PSYCHIATRIC SECURITY REVIEW BOARD

Annual Performance Progress Report (APPR) for Fiscal Year (2014-2015)

Original Submission Date: 2015

Finalize Date: 9/30/2015

2014-2015 KPM #	2014-2015 Approved Key Performance Measures (KPMs)
1 a	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Adults
1 b	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Juveniles
2 a	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes - Adults.
2 b	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes- Juveniles.
3 a	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Adults.
3 b	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Juveniles.
4	CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.
5	BEST PRACTICES - Percent of total best practices met by the Board.

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
	Title: **Rationale:**

PSYCHIATRIC SECURITY REVIEW BOARD	I. EXECUTIVE SUMMARY

Agency Mission: The Psychiatric Security Review Board's mission is to protect the public by working with partnering agencies to ensure persons under its jurisdiction receive the necessary services and support to reduce the risk of future dangerous behavior using recognized principles of risk assessment, victims' interest and person centered care.

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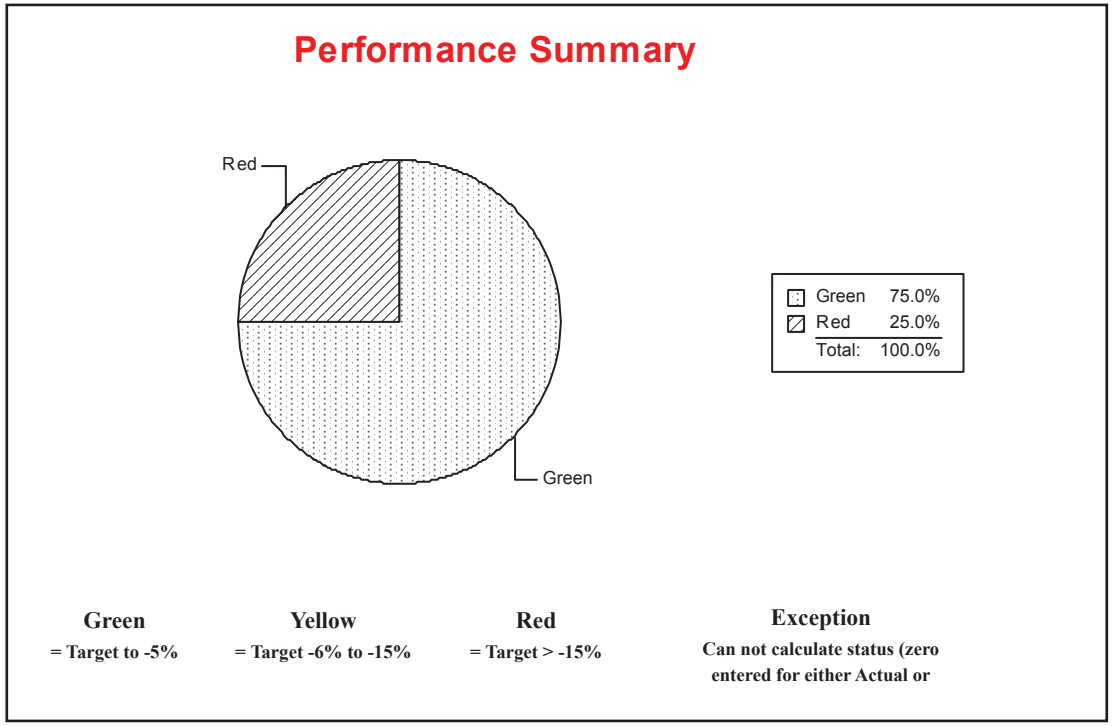


1. SCOPE OF REPORT

The Psychiatric Security Review Board is consolidated into one program that effectively provides statutorily required hearings for adult and juvenile clients and close supervision of those on conditional release in the community. The two aspects of the Board's program, hearings and monitoring, are addressed by the five reported performance measures. Recently, the Board was assigned several additional tasks by the Oregon legislature – gun relief hearings, sex offender relief/reclassification hearings and the supervision and monitoring of a new type of civil commitment. Given the small number of petitioners and civil

commitments, and the infancy of its implementation, the Board has not yet developed KPMs for these responsibilities.

2. THE OREGON CONTEXT

As the State's population continues to grow, so does the number of persons who require mental health services. When the demand for behavioral health services increases, but those necessary community services are reduced or eliminated or are not accessed for whatever reason, persons who are unsuccessful in managing their mental illness and unable to obtain needed help come to the attention of law enforcement personnel. In Oregon, the number of persons with mental health diagnoses involved in the criminal justice system has grown significantly as evidenced by the numbers housed in local jails and Department of Corrections' institutions. Once charged with a crime, historically a very small percent of defendants opt for the insanity defense and, usually by stipulation, are placed under the Psychiatric Security Review Board. The Board has been cited as a national model for the management and treatment of insanity clients. As a result, the 2007 Legislature created a Juvenile Panel to assume jurisdiction over youth who are found "Responsible Except for Insanity." In fulfilling its statutory mandate the Board's primary purpose is to protect the public. Thus, it serves a critical societal need and contributes to the high-level outcome measures #65 of the Oregon Benchmarks – Adult Recidivism and #66 - Juvenile Recidivism. Its work necessarily requires collaboration with a number of partners in both the criminal justice and mental health systems, including judges, district attorneys and defense attorneys as well as OHA's Addictions and Mental Health Division and DHS's Seniors and Persons with Disabilities Division, Oregon State Hospital, local mental health authorities, county and community mental health agencies and other treatment and residential providers.

3. PERFORMANCE SUMMARY

The summary chart indicates that the Board is exceeding the targets on its three critical measures. The former long-standing issue of timeliness of hearings reflects the consequence of inadequate Board staffing for many years. Recognizing the Board's performance in this area and its effect on the system as a whole, the 2011 Legislature allocated two new FTE to help address this issue. The timeliness of new adult hearings has jumped to 98% since additional staff was hired in the fall of 2011. Finally, the Board's Best Practices continues to improve since it began measuring this in 2008. The state recommended score card shows that the Board has a strong foundation in providing ethical and fiscally responsible oversight to this agency. The Board recognizes that now that it is adequately staffed, more staff resources can be allocated to improve its customer service performance.

