of comparative data and could be used to identify stretch goals and make innovations in key work processes, as necessary, to meet those goals.

1.0 Leadership

The **Leadership** Category examines how your organization's senior leaders guide and sustain your organization. Also examined are your organization's governance and how your organization addresses its ethical, legal, and community responsibilities.

Scoring Range: 50% - 65%

Strengths

- Senior leaders set and communicate the Department's vision and values through various processes and methods. For example, a series of cascading meetings are held throughout the Department at weekly, bi-weekly, monthly, and quarterly frequencies, each with an emphasis on the organizational vision. In addition, e-mails and memoranda are sent from all levels of management to their staff regarding policies and procedures that serve to support the vision. The Department's vision of "Delivering Excellence Every Day" is printed on its vehicles, stationary, and pay-stubs, and is incorporated into everyday activities, guiding the work done by employees across the Department in the delivery of services to customers.
- Senior leaders promote an environment that results in legal and ethical behavior through their personal actions, the requirement for ethics training, and through the Administrative Order from its parent organization. The Administrative Order states that it is a guiding principle to provide a government that is honest, ethical, and fair to all. The authority and responsibility for management and policy implementation, oversight, adherence to rules and regulations, and annual effectiveness of the Management Team are included in the Administrative Order, and are standardized across the entire organization. The Department operates in an atmosphere of transparency in a heavily-regulated environment, with clearly identified policies and procedures governing its actions and responsibilities. These policies are included in the Administrative Policies and Procedures Manual and cover all areas of the Department. Ethical behaviors are also deployed through processes which include: background checks performed as part of the hiring process; incident reports for breeches; and a hotline for reporting ethical violations. The Department also has a mandatory ethics training program that deals with issues related to conflicts of interest, outside employment, gifts, and lobbying.
- Senior leaders create a sustainable organization through collaboration with providers and volunteers, human resource strategies, and the Department's ability to obtain grants to support the delivery of its services. For example, the Department collaborates with providers such as the Early Learning Coalition, the Junior League, church groups, the Florida and National Councils on Aging, United Way, Jewish Community Centers, the Florida Department of Children and Families, and other educational and legal entities. These relationships have led to shared delivery of services in cases where a grant was not able to cover the full spectrum of services required by the clients. The Department has identified staff that will be leaving due to retirement, and has taken steps to train and mentor qualified staff to replace these employees, ensuring that the Department will continue to be able to carry out its mission and deliver its services. Recognizing that approximately 82% of the Department's services are supported by grants, the Department systematically reviews grant compliance, with Bureau Chiefs

Strengths

responsible for providing the Director with a list of their program area grants and a schedule to monitor these grants. As a result, the Department has never lost a grant due to non-compliance. Monthly management, quarterly team meetings, and peer reviews are also held to discuss progress and issues impacting service delivery. With these actions, the Department is positioned to sustain its services for the future and achieve its vision of "Delivering Excellence Every Day."

- Senior leaders communicate key decisions, encourage two-way communication, and take an active role in reward and recognition programs to create a focus on action to accomplish its objectives through group meetings of line managers, Management Team meetings, case reviews, and meetings held with employees on a monthly, quarterly, and annual basis. Key decisions are communicated through memoranda and written policies. Employees at all levels have many opportunities available to them to receive feedback and to provide input for changes or improvements. For example, employee suggestions were implemented related to the four-day work week, client transport, the refugee monitoring program, making computers available for use by clients, and the installation of a computer lab to allow students to do E-Choice Assessments. In addition, communications are made available to internal and external stakeholders through fliers, reports, and e-mails. Senior leaders take an active role in employee recognition and rewards by: sending certificates of appreciation to employees who achieve five outstanding evaluations; giving gift certificates for performance; and sending congratulations letters to employees who receive promotions. The reward and recognition program includes nominations from the Bureau Chiefs for excellence in direct and indirect service delivery and unit accomplishment.
- The Department reviews and achieves management and fiscal accountability and independent internal and external audits through budgetary processes, policies and procedures, and adherence and compliance to performance standards related to the requirements of grants. Management accountability is achieved through annual performance appraisals for all employees, and by performance discussions on a weekly, quarterly, or monthly basis. During these meetings, process owners are required to discuss plans for improved performance for "yellow" and "red" performance indicators. These indicators signify an objective is in jeopardy of not being met or has not been accomplished. Fiscal accountability is accomplished through budget projections and quarterly variance reporting aligned with the policies and procedures identified in the Resource Allocation Plan. Internal and external audits are conducted on all grant performance. Audit results are reviewed, and corrective action plans are developed to respond to the audit findings. The Department's leaders also serve on numerous advisory boards and task forces to allow representation of stakeholder interests.
- The Department anticipates current and future concerns, and prepares for these concerns in a proactive manner by keeping a "pulse on the community" through a series of meetings, forums, reviews, and outreach programs. Concerns for the Department include achieving grants, securing funding sources for services, diminishing resources due to budget cuts, and the move to privatization. These concerns are addressed proactively by participating in focus groups, monthly

Strengths

stakeholder meetings, advisory board meetings, and responding to constituent requests. Information is collected from these meetings and used to develop plans to ensure the community's needs are met. The Department maintains direct contact with its constituents to understand first-hand and respond to their current and future concerns. Work plans with specific targets are developed, shared, and implemented to mitigate impact when adverse events take place. For example, when a change in eligibility requirements significantly impacted the Voluntary Pre-Kindergarten program, the Department was able to enroll 18,000 eligible four-year olds in a sixty-day period by redeploying existing manpower.

