

HUMAN SERVICES, DEPARTMENT of
Annual Performance Progress Report (APPR) for Fiscal Year (2013-2014)

Original Submission Date: 2014

Finalize Date:

2013-2014 KPM #	2013-2014 Approved Key Performance Measures (KPMs)
1	OVRS CLOSED - EMPLOYED – The percentage of Office of Vocational Rehabilitation Services (OVRS) consumers with a goal of employment who are employed.
2	TANF FAMILY STABILITY – The percentage of children entering foster care who had received TANF cash assistance within the prior two months.
3	TANF RE-ENTRY - The percentage of Temporary Assistance for Needy Families (TANF) cases who have not returned within 18 months after exit due to employment.
4	SNAP (Supplemental Nutrition Assistance Program) UTILIZATION - The ratio of Oregonians served by SNAP to the number of low-income Oregonians.
5	SNAP (Supplemental Nutrition Assistance Program) ACCURACY - The percentage of accurate SNAP payments
6	ENHANCED CHILD CARE - The percentage of children receiving care from providers who are receiving the enhanced or licensed rate for child care subsidized by DHS
7	ABSENCE OF REPEAT MALTREATMENT - The percentage of abused/neglected children who were not subsequently victimized within 6 months of prior victimization.
8	TIMELINESS AND PERMANENCY OF REUNIFICATION OF CHILDREN
9	TIMELINESS OF FOSTER CARE RELATED ADOPTIONS
10	LTC NEED PREVENTION - Percentage of seniors (65+) needing publicly-funded long term care services.
11	LTC RECIPIENTS LIVING OUTSIDE OF NURSING FACILITIES – The percentage of Oregonians accessing publicly-funded long-term care services who are living outside of nursing facilities.
12	DEVELOPMENTAL DISABILITY SUPPORT SERVICES - The percentage of eligible adults who are receiving adult support services within 90 days of request.
13	PEOPLE WITH DISABILITIES IN COMMUNITY SETTINGS – The percentage of individuals with developmental disabilities who live in community settings of five or fewer.

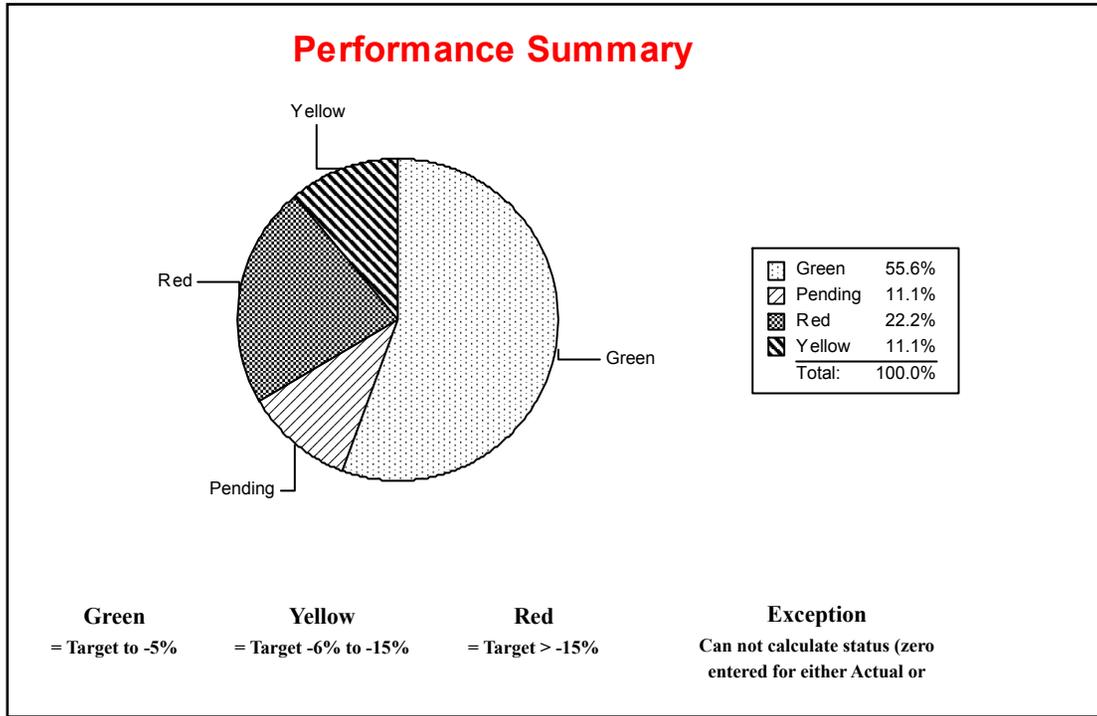
2013-2014 KPM #	2013-2014 Approved Key Performance Measures (KPMs)
14	INTEGRATED EMPLOYMENT SETTINGS - The percentage of adults with developmental disabilities who receive ODDS services who are working in integrated employment settings.
15	ABUSE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES - The percentage of people with developmental disabilities experiencing abuse.
16	PLACEHOLDER: ADULT PROTECTIVE SERVICES
17	CUSTOMER SERVICE - Percentage of customers rating their satisfaction with DHS above average or excellent: overall, timeliness, accuracy, helpfulness, expertise, availability of information.
18	PLACEHOLDER: SERVICE EQUITY

