

Oregon Department of Human Services
Summary Scorecard
Fundamentals

Revised: 8/12/2014

No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green			

OUTCOMES

O1: Safety

a	Re-abuse Rate	# of individuals who have experienced abuse more than once a year divided by the # of all people who have experienced abuse. (summary calculation)	%	3.65	3.8	3.7	6.0	-	> 5.4 %	5.4% - 4.1%	<4.1%	0%	Q	Lois Day
	APD	% of individuals in a facility who have experienced abuse more than once a year divided by the # of all people who have experienced abuse.	%	5	5	6.0	13.2	-	> 5.4 %	5.4% - 4.1%	<4.1%	0%		Marie Cervantes, John Thompson
	APD	% of individuals in community setting who have experienced abuse more than once a year divided by the # of all people who have experienced abuse.	%	1.4	1.2	1.3	1.2	+	> 5.4 %	5.4% - 4.1%	<4.1%	0%		Marie Cervantes, John Thompson
	CW	% of individuals who have experienced abuse more than once a year divided by the # of all people who have experienced abuse.	%	2.6	4.2	3.5	4.7	-	> 5.4 %	5.4% - 4.1%	<4.1%	0%	Q	Lois Day
	DD	% of individuals who have experienced abuse more than once a year divided by the # of all people who have experienced abuse.	%	5.6	4.9	4.0	4.8	-	> 5.4 %	5.4% - 4.1%	<4.1%	0%	A	Marie Cervantes John Thompson
b	Abuse Rate	% abuse in licensed and certified programs.		0.67	0.75	0.34	0.48	-	>0.49%	0.49%-0.33%	<0.33%	0%	Q	Lois Day
	APD	% abuse in licensed and certified programs.	%	0.6	0.6	0.3	0.8	-	>0.49%	0.49%-0.33%	<0.33%	0%	Q	Marie Cervantes, John Thompson
	CW	% abuse in licensed and certified programs.	%	0.3	0.54	0.39	0.35	+	>0.49%	0.49%-0.33%	<0.33%	0%	Q	Lois Day
	DD	% abuse in licensed and certified programs.	%	1.1	1.1	1.0	0.9	+	>1.5%	1.5-.75	<.75	0%	Q	Marie Cervantes, John Thompson

O2: People Living as Independently as Possible

a	In Home Service	A composite of program reported results as compared to program target.	%	71	72	71	72	+	<40%	41% - 75%	>75%	80%	Q	Trisha Baxter Jerry Waybrant
	APD	% of people who receive Medicaid services in their own home or a family member's home (RAFH) in lieu of a licensed care facility.	%	47	47	49	50.14	+	<40%	40%-48%	>48%	50%	S-A	Jane-Ellen Weidanz
	CW	% of children qualifying for CW services who are receiving services at home in lieu of foster care placement.	%	19.5	18.3	16.4	14.9	-	< 20%	20 - 40%	> 40%	50%	D	Stacey Ayers
	DD	% of DD enrolled clients receiving services in their own home.	%	68	72	68.5	72	+	< 60%	60-80%	> 80%	85%	S-A	DD scorecard sent from Trisha

45 total Measures
 40 Measures to be Populated
 40 Measures Populated
 16 Red, 17 Yellow, 7 Green

