

Appendix F

Survey of Organizational Excellence

Introduction

The Survey of Organizational Excellence (SOE), designed by and conducted under contract with the University of Texas School of Social Work, offers participating agencies the opportunity to observe agency employees' perceptions and opinions of their employment experience over time. Understanding how employees perceive various aspects of the workplace is critical to implementing successful change. Data gathered over time becomes a valuable record of organizational change. The SOE addresses five Workplace Dimensions—Work Group Perceptions, Physical Work Setting/Accommodations, Organizational Features, Communication Patterns, and Personal Demands. Taken together, these dimensions reflect aspects of the total work environment.

Twenty survey constructs support the five Workplace Dimensions. The constructs are designed to profile organizational strengths and weaknesses so that interventions, if required, can be targeted appropriately. These constructs offer data on how employees view the organization and provide management with information on potential areas where action may strengthen the organization's functionality, efficiency, or effectiveness. Scores for the constructs range from a low of 100 to a high of 500, with 300 as the neutral midpoint on the scale.

HHS System Participation

The state fiscal year 2004 SOE results compare judiciously to results from the survey conducted in state fiscal year 2002. The survey iteration for state fiscal year 2003–2004 examines the health and human services (HHS) agencies as they existed prior to the consolidation required by H.B. 2292. In state fiscal year 2002, 10 of the 12 agencies that comprised the HHS system participated in the survey. Only six of the HHS agencies participated in the state fiscal year 2004 survey:

- Department on Aging (TDoA), with 13 respondents;
- Department of Health (TDH), with 2,526 respondents;
- Interagency Council on Early Childhood Intervention (ECI), with 41 respondents;

- Department of Protective and Regulatory Services (TDPRS), with 4,006 respondents;
- Department of Mental Health and Mental Retardation (TDMHMR), with 3,587 respondents; and
- Department of Human Services (TDHS), with 7,231 respondents.

Table F.1 compares agency participation between survey iterations. The overall response rate for the HHS system was 63.4 percent in state fiscal year 2002 and 55.8 percent in state fiscal year 2004. The survey results reflect a survey environment of change and uncertainty as 12 agencies transform into five. This environmental stress may account for differences in agency participation, overall response rates, and changes in survey results between the two survey iterations. Differences in sample size and methodology between the two iterations may have affected the results as well.

In lieu of participation in the SOE, the Health and Human Services Commission (HHSC or the Commission) elected to contract separately with the University of Texas to conduct two surveys: the first gauging employees' experiences with the changes, and the second posing a similar set of questions to stakeholders. Both surveys focus heavily on organizational communication to determine what information is most helpful to employees and stakeholders, and to identify communication gaps as HHSC leads the HHS system through the transformation required by H.B. 2292. The stakeholder survey also includes questions for contractors to ensure that they continue to have the information and resources necessary to provide services under contracts with the health and human services agencies.

Both surveys were conducted initially in early 2004. The University of Texas has not completed analysis of the data, rendering a summary of these early results unavailable at this time. The Commission intends to continue the surveys throughout the transformation period (ending in 2005), in an effort to continually monitor the experiences of staff and stakeholders, and to make organizational improvements in the management of major change.

HHS System Performance

The synthesis score (average of the results for all 20 survey constructs) for the six agencies was 331. While there were small gains in some scores for each agency, the system registered an overall 4.2 percent decrease from the previous survey when the synthesis score was 345. When examining the 20 constructs that measure overall satisfaction with the work environment, scores for Employee Development and Benefits were nine percent lower in state fiscal year 2004 than in the state fiscal year 2002 survey, most likely a

result of benefit reductions due to budget cuts during the 78th Legislature, 2003, Regular Session.