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
NEW	<p>Title: TANF FAMILY STABILITY – The percentage of children receiving TANF who entered foster.</p> <p>Rationale: This measure is the inverse of the previous KPM of the same name. The change in the measure is meant to make it more TANF program specific.</p>
NEW	<p>Title: TIMELY REUNIFICATION - The percentage of foster children exiting to reunification within 12 months of foster care entry.</p> <p>Rationale: The composite measure was hard to understand and interpret. This measure is more straightforward and focuses on the goal of DHS to reunify children who enter foster care in a timely fashion.</p>
NEW	<p>Title: PEOPLE WITH DISABILITIES LIVING AT HOME – The percentage of individuals enrolled in the Intellectual/Developmental disabilities program who are receiving services in their own home.</p> <p>Rationale: This measure more directly demonstrates the goal DHS has to help people live as independently as possible. The prior measure was a focus on those living in a community setting. The new measure sets a higher standard.</p>
NEW	<p>Title: ABUSE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES - The percentage of people with developmental disabilities in licensed settings who experienced abuse.</p> <p>Rationale: This change is a language change only, to clarify the abuse is occurring in a licensed setting.</p>
NEW	<p>Title: ABUSE OF PEOPLE WITH PHYSICAL DISABILITIES OR THOSE OVER AGE 65: The percentage of people with physical disabilities and those over the age of 65 in licensed settings who experienced abuse.</p> <p>Rationale: This was a placeholder measure. The proposed measure is one showing the abuse rate of those placed in a licensed setting that experience abuse for the Aging and Peoples with Disabilities program area.</p>
NEW	<p>Title: SERVICE EQUITYThe rate of unduplicated DHS clients served per 1,000 of Oregon population at or below 185% FPL for All Communities of Color and broken down by: • African American, Non-Hispanic • Native American/Alaska Native, Non-Hispanic • Asian, Non-Hispanic • Pacific Islander, Non-Hispanic • Hispanic – all races</p> <p>Rationale: This was a placeholder measure. The proposed measure will show whether clients of each reported race group is over-represented or under-represented compared to all clients served by DHS. Note that neither higher or lower is necessarily better, but being close to the overall population rate per 1,000 is the goal. The intent is to have a view, much like with Customer Satisfaction, so that each category can be shown in the chart.</p>

