

## TEXAS STATE BOARD OF PODIATRIC MEDICAL EXAMINERS

PHYSICAL ADDRESS: 333 GUADALUPE, TOWER II, SUITE 320, AUSTIN, TEXAS 78701

MAILING ADDRESS: P.O. BOX 12216, AUSTIN, TEXAS 78711

NATIONAL TOLL FREE COMPLAINT HOTLINE: 1.800.821.3205

VOICE: 512.305.7000 FAX: 512.305.7003

<http://www.foot.state.tx.us>



*"Ensuring Quality Podiatric Medicine For The Citizens Of Texas"*

# FY 2007- FY 2011 AGENCY STRATEGIC PLAN

*Published by the Texas State Board of Podiatric Medical Examiners*

*For the:*

*State of Texas*

*Governor's Office of Budget, Planning and Policy*

*Legislative Budget Board*

*(Pursuant to Texas Government Code Chapter 2056)*

# AGENCY STRATEGIC PLAN

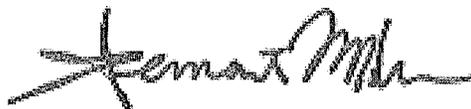
FOR THE FISCAL YEARS 2007-2011

BY

TEXAS STATE BOARD OF PODIATRIC MEDICAL EXAMINERS

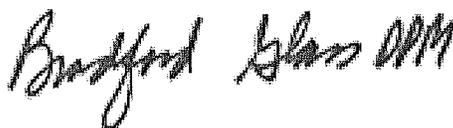
| <u>BOARD MEMBER</u>    | <u>DATES OF TERM</u> | <u>HOMETOWN</u>   |
|------------------------|----------------------|-------------------|
| Bradford W. Glass, DPM | 1999-2005            | Midland, TX       |
| Sandra E. Cuellar, DPM | 1999-2005            | Dallas, TX        |
| Doris A. Couch         | 2003-2005            | Burleson, TX      |
| Bruce A. Scudday, DPM  | 2002-2007            | El Paso, TX       |
| D. Matt Lynch, DPM     | 2002-2007            | Troy, TX          |
| Carol Roberts-Baker    | 2002-2007            | Houston, TX       |
| Paul Kinberg, DPM      | 2003-2009            | Dallas, TX        |
| Richard C. Adam, DPM   | 2003-2009            | San Antonio, TX   |
| Matthew Washington     | 2003-2009            | Missouri City, TX |

DATE OF SUBMISSION: JUNE 23, 2006



SIGNED: \_\_\_\_\_

Hemant Makan  
Executive Director



APPROVED: \_\_\_\_\_

Bradford W. Glass, DPM  
Board President

# TABLE OF CONTENTS

## Statewide Elements

|  |   |
|--|---|
| Statewide Vision.....                        | 1 |
| Statewide Mission.....                       | 2 |
| Statewide Philosophy.....                    | 2 |
| Relevant Statewide Goals and Benchmarks..... | 4 |

## Agency Elements

|                        |   |
|------------------------|---|
| Agency Mission.....    | 6 |
| Agency Philosophy..... | 7 |

## External/Internal Assessments

|  |    |
|--|----|
| Agency History and Overview.....                       | 8  |
| Organization & Internal Strengths & Weaknesses.....    | 11 |
| Fiscal Aspects.....                                    | 12 |
| Significant External Trends, Threats and Opportunities |    |
| The Profession.....                                    | 13 |
| Strengths.....   | 13 |
| Threats.....   | 13 |
| The Opportunity.....                                   | 15 |

|  |    |
|--|----|
| <u>Agency Goals</u> (Includes “H.U.B.” Goal) ..... | 17 |
|--|----|

|  |    |
|--|----|
| <u>Objectives and Outcome Measures</u> ..... | 18 |
|--|----|

## Strategies; Efficiency/Explanatory/Output Measures

|                                 |         |
|---------------------------------|---------|
| Strategies.....                 | 19 - 21 |
| Efficiency Measures.....        | 19      |
| Explanatory/Input Measures..... | 20      |
| Output Measures.....            | 20      |

|                                  |    |
|----------------------------------|----|
| <u>Agency Action Plans</u> ..... | 22 |
|----------------------------------|----|

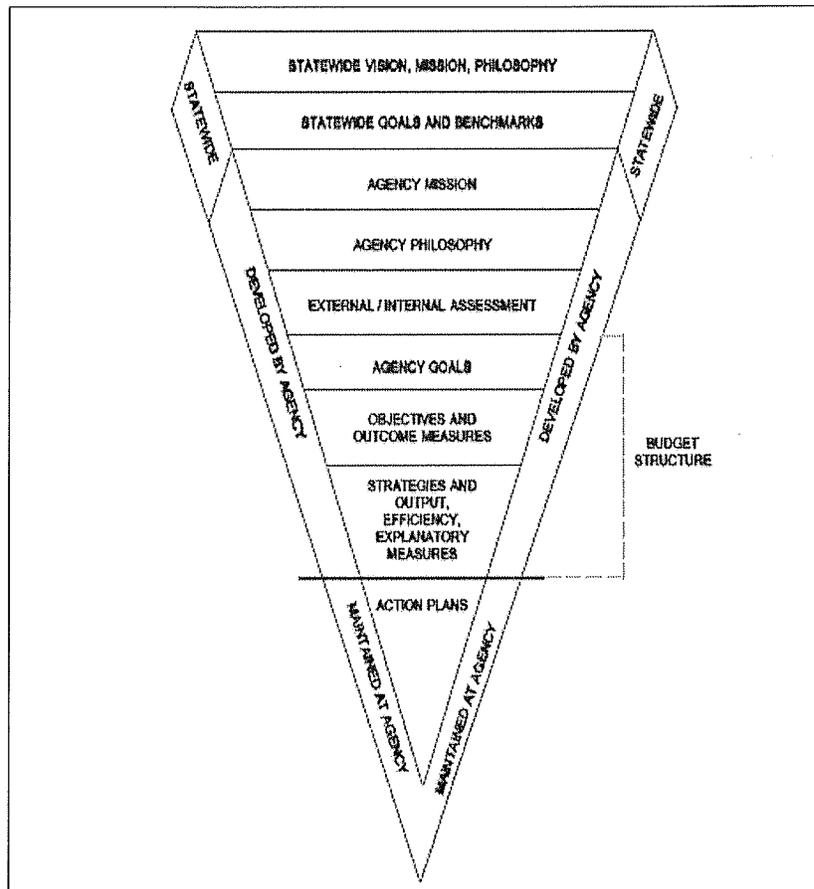
## Appendices

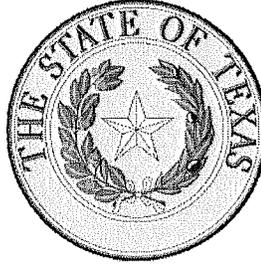
|   |    |
|---|----|
| • Appendix A – Agency’s Planning Process.....                   | 23 |
| • Appendix B – Current Organizational Chart.....                | 24 |
| • Appendix C – Five Year Projections for Outcomes.....          | 25 |
| • Appendix D – Performance Measure Definitions.....             | 26 |
| • Appendix E – Workforce Plan.....                              | 40 |
| • Appendix F – Survey of Organizational Excellence Results..... | 46 |
| • Appendix G – Information Resources Strategic Plan.....        | 48 |
| • Appendix H – Statewide Capital Planning.....                  | 55 |

## Public Explanation: What is a “Strategic Plan”?

Responsive in part to Texas Government Code Chapter 2056 (principal statute), “Strategic Planning” is a long-term, iterative, and future-oriented process of assessment, goal setting, and decision making that maps an explicit path between the present and a vision of the future. It includes a multiyear view of objectives and strategies for the accomplishment of agency goals. Clearly defined outcomes and outputs provide feedback that leads to program performance that influences future planning, resource allocation, and operating decisions. The “Strategic Planning” process incorporates and sets direction for all agency operations.

A “Strategic Plan” is a formal document (with a minimum “9 Tiers”) that communicates an agency’s goals, directions, and outcomes to various audiences, including the Governor and the Legislature, client and constituency groups, the general public, and the agency’s employees.





## **TIER I: "STATEWIDE VISION, MISSION and PHILOSOPHY OF TEXAS GOVERNMENT"**

### **GOVERNOR'S VISION**

March 2006

Fellow Public Servants:

The old adage remains true: If you fail to plan, you plan to fail. We must plan for prosperity. Strategic planning is critical to ensuring a future of opportunity and prosperity. We must always be willing to critically reexamine the role of Texas State Government and the efficiency of its operations. This document specifies our mission and priorities, reflects my philosophy of limited government and my belief in personal responsibility, and it is to be used as your agencies prepare their Strategic Plans. While the role of government must remain limited, governmental endeavors must be done with maximum efficiency and fairness. Our endeavors must always have an eye first for the needs of our clients – the people of Texas.

Throughout the strategic planning process and the next legislative session, policymakers will endeavor to address our state's priorities and agencies will be asked to provide great detail about their operations. I encourage you to provide not only open and complete information but also your innovative ideas about how to better deliver government services.

Working together, I know we can accomplish our mission and address the priorities of the people of Texas. My administration is dedicated to creating greater opportunity and prosperity for our citizens, and to accomplish that mission, I am focused on the following critical priorities:

*Assuring open access to an educational system that not only guarantees the basic core knowledge necessary for productive citizens but also emphasizes excellence and accountability in all academic and intellectual undertakings;*

*Creating and retaining job opportunities and building a stronger economy that will lead to more prosperity for our people and a stable source of funding for core priorities;*

*Protecting and preserving the health, safety and well-being of our citizens by ensuring healthcare is accessible and affordable, and by safeguarding our neighborhoods and communities from those who intend us harm; and*

*Providing disciplined, principled government that invests public funds wisely and efficiently.*

I appreciate your commitment to excellence in public service.

Rick Perry  
Governor of Texas

## **MISSION**

TEXAS STATE GOVERNMENT MUST BE LIMITED, EFFICIENT, AND COMPLETELY ACCOUNTABLE. IT SHOULD FOSTER OPPORTUNITY AND ECONOMIC PROSPERITY, FOCUS ON CRITICAL PRIORITIES, AND SUPPORT THE CREATION OF STRONG FAMILY ENVIRONMENTS FOR OUR CHILDREN. THE STEWARDS OF THE PUBLIC TRUST MUST BE MEN AND WOMEN WHO ADMINISTER STATE GOVERNMENT IN A FAIR, JUST, AND RESPONSIBLE MANNER. TO HONOR THE PUBLIC TRUST, STATE OFFICIALS MUST SEEK NEW AND INNOVATIVE WAYS TO MEET STATE GOVERNMENT PRIORITIES IN A FISCALLY RESPONSIBLE MANNER.

***“AIM HIGH...WE ARE NOT HERE TO ACHIEVE INCONSEQUENTIAL THINGS!”***

## **PHILOSOPHY**

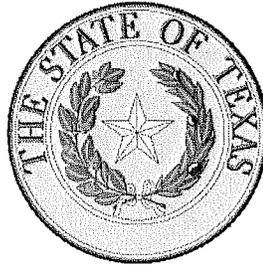
The task before all state public servants is to govern in a manner worthy of this great state. We are a great enterprise, and as an enterprise we will promote the following core principles:

- First and foremost, Texas matters most. This is the overarching, guiding principle by which we will make decisions. Our state, and its future, is more important than party, politics, or individual recognition.
- Government should be limited in size and mission, but it must be highly effective in performing the tasks it undertakes.
- Decisions affecting individual Texans, in most instances, are best made by those individuals, their families, and the local government closest to their communities.
- Competition is the greatest incentive for achievement and excellence. It inspires ingenuity and requires individuals to set their sights high. And just as competition inspires excellence, a sense of personal responsibility drives individual citizens to do more for their future and the future of those they love.
- Public administration must be open and honest, pursuing the high road rather than the expedient course. We must be accountable to taxpayers for our actions.

- State government has a responsibility to safeguard taxpayer dollars by eliminating waste and abuse, and providing efficient and honest government.

Finally, state government should be humble, recognizing that all its power and authority is granted to it by the people of Texas, and those who make decisions wielding the power of the state should exercise their authority cautiously and fairly.

***“PATHWAY TO PROSPERITY: THE STATEWIDE STRATEGIC  
PLANNING ELEMENTS FOR TEXAS STATE GOVERNMENT”***



## **TIER II: “RELEVANT STATEWIDE GOALS AND BENCHMARKS”**

- **EDUCATION – PUBLIC SCHOOLS** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **EDUCATION – HIGHER EDUCATION** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **HEALTH AND HUMAN SERVICES** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **ECONOMIC DEVELOPMENT** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **PUBLIC SAFETY AND CRIMINAL JUSTICE** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **NATURAL RESOURCES AND AGRICULTURE** (Not Applicable to T.S.B.P.M.E. Core Mission)
- **REGULATORY**

***Priority Goal:*** To ensure Texans are effectively and efficiently served by high-quality professionals and businesses through: A) Implementing clear standards; B) Ensuring compliance; C) Establishing market-based solutions and D) Reducing the regulatory burden on people and business.

***Benchmarks:*** A) Percent of state professional licensee population with no documented violations.

B) Percent of new professional licensees as compared to the existing population

C) Percent of documented complaints to professional licensing agencies resolved within six months.

D) Percent of individuals given a test for professional licensure who received a passing score.

E) Percent of new and renewed professional licenses issued via Internet.

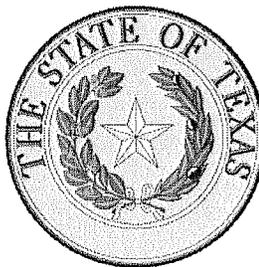
F) Percent increase in utilization of the state business portal

## **GENERAL GOVERNMENT**

***Priority Goal:*** To provide citizens with greater access to government services while reducing service delivery costs and protecting the fiscal resources for current and future taxpayers by: A) Supporting effective, efficient, and accountable state government operations; B) Ensuring the state's bonds attain the highest possible bond rating and C) Conservatively managing the states debt.