Of the six HHS agencies that responded in state fiscal year 2004 the following 10 constructs reported scores that were more than five percent lower than scores reported in state fiscal year 2002:

Table F.1. Health and Human Services (HHS) Agency Participation in the 2002 and 2004 SOEs		
HHS Agency	FY 2002 Survey	FY 2004 Survey
Texas Department on Aging (TDoA)	✓	✓
Texas Commission on Alcohol and Drug Abuse (TCADA)	✓	
Texas Commission for the Blind (TCB)	✓	
Texas Commission for the Deaf and Hard of Hearing (TCDHH)	✓	
Interagency Council on Early Childhood Intervention (ECI)	✓	✓
Texas Department of Health (TDH)	✓	✓
Health and Human Services Commission (HHSC)		
Texas Department of Human Services (TDHS)	✓	✓
Department of Mental Health and Mental Retardation (TDMHMR)	✓	✓
Texas Department of Protective and Regulatory Services (TDPRS)	✓	✓
Texas Rehabilitation Commission (TRC)	✓	
Texas Health Care Information Council		

- **Supervisor Effectiveness** (333 to 313—6.00 percent lower) Provides insight into the nature of supervisory relationships in the organization, including the quality of communication, leadership, and fairness that employees perceive exist between supervisors and themselves.
- **Fairness** (350 to 329—6.05 percent lower) Measures the extent to which employees believe that equal and fair opportunity exists for all members of the organization.
- **Benefits** (374 to 335—10.52 percent lower) Provides a good indication of the role the benefit package plays in attracting and retaining employees in the organization. It reflects comparable benefits that employees feel exist with other organizations in the area.
- **Fair Pay** (239 to 223—6.94 percent lower) Addresses perceptions of the overall compensation package offered by the organization. It describes how well the compensation package "holds up" when employees compare it to similar jobs in other organizations.

- **Employment Development** (354 to 322—9.10 percent lower) Captures the perception of the priority given to the career and personal development of employees by the organization.
- **Diversity** (350 to 328—5.76 percent lower) Addresses the extent to which employees feel that individual differences, including ethnicity, age and lifestyle, may result in alienation and/or missed opportunities for learning or advancement.
- **Holographic** (344 to 324—5.76 percent lower) Refers to the degree that all actions of the organization "hang together" and are understood by all. It concerns employees' perceptions of the consistency of decision-making and activity within the organization.
- **Internal** (325 to 309—5.09 percent lower) Captures the nature of communication exchanges within the organization. It addresses the extent to which employees view information exchanges as open and productive.
- **Burnout** (360 to 340—5.56 percent lower) Refers to a feeling of extreme mental exhaustion that can negatively affect employees' physical health and job performance, leading to lost resources and opportunities in the organization (N.B. a higher score equates to a lower level of burnout).
- **Empowerment** (347 to 329—5.24 percent lower) Measures the degree to which employees feel that they have some control over their jobs and the outcome of their efforts.

Analysis

The constructs listed were likely influenced by the ongoing, systemic, organizational change currently existing within the HHS system. For example, the constructs concerning holographic, internal, availability, change oriented, and physical environment all contain language directed at organizational awareness, job security, and availability of information within and outside an organization.

Supervisory effectiveness, fairness and employee development were also affected negatively. A lack of information and extensive change can interrupt otherwise consistent patterns of supervision. As job functions change or individuals are reassigned to new positions, coworkers may sense a lack of fairness in decisions made by management staff; thus, impacting fairness as well as supervisory effectiveness. As positions change and responsibilities shift, professional development may be halted in order to focus on the needed implementation of new organizational structures and programs.

While the participating six HHS agencies had significantly lower scores in state fiscal year 2004 than in state fiscal year 2002, the scores with the largest percentage drops occurred in the Benefits construct section. (See Figure F.1.) It is difficult to draw system wide conclusions based on the number of survey respondents, however, the lowering of scores combined with the lower response rate does indicate that HHS employee's morale decreased between iterations of the survey.