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
NEW	<p>Title: Children Served by Child Welfare Residing In Parental Home: The percent of children served in Child Welfare on an average daily basis (In Home and Foster Care) who were served while residing in their parent's home.</p> <p>Rationale: Oregon has been focusing on the safe and equitable reduction of children in foster care. This new measure allows for us to show the proportion of children served by Child Welfare who are able to reside in their own home.</p>
NEW	<p>Title: Timeliness of Adoption Once Legally Free: Percent of Legally free children adopted in less than 12 months</p> <p>Rationale: Once a child has been determined to be legally free, that is, all parental rights have been terminated or relinquished, this measure shows how successful Oregon is on finalizing adoptions within a timely fashion.</p>
NEW	<p>Title: TANF JOBS PLACEMENTS: The percentage of clients who achieve job placement each month compared to those anticipated to achieve placement.</p> <p>Rationale: This measure shows how well the TANF program is doing to get clients in a job placement compared to predetermined goals. This is an important measurement for the TANF JOBS program and an important measure of client engagement in achieving self-sufficiency.</p>
DELETE	<p>Title: TANF FAMILY STABILITY – The percentage of children entering foster care who had received TANF cash assistance within the prior two months.</p> <p>Rationale:</p>
DELETE	<p>Title: TIMELINESS AND PERMANENCY OF REUNIFICATION OF CHILDREN</p> <p>Rationale:</p>
DELETE	<p>Title: TIMELINESS OF FOSTER CARE RELATED ADOPTIONS</p> <p>Rationale:</p>
DELETE	<p>Title: PEOPLE WITH DISABILITIES IN COMMUNITY SETTINGS – The percentage of individuals with developmental disabilities who live in community settings of five or fewer.</p> <p>Rationale:</p>
DELETE	<p>Title: PLACEHOLDER: ADULT PROTECTIVE SERVICES</p> <p>Rationale:</p>

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
DELETE	<p>Title: ABUSE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES - The percentage of people with developmental disabilities experiencing abuse.</p> <p>Rationale:</p>
DELETE	<p>Title: PLACEHOLDER: SERVICE EQUITY</p> <p>Rationale:</p>

HUMAN SERVICES, DEPARTMENT of		I. EXECUTIVE SUMMARY	
Agency Mission: Assisting people to become independent, healthy and safe.			
Contact: Anna Cox, DHS Data Collection & Reporting		Contact Phone: 503-945-6680	
Alternate: Angela Long, DHS Office of Business Intelligence		Alternate Phone: 503-945-6170	



1. SCOPE OF REPORT

This report covers a broad array of programs throughout the Department of Human Services (DHS), such as employment, child well-being, and independence of seniors and people with intellectual and developmental disabilities that support the mission and goals of the agency. The purpose of this annual performance report is to communicate the results of the work we do. While the primary audience of this report is the Oregon Legislature and other key stakeholders, it is also a communication tool for staff, other governmental agencies and the public.

2. THE OREGON CONTEXT

The Oregon Department of Human Services helps achieve Oregon's goals. The agency's mission is to help Oregonians in their own communities achieve safety, well-being and independence through services that protect, empower, respect choice and preserve dignity. DHS is responsible for the care of some of Oregon's most vulnerable citizens – children, families, people with intellectual and developmental disabilities, and seniors. DHS is also responsible for serving Oregonians at times when they are most in need – when they have experienced abuse, when they are hungry, when they are homeless. Every year, more than one million people rely on DHS services to meet their most basic needs and their efforts to achieve economic stability and independence. DHS works to ensure these outcomes and tracks agency progress toward their successful achievement.

3. PERFORMANCE SUMMARY

DHS achieved green status on eleven (55.6%) Key Performance Measures. One (11.1%) KPM achieved yellow status. Three (22.2%) achieved red status, one measure does not have a Target established for 2013 and another two measures are Pending legislative approval. Green status = Target to \leq 5% Yellow status = Target \leq 6% to \leq 15% Red status = Target $>$ \leq 15%

4. CHALLENGES

Poor economic conditions and unemployment appear to have an influence on many of our measures. Cuts in funding and limited resources (such as staff and providers) have an impact on whether or not we can achieve our desired results. Other challenges include the fact that the work of DHS is complex and requires coordinated efforts to see an impact on the results. It's not uncommon for clients to have multiple barriers to face. They may have drug or alcohol abuse issues, involvement with law enforcement, have mental health challenges, or be unemployed.