***Benchmarks:*** A) Number of state services accessible by Internet  
B) Savings realized in state spending by making reports / documents / processes available on the Internet

***“PATHWAY TO PROSPERITY: THE STATEWIDE STRATEGIC PLANNING ELEMENTS FOR TEXAS STATE GOVERNMENT”***



### **TIER III: "AGENCY MISSION"**

The mission of the Texas State Board of Podiatric Medical Examiners is to assure quality "Podiatric Medical Care" for the citizens of the State of Texas. The Board fulfills its mission through the regulation of the practice of "Podiatric Medicine." This mission, derived from the Podiatric Medical Practice Act (Texas Occupations Code Chapter 202) and the Board Rules (Title 22, Part 18, Texas Administrative Code), supersedes the interest of any individual, the podiatric medical profession, or any special interest group. Podiatric Medicine is an important, unique and integral part of any patient's overall health as problems involving the Foot & Ankle affect the functions of the entire human body. Although the Board's principal enforcement statute is Texas Occupations Code Chapter 202, the Board also investigates and enforces provisions related to Texas Occupations Code Chapter 53, the Texas Penal Code, the Texas Health & Safety Code, the Texas Government Code and other provisions related to Federal Mandates (Social Security Act; Medicare; Medicaid); other state statutes. If a matter involves a Podiatrist or the practice of Podiatric Medicine, then the Board has a jurisdictional responsibility to regulate (spirit of Governor Perry's July 2004 Executive Order "RP-36").

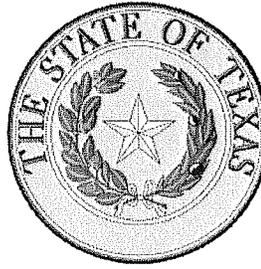
#### **What is a Podiatrist's scope of practice in Texas?**

A Podiatrist's scope of practice in Texas is defined, at least, in three parts:

First, Section 202.001(4) of the Texas Occupations Code (Statute) states: "Podiatry" means the treatment of or offer to treat any disease, disorder, physical injury, deformity, or ailment of the human foot by any system or method. The term includes podiatric medicine.

Second, Section 375.1(2) of the Texas Administrative Code, Title 22, Part 18 (Rules) states: "Foot"--The foot is the tibia and fibula in their articulation with the talus, and all bones to the toes, inclusive of all soft tissues (muscles, nerves, vascular structures, tendons, ligaments and any other anatomical structures) that insert into the tibia and fibula in their articulation with the talus and all bones to the toes.

Third, in accordance with Texas Health & Safety Code Subchapter E relating to Medical Staff Membership & Privileges (§241.101 et al): Procedures to treat the foot/ankle by a Podiatrist at the hospital/surgical facility level is within the scope of practice for Podiatric Medicine in the State of Texas (by "any system or method") as long as the Podiatrist is qualified and credentialed to do so and has hospital/surgical privileges for the same, for performance of the procedure at the hospital/surgical level as cleared by medical staff.

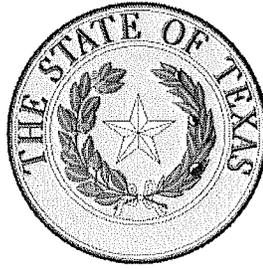


## **TIER IV: "AGENCY PHILOSOPHY"**

The Texas State Board of Podiatric Medical Examiners is the state agency entrusted with the responsibility of licensing Podiatric Physicians and regulating Podiatric Medicine in Texas. This goal is accomplished by means of a fair, aggressive and comprehensive testing, licensing and enforcement program that guarantees that only qualified professionals are granted licensure and can practice Podiatric Medicine in Texas. We are a small state agency, headed by an Executive Director, who reports to a nine-member Board. The Board is composed of six Podiatric Physicians and three Consumer Members. Each of the Board Members are appointed to the Board by the Governor of Texas and confirmed by the Texas Senate for a term of six-years.

We affirm that regulation is a public and private trust. We strive to regulate aggressively but fairly, minimally but effectively. Consumers, professionals and the public alike can be assured of a balanced and sensible approach to regulation; an approach that demands the highest standards of professional conduct and personal ethics, an approach that ensures equal opportunity for all employees and licensees, balances the rightful concern of society with the rights of individuals, and is open, honest, accountable, responsive and mindful of the efficient use of licensee fees.

We ensure that our licensees maintain the highest standards of professional conduct and expertise, so that consumers receive the best possible medical care at the best possible price, and so that Podiatric Physicians can be assured among themselves that they are members of a community of health care providers respected and trusted by the citizens of Texas. Our philosophy focuses on promulgating clear and comprehensive rules that can be understood and followed without ambiguity by our licensees, and on the vigorous enforcement of our Rules and Statute.



## **TIER V: "EXTERNAL / INTERNAL ASSESSMENTS"**

### **I. AGENCY HISTORY & OVERVIEW**

Though there is little recorded early history of the Podiatrist (from Greek *podos*, "foot" and *iatros*, "doctor") in Texas, early doctors in the area doubtlessly treated feet. Before the modern specialty developed, foot practitioners were called Chiropodists (from Greek *chiros*, "hand" + *podos*) because they treated both feet and hands. Abraham Lincoln had his own Chiropodist.

Official recognition of Podiatric Medicine as a profession in the United States began with the first regulation of its practice by the State of New York in 1895. At that time, there were only a few colleges teaching Podiatric Medicine. None of these colleges were located in Texas. On October 22, 1917, those who had set up practice in Texas had their earliest recorded meeting, in a room donated by the Dallas Chamber of Commerce. They called the group the Texas Chiropodist Society. The second annual meeting of the Texas Chiropodist Society was held at the Rice Hotel in Houston on October 7-8, 1918, when the prime concern of the members was to introduce a bill in the next legislative session to provide for a state law to regulate the practice of Chiropody.

On March 5, 1919, the Texas Legislature first considered laws to regulate the practice of Chiropody. At that time, twenty states and the District of Columbia had enacted laws regulating the practice of Chiropody. This legislative initiative failed. In 1921, a second attempt was made by the Legislature, which was also defeated. Two years later, in 1923, legislation was passed (H.B. 487 of the 38<sup>th</sup> Texas Legislature), creating a Chiropody Regulatory Board under the jurisdiction of the State Board of Medical Examiners. The Board comprised of licensed Physicians and Chiropodists who would, in turn, license/regulate other Chiropodists in Texas. This legislation also established rules to regulate the practice of Chiropody and license Chiropodists. In 1939, legislation was passed establishing an independent Board, which was named the *Texas State Board of Chiropody Examiners*. Its Board Members were all licensed Chiropodists appointed by then Governor W. Lee ("Pappy") O'Daniel.

In 1950, an Attorney General's ruling stated that a Chiropodist was a Physician within the meaning of the Narcotic Drug Law. The Chiropody Practice Act, amended in 1951, defined a Chiropodist as "anyone who treats or offers to treat any disease, physical injury or deformity or ailment of the human foot by any system or method." In 1985, Senate Bill 655 broadened the definition of "Medical Staff" to include qualified podiatrists on hospital staffs. Also in 1950, two additional years (sixty hours) of undergraduate college credit were added to the admission requirements for Podiatric Medical Colleges, which then as now, provide a four-year course of study (one-hundred twenty hours).

In 1967, the name was changed to the Texas State Board of Podiatry Examiners (60<sup>th</sup> Leg., p. 181, Ch. 96, Art. 4567(a) V.T.C.S.), and in 1996, underwent an additional name change to its present form; the Texas State Board of Podiatric Medical Examiners.

In 1978, during the 66<sup>th</sup> Legislature, the undergraduate requirements for examination eligibility were increased from a minimum of sixty (60) hours to a minimum of ninety (90) hours of Board approved studies.

In 1981, the Board's office was moved from Waco to Austin. In 1995, by order of the 74<sup>th</sup> Legislature, the Board's Office was moved to the William P. Hobby Building in downtown Austin and co-located with the twelve other health profession licensing and regulatory agencies that comprise the Texas Health Professions Council. Another important change occurring during the 74<sup>th</sup> Legislative Session was the Board's change of name to the Texas State Board of Podiatric Medical Examiners.

Podiatrists perform full treatments of the human feet and ankles through such modalities including full prescriptive authority, performance of hyperbaric oxygen therapy and relative anesthesia in office, clinical, hospital and surgical settings. There are 8 nationally accredited Colleges of Podiatric Medicine in the United States who follow standardized models of education and training set forth by the American Podiatric Medical Association (APMA), the state component of which is the Texas Podiatric Medical Association (TPMA), and the national Council on Podiatric Medical Education (CPME).

Operations of the Board are supported entirely by annual fees collected by the Board from each licensee. The function of the "Board" (TSBPME) is to: **1) Protect the citizens of Texas; 2) License Podiatric Physicians; 3) Perform an annual renewal of all Podiatric Physicians; 4) Register non-certified Podiatric Radiological Technicians; 5) Enforce the Podiatric Medical Practice Act of Texas (principal law: Texas Occupations Code Chapter 202); 6) Enforce Board rules (Title 22, Part 18, Texas Administrative Code) and 7) Enforce other applicable state statutes.**

In 1996, the Board implemented major changes in its examination of candidates for licensure in Texas. This was accomplished by creating and implementing a state-of-the-art criterion-referenced examination and by increasing the requirements that would allow a candidate to sit for the Board's licensing exam. This change mandated that the candidate must have:

- Successfully graduated from a four (4) year college,
- Graduated from an approved College of Podiatric Medicine,
- Successfully completed Part I and Part II of the National Podiatric Medical Boards,
- Successfully completed the PMLexis (National Podiatric Medical Licensing Examination for States; National Boards Part III) Examination, and
- Successfully completed an approved one (1) year podiatric residency program.

In 2001, the 77<sup>th</sup> Legislature granted the Board one (1) additional full-time employee, an Administrative Technician II, to assist with the clerical aspects of our complaint investigations. The addition of this employee brought our agency to five (5) full time employees. Unfortunately in 2003, due to a State mandated 19% budget cut, the Board was forced to execute a reduction in force from five (5) to four (4) full time employees for cost savings.

Changes made by the National Board of Podiatric Medical Examiners has moved the old PMLexis Examination into the existing National Board Examination as Part III of its now three parts. Candidates for licensure in Texas must now pass National Boards Parts I, II and III as a prerequisite for qualifying to sit for our new jurisprudence licensing examination.

In 2002, the Board approved a change in its licensing examination process, moving our licensing examination from its old oral/practical format to its new form, a written jurisprudence examination. This new examination format was rolled out and utilized for the first time on July 19, 2002. The Board's jurisprudence examination is independently validated by the University of Texas – ITS Department in accordance with Texas Occupations Code §202.254(c).

On November 7, 2002, the Texas Orthopaedic Association (TOA), the Texas Medical Association (TMA) and Andrew Kant, MD filed a lawsuit against the Texas State Board of Podiatric Medical Examiners (TSBPME) regarding the Podiatric scope of practice, which remains in litigation (Cause No.GN-204022; Travis County) at the 3<sup>rd</sup> Court of Appeals in Austin, TX.

Again, in 2003, the Legislature took drastic measures in budget cuts, which resulted in this agency's loss of a valued employee, thereby reducing our staff to four (4) full time employees.

The year of 2004 brought about the statutorily required review of the Texas State Board of Podiatric Medical Examiners by the Sunset Advisory Commission. During the 79<sup>th</sup> Legislative Session in 2005, the TSBPME "passed" Sunset and was continued in existence for another 12 years to the year 2017. A new Sunset provision is that the Governor can now appoint the "Board President" and the Board will continue to elect a Vice President and Secretary. There were updates to our rules on the "Consequences of Criminal Convictions" mandated primarily by Texas Occupations Code Chapter 53 ("law"). If an arrest or conviction is related to the practice of podiatry, the Board will initiate an investigation. The Board also conducts quarterly "D.P.S. and F.B.I. Criminal History Checks" (CCH) and further "Criminal Investigations" as warranted by those checks. Sunset mandates that a "Public Member" of the Board be involved at all of our informal hearings. In addition, Sunset gave the Board authority to order "Refunds" to patients or insurance companies for fraudulent billing. Ordering a "Refund" is limited to the actual monetary loss involved, not restitution for any other reason (i.e. pain and suffering). The Board was also given authority to issue an "Emergency Temporary Suspension" of a license to practice podiatry.

The Board's "Administrative Penalties" increased from \$2,500.00 to \$5,000.00 per day, per violation. Those are based on a new "Penalty Matrix/Schedule" used to gauge the severity of violations and which will dictate Board actions. We have the authority to issue "Cease & Desist Orders" for the unlicensed practice of podiatric medicine. The Board can also conduct "Unannounced Office Inspections" on any licensee for the "Monitoring and Inspection of a License Holder." As noted above, requisite rules to implement Sunset changes were adopted at a Board meeting on February 6, 2006 (in advance of the March 1, 2006 deadline) and have been submitted to the S.OS. (Secretary of State) in advance of the July 6, 2006 deadline for final publication in the Texas Register. All these rules become effective 20-days after their publication. All other Sunset changes can be found within Senate Bill 402; acts of the 79<sup>th</sup> Legislature.

In Executive Session, during the April 5, 2004 Board Meeting, administrative and management changes were made which resulted in the resignation of the Executive Director. The Board saw another transition in the Executive Director position in September 2005 after which the Board's Investigator V of six (6) years was hired to resume executive functions. Current Board Staff have an invaluable combined 29 years of institutional knowledge of the Board's functions.

From its inception eighty-three years ago through the present, it has been and remains this Board's goal to succeed in its mission of assuring quality Podiatric Medicine for the people of Texas. It is this goal that guides both our day-to-day activity and long-range planning as we proudly do our part to make Texas into a beacon state.

## **II. ORGANIZATION & INTERNAL STRENGTHS & WEAKNESSES**

The Texas State Board of Podiatric Medical Examiners is composed of nine (9) Members appointed by the Governor, with the advice and consent of the Senate, for staggered six (6) year terms. The Board is comprised of six (6) Podiatric Physicians and three (3) Consumer Members. The Board employs an Executive Director who oversees and manages the agency. The agency has a total of four (4) employees: the Executive Director (exempt), a Staff Services Officer V (classified), an Administrative Assistant II (classified) and an Investigator III (classified). The employee turnover rate for last year was 25%.

The agency has no field offices. Its headquarters are located in the William P. Hobby Building, 333 Guadalupe Tower II, Suite 320, Austin, TX, 78701. The agency's main voice line is 512-305-7000. The facsimile line is 512-305-7003. The agency also maintains a national toll free complaint hotline number, 1-800-821-3205. The agency's website is located at <http://www.foot.state.tx.us>.