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b	Successful Employment	A composite of program reported results as compared to program target.	%	89	97.3	92.9	96.8	+	<35%	35%-65%	>65%	90%	S-A	Trisha Baxter Jerry Waybrant	
	DD	% of working age adults engaged in integrated employment.	%	22.8	22.8	27	27	=	< 20%	20-35%	> 35%	40%	S-A	Mike Maley	
	SSP (1)	% of target met for TANF clients placed in employment.	%	112.6	132.8	109.3	130	+	<70%	70%-90%	>90%	100%	M	Xochitl Esparza	
	SSP (2)	% of TANF participants who have been employed in four continuous quarters after the placement quarter.	%			40.2	40.2	=	<35%	35%-44%	>44%	50%	Q	Xochitl Esparza	
	SSP (3)	% of people not on TANF 18 months after job placement.	%			70.4	67.4	-	<50%	50%-61%	>61%	65%	M	Xochitl Esparza	
	VR	% of clients who are employed or have left services due to employment.	%	58	61	60.33	61.83	-	<50%	50-55.8%	>55.8%	60%	Q	Joe Miller	
c	Earning Sufficient Wages	A composite of program reported results as compared to program target.	%	81.3	82.5	90.9	88	-	<80%	80-90%	>90%	100%	S-A	Trisha Baxter Jerry Waybrant	
	DD (1)	% of people earning wages in DD54 (Employment and Alternatives to Employment) services that earn minimum wage or higher.	%	32	32	38	38	=	< 30%	30-50%	> 50%	60%	S-A	Mike Maley	
	DD (2)	% of people earning wages in Supported Employment that earn minimum wage or higher.	%	56	56	62	62	=	< 30%	30-50%	> 50%	60%	S-A	Mike Maley	
	SSP (1)	% of TANF placements who's starting wage is at or above \$11.55 per hour	%	15.9	18.5	22.7	20	+	<15%	15-17%	>17%	20%	Q	Xochitl Esparza	
	SSP (2)	Percent of job placements leading to TANF closure.	%			82.2	82	-	<84%	84%-94%	>94%	97%	Q	Xochitl Esparza	
	VR	% of people who have receiving employment related services and are earning "competitive" wage or better	%	99	91	89	89	=	<80%	80-90%	>90%	100%		Joe Miller	
O3: Fiscally Responsible															
a	On Target Spend	% of spending plans within target.	%	0	44.4	33.33	55	-	< 80%	80% - 90%	> 90%	100%	Q	Eric Moore	
b	Balanced Budget	Agency spending "is" or "is not" within spending plan.		No	No	No	No	=	No	N/A	Yes	Yes	Q	Eric Moore	
O4: Customer Satisfaction															
a	Customer Satisfaction	% of responding customers that rank quality of DHS service as "good" or "excellent."	%		83	85	85	+	<75%	75% - 90%	>90%	100%	Q	Gene Evans	
	APD	TBD	%											Angela Munkers	
	APD	PLACEHOLDER - APD CLIENT SURVEY	%						TBD	TBD	TBD	TBD	TBD	Dale Marande	

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	APD	Percent of STEPS service recipients who rate training as good or excellent in relation to person centered-ness, quality and usefulness of services.	%			S-A			<75%	75-90%	>90%	TBD	S-A	Cheryl Miller	
	CW	TBD	%						<75%	75% - 90%	>90%	100%		TBD	
	DD	% of responding Adult In-Home customers that rank the service they receive as "meeting" or "exceeding" expectations.	%			NCI			<75%	75% - 90%	>90%	100%		Marilee Bell	
	DD	% of responding adults who receive residential services (Group Home, Foster Care) that indicate their satisfaction with services as meeting or exceeding their expectations.	%			NCI			<75%	75% - 90%	>90%	100%		Marilee Bell, Darlene O'Keeffe, Sherri Yoakum	
	DD	For children receiving services in the family home, overall satisfaction with the services and supports the family currently receives.	%			79			<80%	80-90%	>90%	100%		Marilee Bell	
	DD	% of respondents indicating they feel that family supports have made a positive difference in the life of their family.	%			90			<80%	80-90%	>90%	100%	1) S-A 2) A	Marilee Bell	
	SSP	TBD	%						<75%	75% - 90%	>90%	100%		TBD	
	VR	TBD	%						<75%	75% - 90%	>90%	100%		TBD	
O5: Service Equity															
a	Access	The number of individual measures which are green or yellow divided by the total number of populated program measures in each section. Only the population with the greatest disparity is reported.	%	14	13	25	12.5	+	<60%	60% - 80%	>80%	75%	Q	Vacant	
	APD	Number of race/ethnic groupings that are over/under represented in comparison to their representation in the population as a whole. Only the population with the greatest disparity is reported - Non-Hispanic African American.	#	1.8	1.8	1.9	2	-	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Bob Weir	
	CW	1. Disproportionate representation of children of color in foster care. Only the population with the greatest disparity is reported - Non-Hispanic Native American/Alaskan Native	#	3.5	3.5	4.4	4.2	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1	Q	Melissa Sampson-Grier	

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	CW	2. Disproportionate representation of children of color served In Home. <i>Only the population with the greatest disparity is reported - Non-Hispanic African American</i>	#	2.6	3.1	3.7	3.9	-	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Stacey Ayers
	DD	% of individuals enrolled in DD services by race/ ethnicity in comparison to the people with disabilities in Oregon changed from population as a whole. <i>Only the population with the greatest disparity is reported - Non-Hispanic African American.</i>	#	2.2	2.2	2.2	2.2	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Brent Watkins
	SSP	1. % of minority, disabled, and special populations cash program users to their % of need as defined by corresponding poverty level. <i>Only the population with the greatest disparity is reported- Non-hispanic African American</i>	#	2.5	2.4	1.7	1.7	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Carol Lamon
	SSP	2. % of minority, disabled, and special populations SNAP ERDC, and Medical program users to their % of need as defined by corresponding poverty level. <i>Only the population with the greatest disparity is reported - Non-Hispanic African American.</i>	#	1.5	1.6	1.6	1.6	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Carol Lamon
	SSP	% of minority, disabled, and special populations access to Employment and Case Management services to their % of mandatory caseload. <i>Only the population with the greatest disparity is reported - Non-Hispanic African American</i>	#	1.5	1.6	1.5	1.4	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Carol Lamon
	VR	Ratio: % of minority and special populations of all DHS users divided by those same populations' % of the total population in the state or a geographic area. <i>Non-Hispanic Pacific Islander.</i>	#	1.21	1.08	1.08	1.8	=	R <0.5	R >=0.5 or R <0.75	R >=0.75	R=1		Ron Barcikowski
b	Outcomes	The number of individual measures which are green or yellow divided by the total number of populated program measures in each section. <i>Only the population with the greatest disparity is reported for all programs but OVRs.</i>	%	56	44	66.7	33	+	<60%	60% - 80%	>80%	75%	Q	Vacant
	APD	Percent of nursing facility services by race/ethnicity in comparison to the long term care population as a whole. <i>Only the population with the greatest disparity is reported - Non-Hispanic Asian.</i>	#	0.7	0.6	0.6	0.6	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Bob Weir