It continues to be a challenge to connect the daily work of the agency to intermediate and high level outcomes. However, doing so will enable us to prioritize and clarify the results of what we do (effectiveness) and the importance of efficient processes, thereby creating a culture throughout DHS by which all managers and staff rigorously use performance measures and other metrics for decision-making, managing the daily work and driving improvements throughout the agency. More effective communication with the public and stakeholders of the value of DHS services is desired as we attempt to educate others about our role as good stewards of public resources.

5. RESOURCES AND EFFICIENCY

2013-15 Total Fund Budget by Division

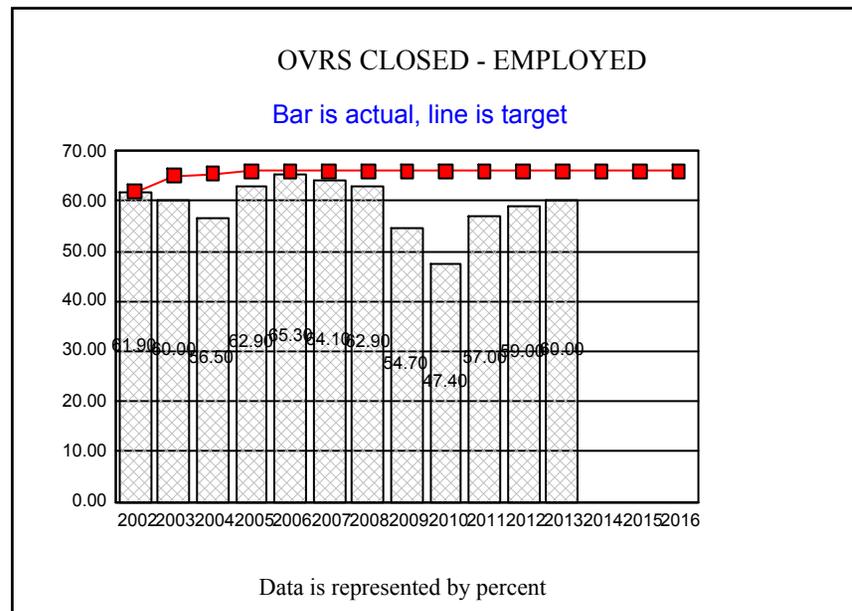
This section provides overall budget information for DHS and the major program areas.

Division, Total Funds (in millions), % Funds

Self Sufficiency, \$3,466.2, 37.31%
Child Welfare, \$916.7, 9.87%
Vocational Rehabilitation, \$97.6, 1.05%
Aging and People with Disabilities, \$2,437.0, 26.23%
People with Intellectual and Developmental Disabilities, \$1,734.3, 18.67%
Central and Shared Services, \$637.7, 6.87%
TOTAL FUNDS = \$9,289.7

Source: DHS Central Budget, Finance and Analysis Division

KPM #1	OVRS CLOSED - EMPLOYED – The percentage of Office of Vocational Rehabilitation Services (OVRS) consumers with a goal of employment who are employed.	1997
Goal	People are living as independently as possible.	
Oregon Context	Percentage of individuals receiving services who had employment outcomes during the state fiscal year.	
Data Source	Office of Vocational Rehabilitation Services Core Performance Status Summary Report	
Owner	DHS - Vocational Rehabilitation, David Ritacco, 503-945-6720	



1. OUR STRATEGY

Obtaining and maintaining suitable employment is consistent with the Department's goal of assisting people to live independently. This outcome measure shows how successful DHS and its partners are at helping people with disabilities become employed in local communities based on a

Harris Survey of Americans with Disabilities "Two out of three unemployed people with disabilities would prefer to be working during State Fiscal Year 2011, VR clients who closed with employment earned an average wage of \$11.76 an hour and worked an average of 27 hours per week.

2. ABOUT THE TARGETS

This target is often internally referred to as the success rate, reports the percentage of vocational rehabilitation clients who have received services and maintained suitable employment for a minimum of 90 consecutive days and who have exited the program. A higher percentage indicates more individuals obtaining successful employment outcomes.