- The Department supports and strengthens its key communities through participation in community events targeting its various client groups. For example, the Department participates in events such as a United Way campaign, community-wide fairs, and corporate runs. It also provides support to a number of charities including the March of Dimes, the Kidney Foundation, various domestic violence programs, and the Heart Institute. The Department's services are deployed and delivered to support these communities, with an emphasis on the most needy within the population that it serves, especially children, persons with disabilities, veterans, domestic violence victims, and refugees.

Opportunities For Improvement

- The Department's senior leaders do not systematically create an environment for performance improvement. For example, the Department has a number of meetings to discuss performance, but these meetings do not provide staff with opportunities for analysis and the identification of root causes necessary to implement performance improvements. Improvement initiatives that are developed are not systematically implemented or deployed to all levels, and are not prioritized based on significance or resource availability. As a result, the Department may find it difficult to achieve and maintain its principal success factor of performance quality improvements, and may not be able to meet its strategic goal to improve access to services and information.
- The Department's senior leaders do not have a set of performance measures for review across each customer group and service segment to inform them of needed action. For example, senior leaders regularly review the Active Strategy Enterprise performance monthly, with the focus on the "red" indicators. However, there is not a balanced set of measures used by the leadership team to determine the overall health of the organization. There are no measures of improvements in productivity, no Human Resource measures, no measures related to the reduction in cycle time, or actions required to accomplish the Departments strategic objectives. Further, beyond the grant requirements, there are no measures by which senior leaders can review the delivery of services provided for each of its direct service components: Child Development Services; Elderly, Disabled, and Veteran Services; Rehabilitative Services; and Targeted Services. In addition, the performance measurement system does not include the performance of vendors, providers, and competitors. The lack of such measures may make it difficult to ensure that the Department is able to successfully respond to the needs of troubled and vulnerable citizens.

2.0 Strategic Planning

The **Strategic Planning** Category examines how your organization develops strategic objectives and action plans. Also examined are how your chosen strategic objectives and action plans are deployed and changed if circumstances require, and how progress is measured.

Scoring Range: 10% - 25%

Strengths

- The Department has implemented a planning process designed to identify local priorities and actions needed to align to the County's Strategic Plan. The planning session begins with several focus groups that were designed to create any local initiatives necessary to meet the objectives identified in the Health and Human Services Initiative of the County's Strategic Plan. The Department also re-evaluates previously established priorities for their alignment with these high-level objectives. To develop its Business Plan, the Department outlines a series of key performance objectives, outcomes, and initiatives. Management team meetings are held monthly to review the program scorecards for performance relative to these initiatives, with a focus on any indicators failing to meet targets necessary to maintain funding. All staff are made aware of the Department's Business Plan through regular monthly meetings, held at all levels, and through the posting of the Business Plan on the County's website.
- The Department identifies its strategic challenges from the input of key stakeholders, client surveys, secret shoppers, County Commissioners, and legislative actions. Key strategic challenges include the threat of privatization and a continuous reduction in funding. In collaboration with social service providers, other government entities, and public and private funders of social services throughout the community, the Department has developed internal objectives to address these challenges. For example, through collaboration with partners providing complementary services, the Department identified the need to provide a continuum of services in a single location as a strategic challenge. To meet this challenge, the Department developed the Coordinated Victims Assistance Center, providing a "one stop" approach to social services. Regular monthly meetings are used to ensure that sufficient funding sources are available to meet these challenges, and that the Department has maintained the necessary partnerships within the community to allow for a seamless delivery of services to its customers.

Opportunities For Improvement

- The Department does not use the Business Planning process to address strengths, weaknesses, opportunities, and threats; shifts in technology or competitors; or the ability to execute the plan. For example, the Department reviews grant compliance during its planning process, but these reviews do not provide the Department with the historical perspective to consider other planning factors such as improvements in technology, legislative changes, or funding limitations. Although previously-established initiatives are reviewed to determine their applicability in the upcoming year, these

Opportunities For Improvement

initiatives have not been systematically evaluated to determine their success at meeting the goals identified in the Business Plan. By not addressing all planning, environmental, and other factors in the development of its Business Plan, the Department may not have the information necessary to ensure sustainability in an environment threatened by cuts in funding and the potential for privatization of social services.