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	APD	Percent of community based care services by race/ethnicity in comparison to the long term care population as a whole. <i>Only the population with the greatest disparity is reported - Non-Hispanic African American.</i>	#	0.4	0.4	0.4	0.4	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Bob Weir
	APD	Percent of in-home services by race/ethnicity in comparison to the long term care population as a whole. <i>Only the population with the greatest disparity is reported - Non-Hispanic Asian..</i>	#	1.8	1.3	1.2	1.8	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Bob Weir
	CW	% of children of color placed in culturally, disability and linguistically matched foster homes. **2/11/2014 CW plans to change measure to FC exits by race new measure under development**	#						R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Melissa Sampson-Grier
	DD	% of distinct DD comprehensive services recipients of each race & ethnicity / % of Oregon DD population of each race & ethnicity = Disproportionality Ratio. <i>Only the population with the greatest disparity is reported - Hispanic (All races)</i>	#	0.4	0.4	0.4	0.4	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Brent Watkins
	DD	% of distinct DD Support Services recipients of each race & ethnicity / % of Oregon DD population of each race & ethnicity = Disproportionality Ratio. <i>Only the population with the greatest disparity is reported - Non-Hispanic Native American/Alaskan Native</i>	#	0.8	0.8	0.8	0.8	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Brent Watkins
	DD	% of distinct DD Case Management services recipients of each race & ethnicity / % of Oregon DD population of each race & ethnicity = Disproportionality Ratio. <i>Only the population with the greatest disparity is reported - Hispanic (all races).</i>	#	2	2	1.9	1.9	=	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		Brent Watkins
	SSP	% of minority, disabled, and special populations job placement rate % of mandatory caseload - <i>Only the population with the greatest disparity is reported - Non-Hispanic African American.</i>	#	1.3	1.6	1.5	1.4	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R > 1.25	R=1		
	VR	Ratio of percent of funds expended for culturally specific and relevant services to the percent of minority clients in the DHS Client Populations.	#	1	2.08	3.03	3.03	+	R <0.5:1 or R >1.5:1	0.5 <R > 0.75 5 or 1.25 <R > 1.5	0.75 <R >	R=1		Ron Barcikowski
	VR	Ratio of Percentage Employed by VR by Ethnicity/Race to Percentage Employment Rate in General Population 2011-2013		3.1	3.1	3.2	3.2	=	<.95	.95 to .99	>=1	1		

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		Instead of reporting all minorities as one group, each Program is reporting different racial/ethnic groups separately, and only the racial/ethnic group with the greatest disproportionality is included in the scorecard – data on the other groups will be distributed by Carol as supplementary information													
O6: Employee Engagement															
a	Employee Engagement	% of staff reporting medium-high or high level of employee engagement	%	72.2	70.9	77	91	+	≤65%	66% - 85%	>85%	90%	Q	Becky Daniels	
	APD	% of staff reporting medium-high or high level of employee engagement	%	64.29	68.52	74	90	+	≤65%	66% - 85%	>85%	90%		Nathan Singer	
	CW	% of staff reporting medium-high or high level of employee engagement	%	72.8	66.79	80	91	+	≤65%	66% - 85%	>85%	90%			
	DD	% of staff reporting medium-high or high level of employee engagement	%	76.66	88.88	74	90	+	≤65%	66% - 85%	>85%	90%			
	Shared Services	% of staff reporting medium-high or high level of employee engagement		76.66	73.63	74	91	+	≤65%	66% - 85%	>85%	90%			
	SSP	% of staff reporting medium-high or high level of employee engagement	%	66.56	70.91	80	93	+	≤65%	66% - 85%	>85%	90%			
	VR	% of staff reporting medium-high or high level of employee engagement	%	75.5	57	76	95	+	≤65%	66% - 85%	>85%	90%			
O7: Workforce Diversity															
a	Meta-measure: Workforce Diversity	Average of all O7 sub-measures	%	58.1	48.1	53.13	58.81	+	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
a	Overall Statewide DHS Workforce	% of demographic categories meeting target goals	%			70	70	=	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
b	Workforce by Program Area	% of demographic categories meeting target goals	%			50	52.86	+	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
c	Management Representation	% of demographic categories meeting target goals	%			40	40	=	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
d	Quarterly New Hires	% of demographic categories meeting target goals	%			70	70	=	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
e	Quarterly Promotions	% of demographic categories meeting target goals	%			60	70	+	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
f	Quarterly Separations (All)	% of demographic categories meeting target goals	%			40	50	+	<80%	80%-99.9%	>100%	100%	Q	Lydia Muniz	
O8: Community Business Partnerships															