Figure F.1.
HHS System Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

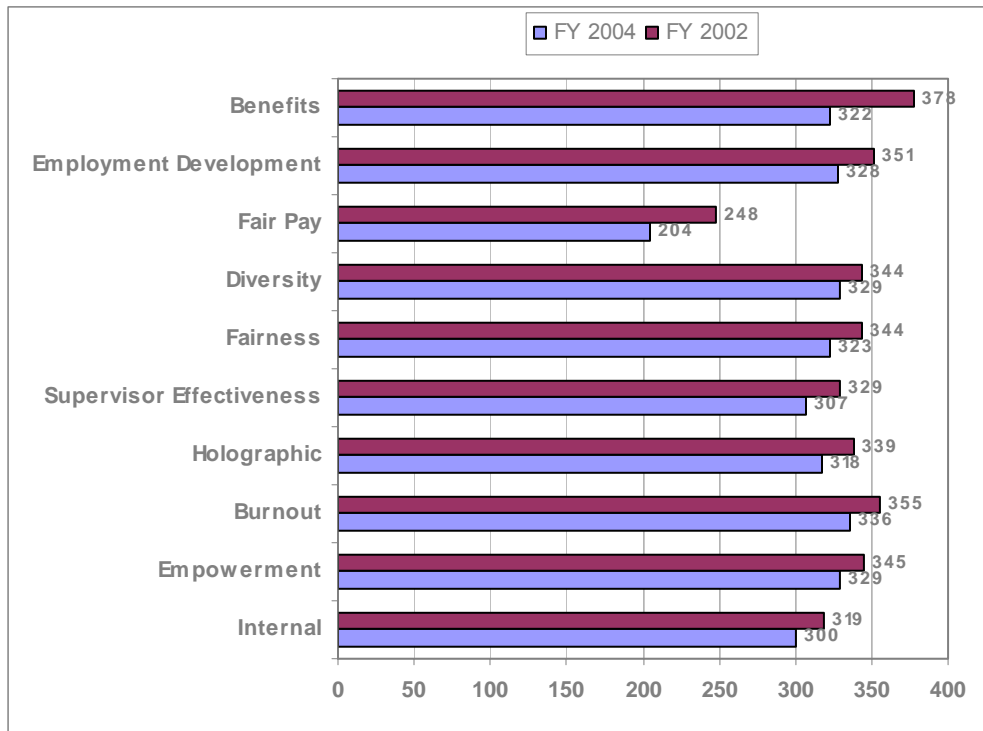


Figure F.1: University of Texas School of Social Work, HHS System Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

HHS Individual Agency Survey Results

Texas Department of Health

The TDH had a very high response rate in both years (57 and 61 percent respectively). According to the University of Texas surveyors, a high response rate indicates that employees have an investment in the organization, want to see the organization improve, and generally have a sense of responsibility to the organization. Agency scores were generally in line with the system wide scores. (See Figure F.2.) The decrease in scores in all categories was only slightly higher than the system average.

Figure F.2.
TDH Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

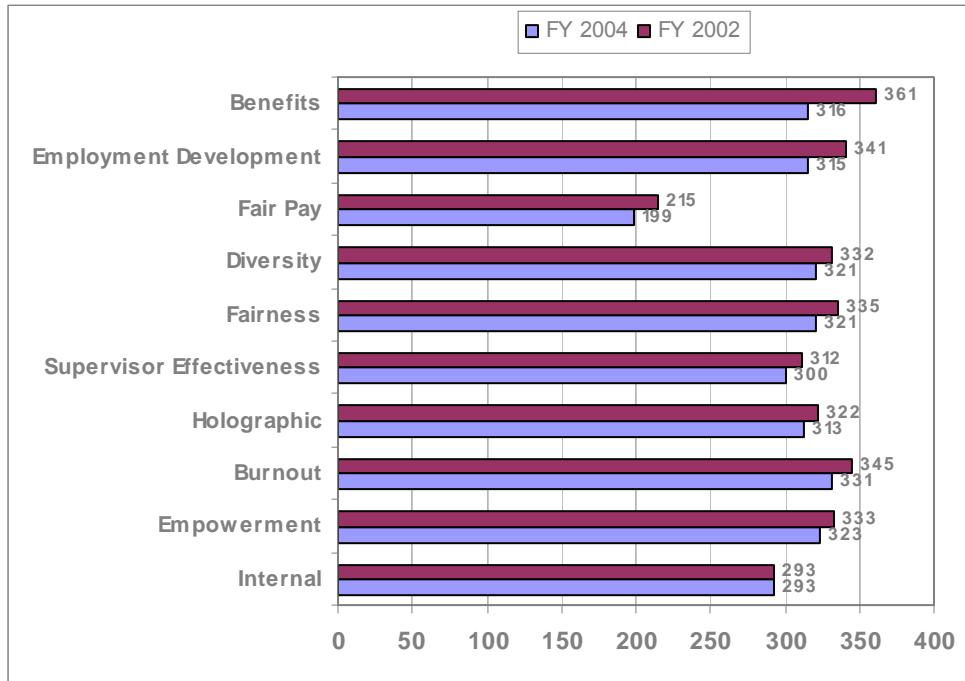


Figure F.2: University of Texas School of Social Work, TDH Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