4. CHALLENGES

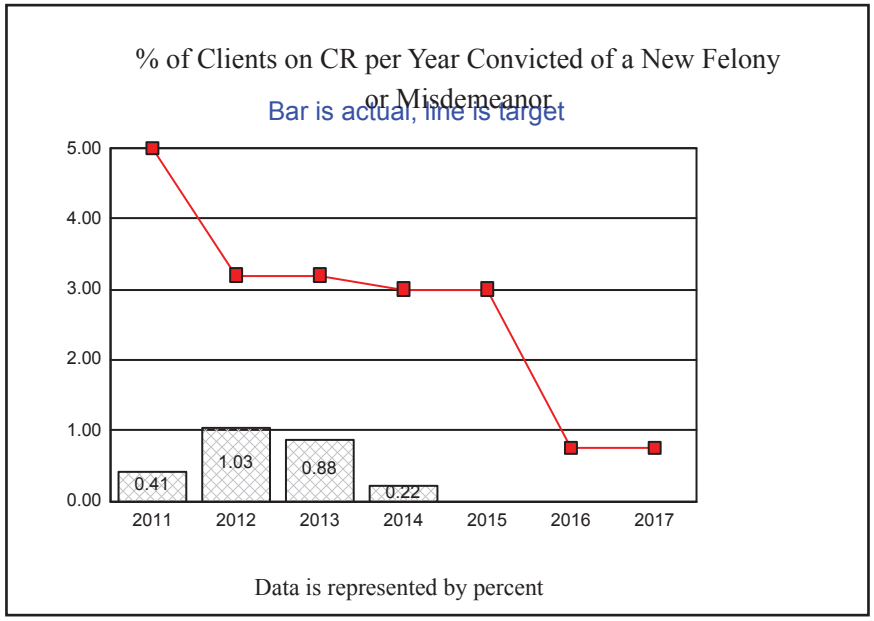
The Board anticipates continued pressure to increase the number of persons on conditional release as a result of the size of the new state hospital, the change in philosophy for its use, and this State's increased investment in community mental health residential resources. Currently, the Board has the highest percentage of its total clients on conditional release that it has ever had; 70% of its clients are on conditional release. Most changes to a client's conditional release order require Board action, be it at an administrative or full hearing. Due to the nature of the population the Board serves, it is by definition in the risk business. The more persons on conditional release, the greater the chance, at least statistically, of someone re-offending. Obviously, the Board does its utmost to mitigate that risk but it cannot be eliminated under our system. The same is true for the number who remain in the community each month. The greater the number on

conditional release, the more likely some may need to return to the hospital for more intensive treatment due to the very nature of mental illness and its symptomology or due to relapse of a co-occurring disorder.

5. RESOURCES AND EFFICIENCY

The Board's Legislative Approved budget amount for the 2015-17 biennium is $2,606,173.00. The reported measure that reflects efficiency is #02, the percentage of hearings scheduled within statutory timelines. The Board also keeps two other efficiency measures for internal tracking and management use.

KPM #1a	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Adults	1992
Goal	To protect the public.	
Oregon Context	Oregon Benchmark #65 - Adult Recidivism.	
Data Source	Agency records of Court Convictions, done quarterly	
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596	



1. OUR STRATEGY

The Board's strategy is to maintain public safety by engaging in effective decision-making regarding appropriate placement of its clients and the subsequent monitoring of those living in the community. Its partners in this endeavor include OHA's Addictions and Mental Health Division and DHS' Developmental

Disabilities Division; Oregon State Hospital and a host of community agencies and treatment providers.

2. ABOUT THE TARGETS

The Board originally set its target at 0% based on its statutory mandate. However, after discussion with the then Progress Board, it realized that that may have been a worthy goal but was unrealistic given this population so the target was increased each year, to its highest level of 5% between 2007 and 2011, due to the anticipated rise in the number of clients that would be conditionally released in the community. However, the 2012 Legislature began reducing the Board's target again, to 3.2% for 2012 and 2013, and to 3% thereafter.

3. HOW WE ARE DOING

At the end of June, 2014, the Board was supervising 391 adult clients on conditional release, most with a serious and persistent mental illness. This is the highest percentage of clients on conditional release in the Board's history. The low recidivism rate of 0.64% for adult clients, cumulative since 2011 when the Board began tracking the commission of felonies and misdemeanors committed by clients while on conditional release, is a testament to the Board's diligent oversight of these numerous clients and the agencies involved.

4. HOW WE COMPARE

The Psychiatric Security Review Board is a unique model for the management and treatment of those who successfully assert the insanity defense. There are no public or private industry standards for this population. The State of Connecticut established a system modeled after, but not identical to, Oregon's. For fiscal year 2012-2013, it reported a recidivism rate of 0%. It should be noted, however, that Connecticut's program only had 26 clients on conditional release as of June 30, 2013. The Oregon Board, on the other hand, had 381 clients on conditional release on that date. The Board would cite the Department of Corrections' second half of 2010 recidivism rate of 29.1% for parole/post-prison supervision and 23.5% for probation as the closest comparison to an agency in Oregon.

5. FACTORS AFFECTING RESULTS

The Board has created a variety of interventions to independently monitor both the status of its clients on conditional release and the efficacy of their community treatment providers. Staff corresponds with the mental health providers on a daily basis and advises them regarding clients who may be showing beginning signs of a mental health decompensation. Additionally, the Board has an agreement with the Oregon State Police's Law Enforcement Data Systems (LEDS) to be notified whenever a Board client is "run" by a law enforcement agency. Board staff then contacts that law enforcement agency and gets information about

the situation involving the client so appropriate interventions are implemented. Similarly, the Executive Director travels around the state of Oregon visiting the network of providers that has been established and trains their staff. However, these formal and informal methods of oversight are very labor intensive. Board staff have to be familiar with all clients on conditional release to be able to instantly respond to the variety of calls that come in. Staff must be able to summarize these communications with the varied parties in the community clearly and concisely to the Board. The Board also must keep abreast of a client's progress in the community for they are asked to make numerous decisions regarding the individual's status throughout the term of their jurisdiction. The Board is currently able to maintain its success on this measure. Although it is the Board's responsibility to make informed and effective decisions regarding the readiness of a client to return to live in the community without further violations of the law, it is extremely dependent on Oregon State Hospital to provide complete and accurate information on which to base those determinations. Further, the Hospital has to provide the client with the treatment and skills necessary to be successful in a community setting. In addition, the community agency overseeing the client on conditional release must provide the structure, support and supervision necessary for a client's successful reintegration. Finally, the Board relies on the Addictions and Mental Health licensing division to ensure minimum health and safety standards are met by the licensed residential facilities who serve our clients.