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a	External Customer Satisfaction	Percent of community partners who state that DHS is meeting their expectations.	%	50.6						<70%	70% - 90%	>90%	95%	A - Q3	Mike McCormick
	APD		%	64.7	A-Q3	A-Q3	A-Q3			<70%	70-90%	>90%	100%		Mike McCormick
	CW		%	64.6	A-Q3	A-Q3	A-Q3			<70%	70% - 90%	>90%	95%		
	DD		%	10	A-Q3	A-Q3	A-Q3			<70%	70% - 90%	>90%	95%		Trisha Baxter
	SSP		%	90.3	A-Q3	A-Q3	A-Q3			<70%	70% - 90%	>90%	95%		
	VR		%	NR	A-Q3	A-Q3	A-Q3			<70%	70% - 90%	>90%	95%		Travis Wall
b	External stakeholder Satisfaction	Percent of stakeholders who state that DHS is meeting their expectations.	%			48		=		<70%	70% - 90%	>90%	95%	A - Q1	Mike McCormick
	APD		%	A - Q1	A-Q1	77	A-Q1	+		<70%	70% - 90%	>90%	95%		
	CW		%	A - Q1	A-Q1	47	A-Q1	-		<70%	70% - 90%	>90%	95%		
	DD		%	A - Q1	A-Q1	28	A-Q1	-		<70%	70% - 90%	>90%	95%		
	SSP		%	A - Q1	A-Q1	74	A-Q1	+		<70%	70% - 90%	>90%	95%		
	VR		%	A - Q1	A-Q1	NR	A-Q1			<70%	70% - 90%	>90%	95%		
c	Partner outcomes	% of contract universes that have implemented performance based contracting.	%	7.7	10.3	10.3	10.3	=		<50%	50% - 75%	>75%	80%		Mike McCormick
	APD		%	10	20	20	20	=		<50%	50% - 75%	>75%	80%		
	CW		%	0	0	0	0	=		<50%	50% - 75%	>75%	80%		
	DD		%	0	0	0	0	=		<50%	50% - 75%	>75%	80%		
	SSP		%	12.5	12.5	12.5	12.5	=		<50%	50% - 75%	>75%	80%		
	VR		%	100	100	100	100	=		<50%	50% - 75%	>75%	80%		David Ritacco

OPERATING PROCESSES

OP1: Protection and Intervention

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner	
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green				
a	Inconclusive disposition of investigations	% of completed investigations coded "unable to determine" or "inconclusive."	%	13.9	12.4	12	12.83	+	>19%	15% to 19%	<15%	10%	Q	Stacey Ayers Marie Cervantes	
	APD	Facility data: Percent of completed allegations with an "Inconclusive" outcome/finding.	%	6.4	4.1	2.9	6.4	+	>19%	15% to 19%	<15%	10%	Q	Marie Cervantes, John Thompson	
	APD	Community data: Percent of completed allegations with an "Inconclusive" outcome/finding.	%	16.6	11.5	12.6	13.6	-	>19%	15% to 19%	<15%	10%	Q	Marie Cervantes, John Thompson	
	CW	% of completed investigations coded "unable to determine" or "inconclusive."	%	18.4	17.3	16.1	14	+	>19%	15% to 19%	<15%	10%	Q	Stacey Ayers	
	DD	DD Data: Percent of completed allegations with an "Inconclusive" outcome/finding.	%	14.1	16.5	16.4	17.3	+	>19%	15% to 19%	<15%	10%	Q	Joseph Merrifield	
b	Timeliness of investigation	% of calls assigned for field contact that meet policy timelines.	%	66.7	75.9	77.7	70.01	+	<70%	70% - 90%	>90%	100%	W	Stacey Ayers Marie Cervantes	
	APD	Facility data: Response time, percent of calls assigned that meet policy timelines.	%	75	75.8	73.4	98.3	-	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	APD	Community: Percent of call assigned in a timely manner as determined by 1% sample.	%	92	100	82	92.3	-	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	APD	NFSU: % of calls assigned for field contact that meet policy timelines.	%	33	52	18.9	19.44	+	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	CW	% of calls assigned for field contact that meet policy timelines.	%			NA			<70%	70% - 90%	>90%	100%	W	Stacey Ayers	
	DD	Data not available in DD.	%	NA		NA			<70%	70% - 90%	>90%	100%	Q	Joseph Merrifield	
c	Timeliness of investigation completion	% of investigation reports completed within policy timelines.	%	55.4	60.9	51.5	47.04	-	<70%	70% - 90%	>90%	100%	Q	Stacey Ayers Marie Cervantes	
	APD	Facility data: % of investigation reports completed within policy timelines.	%	75	78.5	73.2	77	-	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	APD	Community: % of investigation reports completed within policy timelines.	%	64	59	59.3	83	=	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	APD	NFSU	%	54	89.3	11	9.21	-	<70%	70% - 90%	>90%	100%	D	Marie Cervantes, John Thompson	
	CW	% of investigation reports completed within policy timelines.	%	16	16.6	16.4	17	-	<70%	70% - 90%	>90%	100%	Q	Stacey Ayers	
	DD	% of investigation reports completed within policy timelines.	%	68	61	57	49	-	<70%	70% - 90%	>90%	100%	Q	Marie Cervantes, John Thompson	
OP2: Direct Service															