3. HOW WE ARE DOING

OVRs' performance declined on this measure with the imposition of the Order of Selection on January 15, 2009, which requires that OVRs serve the most severely disabled clients first as well with the decline in the labor market during the past year. However, the performance began to improve in FFY11 increasing from 47% in FFY10 to 57% in FFY11. Currently, OVRs' percentage of individuals receiving services who had employment outcomes for FY13 through September 2013 was 60%.

4. HOW WE COMPARE

All 50 states have a state-run general VR program. The State of Oregon's VR program is required to meet or exceed a national performance level of 55.8 percent. As such, this percentage is considered a minimum acceptable number. The State of Oregon's VR program met this measure in FFY13 (60%).

5. FACTORS AFFECTING RESULTS

There is one factor which will impact Oregon's performance. The Workforce Innovation and Opportunity Act (WIOA) requires totally different performance measures than currently reported under the KPMA. Higher percentage obtaining a rehabilitation may actually be detrimental to meeting the current WIOA performance measure. Long term job retention and post-secondary education and training completion.

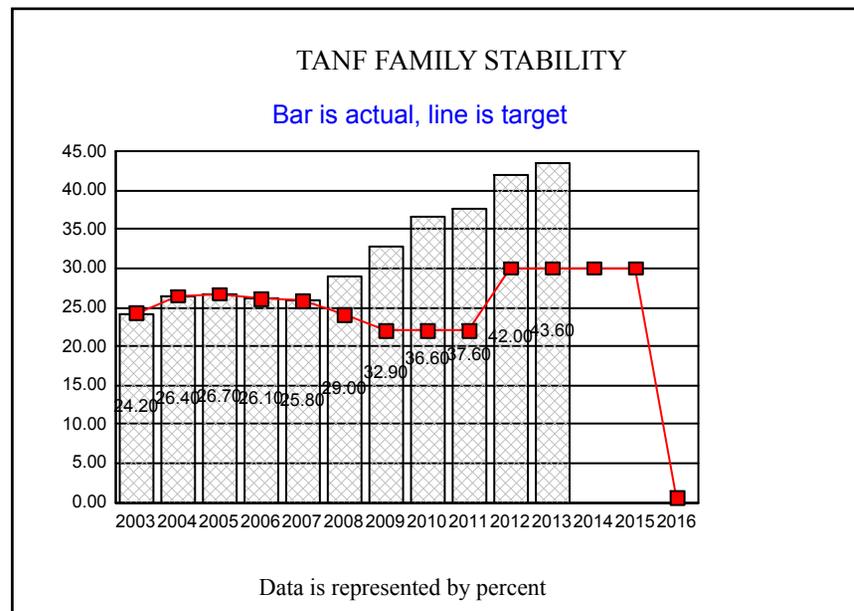
6. WHAT NEEDS TO BE DONE

The VR program will continue to conduct program monitoring and implement any necessary program improvements based on the data analysis.

7. ABOUT THE DATA

Reporting cycle – federal fiscal year The success rate calculation is based on dividing the number of clients who exited the VR program in employment by the number of clients who exited the VR program after receiving services multiplied by 100. VR relies on a state and federal relationship. Federal funding requires a state match of 3 percent and this has worked well for over 30 years but under the current appropriations, the VR program can meet the needs of only a small percentage of people with disabilities who live in Oregon. The VR program continues to look at state population distributions and have relocated staff to meet the increased demands in specific areas.