- The Department does not have a systematic process for identifying its strategic advantages. Although collaboration and community relationships have been identified as significant advantages, there is no defined process by which these advantages were determined and validated. The Department relies on the experience and knowledge of its workforce to ascertain its advantages, but does not regularly validate these assumptions or use data to ensure that these perceived advantages actually provide a strategic edge when considering other providers of the same or similar services. The lack of such a process may limit the Department's ability to "reinvent itself" by not adequately considering its full potential in leveraging these strengths to secure future grants, meet budgetary requirements, and continue to attract and retain a highly qualified workforce.
- The Department has not developed short or longer-term objectives with timetables to accomplish these objectives. For example, broad objectives, such as increasing school readiness and improved communication, are identified by the County as being short-term objectives. Although each Bureau within the Department takes ownership of one or two of these objectives, there are no specific plans developed and no timeframes established to meet these over-arching objectives. In addition, the Department does not have a systematic process to develop its own objectives should fluctuations in grant requirements require the creation of new objectives and plans for the accomplishment of these changes. As a result, the Department may not be able to adapt to environmental or legislative changes, and may find it difficult to meet its strategic challenge to continually adjust service delivery to conform to modifications in funding streams.
- The Department does not develop or deploy action plans, including human resource plans, to achieve short and longer-term strategic objectives. While resource allocation plans are used to ensure financial resources are available to meet grant objectives, the Department does not develop action plans to support its strategic objectives. Although the Department has indicated that action plans are included in policy and procedure manuals, these manuals do not include timetables for accomplishing objectives, nor do they include assigned responsibility for carrying out the objectives. Without an approach to develop and deploy action plans in support of strategic objectives, the Department may not be able to align its community needs with available grant funding, align its human resource plans with its Business Plan, or establish priorities for the delivery of its services.

3.0 Customer and Market Focus

The **Customer and Market Focus** Category examines how your organization determines the requirements, needs, expectations, and preferences of customers and markets. Also examined is how your organization builds relationships with customers and determines the key factors that lead to customer acquisition, satisfaction, loyalty, and retention, and to business expansion and sustainability.

Scoring Range: 10% - 25%

Strengths

- The Department identifies its customers through a review of grant requirements and the development of systems to meet the needs and requirements included in the grants. For example, the Early Learning Coalition, through the requirements of its grants, specifies the eligibility criteria for children served by Child Development Services and provides the Department with clearly defined customer groups. In addition, customers are identified through the regular provision of services utilizing a system of referrals to and from other social service providers. During the intake procedure for all programs, clients are assessed for needs the Department is not able to provide, and are referred for other service providers as needed. Reciprocally, this process provides the Department with its own source of customers through referrals from other agencies including the South Florida Provider Coalition, the Department of Children and Families, and the Florida Council on Aging. Lastly, the Department identifies customers by regularly meeting with stakeholders in the community during public forums, focus groups, and other meetings.
- The Department builds relationships to acquire customers, build loyalty, and ensure repeat business through various methods. The Department has established formal and informal relationships with outside agencies to receive referrals and support for its programs. For example, at its Coordinated Victims Assessment Center, the Department has established a systematic process to refer victims of violent crimes to: housing and/or shelter assistance; legal assistance for immigration; help with filing Orders of Protection; crisis counseling; parenting classes; and financial, vocational, and work-related assistance. Management and staff promote the vision of "Delivering Excellence Every Day," and strive to exceed expectations in service to their customers.
- The Department enables the public to conduct business and seek information through a variety of printed and electronic media designed to promote public awareness regarding services offered. For example, through regular customer interaction within the Haitian community, employees saw that a portion of this population exhibited reading deficiencies, and that the Haitians preferred receiving communications regarding services being offered via the radio. As a result, the Department developed a series of radio advertisements in Creole to promote its services and provide information to the community. To improve access to information, and to remove the potential for barriers, customers are paired with a staff member of the same culture and language. In addition, information can be obtained through the parent organization's 3-1-1 hotline, which provides a single point of contact for all County services. Printed information, brochures, and flyers are available in English, Spanish, and Haitian Creole.