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green			
a	(1) Field workforce strategy	% of positions filled compared to the workforce strategy targets. This measures how the well the field staffing levels are staying on target with their workforce strategy plans. Failure to meet staffing plans affects funding availability either by being over or under budget. The Enterprise measure (target and status) is weighted. Target updated Quarter 3 2013	%	87.8	92.8		94.1	+	> 4% of target (+ or -)	Within 2.1% - 4% of target (+ or -)	Within 2% of target (+ or -)	99%	Q - PIT	Sandy Dugan, Angela Munkers
	APD		%	83.1	86.7	PICS	90.6	+				94%		Sandy Dugan, Angela Munkers
	CW		%	91.4	99.3	PICS	98.3	-				98%		Sandy Dugan, Angela Munkers
	DD		%	88.1	93.5	PICS	90	-				100%		Sandy Dugan, Angela Munkers
	SSP		%	85	88	PICS	91.3	+				98%		Sandy Dugan, Angela Munkers
	VR		%	90.2	89.3	PICS	97.4	+				100%		Sandy Dugan, Angela Munkers
a	(2) Field workforce to forecast workload	% of Forecast Earned Positions filled based on quarterly point in time data. This measures the field workforce resource availability to serve the citizens of Oregon and meet performance outcomes. Enterprise measure is weighted. Target updated Quarter 2 2014	%	68.5	71.2		78.2	+	<70%	70% - <80%	≥80%	100%	Q 75	Sandy Dugan, Angela Munkers
	APD		%	75	78.6	PICS	82.2	+				100%		Sandy Dugan, Angela Munkers
	CW		%	68	75.4	PICS	81.1	+				100%		Sandy Dugan, Angela Munkers
	DD		%	88.1	93.5	PICS	90	-				100%		Sandy Dugan, Angela Munkers
	SSP		%	60.6	58.6	PICS	69	+				100%		Sandy Dugan, Angela Munkers
	VR		%	90.2	89.3	PICS	97.4	+				100%		Sandy Dugan, Angela Munkers