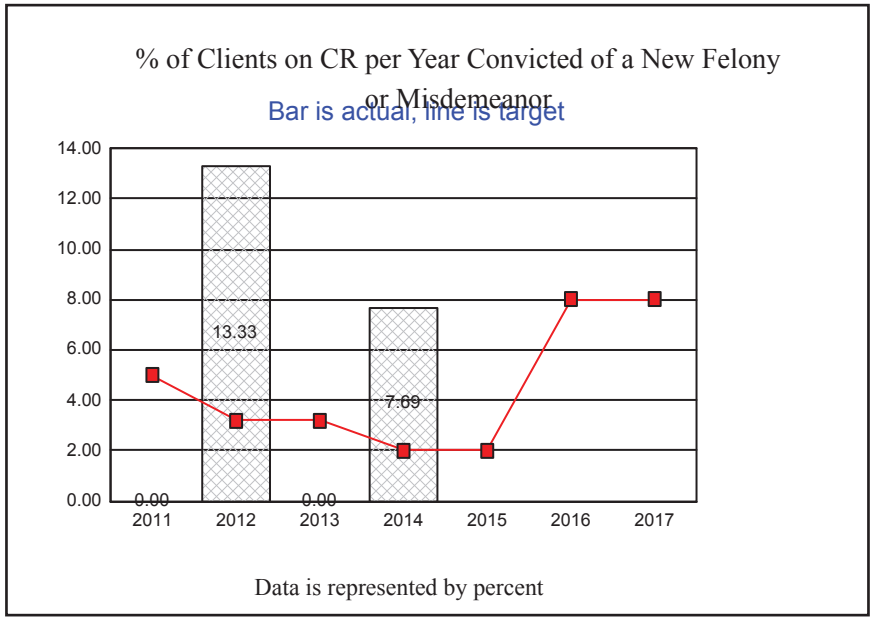
6. WHAT NEEDS TO BE DONE

Community mental health providers must have adequate funding to sustain a continum of care program to ensure clients remain stable and appropriate for CR.

7. ABOUT THE DATA

The reporting cycle is based on a calendar year. However, information regarding arrests is collected from correspondence the Board receives on a daily basis from County Mental Health workers, law enforcement personnel, and State and local Courts; conviction information is tallied on a quarterly basis from staff review of court conviction records as contained in LEDS, eCourt and OJIN.

KPM #1b	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Juveniles
Goal	To protect the public.
Oregon Context	Oregon Benchmark #66 - Juvenile Recidivism.
Data Source	Agency Records of Court Convictions, done quarterly.
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596



1. OUR STRATEGY

The Board's strategy is to maintain public safety by engaging in effective decision-making regarding appropriate placement of its clients and the subsequent monitoring of those living in the community. Its partners in this endeavor include OHA's Addictions and Mental Health Division and DHS' Developmental

Disabilities Division; Oregon State Hospital; Secure Adolescent Intensive Program (SAIP) at the Children's Farm Home; Secure Intensive Treatment Program (ITP) at Albertina Kerr and a host of community agencies and treatment providers.

2. ABOUT THE TARGETS

The target for this juvenile performance measure has historically been identical to the legislatively determined adult targets due to the similarity in programs. However for 2014 and 2015, it was lowered to 2%, which is one percent lower than the target for the Board's adult population for the corresponding years. As with the adult measure, the lower the actual percent, the better.

3. HOW WE ARE DOING

The Board supervised 18 juvenile clients as of June 30, 2014, ten of which were on conditional release. For two of the three previous years, the recidivism rate for juveniles under the Board's jurisdiction was 0%. However, in 2012, two youth were convicted of misdemeanor crimes committed while on conditional release. Because of the very small number of juvenile clients under its jurisdiction and an even smaller number on conditional release, the recidivism rate for 2012 was 13.33%. Since then, the Board has met this target.

4. HOW WE COMPARE

The Psychiatric Security Review Board is a unique model for the management and treatment of those juveniles who successfully assert the insanity defense. There are no public or private industry standards for this population. The Board would cite the Oregon Youth Authority's recidivism rates from 2010 of 21.6% probation and 30.8% for parole as the closest comparison to an agency in Oregon.

5. FACTORS AFFECTING RESULTS

The Board has created a variety of interventions to independently monitor both the status of its clients on conditional release and the efficacy of their community treatment providers. The youth, compared to its adult clients, have been diagnosed with far more complicated and vulnerable mental conditions. This, coupled with the normal brain development of youth and young adults makes this population very susceptible to impulse control issues and negative influences. Staff corresponds with the mental health providers on a daily basis and advises them regarding clients who may be showing beginning signs of a mental health decompensation. Additionally, the Board has an agreement with the Oregon State Police's Law Enforcement Data Systems (LEDS) to be notified whenever a Board client is "run" by a law enforcement agency. Board staff then contacts that law enforcement agency and gets information about the situation involving the client. This communication invariably leads to a discussion about how the client and his/her treatment provider are performing. Similarly, the Executive Director

travels around the state of Oregon visiting the network of providers that has been established and trains their staff. However, these formal and informal methods of oversight are very labor intensive. Board staff have to be familiar with all current clients on conditional release to be able to instantly respond to the variety of calls that come in. Staff must be able to summarize these communications with the varied parties in the community clearly and concisely to the Board. The Board also must keep abreast of a client's progress in the community for they are asked to make numerous decisions regarding the individual's status throughout the term of their jurisdiction. The Board is currently able to maintain its success on this measure. Although it is the Board's responsibility to make informed and effective decisions regarding the readiness of a client to return to live in the community without further violations of the law, it is extremely dependent on Oregon State Hospital and SAIP/ITP to provide complete and accurate information on which to base those determinations. Further, these facilities have to provide the client with the treatment and skills necessary to be successful in a community setting. In addition, the community agency overseeing the client on conditional release must provide the structure, support and supervision necessary for a client's successful reintegration. Finally, the Board relies on the Addictions and Mental Health licensing division to ensure minimum health and safety standards are met by the licensed residential facilities who serve our clients.