Opportunities For Improvement

- The Department does not use its voice of the customer data to address the needs, requirements, and changing expectations of its customers, or to identify opportunities for innovation. For example, the Department has implemented a number of methods to gather information from its customers, such as participation in community boards, Secret Shopper surveys, and letters from customers. However, the Department relies on anecdotal employee knowledge to identify the needs of its customers, rather than the use of a systematic process to analyze or otherwise use information gathered through its various sources to identify new or changing customer needs, requirements, and expectations. The lack of such a process may inhibit the Department's ability to anticipate changes in its customer environment and proactively address needs and requirements through new or modified service delivery systems, and may make it difficult to meet its strategic challenges of increasing utilization of health and human services.
- The Department does not systematically determine key customer contact requirements, or ensure that these requirements are deployed to all people and processes involved in the customer response chain. While the Department has a number of access mechanisms including the internet, a 3-1-1 hotline, and in-person, customer contact requirements are not defined and tracked for each of these methods and locations. For example, the Department mandates that customer contact is required within 24 hours from the time of a request for services, but this requirement is not measured, and the Department has not performed any analysis or validation to ensure that this time frame meets the needs of customers within each program. Without a consistent method to identify and deploy its customer contact requirements, the Department may appear to be non-responsive to its customers' needs and could risk a loss of customer loyalty and repeat business.
- The Department does not have a systematic method to manage customer complaints and learn from them. There is no consistent process to ensure timely and accurate complaint resolution or to ensure that complaints from the Department's numerous access points are managed. The Department requires that units tabulate complaints, but there is no analysis or segmentation to allow the Department to sufficiently understand the reasons for complaints and to use this information to take action to minimize or eliminate complaints. For example, Child Development Services has an ombudsman who investigates complaints that have been escalated, but the investigation focuses on resolution information and does not address the cause of the complaint. Other Bureaus within the Department do not have a similar function and have no systematic approach for complaint management. Without an effective system to use complaint data to examine, and ultimately improve work processes to better meet the needs of its customers, the Department may find it difficult to maintain its competitive position at the forefront of social service delivery, and may be challenged with sustainability in an environment of increased privatization.
- The Department does not systematically determine customer satisfaction or dissatisfaction or use customer information to implement improvements. For example, information has been gathered from the use of the Secret Shopper Program and a

Opportunities For Improvement

customer satisfaction survey, but there is no process to aggregate or use satisfaction and dissatisfaction information in the development or refinement of the Department's various service delivery systems. The Department does not use feedback received from the various customer listening posts to identify the factors contributing to customer dissatisfaction, and does not implement changes to eliminate these issues. In addition, the Department does not evaluate customer satisfaction relative to local or benchmark social service agencies, and as a result, is not able to fully understand how its customer satisfaction levels compare with other providers, which may have an impact on its competitive position. As the provider of last resort, the lack of a systematic approach to determining customer satisfaction may limit the Department's ability to maintain a customer base sufficient to meet its grant requirements and continue to receive grant funding necessary for sustainability.

4.0 Measurement, Analysis, and Knowledge Management

The **Measurement, Analysis, and Knowledge Management** Category examines how your organization selects, gathers, analyzes, manages, and improves its data, information, and knowledge assets and how it manages its information technology. Also examined is how your organization reviews and uses reviews to improve its performance.

Scoring Range: 10% - 25%

Strengths

- The Department selects performance data based on its various funding sources and through its Business Planning process. For example, the Department participates in the County's strategic planning process and conducts an internal Business Planning process to identify the services necessary to meet the objectives of the County's plan. The Department then reviews grant programs for alignment to these objectives, and identifies the performance measures necessary to ensure the requirements of these grants are met. The grant requirements and related performance measures necessary to meet the overall objectives are documented in the Business Plan and shared with staff at all levels.
- The Department manages information resources to ensure the continued availability of data and information and hardware and software systems in the event of an emergency through a contract with the Enterprise Technology Services Department (ETSD). For example, ETSD provides full-time liaison staff to ensure information is available, secured, and updated on an ongoing basis. In addition, the Department ensures back-up of both a hard copy and an electronic file of essential information that remains in a safe and secure off-site location in the event of a systems failure, and provides training and helpdesk support for staff. The Department also uses an uninterrupted power supply in the event of an emergency that protects all mission critical computers.
- The Department ensures the security and confidentiality of data, information, and knowledge through the relationship and technical support it receives from the Financial Accounting Management Information System and the helpdesk personnel from the Enterprise Technology Services Department. Organizational data and information are secured through the use of employee access codes and passwords. Firewalls and virus protection software prevent unauthorized access to confidential data. In addition, Department policy requires that information and records related to its clients are limited to purposes directly connected with the individual service area. By limiting access to confidential information, the Department can ensure that client records are used solely in connection with the provision of services.

Opportunities For Improvement

- The Department does not systematically use key performance data to track overall daily operations. The Department selects performance measures based on the service delivery goals set through the County's Strategic Plan and its own Business Plan.

Opportunities For Improvement

However, there is not a balanced set of performance measures that are reviewed to track, monitor, and evaluate organizational performance. Instead, the Department's review of performance is focused on an evaluation of grant and program-specific measures that are not meeting target. This measurement system does not include a systematic review of overall operational performance, including cycle-time measures and measures related to customer requirements. Without a process to identify and track key performance measures, the Department may not be able to successfully prioritize its resources to meet the needs of all customers.

