



COUNTY OF SAN MATEO

County Manager's Office

PREPARATION DATE: October 18, 2005

BOARD MEETING DATE: November 8, 2005

TO: Honorable Board of Supervisors
FROM: John L. Maltbie, County Manager
SUBJECT: **FY 2004-05 Year-End County Performance Report**

RECOMMENDATION

Accept the FY 2004-05 Year-End Report on the Performance of County Programs.

VISION ALIGNMENT

Commitment: Responsive, effective, and collaborative government.

Goal 21: County employees understand, support and integrate the County vision and goals into their delivery of services.

The County Performance Report contributes to this goal by communicating the progress of the County's programs toward meeting current year performance targets for key Headline Measures. The report also provides performance trends for each program and discusses the factors affecting performance over time.

Background and Discussion

Countywide implementation of Outcome-Based Management (OBM) began in 2000 when the Shared Vision 2010 community process was underway. OBM is the management system that was implemented to track the progress of all County programs toward achieving the long-term commitments and goals identified through the Shared Vision process.

Significant efforts have been made by departments over the last five years to align programs and existing planning processes, develop and refine performance measures, and improve data reporting capabilities so that better decisions can be made toward improved program outcomes and goal achievement. Training of program managers on the preparation of program plans and budgets and the development and use of performance measures has been and will continue to be conducted. In FY 2004-05, OBM training was expanded to include training on managing with data and work planning. These classes provide additional tools for program managers that already have an understanding of the basics of Outcome-Based Management and Performance Measurement.

Performance reports are prepared at mid-year and year-end to communicate the progress of programs toward achieving performance targets established during budget development. Each program has a minimum of two Headline Measures that have been selected from measures of Quality (how well we do it) and Outcomes (is anyone better off?), and serve to provide the reader with a quick assessment of program performance. This year-end report contains two years of historical data and year-end actuals for each Headline Measure, along with a ✓ indicating whether performance targets were met. A brief discussion is also included on trends and factors affecting performance. Adjustments to performance targets for FY 2005/06-2006/07 based on actual performance experience in FY 2004-05 will be made in the Adopted Budget published in early November.

County Summary – Quality and Outcomes Measures Meeting Performance Targets

County programs ended FY 2004-05 with 65% of Quality and Outcomes measures meeting performance targets. This represents a four-percentage point decrease from last year. The results for this Countywide measure vary from department to department for a number of reasons. Some departments tend to be more ambitious about setting performance targets. Approaches to setting performance targets vary among managers as well as the types of services provided. Beginning in FY 2005-06 the County established a standard of 75% for this measure. While managers are expected to plan for performance improvement over time, it is understood that performance can be affected by factors outside their influence or control. Managers are encouraged to use a combination of past experience; industry standards or benchmarks; factors that can affect future performance, such as the economy and budget reductions, new regulations or changes in client demographics; results expected from high-priority program initiatives; and realistic stretch goals, to set their performance targets. Targets should also be developed with the involvement of staff who will be performing the work as part of the program's plan and priorities for the following year.

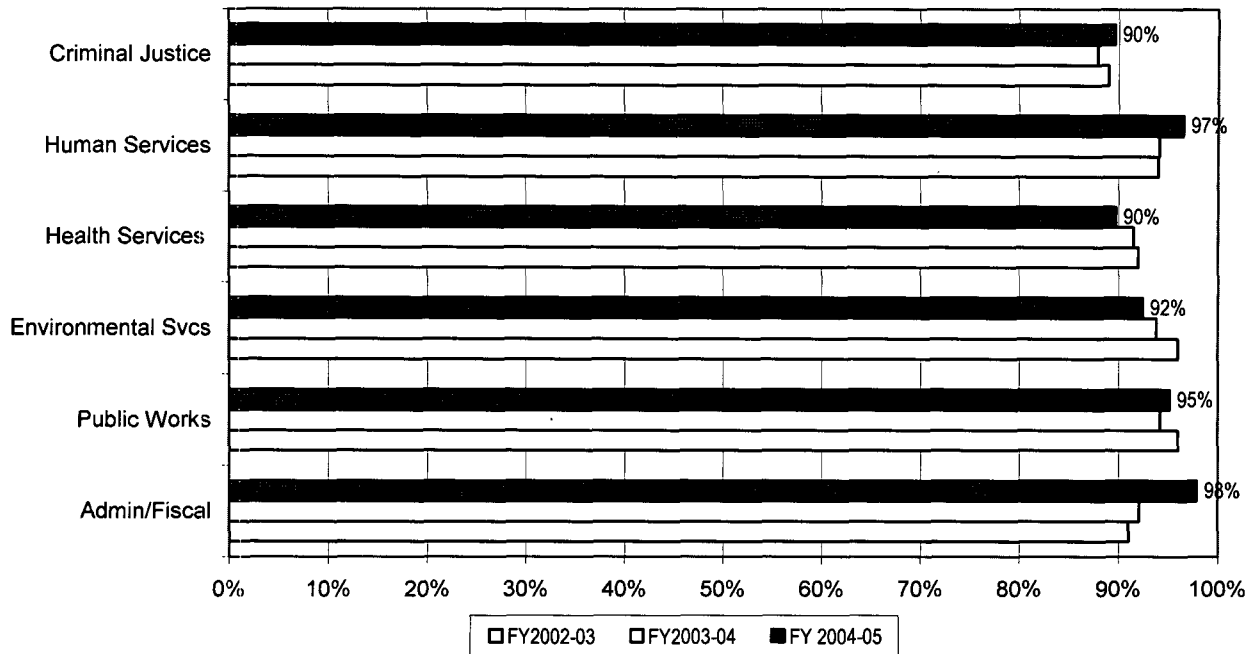
Performance improvement is expected in the future, given the County's improved financial condition and the direction to maintain direct service levels without reductions over the next two fiscal years. A summary of agency/department performance as well as a discussion of Headline Measures for each County program is included in this report.

QUALITY AND OUTCOMES MEASURES MEETING TARGETS by Department/Agency	2004 Actual	2005 Actual	2005 Target *
Assessor-Clerk-Recorder	67%	85%	70%
Controller's Office	70%	67%	72%
County Counsel	80%	75%	82%
County Manager/Clerk of the Board	50%	64%	70%
Employee and Public Services (EPS)	74%	81%	75%
Information Services Department (ISD)	56%	88%	60%
Treasurer-Tax Collector	70%	80%	72%
District Attorney/Public Administrator	100%	67%	90%
Department of Child Support Services	83%	75%	89%
Sheriff's Office	73%	57%	62%
Probation Department	59%	55%	65%
Coroner's Office	100%	100%	95%
Environmental Services Agency	58%	68%	94%
Health Department	71%	60%	85%
San Mateo Medical Center (SMMC)	80%	59%	89%
Human Services Agency (H S A)	64%	70%	75%
Public Works	75%	56%	83%
Total County	69%	65%	70%
* Beginning in FY 2005-06, a Countywide standard of 75% has been established for this measure.			

County Summary – Overall Customer Satisfaction Ratings

Providing residents and visitors of San Mateo County with a high level of service is a priority for all County departments. All agencies conduct annual customer surveys. Some focus attention on external clients and stakeholders while others focus on internal customers. Beginning in FY 2005-06 the County established a standard of ensuring at least 90% of customers report overall satisfaction as good or better. All County agencies currently meet this standard.

Survey Results by County Agency



Training and Performance Data Reliability

Training managers on using OBM to effectively manage their programs and increasing the reliability and use of performance data through documentation and program reviews continue to be priorities in the new fiscal year. In FY 2004-05, approximately 130 program managers participated in one or another OBM training courses, which included: OBM Basics, Performance Measurement classes, Managing with Data, Work Planning, Process Mapping, Cost/Benefit Analysis, and Budget Development Overview. In addition, an Outcome-Based Management session will be provided to the County's four cohort of Management Development/Mentoring Program participants.

Efforts to document the methodology used to collect data for Performance Measures continued in FY 2004-05. Documentation is required for all Headline Measures and many departments extended the documentation process to include the remainder of program performance measures. Documenting data collection practices increases the consistency and accuracy of reported data, provides continuity when there is turnover in staff, and makes the information more reliable for decision-making purposes. Where possible, departments are encouraged to automate the data collection process to further improve the reliability of performance data. Greater automation and ease of data collection is a top priority for the coming year.

OBM Improvement Initiatives

Given what is now a permanent environment where local governments are expected to keep performing better and cost less, it is critical for the County to establish ongoing reviews of its programs to determine if they are effective and well managed. The first pilot round of program reviews was conducted in October-December 2004. As a result of these initial program reviews, a series of Countywide needs were identified. Included among those findings were

- The need for improved use of automation for the collection and analysis of performance data;
- Incentives for improved performance and customer service; and
- Stronger linkage to the County's Shared Vision 2010 commitments and goals.

Workgroups have been established to identify recommendations for improvements in these areas. The scope of the program reviews will be incorporated into broader management reviews and performance audits that will be piloted in FY 2005-06.

Fiscal Impact

There is no fiscal impact related to acceptance of this report.



SAN MATEO COUNTY

**FY 2004-05 YEAR-END PERFORMANCE REPORT
COUNTY PROGRAMS**

John L. Maltbie, County Manager
County Manager's Office
Budget and Analysis Unit
November 8, 2005

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Performance reports are prepared at mid-year and year-end to communicate the progress of programs toward achieving performance targets established during budget development. Each program has a minimum of two Headline Measures that have been selected from measures of Quality (how well we do it) and Outcomes (is anyone better off?), and serve to provide the reader with a quick assessment of program performance. This year-end report contains two years of historical data and year-end actuals for each Headline Measure, along with a ✓ indicating whether current year performance targets were met. A brief discussion is also included on trends and factors affecting performance. Adjustments to performance targets for FY 2005/06-2006/07 based on actual performance experience in FY 2004-05 will be made in the Adopted Budget published in early November.

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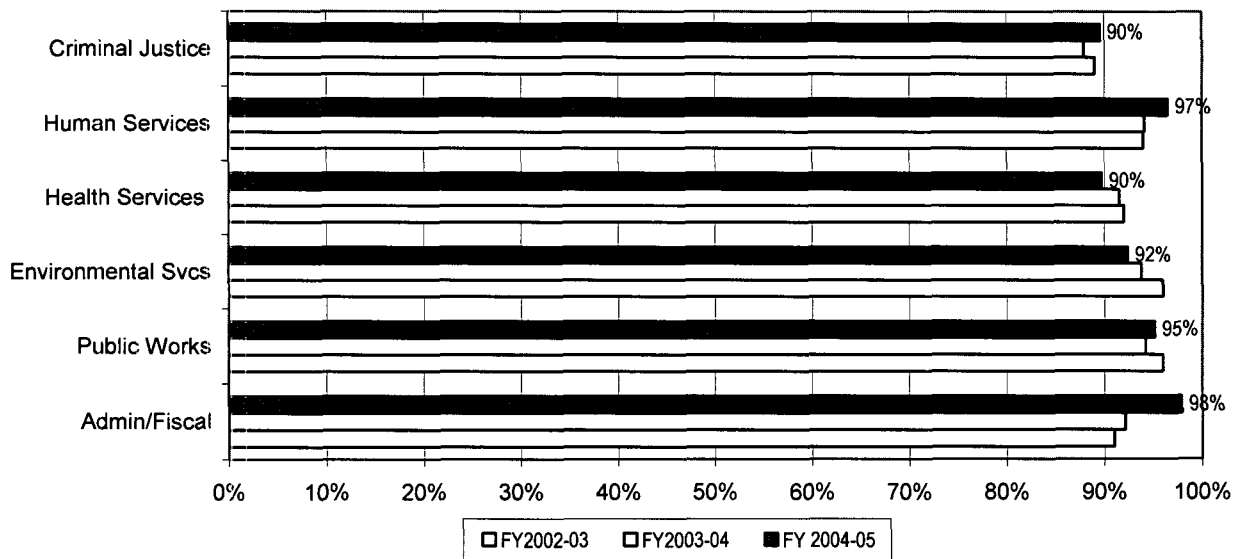
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QUALITY AND OUTCOMES			
MEASURES MEETING TARGETS	2004	2005	2005
by Department/Agency	Actual	Actual	Target *
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- Stronger linkage to the County's Shared Vision 2010 commitments and goals.

Workgroups have been established to identify recommendations for improvements in these areas. The scope of the program reviews will be incorporated into broader management reviews and performance audits that will be piloted in FY 2005-06.

Vision Alignment and Fiscal Impact

The Mid-Year and Year-End County Performance Reports provide information on the progress for all County programs and services in the current fiscal year, and therefore contributes to all Shared Vision 2010 commitments and goals. Training new and existing managers on using OBM and specifically on measuring performance directly contributes to Goal 21: County employees understand, support and integrate the County vision and goals into their delivery of services. There is no fiscal impact related to acceptance of this report.

ADMINISTRATION AND FISCAL

Customer Satisfaction Ratings – Cares Survey Results

A total of 1,538 surveys were received by the Assessor, Controller, County Counsel, County Manager/Clerk of the Board, Employee and Public Services, Information Services and Treasurer-Tax Collector during FY 2004-05, with 97% of respondents rating overall satisfaction as good or excellent. The number of survey responses increased by 292 primarily due to new surveys developed, increased distribution, and increased response rates. Departments continue to distribute surveys on a regular basis and implement changes based on customer feedback.

ASSESSOR-CLERK-RECORDER

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	86%	5%	3%	6%	240
2003-04	81%	9%	3%	7%	256
2002-03	80%	10%	5%	6%	142

The Assessor-Clerk-Recorder received 240 surveys with 91% of respondents rating overall satisfaction as good or excellent, representing a shift in percentage points from good to excellent from FY 2003-04. The number of surveys remained steady at 240. Employees encourage customers to fill-out survey cards following services rendered and instruct them to either place completed cards in a drop box or respond by mail. Poor ratings/negative comments were primarily associated with the new Miscellaneous Applications, which allows images of the grantor/grantee index books to be viewed at a public terminal. Due to size of the files and the inadequacy of the machines to accommodate the large size of the files, it takes longer to open. Public terminals will be replaced in FY 2005-06 to reduce delays attributed to retrieving large files over the network as in the new Miscellaneous Application. Several customer responses included positive comments about customer service.

CONTROLLER

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	65%	31%	2%	2%	132
2003-04	64%	31%	6%	0%	127
2002-03	53%	42%	5%	0%	112

The Controller's Office received 132 surveys with 96% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction improved and the number of surveys received increased by 5 or 4%. Surveys were mailed, picked up in the lobby area and made available on the Internet. The following overall satisfaction (good or excellent) ratings were received by Controller programs: Administration 96%; Controller Information Systems 100%; Internal Audit 100%; General Accounting 96.8%; Payroll Services 100%; and Property Tax 76.2%. Property Tax ratings decreased from 91% to 76.2%; customer comments included requests for descriptions for property tax department accounts; difficulty in identifying who to contact with specific concerns; and an ongoing request to conduct business online. Action taken in response to customer suggestions includes: continued automation of and streamlining of the property tax roll process and addressing individual customer concerns. The Property Tax section is also in the process of providing special districts with access to the County's accounting system and creating an interactive e-commerce relationship with the cities, special districts, and schools. During FY 2004-05 the Controller's Office had several major projects underway and was able to maintain high overall satisfaction ratings with 97 compliments about Controller's Office staff.

COUNTY COUNSEL

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	N/A	N/A	N/A	N/A	N/A
2003-04	75%	23%	2%	0%	79
2002-03	N/A	N/A	N/A	N/A	N/A

The County Counsel's Office conducts a biannual survey process. The next survey will be conducted in Fall 2005. Results will be published next year in the FY 2005-06 Year End report.

COUNTY MANAGER/CLERK OF THE BOARD

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	87%	13%	0%	0%	223
2003-04	75%	25%	0%	0%	99
2002-03	N/A	N/A	N/A	N/A	N/A

The County Manager's Office received 223 surveys with 100% of respondents rating overall satisfaction as good or excellent. Surveys were distributed to the Board of Supervisors, members of the public requesting research services, County program managers and fiscal officers, and training participants. The surveys were also made available in the lobby area of the County Manager's Office. Feedback received was positive. The trainings conducted included: Agenda Review Process; BRASS Basics and Reports and Views; Budget Development for Program Managers; Budget Development for New Fiscal Officers; CARES Database; Contracts Process; Cost Benefit Analysis; Introduction to Position Control; Fund Balance Tutorial; Outcome-based Management Basics; Performance Measurement; Performance Measure Database; Process Mapping and Work Planning. The County Manager's Office will continue to provide training opportunities to fiscal officers and program managers in FY 2005-06.

EMPLOYEE AND PUBLIC SERVICES

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	63%	29%	5%	3%	868
2003-04	64%	28%	5%	2%	643
2002-03	65%	23%	9%	3%	166

Employee and Public Services (EPS) received 868 surveys with 92% of respondents rating overall satisfaction as good or excellent. Overall satisfaction remained high compared to the prior year and the number of survey responses reported increased by 225. The following overall customer satisfaction (good or excellent) ratings were received by EPS programs/units: Public Safety Communications 99%, Animal Licensing 74%, Collections 73%, Administration (payroll/personnel and non-profits) 100%, Recruitment 92%, Training, Safety, and Health and Fitness Services 96%, Mail Services 94%, Purchasing 94% and Copy Center 96%. For the most part, survey responses were positive. Ratings/customer feedback for Animal Licensing and Collections tend to be lower due to the nature of the services provided. However, staff will continue to review customer comments and address any issues.

INFORMATION SERVICES DEPARTMENT

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	77%	23%	0%	0%	33
2003-04	86%	14%	0%	0%	8
2002-03	58%	35%	4%	3%	72

The Information Services Department received 33 surveys with 100% of respondents rating overall satisfaction as good or excellent. Overall satisfaction remains high as compared to the prior year. The number of surveys returned increased 313% from 8 to 33. Surveys are distributed on a continuous basis for Card Key and Production Services customers and during a two-week "window" for Business Systems, Desktop Support, Help Desk, User Billing, Network, Telephone, Radio Services and Records Center customers. Immediate action is taken on customer suggestions for improvement. Several comments were received regarding outstanding customer service.

TREASURER-TAX COLLECTOR

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	78%	22%	0%	0%	42
2003-04	73%	27%	0%	0%	34
2002-03	55%	46%	0%	0%	35

The Treasurer-Tax Collector received a total of 42 surveys with 100% of customer survey respondents rating services provided as good or excellent. The Treasurer received 23 surveys and the Tax Collector received 19 surveys. Compared to the prior year, overall satisfaction remains high the number of survey responses increased by 8. Surveys were made available in the lobby and mailed to 43

pool participants. The Treasurer-Tax Collector has responded to survey improvement suggestions by refining and forwarding investment reports via e-mail, installing a direct telephone line for credit card payments in the Treasurer's lobby, providing a PC in the Tax office for customers to make web payments, refining e-Gov tax payment processes to include e-check and credit cards on the web, updating our website as well as developing detailed brochures outlining and explaining all areas of property tax in both English and Spanish. Survey responses included the recognition of staff for customer service.

ASSESSOR-COUNTY CLERK-RECORDER (ACR)

DEPARTMENT MEASURES Assessor-Clerk-Recorder	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per capita	\$25	\$28	\$24	\$25	✓
Percent of eligible voters registered to vote	72%	74%	80%	76%	✓
Quality and Outcomes measures meeting performance targets	85%*	67%	85%	70%	✓

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

The Assessor-County Clerk-Recorder met current year performance targets for 85% of its Quality and Outcomes measures. The cost per capita is \$24 and slightly under the current year target. The number of eligible voters is currently 458,990 with 80% or 368,410 registered to vote, exceeding the statewide average of 75%.

During FY 2004-05, the Assessor-County Clerk-Recorder accomplished the following:

- Improved voter registration and election administration
- Improved County Clerk and Recording services
- Improved property assessment services

Major priorities over the next two years include:

- Developing and implementing new technologies and e-Government solutions
- Improving and expanding community partnerships

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>ACR Administration and Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Administration and Support costs as percentage of total departmental budget	5.5%	6.4%	7.0%	7.0%	✓
Percent of information technology customer survey respondents rating services good or better	99%	92%	92%	92%	✓

Program Discussion: Assessor-Clerk-Recorder Administration and Support met current year performance targets for both Headline Measures. Costs of the Program represent about 7% of the Department's total costs. The increase from prior years is primarily due to increases in negotiated salaries and benefits adjustments. Information technology customer satisfaction rates remain high. Surveys are distributed to all Help Desk users.

Major priorities over the next two years include:

- Achieving an overall information technology customer satisfaction rating of at least 90%
- Maintaining Administration and Support costs at 5% or below

PROGRAM HEADLINE MEASURES <u>ACR Appraisal Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of supplemental assessments noticed within 120 days of event	67%	75%	76%	70%	✓
Median days from residential sale to notice of supplemental assessment	45	36	28	35	✓

Program Discussion: Appraisal Services met current year performance targets for both Headline Measures. The amount of time to process supplemental property assessments has improved significantly over the last few years. Appraisal Services issued 76% of supplemental assessment notices within 120 days of recording, exceeding the current year target of 70% and the FY 2002-03 actual by nine-percentage points. The target of sending supplemental notices to property owners within 35 days of residential sale was exceeded with a median of 28 days, a significant improvement compared to just a couple of years ago. Improvements have been due to streamlining work processing, training and implementing Automated Valuation Models.

