

# **Veterinary Medical Examining Board**

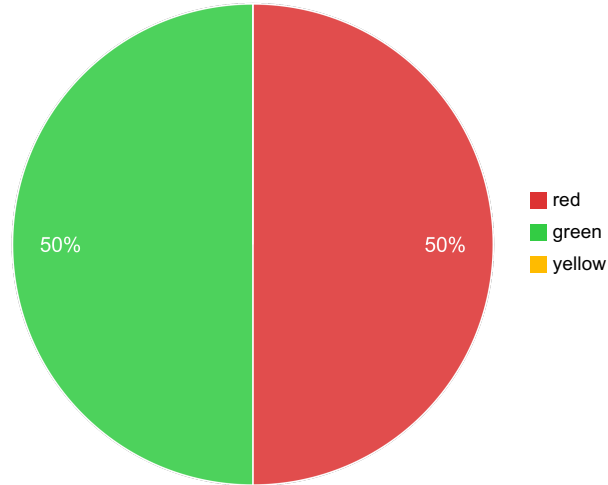
Annual Performance Progress Report

Reporting Year 2024

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KPM #	Approved Key Performance Measures (KPMs)
1	Public Protection - Average time from receipt of a new complaint to completion of the investigation.
3	Customer Service - Percent of customers rating their overall satisfaction with the agency above average or excellent.
4	Best Practices - Percent of best practices met by the Board.
5	Facility Inspections - Percent of registered veterinary facilities inspected within three years of last inspection.

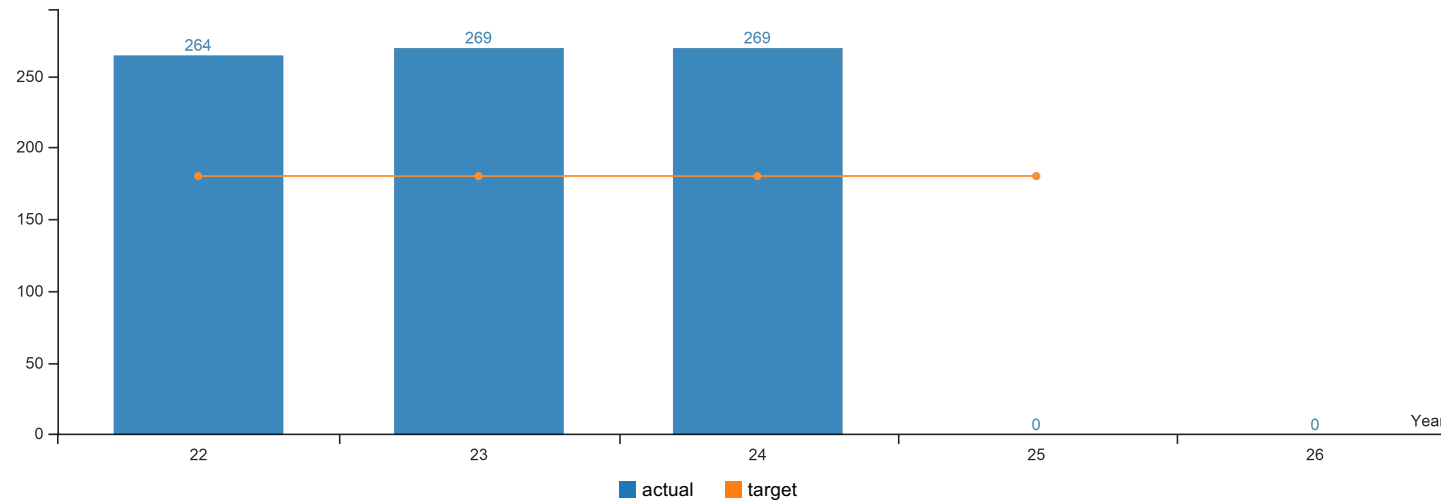
Proposal	Proposed Key Performance Measures (KPMs)
New	License Processing - The average number of business days to process a license once a complete application is received.



Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	50%	0%	50%

KPM #1	Public Protection - Average time from receipt of a new complaint to completion of the investigation.
	Data Collection Period: Jan 01 - Jan 01

\* Upward Trend = negative result



Report Year	2022	2023	2024	2025	2026
<b>Average Time from Receipt of a New Complaint to Completion of Investigation</b>					
Actual	264	269	269		
Target	180	180	180	180	

### How Are We Doing

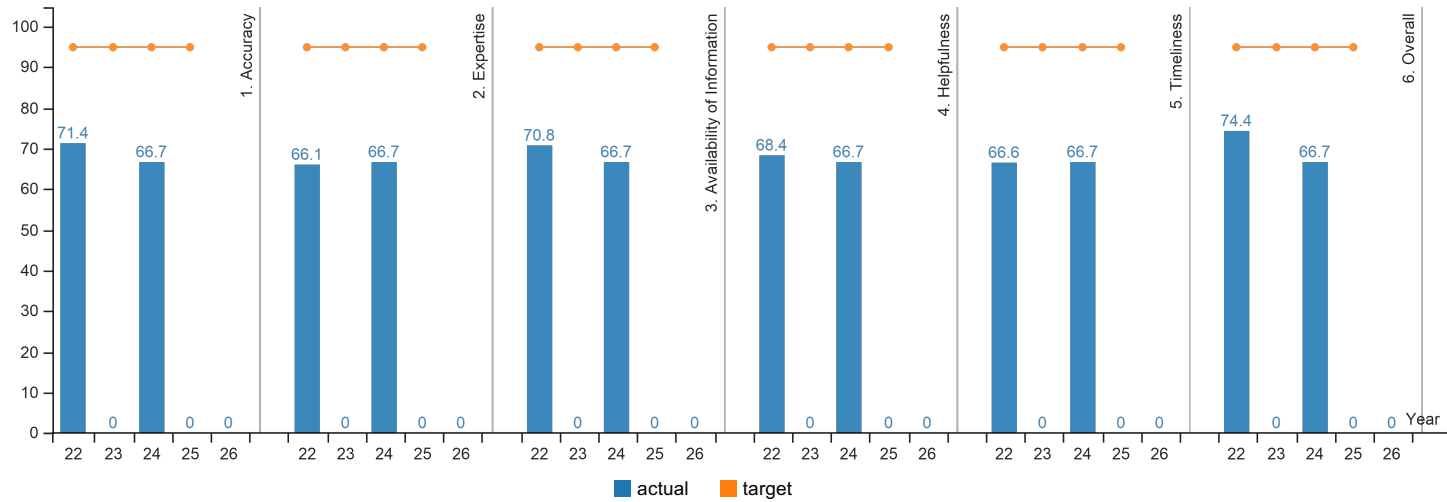
#### Factors Affecting Results

In February 2023, we added a second Investigator position to help address the long-standing backlog of cases, brought on by Covid period factors, including drastic increase in pet ownership and a quick decline in practicing veterinary professionals. We had seen a near 160% increase in cases during that time.

The additional Investigator had nearly immediate impact on our caseload. Within 18 months, nearly all cases over a year old were closed.

Cases continue to come in at an accelerated pace. However, with the second inspector, we are able to respond appropriately, and close these cases in a timely manner, more closely aligned with our targets.

KPM #3	Customer Service - Percent of customers rating their overall satisfaction with the agency above average or excellent.
	Data Collection Period: Jan 01 - Dec 31



Report Year	2022	2023	2024	2025	2026
<b>1. Accuracy</b>					
Actual	71.40%	0%	66.70%		
Target	95%	95%	95%	95%	
<b>2. Expertise</b>					
Actual	66.10%	0%	66.70%		
Target	95%	95%	95%	95%	
<b>3. Availability of Information</b>					
Actual	70.80%	0%	66.70%		
Target	95%	95%	95%	95%	
<b>4. Helpfulness</b>					
Actual	68.40%	0%	66.70%		
Target	95%	95%	95%	95%	
<b>5. Timeliness</b>					
Actual	66.60%	0%	66.70%		
Target	95%	95%	95%	95%	
<b>6. Overall</b>					
Actual	74.40%	0%	66.70%		
Target	95%	95%	95%	95%	