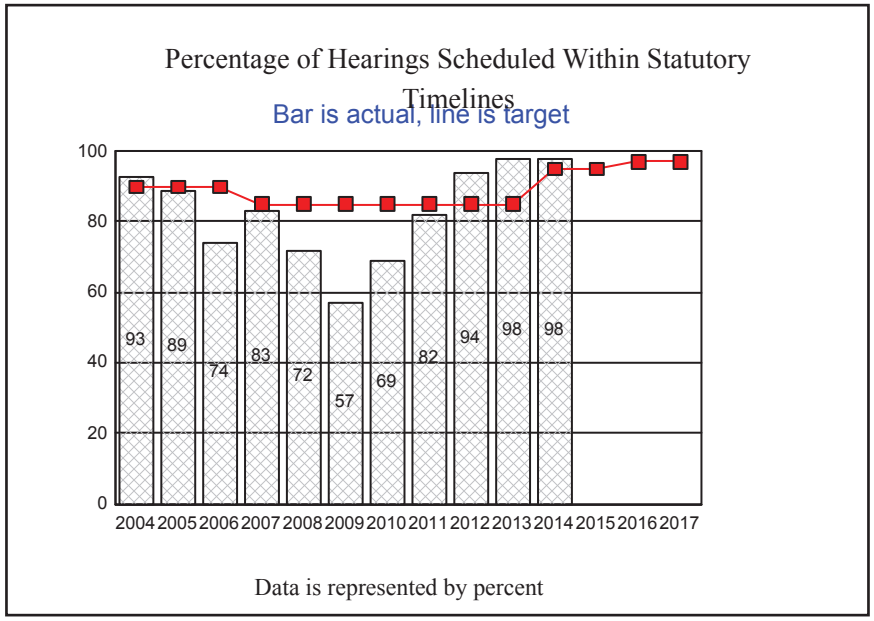
6. WHAT NEEDS TO BE DONE

The Board and staff need to continue their successful efforts to assure public safety by demanding adequate and accurate information from the State Hospital, SAIP and ITP staff and community treatment teams on which they can base these critical decisions.

7. ABOUT THE DATA

The reporting cycle is based on a calendar year. However, information regarding arrests is collected from correspondence the Board receives on a daily basis from County Mental Health workers, law enforcement personnel, and State and local Courts and conviction information is tallied on a quarterly basis from staff review of court conviction records.

KPM #2a	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes - Adults.	1992
Goal	To review client's progress in a timely manner and protect clients' due process rights.	
Oregon Context	Timeliness and Agency Mission	
Data Source	Agency records – hearing dockets and client files with pertinent dates.	
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596	



1. OUR STRATEGY

The Board's intent is to set each client's hearing within the required timelines set by statute. Staff maintain a running calendar outlining when each PSRB client's particular hearing is due which is utilized to set the weekly Board docket.

2. ABOUT THE TARGETS

The Board adjusted this target as well because its original goal was far too ambitious given the reality of the hearing schedule. The Board reduced it to what was thought to be a more reasonable figure. In this situation, the higher the percent, the better the Board has done.

3. HOW WE ARE DOING

In 2012, the Board exceeded its on-time target for the first time in seven years. As noted in the previous Annual Performance Progress Report, a DAS time study showed that staffing levels prior to 2011 were insufficient to meet the demands for hearings. The 2011 Legislature realized this and allocated two new FTEs to assist the Board in meeting this performance goal. Since the hiring of this staff, performance of this measure increased to 98% in 2013.

4. HOW WE COMPARE

Given the unique nature of the PSRB and its operations, the Board is not aware of any comparable public or private industry standards.

5. FACTORS AFFECTING RESULTS

The Board's more recent targets reflect the fact that there will always be a percentage of hearings that cannot be held in a timely fashion. Timeliness is often affected by circumstances outside the Board's control. The demand for hearings is directly related to the number of clients placed under the Board's jurisdiction and whether or not clients request hearings. The Board has no control over either of these variables. Additionally, hearings cannot be conducted without treating psychiatrists being available to testify, as well as the timely submission of reports and evaluations generated by outside agencies.

6. WHAT NEEDS TO BE DONE

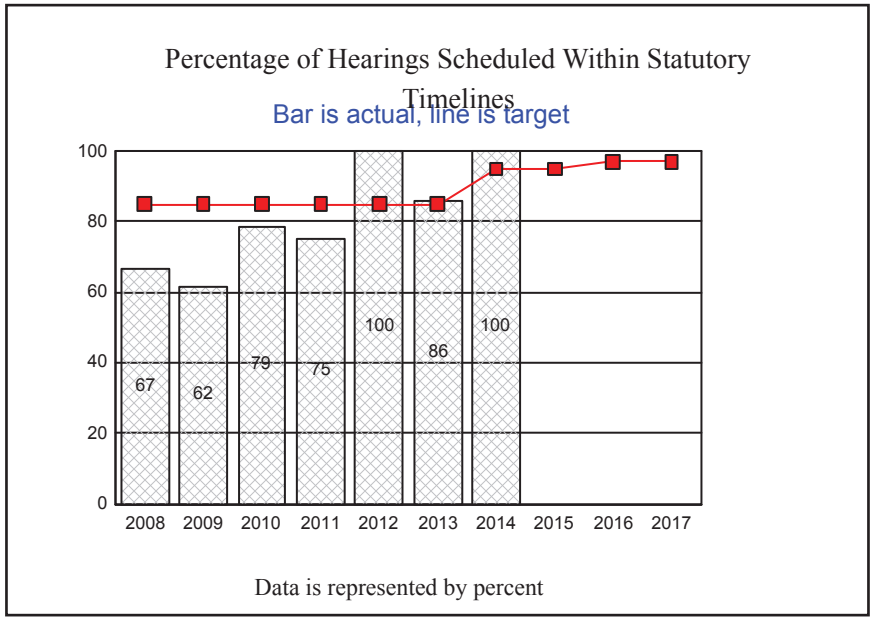
Board staff continue to diligently use LEAN practices inside the agency as well as with community providers and hospital staff to ensure that necessary documentation and witnesses are available for hearings. Ongoing evaluation and improvement in this arena will ensure that the Board continues to meet this performance measure. PSRB staffing should remain at the current level in the next biennium.

7. ABOUT THE DATA

The reporting cycle for this measure is the calendar year. However, the data is collected weekly and tallied on a quarterly basis from the calendar and

computer reports generated that outline when each client's particular hearing is due.

KPM #2b	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes- Juveniles.
Goal	To review juvenile client's progress in a timely manner and protect clients' due process rights.
Oregon Context	Timeliness and Agency Mission
Data Source	Agency records – hearing dockets and client files with pertinent dates.
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596



1. OUR STRATEGY

The Board's intent is to set each client's hearing within the required timelines set by statute. Staff maintain a running calendar outlining when each PSRB client's particular hearing is due which is utilized to set the weekly Board docket.

2. ABOUT THE TARGETS

The target for this juvenile performance measure is identical to the adult target due to the similarity in the hearing process. In this situation, the higher the percent, the better the Board has done.

3. HOW WE ARE DOING

The Board is currently exceeding its designated target by holding the vast majority of hearings on-time. This is a significant improvement from 2008-2011 when the Board failed to meet its 85% target.

4. HOW WE COMPARE

Given the unique nature of the PSRB and its operations, the Board is not aware of any comparable public or private industry standards.