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner	
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green				
b	Service Delivery	New Calculation Q2 2014 - Average reported percent of goals achieved in program submeasures for Service Delivery. Assumptions - all submeasures are weighted equal between programs and ranges are weight equal.	%	50	50	16.6	75	+	71.8	71.9 - 92.1	92.2	100%	Q	Sandy Dugan, Angela Munkers	
	APD - Field	Composite of APD Service Delivery measures	%	85.5	80.2	79.9	85.3	+	<84.9	84.9 - 93.2	>93.3	100%		Sandy Dugan, Angela Munkers	
	CW - Field	Currently TANF-EA timeliness only of CW Service Delivery measures.	%	72.6	61.3	76			< 80%	80% - 89%	> 90%	100%		Sandy Dugan, Angela Munkers	
	DD - Field	Composite of DD Service Delivery measures - still under development	%	TBD	72	71.4	36.9	-	<38.2	38.2 - 89.9	90.0 or >	100	Q	Sandy Dugan, Angela Munkers	
	SSP - Field	Composite of SSP Submeasures for Service Delivery efforts encompassing timeliness; engagement and benefit delivery.	%	96.7	97.8	Red	81.3	+	< 80.4	80.4 - 95.3	95.3+	100%		Sandy Dugan, Angela Munkers	
	VR - Field	VR Service Delivery measures	%	97.8	97.8	96.9	96.5	-	<80	80% - 89%	> 90%	100%		Sandy Dugan, Angela Munkers	
OP3: Provider Regulation															
a	Provider quality improvement	% of licensed or certified providers with medication practice non-compliance rising to the level of corrective action.	%	4.7	2	15	15.7	-	>25%	15-25%	<15%	<10%	Q	Donna Keddy	
	APD - Nursing Facility	% of licensed or certified providers with medication practice non-compliance rising to the level of corrective action.	%	8	11	75	63	+	>25%	15-25%	<15%	<10%	Q	Donna Keddy	
	APD - Community Based Care	% of licensed or certified providers with medication practice non-compliance at level 3 or 4.	%	4	0	2	0	=	>25%	15-25%	<15%	<10%	Q	Donna Keddy	
	Children Care Licensing Unit		%	15	5	41	89	-	>25%	15-25%	<15%	<10%	Q	Donna Keddy	
	CW Foster Care		%			N/A			>25%	15-25%	<15%	<10%		Donna Keddy	
	DD	% of licensed or certified providers with medication errors identified that required follow up	%	3	0	0	0	=	>25%	15-25%	<15%	<10%	Q	Barbara Southard	
b	Monitoring	% of on-site visits completed within program specific timelines.	%	60	74	72	74	+	<90%	90%-95%	>95%	100%	Q	Donna Keddy	
	APD	Nursing Facility	%	4	0	0	0	=	<60%	60%-85%	>85%	100%	Q	Donna Keddy	
	APD	Community Based Care	%	16	45	45	53	+	<60%	60%-85%	>85%	100%	Q	Donna Keddy	

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner	
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green				
	APD	Adult Foster Home	%						<60%	60%-85%	>85%	100%	Q	Donna Keddy	
	Children Care Licensing Unit	% of on-site visits completed within program specific timelines.	%	100	95	70	100	+	<60%	60%-85%	>85%	100%	Q	Donna Keddy	
	CW		%						<90%	90-95%	>95%	100%			
	DD		%	98	100	100	100	=	<90%	90-95%	>95%	100%	Q	Barbara Southard	
OP4: Program Design and Implementation															
a	Sub-process utilization scoring	% of utilization of sub process of Program Design and Implementation by Program and DHS.	%	72	62	72	79.6	+	<60%	60% - 79%	≥80	90%	Q	Trina Lee	
	APD		%	61	61	71	74	+	<60%	60% - 79%	≥80	90%	Q	Mike McCormick	
	CW		%	69	61	64	79	+	<60%	60% - 79%	≥80	90%	Q	Lois Day, Maurita Johnson	
	DD		%	89	49	68	77	+	<60%	60% - 79%	≥80	90%	Q	Patricia Baxter (Interim)	
	SSP		%	73	66	78	74	-	<60%	60% - 79%	≥80	90%	Q	Liesl Wendt, Carol Lamon	
	VR		%	78	74	79	94	+	<60%	60% - 79%	≥80	90%	Q	Stephaine Taylor	
b	Scoring of Process & Outcome Measures	% of performance to target by program and DHS using Outcome measure data.	%	51	52.3	56	58.3	+	<60%	60% - 79%	≥80	90%	Q	Trina Lee	
	APD		%	49	42.8	52	56	+	<60%	60% - 79%	≥80	90%	Q	Mike McCormick	
	CW		%	37	44	54	51	-	<60%	60% - 79%	≥80	90%	Q	Lois Day / Maurita Johnson	
	DD		%	48	42.2	52	60	+	<60%	60% - 79%	≥80	90%	Q	Patricia Baxter (Interim)	
	SSP		%	50.0	55	56	59	+	<60%	60% - 79%	≥80	90%	Q	Liesl Wendt / Carol Lamon	
	VR		%	70	77.5	70	73	+	<60%	60% - 79%	≥80	90%	Q	Stephaine Taylor	
	Central Services		%			48	51	+	<60%	60% - 79%	≥80	90%		Trina Lee	
c	Scoring of Internal Customer Satisfaction Survey	Overall satisfaction with the quality of the work.	%			80	70	-	≤65%	66%-84%	≥85	90%	Q	Trina Lee	
	APD		%			84	75	-	≤65%	66%-84%	≥85	90%	Q	Trina Lee	
	CW		%			80	79	-	≤65%	66%-84%	≥86	90%	Q	Trina Lee	

45 total Measures
 40 Measures to be Populated
 40 Measures Populated
 16 Red, 17 Yellow, 7 Green