The agency works in conjunction with the Comptroller's Office (CPA), the Governor's Office of Budget, Planning and Policy (GOBPP) and the Legislative Budget Board (LBB) regarding its budget and funding. It also interacts with local, county, state and national Podiatric Medical associations, the Texas Legislature, the Texas Health Professions Council, local, state and national hospitals and clinics, medical licensing agencies, medical professional associations and health care entities, various municipal, county, state and federal law enforcement agencies such as the Texas Department of Public Safety, the Federal Bureau of Investigation, the United States Drug Enforcement Administration, the United States Postal Service – Office of Inspector General and the United States Department of Health and Human Services – Office of Inspector General.

The Board has restructured its complaint investigation process to minimize the involvement of Board Members in this process and expedite the review of medical and standard of care issues. We have initially trained twenty-one (21) Podiatric Physicians as "Podiatric Medical Reviewers" (PMR's) since January 2002. They act as medical experts and review the medical and standard of care issues in our complaint investigations. After reviewing all of the issues, the PMR generates a complex report, documenting the decisions made; that then becomes a part of our agency investigative complaint case folder. Based on the PMR's determination(s), the complaint case may be closed or moved on for further negotiation during Informal Consent Hearings, or moved on formally to the State Office of Administrative Hearings (SOAH) and the PMR acts as the agency's "expert witness". These reviewers are paid a total of twenty dollars (\$20.00) for each medical review they complete,

making this a most cost-effective way to facilitate the necessary medical review of our complaint cases. One PMR has consistently shown a strong interest and dedication to this process. Therefore, under the guidance of Legal Counsel, we have secured Investigator status for him and contracting on a per-case basis as an additional Investigator. It is our belief that this process alone will greatly expedite the investigation and resolution of complaints. This "Investigator" contract was executed in accordance with Texas Occupations Code §202.204.

As a result of several lawsuits relating to oral/practical medical licensing examination issues in other similar states, it was the recommendation of our statutorily mandated Examination Testing Consultant and the Attorney General's Office that we move our licensing examination from an oral/practical format to a written jurisprudence examination. The Board officially implemented the written jurisprudence examination effective as of March 2002. The first of the new written jurisprudence examinations was administered on July 19, 2002. This format is more dependable (eliminates the potential for "human error") and is more legally defensible than the old oral format. It also allows us to offer our licensing examination three (3) times a year. This new format also has the benefit of allowing examination candidates to experience less "down time" while waiting to take the exam, which if passed, will qualify them more quickly for licensure to practice Podiatric Medicine in Texas.

### **III. FISCAL ASPECTS**

The Texas State Board of Podiatric Medical Examiners is self-supporting, being funded solely through fees assessed on its licensees and receiving no funds from General Revenue or tax revenues from the people of Texas. The agency's fiscal year 2006 total operating budget was \$217,352.00, of which \$52,262.00 is "Operating Costs". As per the current General Appropriations Act, this agency is required to transfer funds through interagency contract, in the amount of \$4,591.00 dollars to the Texas Health Professions Council, (H.P.C.). This amount is our prorated share of H.P.C.'s operating budget.

This agency currently contracts with the State Office of Risk Management (SORM) for risk management services and workman's compensation insurance coverage for its employees, in compliance with Texas Labor Code Chapter 412 and Chapter 501. This fee is paid out of appropriated funds on an annual basis and is calculated on our annual payroll.

This agency also participates in the Texas On-line project in accordance with §2054.252 of the Government Code. The fees for this service, which are estimated to be about \$4,130.00, are collected from renewing licensees and transferred to the contracted vendor.

The Office of Patient Protection Program (OPP), formed under House Bill 2985 (78<sup>th</sup> Legislative Session), mandated the compliance of all health licensing agencies. The fees for this project, estimated to be about \$1,000, are collected by the respective health licensing agencies and transferred to the OPP. However, by acts of the 79<sup>th</sup> Legislature in 2005, the OPP was not funded to remain in existence. Nevertheless, the Board is still mandated to collect OPP fees that are transferred to the State's General Revenue Fund.

This agency generates its own funds exclusively through licensing fees assessed to its licensees. As a result of budget cuts, the lawsuit expense and prior unemployment compensation expense, the funds appropriated to us were not adequate to maintain self-

sufficiency. Therefore, for the fiscal year 2003, an emergency loan of \$16,500 was granted. It was repaid in fiscal year 2004 with no further outside legal costs identified due to the Office of the Attorney General – General Litigation Division representation beginning in December 2004.

#### **IV. SIGNIFICANT EXTERNAL TRENDS, THREATS AND OPPORTUNITIES**

**The Profession:** The demand for Podiatric Medical expertise in Texas, as elsewhere in this country, is on the rise as the “Baby-Boomer” population ages and moves further toward retirement age. These “Baby-Boomers” as well as the general public of all age groups are increasingly seeking out the expertise of the specialty of Podiatric Medicine to satisfy their pain management and medical needs. The population of Texas is projected to increase by about 70% from 22.4 million to 31.2 million people by the year 2030. This will substantially increase the demand for quality Podiatric Medicine in Texas during the next three decades.

Podiatric Medicine has advanced dramatically in the last decade with many new, innovative modalities available for the treatment of sports and work related injuries, as well as diabetic wound care, vascular disease and medical case management. There has been a constant increase in Podiatric Medical activity in Texas hospitals and surgery centers as more and more people experience the positive impact that today’s Podiatric Medicine is having. One of the great success stories is in the treatment of diabetic wound care. Use of new Podiatric Medical Skills in conjunction with hyperbaric oxygen therapy has allowed many diabetic patients to postpone or totally avoid what would otherwise have resulted in a limb amputation. Saving or extending the viability of a patient’s foot or leg has an obvious impact of enormous proportion on the patient’s quality of life.

Other advances in Podiatric Medical Care are in part due to many breakthroughs in such other modalities as micro and laparoscopic surgery.

**Strengths:** The agency is comprised of a dedicated, knowledgeable, experienced and efficient group of employees who possess the ability and skills to efficiently and effectively accomplish the tasks set before them. They also manage the ever increasing number of responsibilities assigned to them and complete numerous reports, comply with various mandates assigned or delegated to them by the Board, the Legislature and various local, state and federal entities.

The Board stands above all undue influence from the Podiatric community and guards carefully its autonomy from professional associations, which, at the same time, sensing the presence and responding to the needs of the community that it serves and regulates. Podiatric Physicians have traditionally been concerned that the Board vigorously prosecutes those practitioners who are found to be in violation of the Board’s Statute and/or Rules. It therefore follows that Texas Podiatric Physicians have the expectation and the right to expect that alleged transgressors of their Statute and Rules will be effectively, efficiently and fairly investigated and that those subsequently found in violation will be sternly disciplined.

**Threats:** The TSBPME is operating in a time of rising costs, unfunded mandates and ever-increasing responsibilities while at the same time, experiencing a shrinking operating budget. Our current operating budget is approximately \$52,262.00 for each year of the biennium. The agency has been successful in meeting the day-to-day expenses including paper, postage, local and long distance telephone service, facsimile lines, computer hardware and software,

consultant contracts, training and agency travel. However, it has become difficult to absorb the spiraling costs without some budget increase, which would also allow for employee merit raises.

To add further damage to this agency's operations, in advance of the 80<sup>th</sup> Legislative Session in 2007, the State has mandated a 10% budget cut on top of a prior 19% budget cut required in the year 2003. State agencies have faced an overly challenging budget reduction of nearly 30% in the past 4 years alone!

Listed below are the issues facing the TSBPME:

- On-going legal expenses incurred since November 2002 in an attempt to resolve the lawsuit filed by the Texas Orthopaedic Association & Andrew Kant vs. TSBPME, Cause No GN204022, Travis County District Court were resolved in December 2004 when the Office of the Attorney General – General Litigation Division began defense of the Board. A positive outcome of this case is essential to protect the citizens of Texas and the Podiatrists in their scope of practice. This matter remains pending for an opinion of which oral arguments were heard before the 3<sup>rd</sup> Court of Appeals (Austin, TX) on April 26, 2006.
- Our agency desperately needs to upgrade our current Investigator III position by giving it “PEACE OFFICER / LAW ENFORCEMENT” status (commission), to support the type and nature of criminal investigations being conducted on a routine basis by the Texas State Board of Podiatric Medical Examiners, and to ensure that the public health, safety and welfare is not compromised. “PEACE OFFICER / LAW ENFORCEMENT” status would also allow the Board to meet all its new Sunset mandates in a more efficient manner by the expedient access to confidential criminal information. The Board's Executive Director also investigates complaints and is a licensed Peace Officer through the Texas Commission on Law Enforcement Officer Standards and Education. However, the Board is unable to “commission” his license to fully execute criminal investigations in accordance with the Texas Code of Criminal Procedure (CCP); spirit of Texas Occupations Code Chapter 202 (principal) and Governor Perry's July 2004 Executive Order “RP-36.”
- Funding for employee merit raises are needed for the Staff Services Officer V, the Investigator III (currently vacant) and the Administrative Assistant II (currently vacant), who should be reclassified to an Administrative Assistant III.
- We desperately need to fill the current vacant positions to return to a 100% workforce.
- By an appropriation request letter to the LBB and GOBPP dated August 29, 2005, the TSBPME continues to seek an option to request a “Budget Execution” so that the Texas State Board of Podiatric Medical Examiners can continue to conduct F.B.I. Fingerprint-Background Checks (through the Texas Department of Public Safety) on: 1) an applicant for a license, 2) the holder of a license and 3) upon request for determination of eligibility for a license from a person pursuant to the provisions

found within Texas Government Code Sections 411.087; 411.088; 411.122 (HB 660; 78<sup>th</sup> Regular Legislative Session) and within Texas Code of Criminal Procedure 60.061 to ensure that the citizens of Texas are protected from (potential) licensees who may have a criminal background.

This “Budget Execution” option request was made pursuant to the General Appropriations Act; Article IX, Sections 6.08(d) and 7.01(a)(4) for the FY 2006/2007 biennium.

Beginning in FY 2006, the Board has projected it will conduct 128 F.B.I. Fingerprint-Background Checks for each year of the biennium at a cost of \$39.00 each to be paid to the Texas Department of Public Safety. Therefore, we have requested a \$5,000.00 “Budget Execution” for each year of the biennium, for a total of \$10,000.00 to cover the D.P.S. fees.

At this juncture, we have already begun to conduct F.B.I. Fingerprint-Background Checks. After speaking with the LBB, we are now aware that the fees collected are to be deposited in General Revenue and payment made to D.P.S. from our current/forthcoming appropriations. The “Budget Execution” we seek will cover our costs for additional/continued checks for the upcoming biennium.

Again, the Legislature has asked us in the past if we were conducting these (F.B.I.) background checks. We informed them that we were getting the mechanism established. Now that it is established and we have rules in place, we can't accomplish what the Legislature wanted us to do without having it cost us money in the process. Any deviations from our current appropriations will have a negative impact on the remainder of our agency functions.

An authorized “Budget Execution” will ensure that the remainder of the Board’s functions are not hampered due to “unexpected” costs; an apparent oversight in not requesting the requisite appropriation authority during the 79<sup>th</sup> Regular Legislative Session. Since the aforementioned Texas Government Code references state that the Board is “entitled” to such F.B.I. information, there was an oversight in not understanding that the requisite appropriation authority did not follow as the term “shall” was not used. As of the date of submission of this “Strategic Plan” (June 23, 2006), the Board continues to await a decision from the LBB.

**The Opportunity:** The opportunity exists to strengthen our agency’s operating budget by increasing our appropriation with the desperately needed additional funds that are necessary to provide the level of regulation and service that we are committed to, that our licensees have a right to expect and that citizens of Texas demand. These funds already reside in revenue (licensing fees) that our agency collects as unappropriated funds. We will request that this appropriation increase come from these unappropriated funds.

Podiatric Physicians strive to ensure that the work done in the name of their profession is of the highest level. They and the people of Texas look to this agency as the principal instrument for achieving and maintaining that goal through effective regulation, fair and firm enforcement and constant vigilance.

For the remainder of FY 2006 and the next five-year period, this agency plans to take advantage of the new authority offered by the Sunset Advisory Commission during the 79<sup>th</sup> Legislature to enhance efforts to achieve our mission to suffice our goals, objectives and strategies.



## **TIER VI: "AGENCY GOALS"**

**GOAL 1** (From the agency's formal Budget Structure)

**SHORT NAME:** PROTECT TEXANS

**FULL NAME:** Protect Citizens of Texas from Incompetent and Unethical Podiatrists

**DESCRIPTION:** To protect the citizens of Texas from incompetent and unethical Podiatrists with a quality program of examination and licensure and swift, fair, and effective enforcement of statutes and rules.

---

**(RESULTANT H.U.B. GOAL:)**

Related to "Historically Underutilized Business Plan" responsive to Texas Government Code §2161.123; as executed with the use of agency funds appropriated to achieve "Goal 1." We will establish and implement policies governing purchasing and public works contracting that foster meaningful and substantive inclusion of Historically Underutilized Businesses (HUBs).

**Objective:**

To include historically underutilized businesses in at least 20 percent of the total value of contracts and subcontracts awarded annually by the agency in purchasing and public works contracting by fiscal year 2007.

**Outcome Measures:**

Percentage of total dollar value of purchasing and public works contracts and subcontracts awarded to HUBs

**Strategy:**

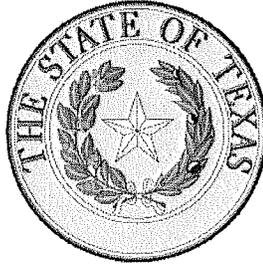
To award at least 20% of the dollar value of annual applicable agency contracts and purchases to Historically Underutilized Businesses, through purchasing contracts and subcontracts.

**Output Measures:**

Total number of HUB contractors and subcontractors contacted for bid proposals

Total number of HUBs (contract/subcontract awarded) from which agency made purchases.

Total annual dollar value of contracts and purchases with HUBs



## TIER VII: "AGENCY OBJECTIVES AND OUTCOME MEASURES"

### 1. Objective:

**SHORT NAME:** ENSURE COMPLIANCE

**FULL NAME:** Ensure 100 Percent Compliance Standards for Licensure and Practice

**DESCRIPTION:** Throughout each year of the Strategic Plan, ensure that 100 percent of licensees meet minimum compliance standards for licensure and practice, through 2011.