How Are We Doing

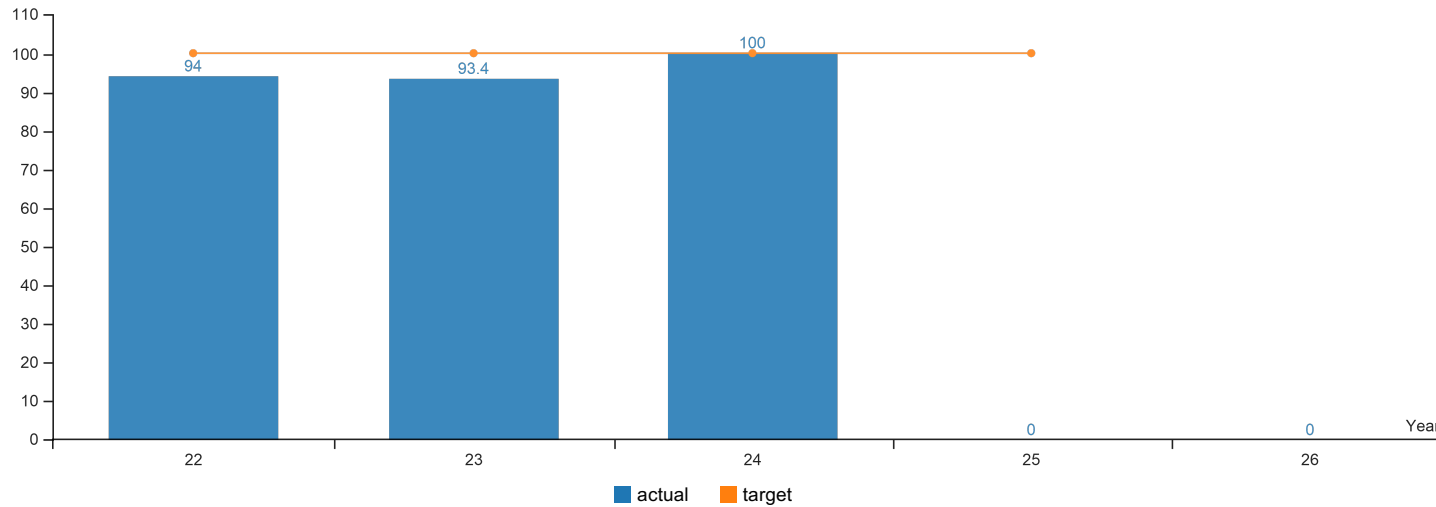
OVMEB is not currently meeting our target for this KPM.

**Factors Affecting Results**

This survey had a very low participation rate. It would be helpful to broadcast this survey to our licensees, the public and our partners in order to get a more diverse reflection on the service we provide.

KPM #4	Best Practices - Percent of best practices met by the Board.
	Data Collection Period: Jan 01 - Jan 01

\* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
<b>BEST PRACTICES</b>					
Actual	94%	93.40%	100%		
Target	100%	100%	100%	100%	

#### How Are We Doing

OVMEB has no data to present currently.

#### Factors Affecting Results

OVMEB collected best practices survey following our October 2024 Board Meeting

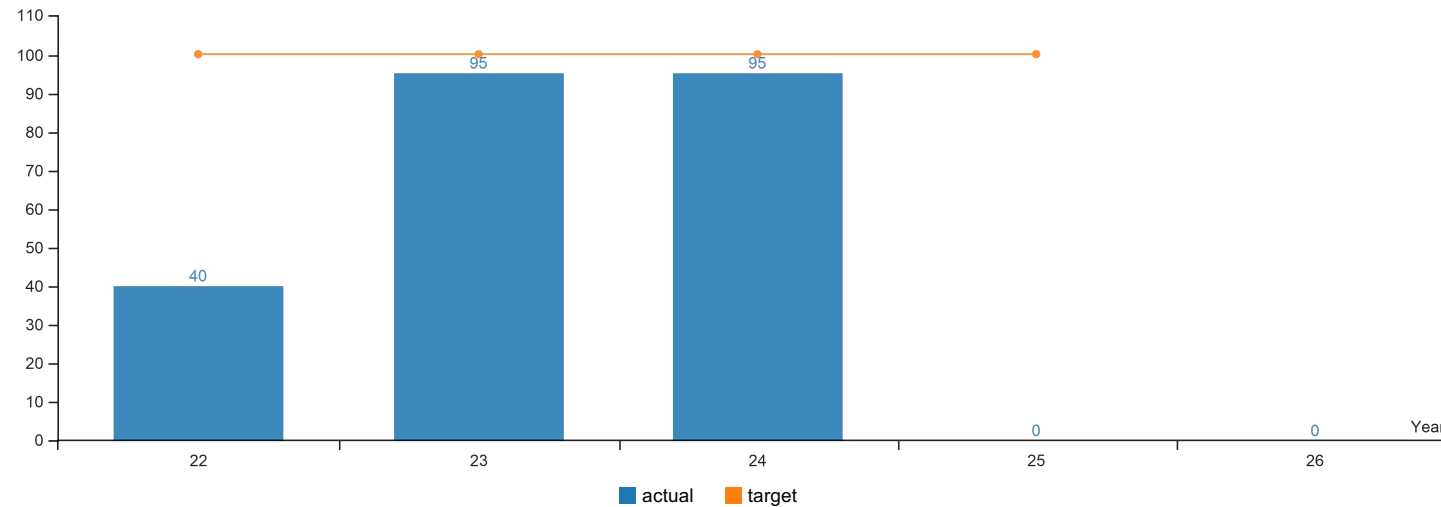
OVMEB Director provided an overview of this survey and our process for those.