Major priorities over the next two years include:

- Achieving 76% of supplemental assessments noticed within 120 days of the event
- Achieving a three percentage point difference between the March estimate and the total actual roll change
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>ACR County Clerk-Recorder</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of documents electronically recorded	1%	2%	6%	5%	✓
Percent of survey respondents rating services good or better	95%	90%	92%	93%	No

Program Discussion: County Clerk-Recorder met current year performance target for one Headline Measure. The e-Recording pilot has enabled the recording of various high volume documents from both government and private entities. This year the Office started exploring options for receiving electronic files from other government entities, as well as assisting the advancement of a legislative bill to expand this technology to the private sector. These electronic recording efforts save time, reduce errors and create a more timely public record. Currently six-percent of documents are electronically transferred. Customer satisfaction remains strong with 92% of respondents rating services provided as good or better. Improvements in this area have included providing staff training and offering services in three languages: English, Spanish and Chinese. During the year, program staff expanded e-Government initiatives by completing the implementation of an online marriage license and the fictitious business name statement applications, as well as automating several previously manual processes. Staff also began development of new computer programs to automate tasks in the County Clerk's unit and completed the historical imaging and database retrieval project of historical books.

Major priorities over the next two years will include:

- Expanding documents electronically recorded to 6%
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>ACR Elections</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of eligible voters registered to vote	72%	74%	78%	76%	✓
Percent of registered voters who voted in last election	54%	24%	78%*	78%	✓

* Voter turnout for November election only

Program Discussion: Elections met current year performance targets for both Headline Measures. Of the eligible voters in the County, 78% are registered to vote, exceeding the current year's target as well as the prior year actual. A significant increase was also seen in voter turnout, with 78% of registered voters voting in the November election. Voter registration and turnout was high given that it was a Presidential General election and due to increased permanent absentee voting. Of the 124,498 voters who requested a ballot by mail, 34% returned their completed ballots.

Major priorities over the next two years include:

- Registering at least 75% of eligible voters
- Maintaining the percent of registered voters who voted in the last election at 28% for unified district elections (local) and 78% for major elections

CONTROLLER'S OFFICE

Controller's Office	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per invoice processed	\$1.70	\$1.28	\$1.52	\$1.28	No
Cost per capita	\$7.25	\$7.35	\$7.38	\$8.16	✓
Quality and Outcomes measures meeting performance targets	91%*	70%	67%	72%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The Controller's Office met current year performance targets for 67% of its Quality and Outcomes measures. Several factors influenced performance: the implementation of the new IFAS 7i upgrade reduced system hours availability; Property Tax performance was impacted by implementation of several special projects; and the Audit Division had several internal audit recommendations still in progress during this report period. The cost per invoice processed is over the current year target primarily due to implementation costs for the IFAS 7i upgrade. The cost per invoice also reflects the increases in negotiated staffing costs. The cost per capita is lower than target because not all of the Property Tax Administration Grant Program appropriations will be utilized this fiscal year.

During FY 2004-05, the Controller's Office accomplished the following:

- Maximized County revenues and strengthened fiscal operations
- Improved the quality and accessibility of the County's financial information to the public
- Undertook major technology improvement projects

Major priorities over the next two years include:

- Enhancing technology and training
- Maintaining customer satisfaction and high quality services

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Controller Administration</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of performance measures met	70%	70%	71%	83%	No
Percent of customer survey respondents rating Controller Services as good or better	95%	94%	95%	90%	✓

Program Discussion: Controller Administration met current year performance targets for one Headline Measure. The percent of performance measures meeting target remains stable at 71%. Customer satisfaction ratings remain high at 95%.

Major priorities over the next two years include:

- Meeting 83% of performance measures targets
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>Controller Information Systems (CIS)</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Help Desk customers rating assistance as good or better	100%	100%	100%	90%	✓
Percent of total available hours IFAS is up during business hours	100%	100%	97.9%	98.8%	No

Program Discussion: Controller Information Systems met current year performance targets for one Headline Measure and was slightly under target for the other measure. The Help Desk received 3,683 calls in FY 2004-05, with 100% of customer survey respondents rating services as good or better. The IFAS 7i implementation was well planned and extensive training was provided resulting in fewer than anticipated calls to the Help Desk. Staff continue to provide ongoing training and Help Desk support for all IFAS users. The percent of total available hours for the IFAS system was slightly impacted by the implementation of IFAS 7i.

Major priorities over the next two years include:

- Maintaining 99.6% availability of the IFAS system
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>General Accounting</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of transactions processed electronically	62%	64%	65%	67%	No
Total dollar amount of audit adjustments	\$56,505,000	\$12,000,000	\$13,000,000	\$13,000,000	✓

Program Discussion: General Accounting met current year performance targets for one Headline Measure. System improvements will be completed in FY 2005-06 and will result in fewer manually processed transactions thereby increasing the percent of transactions processed electronically. Audit adjustments are completed once a year and target was met at mid-year for this measure.

Major priorities over the next two years include:

- Maintaining 67% of transactions processed electronically
- Achieving \$13,000,000 or less in total dollar amount of audit adjustments

PROGRAM HEADLINE MEASURES <u>Internal Audit</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Dollars saved for every dollar spent on internal and operational audits – County	\$6.15	\$32.23	\$35.25	\$2.94	✓
Dollars saved for every dollar spent on internal and operational audits – National Association of Local Government Auditors Benchmark	\$2.94	\$2.94	\$2.13	\$2.94	Benchmark
Dollar value of new <u>ongoing</u> revenue/cost savings generated from audit recommendations (efficiency/effectiveness audits)	\$996,000	\$330,000	\$200,000	\$375,000	No

Program Discussion: Internal Audit met current year performance target for one Headline Measures. The National Association for Local Government Auditor's benchmark went down from \$2.94 to \$2.13. During the year, program staff generated and/or saved \$42.7 million through revenue enhancements and cost savings from mandated audits and operational audits such as the Education Revenue Augmentation Fund (ERAF) audit, which generated unanticipated revenue for the County in the amount of \$29.4 million. The reduced number of operational audits undertaken by the Division during the report period impacted the dollar value of new revenue/cost savings. However, special projects yielded significant amounts of savings and revenue enhancements.

Major priorities over the next two years include:

- Achieving greater rate savings than the national benchmark of \$2.13 saved for every dollar spent
- Achieving new revenue and cost savings of \$375,000

PROGRAM HEADLINE MEASURES <u>Payroll Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating services as good or better	100%	99%	100%	99%	✓
Percent of payroll checks issued correctly	99.9%	99.9%	99.9%	100%	✓

Program Discussion: Payroll Services met current year performance targets for both Headline Measures. A total of 100% of customer survey respondents rated services provided by Payroll staff as good or better. Over 159,000 payroll checks were issued in FY 2004-05, with nearly 100% accuracy. During the year, program staff have implemented, jointly with Employee and Public Services and Information Services Department, the upgrade of the Personnel Information Payroll System (PIPS) to a web-based module that converted the use of social security numbers to system-generated employee identification numbers.

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating of at least 90%
- Maintaining 100% of payroll checks issued correctly
- Achieving 100% direct deposit participation

PROGRAM HEADLINE MEASURES Property Tax/Special Accounting	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating Property Tax services good or better	76%	90%	76%	90%	No
Net County Cost as a percentage of Program's Total Requirements	N/A	-34%	-34%	-29%	✓

Program Discussion: Property Tax/Special Accounting met current year performance targets for one Headline Measure. The 76% customer satisfaction represents a decrease in ratings FY 2003-04. The Division has been working to address customer concerns and ratings are expected to improve in FY 2005-06. The program continues to fully offset its costs through charges for services and grant revenues received through the Property Tax Administration Grant Program, which are used to offset one-time property tax system upgrades. During the year, program staff, jointly with Internal Audit, identified that the Education Revenue Augmentation Fund owed the County, cities, special districts and redevelopment agencies \$42.7 million in "excess" property tax shift as defined by the law. In addition, program staff continue to work on improving property tax system and processes, specifically to provide for the electronic distribution of apportionment reports and payments

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating of at least 90%
- Maintaining a zero Net County Cost program

COUNTY COUNSEL

DEPARTMENT MEASURES County Counsel	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per capita	\$7.83	\$7.89	\$9.05	\$8.88	No
Percent of litigation cases won or resolved with approval from client	89%	98%	100%	93%	✓
Percent of customers rating legal services good or better (reported biannually)	N/A	98%	N/A	N/A	Conducted Biannually
Quality and Outcomes measures meeting performance targets	80%*	80%	75%	82%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The County Counsel's Office met current year performance targets for 75% of its Quality and Outcomes measures. The percent of litigation cases won or resolved has increased from 98% in FY 2003-04 to 100%. The cost per capita will is slightly higher than current year target. The types of cases handled by the County Counsel's Office include: Probate proceedings, General Liability and Children's Services and representation of the County of San Mateo in litigation matters.

During FY 2004-05, the County Counsel's Office accomplished the following:

- Provided representation in both Braun cases, Half Moon Bay Coastside Foundation vs. LAFCo and Oscar Braun vs. County of San Mateo
- Drafted ordinance and procedures for protection of whistleblowers
- Completed various projects in the representation of Children Services, including development of a training program for social workers and completion of a Memorandum of Understanding with law enforcement agencies
- Represented the County of San Mateo before the Assessment Appeals Board in the Genentech appeal

- Assumed representation to Ravenswood School District in the federal court special education case, providing an enormous savings in attorney's fees for the District

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating with Legal Services of at least 90%
- Winning or resolving at least 95% of General Litigation cases with approval of client

COUNTY MANAGER / CLERK OF THE BOARD

DEPARTMENT MEASURES County Manager / Clerk of the Board	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per capita	\$7.98	\$7.27	\$7.13	\$7.88	✓
Quality and Outcomes measures meeting performance targets – ALL County Programs	74%	69%	65%	70%	No
Quality and Outcomes measures meeting performance targets – CMO/Clerk of Board	83%*	50%	64%	60%	✓

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The County met performance targets for 65% of its Quality and Outcomes measures and came in under target of 70%. The County Manager/Clerk of the Board met performance targets for 64% of its Quality and Outcomes measures and exceeded its target of 60%.

During FY 2004-05, the County Manager/Clerk of the Board accomplished the following:

- Provided resources and training
- Represented the County's interest in State/Federal deliberations
- Enhanced public education and communication
- Improved performance and budget monitoring capabilities
- Streamlined internal processes
- Managed new facility construction and renegotiated leased property agreements
- Coordinated the creation and implementation of the new Department of Housing
- Supported efforts to review provisions of indigent health care services

Major priorities over the next two years include:

- Maintaining 0% of budgets exceeding appropriations at year-end
- Ensuring 75% of Quality and Outcomes measures meet performance targets in all County programs
- Achieving an overall customer satisfaction rating of at least 90% from training participants
- Processing at least 96% of agendas accurately
- Publishing at least 94% of agenda items online
- Initiating 100% of Boards and Commissions recruitments within established time frames
- Maintaining 90% of Capital Projects within budget and on schedule
- Maintaining annual leased space costs at \$26.04 or lower

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Clerk of the Board</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of agendas completed accurately	88%	100%	97%	95%	✓
Percent of Board agenda items published online	93%	92%	95%	93%	✓

Program Discussion: The Clerk of the Board met current year performance targets for both Headline Measures with 97% of agendas completed accurately, exceeding target by two percentage points. This measure has improved significantly during the last two years now that Clerk of the Board is fully staffed and trained. The percent of agenda items published online exceeded target and increased from 92% in the prior fiscal year to 95% in the current year. Most departments submit their items electronically to the Clerk of the Board, making it easier to publish online. Items that are difficult to publish online include those that are submitted after the due date or from outside agencies. Staff provided training on preparing Board agenda packets, and they continue to automate and streamline work processes.

Major priorities over the next two years include:

- Processing at least 96% of agendas accurately
- Publishing at least 94% of agenda items online
- Initiating 100% of Boards and Commissions recruitments within established timeframes

PROGRAM HEADLINE MEASURES <u>County Management</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of budgets exceeding appropriations at year-end	1.4%	2.9%	5.6%	0%	No
Percent of customer survey respondents rating training sessions good or better	---	99%	100%	95%	✓

Program Discussion: County Management met current year performance targets for one of two Headline Measures. Four (or 5.6%) of the County's 71 budget units exceeded appropriations by \$6,376,279. The budgets that exceeded appropriations are: the Medical Center (\$4,549,152), the Sheriff (\$1,496,174), Correctional Health (\$280,000) and the Coroner (\$50,953). Funds transferred to the Sheriff and the Coroner covered retirement payouts, retiree health costs, extraordinary events requiring overtime, and other operational costs. Funds transferred to Correctional Health covered extraordinary medical costs for an inmate receiving services at Stanford Hospital. The funds transferred to the Medical Center were primarily for payments to other hospitals for services not provided at the Medical Center, facility related costs at Burlingame Long Term Care, a contract physician, and medical supplies costs. Training was provided for over 300 participants with 100% of survey respondents rating overall satisfaction as good or better. This measure exceeded target and improved over last year's performance.

Program staff also provided several training courses including Media Relations, Legislative Process, Budget Development, Position Control, Preparing Board Agenda Items, Work Planning, Outcome-Based Management Basics, Performance Measurement, Process Mapping, Cost Benefit Analysis, Managing with Data, and Contracts Administration.

Major priorities over the next two years include:

- Maintaining 0% of budgets exceeding appropriations at year-end
- Achieving 75% of Quality and Outcomes measures meetings performance targets in all County programs
- Achieving an overall customer satisfaction rating of at least 90% from training participants

PROGRAM HEADLINE MEASURES Special Services (Real Property/Capital Projects)	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Monthly cost of County leased space	\$2.08	\$2.14	\$2.09	\$2.17	✓
County average market rate (square feet)	\$2.18	\$2.07	\$2.10	\$2.14	Benchmark
Percent of capital projects on schedule	100%	100%	100%	90%	✓
Percent of capital projects within budget	67%	0%	100%	90%	✓

Program Discussion: Special Services met current year performance targets for its Headline Measures. This Program manages over 400,000 square feet of leased facility space at an average cost of \$2.09, which is lower than the prior year and slightly lower than the county average market rate of \$2.10. Program staff continue to manage the construction of the Youth Services Center, which is scheduled for completion by July 2006.

Major priorities over the next two years include:

- Maintaining 90% of capital projects within budget and on schedule
- Maintaining annual leased space costs at \$25.20 or lower (\$2.10 monthly)

EMPLOYEE AND PUBLIC SERVICES (EPS)

DEPARTMENT MEASURES Employee and Public Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per County Employee	\$1,742	\$1,504	\$1,497	\$1,616	✓
Employees Residing in San Mateo County	64%	64%	63%	64%	✓
Quality and Outcomes measures meeting performance targets	83%*	74%	81%	75%	✓

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Employee and Public Services (EPS) met current year performance targets for 81% of its Quality and Outcomes measures. The cost per County employee exceeded target at \$1,497 per employee primarily due to cost savings measures achieved by the Department. The percent of employees residing in San Mateo County is currently 63%, slightly under the target of 64%.

During FY 2004-05, the Employee and Public Services accomplished the following:

- Improved employee recruitment, retention and development
- Improved ability to provide high quality law enforcement, fire and medical dispatch services
- Improved cost effectiveness

Major priorities over the next two years include:

- Improving customer satisfaction and overall performance for all programs
- Reducing liabilities, protect resources and enhance revenue

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>EPS Administration and Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of business work hours network is available	100%	100%	100%	100%	✓
Percent of customers rating services good or better – Nonprofit Partnerships	100%	100%	100%	95%	✓
Percent of customers rating services good or better – Personnel/Payroll customers	100%	100%	100%	90%	✓

Program Discussion: EPS Administration and Support met current year performance targets for all Headline Measures. Customer satisfaction rates remain high at 100%. The percent of business work hours the network is available continues to be 100%.

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating of at least 90%
- Accomplishing 90% of new activities within established timeframe

PROGRAM HEADLINE MEASURES <u>EPS Special Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating Services provided by Purchasing good or better	86%	94%	94%	90%	✓
Percent of customer survey respondents rating Services provided by Copy Center good or better	98%	98%	96%	95%	✓
Percent of customer survey respondents rating Services provided by Mail Services good or better	99%	97%	93%	90%	✓
Total dollars saved through Vendor Agreements and Purchase Orders	\$7,192,903	\$7,009,942	\$8,559,691	\$6,696,000	✓
Total dollars saved using Mail Services vs. U.S. Mail	\$678,912	\$754,817	\$723,985	\$600,000	✓
Total dollars saved by using Copy Center vs. external vendors	\$162,547	\$146,762	\$136,176	\$150,000	No

Program Discussion: EPS Special Services met current year performance targets for five of six Headline Measures. Customer satisfaction ratings continue to be high for Purchasing, Mail Services and Copy Center and all units met target. However, due to budget reductions, departments have reduced requests for services from the Copy Center. As a result, dollars saved fell short of current year target. EPS Special Services processes over 5.4 million pieces of mail, makes almost seven million copies and handles over \$46 million in purchasing requests annually.

Major priorities over the next two years include:

- Achieving an overall customer satisfaction ratings of at least 90%
- Saving approximately \$6.5 million

PROGRAM HEADLINE MEASURES EPS Human Resources	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating overall services good or better	100%	95%	100%	90%	✓
Percent of clients satisfied with new hires after six months	87%	91%	92%	80%	✓

Program Discussion: EPS Human Resources met current year performance targets for both Headline Measures. Customer satisfaction remains high and has improved from the prior year.

Major priorities over the next two years include:

- Resolving 85% of employment complaints prior to formal process
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES EPS Public Safety Communications	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of 9-1-1 callers rating overall satisfaction with services good or better	96%	99%	100%	98%	✓
Percent of emergency service providers rating overall satisfaction with services good or better	100%	94%	99%	90%	✓
Percent of high priority <u>Police</u> calls dispatched within established time frames	82%	86%	88%	82%	✓
Percent of high priority <u>Fire</u> calls dispatched within established time frames	94%	94%	94%	94%	✓
Percent of high priority <u>Medical</u> calls dispatched within established time frames	93%	93%	93%	94%	No

Program Discussion: EPS Public Safety Communications (PSC) met year performance targets for four of its five Headline Measures. Customer satisfaction remains high with 100% of 9-1-1 customer survey respondents rating services as good or better and exceeding target. Customer satisfaction ratings from emergency service providers also exceeded target. The percent of high priority medical calls came in slightly short of target but still exceeds nationally established standards.

Major priorities over the next two years include:

- Processing 82% high priority police calls and 94% of high priority medical and fire calls within established timeframes
- Achieving an overall customer satisfaction rating of at least 90%
- Reducing the number of information calls by 6%

PROGRAM HEADLINE MEASURES EPS Revenue Services – Animal Licensing	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of fees collected by the due date	86%	83%	76%	80%	No
Animals licensed in the County as percentage of animals licensed in comparable agencies	134%	138%	168%	140%	✓

Program Discussion: EPS Revenue Services-Animal Licensing met current year performance targets for one Headline Measure. A total of 57,032 animal licensing bills were issued in the current year. The percent of fees collected by the due date is lower than the FY 04-05 target; however, although pet owners did not pay their animal license fees by the first notice due date, overall collections were higher. The percent of animals licensed in the County is higher compared to other jurisdictions. During the year, staff has explored an outreach program with three cities and researched software to support online payment processing for Animal Licensing.

Major priorities over the next two years include:

- Licensing an additional 300 dogs
- Collecting 80% of fees by due date

PROGRAM HEADLINE MEASURES EPS Revenue Services - Collections Unit	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Collections rate	42%	53%	39%	43%	No
Cost of collections ratio	17%	18%	19%	19%	✓

Program Discussion: EPS Revenue Services-Collections met current year performance target for one of its two Headline Measures. The total dollars collected in FY 2004-05 is \$16.3 million and lower than the \$18 million target. A large volume of referrals from the Medical Center was received late in the second quarter, resulting in decreased collections. During the fiscal year, staff has implemented a new payment system that allows debtors to pay outstanding invoices online, implemented a procedure to use the Franchise Tax Board for third party collections, piloted a Saturday collection process to evaluate the possibility of increasing revenue and expanded the use of Employment Development Department information for collection of accounts.

Major priorities over the next two years include:

- Achieving a 40% collection rate
- Maintaining the cost of the collections ratio at 19%

INFORMATION SERVICES DEPARTMENT (ISD)

DEPARTMENT MEASURES Information Services Department	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per capita	\$51	\$49	\$37.55	\$54	✓
Cost per County employee	\$6,670	\$5,875	\$4,723	\$6,943	✓
Quality and Outcomes measures meeting performance targets	82%*	56%	88%	60%	✓

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The Information Services Department (ISD) met current year performance targets for 88% of its Quality and Outcomes measures. The cost per capita is below target due to savings generated from vacancies and other cost saving measures. The cost per County employee is below target due to cost savings measures implemented by the department.

During FY 2004-05, the Information Services Department accomplished the following:

- Reduced the cost of PC acquisition and cost of standard maintenance
- Maintained network and server availability
- Promoted network and data security
- Enhanced the project management program

Major priorities over the next two years include:

- Maintaining high availability of network and servers
- Maintaining or improving upon programs to keep cost of ownership of PCs low
- Ensuring IT projects follow established project management standards
- Ensuring IT projects are completed on time and within budget
- Achieving an overall customer satisfaction rating of at least 90%

Headline Measures Discussion

PROGRAM HEADLINE MEASURES Information Technology Availability	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Information and Technology services available	99%	100%	100%	100%	✓
Percent of user satisfaction with Information Technology availability necessary to perform job functions rated as good or better	86%	93%	93%	95%	No

Program Discussion: ISD Information Technology Availability met current year performance targets for one of two Headline Measures. User satisfaction with IT availability remained high but came in slightly under target. PC availability at the San Mateo Medical Center (SMMC) impacted overall performance. Performance is expected to improve in FY 2005-06 with the deployment of new PCs at the SMMC and the Health Department.