5. FACTORS AFFECTING RESULTS

The Board's historical targets reflect the fact that there will always be a percentage of hearings that cannot be held in a timely fashion. The demand for hearings is directly related to the number of clients placed under the Board's jurisdiction. With only 18 youth under its jurisdiction as of June 30, 2014, the Juvenile Panel meets on average only once per month. If a particular hearing deadline does not sync with the monthly hearing schedule and cannot be considered the prior month, it is counted as late, and even one late hearing can significantly affect the timeliness percentage for a given year. Despite this, most juvenile hearings are typically conducted within the statutory time frames.

6. WHAT NEEDS TO BE DONE

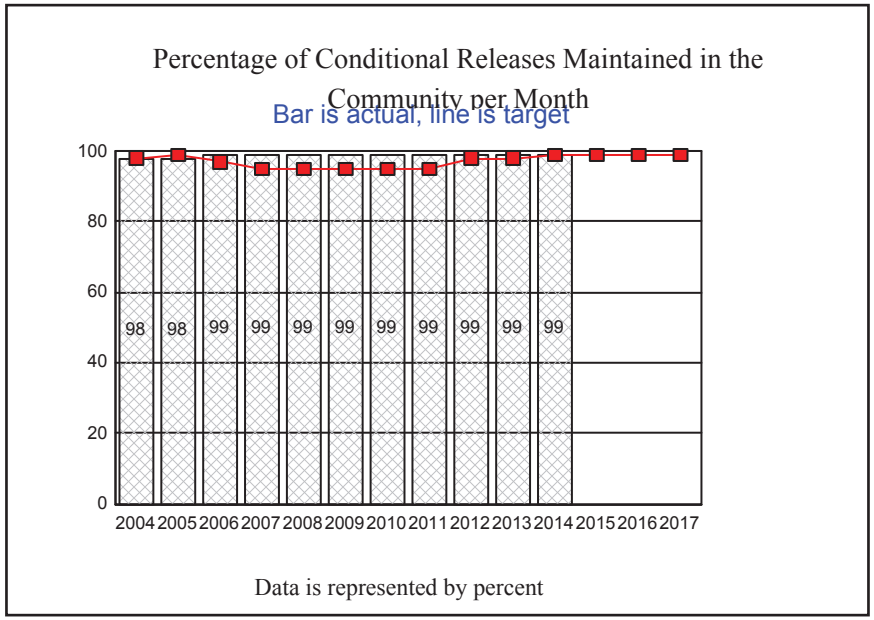
Board staff work diligently using LEAN practices inside the agency as well as with community providers and hospital staff to ensure that necessary documentation and witnesses are available for hearings. Ongoing evaluation and improvement in this arena will ensure that the Board continues to meet this performance measure.

7. ABOUT THE DATA

The reporting cycle for this measure is the calendar year. However, the data is collected weekly and tallied on a quarterly basis from the calendar and

computer reports generated that outline when each client's particular hearing is due.

KPM #3a	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Adults.	1992
Goal	To determine appropriate community placement and conditions of release so that a client is successfully reintegrated and public safety is maintained.	
Oregon Context	Agency mission and OBM #65 – Recidivism which may be impacted.	
Data Source	Agency records – revocation orders and monthly statistical reports.	
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596	



1. OUR STRATEGY

The Board seeks to make appropriate decisions regarding community placement so that its clients remain on conditional release status and do not engage in criminal activity nor need to be returned to Oregon State Hospital.

2. ABOUT THE TARGETS

The Board lowered its target in this area due to the anticipated and actual increase in the number of clients who were placed on conditional release status during the biennium. It was thought that with more clients in the community, it was likely that more revocations would occur that would, in turn, reduce the number who stayed in the community. In this measure, the higher the number, the better the performance.

3. HOW WE ARE DOING

The Board is in its seventh year of meeting this goal by maintaining the Conditional Release of 99% of its adult clients. This impressive rate in due to the Board's ability to assure that those leaving Oregon State Hospital have the treatment, supports and services necessary to be safely and successfully managed in the community.

4. HOW WE COMPARE

There are no relevant public or private industry standards related to this population with which to compare.

5. FACTORS AFFECTING RESULTS

Authorizing release to the community program and residential facility most fitting to a client's needs is critical to the client's success and the Board's ability to meet its target in this area. Also, continuous communication between the Board staff and treatment providers is essential. Community case managers must keep Board staff apprised of a client's status so that the Board can intervene early in any difficulties that present themselves. Access to alternatives to Oregon State Hospital such as residential alcohol and drug treatment programs or community hospitalization are an important resource for the Board to have available to reduce revocations. Again, the success of the Board is meeting this measure is directly related to an extensive amount of communication amongst all the stakeholders which is the direct result of the Board's current staffing levels. Reducing staffing levels or redirecting current staff into other areas will result in the Board not being able to meet this measure.

6. WHAT NEEDS TO BE DONE

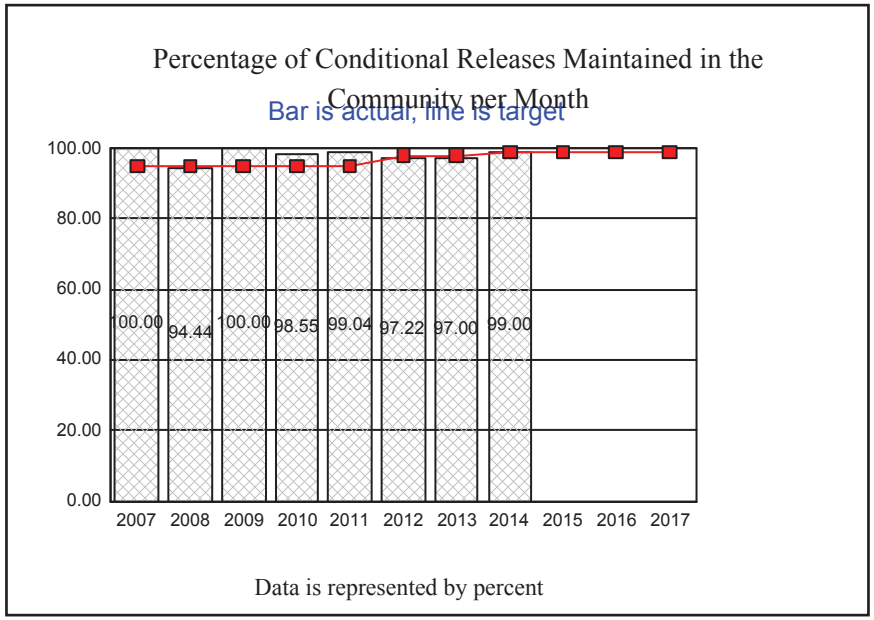
The Board and staff need to continue to provide whatever supports are necessary to maintain its clients in a community setting. This, in turn, requires OHA's and DHS' commitment to provide the financial resources necessary to access appropriate alternatives to State hospitalization. The Board must also continue

to facilitate new or differing treatment modalities amongst these parties. There are over 40 different agencies providing treatment to Board clients on conditional release. The Board has always welcomed new treatment providers but must make sure that they comply with evidence based practices and that public safety is never compromised. It also must make sure that Oregon State Hospital is giving these agencies the information needed to properly judge the client's level of risk and whether a client will fit in with a particular community treatment provider. By taking a proactive role in this arena, the Board hopes to help keep Oregon safe.