Best Practices Criteria	Additional Context / Information
1. Executive Director's performance expectations are current.	These are covered as part of Director's Performance Evaluation. Completed in 2024.
2. Executive Director's receives annual performance feedback.	Completed with HR Following Performance Evaluation.
3. The agency's mission and high-level goals are current and applicable.	Mission statement predominant on agency website, Strategic Plan, etc.

Best Practices Criteria	Additional Context / Information
4. The board reviews the <i>Annual Performance Progress Report</i> .	This is a report of our Key Performance Measures (KPMs), most of which are covered in Director's Report. All are reviewed yearly, usually at October Board meeting. Full year APPR report available on our website.
5. The board is appropriately involved in review of agency's key communications.	Director and staff regularly review all major communication, i.e. guidelines, policies, rule changes at Board Meetings prior to publishing.
6. The board is appropriately involved in policy-making activities.	Director and staff proactively consult Board for policy making or change at Board Meetings.
7. The agency's policy option packages are aligned with their mission and goals.	Policy Option Packages include things like fee increases, staffing changes – big changes to agency or policy.
8. The board reviews all proposed budgets.	Budget reviews the budget regularly as part of Director's Report. Available on agency website.
9. The board periodically reviews key financial information and audit findings.	Director provides a copy of quarterly budget and financial docs on Ipads with Board Meeting materials.
10. The board is appropriately accounting for resources.	Director meets monthly with DAS-Shared Financial Services to review accounts payable and receivable as well as projections. Director reports a summary of these and any issues in Director's Report.
11. The agency adheres to accounting rules and other relevant financial controls.	DAS-SFS partner provides guidance on this regularly.
12. Board members act in accordance with their roles as public representatives.	Director provides Boards and Commissions Handbook. Agency AAG representative regularly provides guidance to public meetings, DAS HR provides guidance as to member roles. Director communicates regularly with Board Members regarding any changes or issues.
13. The board coordinates with others where responsibilities and interests overlap.	AAG, HR provide guidance in these areas. Director Communicates to Board.
14. The board members identify and attend appropriate training sessions.	Director provides guidance regarding required training. Director seeks opportunities for additional training in Board Meetings or Board retreats, when possible.
15. The board reviews its management practices to ensure best practices are utilized.	Regularly reviewing the financials; sharing internal practices to reduce financial risks related to Accounts Receivable/Payable; ensuring Board is effectively managing the board meetings following Robert's rules, Board of Ethics guidelines, etc.
16. Others  <i>[The board may add additional best practices; however, they are not to be counted when calculating the percentage adherence to best practices.]</i>	If the Board identifies an additional area of focus here, please reach out to Director to coordinate discussion and potential additional Best Practices.

KPM #5	Facility Inspections - Percent of registered veterinary facilities inspected within three years of last inspection.
	Data Collection Period: Jan 01 - Jan 01

\* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
<b>Facility Inspections</b>					
Actual	40%	95%	95%		
Target	100%	100%	100%	100%	

#### How Are We Doing

We are approaching our goal for this KPM.

#### Factors Affecting Results

OVMEB's inspections paused due to the retirement of longtime inspector in June 2023. 95% of inspections for 2023 had been completed as of September 20th. A new OVMEB inspector joined the Board at the end of 2023, has been training to conduct inspections, and has begun processing the backlog of inspections that were due from last June 2023 – present.

The OVMEB inspection process was reviewed and some updates were implemented, including streamlining our process, particularly in terms of scheduling appointments, and migrating from paper inspection forms to a more digitally oriented inspection process.

Given the challenges during this biennium and the changes in personnel, the 95% inspection rate is a success. It maintains a trajectory to achieve our goal for this KPM