- The Department does not select and use key comparative and competitive data and information to support operational and strategic decision-making and innovation. For example, the Department has access to comparative and competitive data and information from similar national and international child and family services and behavioral healthcare organizations, including public and private social service agencies in the state of Florida and in the United States. The Department does not take advantage of these resources to identify best practices or review its organizational performance in comparison to competitors or benchmark organizations that offer the same services. Without a process to select competitive and comparison data, the Department may not be able to ensure performance at a level necessary to maintain its competitive position and secure adequate grant funding.
- The Department does not analyze organizational performance and use the information to set priorities for improvement. For example, the Department conducts a series of reviews at various levels, but these reviews do not regularly lead to more in-depth analyses, nor do they allow the Department to gain an understanding of operational performance and the countermeasures required for performance improvements. In addition, the Department does not perform analyses of its competitive environment, customer-related problems, complaints, or other feedback provided through its listening mechanisms. Without a systematic process for analyzing performance data and using the results of those analyses to drive improvement, the Department may find itself unable to compete in a competitive environment challenged by privatization and limited resources.
- The Department does not ensure the accuracy of data, information, and knowledge. For example, several of the results reported by the Department included data that the Department later realized was not accurate: the summary of invoices processed by the Child Development System; domestic violence victims successfully received advocacy and referral services; consumer satisfaction surveys; Expenditures: Total (Human Services), and Revenue: Total (Human Services). Although the use of case reviews provides some data validation, there is no systematic process to ensure that data input into the Active Strategy System is accurate. The publication of these measures may not provide a true picture about the performance of the Department to stakeholders, and may not provide the information necessary for the Department to manage and prioritize its actions.

Opportunities For Improvement

- The Department does not systematically manage organizational knowledge to collect and transfer workforce knowledge, to quickly identify best practices, and to use in its business planning process. For example, both the Treatment Alternative for Street Crime and the Child Development Services programs conduct daily and monthly audit reviews of the case files to ensure the validity and accuracy of data collected during the assessment process. While the results of these reviews are shared within each work unit, and process improvements are often implemented, there is no system to share these results or improvements with other work units. Thus, potential best practices remain isolated within individual work units, and higher-level plans for strategic or business objectives do not take advantage of the lessons learned at the unit level. Without a systematic process to collect and share this information, the Department may not be able to effectively leverage its strategic advantage of having an experienced and qualified workforce aimed at delivering quality customer service.

5.0 Workforce Focus

The **Workforce Focus** Category examines how your organization engages, manages, and develops its workforce to utilize its full potential in alignment with the organization's overall mission, strategy, and action plans. Also examined is your organization's ability to assess workforce capability and capacity needs and to build a workforce environment conducive to high performance.

Scoring Range: 30% - 45%

Strengths

- The Department fosters a culture conducive to a motivated workforce to accomplish cooperation and effective two-way communication through formal and informal methods. Performance evaluations, cross-training, e-mails, and an employee suggestion program provide a systematic mechanism for two-way communication. The "Open Door" policy provides opportunities for feedback for employees. Regular meetings, such as management team meetings, 150 supervisors' group meetings, personnel committee meetings, Active Strategy Enterprise meetings, and labor/management meetings allow the Department to share information, skills, and knowledge with employees at varying levels. For example, the rehabilitation counselors hold weekly summary meetings to discuss any new trends they are experiencing with their clients. These meetings also include supervisors and program managers, who ensure that this information is shared with other units and locations within their program. These communications enable the Department to convey, clarify, and reinforce its vision, mission, guiding principles, and strategic objectives to employees.
- The Department's workforce performance management system supports high performance work through its performance evaluation process and various awards programs. The expectation for performance excellence is instilled in new employees during the mandatory County and Departmental new employee orientation programs, which introduce new hires to the Department's performance expectations and requirements for regulatory compliance. The Department's workforce performance management system includes monthly supervisor counseling sessions and annual performance appraisals, which not only provide for a review of employee performance, but also provide staff with encouragement and direction for further self-development. In addition, programs such as IDEA, where employees can earn a portion of the savings attributed to their efficiency suggestions, and the County's Special Recognition Award program, provide incentives for employees to strive to achieve excellence.
- The Department offers a development and learning system for leaders through the County's Professional Development Program, with a focus on personal leadership attributes and ethical business practices. This program includes classroom and scenario-based training in leadership, motivation, delegation, problem solving, and employee recognition. New and potential supervisors also have an opportunity to develop skills in meeting management, conducting performance appraisals, team building, and conflict resolution. Additional training programs include: online ethics training, service excellence training, and the County's Mid-Manager Leadership Development Training.

Strengths

- The Department manages the workforce to accomplish its work and address changing business needs through the use of job descriptions that are aligned to the needs and challenges identified in the Business Plan. Job descriptions and performance appraisals are reviewed routinely by personnel services and respective bureau chiefs to validate applicability and ensure individual job duties and their related performance measures allow the Department to meet its most critical needs. To address shrinking resources, a majority of staff have been cross-trained to function effectively in multiple roles to effectively meet organizational needs. For example, a recent change in requirements within the Child Development Services Bureau led to a significant workload increase. To meet this need, staff from throughout the Department were cross-trained and redeployed, ultimately ensuring that all contractual requirements were met.
- The Department ensures workplace health, safety, and security through compliance with regulatory standards set by federal, state, and local governments. All staff participate in training on health and safety procedures. The County's OSHA Safety Office periodically examines the workplace for compliance with applicable safety standards. Policies and procedures designed to ensure safety and security include: controlled entry access, injury and illness reporting, accident prevention, and the use of facility checklists to ensure readiness for a disaster. After each safety event, a report is issued to evaluate the effectiveness of procedures, with results being used to improve the current process. For example, to ensure employee safety after a crime occurred at one of the Department's sites, armed security guards were hired for all of the Department's facilities.