Texas Department of Human Services

The TDHS response rate remained in the high category at 60 percent, again indicating that employees have an investment in the organization, want to see the organization improve, and generally have a sense of responsibility to the organization. Agency scores were generally lower than the systemwide scores. (See Figure F.3.) However, the decreases in scores were not as large as scores systemwide.

Figure F.3.
TDHS Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

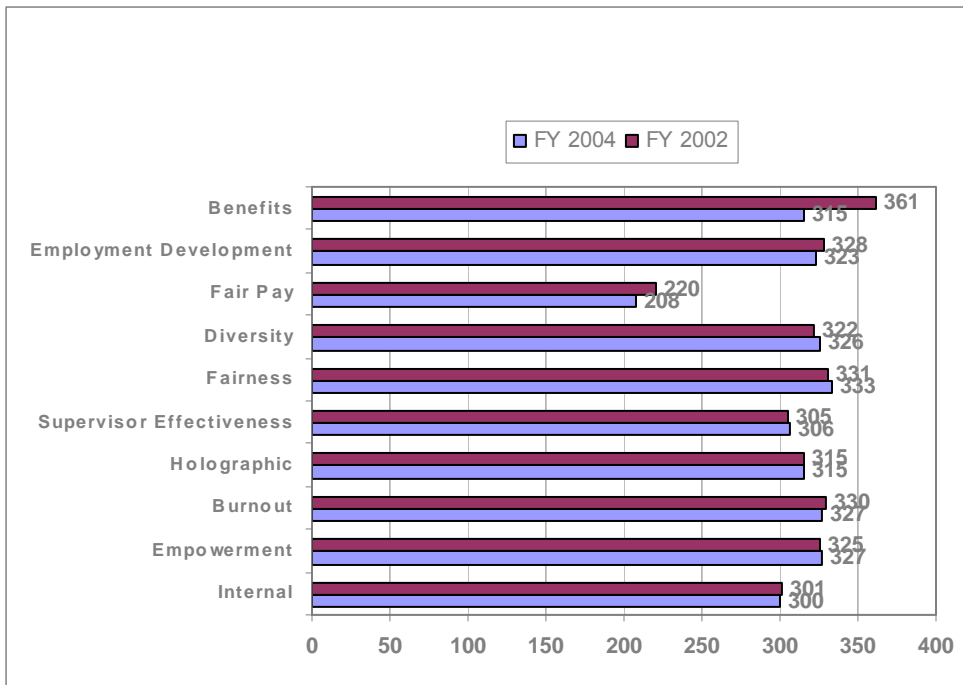


Figure F.3: University of Texas School of Social Work, TDHS Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

Texas Department of Protective and Regulatory Services

The TDPRS response rate remained in the high category at 64 percent, again indicating that employees have an investment in the organization, want to see the organization improve, and generally have a sense of responsibility to the organization. Agency scores were generally in line with the systemwide scores. (See Figure F.4.) The decrease in scores in all categories was only slightly lower than the system average.