### 1. Outcome Measures (Sequence):

- 1) **SHORT NAME:** LICENSEES WITH NO VIOLATIONS  
**FULL NAME:** Percent of Licensees with No Recent Violations  
**DESCRIPTION:** Percent of Licensees with No Recent Violations
- 2) **SHORT NAME:** % COMPLAINTS RESULTING IN DISCIPLINE  
**FULL NAME:** Percent of Complaints Resulting in Disciplinary Action  
**DESCRIPTION:** Percent of Complaints Resulting in Disciplinary Action
- 3) **SHORT NAME:** RECIDIVISM RATE FOR DISCIPLINED  
**FULL NAME:** Recidivism Rate for Those Receiving Disciplinary Action  
**DESCRIPTION:** Recidivism Rate for Those Receiving Disciplinary Action
- 4) **SHORT NAME:** % COMPLAINTS RESOLVED WITHIN 6 MONTHS  
**FULL NAME:** Percent of Documented Complaints Resolved within Six Months  
**DESCRIPTION:** Percent of Documented Complaints Resolved within Six Months
- 5) **SHORT NAME:** % LICENSEES WHO RENEW ONLINE  
**FULL NAME:** Percent of Licensees Who Renew Online  
**DESCRIPTION:** Percent of Licensees Who Renew Online
- 6) **SHORT NAME:** % OF NEW INDIVIDUAL LICENSES ISSUED ONLINE  
**FULL NAME:** Percent of New Individual Licenses Issued Online  
**DESCRIPTION:** Percent of New Individual Licenses Issued Online



**TIER VIII: “AGENCY STRATEGY; EFFICIENCY,  
EXPLANATORY AND OUTPUT  
MEASURES”**

**1. Strategy:**

**SHORT NAME:** LICENSURE AND ENFORCEMENT

**FULL NAME:** Provide Exams and Continuing Education & Investigate Violations of Act

**DESCRIPTION:** Operate a system of: (1) Testing and examination of candidates for licensure; (2) Mandatory continuing medical education of licensees; and (3) Investigation and disciplinary hearings for alleged violations of the Texas Podiatric Medical Practice Act.

**Efficiency Measures**

- 1) **SHORT NAME:** AVG LICENSE COST/INDIVIDUAL  
**FULL NAME:** Average Licensing Cost Per Individual License Issued  
**DESCRIPTION:** Average Licensing Cost Per Individual License Issued
- 2) **SHORT NAME:** AVG COST/EXAM ADMINISTERED  
**FULL NAME:** Average Cost Per Exam Administered  
**DESCRIPTION:** Average Cost Per Exam Administered
- 3) **SHORT NAME:** AVG TIME/COMPLAINT RESOLUTION  
**FULL NAME:** Average Time for Complaint Resolution  
**DESCRIPTION:** Average Time for Complaint Resolution (Days)
- 4) **SHORT NAME:** AVG COST/COMPLAINT RESOLVED  
**FULL NAME:** Average Cost Per Complaint Resolved  
**DESCRIPTION:** Average Cost Per Complaint Resolved
- 5) **SHORT NAME:** % NEW INDIVIDUAL LICENSES W/IN 10 DAYS  
**FULL NAME:** Percentage of New Indiv Licenses Within 10 days  
**DESCRIPTION:** Percentage of New Individual Licenses Issued Within Ten days
- 6) **SHORT NAME:** % INDIVIDUAL LICENSES RENEWED IN 7 DAYS  
**FULL NAME:** % Indiv License Renewals Within 7 Days  
**DESCRIPTION:** Percentage of Individual License Renewals Issued within Seven Days

### Explanatory/Input Measures

- 1)     **SHORT NAME:**           TOTAL NUMBER LICENSEES  
       **FULL NAME:**         Total Number of Individuals Licensed  
       **DESCRIPTION:**       Total Number of Individuals Licensed
  
- 2)     **SHORT NAME:**           PASS RATE  
       **FULL NAME:**         Pass Rate  
       **DESCRIPTION:**       Pass Rate
  
- 3)     **SHORT NAME:**           JURISDICTIONAL COMPLAINTS  
       **FULL NAME:**         Jurisdictional Complaints Received  
       **DESCRIPTION:**       Jurisdictional Complaints Received

### Output Measures:

- 1)     **SHORT NAME:**           # NEW INDIVIDUAL LICENSES ISSUED  
       **FULL NAME:**         Number of New Licenses Issued to Individuals  
       **DESCRIPTION:**       Number of New Licenses Issued to Individuals
  
- 2)     **SHORT NAME:**           # RADIOLOGIC TECHNICIANS CERTIFIED  
       **FULL NAME:**         Number of Radiologic Technicians Certified  
       **DESCRIPTION:**       Number of Radiologic Technicians Certified
  
- 3)     **SHORT NAME:**           # LICENSE RENEWALS  
       **FULL NAME:**         Number of Licenses Renewed (individuals)  
       **DESCRIPTION:**       Number of Licenses Renewed (individuals)
  
- 4)     **SHORT NAME:**           INDIVIDUALS EXAMINED  
       **FULL NAME:**         Individuals Examined  
       **DESCRIPTION:**       Number of Individuals Examined
  
- 5)     **SHORT NAME:**           COMPLAINTS RESOLVED  
       **FULL NAME:**         Complaints Resolved  
       **DESCRIPTION:**       Complaints Resolved

### 2. Strategy:

**SHORT NAME:**     TEXAS ONLINE

**FULL NAME:**     TexasOnline. Estimated and Nontransferable.

**DESCRIPTION:**   Provide for the processing of occupational license, registrations, or permit fees through TexasOnline. Estimated and nontransferable.

**NOTE:**           There are NO “Efficiency, Explanatory/Input, or Output” Measures Identified for this Strategy

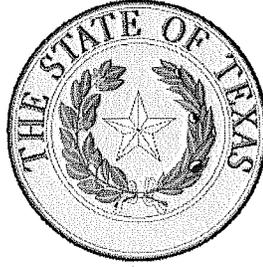
**3. Strategy:**

**SHORT NAME:** INDIRECT ADMINISTRATION

**FULL NAME:** Indirect Administration

**DESCRIPTION:** Indirect Administration

**NOTE:** There are NO "Efficiency, Explanatory/Input, or Output" Measures Identified for this Strategy



## **TIER IX: "AGENCY ACTION PLANS"**

### **(Not Applicable to Core Strategic Plan Submission)**

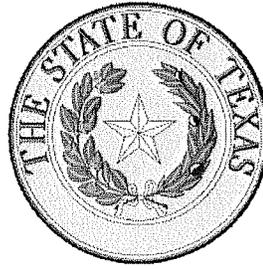
Note: "Action Plans" are detailed methods specifying how a strategy is to be implemented. Task specification includes staff assignments, material resource allocation, and schedules for completion. Action plans separate strategies into manageable parts for coordinated implementation of goals and objectives. Action plans also specify detailed cost and expenditure information.

"Action Plans" provide a detailed description of a strategy's implementation process by outlining the specific tasks, responsibility assignments, and time frames that will be followed. Often referred to as "operational plans" or "implementation plans," "Action Plans" are maintained by the agency and are **NOT submitted in the Strategic Plan.**

The agency's "Action Plans" are input-oriented and include specific delineations of who does the required tasks for each strategy and when the tasks will be completed. They generally address a shorter time frame (two years or less) for action than the Strategic Plan. "Action Plans" include a description of each task, the resource and fiscal requirements of each task, and an identification of the agency division responsible for implementation. They may also include a description of re-engineering or other programmatic changes resulting from an agency's benchmarking activities. Although this level of detail is **NOT an element of the agency's Strategic Plan** submitted to the Governor and the Legislature, it should be available for evaluation of the strategies proposed by the agency.

**"Action Plans" should be developed by the agency; however, no specific format is required.**

Be advised, Texas Occupations Code § 202.101 "DIVISION OF RESPONSIBILITIES" provides that: "The Board shall develop and implement policies that clearly separate the policymaking responsibilities of the Board and the management responsibilities of the Executive Director and the Staff of the Board." Therefore, to the extent materials are responsive to the requirement for "Action Plans," they are available for review upon request.



## **APPENDIX A: "AGENCY PLANNING PROCESS"**

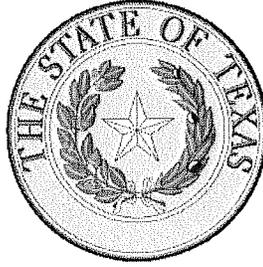
The Texas State Board of Podiatric Medical Examiners is involved in a continual internal planning process that strives to keep our agency up-to-date with the medical profession we regulate, the goals and philosophy of the State of Texas and the mandates placed on us by federal and state rules, laws and statutes. Our planning also revolves around our path-finding new and innovative ways to make the most of the funds we administrate and our providing superior service to the people of Texas and the individuals served by our agency.

To this end, we continually solicit suggestions for improvement, internally and externally, both verbally and in writing. We annually conduct a Customer Satisfaction Survey that is used as a tool to measure how well we are providing our services and in identifying potential areas for improvement. The agency's Executive Director and Staff Services Officer serve as the agency's Planning Committee. They review all suggestions and are responsible for planning to meet the agency's future needs. Meritorious administrative suggestions not requiring action by the Board are implemented when warranted and then monitored for positive results. Oversight of any implemented change(s) is over-sighted by the Planning Committee, who make any adjustments necessary to ensure that the intended goal of the change is being met. Any changes requiring action by our Board are submitted to them by the Executive Director, for their approval and action.

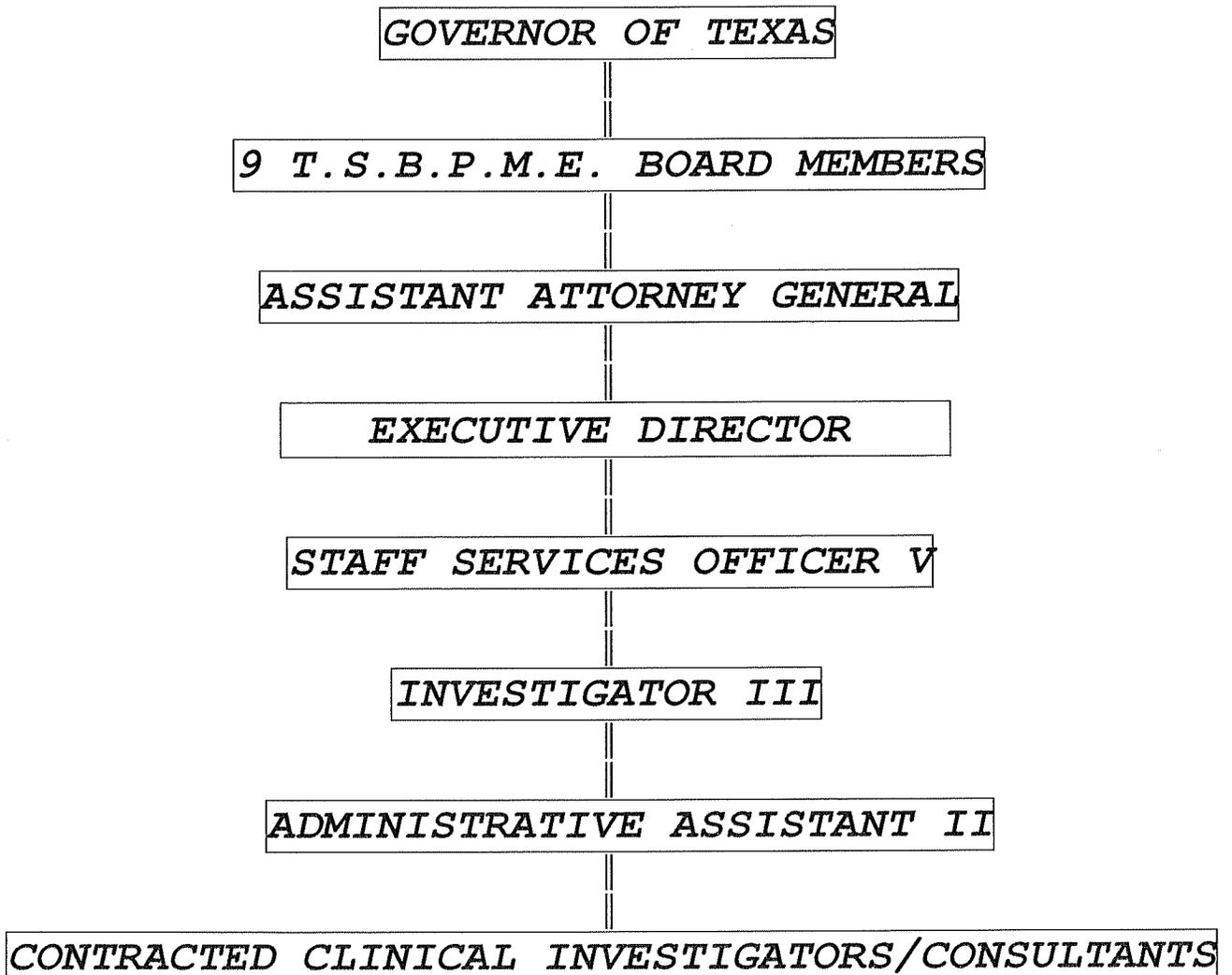
Planning for the agency's Strategic Plan is similarly accomplished. The Planning Committee, with input and assistance from our Board, considers performance benchmarking responses and projections of our agency needs over the next five years to determine the content of our Strategic Plan. This is augmented by the Committee's review of our agency's mission, goals, and legislative mandates, using the goals and philosophy of the State as a yardstick for the provision of quality service.

### **DISCUSSION OF CURRENT-YEAR ACTIVITES**

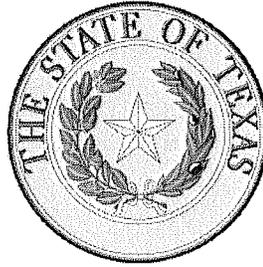
For the remainder of FY 2006 and the next five-year period, this agency plans to take advantage of the new authority offered by the Sunset Advisory Commission during the 79<sup>th</sup> Legislature to enhance efforts to achieve our mission to suffice our goals, objectives and strategies.