Opportunities For Improvement

- The Department has not determined the key factors that affect workforce engagement and satisfaction for different groups and segments. The Department conducted an employee satisfaction survey in 2007 and determined that 68% of staff indicated they were satisfied with their work environment, and 72% of staff were satisfied with the supervision and leadership. However, the Department does not have a process to determine whether these specific indicators are critical to overall employee satisfaction, or to evaluate the need for additional questions to measure employee engagement. In addition, the survey results have not been used to address differences in satisfaction between the workgroups and classifications such as Administrative, Professional, Para Professional, and Office Clerical. If the Department does not determine the key factors that affect workforce engagement and satisfaction for different groups and segments, it may risk losing personnel, and may not maintain its strategic advantage of an experienced and qualified workforce aimed at delivering quality.
- The Department does not have a process or procedure to evaluate the effectiveness of its workforce and leader development and learning systems. The Department conducts post course evaluations, primarily by surveying attendees' opinions on training content. Aside from the use of these surveys and other anecdotal information, there is no systematic review of the effectiveness of these programs in preparing employees for

Opportunities For Improvement

increased responsibility and continued employment. The Department does not monitor employees who have completed leadership training for their use of the skills gained in training, and does not validate that the skills learned provide a benefit to the individual or the Department. For example, the Department does not follow-up with employees who have completed the County's Professional Development Clinic Program to evaluate their success in obtaining a position of new or increased responsibility, to determine if there have been improvements in performance based on their new or reinforced skills, or to evaluate the ultimate return on investment of the program. Without such a system, the Department may not see the full benefits of its training resources and may face challenges as long-term staff retire or otherwise leave the department, especially in light of reductions in funding.

- The Department's assessment of workforce capability and capacity needs does not systematically consider volunteers and interns. For example, the Department relies on the Retired Senior Volunteer Program (RSVP) in its Elderly, Disability, and Veterans Services Bureau, to accomplish many of its necessary duties. In addition, a number of interns are used within the Rehabilitative Services Bureau, but the Department does not systematically consider these individuals in the evaluation of workforce needs, and does not have a systematic process to recruit or retain volunteer staff. With such a reliance on volunteers and interns to accomplish the Department's mission, lack of systems to adequately assess the need and plan for these staff may make it difficult to provide high levels of service especially when challenged by reductions in workforce due to decreased funding.

6.0 Process Management

The **Process Management** Category examines how your organization determines its core competencies and work systems and how it designs, manages, and improves its key processes for implementing those work systems to deliver customer value and achieve organizational success and sustainability. Also examined is your organization's readiness for emergencies.

Scoring Range: 10% - 25%

Strengths

- The Department determines its key work process requirements, incorporating input from customers and partners using a number of methods. Ongoing monitoring of services and interventions through customer satisfaction surveys and face-to-face, telephone, and email contacts with customers and business associates allows the Department to garner valuable information and provides insight that aids in the delivery of services to best meet customer needs. For example, case managers regularly ask their customers "what else do you need?", and look for critical points within their work processes at which referrals to other community services are necessary to meet customers' holistic needs. Client input is continually sought throughout the treatment process, and community partners are utilized when necessary to ensure client requirements continue to be met as situations change. In addition, client surveys help identify strengths, weak areas where improvements are necessary, and to frame future goals of the client. For example, input from its meal-delivery services clients has been used to try to make changes to meals delivered. Finally, methods of action are aligned with the requirements dictated by the Department's various funding sources, particularly grants, including Florida and county guidelines.
- The Department ensures workplace and work system preparedness in the event of an emergency through its Continuity of Operations Plan (COOP). Based on a template provided by the County's Department of Emergency Management, the COOP provides the needed direction for the Department to work with county, state, and federal agencies to respond and recover from emergencies and disasters. Since the Department provides the social services manpower throughout the county, the County's Emergency Operations Center (EOC) assists the Department in providing emergency response training for Department staff. The Department also complies with the County's overall plan which includes call down lists for contacting employees and their specific roles and responsibilities. Command posts are located in various sections of the county to keep open communications and to aid areas that are in the most need. Finally, email notifications of situations being monitored, such as tropical disturbances, are sent to staff on a regular basis to keep the Department aware of the current situation. This information is deployed throughout all workplace facilities on an as-needed basis and for rumor control during disaster preparedness.
- The Department uses Peer Case Reviews and Case Staffing Meetings to manage the results of work process goals. For example, Case Staffing Meetings are held regularly to discuss feedback from client services to determine whether client needs are being met and if not, how this shortcoming may be corrected. In addition, staff issues are

Strengths

discussed to alleviate barriers to work process goals, including topics from administration to resources that may be needed, to address current trends. For instance, through discussions at Case Staffing Meetings, staff recognized an increasing trend in the use of heroin within the community, particularly among former crack cocaine users. As information was shared among staff, objectives were identified to address developing issues from this new phenomenon. Requests were then submitted to obtain the financial resources necessary for staff to manage these new cases.