7. ABOUT THE DATA

The reporting cycle is based on a calendar year. However, the data is collected and tallied on a quarterly basis from the revocation orders issued by the Board.

KPM #3b	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Juveniles.
Goal	To determine appropriate community placement and conditions of release so that a juvenile client is successfully reintegrated and public safety is maintained.
Oregon Context	Agency mission and OBM #66 – Recidivism which may be impacted.
Data Source	Agency records – revocation orders and monthly statistical reports.
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596



1. OUR STRATEGY

The Board seeks to make appropriate decisions regarding community placement so that its juvenile clients remain on conditional release status and do not engage in criminal activity nor need to be returned to a secure inpatient treatment setting.

2. ABOUT THE TARGETS

Due to its existing conditional release process for adults, the Board used the same target for its juvenile clients. In this measure, the higher the number, the better the performance. However, it should be noted that with only 18 youth under its jurisdiction as of June 30, 2014, even one revocation of a client back to a secure in-patient setting can significantly affect the percentages for a given year.

3. HOW WE ARE DOING

The overall success of the Board in maintaining clients in community settings is due to its ability to ensure that those leaving secure in-patient treatment facilities have the treatment, supports and services necessary to be safely and successfully managed in the community. However, in the last seven years, the Board has failed to meet its goal three times for juvenile clients. The first time was in 2008, when, with a target of 95%, the Board had only two clients on conditional release, and one was returned to an in-patient setting for care, custody and treatment. In 2012 and 2013, the Board's performance again fell slightly below the desired target. However, in the intervening years, the target was raised to 98%, and the Board failed to meet that standard by 1% or less.

4. HOW WE COMPARE

There are no relevant public or private industry standards related to this population with which to compare.

5. FACTORS AFFECTING RESULTS

Authorizing release to the community program and residential facility most fitting to a client's needs is critical to the client's success and the Board's ability to meet its target in this area. Also, continuous communication between the Board staff and treatment providers is essential. Community case managers must keep Board staff apprised of a client's status so that the Board can intervene early in any difficulties that present themselves. Juveniles tend to have less impulse control and are mentally fragile, which can cause them to decompensate faster than adult clients. Therefore, access to alternatives to hospitalization such as respite care or having the ability to "step up" a client to a 24/7 residential facility is an important resource for the Board to have available to reduce revocations. Finally, the Board has the highest number of juveniles on conditional release in its history which makes it more likely that a revocation will occur.

6. WHAT NEEDS TO BE DONE

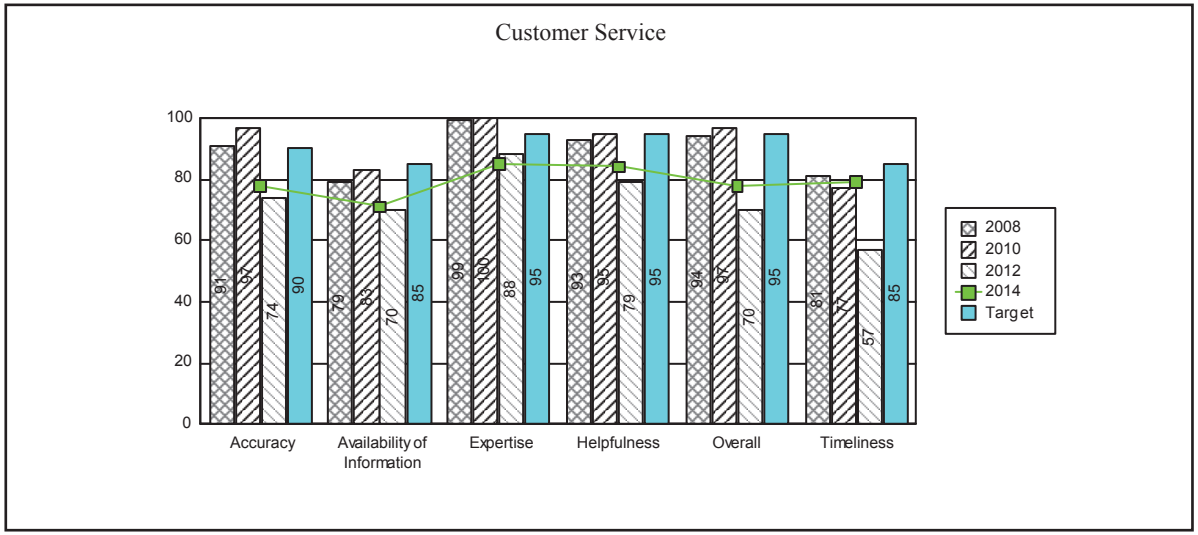
Again, the success of the Board in meeting this measure is directly related to an extensive amount of communication amongst all the stakeholders which is the

direct result of the Board's current staffing levels. The Board and staff need to continue to provide whatever supports are necessary to maintain its clients in a community setting. This, in turn, requires OHA's and DHS' commitment to provide the financial resources necessary to access appropriate alternatives to hospitalization. The Board must also continue to facilitate new or differing treatment modalities amongst these clients who typically are not successful in setting with non-PSRB residents. The Board welcomes new treatment providers but must make sure that they comply with evidence based practices and that public safety is never compromised. It also must make sure that the secure facilities are giving these agencies the information needed to properly judge the youth's level of risk and whether the youth will fit in with a particular community treatment provider. By taking a proactive role in this arena, the Board hopes to help keep Oregon safe.

7. ABOUT THE DATA

The reporting cycle is based on a calendar year. However, the data is collected and tallied on a quarterly basis from the revocation orders issued by the Board.

KPM #4	CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	2007
Goal	To provide excellent customer service.	
Oregon Context	Agency Mission.	
Data Source	Survey of participants at Board's statewide training program and requests for feedback from stakeholders via paper and electronic survey.	
Owner	Juliet Britton, J.D., Executive Director – (503) 229-5596	



1. OUR STRATEGY

To conduct customer service surveys to gain a sense of stakeholders' satisfaction with the Board's performance in the five listed domains. The Board then reviews and acts on the assessments received.