Figure F.4.
TDPRS Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

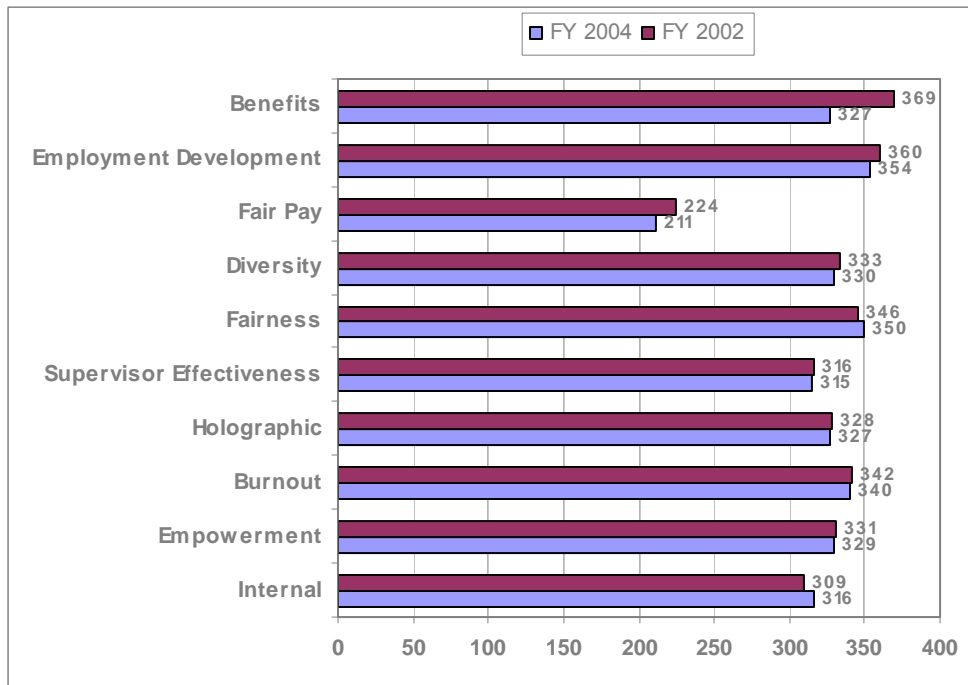


Figure F.4: University of Texas School of Social Work, TDPRS Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

Interagency Council on Early Childhood Intervention

While ECI is one of the smaller agencies, the employees have shown a high degree of investment in the future. For the fiscal year 2004 survey, 41 out of 54 employees (76 percent) completed the survey. This figure is a decrease from the 2002 survey, when 53 out of 60 (88 percent) responded to the survey. Scores were generally higher than the system average. (See Figure F.5)

Figure F.5.
ECI Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

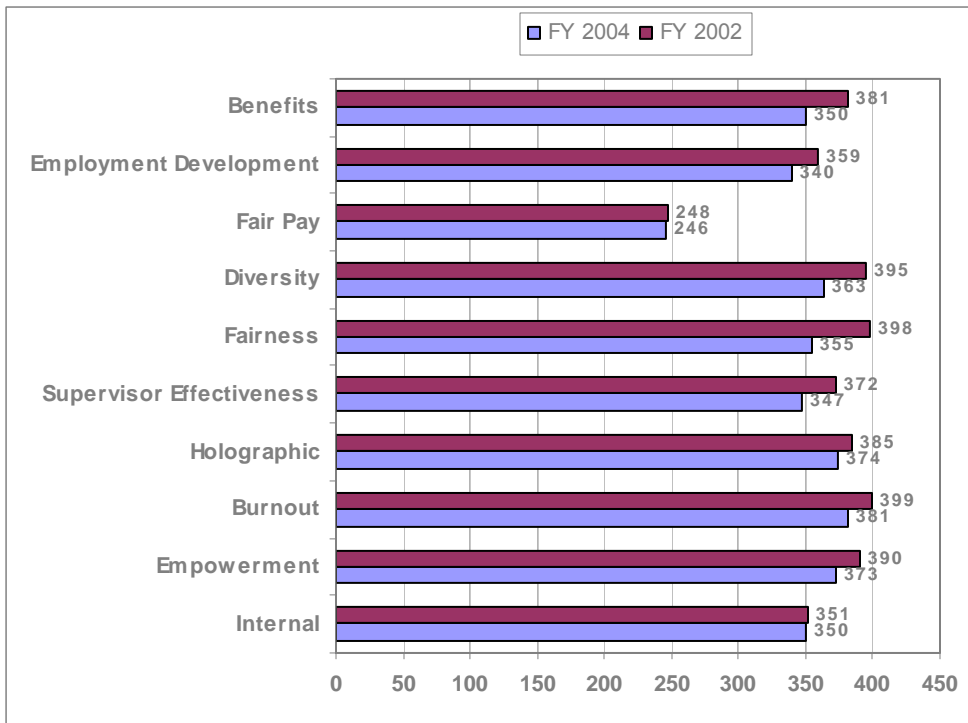


Figure F.5: University of Texas School of Social Work, ECI Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