Opportunities For Improvement

- The Department does not have a process to determine its core competencies. The Department has defined its core competencies as a broad spectrum of services to the County's needy population including those delivered to children and families, behavioral assessment services, a holistic approach to child development services, grant funding, and intensive training for staff. However, the Department does not have a systematic process to evaluate its competitive position and to use this analysis to determine those aspects of its service delivery system that provide it with an advantage. In addition, there is no process where these broad service competencies are used in the evaluation and development of action plans designed to meet the Department's mission and strategic objectives. Without a current understanding and validation of the areas that provide its competitive advantages, the Department may not be able to sufficiently prioritize resources to meet its grant requirements and the needs of its customers.
- The Department does not have a systematic approach to design and coordinate its work systems to develop, produce, and deliver services to the customer. The Department evaluates the needs of the community and seeks programs readily available to meet those needs. However, this process does not include analysis of information gathered from the evaluation of requirements to determine if work system changes or new or improved work processes would allow the Department to meet requirements not met by current work systems. For example, the Department has determined a need within the migrant community for farmworkers to find employment outside of the agricultural industry, and then determined that this customer requirement could be met within its Targeted Services Bureau. However, when limited funding restricted the number of participants within the farmworker employment program to only 51 per year, the Department did not look to redesign its work system or innovate current processes to more fully meet this community need. Without a systematic approach to coordinate work systems and processes with customer needs and requirements, the Department may lack the agility necessary to sustain and improve access to services for the customers they serve.
- The Department does not have a method to relate key work processes to its core competencies. Although the Department has identified a number of broad activities as key work processes, such as identifying the target population, prioritizing customer needs, establishing a viable funding source, and the formation and maintenance of sound business partnerships, the Department has not identified its core competencies, areas of competitive advantage, and developed processes designed to take advantage

Opportunities For Improvement

of those strengths. For example, the Department has seen significant benefit from its network of business relationships, and is able to meet the holistic needs of many of its customers by taking advantage of these relationships. However, the Department does not have defined processes to maintain and improve these relationships, or seek out new partnerships when the need dictates. With sustainability threatened by privatization, and a number of state and federal human services agencies competing for the same grant dollars, the lack of a system to identify and develop work processes aligned to, and leveraging, core competencies may prevent the Department from providing the level of service necessary to maintain its position at the forefront of social service delivery.

- The Department does not have a process to systematically improve or innovate work processes to improve products and services and ensure that processes meet design requirements. For example, as part of its Council on Accreditation requirements, the Department holds Performance and Quality Improvement (PQI) meetings as part of its overall performance improvement system. PQI meetings provide a forum to share information between the Director's Office, Management Team, and other areas throughout the Department. However, the PQI system does not demonstrate a systematic method of reviewing the Department's work processes to ensure they meet design requirements or to identify root causes and develop countermeasures necessary for process improvement and innovation. As a result, some process improvement initiatives are isolated and not deployed throughout the Department. For example, work process flow charts were created by staff at the Mail-in Re-Determination Unit. With the assistance of unit staff, the analysis of these flow charts helped improve the work processes for "Rede Packages" and the Mail-In Re-determination Process. However, a uniform process review method, such as this, is not used in other units in the Department, nor does the Department take advantage of lessons learned to improve processes in other areas. Without a systematic method to innovate and improve work processes, the Department may lack the agility to continue to meet grant requirements necessary to secure funding in an environment of budget reductions and threats of privatization.

7.0 Results

The **Results** Category examines your organization's performance and improvement in all key areas – product and service outcomes, customer-focused outcomes, financial and market outcomes, workforce-focused outcomes, process-effectiveness, and leadership outcomes. Performance levels are examined relative to those of competitors and other organizations providing similar products and services.

Scoring Range: 10% - 25%

Strengths

- Results for product and service performance important to customers show sustained or improving levels of performance during the past fiscal year.
 - Beginning with fiscal year of 2007-08, *Persons with Disability Receiving Independent Living Services* (Figure 7.1-3) has improved in each quarter, from 55 in the second quarter to 418 in the fourth quarter.
 - Measures related to child care services, including *Summary of Children Served for Child Care by DHS* (Figure 7.1-8), which has remained over 42,000, and *Summary of Children Processed by DHS for Child Care* (Figure 7.1-9), with as many as 136,395 children processed in a quarter, have seen sustained levels of performance throughout the 2007-2008 fiscal year.

