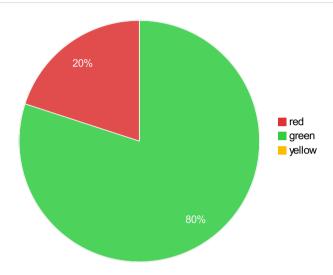
Dentistry, Board of

Annual Performance Progress Report Reporting Year 2019

KPM#	Approved Key Performance Measures (KPMs)
1	Continuing Education Compliance - Percent of Licensees in compliance with continuing education requirements.
2	Time to Investigate Complaints - Average months from receipt of new complaints to completed investigation.
3	Days to Complete License Paperwork - Average number of working days from receipt of completed paperwork to issuance of license.
4	CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall, timeliness, accuracy, helpfulness, expertise, availability of information.
5	Board Best Practices - Percent of total best practices met by the Board.

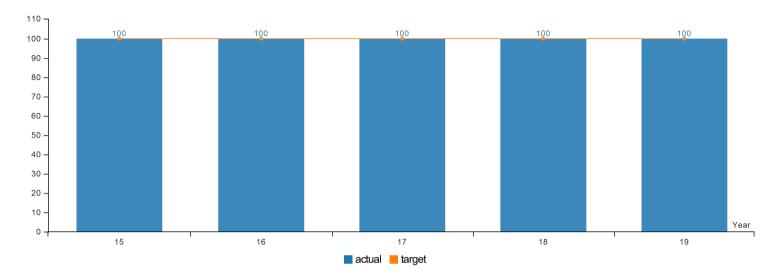


Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	80%	0%	20%

Continuing Education Compliance - Percent of Licensees in compliance with continuing education requirements.

Data Collection Period: Jul 01 - Jun 30

^{*} Upward Trend = positive result



Report Year	2015	2016	2017	2018	2019		
Percent of Licensees in Compliance with Continuing Education Requirements							
Actual	100%	100%	100%	100%	100%		
Target	100%	100%	100%	100%	100%		

How Are We Doing

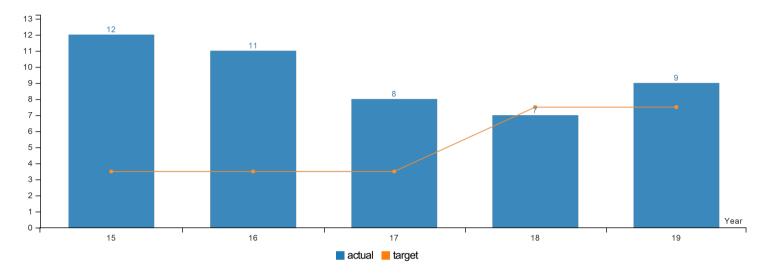
For FY 2019 we accomplished this goal by requiring our Licensees complete continuing education requirements. We monitor their compliance with questions on their license renewal forms and with audits. Staff follows up with Licensees as needed to ensure all requirements are met.

Factors Affecting Results

Experienced staff work with our Licensees to communciate effectively regarding the conitinuing education requirements.

KPM #2	Time to Investigate Complaints - Average months from receipt of new complaints to completed investigation.
	Data Collection Period: Jul 01 - Jun 30

^{*} Upward Trend = negative result



Report Year	2015	2016	2017	2018	2019	
Average time to Investigate Complaints						
Actual	12	11	8	7	9	
Target	3.50	3.50	3.50	7.50	7.50	

How Are We Doing

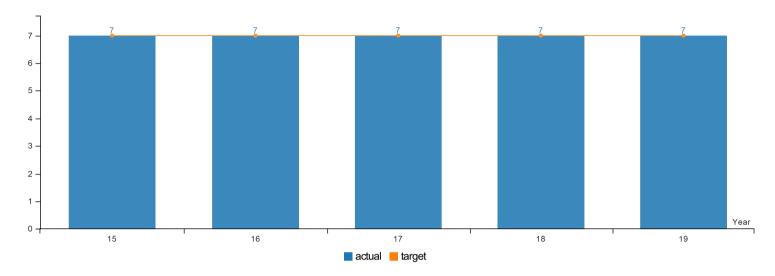
For FY 2019 we did not achieve this goal. We added a new dental investigator in February 2019 and continued refinements in our investigative process, which will positively impact our abilty to resolve complaints and investigations in a timely manner. Investigations can take time for a number of reasons: the number of treatment providers involved, the complexity of the case, the timely responses of those involved in the matter and the cooperation of the parties as well. Investigative staff have worked through a backlog of cases and the overall case load and staffing levels would indicate that the time to complete investigations will go down in the future.

Factors Affecting Results

The total number of investigations opened for FY 2019 was 281, compared to 272 in FY 2018. The total number of investigations closed for FY 2019 was 315, compared to 260 in FY 2018, which is a significant increase in closed cases. The investigators did a great job in clearing up a back log of cases.