KPM #2	TANF FAMILY STABILITY – The percentage of children entering foster care who had received TANF cash assistance within the prior two months.	2007
Goal	People are safe	
Oregon Context	Oregon Benchmark #51 - Number of children per 1,000 persons under 18, who are: a) neglected/abused, b) at substantial risk of being neglected/abused.	
Data Source	Cumulative Federal Fiscal report cycle using AFCARS quarterly is used to identify the number of children entering foster care and Client Maintenance System to identify whether those children were from a household that received TANF cash assistance within the prior two months (referred to as TANF children). The number of TANF children is divided by the total number of children entering foster care for the federal fiscal year to arrive at the percent of children entering foster care who had received TANF cash assistance within the prior two months.	
Owner	DHS - Self Sufficiency, Xochitl Esparza, TANF Manager, 503-945-6122	



1. OUR STRATEGY

This measure tracks the movement of low-income children who leave the TANF program and enter foster care within two months of exit. This is designed to increase the overall effectiveness of the TANF program's family stability efforts.

The programs and services provided include supports to meet immediate needs and holistic family assessments, prevention (Family Support and Connections); Families are offered a holistic family assessment including screenings for physical health, substance abuse, mental health, domestic violence, learning needs and other family stability issues.

Family Support and Connections provides supports to prevent children in at-risk TANF families from entering the child welfare system. Home and community based services are used to guide interventions that build on family strengths and address family functioning issues. The services are designed to strengthen and support families by increasing parental protective factors and addressing risk factors related to child abuse. Temporary Assistance to Domestic Violence Survivors (TA-DVS) provides temporary financial assistance and support services to families with children who need to flee and stay free from domestic violence. TA-DVS is used to help the domestic violence survivor and the children address their safety concerns and to stabilize their living situation, thus reducing the likelihood of the survivor returning to the abuser. The array of these TANF services are intended to support and maintain the safety of these vulnerable children and their parents, and can prevent sometimes life-threatening situations. These services also help prevent child abuse and the need for child welfare intervention.

2. ABOUT THE TARGETS

Our objective is to decrease the percentage of children being served by the TANF cash assistance program who enter the foster care system.

DHS used the 2003 through 2007 performance data to establish a baseline. The FY2013 data indicates Foster Care entries are decreasing and TANF cash assistance cases are on the rise which could result in an increase in the percentage of TANF children entering foster care.

3. HOW WE ARE DOING

In FFY2007, 25.8 percent of the children entering foster care had received TANF cash assistance within the prior two months. The rate increased to 43.6 percent for FFY2013.

4. HOW WE COMPARE

This is a unique measure for Oregon and, therefore, there is a lack of data from other states for purposes of a comparison. However, a comparison of Aid to Families with Dependent Children (AFDC) and child welfare caseloads in California, Illinois and North Carolina found the majority of children entering foster care had been removed from AFDC-eligible households (U.S. Department of Health and Human Services, Office of Assistant Secretary for Planning and Evaluation, 2000).

5. FACTORS AFFECTING RESULTS

The factors affecting results include: multiple child abuse risk factors present in families such as, alcohol or drug abuse, parental involvement with law enforcement, domestic

violence, homelessness, previous child welfare involvement and unemployment. Often, there are several of these factors in families of child abuse/neglect victims. Following a national trend, the number of Oregon TANF children entering foster care has increased in direct relationship to more families entering poverty. This has resulted in an impact in the total number of children going into foster care as reported in the KPM.

Since the recession and the slow economic recovery, Oregonians continue accessing programs for low-income families such as TANF. The data table shows the percentage of children entering foster care who had received TANF has also been increasing. Contributing factors include higher case loads, broader demographic of families entering TANF and fewer community resources.