**APPENDIX B: "AGENCY ORGANIZATION CHART"**



CURRENT BOARD STAFF HAVE AN INVALUABLE COMBINED 29 YEARS OF INSTITUTIONAL KNOWLEDGE OF THE BOARD'S FUNCTIONS.

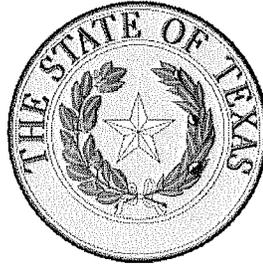


**APPENDIX C: "FIVE - YEAR PROJECTIONS FOR  
OUTCOMES"**

**TEXAS STATE BOARD OF PODIATRIC MEDICAL EXAMINERS  
OUTCOMES  
2007-2011**

| Outcome   | 2007  | 2008  | 2009  | 2010  | 2011  |
|---|-------|-------|-------|-------|-------|
| Percent of licensees with no recent violations              | 98.0% | 98.5% | 98.5% | 98.5% | 98.5% |
| Percent of complaints resulting in disciplinary action      | 10.0% | 9.75% | 9.5%  | 9.0%  | 9.0%  |
| Recidivism rate for those receiving disciplinary action     | 13.0% | 13.0% | 13.0% | 13.0% | 13.0% |
| Percent of documented complaints resolved within six months | 77.0% | 64.0% | 64.0% | 70.0% | 77.0% |
| Percent of Licensees who renewed online                     | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% |
| *** Percent of new individual licenses issued online        | 0.0%  | 0.0%  | 0.0%  | 0.0%  | 0.0%  |

\*\*\* Note: The agency has received an exemption from TexasOnline for "New individual Licenses" issued online due to not having enough new licensees for it to be beneficial.



## APPENDIX D: "PERFORMANCE MEASURE DEFINITIONS"

PROVIDED FOR THE GOVERNOR'S OFFICE OF BUDGET, PLANNING AND POLICY, AND THE LEGISLATIVE BUDGET BOARD

### MEASURE DEFINITIONS

("GOAL 1")

**SHORT NAME:** PROTECT TEXANS

**FULL NAME:** Protect Citizens of Texas from Incompetent and Unethical Podiatrists

**DESCRIPTION:** To protect the citizens of Texas from incompetent and unethical Podiatrists with a quality program of examination and licensure and swift, fair, and effective enforcement of statutes and rules.

**OBJECTIVE:** Throughout each year of the Strategic Plan, ensure that 100 percent of licensees meet minimum compliance standards for licensure and practice.

### OUTCOME MEASURES

- (1) Percent of Licensees with No Recent Violations

**Short Definition:** The percent of the total number of licensed, registered, or certified individuals at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

**Purpose/Importance:** Licensing, registering, or certifying individuals helps ensure that practitioners meet the legal standards for professional education and practice; a primary agency goal. This measure is important because it indicates how effectively the agency's activities deter violations of professional standards established by statute and rule.

**Source/Collection of Data:** Data is collected by the Staff Services Officer from source documents, including computer-generated forms of the total licensing base. Also, the Executive Director or Investigator maintains records of disciplinary data, Board Orders, for calculation of percentages.

**Method of Calculation:** The total number of individuals currently licensed, registered, or certified by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed, registered, or certified by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The result is multiplied by 100 to achieve a percentage.

**Data Limitations:** None

**Calculation type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

• **(2) Percent of Complaints Resulting in Disciplinary Action**

**Short Definition:** Percent of complaints which were resolved during the reporting period that resulted in disciplinary action.

**Purpose/Importance:** This measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Source/Collection of Data:** Complaints received are numbered consecutively within the fiscal year and maintained on a computer tracking system. Complaints resolved are also maintained on a computer tracking system. Disciplinary actions are maintained in hardcopy format, i.e., Board Orders, as well as placed on a computer system. Data is maintained by the Investigator and itemized listings are presented to the Staff Services Officer for performance measure recording.

**Method of Calculation:** The number of complaints resolved during the reporting period that resulted in disciplinary action (numerator) is divided by the total number of complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes Agreed Orders, Reprimands, Warnings, Suspensions, Probations, Revocation, Restitution and/or Fines on which the Board/Commission has acted.

**Data Limitations:** Most complaint investigations result in a finding of not having violated the Board's Rules or Statute and thus, our percentages are low.

**Calculation Type:** Non-cumulative.

**New Measure:** No

**Desired Performance:** Higher than Target

- **(3) Recidivism Rate for Those Receiving Disciplinary Action**

**Short Definition:** The number of repeat offenders at the end of the reporting period as a percentage of all offenders during the most recent three-year period.

**Purposes/Importance:** The measure is intended to show how effectively the agency enforces its regulatory requirements and prohibitions. It is important that the agency enforce its act and rules strictly enough to ensure that consumers are protected from unsafe, incompetent and unethical practice by the registered or licensed professional.

**Source/Collection of Data:** Disciplinary actions are maintained in list form and in the computer database. Repeat offenders are noted on list form by the Investigator and presented to the Staff Services Officer who enters the data for performance measures reporting.

**Method of Calculation:** The number of individuals against whom two or more disciplinary actions were taken by the Board of Commission within the current and preceding two fiscal years (numerator) is divided by the total number of individuals receiving disciplinary actions within the current and preceding two fiscal years (denominator). The result should be multiplied by 100 to achieve a percentage.

**Data Limitations:** None

**Calculation Type:** Non-cumulative.

**New Measure:** No

**Desired Performance:** Lower than Target

- **(4) Percent of Documented Complaints Resolved Within Six Months**

**Short Definition:** The percent of complaints resolved during the reporting period, that were resolved within a six month period from the time they were initially received by the agency.

**Purpose/Importance:** The measure is intended to show the percentage of complaints which are resolved within a reasonable period of time. It is important to ensure the swift enforcement of the Podiatry Practice Act, which is an agency goal.

**Source/Collection of Data:** Complaints that are received are assigned a complaint number for tracking purposes and are logged in as of the date they are received in the Board Office. As complaints are resolved they are closed and the closure date is recorded in the database. The number of complaints resolved within six months is calculated from the information taken from the printed report and given to the Staff Services Officer for performance measure reporting.

**Method of Calculation:** The number of complaints resolved within a period of six months or less from the date of receipt (numerator) is divided by the total number of complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Data Limitations:** The length of time required to resolve a complaint may vary substantially due to how complex the issue is, the aggressiveness of licensees to defend their license and “due Process” timeframe.

**Calculation Type:** Non-cumulative.

**New Measure:** No

**Desired Performance:** Higher than Target

- **(5) Percent of Licensees Who Renew Online**

**Short Definition:** Percent of the total number of licensed, registered, or certified individuals that renewed their license, registration, or certification online during the reporting period.

**Purpose/Importance:** To track use of online license renewal technology by the licensee population.

**Source/Collection of Data:** Reports are downloaded from Bearingpoint and the Comptroller. After the information is verified, the Staff Services Officer updates the information in the database and also into an Excel spreadsheet designed to collect all of the pertinent information in one place. The spreadsheet contains the date the licensee renews online, their license number, name, amount and trace number. Then when the information from the Comptroller matches the initial information, the date is entered on the spreadsheet. When the Comptroller notifies the agency that the payment has cleared, the date and F doc number is entered on the spreadsheet. At that time, a certificate number is issued to the licensee and the database is updated.

**Method of Calculation:** Total number of individual licenses, registrations, or certifications renewed online (numerator) divided by the total number of individual licenses, registrations, or certifications renewed during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Data Limitation:** At the present time, only podiatrists may renew online.

**Calculation Type:** Non-cumulative.

**New Measure:** Yes

**Desired Performance:** Higher than Target

- **(6) Percent of New Individual Licensees Issued Online**

**Short Definition:** The percent of all new license, registrations, or certifications issued online to individuals during the reporting period.

**Purpose/Importance:** To track use of online license issuance technology by the licensee population.

**Source/Collection of Data:** The agency has received an exemption from TexasOnline for this measure at this time due to not having enough new licensees for it to be beneficial.

**Method of Calculation:** Total number of new licenses, registrations, or certifications issue to individuals online (numerator) divided by the total number of new licenses, registrations, or certifications issued to individuals (denominator) during the reporting period. The result should be multiplied by 100 to achieve a percentage.

**Data Limitations:** N/A

**Calculation Type:** Non-cumulative.

**New Measure:** Yes

**Desired Performance:** Higher than Target

## **EFFICIENCY MEASURES**

### **• (1) Average Licensing Cost per Individual License Issued**

**Short Definition:** Total expenditures (including encumbrances) for direct licensing activities during the reporting period divided by the total number of individuals licensed during the reporting period.

**Purpose/Importance:** This measure is intended to show how cost-effectively the agency processes new and renewal license applications for individuals.

**Source/Collection of Data:** The Staff Services Officer maintains the expenditure and encumbrance data in an Excel program on her computer and the number of new and renewed licenses is obtained from performance measurement data calculated each quarter. Time allocations are prepared by the Staff Services Officer; other allocated costs are apportioned by the Staff Services Officer.

**Method of Calculation:** Total funds expended and encumbered during the reporting period for the processing of initial and renewed licenses for individuals divided by the total number of initial and renewed licenses for individuals issued during the reporting period. Costs include the following categories: Salaries; supplies; travel; postage; and other costs directly related to licensing, including document review, handling, and notification. Costs related to the examination function and indirect costs are excluded from this calculation.

**Data Limitations:** None

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Lower than Target

- **(2) Average Cost per Exam Administered**

**Short Definition:** Total costs expended for examination activities (excluding exam purchase costs) during the reporting period divided by the total number of exams administered during the reporting period.

**Purpose/Importance:** The measure shows the efficiency in costs to administer a licensing exam.

**Source/Collection of Data:** The Staff Services Officer maintains the expenditure and encumbrance data in an Excel program on her personal computer and the number of individuals to whom whole or multi-part examinations were administered is obtained from performance measurement data calculated each quarter. Time allocations are prepared by the Staff Services Officer; other allocated costs are apportioned by the Staff Services Officer.

**Method of Calculation:** Total funds expended and encumbered during the reporting period for the administration of examinations (excluding examination purchase or development costs) (numerator) is divided by the number of individuals to whom whole or multi-part examinations were administered (denominator). Costs incurred in a different quarter from the exam session should be included in the report for the period in which the examination was given. Costs include the following categories: salaries; supplies; travel; postage; and other costs directly related to examination administration including exam room rental, exam application review and handling, proctoring, notification, and grading if not included as part of the purchase of the exam. Indirect costs are excluded from this calculation.

**Data Limitations:** The costs expended for examination activities can rise or fall dependent on how many individuals decide to take the exam. This number is substantially influenced by outside factors beyond our control.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Lower than Target

- **(3) Average Time for Complaint Resolution**

**Short Definition:** The average length of time to resolve a complaint, for all complaints resolved during the reporting period.

**Purpose/Importance:** The measure shows the agency's efficiency in resolving complaints.

**Source/Collection of Data:** The complaint tracking database is maintained by the Investigator. The system contains the date the complaint is received and the date when closed and calculates the number of calendar days. The information is then given in list form to the Staff Services Officer for performance measure reporting.

**Method of Calculation:** The total number of calendar days per complaint resolved, summed for all complaints resolved during the reporting period, that elapsed from receipt of a request

for agency intervention to the date upon which final action on the complaint was taken by the board of commission (numerator) is divided by the number of complaints resolved during the reporting period (denominator). The calculation excludes complaints determined to be non-jurisdictional of the agency's statutory responsibilities.

**Data Limitations:** While most complaints can be resolved in the targeted time for resolution, some may require approval and action from the Board, which meets twice a year resulting in a delay for resolution.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Lower than Target

- **(4) Average Cost per Complaint Resolved**

**Short Definition:** Total costs expended for the resolution of complaints during the reporting period divided by the total number of complaints resolved during the reporting period.

**Purpose/Importance:** The measure shows the cost efficiency of the agency in resolving a complaint.

**Source/Collection of Data:** The Staff Services Officer maintains the expenditure and encumbrance data in an Excel program on her personal computer and the number of resolved complaints is obtained from performance measurement data calculated each quarter. Time allocations are prepared by the Staff Services Officer; other allocated costs are apportioned by the Staff Services Officer.

**Method of Calculation:** The total funds expended and encumbered during the reporting period for complaint processing, investigation, and resolution (numerator) is divided by the number of complaints resolved (denominator). Costs include the following categories: salaries; supplies, travel; postage; subpoena expenses; and other costs directly related to the agency's enforcement function, including charges of the State Office of Administrative Hearings. These costs should be computed using the appropriate expenditures (including encumbrances) shown from each category in the agency USAS accounting system. Indirect costs are excluded from this calculation. For multiple reporting periods, year-to-date performance is calculated by adding all costs related to complaints for all reporting periods (numerator) is divided by the number of complaints resolved for all reporting periods (denominator).

**Data Limitations:** The definition limits the calculation of costs to those complaints resolved and not all complaints received. All complaints received are processed, therefore, there is a cost and workload measure involving the review of all complaints. To divide complaint costs by only the number of resolved complaints processed results in a skewed cost per complaint resolved.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Lower than Target

- **(5) Percentage of New Individual Licenses Issued within 10 Days**

**Short Definition:** The percentage of initial individual license applications that were processed during the reporting period within ten days measured from the time in days elapsed from receipt of the initial completed application until the date the license is mailed.

**Purpose/Importance:** This measures the ability of the agency to process new applications in a timely manner and its responsiveness to a primary constituent group.

**Source/Collection of Data:** The Administrative Assistant processes applications, fees, and scores required for licensure and enters information into an examination applicant database. After an applicant has satisfied all application requirements, score requirements and has forwarded the fee for an initial license, a license number is entered into the database system and on a list form noting the date of receipt of the initial license fee. As each license is prepared for mailing, the date of mailing is entered on the list form. At the end of each fiscal quarter, the Administrative Assistant prints a report which shows for each individual license issued during the quarter, the number of calendar days which elapsed between the initial receipt of the license fee and the mailing of the license.

**Method of Calculation:** The number of initial individual licenses mailed in 10 calendar days or less from the date of initial license fee receipt is divided by the total number of individual licenses mailed during the quarter. The resulting number is multiplied by 100 to convert to a percentage.