2. ABOUT THE TARGETS

This is still a relatively new measure for the Board (baseline data was gathered in 2006). Higher percentages reflect higher satisfaction from our customers. It is interesting to note that customers' past dissatisfaction of the Board's timeliness did not impact their overall positive view of how well the Board functions.

3. HOW WE ARE DOING

Performance in this measure has increased with an overall rating of 78% in 2014, up from 70% in 2012. Customer satisfaction with the timeliness of services provided was the Board's greatest increase, rising from 57% in 2012 to 79% in 2014. The only decrease noted in 2014 was in the area of expertise, down from 88% in 2012 to 85% in 2014. Given that the Board lost two staff with more than 20 years each working with the Board, this is not overly surprising. In the last 18 months, Board staff have implemented a robust training program and started developement of several handbooks and resource guides to assist partnering agency staff successfully supervise our clients. The hope is these efforts will improve stakeholder satisfaction in the areas of availability of information and helpfullness of Board staff.

4. HOW WE COMPARE

There is no comparative data available.

5. FACTORS AFFECTING RESULTS

It is important to note the role the Psychiatric Security Review Board plays in the lives of those responding to the survey. The Board is ultimately responsible for all decisions relating to a client’s placement, be it at the State Hospital, in the community, on conditional release or discharge. As such, our customers, be it clients, hospital staff, community providers, persons in the criminal justice system, victims or members of the general public, often may not like the Board’s decisions, even if they are legally correct. This can adversely effect the Board’s satisfaction ratings.

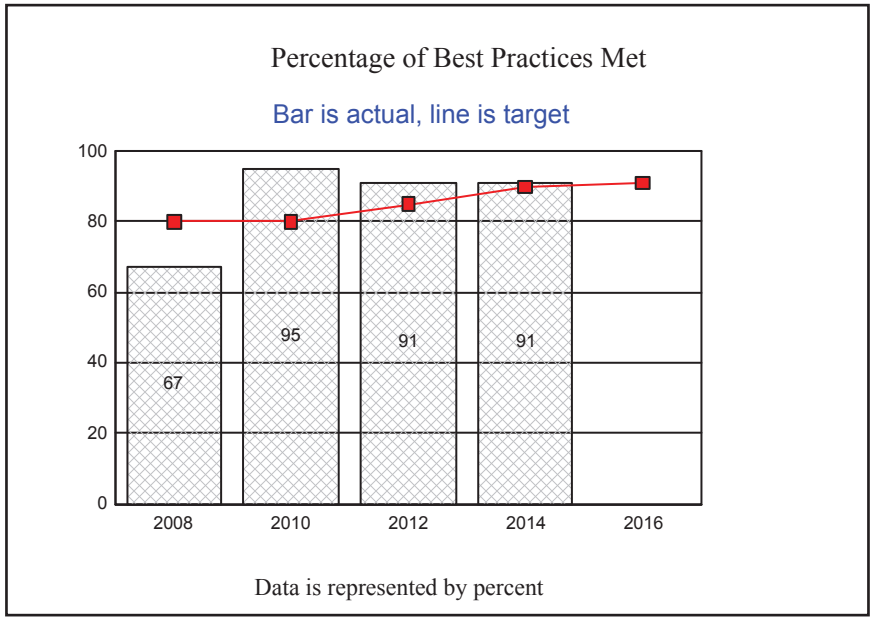
6. WHAT NEEDS TO BE DONE

In 2011, the agency began using LEAN principles to identify and address deficiencies in all its various processes and intends to continue to dedicate staff time to improving those processes which are directly related to customer service. Particular attention will continue on the domains of timeliness of service, which has improved significantly with the increase in staffing, and availability of information. Expertise will increase as the new employees hired to replace those that have left the agency become more familiar with Board functions and mandates, and overall satisfaction with the Board's service should rise accordingly.

7. ABOUT THE DATA

The first two surveys were distributed via hard copy to attendees of the Board's two day trainings held in the fall of 2006 and 2008, which included DHS and OSH staff, community case managers, treatment and residential providers and a few clients. The survey in 2010 was sent by email to case managers who monitor the Board's clients on conditional release in the community. In 2012 the survey was again distributed at the statewide training which was primarily attended by case managers and providers. As of 2014, the Board shifted from only distributing customer service satisfaction surveys in conjunction with its biennial statewide trainings to mailing surveys to random samples of clients and victims as well as providing links to an electronic version of the survey via email to various other stakeholders. This change was made in an effort to diversify the pool of respondents and ensure that the Board is responsive to the needs of all of its customers. Results are retained by the agency and are utilized by management to determine what actions should be undertaken to achieve improvement in certain areas.

KPM #5	BEST PRACTICES - Percent of total best practices met by the Board.	2008
Goal	To ensure Board and its staff are appropriately carrying out the Board's mission and duties.	
Oregon Context	Agency Mission.	
Data Source	Board Self-Assessment.	
Owner	Juliet Britton, J.D., Executive Director - (503) 229-5596	



1. OUR STRATEGY

The Psychiatric Security Review Board conducts biennial self-assessments to determine how it well it is following the Best Practices guidelines and to identify areas where it needs to improve. The Board then attempts to conduct its duties in a manner that best effectuates the Best Practices policy.

2. ABOUT THE TARGETS

The Board initially set 80% as the target for number of Best Practices' met. In this case, the higher the percentage, the more of the Best Practices the Board is meeting. This target was set to reflect the relative newness of the juvenile panel. As that panel gained experience, the target was adjusted upward to 85% in 2012.

3. HOW WE ARE DOING

Since 2010, the Board has met its target goal of this measure.

4. HOW WE COMPARE

Once again, given the unique nature of the PSRB and its operations, the Board is not aware of any comparable public or private industry standards.

5. FACTORS AFFECTING RESULTS

The members of each panel meet together, at most, on a quarterly basis to discuss administrative matters. On hearing days, only 3 of the 5 respective Board members sit as a panel to hear cases. Thus, there is limited opportunity for all members to reflect on some of the operational aspects listed on the survey. Others, such as budget and policy issues, are addressed regularly at those meetings. This affects the score of Best Practices met, because several of the Best Practices center around intra-Board communication.

6. WHAT NEEDS TO BE DONE

The Board is cognizant of the need to find time on its administrative meeting agenda to discuss and engage more fully in its oversight function of Board staff and improving its overall functioning. The Board completed its most recent self-assessment in July, 2014. The Board will discuss the results of this assessment and the previous assessments at the next joint Board meeting. At that time, the Board will set its target for the percentage of Best Practices to be met, consider if any other Best Practices unique to its functions should be tracked, and establish a timetable of expected dates for each Best Practice to be completed.