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green			
	DD		%			73	60	-	≤65%	66%-84%	≥87	90%	Q	Trina Lee
	SSP		%			83	83	=	≤65%	66%-84%	≥88	90%	Q	Trina Lee
	VR		%			82	53	-	≤65%	66%-84%	≥89	90%	Q	Trina Lee
SUPPORTING PROCESSES														
SP1: Program Integrity														
a	Audits/ reviews related to program integrity	Internal Audit and Consulting: Schedule Completion Rate.	%	13	13	13	17	=	<70%	70% - 80%	>80%	100%	Q	Chuck Hibner
	Corrective actions implemented	Corrective Action Plans: Percent Implemented as a percent of the total.	%	60	29	0	29	-	<70%	70% - 80%	>80%	100%	Q	Chuck Hibner
	Percent of repeat compliance audit findings	% of recommendations that are not similar to prior audit findings.	%			83	80		<62%	62% - 69%	>70%	100%	A	Chuck Hibner
b	Internal business reviews (business & contractor services)	% of reviews for this quarter Business Review experts determined met quality expectations (were green).	%											Chuck Hibner
	APD Internal business reviews	% of Negotiable Items reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			TBD			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
Program Integrity b		% of Oregon Trail Cards reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			TBD			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
Program Integrity b		% of Receipting reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			TBD			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
Program Integrity b		% of Special Cash Pay reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				TBD		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
Program Integrity b		% of Revolving Fund Checks reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				TBD		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
Program Integrity b		% of Voter Registration reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				TBD		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	CW Internal business reviews	% of Negotiable Items reviews for this quarter Business Experts determined met quality expectations.	%			61	n/a		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner

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No.	Measure Name	Measure Calculation	% or #						RANGE			Target	Frequency	Measure Owner
				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green			
	Program Integrity b	% of Office Safety reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			24			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	ODDS Internal business reviews	% of reviews for this quarter Business Experts determined met quality expectations.	%			TBD	40		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	OVRS Internal business reviews	% of reviews for this quarter Business Experts determined met quality expectations.	%			100	100		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	SSP Internal business reviews	% of Negotiable Items reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			80			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	Program Integrity b	% of Office Safety reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			25			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	Program Integrity b	% of Oregon Trail Cards reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			63			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	Program Integrity b	% of Receipting reviews for this quarter Business Experts determined met quality expectations. Q1 & Q3	%			21			<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	Program Integrity b	% of Special Cash Pay reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				77		<75%	75% - 90%	>90%	100%	Q	Chuck Hibner
	Program Integrity b	% of Revolving Fund Checks reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				72		<75%	75% - 90%	>90%	100%		Chuck Hibner
	Program Integrity b	% of Voter Registration reviews for this quarter Business Experts determined met quality expectations. Q2 & Q4	%				80		<75%	75% - 90%	>90%	100%		Chuck Hibner
c	Service Accuracy - eligibility determination	% of Quality Control reviews where accuracy measure meets "green level" expectations (quarterly average).	%						<85%	85% - 99%	100%	100%	Q	Chuck Hibner, Paul Pickerell, Matt Bogart
	APD	% of Quality Control reviews for APD branch offices (4 program reviews total) where accuracy measure meets "green level" expectations (quarterly average).	%			75	0	-	<85%	85% - 99%	100%	100%	Q	Chuck Hibner
	CW	% of Quality Control reviews for CW branch offices (1 program reviews total) where accuracy measure meets "green level" expectations (quarterly average).	%			0	0	=	<85%	85% - 99%	100%	100%	Q	Chuck Hibner
	ODDS	% of ODDS Quality Control reviews where accuracy measure meets "green level" expectations (quarterly average).	%			TBD	TBD		TBD	TBD	TBD	TBD	Q	Chuck Hibner