Texas Department of Mental Health and Mental Retardation

The changes occurring at TDMHMR are unique, as the current agency configuration will be split between two of the new HHS departments. Though the response rate increased, rates at TDMHMR have been in the 30 percent range for several years. Low response rates can mean several things according to the survey creators. There simply may not have been enough effort to make certain employees aware of the importance of completing the SOE. Low rates of response suggest a lack of organization focus or responsiveness. Further, it may suggest critical levels of employee alienation, anger or indifference to organizational responsibilities. The change in TDMHMR's scores were significantly less in all categories except for Benefits and Fair Pay, which were roughly the same as the agency average. (See Figure F.6.)

Figure F.6.
TDMHMR Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

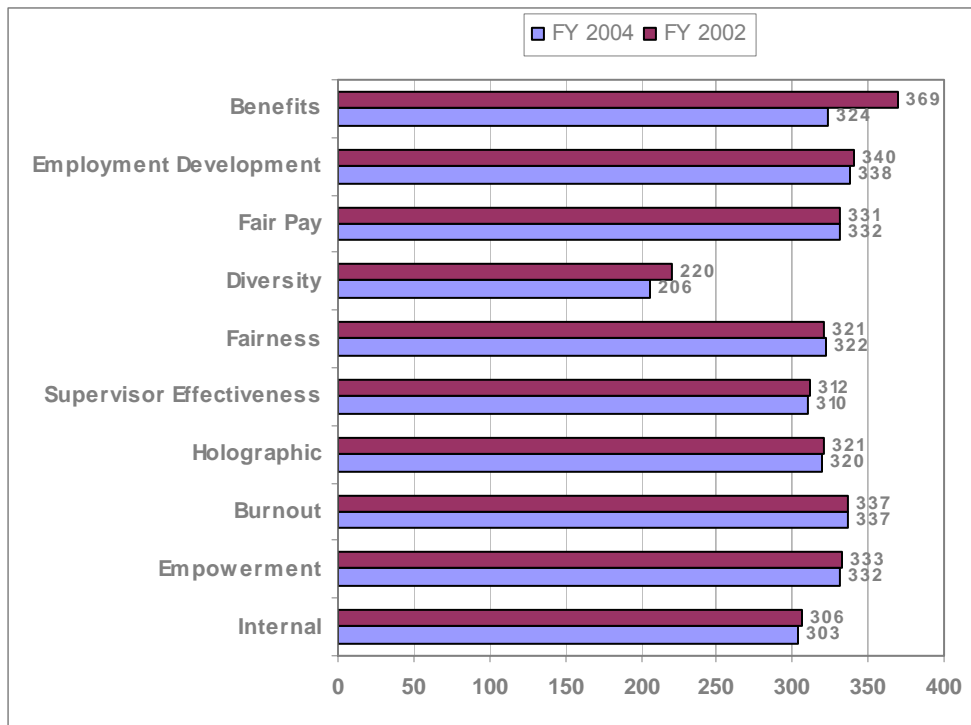


Figure F.6: University of Texas School of Social Work, TDMHMR Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

Texas Department on Aging

Response rates at TDoA were significantly lower for state fiscal year 2004, when 13 out of 30 employees (or 43 percent) responded, compared with 61 percent for state fiscal year 2002 (19 out of 31 employees). Conversely, the agency changes in scores were significantly higher than average. (See Figure F.7.) The significant declines in participation and construct scores may reflect several factors, including the merger of TDoA into a larger agency. The agency also moved from one building to another as the survey took place.