6. WHAT NEEDS TO BE DONE

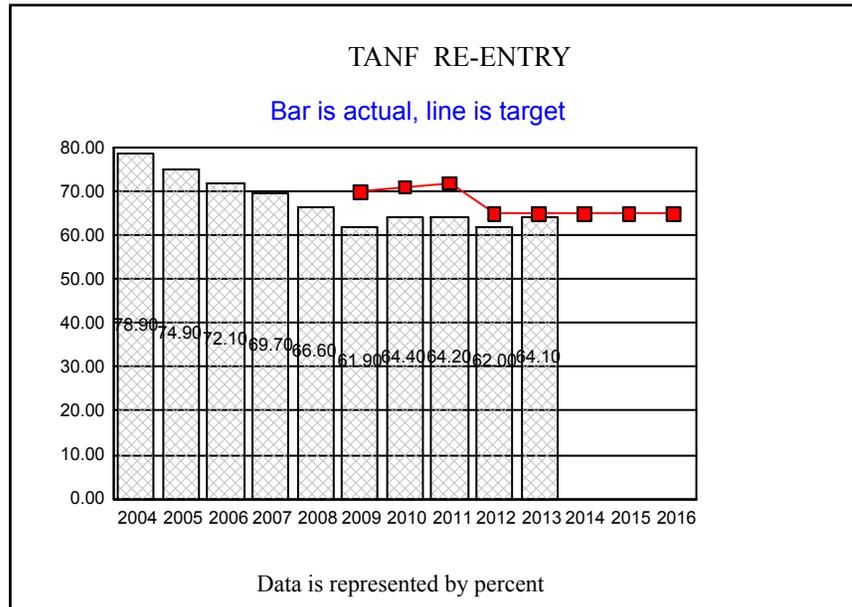
We will continue to monitor data and trends related to family stability, child abuse and foster care utilization. Oregon has also increased the workforce capacity to provide enhanced case management services and intervene much earlier with appropriate services in support of struggling families. When family stability and parenting skills increase as a result of case management and services provided increasing parental protective factors will decrease the need for child welfare resources.

7. ABOUT THE DATA

Reporting cycle - Federal Fiscal year. AFCARS quarterly data is used to identify the number of children entering foster care and Client Maintenance System to identify whether those children were from a household that received TANF cash assistance within the prior two months (referred to as TANF children). The number of TANF children is divided by the total number of children entering foster care for the federal fiscal year to arrive at the percent of children entering foster care who had received TANF cash assistance within the prior two months.

The percentage can be skewed by differing rate of increase/decrease of the two programs. As of FFY 2013 Foster Care entries are decreasing and TANF cash assistance cases are on the rise, this can cause an increase in the percentages.

KPM #3	TANF RE-ENTRY - The percentage of Temporary Assistance for Needy Families (TANF) cases who have not returned within 18 months after exit due to employment.	1991
Goal	People are able to support themselves and their families	
Oregon Context	Oregon Benchmark #14 and the DHS high-level outcome; "Percentage of covered Oregon workers with earnings of 150% or more of the poverty level for a family of four."	
Data Source	JAS/TRACS system placement data and Client Maintenance system public assistance data is used to determine the TANF clients who left TANF due to employment and did not return to cash assistance or were still off cash assistance 18 months after TANF closed.	
Owner	DHS - Self Sufficiency, Xochitl Esparza, TANF Manager, (503) 945-6122	



1. OUR STRATEGY

One of the main goals of the Temporary Assistance for Needy Families (TANF) Job Opportunities and Basic Skills (JOBS) program is to help clients find and maintain employment. The longer clients can stay employed, the higher their wages will be. The department's strategies are focused on meeting people where they are at, and as part of this we strive to give clients the tools they need to be successful in the workplace and to reduce incidences of returning to assistance. Our partners include other state agencies such as the Employment Department and Community Colleges and Workforce Development. We also work closely with county-based services, JOBS program providers, and community social service partners.

2. ABOUT THE TARGETS

Our objective is to increase the number of former TANF clients who do not require future TANF cash assistance. Due to the recent economic crisis DHS used only the 2007 performance data to develop a baseline. The target was determined by adding 1% to the baseline performance. The goal for 2014 and 2015 were maintained to consider the prolonged effects of the economic recession. Our goal continues to be focused on achieving high level of success in this area.

3. HOW WE ARE DOING

64.1% of TANF clients that left public cash assistance due to employment between January 2013 and December 2013 were not receiving cash assistance 18 months later, an increase from the previous year. This indicates that the majority of TANF clients who left the program due to employment were having relative success in the workplace, or have found other resources to maintain their own and their family's financial independence. The increase also may be indicative of an economy that slowly continues to recover.

4. HOW WE COMPARE

There are no relevant public or private industry standards that directly compare to this measure.