Major priorities over the next two years include:

- Maintaining 99.8% availability of servers and the network
- Maintaining or improving upon the 1:250 technician to PC ratio

PROGRAM HEADLINE MEASURES Project Management	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of completed projects meeting primary project goals - Small Projects	N/A	52%	100%	80%	✓
Percent of completed projects meeting primary project goals - Medium Projects	N/A	52%	100%	75%	✓
Percent of completed projects meeting primary project goals - Large Projects	N/A	52%	100%	70%	✓
Percent of customer survey respondents rating satisfaction with delivered projects good or better - Small Projects	N/A	100%	86%	80%	✓
Percent of customer survey respondents rating satisfaction with delivered projects good or better - Medium Projects	N/A	100%	95%	80%	✓
Percent of customer survey respondents rating satisfaction with delivered projects good or better - Large Projects	N/A	100%	100%	80%	✓

Program Discussion: ISD Project Management met current year performance targets for all Headline Measures. Customer survey responses relating to satisfaction with delivered projects and completed projects meeting primary goals are showing higher than anticipated ratings. Service improvements were a result of holding regular meetings to review project goals and maintaining an emphasis on 'Service Excellence,' an internal initiative that requires ISD staff to provide services 'above and beyond' the agreed-upon service levels.

Major priorities over the next two years include:

- Ensuring at least 90% of IT Projects follow established Project Management procedures
- Completing at least 90% of IT projects on time and within budget
- Ensuring at least 90% of completed projects meet project goals
- Achieving at least 90% good or better customer satisfaction rating for completed projects

TREASURER-TAX COLLECTOR

DEPARTMENT MEASURES Treasurer – Tax Collector	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per tax bill	\$7.60	\$7.56	\$11.89	\$11.84	✓
Cost per capita	\$5.70	\$5.39	\$5.85	\$8.00	✓
Quality and Outcomes measures meeting performance targets	92%*	70%	85%	72%	✓

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The Treasurer-Tax Collector met current year performance targets for 85% of its Quality and Outcomes measures. The cost to produce bills exceeded target by \$.05. The number of bills mailed impacts the cost per bill. There were fewer bills mailed during this report period. The Tax Collector mailed 354,276 tax bills, representing over \$1.3 billion in collections. The cost per capita is below target due to some technology projects being put on hold pending further analysis.

During FY 2004-05, the Treasurer-tax Collector accomplished the following:

- Improved system capabilities
- Improved communication and services
- Improved ability to process payments

Major priorities over the next two years include:

- Streamlining the collection/deposit process
- Improving customer services
- Enhancing revenue

Headline Measures Discussion

PROGRAM HEADLINE MEASURES Tax Collector	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Dollars collected (all tax rolls)	\$1.185B	\$1.243B	\$1.317B	\$1.100B	✓
Secured Collection Rate: County	99%	99%	99%	98%	✓
Secured Collection Rate: Statewide Average	97%	97%	98%	97%	Benchmark

Program Discussion: The Tax Collector met current year performance targets for both Headline Measures. The collection rate remains high at 99%, slightly higher than the statewide average of 98%. During the year, program staff completed the new tax roll extension process on the Tax Collector's AS/400 server allowing tax bills to be printed, mailed and payments posted earlier than any other year; completed the apportionment reports project for the Controller; and developed a web-based application page for the Controller to display tax rate information for government agencies and public inquiries.

Major priorities over the next two years include:

- Ensuring tax bills are mailed before September 10th
- Decreasing the number of tax bills to 360,000
- Continuing to outperform the state in the collection of secured and unsecured taxes

PROGRAM HEADLINE MEASURES Treasurer	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating services good or better	100%	100%	100%	97%	✓
County-Pool 3 yield rate	3.40%	2.84%	3.01%	2.50%	✓
State-Local Agency Investment Fund (LAIF) yield rate	1.88%	1.52%	2.61%	2.00%	Benchmark

Program Discussion: The Treasurer met current year performance targets for both Headline Measures. The County's cash flow forecasting remains strong. Pool balances have been maintained due to additional revenue from processing Medical Center payments, conversion from checks to electronic transfers and accepting Paying Agent responsibility for several General Obligation Bonds.

Major priorities over the next two years include:

- Outperforming the State (LAIF) vs. the County Pool 3 by .25 basis points
- Achieving overall customer satisfaction ratings of at least 90%
- Processing 98% of deposits within one day

CRIMINAL JUSTICE

Customer Satisfaction Ratings - Cares Survey Results

Criminal Justice departments received a total of 521 surveys during FY 2004-05. These departments include: Department of Child Support Services (DCSS), Coroner's Office, District Attorney's Office, Probation Department and Sheriff's Office. Ninety percent of respondents rated overall satisfaction as good or excellent, which is same overall satisfaction rating received in the prior year. DCSS and the District Attorney's Office mail their surveys while others make them available in the lobby areas. For the most part, customer feedback was positive.

District Attorney (Public Administrator)

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	69%	23%	0%	8%	13
2003-04	37.5%	50%	12.5%	0%	10
2002-03	41%	28%	7%	24%	30
2001-02	90%	7%	1%	2%	31

The Public Administrator received 13 surveys with 92% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction increased by 4 percentage points and the number of survey responses increased by 3. Deputy Public Administrators continue to distribute surveys to everyone involved with an estate during the administration period. The surveys are mailed at the time the estate is closed. The Department closed 61 estates and distributed 206 surveys. The majority of survey recipients have previously received, completed, and returned surveys from prior estates (cemeteries, funeral homes, realtors, etc.), so a response rate of 6% is considered good.

Department of Child Support Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	53%	19%	12%	16%	281
2003-04	45%	27%	12%	16%	313
2002-03	58%	27%	5%	10%	258
2001-02	52%	27%	7%	14%	460

The Department of Child Support Services received 281 surveys with 72% of respondents rating overall satisfaction as good or excellent. Overall satisfaction remained flat, however the number of survey responses decreased slightly. A total of 5,060 surveys were sent to customers who either contacted the department in person or via telephone, for a 5.6% response rate. Custodial parties returned 66% of the surveys. Positive comments about services were received on 67% of the surveys that included comments. Negative comments generally addressed two issues: lack of consistent payments and the perception that the processes take too long. All surveys are reviewed and a monthly report is provided to management and supervisory staff. This report includes information related to positive and negative comments and/or suggestions provided by customers. Follow-up measures are taken to ensure appropriate customer service is provided. Surveys are available in the lobby and in interview booths. Ten lobby customers and ten call center customers are randomly selected and mailed surveys daily.

Sheriff's Office

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	75%	20%	5%	0%	79
2003-04	84%	15%	1%	0%	155
2002-03	88%	10%	1%	1%	92
2001-02	68%	8%	3%	21%	71

The Sheriff's Office received 79 surveys with 95% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction decreased by 4 percentage points, but overall satisfaction remains high. The number of survey responses decreased by 76 and the lower response rate may be a factor in lower reported overall satisfaction. Many of the community policing programs, such as bicycle safety, car seat inspections, Sheriff's Activities League (SAL) and the school resource officers received the

most written comments. Of the specific customer satisfaction questions, "Knowledge of Staff Assisting You" and "Courtesy of Staff" received the highest ratings (85.6 and 85.7% Excellent, respectively), while the lowest was "Helpfulness of Written Information" (66.7% Excellent).

Coroner's Office					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	61%	33%	4%	2%	106
2003-04	60%	32%	4%	4%	106
2002-03	72%	28%	0%	0%	20
2001-02	71%	21%	6%	2%	66

The Coroner's Office received 106 surveys with 94% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction decreased by one percentage point. The number of surveys received remained flat.

Probation Department					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	75%	20%	2.5%	2.5%	42
2003-04	67%	33%	0%	0%	16
2002-03	N/A	N/A	N/A	N/A	N/A
2001-02	74%	24%	2%	0%	93

The Probation Department received 42 surveys with 95% of respondents rating overall satisfaction as good or excellent. Response rates for customer survey requests remain low given the nature of the work, but the department's emphasis on customer satisfaction and input remains high. In addition to CARES, the Probation Department seeks input from stakeholders on an on-going basis to improve services and meet customer needs.

DISTRICT ATTORNEY'S OFFICE

District Attorney/Public Administrator	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per case	\$741	\$725	\$905	\$677	No
Percent of victims provided services by the Victim Center	95%	96%	96%	96%	✓
Percent of Public Administrator cases closed within 12 months	67%	100%	85%	90%	✓
Percent of felony cases where victim services are provided	55%	58%	65%	57%	✓
Quality and Outcomes measures meeting performance targets	100%	86%	80%	90%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Eighty percent of Quality and Outcomes measures for the District Attorney's Office met or exceeded targets. The department missed its target of 90% because the cost per case was higher than anticipated. The 2005 target was set using an incorrect CPI rate making the target unachievable given rising employee costs. Additionally, the number of cases referred from outside agencies was significantly lower while the number of prosecutors remained the same. Victim services provided by the Victim Center remain effective with 96% of victims receiving services. Through the Victim Center, the DA's Office makes contact with all victims of crime, including unsolved crimes. The trend for victim services provided to victims of felony crimes remains favorable. The percent served increased by seven percentage points. The percent of Public Administrator cases closed within 12 months decreased by fifteen-percentage points due to a handful of complex cases. Those cases were open for a longer period due to the need for tenant evictions, incidents of theft and vandalism, and difficult with heirs in the disposition of assets.

During FY 2004-05, the Department accomplished the following:

- Provided increased personal service to victims through the Victim Center
- Provided special training for three Deputy District Attorneys who have successfully prosecuted gang cases
- Successfully prosecuted, through trial, significant elder abuse crimes
- Increased warehouse fees to fund an Estate Property Officer dedicated to inventory control

Major priorities over the next two years include:

- Providing Victim Center services to at least 98% of victims in all cases and 58% of victims in felony cases
- Reducing gang proliferation
- Aggressively prosecuting elder abuse, public correction and identify theft cases
- Closing 90% of Public Administrator estate cases within 12 months

DEPARTMENT OF CHILD SUPPORT SERVICES

Department of Child Support Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per child served	\$630	\$619	\$553	\$629	✓
Percent of current child support owed that is paid	56%	60%	60%	57%	✓
Total amount of child support collected (in millions)	\$29.3	\$30	\$28.3	\$30	No
Quality and Outcomes measures meeting performance targets	56%	83%	56%	89%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Fifty-six percent of Quality and Outcomes measures for the Department of Child Support Services met or exceeded targets. Child support collections are closely tied to the health of the county economy. After peaking at \$31.0 million in FY 2001-02, collections dropped to \$29.3 million in FY 2002-03 but experienced a slight up-tick the following year that dropped back down in FY 2004-05. The decrease is credited to a 4% reduction in direct payments and wage attachments; a 50% decrease in unemployment benefit intercepts and a 25% decline in federal and state tax intercepts. These decreases indicate that fewer people are receiving unemployment benefits, but not all of them have found new work. One positive trend is the increased use of automated payments options. About 10% of the total FY 2004-05 collections were paid by credit cards and via electronic fund transfers, which are more efficient and cost-effective than processing checks.

During FY 2004-05, the Department accomplished the following:

- Collected nearly \$30 million in child support
- Ranked among the top performing counties in the state in the collection of current support and the percent of cases with payment on arrears
- Successfully transitioned to a new computer system at the direction of the State
- Implemented Electronic Fund Transfer on the web for employers and credit payment options for obligors
- Continue to offer clients mediation of access and visitation issues through the Family Mediation Program
- Maintained a 50 second average wait time in the Call Center with a 3% increase over the prior year and 25% fewer staff
- Expanded services for incarcerated parents

Major priorities over the next two years include:

- Increasing the percent of child support owed that is paid to 60%
- Providing responsive customer service

SHERIFF'S OFFICE

DEPARTMENT MEASURES Sheriff's Office	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Average cost per dispatched call for service	\$399	\$452	\$494	\$480	No
Annual Part 1 crimes per capita - San Mateo County	.027	.027	.028	.028	✓
Annual Part 1 crimes per capita - Bay Area Counties	.037	.037	.04	.038	Benchmark
Annual Part 1 crimes per capita - Statewide	.04	.04	.04	.04	Benchmark
Quality and Outcomes measures meeting performance targets	60%*	80%	61%	62%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Sixty-one percent of Quality and Outcomes measures for the Sheriff's Office met or exceeded targets. The number of calls for service has remained relatively flat from the prior to current year, however the cost of salaries and benefits for Sheriff's Deputies has increased, resulting in a higher average cost per dispatched call for service. Crimes per capita in San Mateo County have been lower than expected and continue to be better than seen statewide. San Mateo County remains 33% below the statewide average in crimes per capita and 27% below Bay Area crime rates. The inmate population at the Maguire Correctional Facility continues to be high, but is lower than the peak experienced in the spring/summer of 2004. The average daily population for the year is projected to be below 900 inmates. While the size of the inmate population has stabilized, other jail management issues continue. Specifically, the percent of inmates classified in high-risk categories including "Gang affiliated" and "Assaultive" has been on the rise. The number of inmate assaults against other inmates has continued to increase, however the number of assaults against staff has dropped. This is the result of efforts to improve training and communication at the Maguire facility.

During FY 2004-05, the Department accomplished the following:

- Worked with the Court to pilot a work furlough program for low-risk inmates
- Received ASCLD accreditation of the Forensic Laboratory
- Installed mobile data terminals in all patrol vehicles
- Expanded the Street Crime Suppression Team to include activities countywide
- Developed a school emergency plan available to all schools and school districts in the county
- Expanded diversion and other juvenile programs to the coastside

Major priorities over the next two years include:

- Implementing a Work Furlough Program utilizing Global Positioning System (GPS) Electronic Monitoring
- Reducing assaults at the Maguire Correctional Facility
- Working with the Courts to reduce jail overcrowding through alternatives to incarceration
- Managing countywide homeland security grants through the Office of Emergency Services
- Training and supporting 100% of the Community Emergency Preparedness Teams (CERT)
- Providing enhanced bilingual services for specific communities
- Contributing to the financing and construction of a new Regional Police Training Academy at the College of San Mateo campus
- Exploring opportunities for regionalization of services

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Administrative and Support Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of budget allocated to Administrative Services	5.0%	4.3%	4.3%	4.1%	No
Percent of customer satisfaction respondents rating services good or excellent	98%	99%	95%	75%	✓

Program Discussion: Sheriff Administrative and Support Services met performance targets for one of the two Headline Measures. The percent of department budget devoted to administrative services remains below 5%, though it fell short of the target to reduce the percentage to 4.1%. The administrative cost per employee also remains lower than projected (\$7,486). 79% of revenue accounts met or exceeded the budget, which is down by six-percentage point from the prior year, due largely to decreases in revenue received from the state and federal governments. Customer satisfaction with the department exceeded the target and remains high with 99% of respondents reporting satisfaction with service delivery.

Major priorities over the next two years include:

- Completing implementation of technology upgrade projects
- Establishing a regional law enforcement training academy
- Implementing a re-engineered work furlough program using GPS electronic monitoring
- Retaining core services in the face of rising costs

PROGRAM HEADLINE MEASURES <u>Civil and Records Bureau</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Temporary Restraining Order (TRO) cases filed that are served	71%	73%	74%	75%	No
Number of criminal warrants cleared by county criminal justice agencies (represents current and prior years)	8,645	11,997	8,970	8,450	✓

Program Discussion: The Sheriff's Civil and Records Bureau met the performance target for one of two the Headline Measures. The percent of TRO cases filed that are served has increased incrementally over the past few years, missing the target by one percentage point. This positive trend may be close to its efficiency point. Efforts are made to serve all TROs, including up to three service attempts at various times and days of the week. State law requires a minimum of two attempts. The number served is affected by availability and schedules of those being served. With fewer available deputies and less dedicated overtime to serve the Orders, the percent served is not likely to increase further. There are approximately 26,000 active warrants in San Mateo County (all agencies). This number has decreased steadily over the past three years as efforts to clear old warrants has been a priority. In FY 2004-05, 11,769 new warrants were added, and 8,970 warrants were cleared. This represents a 64% clearance rate, which is up significantly over the prior year rate of 43%. As countywide police resources are strapped the ability to clear old cases decreases.

Major priorities over the next two years include:

- Ensuring at least 75% of Temporary Restraining Orders are served
- Maintaining the percent of criminal warrants cleared by county criminal justice agencies

PROGRAM HEADLINE MEASURES <u>Custody Programs</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Jail beds saved by using custody alternatives programs	42,453	32,215	34,776	40,886	No
Annual value of community service work provided by work crews	\$2,312,843	\$2,409,071	\$2,368,422	\$2,646,135	No

Program Discussion: Sheriff Custody Programs did not meet performance targets for either of its Headline Measures. The Sheriff's Work Program (SWP) and Electronic Monitoring Program (EMP) had a combined average daily population of just over 450 inmates, up from the prior year average of 423. Nearly all of that population is in SWP with only a handful court-assigned to EMP. These programs assist in managing the jail population and incarceration costs. The number of hours and value of the Fire Safe Team are now being tracked. This program also contributes to each of the Headline Measures, but has a small average daily population of 10. Community agencies receive a total value of \$2.4 million in annual services by Custody Alternatives program inmates with a total of 346,746 hours.

Major priorities over the next two years include:

- Increasing the number of jail beds saved by 5%
- Increasing total dollars saved by government and non-profit agencies by 2%
- Upgrading the Women's Correctional Center facility

PROGRAM HEADLINE MEASURES <u>Investigations Bureau</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of first time offenders successfully completing the Juvenile Diversion Program	86%	95%	95%	95%	✓
Percent of youth re-offending within 12 months after completing Diversion Program	21%	16%	16%	20%	✓
Percent of cleared cases submitted for prosecution	47%	45%	37%	44%	No

Program Discussion: Sheriff Investigations Bureau met performance targets for two of its three Headline Measures. Total cases assigned for investigation increased from 6,000 to 6,994. Investigations performed by the task forces have become more complex and with more co-conspirators, reflecting organized gang consolidation in narcotics. This has resulted in fewer cases, but a higher number of arrests. The rate at which cleared cases are submitted for prosecution is a significant measurement of case follow-up and investigative capabilities. The Bureau reported that 43% of all cases were cleared, which remains well above the statewide average of 23%. Thirty-seven percent of cleared cases were submitted for prosecution. The South and Central County clearance rate was considerably higher than the North County Bureau, which includes San Francisco International Airport where crimes often involve parties that are no longer available even a few hours after a crime is reported.

The Juvenile Diversion Program has two components: Diversion, which is directed at youth who have committed a minor non-violent crime; and Intervention, which is directed at youth who have not committed a crime, but are exhibiting behavioral problems at school or home. The overall "recidivism" rate of 16% entering or re-entering the criminal justice system includes beneficiaries of both Diversion and Intervention services. Youth placed in Diversion experience low recidivism rates of less than 10% due to steady and intensive case management. Youth who have not entered the criminal justice system but have displayed signs of delinquency are directed to Intervention services (i.e., referral to after school programs). Seventy percent of these youth are successfully prevented from entering the juvenile justice system (included as 30% recidivism rate). Despite reduced staffing levels, efforts to ensure program completion by participants have been paying off and 93% are projected to complete the program by year-end.

Major priorities over the next two years include:

- Submitting at Least 38% of Investigations Cases to the District Attorney's Office for Prosecution
- Managing the Juvenile Diversion Program with a Recidivism Rate of Less than 20%

PROGRAM HEADLINE MEASURES Maguire Correctional Facility	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of ADP classified as At-Risk	73.4%	76.3%	76.0%	75.5%	--
Average daily population managed at the Maguire Correctional Facility	874	963	893	930	✓
Total In-custody assaults	44	97	89	65	No

Program Discussion: Maguire Correctional Facility met current year performance targets for one of two Headline Measures. The Average Daily Population (ADP) that was hovering around 1,000 inmates during much of 2004 returned to more manageable levels, with an ADP of 893. Despite the decrease in ADP, the number of assaults by inmates remains high. The overall number of assaults is slightly lower than last year (89 vs. 97); however, the number of inmate assaults on other inmates has increased. The level of violent and "dangerous to self and others" inmate classifications (including gang affiliation and assaultive) is rising significantly, which follows Bay Area, statewide and national trends, and is reflective of general societal and economic trends noted by experts. However, there were no escapes.

Major priorities over the next two years include:

- Reducing inmate assaults by 26%
- Decreasing the number of documented major rule violations committed by inmates by 7%

PROGRAM HEADLINE MEASURES Office of Emergency Services (OES)	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Operational Area (JPA) customers rating OES support as good or excellent in annual customer survey	100%	100%	N/A	90%	Insufficient Data
Annual calls for service	634	442	418	425	No

Program Discussion: Despite an average of 2-3 Level Orange federal government alerts annually, OES has seen a drop in service calls of 34% from FY 2002-03 levels. The OES remains positioned to respond to an increase in calls should a new domestic security crisis arise. OES responds to over 65 major emergencies each year including serious fires, extreme storm conditions, SWAT incidents, lost person searches, rescues, hazardous materials incidents and national security alerts. The office has been able to respond to 99% of incidents within one hour. Victim assistance remains a high priority, both for OES and the first responder agencies that OES supports. Services and support from family members or the Red Cross have been quickly brought to the scene to aid victims temporarily or permanently made homeless by emergency incidents. The annual FTE hours contributed by volunteers to Emergency Services programs was 20,978 hours, which outpaced the target of 17,384 hours. This translated into a savings of \$864,047 annually. The OES did not conduct an annual customer satisfaction survey in FY 2004-05, but will do so in the coming fiscal year.

Major priorities over the next two years include:

- Meeting the County standard for customer satisfaction of at least 90%
- Training and supporting 100% of the Community Emergency Preparedness Teams (CERT)
- Completing the Multi-Hazard Emergency Plan Update
- Eliminating 100% of collected explosive hazards (e.g., fireworks)

PROGRAM HEADLINE MEASURES <u>Office of Professional Standards</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of probationary employees successfully completing training	95%	98%	93%	75%	✓
Percent of new hires who are female and/or minority officers	57%	43%	47%	45%	✓

Program Discussion: Sheriff Office of Professional Standards met performance targets for both Headline Measures. Performance in this Bureau is largely driven by recruitment and training activities for new hires. Bureau activities have been considerably down due to staffing reductions and the Countywide-hiring freeze. Recruitment efforts for new hire Correctional Officers and Deputies have been postponed or cancelled altogether, and limited hiring took place. Only in the area of lateral transfers from other agencies has hiring been above projections. This has a negative effect on female and/or minority officer hires since the lateral moves are predominately white male police officers who were hired 10-25 years ago. Most mandated training activities were maintained although the partial loss of both POST and STC training reimbursement lowered training activities in some areas.

Major priorities over the next two years include:

- Ensuring at least 90% of probationary employees successfully complete training
- Increasing percentage of new hires who are women and/or minorities to 40%
- Maintaining training to the standards of the State of California

PROGRAM HEADLINE MEASURES <u>Patrol Bureau</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Average cost per dispatched call	\$399	\$452	\$494	\$480	No
Annual Part I crimes per capita: San Mateo County	.027	.027	.028	.028	✓
Annual Part I crimes per capita: Bay Area Counties	.037	.037	.04	.039	Benchmark
Annual Part 1 crimes per capita – Statewide	.04	.04	.04	.04	Benchmark

Program Discussion: Sheriff Patrol Bureau met performance targets for one of two Headline Measures. The cost per dispatched call for service was \$494, a 9.3% increase. This was primarily due to increases in retirement costs. The number of dispatched calls for service (57,662) was less than prior years due to a reduction in the number of on-view and self-initiated service calls as the result elimination of the Community Police Unit countywide.

The crime rate in San Mateo County continues to be lower than in neighboring counties and Statewide. The number of Part I crimes in 2004 was 19,158, which is lower, per capita, than the surrounding major Bay Area counties. For 2004, however, indicators both within and outside the County indicate crime rates are rising. Available 2004 Department of Justice (DOJ) crime statistics for selected surrounding jurisdictions show homicide and violent crime has increased in San Jose, San Francisco, and Daly City. In the City of East Palo Alto, gang-related shootings have been on the rise. Other Peninsula cities have also reported increased gang activity. In FY 2004-05, the Sheriff's Office responded to several requests for mutual aid from Peninsula cities. The Department remains committed to working with all communities in the county to prevent and detect crime and to apprehend criminals.

Response times for priority (emergency) service calls range from 3:58 minutes in urban areas to 10:53 minutes in rural areas. Coastside response times vary by location and have increased due to reduced staffing. The number of overall responses to calls for service went down moderately in 2004 due to elimination of the Community Police Unit countywide, which engaged in many self-initiated on-scene

prevention activities. Total reported Part One crimes including homicide, forcible rape, robbery, assault, burglary, larceny, theft, arson and vehicle theft declined in 2003, but appear to be increasing for 2004, based on preliminary DOJ analysis.

Major priorities over the next two years include:

- Responding to calls for service within four minutes in Urban Areas and eleven minutes in Rural Areas
- Ensuring the average cost per dispatched call for service remains at a consistent and reasonable level
- Reducing gang-related violence

PROGRAM HEADLINE MEASURES Sheriff's Forensic Laboratory	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Major Cases completed in less than 30 days	10%	5%	17%	30%	No
Percent of Major Cases completed in less than 60 days	15%	10%	38%	55%	No
Percent of customers rating turnaround time as good or better	N/A	N/A	96%	65%	✓

Program Discussion: In FY 2004-05 a new procedure for all major crime scene cases was implemented. Within seven days of the event all of the involved agencies are brought together to triage the processing of evidence collected at the crime scene. These meetings have been successful in opening lines of communication while allowing for better use of limited resources and reducing the cost of analysis. While the targets of 30% of Major Cases completed within 30 days and 55% within 60 days were not met, considerable improvement has been made and the trend is favorable. Such improvements are reflected in the sharp increase in customer satisfaction. The Laboratory will continue to focus on timely processing and analysis of submitted evidence with an eye toward customer satisfaction.

Major priorities over the next two years include:

- Ensure Lab Casework for 65% of Major Cases is Completed within 60 Days
- Explore Opportunities for Additional Revenue

PROGRAM HEADLINE MEASURES Transportation and Court Security	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of inmates transported per Deputy	1,268	1,527	1,599	1,260	✓
Number of courtroom incidents requiring legal action by a deputy	15	14	20	16	No

Program Discussion: Sheriff Transportation and Court Security met current year performance targets for both Headline Measures. There have been no escapes and the number of injuries during transport has been cut in half, with only three reported.

Major priorities over the next two years include:

- Ensuring no escapes or injuries occur during inmate transportation or in the courtroom
- Reducing court operating costs

PROBATION DEPARTMENT

DEPARTMENT MEASURES Probation	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Probation average annual service cost	\$320	\$346	N/A	\$400	N/A
Quality and Outcomes measures meeting performance targets	59%*	63%	62%	65%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Sixty-two percent of Quality and Outcomes measures for the Probation Department met or exceeded targets. This is generally in-line with prior years. The institutions have been performing well, meeting 75% of the targets for Quality and Outcome measures for Hillcrest and Camp Glenwood. Eighty-one percent of Juvenile programs are expected to achieve their targets and 62% of the Adult programs are expected to achieve their targets. The combination of lost and frozen positions requiring the re-deployment of staff along with the enactment of Proposition 36, which offers chemically dependant defendants a less structured alternative to programs like Drug Court and Bridges, resulted in the decreased populations and affected performance results in the Adult Programs.

During FY 2004-05, the Department accomplished the following:

- Implemented Electronic Monitoring Program as an alternative to juvenile hall detention
- Completed training and began implementation of the Youth Cognitive Skills training programs at Glenwood and Juvenile Hall
- Prepared for transition into new Youth Services Center
- Implemented redesign plan to provide multiple levels of supervision services throughout the County to improve community response and client compliance
- Coordinated acquisition of validated case assessment and case management tool that interfaces with new Juvenile Case Management System
- Developed gender specific program for female adolescents as the basis for the new girls camp
- Participated in a feasibility study exploring the transfer of juvenile traffic services to the Court
- Implemented requirements of Proposition 69, which requires collection of DNA for specified criminal and juvenile populations
- Completed implementation of juvenile data system and integrate the system with new assessment tool

Major priorities over the next two years include:

- Transitioning to new Youth Services Center
- Reducing juvenile hall population
- Increasing the number of juveniles who annually complete the Camp Glenwood program
- Increasing the number of youth served on diversion/ prevention caseloads by 10%
- Increasing number of youth not re-offending while on probation
- Implementing validated assessment tool to better assess department resource needs for supervision services
- Ensuring 97% of all pre-trial and court ordered reports are completed accurately and submitted within established timeframes

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Probation Administration</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Restitution dollars collected from defendants on behalf of victims	\$744,803	\$609,847	\$543,729	\$637,000	No
Percent of customer survey respondents rating service good or excellent	77%	93%	95%	70%	✓

Program Discussion: Probation Administration met performance targets for one of two Headline Measures. The department continued to place a priority on victim restitution following the transfer of the Victim Center to the District Attorney's Office in 2002. The percent of customer survey respondents rating services good or better increased over the prior year. The department places a high value on customer/stakeholder input.

Major priorities over the next two years include:

- Successfully transitioning to the new Youth Services Center
- Developing Department management team
- Developing an Adult Division data system and assessment tool to better manage supervision services

PROGRAM HEADLINE MEASURES <u>Adult Court Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of reports per officer per year	535	491	548	552	No
Percent of reports not requiring remedial action (modification due to technical errors)	97%	98%	98%	98%	✓

Program Discussion: Probation Adult Court Services met performance targets for one of two Headline Measures. As the result of working with the Court to ensure their needs for information are provided in an effective and timely manner. Modifications to the amount and type of reports provided to the Court have improved the quality and usefulness of the documents.

The percent of reports requiring remedial correction based on error remains low. This is attributable to staff training as well as frequent communication with the Courts to determine what is needed for them to effectively do their job. In addition, the Adult Division and District Attorney's Office staff recognize that there are areas where the departments can improve inter-departmental operations in the area of processing, filing and routing of court documents.

Major priorities over the next two years include:

- Ensuring 95% of all pre-trial and court ordered reports are completed and accurately submitted within established timeframes

PROGRAM HEADLINE MEASURES <u>Adult Supervision Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Client to Staff Ratio – Intensive Supervision	102	84	71	75	✓
Percent of graduates completing probation without committing new crimes	71%	54%	66%	68%	No

Program Discussion: Probation Adult Supervision Services met performance targets for one of two Headline Measures. The goal of the Probation Department is to achieve low staffing ratios for Intensive caseloads. Using improved risk assessment tools to identify the most dangerous offenders has allowed for more targeted supervision of the most serious offenders with a higher percentage placed on the automated caseload (Computer Assisted Supervision Team - CAST) system. The percent of total probation caseload on CAST has stabilized at 65%. The downside to placing increasing numbers of probationers on CAST is that inevitably the percent of caseload that falls into the higher-risk offender categories rises and receives no direct supervision or services.

The percent of offenders completing probation without a new law violation for CAST caseloads has dropped by six percentage points to 85%. The department continues to work with the Court to reduce referrals and keep caseloads at a level where supervision can affect change.

Major priorities over the next two years include:

- Continuing to support and collaborate with community-based treatment programs and local law enforcement
- Providing the most current and effective case-management training available

PROGRAM HEADLINE MEASURES <u>Drug Treatment/Relapse Prevention Services</u>	2003 Actuals	2004 Actuals	2005 Actual	2005 Target	Target Met
Percent of Probationers successfully completing programs	85%	75%	83%	73%	✓
Percent of Drug Court and Bridges Program participants who are drug free and maintaining their own housing	94%	94%	100%	94%	✓

Program Discussion: Probation Drug Treatment/Relapse Prevention Services met current year performance targets for both of its two Headline Measures. Proposition 36 has had a noticeable impact on the number of probationers entering Drug Court and the Bridges Programs. Most drug offenders opt to enter the unstructured voluntary treatment program offered through Prop 36. This has resulted in a 50% decline in Drug Court referrals, which is unfortunate considering the fact that 100% of Drug Court participants have historically completed the program without a new law violation. There are 1,750 probationers in the Prop 36 program with 750 divided into three caseloads, and 1,000 placed on the administrative banked caseload. Approximately 56% of those referred for treatment through Prop 36, rather than placed on formal supervised probation, sustain a first violation, 28% sustain a second violation, and 36% fail or are removed from the program.

Major priorities over the next two years will include:

- Continuing to support and collaborate with community-based treatment programs and local law enforcement
- Providing the most current and effective case-management training available

PROGRAM HEADLINE MEASURES <u>Computer-Assisted Caseload (CAST)</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of CAST probationers per staff	583	612	534	650	No
Percent of CAST offenders completing probation without termination to CDC or jail	91%	83%	65%	88%	No

Program Discussion: The Computer Assisted Caseload (CAST) did not meet current year performance targets for either of its two Headline Measures. The number of offenders supervised by CAST has decreased from 5,552 to approximately 4,500 due in part to efforts to utilize "early termination" when possible. This is expected to be a temporary decrease, as the number of probationers eligible for early termination will be exhausted before the end of the year. Once the pool of those eligible is exhausted staff to client ratio for CAST is expected to rise. In addition to early termination, a higher percent of offenders are requiring direct supervision due to the seriousness of crimes and instability of probationers.

Major priorities over the next two years will include:

- Implementing a validated assessment tool to better assess department resource needs for supervision services

PROGRAM HEADLINE MEASURES Camp Glenwood	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of minors successfully completing the residential Glenwood Program without a sustained new felony	85%	91%	87%	87%	✓
Percent of minors remain in programs 90 days following release	82%	94%	92%	90%	✓

Program Discussion: Camp Glenwood met performance targets for both Headline Measures. The key outcomes of the program are release without a new sustained felony and continued participation in educational/vocational programs following release. The results of both measures remain positive despite an increase in the severity of delinquency of youth committed to the program. The increase in higher-risk youth is the result of fewer serious offenders being sent to the California Youth Authority. Efforts have been put in place to increase the number and percent of juveniles at the camp who complete self-improvement programs, including life skills, drug and alcohol education, and individual and group counseling. In addition, a daily Cognitive Skills Training program (COG) has been instituted. Use of this programming is expected to shorten stays in the residential portion of the Glenwood program, eliminate the waiting list, and make the program available to more problem youth each year. Reduction of the waiting list will also reduce Juvenile Hall overcrowding.

To support minors as they transition back to their communities from residential care, the Glenwood furlough program has been brought to full staffing. This critical two month period is supervised by Camp staff and probation officers working closely to develop customized individual case plans involving school and community providers who will work to ensure that behavioral changes made at Camp are sustained at home. A trend of a drop in felonies committed once a minor has completed the residential and furlough portion of the Glenwood program is expected to continue as the result of this program.

Major priorities over the next two years include:

- Increasing the number of juveniles who annually complete the Camp Glenwood program

PROGRAM HEADLINE MEASURES Juvenile Hall	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Dollar value of community service work, community care and weekend work programs (in thousands)	\$242	\$218	\$183	\$215	No
Dollar value of savings in Juvenile Hall operation cost due to use of home supervision (in thousands)	\$744	\$872	\$918	\$1,580	No

Program Discussion: Juvenile Hall did not meet performance targets for either of its Headline Measures. The alternative to custody community service programs have been reduced by 50% due to budget reductions, which resulted in the termination of a program that transported youth to and from work sites. The remaining program, which requires youth to transport themselves to designated work sites, limits the number and type of sites that can be served, but allows more youth to participate on each work crew, thereby lowering the cost of the program. The work program continues to be successful with a 94% completion rate and significant annual savings to the Department. It also provides a significant service contribution to local communities. To further reduce detention costs, the department has worked with the Courts to develop a new electronic monitoring detention program which became effective in September 2004 to supplement the existing Home Supervision Program. However, a later than anticipated start prevented full realization of savings in the current year. With the addition of qualifying post-adjudicated youth becoming eligible for electronic monitoring in April 2005, the savings from this program are expected to increase.

Major priorities over the next two years include:

- Reducing the Juvenile Hall population
- Transitioning to the new Youth Services Center

PROGRAM HEADLINE MEASURES <u>Juvenile Intensive Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of program participants not committing new crimes	86%	92%	96%	93%	✓
Percent of Crossroads participants not placed in high-level placement	93%	88%	N/A	88%	Insufficient Data

Program Discussion: Probation Juvenile Intensive Services met performance targets for one of two Headline Measures. In late 2004, the Juvenile Division implemented a broad reorganization of services to better meet the needs of the community as well as families and youth on probation. The resulting design relocated a variety of probation services in the communities so as to afford greater client access and to expand individual probation officer expertise by exposing staff to a variety of casework models. The Juvenile Division will continue to research, implement and provide target, evidenced-based interventions. These interventions are the key to youth achieving the goals in their plans and meeting the expectations of the juvenile court.

Major priorities over the next two years will include:

- Increasing the number of youth not re-offending while on probation
- Completing 85% of case plans within established timelines

PROGRAM HEADLINE MEASURES <u>Juvenile Prevention and Court Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of youth released from custody at intake	36%	48%	69%	51%	✓
Percent of Intake diversion clients completing programs with no new law violations	89%	95%	89%	93%	No

Program Discussion: Probation Juvenile Prevention and Court Services met performance targets for one of two Headline Measures. The Juvenile Assessment and Referral Center collaborates with the Human Services Agency and Mental Health to provide intake clients immediate and appropriate services. The percentage point decrease in the number of youth released at intake is due to the fact that fewer youths are eligible for release. Despite the slightly lower number of referrals, those who are referred to appropriate services continue to experience a high rate of success. In FY 2004-05, 93% of those referred to diversion programs completed them with no new law violations. Diverting youths when appropriate remains a priority.

Major priorities over the next two years will include:

- Increasing the number of youth served on diversion/ prevention caseloads by 10%

PROGRAM HEADLINE MEASURES <u>Juvenile Supervision Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of intensive supervision field contacts conducted in the community or home	57%	57%	60%	60%	✓
Percent of probationers successfully completing probation	84%	94%	84%	90%	No

Program Discussion: Juvenile Supervision Services is expected to meet current year performance targets for one of its two Headline Measures. General Supervision provides supervision services to wards of the Court with emphasis on developing a case plan to ensure

satisfactory completion of probation. Deputy Probation Officers review relevant case data and contact the youth and his/her parents (guardians). The child and family members are seen at various locations including home, office, school and other appropriate sites in the community. With a caseload of approximately 60 clients, officers typically see each client three times per month for general supervision cases and five times per month for intensive cases. Caseloads have been temporarily affected by the reorganization of the Juvenile Division, but as the staffing structure stabilizes both the percent of clients seen in the field and ultimately their successful completion of probation is expected to rise.

Major priorities over the next two years will include:

- Increasing the number of youth not re-offending while on probation
- Completing 85% of case plans within division timelines

CORONER'S OFFICE

DEPARTMENT MEASURES Coroner's Office	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per Investigation	\$989	\$994	\$963	\$935	NO
Quality and Outcomes measures meeting performance targets	100%*	100%	80%	95%	NO

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

Eighty percent of Quality and Outcomes measures for the Coroner's Office met or exceeded targets. Staff costs resulted in a higher cost per investigation and 94% percent of homicide autopsies were completed within three days missing the target of 100%. These two factors resulted in the drop in the percent of Quality and Outcomes measures meeting targets. Though the cost per investigation missed the target, it was notably lower than prior years due to retirements of senior investigators. The Coroner's Office has consistently met its targets for performance or shown improvement for all other measures of performance. The percent of law enforcement calls for service responded to within fifteen minutes has improved to 90% and survey responses indicate Coroner's Office clients and stakeholders, including law enforcement agencies, are satisfied overall with the services that are being provided. In addition, turnaround time for autopsies and clinical inspections has continued to meet or exceed expectations.

During FY 2004-05, the Department accomplished the following:

- Improved response time for Investigators
- Improved efficiencies and reduced the cost per investigation by 16%
- Completed transition to the new Crime Lab facility

Over the next two years, priorities will include:

- Improving the overall quality of services provided
- Collaborating with the County's Office of Emergency Services to be prepared in case of a disaster
- Reviewing the procedures and updating the system for morgue operation

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Coroner Investigations</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of law enforcement calls responded to within fifteen minutes	70%	90%	94%	80%	✓
Percent of survey respondents rating services as good or excellent	100%	96%	98%	95%	✓

Program Discussion: Coroner Investigations met performance targets for both Headline Measures. Overall response time for law enforcement calls for service improved by four percentage points. Easy access to Highways 280 and 92 combined with a more central location (now in San Mateo versus Redwood City) improved response times to the coast and north county. This trend is expected to continue in the coming year.

Major priorities over the next two years will include:

- Achieving an overall customer satisfaction rating of at least 90%
- Closing 82% of all cases reported to the Coroner's Office within 30 days
- Completing preparedness for a major disaster within two years

PROGRAM HEADLINE MEASURES <u>Coroner Pathology</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of reported deaths for which autopsies are conducted	15%	15%	16%	20%	✓
Percent of deaths ready for release in one day	95%	98%	98%	94%	✓

Program Discussion: Coroner Pathology met performance targets for both Headline Measures. The percent of reported deaths for which autopsies were conducted remained below the target. In this case, a lower percentage is better. The Pathology division continued to work to maintain or reduce the number of cases receiving autopsy by conducting clinical inspections as appropriate. With recent turnover of the doctors, this approach has been emphasized. The lower number is a reflection of due diligence and effective investigative techniques. Turnaround time for all cases was on target with 94% of pathology cases completed within three days for homicides and 98% within one day for all other cases.

Major priorities over the next two years will include:

- Releasing 94% of cases within one day
- Limiting autopsies to 15% of reported deaths
- Completing preparedness for a major disaster within two years

ENVIRONMENTAL SERVICES AGENCY (ESA)

AGENCY MEASURES Environmental Services Agency (ESA)	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Agency cost per resident for services: Unincorporated County	\$216	\$246	\$228	\$244	✓
Agency cost per resident for services: Library Services	\$49	\$52	\$55	\$55	✓
Agency cost per resident for services: Countywide Services	\$25	\$22	\$27	\$30	✓
Number of park and open space acres in county: County Parks	14,164	15,576	15,576	--	--
Number of park and open space acres in county: All Jurisdictions including County Parks	100,718	104,026	104,026	--	--
Quality and Outcomes measures meeting performance targets	71%*	58%	68%	94%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Agency Summary

The Environmental Services Agency (ESA) achieved target for 68% of its Quality and Outcomes measures. The cost per resident measures reflect a mix of services that operate independently of one another and are not suitable to measuring against set targets. The Agency measures reporting park acreage reflect an annual count or snapshot and are intended to give the reader a sense of park acreage countywide. Targets are not established for these measures, and therefore are not reported as having met or not met target.

During FY 2004-05, the Agency accomplished the following:

- Led recruitment of three key division head positions of Parks and Recreation Director, Library Director, and Community Development Director
- Coordinated fee increases for several divisions in order to ensure the highest level of fee recovery possible
- Continued and expanded Agricultural Commissioner/Sealer of Weights and Measures' price scanner inspection program and implemented a new Sudden Oak Death federal quarantine regulation order
- Negotiated a contract amendment with the Peninsula Humane Society and 20 cities for an additional two years of animal control services
- Completed the state-certified Housing Element of the General Plan
- Gained Planning Commission and Board of Supervisors approval to a Local Coastal Program (LCP) amendment for the urban Midcoast
- Completed several capital projects in the Parks and Recreation Division to improve recreational opportunities
- Secured a major grant to be used to purchase necessary safety gear and supplies for the Fire Protection Program
- Purchased two new fire engines which will replace aging equipment for the La Honda and Kings Mountain Fire Companies
- Transitioned to consolidated dispatch services through Public Safety Communications for fire dispatch west of Hwy 280

While each Division has identified specific priorities for improving performance within its programs, Agency priorities over the next two years will include:

Improve Customer Satisfaction and Overall Performance in all Programs

- Continue to focus on consolidating budget and performance measures standards through regular staff meetings to ensure staff are clear about budget deadlines and procedures
- Continue to maintain effective lines of communication between Agency Director and Division Heads through regular one-on-one meetings

- Ensure that divisions are aware of and able to send employees to customer service training
- Explore methods of increasing survey responses, examine prior survey distribution methods, and explore additional incentive programs such as Parks and Recreation's day pass incentive
- Continue to update and add information to all divisions' websites
- Provide courteous and knowledgeable reception services in all divisions
- Reduce Development Review Center customer wait times in the Planning and Building Division and improve the express service process
- Enhance existing written materials such as Parks and Recreation brochures

Focus on Developing Long-Range Solutions

- Continue to work with the Parks for the Future Committee to ensure a long-term funding mechanism for Parks and Recreation
- Work with JPA member cities and the Peninsula Humane Society to develop a plan for long-range Animal Control Service throughout the County
- Work with California Division of Forestry Staff to develop a plan to continue providing adequate service given budget constraints due to state wage and benefit increases

Customer Satisfaction Ratings - Cares Survey Results

Planning and Building, Parks and Recreation, the Agricultural Commissioner/Sealer, Animal Control Services, and the County Library received a total of 567 surveys during FY 2004-05, with 93% of respondents rating overall satisfaction as good or excellent. This represents an increase from the prior year and exceeds the year target of 93%. The number of survey responses increased by 147 and is due to significant increases distribution and response rates for the Parks and County Library. Only one survey was received for both Fire Protection and the CSA #1 and is therefore not reported here. Increased attempts to receive customer feedback in these areas will be implemented in the next year.

PLANNING AND BUILDING					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	70%	14%	5%	11%	84
2003-04	72%	14%	2%	12%	97
2002-03	74%	16%	5%	5%	85
2001-02	70%	20%	5%	5%	131

The Planning and Building Division received 84 surveys with 84% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction declined by two percentage points and the number of responses decreased by 13. The Division distributes the surveys by attaching a form to every Planning Permit or Building Permit receipt we issue; handing out the form in our lobby or public service counter; attaching a form to Certificates of Occupancy when issued; including a form in Letters of Decision; and providing a copy of the form for download on the website. There were numerous comments regarding staffing at the Development Review Center counter. This can be attributed to the vacancies in the Current Planning Section. Three new planners have been recently hired and filling these vacancies will improve response time and service at the counter. Management will monitor survey results during the next reporting period to verify service improvements. Nearly all staff that have direct contact with the public, either at the Development Review Center or the Building Inspection field staff, were recognized for their knowledgeable, courteous, and helpful service.

AGRICULTURAL COMMISSIONER/SEALER					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	70%	28%	0%	2%	64
2003-04	76%	22%	1%	1%	84
2002-03	76%	22%	2%	0%	63
2001-02	88%	12%	0%	0%	17

The Agricultural Commissioner/Sealer Division received 64 surveys with 98% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction remained at the same level and the number of responses decreased by 20. The Division continued to display surveys on the front counters at the Redwood City main office and at the Half Moon Bay field office.

Surveys were mailed to various business customers and to pesticide and consumer complainants after their complaint was investigated. Approximately 1,200 surveys were mailed during the past year. Surveys were also redesigned to include a section asking customers to identify priorities, issues or opportunities that they believed might be important in the future. This information was then used as a tool in the development of the Division's priorities.

PARKS AND RECREATION

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	66%	31%	2%	1%	209
2003-04	60%	10%	10%	20%	11
2002-03	54%	39%	7%	0%	39
2001-02	63%	33%	2%	2%	380

The Parks and Recreation Division received 209 surveys with 97% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction increased by 27 percentage points and the number of responses increased significantly. Surveys were available at every park gatehouse and the Parks Administration counter. Surveys are also available at kiosks throughout the parks. In order to increase survey response, an incentive program was created this year. Each person who had made a park reservation throughout the year was sent a survey. The first 100 people to return the survey received a free day pass. The incentive was successful in that many more surveys were returned this year than in previous years. The Coyote Point Marina also mailed a survey to all berthers in a spring monthly billing this year, which resulted in a greater number of returned surveys. Approximately 3,000 surveys distributed to Parks users and 500 to Coyote Point Marina berthers. Comments regarding parks and marina maintenance issues such as cleaning of restrooms, reservation holding time, and marina gas availability were assessed and taken into consideration as budgets were developed. Many Marina respondents commented about marina depth, and staff are in Phase II of a major dredging project to improve depth.

ANIMAL CONTROL

Fiscal Year	Overall Satisfaction - Field Services				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	100%	0%	0%	0%	80
2003-04	96%	0%	4%	0%	40
Fiscal Year	Overall Satisfaction - Client Services				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	100%	0%	0%	0%	80
2003-04	96%	0%	4%	0%	60

Animal Control conducted 80 surveys by phone with 100% of respondents rating overall satisfaction as good or excellent in Field Services, and 100% in Client Services. The Peninsula Humane Society conducts random surveys by phone each quarter and discusses concerns customers may have and will provide follow up as needed. There were many comments received in client services expressing how happy clients were with their newly adopted animal.

COUNTY LIBRARY

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	77%	15%	0%	8%	210
2003-04	79%	19%	1%	1%	128

The County Library received 210 surveys with 92% of respondents rating overall satisfaction as good or excellent. Compared to the prior year, overall satisfaction declined by six percentage points and the number of responses increased by 82. Surveys continue to be displayed at each of the 12 branch service desks. Comments from patrons are overwhelmingly positive. In some cases, patrons request follow up to their comment or request and staff provides a response. The Library is currently examining other strategies for increasing survey responses and also exploring other types of feedback to collect from patrons in order to improve service delivery.

Headline Measures Discussion

ENVIRONMENTAL SERVICES ADMINISTRATION

PROGRAM HEADLINE MEASURES Environmental Services Administration	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of measures monitored/reviewed within one week after quarterly reporting period	100%	100%	100%	100%	✓
Percent of Customer Survey respondents rating Environmental Services Agency services good or excellent	91%	89%	95%	93%	✓

Program Discussion: ESA Administration met performance targets for both its Headline Measures. The percent of survey respondents rating ESA services as good or excellent increased by six percentage points from the prior year. This increase came primarily from the Parks and Recreation Division where response rates increased significantly with positive results. A modest decrease appears in the Planning and Building Division, however the percent rating overall service poor remains noteworthy. Eleven percent of respondents rated overall satisfaction poor, down one percentage point from the prior year. Agency management anticipate the recommended changes coming from the Planning and Development Task Force will begin to address customer concerns and dissatisfaction.

Major priorities over the next two years will include:

- Achieving an overall Agencywide customer satisfaction rating of at least 90%
- Increasing outreach and soliciting more customer feedback through incentive programs like the Parks and Recreation day pass incentive
- Increasing cost efficiencies and ensuring divisions have adequate funding to fulfill their missions and keep customer satisfaction at high levels

FIRE PROTECTION

PROGRAM HEADLINE MEASURES Fire Protection Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Fire and Emergency Medical Service calls responded to within time criteria established for medical response by County Emergency Medical Services	96%	92%	88%	95%	No
Percent of plan reviews completed within 10 working days of submittal of all required documents	89%	94%	95%	90%	✓

Program Discussion: ESA Fire Protection met performance targets for one of its two Headline Measures. The percent of plan reviews completed within 10 working days of submittal of all required documents met the target. The percent of calls responded to within the established time criteria falls short of the target and also falls short of the accepted County standard for an emergency unit to be on the scene in less than 6:59 minutes 90% of the time. Give the remote nature of portions of the unincorporated county response times can vary greatly. In March 2005, Public Safety Communications (PSC) began dispatching all calls within the County Fire jurisdiction. These dispatching services have been effective, however a problem with data management has become apparent. When reviewing data from the CDF Felton sources and those from PSC, fire staff found discrepancies in both the number of calls and the percentages of on-time dispatches. These discrepancies may have affected FY 2004-05 performance data. The issue is expected to be resolved within the first quarter of FY 2005-06 with the installation of a new database to track calls in August 2005. County Fire remains committed to arriving on scene within established timeframes.

Major priorities over the next two years will include:

- Responding to at least 95% of all fire and EMS calls within established time criteria
- Ensuring 90% of Plan Reviews are completed within ten working days
- Completing the replacement of emergency operational equipment

- Completing review of the Facilities Improvement Plan
- Achieving an overall customer satisfaction rating of at least 90%

COUNTY SERVICE AREA # 1

PROGRAM HEADLINE MEASURES <u>County Service Area #1</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Fire and Emergency Medical Service calls responded to within time criteria established for medical response by County Emergency Medical Services	96%	82%	90%	98%	No
Average Response time for Sheriff's priority CAD dispatch calls (in minutes)	5	5.9	6.8	6.0	No

Program Discussion: CSA #1 did not meet performance targets for either of its Headline Measures. The percent of calls responded to within the established time criteria for medical responses came in under target at 90%; however the percentage is an increase of eight points over the prior year and now meets the accepted County standard for an emergency unit to be on the scene (within 6:59 minutes 90% of the time). When allowances are made for unincorporated areas that are rural and remote in nature the accepted time criteria are then 11:59 and 21:59 respectively. The average response time for Sheriff emergency response calls also fell below target. There are several on-going housing developments in the Highlands area which have slowed traffic on community streets. This, combined with new policies restricting when high-speed vehicle travel is authorized, has added about one minute to total priority-call response times.

Major priorities over the next two years will include:

- Responding to Fire and EMS calls within established time criteria at least 95% of the time
- Achieving an average response time of 6.5 minutes or less for priority CAD dispatch calls
- Achieving an overall customer satisfaction rating of at least 90% for Police Services

ANIMAL CONTROL

PROGRAM HEADLINE MEASURES <u>Animal Control Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of adoptable animals adopted	97%	98%	99%	99%	✓
Percent of animals returned to owner	15%	14%	22%	15%	✓

Program Discussion: Animal Control met performance targets for both of its Headline Measures. While most adoptable animals are adopted, the number of cats available for adoption out numbers the demand. Staff continue public education programs regarding spay/neuter campaigns and to publicize adoptions. The percent of animals returned to their owner surpassed the target by seven percentage points and increased over the prior year by eight percentage points. Animal Control Services are performed contractually by the Peninsula Humane Society (PHS) for all of San Mateo County. The focus of the Animal Control program has been in the areas of working cooperatively with PHS to examine efficiencies at the shelter and improve customer service.

Major priorities over the next two years will include:

- Ensuring that at least 98% of adoptable animals are adopted
- Ensuring that at least 15% of animals are returned to owner
- Completing revisions to the Dangerous Animal Ordinance

AGRICULTURAL COMMISSIONER/SEALER

PROGRAM HEADLINE MEASURES <u>Administration and Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Biologist/Standards Specialists who hold all Agricultural and Weights and Measures state professional licenses	50%	60%	88%	60%	✓
Percent of customer satisfaction survey respondents rating services good or excellent	98%	98%	98%	98%	✓

Program Discussion: The Administration and Support Program met performance targets for both of its Headline Measures. High staff turnover in recent years has created a challenge in ensuring that staff receive adequate training and hold all state professional licenses, in spite of this, the Division was able to exceed its target of staff that hold all professional licenses. Customer satisfaction remains high and the Division was able to meet its target by focusing its efforts on outreach to stakeholders to identify customer needs, and continuing to implement program improvements to increase efficiencies. These actions should reduce staff time spent completing and verifying reports allowing for additional time to perform field inspection activities.

Major priorities over the next two years will include:

- Achieving an overall customer satisfaction rating of at least 90%
- Ensuring that 94% of Biologist/Standards Specialists hold all Agricultural and Weights and Measures state professional licenses

PROGRAM HEADLINE MEASURES <u>Consumer Protection</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of agricultural businesses in compliance with state regulations or standards	96%	93%	95%	95%	✓
Percent of businesses in compliance with weights and measures consumer protection requirements	95%	86%	87%	78%	✓

Program Discussion: The Consumer Protection Program met performance targets for both of its Headline Measures. The Consumer Protection Program includes a variety of agricultural and weights and measures regulatory inspection services. The decrease compared to two years ago for the percent of businesses in compliance with weights and measures consumer protection requirements, is due to the expansion of the price scanner inspection program; however the program exceeded its target and increased the percentage in compliance by one. It was anticipated that overall business compliance rates would initially decrease, as many businesses have never had an inspection of their retail price scanner system. The Division also conducted inspections of agricultural products to ensure cleanliness, and performed audits of growers selling food products to verify that their produce is in compliance with government standards.

Major priorities over the next two years will include:

- Ensuring that 96% of agricultural businesses are in compliance with state regulations or standards
- Ensuring that 80% of businesses are in compliance with weights and measures consumer protection requirements

PROGRAM HEADLINE MEASURES <u>Environmental Protection</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of agricultural and pest control businesses in compliance with pesticide regulatory requirements	95%	99%	97%	96%	✓

PROGRAM HEADLINE MEASURES <u>Environmental Protection</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of interceptions of harmful pests subject to state quarantine actions	2,123	1,474	275	275	✓

Program Discussion: The Environmental Protection Program met performance targets for both of its Headline Measures. The fluctuation seen over time in the number of interceptions of harmful pests subject to state quarantine actions, is likely due to an increase in plant and produce shipments with multiple pests, and more experienced staff, better trained in identifying harmful pests. Environmental Protection staff has focused its efforts on expanding public awareness of pest prevention activities through website improvements, and training to the community. The Program has also continued improvement of employee skill levels and knowledge in pest identification, integrated pest management and alternative methods of pest control.

Major priorities over the next two years will include:

- Ensuring that 96% of agricultural and pest control businesses are in compliance with pesticide regulatory requirements
- Intercepting 500 harmful pests subject to state quarantine actions

PARKS AND RECREATION

PROGRAM HEADLINE MEASURES <u>Administration and Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of park reservation calls taken	3,794	3,479	5,291	3,200	✓
Percent of Customer Survey respondents rating services good or excellent	90%	70%	97%	90%	✓

Program Discussion: ESA Parks and Recreation Administration and Support met performance targets for both of its Headline Measures. Though the number of reservation calls exceeded the target and increased significantly over the prior year. Customer satisfaction jumped by 27 percentage points and the number of responses increased significantly. Surveys were available at every park gatehouse and the Parks Administration counter. Surveys are also available at kiosks throughout the parks. In order to increase survey response, an incentive program was created this year. Each person who had made a park reservation throughout the year was sent a survey. The first 100 people to return the survey received a free day pass. The incentive was successful in that many more surveys were returned this year than in previous years. The focus for Parks Administration has been toward implementing a reorganization that structured the parks system into an "area" concept rather than staffing based on individual units. Staff also focused on resources management of parklands, and continued enhancements to the Division's website.

Major priorities over the next two years will include:

- Ensuring that at least 3,300 park reservation calls are taken
- Achieving an overall customer satisfaction rating of at least 90%
- Improving planning and environmental stewardship by completing a minimum of 19 planning projects

PROGRAM HEADLINE MEASURES <u>Operations and Maintenance</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of visitors	1,939,762	1,753,184	1,882,834	2,050,000	No
Number of volunteer hours	24,100	30,411	22,526	27,500	No

Program Discussion: ESA Parks and Recreation Operations and Maintenance met performance targets for neither of its Headline Measures. The number of visitors at park facilities fell below the target due to park closures at the beginning of the year due to budget reductions, and a rainy winter and spring that kept visitors away. Despite these factors, the number of park visitors increased by nearly 130,000 over the prior year. Park volunteer hours also fell short of the target due to park closures at the beginning of the year, which restricted volunteer access. An unusually rainy winter also resulted in several volunteer event cancellations.

Major priorities over the next two years will include:

- Maintaining park attendance at 2,500,000 annually
- Increasing volunteer hours to 26,000 hours annually
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>Coyote Point Marina</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Annual number of launch ramp users	732	1,038	503	1,000	No
Percent of berth space filled	97%	88%	86%	95%	No

Program Discussion: Coyote Point Marina did not meet performance targets for either of its two Headline Measures. The results of each measure were likely due in part to continued dredging activities in the marina. The steep decline seen in 2003 was due to the beginning stages of the dredging project, which resulted in the launch ramp being inaccessible for a period of time. The percent of berth space filled may also be due to economic factors. Coyote Point Marina priorities in the prior year included continued marketing of marina facilities and services, development of a capital improvements plan, and completion of Phase I of the dredging project.

Major priorities over the next two years will include:

- Maintaining berther occupancy at 90% or better
- Continuing to complete projects on the Marina's 10-year Capital Projects Plan
- Achieving an overall customer satisfaction rating of at least 90%

PLANNING AND BUILDING

PROGRAM HEADLINE MEASURES <u>Administration and Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customers rating Division's services good or excellent	90%	86%	85%	85%	✓
Percent of availability of network during scheduled hours	99%	99%	99%	99%	✓

Program Discussion: Planning and Building Administration and Support met performance targets for both of its Headline Measures. The percent of customer survey respondents rating services good or excellent met the target of 99% and exceeded the countywide standard of 95%. The availability of the network during scheduled hours remained constant at 99%. Emphasis has been placed on maintaining a reliable and progressive automation environment in order to increase customer satisfaction. Additional enhancements have also taken place in the Division's permit processing and tracking system, resulting in increased efficiencies.

Major priorities over the next two years will include:

- Implementing recommendations of the Planning and Building Task Force
- Maintaining 99% availability of network during scheduled hours and implementing technology improvements
- Achieving an overall customer satisfaction rating of at least 90%
- Providing a well-maintained work environment

PROGRAM HEADLINE MEASURES <u>Development Review Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating services good or excellent	89%	86%	85%	85%	✓
Number of building permits finalized	1,973	2,333	1,970	2,475	No

Program Discussion: Planning and Building Development Review Services met performance targets for one of its two Headline Measures. Although staff achieved the target for customer survey respondents rating services as good or excellent, this measure indicates a lower level of satisfaction compared to prior years and is due to vacancies and increasingly complex projects resulting in longer wait times for customers. Recommended changes from the Planning and Building Task Force that will be implemented over the next six months will help to address these problems. Staff is addressing wait times for customers by introducing an express line for permit pick up. The number of building permits finalized fell below the target. Fewer permits issued in the prior and current year were finalized than estimated, possibly due to lingering negative economic factors that have adversely affected finishing projects.

Major priorities over the next two years will include:

- Achieving an overall customer satisfaction rating of at least 90%
- Finalizing 2,475 building permits and improving permit processing and enforcement procedures
- Maintaining staffing levels and providing training to both new and more experienced staff

PROGRAM HEADLINE MEASURES <u>Long Range Planning Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of projects/permits that implement the County's Visioning Commitments and Goals	100%	98%	100%	100%	✓
Percent of survey respondents rating services good or excellent	94%	0%	0%	87%	No

Program Discussion: Planning and Building Long Range Planning Services met performance targets for one of its two Headline Measures. The unit did not distribute surveys and therefore no data is available on customer satisfaction. The focus for staff included completion of the update of the Housing Element of the General Plan, intended to increase housing supply, especially additions to affordable housing. Staff also began Planning Commission hearings on proposed policy revisions to the Local Coastal Program for the urban Mid-coast, which will quantify growth potential and infrastructure capacity, align rate of growth with development constraints, and more precisely designate biological resources and sensitive habitats. In addition, staff began revisions to the Countywide Transportation Plan that includes a "Smart Growth" land use component. This project will encourage new and denser land use patterns along the El Camino corridor that will improve mobility, reduce congestion, and improve air quality throughout the County.

Major priorities over the next two years will include:

- Ensuring that 100% of projects and programs implement the County's Visioning commitments and goals
- Achieving an overall customer satisfaction rating of at least 90%

HEALTH DEPARTMENT

AGENCY MEASURES Health Department	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Health Services cost per capita	\$241	\$237	\$236	\$222	No
Percent of clients with improved quality of life	76%	85%	85%	80%	✓
Quality and Outcomes measures meeting performance targets	80%*	71%	60%	85%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The Health Department met current year targets for 60% of its Quality and Outcomes measures. The cost of health services per capita was \$236, slightly over the target amount (lower cost is better). The percentage of clients indicating an improved quality of life, determined by aggregating customer satisfaction survey ratings for several programs across the Agency's Divisions, was 85%, exceeding the 80% target.

During FY 2004-05, the Health Department accomplished the following:

- Facilitated Bioterrorism and Disaster Preparedness
- Enhanced the Disease Control and Prevention (DCP) Infrastructure and Operations
- Improved the Health and Well-Being of Children
- Developed Approaches to Address Health Disparities
- Improved Access to Health Care
- Enhanced Environmental Protection
- Improved Mental Health Services
- Expanded Policy and Planning Efforts

Major priorities over the next two years will include:

- Implementing Program Improvements
- Reducing Health Disparities
- Implementing New Initiatives
- Ensuring Service Coordination with the San Mateo Medical Center and the Human Services Agency
- Maximizing Revenues and Flexibility of Available Funding
- Improving Technology and Reporting

Customer Satisfaction Survey Results

A total of 4,089 customer satisfaction surveys were received by the Health Department during FY 2004-05, with 79% of respondents rating overall satisfaction as good or better. Health Administration, Aging and Adult Services, Public Health Services, and Environmental Health Services conduct Cares surveys. In addition, other types of customer satisfaction surveys are administered in Emergency Medical Services, Food and Nutrition Services, and Mental Health Services to meet intergovernmental reporting requirements or individual program needs.

Health Administration					
<i>Overall Satisfaction</i>					
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	N/A	N/A	N/A	N/A	N/A
2003-04	55%	40%	5%	0%	20
2002-03	65%	30%	0%	5%	20

Health Administration generally distributes surveys to customers from other Divisions of the Health Department and other County departments on an annual basis; however, there was no survey conducted in FY 2004-05. The next survey will be taken in FY 2005-06.

Emergency Medical Services					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	85%	12%	0%	3%	144
2003-04	75%	17%	1%	2%	84
2002-03	N/A	N/A	N/A	N/A	N/A

Emergency Medical Services sends customer satisfaction surveys to a randomized sample of individuals who accessed the 9-1-1 system, received fire service paramedic first response, and were transported by the Countywide emergency ambulance contractor. In FY 2004-05, there were 1,100 surveys distributed and 144 were returned, for a response rate of 13%. Services were rated as good or better by 97% of the respondents.

Aging and Adult Services					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	56%	40%	3%	1%	804
2003-04	64%	32%	3%	1%	1,025
2002-03	64%	32%	3%	1%	999

The Aging and Adult Services Division (AAS) received 804 Cares survey responses, with 96% of respondents rating overall satisfaction as good or excellent, remaining constant with the prior year. Most AAS programs received very high ratings, with few negative comments received. The number of responses dropped by approximately 21%, primarily a reflection of low response rates in In-Home Supportive Services and the Public Guardian. Staff will focus on increasing the response rate in FY 2005-06.

Environmental Health					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	31%	62%	1%	7%	36
2003-04	11%	89%	0%	0%	8
2002-03	17%	83%	0%	0%	7

Environmental Health (EH) received 36 Cares survey responses, with a 92% rating of services as good or better. EH is a regulatory program and favorable comments come from clients who appreciate the education first and enforcement second approach. The increase in number of responses reflects a return to the process of placing notices in service bills encouraging businesses to complete the surveys. Negative comments were received regarding fees for service; EH will continue its educational program to explain the basis of fees for mandated services.

Food and Nutrition Services					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	70%	9%	18%	3%	127
2003-04	21%	58%	21%	0%	245
2002-03	N/A	N/A	N/A	N/A	N/A

Food and Nutrition Services annually distributes surveys to clients who receive services in the following programs: Child Care Centers/Head Start, Sheriff's Correctional Facilities, Probation Juvenile Detention Facilities, and Canyon Oaks Youth Center. This year, 325 surveys were distributed and 127 were returned, for a response rate of 39%. The number of responses was due to a lower than hoped for at the adult correctional facilities, where a less controlled distribution system was used; staff will reevaluate before the FY 2005-06 surveys are distributed. Overall, 79% of the customers rated services as good or excellent, equaling last year's performance rating. The current food service and delivery system at the Hillcrest Juvenile Facility is suboptimal, where overall satisfaction was rated at

52% and concerns were expressed about the temperature of foods served. It is believed that the new Youth Services Center kitchen and food services system will result in significant improvements.

Mental Health Services					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	50%	36%	2%	2%	1,558
2003-04	51%	35%	3%	3%	927
2002-03	N/A	N/A	N/A	N/A	N/A

The Mental Health Services Division is mandated to adhere to specific reporting requirements set forth by the State Department of Mental Health. Therefore, Mental Health survey results do not match directly with questions on the San Mateo County Cares survey instrument. For example, in addition to asking different questions, these surveys give the option of "neutral," "undecided," and "not applicable" responses. These additional response options affect the number of respondents rating services as excellent, good, fair or poor. Mental Health administers surveys to three groups of consumers: adults that receive mental health services; youth that receive services; and family members of youth that receive services. Overall satisfaction with Mental Health services continues to be high in all three groups, as shown by the figures in the table above, which aggregate selected responses from the State-mandated surveys. For the adult population, the overall positive endorsement rate was 87%, which is consistent with other measures of satisfaction observed in public mental health systems. The positive endorsement ratings were 80% from youth who receive services and 87% from their families. The number of responses increased significantly because the surveys were given twice in FY 2004-05.

Public Health					
	<i>Overall Satisfaction</i>				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	77%	20%	3%	1%	1,420
2003-04	72%	25%	3%	1%	1,655
2002-03	68%	28%	3%	1%	1,653

Public Health received 1,420 Cares survey responses, with 96% of respondents rating overall satisfaction as good or excellent, continuing the high ratings received over the past three years. The decrease in number of responses occurred primarily in the Women, Infants, and Children (WIC) Program, where staff feel that increased caseloads and staffing shortages, resulting in less time available for survey follow-up, may have been the primary factor. Throughout all programs, comments received were very complimentary of staff and program services.

Headline Measures Discussion

HEALTH ADMINISTRATION

PROGRAM HEADLINE MEASURES <u>Health Administration</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of current health partnerships indicating an increased capacity to address health needs	100%	90%	80%	90%	No
Number of eligible San Mateo County residents enrolled in health insurance: Medi-Cal	60,000	60,927	61,561	63,000	No
Number of eligible San Mateo County residents enrolled in health insurance: Healthy Families	6,372	7,074	8,049	7,800	✓
Number of eligible San Mateo County residents enrolled in health insurance: Healthy Kids	2,850	4,861	5,805	5,800	✓

Program Discussion: Health Administration exceeded the current year performance target percentage of eligible County residents enrolled in Healthy Families and Healthy Kids insurance programs; however, the target for Medi-Cal insurance enrollments was not achieved, reflecting the highly successful efforts over the last several years that have enrolled the majority of Medi-Cal eligibles—future enrollment projections will be decreased to account for the small number of uninsured Medi-Cal eligibles that remain. Current partnerships indicating an increased capacity to address health needs were below target, primarily reflecting the City of South San Francisco's recent loss of staff and their policy change in addressing health issues from assigning dedicated staff to the use of rotational staff.

Major priorities over the next two years will include:

- Enrolling an additional 1,500 children and adults in health insurance plans and increasing retention rates
- Ensuring at least 90% of health partnerships indicate an increased capacity to address health needs
- Continuing to be proactive and responsive to changing trends in healthcare
- Seeking ways to minimize Net County Cost
- Maximizing inter- and Intra-departmental program and service coordination

EMERGENCY MEDICAL SERVICES

PROGRAM HEADLINE MEASURES <u>Emergency Medical Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of patients with extremity injuries reporting pain relief after Paramedic intervention	65%	50%	56%	48%	✓
Percent of EMS calls responded to on time: Ambulance	95%	94%	93%	94%	No
Percent of EMS calls responded to on time: Fire First Response	98%	98%	98%	98%	✓

Program Discussion: Emergency Medical Services met or exceeded current year performance targets for two of its three Headline Measures. On-time ambulance responses were very slightly below the target at 94%, but the paramedics target of 98% was achieved. A new performance measure for FY 2004-05 is the percentage of patients with extremity injuries who report pain relief, which provides a key indicator of the appropriateness of pre-hospital care provided by EMS contractors. A rating of 56% was achieved, bettering the established target.

Major priorities over the next two years will include:

- Achieving a 55% rating of patients with extremity injuries reporting pain relief after paramedic intervention
- Maintaining on-time response for at least 92% of ambulance calls and 98% of First Fire Response calls
- Achieving an overall customer satisfaction rating of at least 90%

AGING AND ADULT SERVICES

PROGRAM HEADLINE MEASURES <u>Conservatorship Program</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of cases managed by the Public Guardian in which no fiduciary claims were filed against the Division	99%	99%	99%	99%	✓
Percent of probate conservatees for whom the Conservatorship Program has medical consent authorization	76%	75%	76%	75%	✓

Program Discussion: The Conservatorship Program exceeded performance targets for both Headline Measures. The program continues to operate with virtually no fiduciary claims against the cases being managed. Securing a high percentage of medical consent authorization enables program staff to make medical treatment decisions on behalf of conservatees who cannot make such decisions independently, thus increasing the level of patient care.

Major priorities over the next two years will include:

- Ensuring no fiduciary claims against the Division for at least 99% of cases managed
- Obtaining medical consent authorization for at least 75% of probate conservatees
- Increasing capacity for conservatee placements
- Developing an older adult system of care

PROGRAM HEADLINE MEASURES Community-Based Programs	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Adult Protective Services (APS) cases that are effectively resolved and stabilized for at least twelve months	86%	87%	86%	85%	✓
Percent of severely impaired clients maintained in an independent setting through case management	82%	92%	95%	80%	✓

Program Discussion: Community-Based Programs exceeded current year performance targets for both Headline Measures, continuing the high levels of performance achieved over the past three years.

Major priorities over the next two years will include:

- Resolving and stabilizing at least 85% of APS cases for a minimum of 12 months
- Achieving a 97% rating of stakeholder survey respondents benefiting from services provided
- Maintaining 90% of severely impaired clients in an independent setting through case management
- Expanding program involvement of seniors and adults with disabilities
- Developing an elder death review team
- Developing an older adult system of care

PROGRAM HEADLINE MEASURES IHSS Public Authority	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of consumers without caregiver resources who find an IHSS provider through the Public Authority registry	97%	98%	99%	98%	✓
Percent of caregiver survey respondents rating services good or better	96%	98%	96%	97%	No

Program Discussion: The Public Authority (PA) met current year performance targets for one of its two Headline Measures. Overall customer satisfaction was very slightly under the target, but remains high at 96%. Consistently high achievement over the past three years indicates success in providing training and other needed services to caregivers, and assisting consumers to find qualified caregivers.

Major priorities over the next two years will include:

- Ensuring at least 98% of potential consumers find caregiver resources through the PA Registry
- Achieving an overall caregiver satisfaction rate of at least 90%
- Continuing to enhance the protection of consumers and caregivers

ENVIRONMENTAL HEALTH

PROGRAM HEADLINE MEASURES <u>Environmental Health Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of permitted facilities receiving an annual inspection	88%	91%	88%	91%	No
Gallons of Household Hazardous Waste diverted from landfill disposal (in thousands)	109,058	112,540	119,933	115,000	✓

Program Discussion: Environmental Health exceeded current year performance targets for one of its two Headline Measures. Gallons of Household Hazardous Waste diverted from landfills continues to grow, achieving approximately 4% above the current target and registering a 10% gain over the past three years. The percent of permitted facilities receiving an annual inspection fell slightly below target due to staffing vacancies and retirements.

Major priorities over the next two years will include:

- Inspecting at least 92% of permitted facilities annually
- Diverting at least 118,000 gallons of Household Hazardous Waste from landfills
- Achieving an overall customer satisfaction rating of at least 90%
- Responding to 85% of complaints within the required time period
- Evaluating expansion of the electronic field inspection units
- Implementing science-based inspection criteria in the Food Inspection Program

FOOD AND NUTRITION SERVICES

PROGRAM HEADLINE MEASURES <u>Food and Nutrition Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating services good or better	85%	86%	72%	85%	No
Number of clients receiving nutrition consultations	597	573	527	680	No

Program Discussion: Food and Nutrition Services did not meet current year performance targets for its Headline Measures. Overall customer satisfaction of 72% (an aggregate of the ratings at Sheriff's, Juvenile Probation, and Child Care Centers/Head Start facilities) includes a low satisfaction level of 52% at Hillcrest Juvenile Facility, where the system is suboptimal and concerns were expressed about the temperature of foods served. It is believed that the new Youth Services Center kitchen and food services system will result in significant improvements. Satisfaction ratings were substantially higher at Sheriff's and Child Care Centers/Head Start facilities—75% and 88%, respectively. Nutritional consultations are down from the prior year and did not meet the current target which reflects a leveling off in FY 2004-05 of the inmate populations at both the men's and women's correctional facilities.

Major priorities over the next two years will include:

- Achieving an overall customer satisfaction rating of at least 90%
- Providing nutritional consultations to 680 customers as well as additional nutrition education services
- Increasing the cost effectiveness of food services operations

MENTAL HEALTH

PROGRAM HEADLINE MEASURES <u>Mental Health Administration</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of staff satisfaction	91%	91%	86%	90%	No
Percent of staff familiarity with mission/strategic initiatives	93%	93%	56%	90%	No
Percent increase in third party revenues and client fees over prior year	0%	-10%	-2%	2%	No

Program Discussion: Mental Health Administration did not meet current year performance targets for its Headline Measures. Decreased staff satisfaction and familiarity with mission/strategic initiatives are thought to reflect significant workload increases and shifts in emphasis associated with the extensive Mental Health Services Act (MHSA, "Proposition 63") planning effort, changing regulations and requirements with the shift from a case-rate to fee-for-services reimbursement basis, and a higher than usual level of staff vacancies. In third party revenue and client fees, successful efforts to maintain compliance with Medi-Cal documentation requirements resulted in lower than anticipated Medi-Cal case rate reimbursements; other reimbursements (Medicare, private insurance, and client fees) all increased substantially.

Major priorities over the next two years will include:

- Maintaining ratings of staff satisfaction and familiarity with mission/strategic initiatives of 90%
- Achieving a 5% increase in third party revenues and client fees over the prior year
- Improving business services capabilities and reporting

PROGRAM HEADLINE MEASURES <u>Mental Health Youth Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Average monthly census of out-of-home placements (group home level) County-wide	163	160	154	163	✓
Percent of survey respondents who agree or strongly agree that they are satisfied with services received - Parents	80%	94%	89%	85%	✓
Percent of survey respondents who agree or strongly agree that they are satisfied with services received - Youth	83%	75%	80%	85%	No

Program Discussion: Mental Health Youth Services exceeded current year performance targets for two of three Headline Measures. Customer satisfaction surveys are mandated to adhere to specific reporting requirements set forth by the State Department of Mental Health. The Youth Services Survey, administered separately to youth and their parents, do not match directly with questions on the San Mateo County Cares survey instrument. For example, in addition to asking different questions, these surveys give the option of "neutral," "undecided," and "not applicable" responses—these additional response options affect the number of respondents rating services as excellent, good, fair or poor. Therefore, the results are "mapped" to approximate the standard County surveys. For FY 2004-05, youth ratings fell slightly below target and parent ratings exceeded the target. Out-of-home placements at the group home level continued the decline seen over the past three years (smaller numbers are better).

Major priorities over the next two years will include:

- Maintaining out-of-home placements at 160 or less
- Achieving an overall customer satisfaction rating of at least 90%
- Maximizing third party revenues
- Maximizing efficiency and cost effectiveness of services

PROGRAM HEADLINE MEASURES Mental Health Adult Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of psychiatric inpatient days	10,222	11,167	11,233	12,000	✓
Number of Psychiatric Emergency Services (PES) days	2,984	3,118	2,996	3,000	✓
Percent of customer survey respondents indicating they have benefited from mental health treatment: Able to deal more effectively with daily problems	90%	96%	95%	92%	✓
Percent of customer survey respondents indicating they have benefited from mental health treatment: Better able to control their life	88%	94%	95%	90%	✓

Program Discussion: Mental Health Adult Services exceeded current year performance targets for all four of its Headline Measures.

Major priorities over the next two years will include:

- Maintaining an average days per year per client rate of 1.34 for acute hospitalization and .37 for PES
- Achieving an overall customer satisfaction rating of at least 90%
- Maximizing the efficiency and cost effectiveness of services

PUBLIC HEALTH

PROGRAM HEADLINE MEASURES Disease Control and Prevention (DCP)	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of active clients demonstrating improvements in Knowledge, Attitudes, and Behavior (KAB) regarding disease prevention, control, and treatment	94%	90%	96%	90%	✓
Percent of customer survey respondents rating services good or better	94%	98%	97%	96%	✓

Program Discussion: Disease Control and Prevention exceeded its current year performance target for both Headline Measures.

Major priorities over the next two years will include:

- Achieving a 90% rate of clients demonstrating improvement in KAB regarding DCP programs
- Achieving an overall customer satisfaction rating of at least 90%
- Improving the efficiency and utilization of services

PROGRAM HEADLINE MEASURES Family Health Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of infants (0-12 months old) served by Family Health Services who are breastfed	76%	77%	77%	78%	No
Percent of infants (0-12 months old) who are breastfed: Healthy People 2010 Goal	75%	75%	75%	75%	Benchmark
Percent of low-income children up-to-date on immunizations at age two	67%	69%	71%	70%	✓
Percent of low-income children up-to-date on immunizations at age two: Healthy People 2010 Goal	90%	90%	80%	90%	Benchmark

Program Discussion: Family Health Services exceeded the current year performance target (non-benchmark) for immunizations, but fell very slightly below target in breastfeeding. The national Healthy People 2010 benchmark standard for breastfeeding—75% of infants 0 to 12 months old—continues to be exceeded. For low-income immunizations, the County target is being exceeded but further work is needed to reach the national Healthy People 2010 benchmark of 80%. With participation by SMMC in the Bay Area Regional Immunization Registry, it is expected that this rate will begin to increase by 2% to 3% a year, which would result in an immunization rate of approximately 88% by the benchmark year of 2010.

Major priorities over the next two years will include:

- Maintaining an infant breastfeeding rate of over 75%
- Improving the immunization rate to 72% for children at Age Two
- Achieving an overall customer satisfaction rating of at least 90%

CORRECTIONAL HEALTH

PROGRAM HEADLINE MEASURES Correctional Health Services	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of mentally ill inmates engaging in treatment by receiving medications	42%	53%	66%	40%	✓
Percent of offenders receiving timely histories and physicals – Juveniles	100%	99%	99%	95%	✓
Percent of offenders receiving timely histories and physicals – Adults	94%	99%	99%	95%	✓

Program Discussion: Correctional Health Services exceeded current year performance targets for all its Headline Measures.

Major priorities over the next two years will include:

- Performing 100% of juvenile and 95% of adult histories and physicals in a timely manner
- Maintaining a minimum rate of 48% for mentally ill inmates engaging in treatment by receiving medications
- Maintaining an 80% completion rate in the Choices Program
- Maintaining jail accreditation
- Participating in the development of the new Youth Services Center
- Increasing community and funding support for therapeutic community, jail-based programs

SAN MATEO MEDICAL CENTER (SMMC)

DEPARTMENT MEASURES San Mateo Medical Center (SMMC)	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
San Mateo Medical Center cost per capita	\$222	\$246	\$252	\$234	No
Patient volume: inpatient days	45,687	103,609	128,539	136,915	No
Patient volume: outpatient visits	194,019	204,264	216,879	216,553	✓
Quality and Outcomes measures meeting performance targets	83%*	80%	59%	89%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Department Summary

The San Mateo Medical Center (SMMC) achieved targets for 59% of its Quality and Outcomes measures. Outpatient volume is estimated to meet target, while inpatient days will fall approximately 8% below target. Outpatient volume at the clinics exceeded target and continued the upward recent trend, though the rate of increase is now leveling off. Inpatient days fell below target as a result of slower than projected ramp up in volume at the Burlingame Long-Term Care facility. The \$252 cost per capita of SMMC services was approximately 8% above target, primarily due to increased costs for contract service providers and medical industry-related inflation.

During FY 2004-05, SMMC accomplished the following:

- Continued the volume growth at the Ron Robinson Senior Center which provides senior citizens of San Mateo County primary care and complete geriatric assessment of physical and mental health needs; the Center is projected to provide over 5,900 patient visits in FY 2004-05, increasing to 6,081 in FY 2005-06
- Continued the volume growth at the 281-bed Burlingame Long-Term Care facility, where an average daily census of 249 is projected in FY 2004-05, increasing to 275 for FY 2005-06
- Increased capacity utilization in both the inpatient and outpatient settings: inpatient days have increased from 103,609 in FY 2003-04 to over 125,000 projected in FY 2004-05; and outpatient clinic visits have increased from 204,264 in FY 2003-04 to a projected 212,814 in FY 2004-05
- Enhanced the culture of a learning organization through efforts such as clinic redesign to improve productivity, reduce wait times, and increase customer satisfaction
- Implemented an on-line eligibility system to streamline enrollment of patients into Medi-Cal, shortening the time for reimbursement
- Began an ongoing effort to train all direct contact staff on customer service

Major priorities over the next two years will include:

- Addressing workforce challenges
- Re-engineering processes and workflows
- Increasing revenue streams
- Improving advocacy
- Optimizing daily operations

Customer Satisfaction Survey Results

A total of 3,652 survey responses were received by SMMC during FY 2004-05, with 88% of respondents rating overall satisfaction as good or excellent. Customer satisfaction survey instruments and rating systems remain in a period of transition at the Medical Center (SMMC). Cares surveys continue to be used at the clinics in the Ambulatory and Medical Staff Services Division. Other types of customer satisfaction surveys are conducted throughout SMMC based on mandated reporting requirements and individual program priorities. With second-generation Outcome Based Management refinements in the FY 2005-06 budget, including the consolidation into

five OBM programs, a major goal next year will be to review all customer satisfaction surveys—with a view toward maximizing consistency across the various survey instruments used at the Medical Center and with the Cares survey utilized throughout the County.