KPM #3	Days to Complete License Paperwork - Average number of working days from receipt of completed paperwork to issuance of license.
	Data Collection Period: Jul 01 - Jun 30

^{*} Upward Trend = positive result



Report Year	2015	2016	2017	2018	2019	
Average Number of Working Days to Issue license after Paperwork is Completed.						
Actual	7	7	7	7	7	
Target	7	7	7	7	7	

How Are We Doing

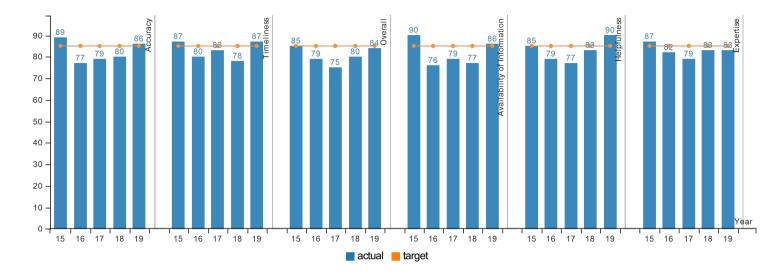
For FY 2019 we achieved this goal. The Board's strategy is that the processing of accurate and complete paperwork for the issuance of a new or renewed license, should take place in a reasonable period of time to fulfill one of our statutory requirements of those dersiring to work in Oregon in a timely fashion.

Factors Affecting Results

It is one of our top priorities that applications and renewals be processed accurately and efficiently and that we not create any barriers for someone to practice once they met all applicable statutes and rules.

KPM #4 CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall, timeliness, accuracy, helpfulness, expertise, availability of information.

Data Collection Period: Jul 01 - Jun 30



Report Year	2015	2016	2017	2018	2019
Accuracy					
Actual	89%	77%	79%	80%	86%
Target	85%	85%	85%	85%	85%
Timeliness					
Actual	87%	80%	83%	78%	87%
Target	85%	85%	85%	85%	85%
Overall					
Actual	85%	79%	75%	80%	84%
Target	85%	85%	85%	85%	85%
Availability of Information					
Actual	90%	76%	79%	77%	86%
Target	85%	85%	85%	85%	85%
Helpfulness					
Actual	85%	79%	77%	83%	90%
Target	85%	85%	85%	85%	85%
Expertise					
Actual	87%	82%	79%	83%	83%
Target	85%	85%	85%	85%	85%

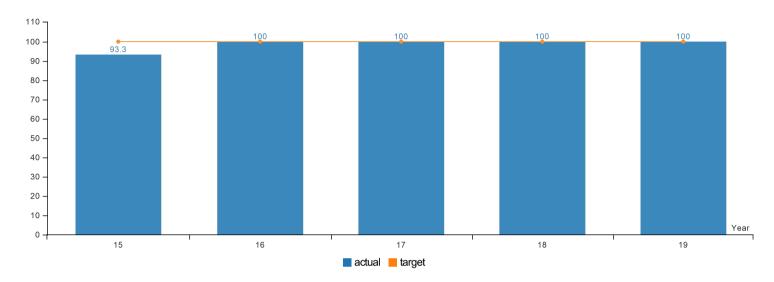
For FY 2019 we achieved 4 out of 6 of these metrics. The overall response is positive and we will continue to encourage people to submit feedback and we do review the comments received, to assess the feedback received.

Factors Affecting Results

People choose to respond to surveys and we will continue to promote the survey and encourage feedback.

KPM #5	Board Best Practices - Percent of total best practices met by the Board.
	Data Collection Period: Jul 01 - Jun 30

^{*} Upward Trend = positive result



Report Year	2015	2016	2017	2018	2019	
Compliance with Best Practices Performance Measurement						
Actual	93.30%	100%	100%	100%	100%	
Target	100%	100%	100%	100%	100%	

How Are We Doing

For FY 2019 we acheived this goal. The Board is in 100% compliance with Best Practices Performance Measurements for Governing Boards and Commission.

Factors Affecting Results

The Board Members are engaged and dedicated to their responsibilities, duties and obligations serving Oregon in their capacity. The Board reviewed the Board Best Practices at its August 23, 2019 Board meeting.

Best Practices Self-Assessment

Annually, Board members are to self-evaluate their adherence to a set of best practices and report the percent total best practices met by the Board (percent of yes responses in the table below) in the Annual Performance Progress Report as specified in the agency Budget instructions.

Best Practices Assessment Score Card

Best Practices Criteria	Yes	No
Executive Director's performance expectations are current.	✓	
2. Executive Director receives annual performance feedback.	✓	
3. The agency's mission and high-level goals are current and applicable.	✓	
4. The Board reviews the Annual Performance Progress Report.	✓	
5. The Board is appropriately involved in review of agency's key communications.	√	
6. The Board is appropriately involved in policy-making activities.	✓	
7. The agency's policy option budget packages are aligned with their mission and goals.	✓	
8. The Board reviews all proposed budgets.	√	
9. The Board periodically reviews key financial information and audit findings.	√	
10. The Board is appropriately accounting for resources.	✓	
11. The agency adheres to accounting rules and other relevant financial controls.	✓	
12. Board members act in accordance with their roles as public representatives.	✓	
13. The Board coordinates with others where responsibilities and interest overlap.	✓	
14. The Board members identify and attend appropriate training sessions.	√	
15. The Board reviews its management practices to ensure best practices are utilized.	√	
Total Number	15	
Percentage of total:	100%	6

At the August 23, 2019 Board Meeting, the Board reviewed the best practices self-assessment documents and unanimously agreed that all Best Practices were met.