**Data Limitations:** The agency has no control over when a successful applicant submits the license fee.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Lower than Target

- **(6) Percentage of Individual License Renewals Issued within 7 Days**

**Short Definition:** The percentage of individual license renewal applications that were processed during the reporting period within 7 days of receipt, measured in calendar days which have elapsed from receipt of the renewal application until the date the renewal license is mailed.

**Purpose/Importance:** This measures the ability of the agency to process renewal applications in a timely manner and its responsiveness to a primary constituent group.

**Source/Collection of Data:** The Administrative Assistant opens and sorts the renewal applications, and after the continuing education requirements have been verified, the renewal form and fee are accepted, date stamped and deposited. After the information is entered into the database the license renewal certificates are printed. The renewal form is then date-stamped indicating the date mailed. The respective dates are listed in hardcopy on a printout generated from the computer database of all renewal certificates mailed.

**Method of Calculation:** This measure is calculated by using all licensees within the database who must renew their license annually. The total number of calendar days per license renewal application that elapsed from the receipt of a completed renewal application until the date the renewal license certificate is mailed is determined as described above in Source/Collection of Data. The total number of renewed licenses that meet this criteria is then divided by the total number of renewals mailed during the quarter. This number is then multiplied by 100 and expressed as a percentage.

**Data Limitations:** While the renewal application and license certificates are computerized, the back-up documentation for entering this data to be calculated for this measure must be done manually. While it does not delay the issuance of a renewal certificate, it does affect the efficiency for purposes of performance measure recording.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

## **EXPLANATORY MEASURES**

- **(1) Total Number of Individuals Licensed**

**Short Definition:** Total number of individuals licensed at the end of the reporting period. This figure includes Active, Inactive, Temporary and Provisional.

**Purpose/Importance:** The measure shows the total number of individual licenses currently issued which indicates the size of one of the agency's primary constituencies.

**Source/Collection of Data:** The Administrative Assistant maintains the licensing database known as Podiatric Physician Database. A list that indicates the total number of new licenses issued to individuals during and following the renewal cycle and a list indicating the total number of individuals renewed during the reporting period is prepared. The totals of these two lists are added to get the total of individuals licensed. The lists are maintained in the office of the Administrative Assistant and given to the Staff Services Officer for purposes of performance measure reporting.

**Method of Calculation:** This measure is calculated by taking the total unduplicated number of individuals licensed, certified or registered in the podiatric physician database at the end of the reporting period. An individual who holds more than one license, certification or registration is counted only once. Individuals who are on inactive status are included in the total. This measure may not reflect the total number of licenses, certifications or registrations issued by the agency.

**Data Limitations:** The Board has no control over how many physicians will choose to renew their license each year.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Higher than Target.

- **(2) Pass Rate**

**Short Definition:** The percent of individuals to whom a whole examination, or segments of a multi-part examination were administered during the reporting period who received a passing score.

**Purpose/Importance:** The measure shows the rate at which those examined passed. This is an important step in the licensing process and a low pass rate may represent unnecessarily restrictive licensure requirements or inadequate preparation by licensure applicants.

**Source/Collection of Data:** The Administrative Assistant in the Licensing/Examination department maintains the information in report form. The report is given to the Staff Services Officer for purposes of performance measure reporting.

**Method of Calculation:** The total number of individuals who passed the examination (numerator) is divided by the total number of individuals examined (denominator). The result should be multiplied by 100 to achieve a percentage. If two exams were given in the same reporting period, the total number of individuals passing the exam during the reporting period is divided by the total number of persons taking the exam during the reporting period. Persons taking the exam multiple times are counted each time they take the exam.

**Data Limitations:** None

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Higher than Target.

- **(3) Jurisdictional Complaints Received**

**Short Definition:** The total number of complaints received during the reporting period which are within the agency's jurisdiction of statutory responsibility.

**Purpose/Importance:** The measure shows the number of jurisdictional complaints which helps determine agency workload.

**Source/Collection of Data:** The Investigator receives and numbers all complaints received in the complaint database. The number of complaints received during the reporting period is maintained on the system and in hardcopy and given to the Staff Services Officer for purposes of performance measure reporting.

**Method of Calculation:** The agency sums the total number of complaints received only relative to their jurisdiction. It also keeps track of total number of complaints that are not in their jurisdiction but does not use that figure in its calculation.

**Data Limitations:** The Board has no control over the number of complaints received.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Lower than Target.

## **OUTPUT MEASURES**

- **(1) Number of New Licenses Issued to Individuals**

**Short Definition:** The number of licenses issued to previously unlicensed individuals during the reporting period.

**Purpose/Importance:** A successful licensing structure must ensure that legal standards for professional education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed persons who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Source/Collection of Data:** As new licenses are issued to successful candidates, the Administrative Assistant adds their names to the licensing database. A paper list form is maintained by the Administrative Assistant listing the names of individuals newly licensed during the previous three months and the list is printed at the end of each fiscal quarter. The total number of names shown on the list is counted by the Administrative Assistant and the list information is given to the Staff Services Officer who verifies the information for purposes of performance measure records.

**Method of Calculation:** This measure counts the total number of licenses issued to previously unlicensed individuals during the reporting period, regardless of when the application was originally received. Those individuals who had a license in the previous reporting period are not counted. Only new licenses are counted.

**Data Limitation:** The Board has no control over the number of examination applicants and subsequent license holders.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

- **(2) Number of Radiologic Technicians Certified**

**Short Definition:** The number of radiologic technicians who previously registered and new ones that registered during the current reporting period.

**Purpose/Importance:** A successful certification structure must ensure that legal standards for professional education and practice are met prior to certification. This measure is a primary workload indicator intended to show the number of unregistered persons who were documented to have successfully met all education criteria established by statute and rule as verified by the agency during the reporting period.

**Source/Collection of Data:** The registration information comes from the agency licensing database, which is known as Rad-tech database that keeps a log of those individuals registering to take x-rays in the state. A report is generated that lists the names of all individuals whose certification was renewed during the previous 3 months. The list is printed by the Staff Services Officer and used for calculation of the performance measure.

**Method of Calculation:** The measure is calculated by tracking the total number of registrations issued to previously registered and new individuals during the reporting period.

**Data Limitations:** The Board has no way to influence the number of rad-techs who register with us. This number can vary due to numerous outside factors beyond our control.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

- **(3) Number of Licenses Renewed (Individuals)**

**Short Definition:** The number of licensed individuals who held licenses previously and renewed their license during the current reporting period.

**Purpose/Importance:** Licensure renewal is intended to ensure that persons who want to continue to practice in their respective profession satisfy current legal standards established by statute and rule for professional education and practice. This measure is intended to show the number of licenses that were issued during the reporting period to individuals who currently held a valid license.

**Source/Collection of Data:** The licensee information comes from the agency licensing database that keeps a log of those individuals renewing their license to practice in the state. A report is generated that lists the names of all individuals whose license was renewed during the previous 3 months. The list is printed by the Staff Services Officer and used for calculation of the performance measure.

**Method of Calculation:** The measure is calculated by querying the agency licensing database to produce the total number of licenses issued to previously licensed individuals during the reporting period.

**Data Limitations:** The Board has no control over the number of individuals choosing to renew a license.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

- **(4) Individuals Examined**

**Short Definition:** The number of individuals to whom examinations were administered in whole or in part during the reporting period.

**Purpose/Importance:** The measure shows the number of individuals examined which is a primary step in licensing the individual and represents a major cost element for the agency. Examination purchase, grading, validating and notification costs are directly related to this measure.

**Source/Collection of Data:** The Administrative Assistant maintains in list form and on an applicant database the number of individuals to whom an examination was administered. This information is given to the Staff Services Officer for purpose of performance measure reporting.

**Method of Calculation:** For an exam administered in one session, even if comprised of periods with breaks or on more than one day, the individuals attending the session are counted only once. An individual who attends two sessions for two exams or parts of exams should be counted twice.

**Data Limitations:** The Board has no control over the number of individuals who want to take the Board Examination.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Higher than Target

- **(5) Number of Complaints Resolved**

**Short Description:** The total number of complaints resolved during the reporting period.

**Purpose/Importance:** The measure shows the workload associated with resolving complaints.

**Source/Collection of Data:** Resolved or closed complaints are maintained on the complaint database. Using the closed complaint data, the Investigator records the number on paper form and gives to the Staff Services Officer for purposes of performance measure reporting.

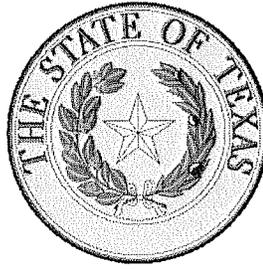
**Method of Calculation:** The total number of complaints during the reporting period upon which final action was taken by the Board or for which a determination was made that a violation did not occur. A complaint that, after preliminary investigation is determined to be non-jurisdictional is not a resolved complaint.

**Data Limitations:** The complexity of some complaints may require further investigation and action by the Board, which meets twice a year. Such infrequent meetings will affect the number of complaints resolved within the target resolution date.

**Calculation Type:** Cumulative

**New Measure:** No

**Desired Performance:** Higher than Target



## APPENDIX E: "WORKFORCE PLAN"

### OVERVIEW:

(In accordance with Texas Government Code §2056.002 and the State Auditor's Office Workforce Planning website at <http://www.hr.state.tx.us/workforceplanning>.)

The mission of the Texas State Board of Podiatric Medical Examiners is to assure quality Podiatric Medical Care for the citizens of Texas. The Board fulfills its mission through the regulation of the practice of Podiatric Medicine. This mission supersedes the interest of any individual, the podiatric medical profession or any special interest group.

The Texas State Board of Podiatric Medical Examiners has two Strategic Goals:

1. To protect the citizens of Texas from incompetent and unethical podiatric physicians with a quality program of examination and licensure, and swift, fair and effective enforcement of statutes and rules.
2. To establish and carry out policies governing purchasing and contracting in accordance with state law that foster meaningful and substantive inclusion of Historically Underutilized Businesses.

Our agency's business functions all evolve and flow from our Strategic Goals. We annually license the Podiatric Physicians who provide medical care to the people in Texas, to ensure the competency of these medical professionals and to ensure that the people of Texas receive the best Podiatric Medical Care possible. We have an effective and efficient licensing and examination process and a revised investigative process to address complaints made against our licensees. We interact in written format, via the Internet and in person with numerous outside federal, state and local agencies, the public, law enforcement agencies, trade associations, medical entities, etc. on a daily basis to effectively accomplish these goals. Similar to a business in the private sector, we use the most efficient and effective methodology available to us at the time of contact to meet our goals and conduct the day-to-day business of the agency. For example, we conduct our agency business by use of the USPS, interagency mail, private sector courier service (UPS) and telephone service, dependant on what will provide us with the most cost-effective methodology, while still meeting our time related needs. More and more, we are providing service to our customers and are conducting our agency's business electronically, via the Internet. Examples of this are our agency's website, which provides our customers with licensing and Podiatric Physician profile information, licensee disciplinary information and detailed agency information via the Internet, in a cost-effective and efficient manner, and by our agency's heavy use of e-mail. Beginning in FY 2004, we joined "Texas On-Line," which allows us to provide instant license renewal access for our licensees, twenty-four hours a day, seven days

a week. We are constantly searching for ways to make our provision of service more efficient and cost-effective.

We do not presently anticipate any changes to our mission, strategies or goals over the next five years. We believe that our mission and goals while being very specific, remain broad enough to allow them the flexibility to embrace any significant changes that might occur.

**ADDITIONAL CONSIDERATIONS:**

The key economic issues facing our agency relate to our being able to continue providing a high level of quality service to our customers within a very tight budget. The need to fund all of our services within our small operating budget can be very challenging and has the potential to negatively impact our ability to provide our employees with the merit raises so vital to staff retention. By not providing our staff with merit raises, we risk losing our staff to other agencies with higher levels of funding that can afford higher salary levels and merit raises. Loss of trained staff has the potential to slow down and negatively impact our provision of services and functions.

Our challenge has been and will continue to be to path-find new ways to remain and become even more efficient and effective in our use of our appropriated funds, thus allowing us to continue to meet our goals and mission.

We have found that our current customer demands generally remain constant, with the exception of our licensee's demand for quicker response times in the provision of statute and rule information and in responding to a broad range of questions. We expect to keep up with this increased demand by the use of technology (our enhanced website, telecommunications, etc.).

We are a four (4) person agency, divided up into several component "divisions". One employee (Executive Director) is responsible for the day-to-day administration and running of the agency, one employee (Investigator III) is responsible for complaint and CME compliance investigations, one employee (Staff Services Officer V) handles all agency fiscal matters and licensing (new and renewals) and licensing examinations, and one employee (Administrative Assistant II) who provides administrative support for our complaint investigations as well as serving as the agency's receptionist. All four of our employees are multi-tasked with many "additional duties" as is the case in any small agency such as ours. The Admin. Asst. II is supervised by our Staff Services Officer V. The Investigator III and Staff Services Officer V are both supervised by the Executive Director, who in turn, reports to our nine member Board, accountable to the Governor of Texas.

We project that our agency's structure should remain essentially consistent within its current form for the next five years. There could be minor shifts in staff duties and/or responsibilities, as the needs of our customers evolve and as new legislative mandates and rule changes made by the Board impact our agency.

**CURRENT WORKFORCE PROFILE:**

Our agency's current workforce is meeting the mission and goals of our agency and possesses the capacity to be sufficiently flexible, innovative and creative so as to adapt to any

future critical business issues and needs. Our agency's I.T. functions are shared by the staff and the Health Professions Council Systems Analysts. Our Staff Services Officer has received training to enhance her knowledge and skill in the fiscal area (ABEST, SPA, USAS, USPS, etc.). Our Invest. III has attended training to enhance investigative capabilities. Additional training as our funds allow, and I.T. and H.R. support from the staff of other Health Profession Council agencies (at no cost to us) that are specialists in these areas, should allow us to remain current with the skills necessary to address future critical business issues.