Hospital, Ancillary, and Long Term Care Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	53%	32%	10%	5%	1,179
2003-04	72%	21%	6%	1%	384
2002-03	62%	24%	11%	3%	144

In Patient Care Services, the SMMC Medical/Surgical service began using the Press, Ganey survey instrument in Quarter 4 of FY 2004-05. This is in preparation for the federally-mandated patient satisfaction survey for all U.S. hospitals expected in FY 2006-07. The survey instrument assesses a variety of domains associated with inpatient satisfaction. The survey is mailed to a random sample of half of all medical/surgical discharges. After completion, the survey is mailed directly to Press, Ganey who compile and report the results. Currently, the response rate is approximately 15%; the Medical Center is working to increase this to at least 20%. Of the 62 respondents, 76% gave an overall rating of care as "Good" or Very Good". A rating of "Fair" was given by 16% of respondents and a rating of "Poor or Very poor" was given by 6%. This scale does not directly compare with the previous scale used to present results. A fairly comparable measure over the Press, Ganey and the PEP-C surveys is the question, "Would you recommend this hospital to a family member?" Over the past three years the response has been fairly stable, with 80% of patients indicating "Good" or Very Good" likelihood of recommending the hospital to a family member.

In the Psychiatry 3AB unit, a satisfaction survey is administered to all patients at discharge. The survey uses a four-point scale comparable to the CARES survey. For FY 2004-05, 323 surveys were returned. Overall satisfaction was rated as Good or Excellent by 63% of respondents. This survey has been in place using this scale since July 2004.

In Long Term Care (LTC) Services, a satisfaction survey using a five-point scale similar to the Press, Ganey instrument is used at both 1AB and Burlingame LTC. On 1AB, 92% of respondents indicated satisfaction with overall care and at BLTC, 89% indicated satisfaction with overall care. These results are comparable with prior year surveys at 1AB.

In Ancillary Services, FY 2004-05 results are reported for non-Cares satisfaction surveys in Laboratory, Environmental Services, and Physical Therapy. The aggregate of all customer satisfaction ratings of good or better was 93%.

Ambulatory and Medical Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	53%	38%	8%	1%	2,473
2003-04	62%	30%	7%	1%	1,340
2002-03	61%	26%	10%	3%	1,385

A total of 2,473 Cares surveys were received by Ambulatory and Medical Staff Services during FY 2004-05, with 91% of respondents rating overall satisfaction as good or excellent, a decrease of 1% compared to the prior year. In general, consumers were very satisfied with services provided by the outpatient clinics — overall satisfaction ratings were 94% good or excellent at the North County, 90% at the Fair Oaks Clinics, 94% at the South County clinics, and 85% at the Mid County clinics. On average at all clinics, 68% of patients reported having been seen within the 30 minute target, an improvement of 2% over the previous year. This is anticipated to improve in the next period as a result of the clinic visit redesign process undertaken in recent months. In addition, 95% of all patients indicated they would recommend the clinics to a family member, down from 97% last year.

Headline Measures Discussion

ADMINISTRATION AND FINANCIAL SERVICES

PROGRAM HEADLINE MEASURES <u>Administration and Financial Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Net days in Accounts Receivable	74	64	96	70	No

Program Discussion: Administration and Financial Services did not meet the current year performance target for its Headline Measure (lower numbers are better). Changes in payor mix have increased the number of complex accounts that require a longer processing period.

Major priorities over the next two years will include:

- Achieving a net income target of 0% (break-even)
- Minimizing growth in County General Fund Contributions for Medical Center operations
- Ensuring adequate capital for strategic initiatives

QUALITY MANAGEMENT

PROGRAM HEADLINE MEASURES <u>Quality Management</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of Annual Quality Assessment/Improvement Plans submitted on schedule	53%	73%	75%	100%	No
Number of Administrative Days	5,522	4,786	6,001	4,500	No

Program Discussion: Quality Management did not meet current year performance targets for its two Headline Measures. The percentage of Quality Assessment/Improvement Plans on schedule improved slightly over the prior year. The institution of the Quality Plans and reporting is relatively new to the organization and some managers and departments were still learning the requirements during FY 2004-05. Significant improvement in this measure should be seen in FY 2005-06. Administrative Days were substantially over the target of 4,500 (lower numbers are better), reflecting a number of difficult to place patients with complicated behavioral and medical issues, which reduced placement options.

Major priorities over the next two years will include:

- Ensuring that 100% of Quality Management Plans are submitted on time
- Ensuring a state of constant regulatory readiness throughout the Medical Center

PATIENT CARE SERVICES

PROGRAM HEADLINE MEASURES <u>Patient Care Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Nursing Vacancy Rate	15%	12%	16%	12%	No
Hours per month that Emergency Department (ED) was in Diversion Status	32	58	40	55	✓

Program Discussion: Patient Care Services met the current year performance target for monthly hours in Emergency Department (ED) Diversion (lower numbers are better) but not for nursing vacancy rate, where the year-end level of 16% reflects the continued shortage of nurses in the County and California, as well as throughout the nation. Next year's target has been revised downward to reflect this ongoing trend.

Major priorities over the next two years will include:

- Maintaining a nursing vacancy rate of no more than 14%
- Opening the Women's and Children's Services Unit by February, 2006
- Achieving an overall customer satisfaction rating of at least 90%

ANCILLARY AND SUPPORT SERVICES

PROGRAM HEADLINE MEASURES <u>Ancillary and Support Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of survey respondents rating services good or better: Patients	N/A	N/A	93%	85%	✓
Percent of survey respondents rating services good or better: Physicians	N/A	N/A	N/A	85%	Insufficient Data
Percent of OB ultrasound imaging scheduling occurring within two months	N/A	80%	90%	85%	✓

Program Discussion: Ancillary and Support Services exceeded the current targets for two of its Headline Measures, customer satisfaction among patients and OB ultrasound scheduling. There was no customer satisfaction survey taken of the physicians during FY 2004-05.

Major priorities over the next two years will include:

- Performing 85% of OB ultrasound imaging scheduling within two months
- Achieving an overall customer satisfaction rating of at least % for both patients and physicians
- Implementing the initial plans of Picture Archiving and Communications Systems (PACS)
- Expanding laboratory and rehabilitation services to include the Burlingame Long Term Care facility
- Implementing a multidisciplinary nutritional patient care plan
- Increasing compliance with Point of Care Testing (POCT) protocols
- Developing and implementing a pharmacy operations strategy

LONG TERM CARE SERVICES

PROGRAM HEADLINE MEASURES <u>Long Term Care Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of customer survey respondents rating services good or excellent: Burlingame Long Term Care	N/A	84%	89%	93%	No
Percent of customer survey respondents rating services good or excellent: SMMC Long Term Care	91%	98%	92%	93%	No

PROGRAM HEADLINE MEASURES <u>Long Term Care Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of patient falls: Burlingame Long Term Care	N/A	100	354	95	No
Number of patient falls: SMMC Long Term Care	107	101	125	96	No

Program Discussion: Long Term Care (LTC) Services did not meet current year performance targets for its Headline Measures. Customer satisfaction was 92% at SMMC LTC and 89% at Burlingame LTC, each slightly below target. Patient falls exceeded the targets at both facilities due to increases in both volume of patients and number of complex patient cases that resulted in multiple falls.

Major priorities over the next two years will include:

- Achieving a customer satisfaction rating of at least 90% at both LTC campuses
- Reducing patient falls by 5% at both LTC campuses
- Increasing occupancy at BLTC to 275 by the end of FY 2005-06

AMBULATORY AND MEDICAL SERVICES

PROGRAM HEADLINE MEASURES <u>Ambulatory and Medical Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of clinic patients who have been assigned a Primary Care Provider (PCP)	43%	79%	79%	75%	✓
Percent of clinic outpatient visits by Payor: County	43%	40%	32%	38%	✓
Percent of clinic outpatient visits by Payor: Medi-Cal/Medicare	45%	47%	51%	49%	✓
Percent of clinic outpatient visits by payor: Other Payor Sources	12%	13%	17%	13%	✓

Program Discussion: Ambulatory and Medical Services exceeded current year performance targets for all its Headline Measures. The percentage of clinic patients assigned to Primary Care Providers (PCP), which had increased dramatically from 43% to 79% in recent years, was maintained in the current year. The downward trend in percentage of County-paid clinic outpatient visits versus other payor sources continued; there has now been a decrease of 5% over the past three years.

Major priorities over the next two years will include:

- Assigning 78% of patients to a PCP
- Increasing non-County payor sources to 67%
- Achieving an overall customer satisfaction rating of at least 90%

HUMAN SERVICES AGENCY (HSA)

AGENCY MEASURES Human Services Agency	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Cost per client receiving services funded by the Human Services Agency	\$938	\$721	\$847	\$938	✓
Average hourly wage at placement for HSA Customers enrolled in training programs	\$16.50	\$15.52	\$14.28	\$15.70	No
Quality and Outcomes measures meeting performance targets	74%*	64%	70%	75%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Agency Summary

The Human Services Agency achieved target for 70% of its Quality and Outcomes measures. The cost per client receiving services fell well below its projected target with an actual figure of \$847, due to a decrease in operating costs and an increase in clients served. The average hourly wage at placement for HSA Customers enrolled in training programs fell below target due to clients obtaining low-paying jobs and a steady decline in wage levels over the past few years.

During FY 2004-05, the Human Services Agency accomplished the following:

- Utilized Technology to Streamline and Improve the Quality of Service Delivery
- Enhanced Staff Skills to Improve Client Outcomes
- Increased Housing with Supportive Services through Collaborative Partnerships
- Expanded Employment, Training and Benefits for the Community
- Strengthened Families by Expanding Family-Focused Community-Based Services

Major priorities over the next two years will include:

- Program Support—supporting delivery of high quality customer service to achieve overall customer satisfaction of 90% or better
- Community Capacity Building—providing assistance to 96% of clients in need of food and 65% of clients in need of housing
- Economic Self-Sufficiency—assisting 60% of PeninsulaWorks participants to obtain jobs and 60% of CalWORKs participants to leave cash aid with employment; and providing employment services to 20,000 PeninsulaWorks participants
- Family Strength—ensuring that children served do not experience a recurrence of maltreatment; maintaining percentage of clients reducing or abstaining from alcohol or drug use at 60% at 6-months post-intake and 45% at 12-months post-intake; and providing child care assistance to 3,100 children

Customer Satisfaction Survey Results

Human Services Agency – All Programs

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	70%	25%	4%	2%	2,117
2003-04	66%	27%	4%	3%	2,195
2002-03	66%	28%	4%	2%	2,569

User Satisfaction with HSA Information Technology (I/T) Help Desk Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	91%	7%	1%	0%	3,027
2003-04	87%	12%	0%	0%	2,205
2002-03	N/A	N/A	N/A	N/A	N/A

A total of 5,144 surveys were received by the Human Services Agency, with 96% of respondents rating overall satisfaction as good or excellent. This represents the same overall satisfaction rating as the prior year and an increase of 17% in the number of surveys collected, reflecting an additional 822 I/T responses. Concerns expressed in the CARES surveys focused primarily on customer service, wait times, and availability of staff. A summary of these comments is compiled and forwarded to the manager at each site for follow-up and action. The Agency utilizes a Contact Outcome form, and each site is required to provide a brief written summary of the follow-up contact results.

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Program Support</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of help desk calls responded to within service level commitments: Critical calls	98%	99%	99%	98%	✓
Percent of help desk calls responded to within service level commitments: Non-critical calls	98%	98%	99%	98%	✓
Percent of customer survey respondents rating services good or better	94%	93%	94%	90%	✓

Program Discussion: HSA Program Support exceeded performance targets for each of its three Headline Measures. The percent of help desk calls responded to within service level commitments for both critical and non-critical calls met targets, indicating that the help desk is able to meet the needs of these call requests, and resulting in staff being able to maintain their work efficiency. The percent of customer survey respondents rating services good or excellent exceeded the target and also increased by 1% over the prior year rating.

Major priorities over the next two years will include:

- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>Community Capacity Building</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Number of County funded affordable housing units developed and occupied each fiscal year	124	104	53	53	✓
Cumulative number of County funded affordable housing units developed and occupied	679	783	836	836	✓
Percent of clients needing food who were assisted by Core Service Agencies contracting with the Human Services Agency	96%	97%	98%	96%	✓
Percent of clients needing housing who were assisted by Core Service Agencies contracting with the Human Services Agency	63%	68%	64%	68%	No

Program Discussion: HSA Community Capacity Building met performance targets for three of its four Headline Measures. The percent of clients needing housing and assisted by Core Service Agencies contracting with HSA fell below target, decreasing by four percentage points from last year's performance. Many of the Core Service Agencies have lost funding from other sources, limiting their capacity to serve clients. Staff transitions and loss of a Core Agency also adversely impacted service levels provided. El Concilio, the new Core Agency in East Palo Alto, only began reporting data in October 2004.

Major priorities over the next two years will include:

- Providing assistance to 96% of clients in need of food and 68% of clients in need of housing

PROGRAM HEADLINE MEASURES <u>Economic Self-Sufficiency</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of PeninsulaWorks participants employed in jobs six months after hire	89%	83%	80%	87%	No
Percent of California Work Opportunity and Responsibility to Kids (CalWORKS) participants leaving cash aid with employment	39%	60%	57%	60%	No

Program Discussion: HSA Economic Self-Sufficiency did not achieve the performance targets for either of its Headline Measures. The targeted number of participants in jobs six months after hire was exceeded, but the percentage did not. While more participants are keeping jobs, there are more participants coming in for employment services. The recent wave of layoffs has affected new hires and retention remains a significant challenge.

Major priorities over the next two years will include:

- Assisting 65% of PeninsulaWorks enrolled participants to obtain jobs and 75% of CalWORKS participants to leave cash aid with employment
- Providing employment services to 20,000 PeninsulaWorks participants

PROGRAM HEADLINE MEASURES <u>Family Strength</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of child abuse/neglect referrals – immediate response compliance	N/A	95%	97%	90%	✓

PROGRAM HEADLINE MEASURES <u>Family Strength</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of child abuse/neglect referrals – 10 day response compliance	N/A	77%	87%	90%	No
Percent of clients reducing or abstaining from alcohol and/or drug use at three months post intake	91%	76%	75%	70%	✓
Percent of clients reducing or abstaining from alcohol and/or drug use at nine months post intake	95%	78%	82%	60%	✓

Program Discussion: Family Strength met performance targets for three of its four Headline Measures. Targets were not met for the percent of 10-day response compliance for child abuse/neglect referrals due to inconsistent data entry. Extensive training efforts have recently been implemented to improve data entry and, as a result, the rates have improved significantly though still below the established target. HSA will continue to provide the training and monitor data entry to ensure that accurate data is being reported.

Major priorities over the next two years will include:

- **Ensuring that children served do not experience a recurrence of maltreatment**
- **Maintaining a percentage of clients reducing or abstaining from alcohol or drug use of 60% at six-months post-intake and 45% at twelve-months post-intake**
- Providing child care assistance to 3,100 children

PUBLIC WORKS AGENCY

AGENCY MEASURES Public Works	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Road service cost per capita in Unincorporated San Mateo County	\$45	\$47	\$38	\$38	✓
Utilities service cost per capita in Unincorporated San Mateo County	\$79	\$61	\$72	\$102	✓
Electricity consumption in County maintained detention facilities (kilowatt hours)	16,833	15,154	14,425	16,500	✓
Electricity consumption in County maintained facilities for office space (kilowatt hours)	12,302	13,038	11,925	12,000	✓
Energy (gas) consumption in County maintained Detention Facilities (therms per 1,000 square feet)	899	910	863	875	✓
Energy (gas) consumption in County maintained facilities for Office Space (therms per 1,000 square feet)	496	479	487	450	No
Quality and Outcomes measures meeting performance targets	68% *	75%	56%	83%	No

* 2003 actuals include measures that met targets as well as those showing progress from the prior year. Beginning in 2004, in order to improve efficiency in calculating this measure for all County programs, only those measures meeting targets have been counted.

Agency Summary

Public Works met current year performance targets for 58% of its Quality and Outcomes measures. A review of Headline Measures for all Public Works programs and services indicates 55% met current year targets. Uncertain funding levels; internal system changes impacting data collection and methodologies; and in some cases, due to insufficient historical data, some targets may have been out of synch with current activity and realistic goals. The Agency continues to improve and refine its data collection processes and methodologies, which has helped reduced the total number of performance measures in data development. The two cost per capita measures for Road and Utility services represent overall performance progress for service delivery to unincorporated areas of the County. Both measures met target. It should be noted that the Utilities Service measure was significantly influenced by the amount of money budgeted and spent in a fiscal year for the Colma Creek Flood Control project.

The conservation of natural resources continues to be a priority and a key contribution toward Shared Vision 2010 Goals. The Agency monitors four performance measures gauging progress in the consumption of natural resources such as electricity and gas. Kilowatt-hours for electricity and therms per thousand square feet are tracked in detention facilities and office space. Performance targets were met for three of the four measures. The performance target was not met for energy (gas) consumption in County maintained facilities for office space mostly due to the unanticipated use of the old courthouse during the Scott Peterson trial. Energy consumption otherwise would have decreased due to new temperature control policies.

During FY 2004-05, the Agency accomplished the following:

- Increased focus on energy efficiency, waste reduction, and preservation of natural resources
- Addressed the regulatory requirements impacting work in both Road Construction and Operations and Special Districts
- Improved effectiveness through technology improvements

Major priorities over the next two years include:

- Maintaining customer satisfaction and overall performance in all programs
- Continuing to conserve natural resources and maintain and improve the County's infrastructure

Customer Satisfaction Ratings - Cares Survey Results

Public Works Agency					
Overall Satisfaction					
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	82%	14%	3%	1%	1821
2003-04	79%	18%	2%	1%	964
2002-03	77%	18%	5%	0%	87

A total of 1821 surveys were received by the Agency for Airports, Engineering and Map Services, Roads-Service Requests, Roads-Street Sweeping, Roads-Traffic, Sewer Maintenance, Administrative Services, Building Services-Custodial, Construction Services, Facilities Maintenance and Operations (Non-Hospital), Facilities Maintenance and Operations (Health and Hospital), Vehicle and Equipment Services, Transportation Services, and Waste Management with 96% of respondents rating overall satisfaction as good or excellent. The increase in the number of responses from FY 2002-03 to FY 2003-04 was due to the inclusion of all surveys distributed to all customers served by the Public Works Agency. Prior year data includes surveys distributed only to the general public. Public Works staff serve other County departments and Programs within the Agency in addition to serving general public customers. Survey responses for other County departments and Programs within the Agency were included in FY 2003-04 counts. The increase from 964 in FY 2003-04 to 1425 FY 2004-05 is primarily due to the addition of survey results for the new Transportation Services survey.

Airports					
Overall Satisfaction					
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	76%	20%	2%	2%	44
2003-04	67%	31%	0%	2%	38
2002-03	69%	24%	7%	0%	29

Airports received a total of 44 surveys with 96% of the respondents rating overall satisfaction as good or excellent. This represents a decrease of 2 percentage points from the prior year's 98% rating, and response rates are up with the number of survey responses increasing by 6. Customers with airport accounts as well as transient users are surveyed. Surveys are mailed out with tenant billings and are made available to customers on site at both the San Carlos and half Moon Bay airports. Suggestions are investigated and researched with staff. The most common issue described were problems airport users had encountered with the Federal Aviation Administration (FAA) Air Traffic Controllers at San Carlos Airport. San Carlos Airport management staff have met with the San Carlos Air Traffic Control Tower Manager to discuss concerns expressed by customers. As a result, FAA management will discuss with staff. Another issue described had to do with sweeping patrols. The Airport has increased the frequency of pavement sweeping patrols, especially in the vicinity of the airport's aircraft storage hangars in response to customer requests. The third most common issue had to do with storage and hangars. The San Carlos Airport is currently in the design phase of new aircraft storage and shade hangars in response to longstanding requests from airport users for more hangars at the airport. Customer feedback included several positive comments about the great service and helpfulness of Airport employees.

Engineering and Map Services					
Overall Satisfaction					
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	94%	6%	0%	0%	55
2003-04	94%	6%	0%	0%	19
2002-03	83%	17%	0%	0%	6

Engineering and Map Services received a total of 55 surveys, with 100% of the respondents rating overall satisfaction as good or excellent. This rating is the same as the prior year. The Program was very successful in increasing the number of responses, with responses increasing 190% from 19 to 55. Surveys were made available to customers in the Engineering Services lobby areas. Customer feedback included several positive comments about the promptness of service from Engineering Services employees.