7. ABOUT THE DATA

In 2008, the Board completed its first self-assessment by answering yes or no to the 15 legislatively suggested Best Practices. The Board conducted the same

self-assessment in 2010, 2012, and 2014.

PSYCHIATRIC SECURITY REVIEW BOARD	III. USING PERFORMANCE DATA

Agency Mission: The Psychiatric Security Review Board's mission is to protect the public by working with partnering agencies to ensure persons under its jurisdiction receive the necessary services and support to reduce the risk of future dangerous behavior using recognized principles of risk assessment, victims' interest and person centered care.

Contact: Juliet Britton, J.D., Executive Director	**Contact Phone:** 503-229-5596
Alternate:	**Alternate Phone:**

The following questions indicate how performance measures and data are used for management and accountability purposes.

1. INCLUSIVITY	*** Staff :** As a small agency with 4 FTE for many years, it was easy to involve staff in the process as all were literally at the table when our performance measures were initially developed in 1992. Since that time and throughout the modification of the performance measure system by the D.A.S., the Board and now 11 FTE staff have been engaged in the discussions related to the agency's goals and what measures to utilize to demonstrate its performance. *** Elected Officials:** Legislators' provided input in the 2005 Session by suggesting the removal of one measure from the external reporting process and utilizing it only for internal purposes. *** Stakeholders:** Stakeholders' opinions were solicited and received in meetings and individual conversations as well, to learn what they thought would be important to track and what outcomes they wanted the board to achieve. As a result of such comments, the Board may consider changes to current measures or development of additional ones. *** Citizens:** The public, as represented by the Legislature, approved these performance measures during our budget hearing in the 2007 Legislative Assembly. Citizens have also been present at public hearings related to the Board and their concerns have been noted.
2 MANAGING FOR RESULTS	Given that the Board's primary purpose is to protect the public, the Board reviews the results to get a sense of the efficacy of its decision-making process at hearings. The agency further assesses its monitoring function and compliance with its statutory mandates from this data. Depending on the results, the Board adjusts its procedures to improve the outcomes. Based on the results of the performance data collected, the agency has made efforts to improve outcomes in the areas where it fell significantly short of its target. In 2007, the Board increased the number of hearings scheduled per day to address the Board's failure to provide hearings in a timely fashion for a significant percentage of clients. However, due to staffing issues, in 2008 the Board reduced that number again. The Board utilized this data to make

	its case for additional FTE that was included as a policy option package in the 2011-13 Governor's Recommended Budget. That request was approved and the Board is currently meeting all of its critical performance measure goals.
3 STAFF TRAINING	DAS and LFO staff have assisted Board staff regarding the newly required Best Practices KPM. The other measures are calculated and reviewed quarterly to see what changes in operation might have to be implemented to improve measures that are wanting. Board members are also kept apprised as they recognize the value of performance measures in assessing the effectiveness of their work as well as areas of the agency's functioning that might need additional resources when developing the Board's budget.
4 COMMUNICATING RESULTS	*** Staff :** As noted above, staff review these measures quarterly to evaluate what operations might need to be adjusted to deal with any deficiencies that may be revealed. Board members are then informed as the adjustments usually affect their workload. *** Elected Officials:** The Board communicates results to the Legislature through this report as well as biannually in its budget preparation documents for review by the D.A.S., the Governor and ultimately by the Legislature and the public. The purpose would be to demonstrate how well the agency is carrying out its mission and statutory mandates. *** Stakeholders:** The results are often cited in public testimony and presentations made by the Board and its Executive Director in various venues as well as at training seminars for all the various stakeholders in this system. *** Citizens:** In citing the Board's Key Performance Measure of recidivism and the percentage of those maintained on conditional release, the Board is often able to instill more confidence in a skeptical public and potential providers with these impressive figures when efforts are made to expand community resources and site residential facilities for Board clients. The Executive Director routinely responds to citizen's concerns and/or questions about its functions and clients.

Agency Management Report

KPMs For Reporting Year 2015

Finalize Date: 9/30/2015

Agency: PSYCHIATRIC SECURITY REVIEW BOARD

	Green = Target to -5%	Yellow = Target -6% to -15%	Red = Target > -15%	Pending	Exception Can not calculate status (zero entered for either Actual or Target)
Summary Stats:	75.00%	0.00%	25.00%	0.00%	0.00%

Detailed Report:

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
1 a - RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Adults	0.22	3.00	Green	2014	
1 b - RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Juveniles	7.69	2.00	Red	2014	
2 a - TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes - Adults.	98	95	Green	2014	
2 b - TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes- Juveniles.	100	95	Green	2014	
3 a - MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Adults.	99	99	Green	2014	

Agency Management Report

KPMs For Reporting Year 2015

Finalize Date: 9/30/2015

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
3 b - MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Juveniles.	99.00	99.00	Green	2014	
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	78	95	Red	2014	
5 - BEST PRACTICES - Percent of total best practices met by the Board.	91	90	Green	2014	

This report provides high-level performance information which may not be sufficient to fully explain the complexities associated with some of the reported measurement results. Please reference the agency's most recent Annual Performance Progress Report to better understand a measure's intent, performance history, factors impacting performance and data gather and calculation methodology.

Legislatively Approved 2015-2017 Key Performance Measures

Agency: PSYCHIATRIC SECURITY REVIEW BOARD

Mission: The Psychiatric Security Review Board's mission is to protect the public by working with partnering agencies to ensure persons under its jurisdiction receive the necessary services and support to reduce the risk of future dangerous behavior using recognized principles of risk assessment, victims' interest and person centered care.

Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2016	Target 2017
1 a - RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Adults		Approved KPM	0.22	0.75	0.75
1 b - RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor - Juveniles		Approved KPM	7.69	8.00	8.00
2 a - TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes - Adults.		Approved KPM	98.00	97.00	97.00
2 b - TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes- Juveniles.		Approved KPM	100.00	97.00	97.00
3 a - MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Adults.		Approved KPM	99.00	99.00	99.00
3 b - MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month - Juveniles.		Approved KPM	99.00	99.00	99.00
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Accuracy	Approved KPM	78.00	90.00	90.00
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Availability of Information	Approved KPM	71.00	85.00	85.00
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Expertise	Approved KPM	85.00	95.00	95.00

Agency: PSYCHIATRIC SECURITY REVIEW BOARD

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Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2016	Target 2017
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Helpfulness	Approved KPM	84.00	95.00	95.00
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Overall	Approved KPM	78.00	95.00	95.00
4 - CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	Timeliness	Approved KPM	79.00	85.00	85.00
5 - BEST PRACTICES - Percent of total best practices met by the Board.		Approved KPM	91.00	91.00	

LFO Recommendation:

Sub-Committee Action: