

AGING AND PEOPLE WITH DISABILITIES SERVICES:

Aging and People with Disabilities Workload Model Background

To date, DHS has utilized a caseload model for allocating and assessing staffing levels for APD field delivery. Leadership became increasingly concerned the model didn't accurately reflect all the work required of the delivery staff. DHS and AAA leadership agreed to undertake the development of a new workload model to capture an accurate snapshot of the current work.

Workload models are fundamentally different from caseload models. A caseload model estimates the number of staff needed based on ratios per caseload. It assumes all workers are progressing on their caseload 100% of the time. In contrast, a workload model is activity-based and measures the time required per case and including the additional work required by the staff members themselves. It also takes into account time an individual worker is taken away from their work (e.g. holidays, sick leave, continuous improvement activities and advanced training).

The APD Workload Model is complete and has been run for 2013-15 staffing allocations. The model takes into account the official fall 2012 forecasted caseload for 2013-15 as estimated by the DHS Office of Forecasting, Research and Analysis.

Requirements Increasing or Decreasing Workload Demand

Complexity of Adult Protective Service Workload

Adult Protective Services continues to receive and increasing number of potential abuse reports – increasing 1,000 reports in 2011. However, the larger workload impact is due more to increased complexity and labor intensive investigations and follow-up activity related to the demand for higher standards of evidence and documentation, work with law enforcement and courts related to prosecution, and civil case pursuit of abuse, particularly involving financial exploitation and the restitution of assets.

Complexity of Client Situations

The negative economic circumstances impacting Oregonians is increasing the complexity of client situations, APD caseload has seen an increase in married couple applicants which often require more labor intensive intake processes

such as resource assessments. Additionally, there is an increase in complexity of Community-based Care placement including clients who are convicted sex offenders or have higher care needs such as Traumatic Brain Injuries, severe behavioral issues, and bariatric needs. Such complex placements require additional staff time in searching for, securing and maintaining placements with limited resources and providers available.

DHS Modernization

DHS Modernization re-engineers the client experience, the way case workers interact with clients, the interface between the client and DHS, delivery of benefits and replacement of aging technology systems far past their usability. Current manual paper intensive processes, making information sharing extremely difficult, will be automated and streamlined. DHS Modernization has expanded from a singular technology focus to include modernization of the approach DHS uses to perform work and deliver services. Automating eligibility determination will lead to increased accessibility, accuracy and timeliness. Information will be stored and accessed through a data warehouse that supports federal, state and local operational management and statistical reporting. The impact on staffing will not fully be realized until completed implementation over the next biennium; however, any increased efficiency in eligibility will allow DHS to move more resources into a critically understaffed case management function.

Affordable Care Act (ACA) and Medicaid Expansion

DHS is responsible for determining eligibility for Medicaid programs associated with other support programs currently provided by the department. Currently, DHS determines an average of 78% of all Medicaid eligibility. The Affordable Care Act (ACA) and the Medicaid Expansion will increase the number of Oregonians eligible for medical assistance, through the Oregon Health Authority, or the Tax Credit (APTC), through Cover Oregon. It is anticipated that approximately 191,476 new cases will be processed through DHS in the coming biennia. The full impact of this additional workload is still under review, but expected to have significant impact to staffing levels.

Workload Efficiencies Achieved

Lean Daily Management System

APD has employed several initiatives to decrease workload and increase efficiencies in work processes throughout the

biennium. In 2010, APD began a full roll out of the Lean Daily Management System and associated tools throughout the organization, which is in the process of being completed. LDMS is now practiced in local APD and AAA offices throughout the state and the numbers fully adopting the practices continue to increase each month. Most work units within central office already employ the system in their daily work. The intent is to increase the efficiency of team workflow practices and business processing times, which positively impacts customer service and reduces the anxiety and frustration of workers coping with the increased demand for services as well as the reduction in workforce due to vacancy factors and the smart-hiring freeze, which DHS instituted in December 2011.