Roads – Service Requests

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	73%	21%	4%	2%	49
2003-04	74%	23%	3%	0%	61
2002-03	75%	14%	11%	0%	29

Roads received a total of 49 survey responses related to Service Requests with 94% of the respondents rating overall satisfaction as good or excellent. This represents a maintained standard of high-level service from the prior year rating in spite of staff reductions. The number of surveys received decreased by 12. Surveys are mailed to residents who request service and are handed out by workers in the field. Comments included concerns about response time. To address these concerns staff have been instructed to provide customers with anticipated completion timeframes along with explanations of unanticipated delays. Staff have also begun coding service request numbers on each survey in order to better track feedback. Several customers complimented staff about courteous service and the high quality of work.

Roads – Traffic

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	71%	19%	5%	5%	44
2003-04	N/A	N/A	N/A	N/A	N/A
2002-03	N/A	N/A	N/A	N/A	N/A

Roads received a total of 44 survey responses related to Service Requests with 90% of the respondents rating overall satisfaction as good or excellent. The Traffic Section began surveying customers in July 2004. Traffic calming devices (speed humps/bumps) have been a primary issue for this section. Survey feedback has been used to improve service delivery by revising the County Ordinance Code to allow for more efficient responses to parking and traffic complaints and violations. The Program also improved the notification process to ensure that all property owners in a potentially affected area have the opportunity to vote for or against a speed hump or other traffic-calming device in their neighborhood. Customer feedback included comments about the courtesy of staff and the high quality of work.

Utilities – Sewer Maintenance

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	95%	4%	0%	1%	79
2003-04	100%	0%	0%	0%	37
2002-03	87%	13%	0%	0%	23

The Utilities Section received a total of 79 surveys for Sewer Service, with 99% of the respondents rating overall satisfaction as good or excellent. This rating is similar to the prior year. There was a shift of 4 percentage points from excellent to good responses. The number of surveys received increased by 42, or 114%. Staff distribute customer surveys as they perform work in the field. Surveys are also mailed to customers who have called to request service. Customer feedback included positive comments about the courtesy, efficiency and excellent service received from the sewer maintenance crew.

Customer Satisfaction Ratings – Non Cares Survey Results

Administrative Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	82%	17%	1%	0%	18
2003-04	68%	27%	4%	1%	48
2002-03	100%	0%	0%	0%	24

Administrative Services received a total of 18 surveys related to Agency supportive services for business systems, financial management, contracts, personnel, payroll, safety and training, with 99% of the respondents rating overall satisfaction as good or excellent. The number of responses decreased from 50 to 18 from the prior year, with a shift in 27 percentage points from good to excellent. This survey is distributed to Agency supervisory and management staff and other key customers. The survey includes questions about a wide range of supportive services from financial management to business systems support. Customer feedback included positive comments about the high quality of work as well as efficient and courteous service. Program priorities and performance improvement plans are established using survey comments as a guide.

Building Services – Custodial					
	Overall Satisfaction				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	78%	21%	1%	0%	191
2003-04	79%	18%	3%	0%	205
2002-03	75%	21%	3%	1%	157

Building Services received a total of 191 surveys related to supportive services provided to other County Departments, with 99% of the respondents rating overall satisfaction as good or excellent. This reflects a shift of 3 percentage points from fair to good from the prior year. Surveys are distributed to occupants of County buildings. Staff handed out about 560 surveys this year in the form of a postcard. Suggestions for improvement are followed up and responded to on an individual basis. Customer feedback included positive comments about friendly, efficient and professional service. Program priorities and performance improvement plans are established using survey comments as a guide.

Construction Services					
	Overall Satisfaction				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	60%	32%	8%	0%	37
2003-04	75%	24%	1%	0%	139
2002-03	75%	24%	1%	0%	159

Construction Services received a total of 37 surveys related to supportive services provided to other County Departments, with 92% of the respondents rating overall satisfaction as good or excellent. There was a drop in the number of survey responses from the prior year of 139 to 37. This is mostly due to a process change during the implementation of the Computerized Maintenance Management System (CMMS) that inadvertently impacted how surveys were sent to customers. Program Managers are looking at options for integrating survey distribution with the new CMMS process. A process remedy will be in place and the number of responses is expected to increase in the latter part of FY 2005-06. Customers of all non-maintenance jobs and projects are surveyed. This includes other County departments and customers within Public Works. Suggestions for improvement are followed up and responded to on an individual basis. Customer feedback included positive comments about the quality of work and professional service. Program priorities and performance improvement plans are established using survey comments as a guide.

Facilities Maintenance and Operations (FM&O) – Non-Health and Hospital					
	Overall Satisfaction				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	90%	10%	0%	0%	42
2003-04	92%	7%	1%	0%	106
2002-03	88%	8%	4%	N/A	79

Facilities Services for non-Health and Hospital sites received a total of 42 surveys related to maintenance and operations services, with 100% of the respondents rating overall satisfaction as good or excellent. Surveys are mailed to maintenance coordinators after service is provided. The number of postcard surveys distributed varies. Surveys are also e-mailed to maintenance coordinators twice a year with 120 surveys going out each time. Suggestions for improvement are given to supervisors who take appropriate action. Customer feedback included positive comments about the quality of work and the efficient and professional service. Program priorities and performance improvement plans are established using survey comments as a guide.

Facilities Maintenance and Operations (FM&O) – Health and Hospital

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	44%	35%	12%	9%	100
2003-04	N/A	N/A	N/A	N/A	N/A
2002-03	N/A	N/A	N/A	N/A	N/A

Facilities Services for Health and Hospital sites received a total of 100 surveys related to maintenance and operations services, with 79% of the respondents rating overall satisfaction as good or excellent. Staff distribute surveys as work is performed in the field. Surveys are also sent out periodically to key hospital personnel. In FY 2005-06 surveys will be sent twice a year to supervisory and management hospital staff. A significant number of FM&O staffing changes in key supervisory and management positions may have impacted service delivery and satisfaction ratings. Customer service is a priority for the new team and satisfaction ratings are expected to improve in FY 2005-06. Customer feedback included positive comments about the quality of work and the efficient and professional service. Program priorities and performance improvement plans are established using survey comments as a guide.

Roads/Street Sweeping – Ladera/Los Trancos Area

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	62%	33%	5%	0%	200
2003-04	N/A	N/A	N/A	N/A	N/A
2002-03	N/A	N/A	N/A	N/A	N/A

Roads received a total of 200 survey responses related to street sweeping in the Ladera and Los Trancos area, with 95% of the respondents rating overall satisfaction as good or excellent. Surveys are distributed to different unincorporated areas within the County each year based on a multi-year survey plan. The number of survey recipients/residents within an area can vary greatly from one section to another, and the number of completed survey responses will vary accordingly. Survey comments and suggestions were evaluated and resulted in changing sweeping days so that sweepers now make their rounds the day after trash collection. Customer feedback included comments about the courtesy of staff and the high quality of work.

Roads/Street Sweeping – West Menlo Park Area

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	38%	46%	16%	0%	196
2003-04	N/A	N/A	N/A	N/A	N/A
2002-03	N/A	N/A	N/A	N/A	N/A

Roads received a total of 200 survey responses related to street sweeping in the West Menlo Park area, with 95% of the respondents rating overall satisfaction as good or excellent. Surveys are distributed to different unincorporated areas within the County each year based on a multi-year survey plan. The number of survey recipients/residents within an area can vary greatly from one section to another, and the number of completed survey responses will vary accordingly. In response to concerns about parked cars preventing complete curbside sweeping, the staff further defined the sweeping schedule to limit the time that residents would need to find off-street parking. Customer feedback included comments about the courtesy of staff and the high quality of work.

Transportation Services

Fiscal Year	Overall Satisfaction				# of Responses
	Excellent	Good	Fair	Poor	
2004-05	75%	23%	2%	0%	598
2003-04	N/A	N/A	N/A	N/A	N/A
2002-03	N/A	N/A	N/A	N/A	N/A
2001-02	N/A	N/A	N/A	N/A	N/A

Transportation Services received a total of 598 surveys related to the Commute Alternatives Program (CAP), with 98% of the respondents rating overall satisfaction as good or excellent. Program staff distributed a total of 1,118 surveys, with 604 surveys returned

for a response rate of 54%. The survey also questioned respondents about the effects of CAP on their life or well-being; 582, or 96%, indicated the program had a positive effect and 3% said the program had no effect. A total of 241, or 40% of respondents provided written comments with all of the comments being positive or neutral suggestions for improvement. Written comments included the following: satisfaction with service; a need to continue providing timely communication of information to customers; a need to hold workshops on various subjects; a need to make better use of the C/CAG website. Suggestions for improvement are shared with staff. Program priorities and performance improvement plans are established using survey comments as a guide.

Vehicle and Equipment Services					
	Overall Satisfaction				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	88%	11%	1%	0%	128
2003-04	92%	7%	1%	0%	188
2002-03	N/A	N/A	N/A	N/A	N/A

Vehicle and Equipment Services received a total of 128 surveys related to supportive services provided to other County Departments, with 99% of the respondents rating overall satisfaction as good or excellent. Post card format surveys are placed in all Motor Pool and assigned vehicles and in all trucks and rolling equipment at the Grant Yard shop and service trucks after repairs and routine servicing. Surveys and drop boxes are also available at both Motor Pools. Responses are reviewed with staff and staff follow up on suggestions for improvement. Customer feedback included positive comments about the quality of work and courteous and professional service. Program priorities and performance improvement plans are established using survey comments as a guide.

Waste Management					
	Overall Satisfaction				
Fiscal Year	Excellent	Good	Fair	Poor	# of Responses
2004-05	92%	8%	0%	0%	40
2003-04	46%	52%	2%	0%	48
2002-03	N/A	N/A	N/A	N/A	N/A

Waste Management Services received a total of 40 surveys related to Recycling information, with 100% of the respondents rating overall satisfaction as good or excellent. Surveys are mailed annually to RecycleWorks customers. During the fourth quarter of each year callers are asked if they are willing to complete a survey. Surveys are mailed to the first 100 addresses collected. Suggestions for improvement are shared with staff. Program priorities and performance improvement plans are established using survey comments as a guide.

Headline Measures Discussion

PROGRAM HEADLINE MEASURES <u>Administrative Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of hours network is available during business hours	97%	100%	99%	98%	✓
Percent of customer survey respondents rating services good or better	100%	95%	99%	96%	✓

Program Discussion: Public Works Administrative Services met current year performance targets for both Headline Measures. The Headline Measures in this unit represent key administrative support functions. Network availability remains high due to regular maintenance being performed during non-work hours. The annual customer survey process was completed with 120 surveys issued and 18 returned. Feedback is incorporated into the Program planning process resulting in high satisfaction ratings.

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating of at least 90%
- Maintaining a 98% rate of work authorizations processed within five days and work authorization expenditures fully reimbursed
- Achieving a 97% response rate to information technology service requests resolved within 24 hours

PROGRAM HEADLINE MEASURES <u>Engineering Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of projects in the design phase completed on time and within budget	N/A	N/A	N/A	60%	Insufficient Data
Percent of projects in the construction phase completed on time and within budget	N/A	N/A	N/A	70%	Insufficient Data
Percent of customer survey respondents rating road project improvements good or better	87%	92%	N/A	80%	Insufficient Data

Program Discussion: Public Works Engineering Services continues to develop methodologies and collect data for their Headline Measures. Data is anticipated in FY 2005-06. Engineering Services completed designs and inspections of road reconstruction projects, sanitary sewer improvements, airport runway improvements at the Half Moon Bay Airport, and channel improvements along Colma Creek. During FY 2004-05 the program merged the Design and Constructions sections and reconfigured the Surveying Unit. The Program completed several improvements to the Pavement Management System (PMS) and other database collection processes.

Major priorities over the next two years include:

- Achieving an overall customer satisfaction rating of at least 90% for road improvement projects
- Achieving and maintaining a rate of 80% of projects completed within budget
- Achieving and maintaining a completed on time rate of 80% for projects in the design phase and 65% for projects in the construction phase

PROGRAM HEADLINE MEASURES <u>Facilities Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent below Building Owner's Management Association (BOMA) average operating cost per square feet - Non-Health/Hospital Facilities	22.8%	23.6%	24.7	5%	✓
Percent of total maintenance hours spent on preventive maintenance (does not include Health and Hospital)	19%	12%	13%	14%	No

Program Discussion: Public Works Facilities Maintenance and Operations met target for the percent below Building Owner's Management Association (BOMA) average. This measure includes a review of Building Owner's Management Association (BOMA) data. BOMA is an international organization whose members are involved in commercial real estate. This program receives annual reports and publications that are used to obtain benchmarking data such as the average operating cost per square foot for various types of facilities in both the private and public sectors. Analysts in the Facilities Services program compare County data with data for similar agencies within the local geographical area when data is received. The program came close to meeting target for the number of hours spent on preventive maintenance. Staffing shortages due to two long-term injuries prevented the program from meeting target.

Major priorities over the next two years include:

- Improving the percent of total maintenance hours spent on preventive maintenance by 2%
- Maintaining facility costs per square foot at 20% below BOMA average
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES Road Construction and Operations	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of road miles, by type, with Pavement Condition Index (PCI) greater than established baseline - Primary Roads (55 and above)	70%	73%	68%	70%	No
Percent of road miles, by type, with Pavement Condition Index (PCI) greater than established baseline - Secondary Roads (40 and above)	79%	74%	76%	71%	✓
Percent of hours spent on unscheduled work: Asphalt, Concrete and Pavement	8%	7%	11%	8%	No
Percent of hours spent on unscheduled work: Traffic Control (signs and legends)	9%	2%	12%	2%	No
Percent of hours spent on unscheduled work: Drainage Facilities	2%	3%	9%	2%	No
Percent of hours spent on unscheduled work: Vegetation Management	3%	4%	10%	4%	No

Program Discussion: Public Works Road Construction and Operations met its current year performance target for one of six Headline Measures. The Pavement Condition Index (PCI) is a numerical value ranging from 0 to 100, with 100 being the best or highest rating of the condition of a road. The PCI is calculated by measuring distresses (cracking, distortions, patches, depressions, and weathering) found within inspection units for the road. Primary Roads are defined as County maintained roads that are major thoroughfares and streets or the only road servicing a particular area. Secondary roads are defined as all other roads. A PCI rating above 55 represents streets that are in "good" or better condition and rating above 40 represents streets that are in "fair" or better condition as defined by the Metropolitan Transportation Commission. For this reporting period, 68% of Primary roads had a PCI rating above 55 and 76% of secondary roads had a rating above 40. The number of secondary miles with a PCI rating greater than the established baseline of 170 has declined from 168 in 2003; 155 in 2004; and increased slightly to 159 in 2005.

Declining revenues in the Road Fund have reduced resources and resulted in increases in unscheduled work. The percent of hours spent on unscheduled work for asphalt, concrete and pavement is higher than the target primarily due to staff reductions and injuries. The percent of unscheduled work for traffic control has increased because reduced staffing for road maintenance crews limit their availability to patrol areas to identify needed sign and legend work, resulting in calls for service from the public. There is an upward trend for the amount of unscheduled work with drainage facilities. Work in this area is increasing at a faster rate than anticipated. Staff reductions have resulted in less preventive work being done before the rainy season began. The difficulty of getting permits to replace inadequate drainpipes has also impacted performance. The percent of unscheduled work with vegetation management is increasing with each reporting cycle. Unscheduled work is impacted when regularly scheduled work is deferred due to staffing issues. For example, only one mowing cycle was completed on the Coastside instead of two.

Major priorities over the next two years include:

- Maintaining at least 90% of hours spent on scheduled maintenance
- Maintaining the number and percent of primary road miles with pavement condition index greater than the established baseline
- Decreasing the percent of productive hours lost as a result of injury in the Road Construction and Operations Program by 1.5%

PROGRAM HEADLINE MEASURES <u>Construction Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of fixed cost jobs completed on time and within budget	97%	93%	98%	98%	✓
Percent of customer survey respondents rating services good or better	99%	99%	92%	98%	No

Program Discussion: Public Works Construction Services met one of two current year performance targets for its Headline Measures. A concerted effort has been made to improve the accuracy of time and cost estimates provided to customers before work begins. In addition, staff have been successful in planning and using materials more efficiently. The number of customer survey respondents for the year was 34, which is down from the prior year count of 139. The Program maintains a high level of satisfaction ratings due to consistently providing customers with responsive and cost-effective services. However, the program did not meet its target due to issues encountered with its new work request system. Satisfaction ratings dipped in the second quarter of the year but rebounded in the latter half of the year. In the coming year the program expects to return to higher satisfaction levels.

Major priorities over the next two years include:

- Achieving a 98% rate of fixed cost jobs completed within budget
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>Vehicle and Equipment Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Compact and mid-size vehicle average cost per mile	\$0.27	\$0.27	\$0.26	\$0.28	✓
Compact and mid-size vehicle fuel economy (miles per gallon/MPG)	25	25	26	26	✓

Program Discussion: Public Works Vehicle and Equipment Services met performance targets for both Headline Measures. The cost per mile and average miles per gallon for compact and mid-size cars remain stable as new vehicles with better miles per gallon (MPG) ratings come into the fleet.

Major priorities over the next two years include:

- Maintaining the cost per mile below \$0.29 per gallon
- Maintaining the average fuel economy at 26 miles per gallon
- Achieving an overall customer satisfaction rating of at least 90%

PROGRAM HEADLINE MEASURES <u>Waste Management</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent change in AB939 solid waste diversion rate for Unincorporated San Mateo County	12%	-2%	0%	6%	No
Percent of public awareness in San Mateo County of RecycleWorks as the Countywide resource for waste prevention, recycling and resource conservation issues	13%	15%	N/A	15%	Insufficient Data

Program Discussion: Public Works Waste Management did not meet current year performance target for one of its two Headline Measures. The Waste Management section receives a figure from the California Waste Management Board which quantifies waste being disposed or dumped and waste being diverted through recycling, composting or re-use. The measure shows the difference from year to year of diverted waste. For example, in 2004 the diversion rate changed from 48% to 47% with the difference being a 2% decrease (the 1% difference between 48% and 47% was divided by 48% resulting in -2.0%). In 2005, actual tonnage disposed decreased by 2,139, which is a 3% reduction over the previous year. However, the diversion rate established by the California Integrated Waste Management Board is calculated using three primary adjustment factors: population, taxable sales, and employment rates. Fluctuations in those factors can significantly affect the results of the diversion rate calculation. This measure is an indicator of the effectiveness of current programs and activities in improving the waste diversion percentage of unincorporated San Mateo County in the pursuit of achieving and maintaining compliance with the California Waste Management Act (AB939) which mandates 50% diversion. Data for the percent of public awareness in San Mateo County for RecycleWorks is based on a random telephone survey that is completed biannually. The next survey will be conducted in FY 2005-06.

Major priorities over the next two years include:

- Meeting the AB 939 target of 50% diversion

PROGRAM HEADLINE MEASURES <u>Transportation Services</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Effect of Commute Alternatives Program on the lives and well-being of participants	N/A	N/A	96%	80%	✓
Percent of County employees participating in Commute Alternatives Program	25%	20%	20%	20%	✓
Percent of Other Large Companies' employees participating in commute alternatives programs (benchmark)	28%	24%	24%	24%	Benchmark

Program Discussion: Public Works Transportation Services met current year performance targets for both Headline Measures. The number of County employees participating in the Commute Alternatives Program was 1,043: vanpool 40; transit tickets 768; carpool 205; and bike/walk 30. Overall participation has increased from 933 to 1,043 this year primarily due to the rising cost of gasoline. Another factor is the improvement of the economy. Commute alternatives become more appealing as the roads become more congested. The Program is now surveying CAP participants.

Major priorities over the next two years include:

- Maintaining a difference of 4% or less between the County and other large employers for participation in the Commute Alternatives Programs
- Achieving an overall customer satisfaction rating of at least 90% for C/CAG assistance in delivery of projects to local jurisdictions

PROGRAM HEADLINE MEASURES <u>Flood Control and Utilities</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent of time spent on scheduled sewer work	78%	77%	79%	85%	No
Percent of time spent on scheduled flood control work	N/A	100%	100%	85%	✓

Program Discussion: Public Works Flood Control and Utilities met current year performance targets for one of two Headline Measures. The percent of time spent on scheduled work has been adversely impacted by staffing issues and therefore did not meet target.

The Colma Creek Zone is financed through a combination of local taxes, certificates of participation, state and federal revenue and is building the Colma Creek Flood Control Project. The project was completed in FY 2004-05. The project provides areas in Daly City, Colma, and South San Francisco with protection for the 50-year flood event (a flood which has a two percent chance of being equaled or exceeded in a given year).

Major priorities over the next two years include:

- Increasing the amount of time spent on scheduled sewer work to 85%
- Achieving and maintain zero regulatory violations
- Maintaining at least a 90% rate of scheduled work for Flood Control

PROGRAM HEADLINE MEASURES <u>Airports</u>	2003 Actuals	2004 Actuals	2005 Actuals	2005 Target	Target Met
Percent change in total number of hangar and tiedown accounts at San Carlos and Half Moon Bay airports	-6.0%	-1.0%	0.5%	-1.2%	✓
Percent of Aircraft observed operating in compliance with airport noise abatement procedures to total number of aircraft observed	99%	99%	99%	99%	✓

Program Discussion: Public Works Airports met current year performance targets for both Headline Measures. The yearly average percent change in total hangar and tiedown accounts increased from -1.0% to .05% with the total number of accounts increasing from 415 to 417. The airports continue to maintain high compliance with noise abatement procedures.

Major priorities over the next two years include:

- Maintain a 99% noise abatement compliance rate
- Achieving an overall customer satisfaction rating of at least 90%
- Achieving no change in the occupancy rate