- Some results for customer satisfaction, dissatisfaction, and loyalty show sustained levels of performance during the past five fiscal quarters, FY 2007-2008 and the first quarter of FY 2008-2009
 - *Customer Satisfaction with Service Delivery* (Figure 7.2-1) shows performance sustained above 95% for each of the past five quarters, with a score of 100% in the third quarter of fiscal year 2007-08.
 - *Secret Shopper Score* (Figure 7.2-2) has maintained a score of 3.6 out of 4 for each of the five quarters.

- Some results for financial performance have shown sustained levels of performance during the past five fiscal quarters, FY 2007-2008 and the first quarter of FY 2008-2009
 - *Summary of Invoices Processed by DHS* (Figure 7.3-1) indicates sustained levels of performance, overall increasing during the past 12 months, from 15,274 to 16,218 in the most recent completed quarter.
 - Total expenditures have remained within 10% variance as required by the county as shown in *Expenditures: Total (Human Services)* (Figure 7.3-2).

- Leadership results related to compliance for the Council on Accreditation standards show sustained or improving levels of performance during the past fiscal year.
 - *Number of Individuals Placed in Treatment in Accordance with Assessment* (Figure 7.6-1) shows sustained levels of performance, between 149 and 170, throughout fiscal year 2007-2008 and substantially increased, due to increased funding, up to 2,053 in the first quarter of fiscal year 2008-2009.
 - *Farm Worker Migrants Employed – DHS ESB* (Figure 7.6-7) has seen sustained performance, commensurate with funding, during fiscal year 2007-

Strengths

2008 and the first quarter of fiscal year 2008-2009, ranging from 11 to 14 Migrants employed during the quarter.

- *Percent of Eligible Children Enrolling and Attending Child Care (Figure 7.6-9)* has seen performance improve from 94% to 99.9%, with sustained levels of performance above 99% for each of the last two fiscal quarters of fiscal year 2007-2008 and the first quarter of fiscal year 2008-2009.

Opportunities For Improvement

- Comparisons are not reported for any results, including key indicators of product and service performance important to customers, indicators of customer satisfaction, dissatisfaction, and loyalty, and indicators of leadership, such as:
 - *Meals Served through Meals on Wheels (Figure 7.1-20)*
 - *Applications Processed for Subsidized Child Care (Figure 7.1-21)*
 - *Consumer Satisfaction Surveys (Figure 7.2-3)*
 - *Number of Homeless Adults Completing Treatment and Remaining out of Jail for 30 Days (Figure 7.6-1)*

- Trend data are not reported for key indicators of product and service performance important to customers. For example, only two data points have been provided for *Meals Provided to Elders Directly by DHS (Figure 7.1-15)*, and *Domestic Violence Victims Provided with Shelter and Support (Figure 7.1-11)* only shows summary data for each of the past two fiscal years.

- Some levels, trends, and comparisons are not reported for product and service performance important to customers, including those listed by the organization as being regularly reviewed by senior management, such as accessibility of human services programs, utilization of neighborhood-based facilities, and access to services by people with disabilities and special target populations.

- Several measures of customer satisfaction, including all but one measure of Telephone Customer Experience (Figures 7.2-3 through 7.2-6) and all measures of In-Person Customer Experience have seen a declining level of performance during the time period measured.
 - *In-person Customer Experience - Overall, how satisfied were you with the level of professionalism and courtesy of the staff that provided you with assistance? (Figure 7.2-7)* decreased from 84% in June/July 2007 to 64% in May/June 2008.
 - *In-person Customer Experience - Overall, how satisfied were you with the reliability of the information you received? (Figure 7.2-8)* decreased from 78% in June/July 2007 to 65% in May/June 2008.
 - *In-person Customer Experience - Overall, how satisfied were you with the quality of the services you experienced? (Figure 7.2-9)* decreased from 78% in June/July 2007 to 64% in May/June 2008.

Opportunities For Improvement

- Trend data are not reported for key indicators of customer satisfaction, dissatisfaction, and loyalty. Results such as *Telephone Customer Experience* (Figures 7.2-4 through 7.2-6) and *In Person Customer Experience* (Figures 7.2-7 through 7.2-9) only provide two point-in-time results for June/July 2007 and May/June 2008.
- Levels, trends, and comparisons are not reported for indicators of workforce engagement, satisfaction, or workforce and leader development. For example, while the organization has established training and development programs for staff, there are no measures used to indicate the success of these development opportunities other than a basic count of staff completing the training. In addition, there are no results reported for employee engagement, satisfaction, or workforce climate.
- Levels, trends, and comparisons are not reported for indicators of the effectiveness of work systems and work processes. Although the organization has identified key processes that include prioritizing customer needs, identifying needed tools and resources, establishing a viable funding source and budget, ongoing monitoring and adjustments, and the formation and maintenance of sound business partnerships, there are no results reported to evaluate the effectiveness of these processes.