Figure F.7.
TDoA Average Top 10 Survey Construct Changes
from State Fiscal Years 2002-2004

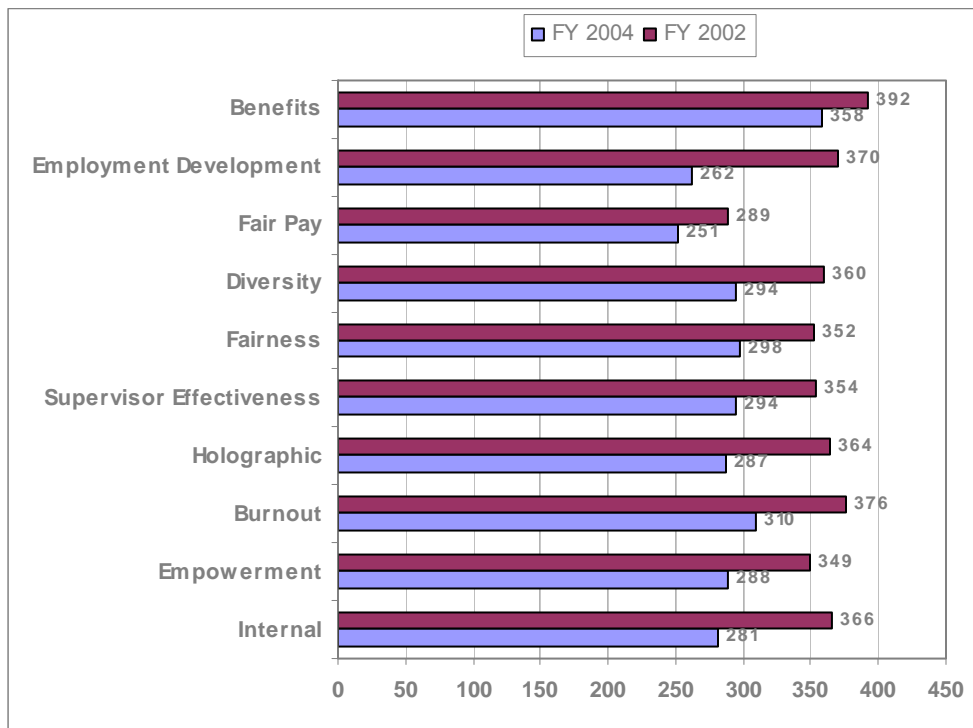


Figure F.7: University of Texas School of Social Work, TDoA Survey of Organizational Excellence, 2004, and HHSC Center for Strategic Decision Support.

HHS System Plan for Improvement

This is a challenging time for all of the HHS agencies and their staffs. The survey creators at the University of Texas School of Social Work point out in their reports back to the agency: “This year will prove as an important benchmark year as the economy starts to recover. Any number of events, both within and outside of agency control can affect scores. While score changes cannot be attributed directly to one particular event, it is worthwhile

to consider a wide range of possibilities.” House Bill 2292 mandated a fundamental transformation of the HHS system by consolidating 12 existing agencies into four new departments under the oversight of HHSC. In an attempt to lessen the confusion and concerns surrounding the consolidation, HHSC developed the following initiatives to improve communication with HHS employees and the public:

Public Website: State employees and the public can access this website to obtain updated information on transformations occurring within the HHS system.

HHSC Website: State Employees can submit suggestions regarding the HHS transformation and can also submit questions on this website. A “Frequently Asked Questions” icon directs employees to each question and answer that has been submitted. The internal website also has a link to the Program Management Offices (PMO) located in each agency. These offices are charged with implementing and monitoring a number of transformation initiatives. The site also lists HHSC policies and resources for those employees who are transferring into HHSC as a result of reorganization.

E-News: State employees and the public can subscribe to E-News, which provides ongoing updates on the transformation of the health and human services system.

The Connection Newsletter: The Commission is using email to distribute *The Connection*, a newsletter for all HHS employees. The newsletter announces agency reorganizations, introduces new management, and provides links to the PMOs and answers to employee questions.

As these results reveal, the HHS system workers are experiencing a time of uncertainty. Through this period the HHS leadership and staff are focused on mission of the HHS system and the commitment shared by its staff to serving Texans in need. This is an unprecedented effort to redesign a service delivery system that will be more focused on client needs, have greater accountability, and achieve significant administrative savings that will make a difference to all Texans.