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				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green				
	OVRS	% of OVRS case reviews where time to eligibility less than the federally required 60 days.	%			96	98	+	<85%	85% - 99%	100%	100%	Q	Chuck Hibner	
	SSP	% of Quality Control reviews for SSP branch offices (5 program reviews total) where accuracy measure meets "green level" expectations (quarterly average).	%			40	20	-	<85%	85% - 99%	100%	100%	Q	Chuck Hibner	
d	Investigation Measurements		%											Chuck Hibner	
d(1)	Employee Fraud	Number of substantiated employee fraud cases for the last 12 months	#	8	7	6	6	-	> 3	2	1	0	Q	Chuck Hibner	
d(2)	Client Fraud and Intentional Program Violations (IPV)	% of documented fraud and IPV cases as a percentage of current caseload.	%	0.1	0.1	0.1	0.07	=	> .4%	.4% - .2%	<= .2%	0.2%	Q	Chuck Hibner	
d(3)	Client Overpayments	% of overpayment referrals received for SNAP, TANF, Medical, ERDC clients as a percentage of current caseload.	%		0.11	0.18	0.19	-	> .3%	.3% - .1%	<= .1%	0.1%	Q	Chuck Hibner	
d(4)	Medicaid Provider Fraud	% of Medicaid provider Fraud investigations open in the current quarter as a percentage of all Medicaid providers.	%	0.09	0.09	0.09	0.08	=	> .3%	.3% - .1%	<= .1%	0.1%	Q	Chuck Hibner	
SP2: Business Support															
a	Business operations customer satisfaction	% of staff that are satisfied with service delivery of business operations. Excellent= 47% Good= 23% Fair= 13 Poor=16. Performance standard changed to eliminate "Fair" answers from total score.	%	92.7	91.2	62.6	70.1	+	≤65%	66%-84%	≥85	90%	Q	Jeremy Emerson	
b	Business operational performance measures	% of business operations performance measures meeting service level agreements. 110 Green, 19 Yellow and 35 Reds.	%	70.8	82.8	78	79	+	<90%	90%-95%	>95%	100%	Q	Jeremy Emerson	
c	Leadership accountability to performance measures	% of Performance Measures by program area reported for QBR	%	95.4	100	87.5	100		<90%	90%-95%	>95%	100%	Q	Jeremy Emerson	
SP3: Program Support															

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a	Service Excellence – Internal	Percentage of internal customer survey respondents rating services as good or excellent	%	78.2	61.1	79.1	75.5	-	≤65%	66%-84%	≥85	90%	Q	Angela Long, Wes Rios
b	Projects that are utilizing project management tools	Percentage of projects utilizing project management tools	%	69.2	73	76.7	81.53	+	<75%	75-89%	≥90%	100%	Q	Jodi Sherwood
Program	IT Business Support		%	55	65	65	77	=	<75%	75-89%	≥90%	100	Q	
Program	DHS/OCI		%	86	87.5	88	92.6	+	<75%	75-89%	≥90%	100	Q	
Program	DHS/Breakthrough		%	66.5	66.5	77	75	+	<75%	75-89%	≥90%	100	Q	
c	Efficient & Effective services	Percentage of projects that meet expected results	%	84.4	88	80	88	-	<75%	75-89%	≥90%	100%	Q	Angela Long, Leatha Krehoff, Wes Rios
SP4: Workforce Development														
a	Cultural Competency	% of employees who have attended the cultural competency training within first year of hire date.	%	75.6	70	83	93	+	<85%	85%-95%	> 95%	100%	Q	Jeff Akin
	APD	% of employees who have attended the cultural competency training within first year of hire date.	%	81.8	58.8	89	93	+	<85%	85%-95%	> 95%	100%		
	CW	% of employees who have attended the cultural competency training within first year of hire date.	%	75	82.9	78	93	+	<85%	85%-95%	> 95%	100%		
	DD	% of employees who have attended the cultural competency training within first year of hire date.	%	75	50	80	50	-	<85%	85%-95%	> 95%	100%		
	SSP	% of employees who have attended the cultural competency training within first year of hire date.	%	75.7	90	88	96	+	<85%	85%-95%	> 95%	100%		
	VR	% of employees who have attended the cultural competency training within first year of hire date.	%	0	100	NA	50		<85%	85%-95%	> 95%	100%		
	Other	% of employees who have attended the cultural competency training within first year of hire date.	%	71.4	33	83	95	+	<85%	85%-95%	> 95%	100%		
b	Performance feedback model: (1) position descriptions	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	87	86	86	88	+	<85%	85%-95%	>95%	100%	Q	Jeff Akin

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				Q3 2013	Q4 2013	Q1 2014	Q2 2014 Current	Progress	Red	Yellow	Green				
	APD	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	87	76	78	83	+	<85%	85%-95%	> 95%	100%			
	CW	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	83	83	84	85	+	<85%	85%-95%	> 95%	100%			
	DD	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	98	99	96	98	+	<85%	85%-95%	> 95%	100%			
	SSP	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	81	86	85	89	+	<85%	85%-95%	> 95%	100%			
	VR	% of staff that have current position descriptions (reviewed and signed by the employee within the last year)	%	90	88	83	89	+	<85%	85%-95%	> 95%	100%			
b	Performance feedback model: (2) development plans	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	79	75	78	78	=	<85%	85%-95%	>95%	100%	Q	Jeff Akin	
	APD	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	70	66	60	67	+	<85%	85%-95%	> 95%	100%			
	CW	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	76	71	72	71	-	<85%	85%-95%	> 95%	100%			
	DD	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	90	80	81	92	+	<85%	85%-95%	> 95%	100%			
	SSP	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	77	75	84	84	=	<85%	85%-95%	> 95%	100%			
	VR	% of staff that have a current Employee Development Plan (updated within the last 3 months)	%	96	92	78	75	-	<85%	85%-95%	> 95%	100%			