Operations Committee

SPD continues to utilize a field-driven Operations Committee, which meets monthly and works pro-actively to streamline workload and field staff duties related to the implementation of new program directives or policy changes.

Overall Impact of Increases and Decreases in Demand on Staffing Needs

Overall, APD staffing levels are under 85% of what is earned using the current workload model. Because staffing levels remain below 85%, any savings recognized through continuous improvement initiatives and workload efficiencies are not recognized fiscally. Instead, these savings are reinvested in current staff to handle caseload growth and complexity, to maintain our accuracy rates, and to keep backlogs and processing times within reasonable standards.

The net impact of the Fall 2012 forecast is a net staffing level of about and 86.7% for 11-13 in programs delivered by APD and AAA local office staff. It should be noted, however, that due to the DHS smart-hiring freeze and AAA workforce reduction actions, the actual staffing levels are as much as 10% less than these figures indicate in terms of “boots on the ground”.

In addition, many services administered by the Aging and People with Disabilities are administered by local partners. Approximately half of APD's services for aged and physically disabled individuals are administered by local Area Agencies on Aging (AAAs) and funded through a 95% equity model.

APD Workload Fall 2012 Forecast

APD STATE FIELD ONLY POSITION TYPE:	2011-2013 (post-LAB) CASELOAD				2013-2015 (post-GRB) WORKLOAD			
	Current Position Authority	Positions Earned Forecast	Percent of Earned	Difference Current to Workload Forecast	Current Position Authority	Positions Earned Forecast	Percent of Earned	Difference Current to Workload Forecast
Case Managers	253	273.63	92.5%	-20.63	258	286.46	90%	-28.46
APS Specialists	58	78.81	73.6%	-20.81	115	78.81	146%	36.19
PAS / Diversion / Transition	38	43.7	87.0%	-5.7	38	43.71	87%	-5.71
Eligibility Workers (HSS3)	119	170.66	69.7%	-51.66	155	178.9	87%	-23.9
Paraprofessionals (HSA2)	22	19.27	114.2%	2.73	22	18.32	120%	3.68
Support Staff (OS2)	137	104.62	131.0%	32.38	137	108.94	126%	28.06
Field Mgmt/Ldrship Support	43	55.74	77.1%	-12.74	40	57.78	69%	-17.78
Totals	670	746.43	89.8%	-76.43	765	772.92	99.0%	-7.92

AAA + APD STATE FIELD POSITION TYPE:	2011-2013 (post-LAB)				2013-2015 (post-GRB)			
	Current Position Authority	Positions Earned Forecast	Percent of Earned	Difference Current to Workload Forecast	Current Position Authority	Positions Earned Forecast	Percent of Earned	Difference Current to Workload Forecast

Case Managers	519.97	591.45	87.9%	-71.48	574.73	619.86	92.7%	-45.13
APS Specialists	133.56	168.76	79.1%	-35.20	200.45	168.76	118.8%	31.69
PAS / Diversion / Transition	89.22	104.68	85.2%	-15.46	95.94	104.7	91.6%	-8.76
Eligibility Workers (HSS3)	277.16	358.95	77.2%	-81.79	342.04	375.78	91.0%	-33.74
Paraprofessionals (HSA2)	40.93	41.81	97.9%	-0.88	42.35	39.74	106.6%	2.61
Support Staff (OS2)	237.14	223.83	105.9%	13.31	254.84	232.98	109.4%	21.86
Field Mgmt/Ldrship Support	96.79	119.77	80.8%	-22.98	103.03	124.13	83.0%	-21.10
Totals	1394.77	1609.25	86.7%	-214.48	1613.38	1665.95	96.8%	-52.57

NOTE: The % of earned number is expected to go down as a result of April 2013 reshoot and a new Spring 2013 forecast.

Future Workload Efficiencies Anticipated

Electronic Provider Enrollment

APD has moved to an electronic provider enrollment, authorization and payment system for home delivered meals, adult day services, and other provider payments. These systems previously utilized work intensive and error prone authorization and billing processes. These improvements also improve customer satisfaction as providers are paid more timely.