The following is a demographic chart that shows the age, gender, race and tenure of our current employees:

| <b>Position</b>                 | <b>Age</b> | <b>Gender</b> | <b>Race</b>            | <b>Tenure w Texas</b> |
|---------------------------------|------------|---------------|------------------------|-----------------------|
| <b>Executive Director</b>       | 33         | Male          | Asian/Pacific Islander | 6.8 years             |
| <b>Staff Services Officer V</b> | 44         | F             | W                      | 22+ years             |
| <b>Investigator III</b>         | Vacant     |               |                        |                       |
| <b>Admin. Asst. II</b>          | Vacant     |               |                        |                       |

Our agency does not presently have any agency staff that would be eligible to retire from state service within the next five years.

Our agency has experienced an employee turnover rate of 25% for the last year. At face value, this seems like a high figure, except when it is applied to a small agency like ours, where the loss of only one employee in the course of a year represents a 25% staff turnover rate for the agency.

To project our potential employee attrition rate for the next five years, we need to look at this issue from two separate and distinct positions. First, the potential for attrition from staff's eligibility to retire from state service is 0% for our agency for the next five years. The second method of looking at staff attrition is from the standpoint of one or more employees voluntarily leaving their employment with us to work for another state agency or in the private sector. It is difficult to project an accurate figure for this kind of potential loss of staff, due to the wide range of variables that could impact an employee's decision to remain or not with a specific state entity. A reasonable projection would be that over the next five years, we could have at least one employee leave the agency. This equates to the potential for a 25% attrition rate in any one of the next five years.

There are varied "workforce skills" that are critical to the mission and goals of our agency. The Executive Director must possess an exceptionally broad range of skills and talents to enable him to oversight the daily operations of the agency, to be a reliable resource of information and guidance for the agency's staff and Board, and to effectively perform the many, varied functions of his job. Our fiscal staff person (Staff Services Officer V) must be familiar with the agency's rules, statutory mandates and requirements for licensure and Continuing Medical Education credit, as well as possess an intimate knowledge of "past practice" issues, to be effective in the consistent oversight of licensing as well as all federal and state fiscal requirements, in order to keep the agency compliant with federal and state

mandates, such as the state's mandate for three-day deposits of funds received. Our Investigator III must possess a strong knowledge of the agency's rules and statute, possess the highest level of confidentiality, and have excellent investigative skills identical to those of a law enforcement criminal investigator (rules of evidence, due process, etc.) Our Admin. Asst. II must act as the point person for IT functions. They must also possess excellent people and communication skills, and a broad knowledge of our rules and statutes to appropriately respond to customer questions. They must also have a working knowledge of our investigative process and demonstrate a high level of confidentiality, as they administratively assists the investigations division and has access to confidential complaint, patient and licensee information.

It is believed that the skill and experience level of the agency's workforce will not substantially change within the next five years. Based on past trends, all staff will need to stay current with I.T. technology as it continues to evolve. Doing so will allow our agency to use information technology to offset the inevitability of increasing workloads and more readily allow for the most cost-effective and efficient provision of services to our customers.

The greatest challenge facing our agency as it affects our ability to recruit and retain mission critical staff is our lack of sufficient appropriated funds to allow us to reward our employees who meet specific requirements with well-deserved merit increases. In a small agency such as ours, the loss of any one staff position can have a critical impact on our ability to meet our goals and legislative mandates. Because each staff member wears many hats, the loss of any one position has a negative spin-off effect on one, some, and sometimes all other positions being able to complete their work in a timely manner. This has the potential to negatively impact the entire agency. It is crucial that our agency has the level of funding necessary to remain competitive with other larger state agencies (and the private sector) to avoid losing any of our staff to an agency or entity that can pay a higher salary and give out merit increases.

#### **FUTURE WORKFORCE PROFILE (DEMAND ANALYSIS):**

At present, we do not anticipate any workforce staffing changes due to such things as changes in technology, mission, workloads etc. We believe that our workforce will remain consistent within our current structure. Adding or removing responsibilities from one staff position to another can address things such as increased or decreased workloads. There is some potential that this could change, if, for example, the legislature were to add any new unfunded mandates on our agency next session. With our present heavy workload, any new mandates would potentially require an additional FTE to keep us compliant with our goals and mandates. We believe that future workforce skills will more and more revolve around our staff having a good working knowledge of new computer hardware technology and software programs. It is through the best use of future computer technology advances that we will keep the workplace time efficient and cost effective. We feel that the increase in new Information Technology over the next five years could help to offset any potential increase in the time needed to meet our goals and mission. All of our current staff positions are critical to performing our licensing, testing and enforcement functions necessary to support our agency's mission, goals and legislative mandates. Presently, we do not anticipate seeing any increase or decrease in the existing staffing levels necessary to do our job as a state medical licensing and regulatory agency. We have no plans to ask for any additional FTE's this coming session.

## **GAP ANALYSIS:**

We have not identified any gaps or surpluses in our staffing levels based on the current information available to us. There is, however, an anticipated gap in the computer hardware and software and management skills that will be needed by our staff to remain ahead of increasing workloads. The key to the resolution of this training gap is to address the gap in the level of funding available for critical staff training, most importantly, in the I.T. area. We believe that continued training will be critical to keep our current level of staff prepared to meet the potentially increased pressure on staff from heavier future workload levels, by fostering effective agency leadership and management and by utilizing new methodologies and technologies (hardware and software) to level the playing field.

## **STRATEGY DEVELOPMENT:**

At this time, our agency is not impacted by the potential loss of staff due to the “aging workforce” issue. None of our four full time employees are eligible to retire within the next five years. It is difficult to nearly impossible to prevent the potential loss of an employee who decides to leave this agency for other employment. Over the last seven years, we have had several employees leave our agency for a variety of reasons. One (Investigator III) left state employment to become a law enforcement officer (Captain in charge of the Investigations Division, with the Leander, Texas Police Department). The second (Admin Tech III) left state employment to pursue her life-long dream of becoming a licensed beautician. The third (Admin Tech II) left state employment to follow through on personal interests in Midland, Texas. The fourth (Admin Tech IV) was lost due to a Reduction in Force (RIF) pursuant to mandated budget reductions. The fifth (Admin Tech II) was terminated due to violations of personnel policies. Lastly and most recently two Executive Directors resigned over concerns brought forth by the Board. The agency’s Investigator V of the past 6 years then became the new Executive Director in September 2005. Most recently, the Admin. Asst. II from September 2004 – December 2005 became the new Systems Analyst with the Health Professions Council due to exemplary service with the Board and the Investigator III from January – May 2006 resigned due to personnel deficiencies.

Notwithstanding the above, our agency has utilized several strategies to make our workplace a good place to work, within our limited fiscal resources. We have actively included all employees in many of the major decisions relating to the running of our agency and the policies by which we run, to make staff feel like the valued individuals they are. The Executive Director has fostered leadership development by allowing the agency’s Staff Services Officer V to act as a supervisor, developing her leadership skills under his guidance. Training to enhance our staff’s development within their own areas of specialization has been encouraged, within the limited resources of the agency.

We have and will continue to cross-train our staff, and have entered into an agreement with other Health Professions Council agencies to provide mutual support in a staffing emergency, in the event that any agency staff possessing unique and critical skills should be absent from the agency due to illness, extended vacation, etc. This ensures that our agency will continue to run and that all functions and responsibilities of the agency will continue uninterrupted.

## **ADDITIONAL CONSIDERATIONS:**

At the present, there is a need to recruit competent staff to fill open positions. Historically, when positions have opened, we have been successful in attracting a diverse and qualified pool of applicants, and have successfully hired positions, from “posting of the job” to “first day on the job” within a month. We are confident that we would be able to quickly replace any of our staff positions that should open, quickly, with minimal impact to the agency. In the absence of being able to fill a position, we have contracted with outside providers to supplement the duties performed by the Investigator.

We do not anticipate having any skill or staffing imbalances due to retirements within the next five years. Any imbalances due to changing programs will be easily absorbed by our staff, as our positions already overlap in their responsibilities and training. One of our agency strengths is that because we are small, we are better able to adapt quickly to change. Duties and responsibilities can quickly be assigned, removed or adapted to meet any change or challenge.

We consider all of our staff as being in potential leadership positions. We use every opportunity to allow our staff to enhance their interpersonal and leadership skills. The acquisition of additional training funds will facilitate allowing our staff to attend training that we presently cannot afford to pay for.

We have made a conscious effort to be very liberal in allowing our staff to flex their work schedule so that they can attend training programs to enhance their level of personal knowledge and better prepare them for future leadership rolls.

All the aforementioned allows for a sense of staff “Ownership;” a philosophy of success in the private sector whereby employees feel they “belong” to a successful team.

Current Board Staff have an invaluable combined 29 years of institutional knowledge of the Board’s functions.



## **APPENDIX F: "SURVEY OF ORGANIZATIONAL EXCELLENCE RESULTS AND UTILIZATION PLANS"**

After review of the Board's June 1, 2006 "Customer Service Survey" (submitted to the GOBPP and LBB under separate cover), relative to the Board's overall Strategic Planning process, it appears that those measures are better served, assessed and quantified through valid, sound, scientific, academic data collection methods executed by the University of Texas at Austin to remain within the spirit and letter of Texas Government Code Chapter 2114. This scenario will be pursued for future Board surveys after Fiscal Year 2006.

### **The UT-Austin Organizational Excellence Group specializes in:**

(<http://www.utexas.edu/research/cswr/survey/site/series/index.html>)

- **Human Resource Assessment**
- **Leadership Tools**
- **Customer Satisfaction Data Collection**
- **Customized Survey Research**

The Group provides expert service and valued benchmark resources in the areas of organizational climate and human resource assessment, evaluation of customer service needs, and customized survey research tailored to meet an agency's individual needs. The Group utilizes the latest data collection and data processing systems to rapidly and accurately return needed data.



### **The Three-Legged Stool**

A way to understand organizations is to think of a three-legged stool. The seat of the stool is the organization and it rests on three legs. One leg is leadership. Leadership consists of the vision that originally created the organization and the leadership that maintains the organization today. A second leg is external data. What are the goals and activities of the organization? What does it require from the environment and what does it provide to secure its continued existence? How do customers of the organization view the organization? Who are the competitors and what are their characteristics? The third leg is internal data. What are the motivations and commitments of the people that work in the organization? How creative are they? How thorough do they perform their tasks? Do they innovate? Are they dedicated? How well are the resources of time, money, people and opportunity used?

## **Survey of Organizational Excellence**

The Survey assists organizational leadership by providing information about work force issues that impact the quality of service ultimately delivered to all customers. The data provide information not only about employees' perceptions of the effectiveness of their own organization, but also about employees' satisfaction with their employer.

## **Customer Surveys**

The Group's website provides information and addresses questions regarding the customer assessment of services provided by the organization. The Group's objective is to develop both customer service assessment tools and corresponding data collection procedures that assist agencies towards delivering outstanding customer service and promoting excellence throughout the organization.

## **Leadership Tools**

The development of leadership is a continuous process as an individual gains experiences, assumes greater levels of responsibility, and faces a growing complexity of organizational problem solving demands.

## **Benchmarking Committee**

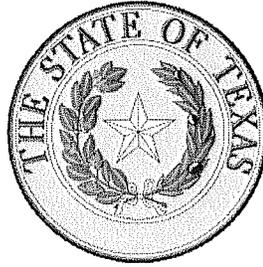
The Survey of Organizational Excellence has created the Benchmarking Committee as a response to the necessarily monopolistic functions that must characterize many governmental services. The Committee membership, chosen from fields and organizations where high levels of competition, innovation and excellence exist, examines dimensions of state agencies against comparable dimensions found in their fields.

## **Future TSBPME Surveys**

The Texas State Board of Podiatric Medical Examiners is in receipt of the UT-Austin's Organizational Excellence Group's materials responsive to the customer service process mandated by Texas Government Code Chapter 2114 as related to the overall Strategic Planning Process. After reviewing the Group's website at <http://www.survey.utexas.edu>, the Board is interested in pursuing the Group's services as part of accomplishing our overall mission to protect the citizens of Texas through the proper regulation of Podiatric Medicine.

On June 1, 2006 copies of the Board's "Report on Customer Service" were submitted to the Governor's Office and the Legislative Budget Board for an overview of our past survey activity. We recognize that the University of Texas is in a better position to quantify our customer performance to achieve future goals and to adequately assess the Board's functions.

Board staff is presently scheduling an appointment with the Group to pursue their services and to identify related costs. We look forward to working with the University of Texas at Austin.



## **APPENDIX G: "INFORMATION RESOURCES STRATEGIC PLAN"**

### **EXECUTIVE SUMMARY**

The purpose of the Texas State Board of Podiatric Medical Examiners (TSBPME) is to protect the health, safety and welfare of the citizens of the State of Texas through regulation of Podiatric Physicians licensed by the Board and investigation of complaints against Podiatric Physicians and persons practicing Podiatric Medicine without a Texas license. It is our goal to ensure that Texas consumers are effectively and efficiently served by high quality professionals and businesses by setting clean standards and maintaining compliance.

The Texas State Board of Podiatric Medical Examiners has developed, through its planning process, an overall Strategic Plan for FY 2007-2011. The "Information Resource" goals of the agency are consistent with the agency's overall Strategic Plan. They include the on-going review of the agency's overall operations to determine if additional or updated information resources are necessary to continue to regulate effectively in the public interest and the pursuit of securing necessary resources. These goals support the "Statewide Strategic Plan for Information Resources Management" as outlined by the Texas Department of Information Resources (Texas Government Code § 2054.091 and §2054.096).

### **GOALS, OBJECTIVES, STRATEGIES, AND PROGRAMS**

Texas Occupations Code Chapter 101 provides that the TSBPME be a member of the Health Professions Council (HPC). HPC provides a means for the member regulatory agencies represented on the council to coordinate administrative and regulatory efforts. One major HPC administrative service is Information Technology Systems Support (ITSS), which includes: Network Administration, Desktop Administration, Hardware Support, Email Administration, Web Page Development, Texas Online Support, IT Purchase Consulting, Imaging System Administration, and IT Project Management. Any TSBPME service needs for IT are submitted via the HPC-Help Desk. As part of the Board's requisite statutory relationship with HPC we pay an annual fee of \$4,591.00 per year (as adjusted). This amount is calculated in part by HPC as a proportion of costs based on TSBPME-IT needs (Help Desk requests).

All automated information is maintained, secured and located in the Board office on a Local Area Network (LAN) server that utilizes an MS Windows 2000 Server for file sharing and database storage. We also have an MS Windows 2000 Server that serves as our web hosting station. The Board currently contracts IT support and resources via an interagency contract

through the Health Professional Council and with the Department of Information Resources (DIR) that includes support of internet access through the Texas Building and Procurement Commission (CAPNET), including access to USPS, USAS and ABEST (Texas Comptroller of Public Accounts systems).

Texas Occupations Code §202.162 “USE OF TECHNOLOGY” provides that: “The Board shall implement a policy requiring the Board to use appropriate technological solutions to improve the Board's ability to perform its functions. The policy must ensure that the public is able to interact with the Board on the Internet.”

The agency’s website (<http://www.foot.state.tx.us>) is hosted by the Texas State Board of Podiatric Medical Examiners. All web publishing and maintenance of the website is done in house. Updates to the website are timely, in full content control and have included the use of web based applications that better serve our external customers. The website is in accordance with the Texas Open Records Act, and in the spirit of “open government”, publications include, but are not limited to, agency information, licensing examination dates, verification of podiatric physicians, disciplinary actions, information on continuing education, laws and statutes, downloadable forms and board orders, as well as, links to other agencies related to the Board and its mission. We will be adding in the future, the capability to download additional licensure forms.

The Board strives to increase cross-government and interagency activities, along with public services while maintaining a return on investment with existing equipment and software that services the Board’s internal-external customers. Consumers and members of the profession, as well as other state agencies welcome the opportunity to access this information and communication through current technology.

Funding is a continuous challenge and it is our goal to maintain, at a bare minimum, IT services for file, database and web services, along with allowing for expansion and efficient management with existing equipment, and software to expand future services with the aid of new technology purchases.

## **AGENCY DATABASES AND APPLICATIONS**

The agency maintains four major databases. The application software and data is owned by the agency.

### **I. Name:** Complaint Database

**Acronym:** CDB

**Description:** CDB is the agency’s complaint database maintained on the LAN system. Claris FileMaker Pro 5.5 has been customized for functionality and division specific needs to comply with state mandated reporting of key measures, sharing of data within the agency, processing disks to facilitate crime records checks, student loan and child support defaulters, as well as customer specific open records requests. It contains all of the complaint investigation files for the agency since 1991.

**Size:** The current size of CDB is 12.8 MB. Even with growth within the next 5 years, it is anticipated that its storage capacity will not exceed 1.0 GB.

**GIS:** This database does not support or contain GIS spatial operations/data.

**Sharing:** The data is shared by all agency staff, but not outside the office.

**Future:** Although the agency has no immediate plans for changes or upgrades to the system, we imagine in the next five years that we would try to make the Licensing and the Complaint Database relational. This may require outside FileMaker programming costs beyond current HPC-ITSS services.

**II. Name:** Podiatric Physician Database

**Acronym:** PDB

**Description:** PDB is the agency's primary licensing and regulatory database maintained on the LAN system. Claris FileMaker Pro 5.5 has been customized for functionality and division specific needs to comply with state mandated reporting of key measures, sharing of data within the agency, processing disks to facilitate crime records checks, student loan and child support defaulters, online verification, as well as customer specific open records requests. We also perform downloads of this database to send to TexasOnline for online renewals. This database contains files for anyone who was ever licensed by this agency.

**Size:** The current size of PDB is 9.59 MB. Even with growth within the next 5 years, it is anticipated that its storage capacity will not exceed 1.0 GB.

**GIS:** This database does not support or contain GIS spatial operations/data.

**Sharing:** The data is shared by all agency staff, but not outside the office. Portions of the database are formatted and downloaded to a disk and made available to the Texas Department of Public Safety Crime Records Unit / Controlled Substances Registration Unit, Office of the Attorney General's Child Support Division, the Texas Higher Education Coordinating Board and the Texas Guaranteed Student Loan Corporation as required by various statutes. A download is also sent to TexasOnline for online renewals.

**Future:** Although the agency has no immediate plans for changes or upgrades to the system, we imagine in the next five years that we would try to make the Licensing and the Complaint Database relational. This may require outside FileMaker programming costs beyond current HPC-ITSS services. The agency will also be making the conversion from the PDB to the .dat file that is used by the online verification system to be automatically exported and formatted. This will include creating a program that will extract the data from the database that is needed for the verification, convert the data to the appropriate format, and save it as the appropriate file to be searched from.

**III. Name:** Continuing Medical Education Database

**Acronym:** CMEDB

**Description:** CMEDB is a database into which we no longer input data. We have changed our process for collecting this data from the licensees. We are now doing random audits and the licensees are required to maintain documentation on their own. We are using data on this database as a reference only. Eventually it will probably be purged when it is no longer needed.

**Size:** The current size of CMEDB is 4.34MB. We do not anticipate that it will change due to us no longer inputting data.

**GIS:** This database does not support or contain GIS spatial operations/data.

**Sharing:** The data is shared by all agency staff, but not outside the office.

**Future:** The agency no longer inputs data into this database. It is used as reference material only.

**IV. Name:** Radiologic Technician File

**Acronym:** RTDB

**Description:** RTDB is the agency's database for registering radiologic technicians and is maintained on the LAN system. Claris FileMaker Pro 5.5 has been customized for functionality and division specific needs to comply with state mandated reporting of key measures, sharing of data within the agency, as well as customer specific open records requests. This database contains files for currently registered radiologic technicians as well as some of the ones who no longer have a current registration. We began approximately in 2002 to keep the old ones on the database. Before that time, when they did not renew, they were deleted from the system.

**Size:** The current size of RTDB is 1.11 MB. Even with growth within the next 5 years, it is anticipated that its storage capacity will not exceed 1.0 GB.

**GIS:** This database does not support or contain GIS spatial operations/data.

**Sharing:** The data is shared by all agency staff, but not outside the office.

**Future:** The agency has no immediate plans for changes or upgrades to the system.

**INFORMATION RESOURCES MANAGEMENT ORGANIZATIONS, POLICIES, AND PRACTICES PRIORITIES**

Our agency strictly adheres to state laws and regulations, operating within the mandates and guidelines set by the State and Legislature. Projects are prioritized based on funding and immediate or current needs.

**PLANNING**

Agency needs are reviewed periodically and future requirements assessed, taking into consideration consumer demands, industry trends and technology changes. Long term planning is generally done prior to the development of the Biennial Operating Plan. A project list is reviewed periodically.

**QUALITY ASSURANCE**

Quality Assurance practices are adhered to as required in standard risk management practices. This agency has reviewed the guidelines set out by DIR and is continuously reviewing and implementing them. Successful completion of guidelines are on time and within budget to provide the outcomes as planned. This agency will continue to use widely adopted, non-proprietary standards and guides whenever possible.

**PERSONAL COMPUTER REPLACEMENT SCHEDULE**

Due to limited funds, this agency replaces PC's only as necessary. If cost effective, parts are upgraded or replaced rather than a new PC purchased. We consolidate purchases to obtain volume discounts. It is this agency's goal to replace PC's every three years if possible or by the replacement schedules published by DIR. We also take into consideration not only the

life-cycle of a product but also how long it's technology can be supported and what is appropriate for the agency taking into consideration it's needs, constraints and end users. In FY 2006, we were able to replace 2 monitors and 1 PC via an interagency transfer with HPC.

### **PROCUREMENT**

This agency uses DIR's guidelines on purchases (Planned Procurement Schedule) to assure its compliance with standard procedures. Purchases are made through state HUB or the DIR store. The purchases are made based on findings of continuous hardware and software audits. Software licenses are purchased to remain in compliance with governing laws and rules.

### **DISASTER RECOVERY**

Critical agency data is backed up daily throughout the year via DAT tapes. The website is backed up weekly via ZIP Drives. The agency also offers space in its fireproof safe for individual employees who perform their own backups of data via their computer's internal ZIP/CD drive. UPS for network and compliance with the agency's Disaster Recovery Plan and Business Continuity Plan is currently in consideration for replacement. The agency will be implementing, via the Texas State Library and Archives Commission an offsite backup recovery plan for the agencies critical data.

### **DATA CENTER OPERATIONS**

Our internal network runs on a file server located within our agency. We access the internet and e-mail services via a HUB located in a secure room located within 100 feet of our agency's office. This methodology also is used for our free-standing webserver. Our agency does not possess any funds that would allow us to become involved with WTDROC.

### **STANDARDS**

Our agency has policies and procedures in place regarding the safeguarding and care of IT equipment that meet the standards set by the State. We are compliant with statewide IT standards such as (DIR Rules) Title 1, Part 10, Texas Administrative Code (State Network Standards for Web Design, Internet Domain Names for Government Entities, Sale & Transfer of Computer Hardware & Software, etc). Our Information Resource Manager (located at HPC-ITSS) periodically reviews our IT system to ensure its compliance with statewide standards.

### **CRIMINAL HISTORY RECORD INFORMATION POLICY**

On May 24, 2006, in accordance with Texas Government Code §411.1405, the Texas State Board of Podiatric Medical Examiners, upon approval by the Office of the Attorney General – General Counsel Division, adopted policies and procedures required by state law in conducting certain "Information Technology Employee" criminal background checks. This policy is available for review upon request.

## **TECHNOLOGICAL DEVELOPMENTS**

### ***Impact of technology on current operations***

The Board has been successful in staying current with technological changes. There has been continued success with the Texas On-line renewal process as defined by Texas Government Code §2054.251-267 to provide information technology and web based application functionality to the consumer.

The agency on-line renewal process became available in September 2003. This first year introduced our consumers to the process and resulted in 293 on-line transactions. The number of on-line transactions has now increased by 80%. We continue to send out postcards each year for renewal encouraging everyone to renew online. Therefore, we anticipate small increases for the next 5 years.

Hardware has been upgraded to support the environment and to increase efficiency and accessibility. The agency goal is to further automate reports produced by the licensing database needed for performance reporting requirement. All staff have e-mail capabilities and internet access. The board's network, database and share files are located on a MS Windows 2000 server and secured behind a firewall.

For several years, the agency has had an interagency contract with the Health Professions Council for IT services (HPC-ITSS).

The agency website is located in-house on a stand alone MS Windows 2000 server and secured behind a firewall. The website became fully operation in FY 2000. Updates to the website are published weekly. The agency has full control of content and have included the use of web based applications that allows access of public information regarding a licensee to help better serve our external customers.

### ***Impact of anticipated technology advances***

Upgrading of hardware and software continues to stay technologically compatible with industry demands, while remaining consistent with other agencies and private consumer organizations, and with increasing state government electronic services. IT policies have been written and adopted for acceptable use of information resources, passwords, network security and e-mail. It is also the agency's goal to increase the usage of on-line services and access, as well as, cross-government and interagency activities to our consumers.

### ***Degree of agency automation, telecommunication***

Most of the agency's functions are fully automated. Some reporting functions of data taken from the agency's LAN are semi-automated and some require manual collection of data for reporting. As the budget allows, current applications may require future revisions to be fully automated.

Agency utilized telecommunication technology shared with the other Health Professions Council agencies allow for a toll free number for consumers to leave name and address for complaints. All staff members are equipped with telephones and voice mail functionality.

*Anticipated need for automation*

Private industry trends are influencing state government annually to lean more toward meeting the demands of consumers and providing them with an array of electronic services and e-commerce transactions. There will be a need for more automation in the future. As with all agencies, there will be a challenge to retain the necessary IT talent capable to build and maintain the growing electronic projects and trends. It is the goal of the agency to capitalize on the current return of their investment on information resource assets until IT budgets and funding can be increased to support these trends and remain technically competent among other state agencies, as well as, serving the general public.



## **APPENDIX H: "STATEWIDE CAPITAL PLANNING"**

Section 11.02, Article IX of the 2006-2007 General Appropriations Act requires all state agencies and institutions of higher education to supply capital planning information relating to projects for the 2008-2009 biennium to the Texas Bond Review Board.

On April 10, 2006, the Texas State Board of Podiatric Medical Examiners filed a "2008-2009 Capital Expenditure Plan Reporting Exemption" due to the fact that through Fiscal Years 2007-2011, our agency will not have a project requiring capital expenditures.

**\*\*\*END OF T.S.B.P.M.E. FY 2007-2011 STRATEGIC PLAN SUBMISSION\*\*\***

---

## STRATEGIC PLAN DISTRIBUTION LIST

- (1) The Honorable Rick Perry  
Governor, State of Texas  
State Capitol, Room 2S.1  
P. O. Box 12428  
Austin, Texas 78711 (One copy)
- (2) The Honorable David Dewhurst  
Lieutenant Governor, State of Texas  
State Capitol, Room 2E.13  
P. O. Box 12068  
Austin, Texas 78711 (One copy)
- (3) The Honorable Tom Craddick  
Speaker of the House of Representatives  
State Capitol, Room 2W.13  
P. O. Box 2910  
Austin, Texas 78768-2910 (One copy)
- (4) The Honorable Carole Keeton Strayhorn  
Comptroller of Public Accounts  
LBJ State Office Building, Room 104  
P. O. Box 13528  
Austin, Texas 78774 (One copy)
- (5) Legislative Reference Library  
State Capitol, Room 2N.3  
P. O. Box 12488  
Austin, Texas 78711 (Two copies)
- (6) John Keel, CPA  
State Auditor  
1501 N. Congress Avenue  
P. O. Box 12067  
Austin, Texas 78711 (Two copies)
- (7) Sunset Advisory Commission  
1501 N. Congress Avenue  
P. O. Box 13066  
Austin, Texas 78711 (One copy)
- (8) Governor's Office of Budget, Planning and Policy  
Fourth Floor, State Insurance Bldg.  
P. O. Box 12428  
Austin, Texas 78711 (Two copies)
- (9) Legislative Budget Board  
1501 N. Congress Avenue  
P. O. Box 12666  
Austin, Texas 78711 (Six copies)
- (10) Texas State Library,  
Texas State Publications Clearinghouse  
Lorenzo de Zavala State Archives  
and Library Building  
P. O. Box 12927  
Austin, Texas 78711 (Two copies)
- (11) House Appropriations Committee  
State Capitol Extension, Room E1.032  
P. O. Box 2910  
Austin, Texas 78768-2910 (One copy)
- (12) Senate Finance Committee  
State Capitol Extension, Room E1.038  
P. O. Box 12068  
Austin, Texas 78711 (One copy)