5. FACTORS AFFECTING RESULTS

This measure may be affected by several things, including the status of the economy, the labor market and industry. It can also be affected by the effectiveness of the JOBS program that determines, coordinates, and provides services to assist TANF clients find and retain employment, and offer strategies to enhance wage gain efforts. As the TANF caseload remains relatively high, a smaller percentage of families are able to be served in the JOBS program which also affects the program's ability to help families move off assistance through job placement. As a way to help the state balance its budget shortfall, the JOBS Program budget was reduced by half in 2011-13 compared to the previous biennium budget. This meant that the program was funded to support only 25% of those required to participate in employment or other alternatives. Additionally, the Post TANF payment was progressively reduced and then suspended. In 2013-15, the program was modified to allow for flexibility of services that support families in becoming self-sufficient.

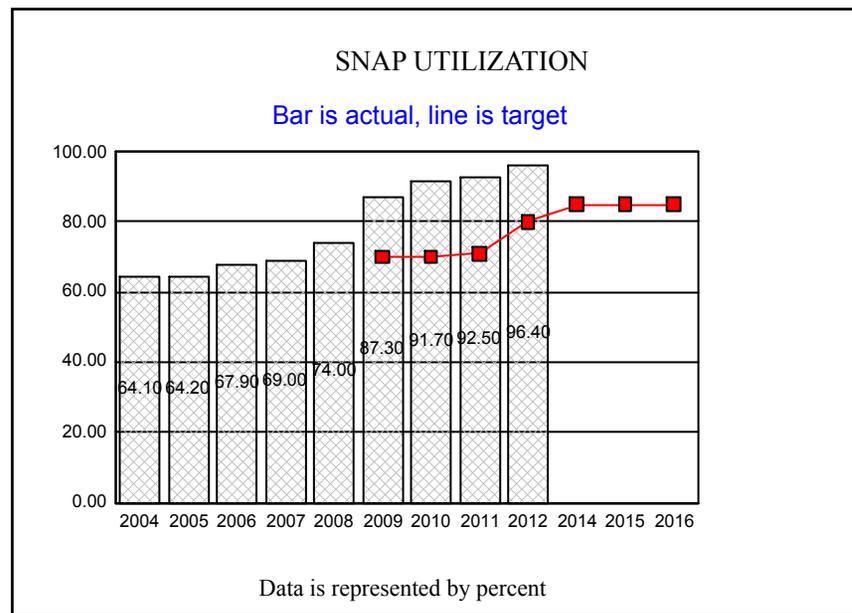
6. WHAT NEEDS TO BE DONE

Further study of this measure is needed to ensure it accurately reflects the TANF/JOBS programs' design in future biennia. This measure was modified for calendar year 2010.

7. ABOUT THE DATA

Reporting cycle – Calendar Year. This measure recently changed from counting all clients who left due to employment and are currently off TANF, to counting only clients who have never returned. The methodology and criteria used to obtain the data is adjusted as program changes occur, to ensure the validity of the data. Recidivism and Placement reports are issued separately, on a monthly basis and studied for any potential anomalies, as well as to identify trends in performance. The data is sent to program managers and interested parties.

KPM #4	SNAP (Supplemental Nutrition Assistance Program) UTILIZATION - The ratio of Oregonians served by SNAP to the number of low-income Oregonians.	2001
Goal	People are able to support themselves and their families.	
Oregon Context	This performance measure links to the DHS goal, "People are able to support themselves and their families." This measure also links to Oregon Benchmark #57 and the DHS high-level outcome, "Percent of Oregon households that are food insecure as a percentage of the US.	
Data Source	Food Stamp Management Information System and Census estimates.	
Owner	DHS, Self Sufficiency, Belit Burke, (503) 947-5389	



1. OUR STRATEGY

Our strategy is to maintain our outreach efforts, increase access and continue a focus on customer service. Outreach and education efforts will continue to focus on the most vulnerable populations (children and elderly) and the most under-served (the elderly).

2. ABOUT THE TARGETS

Target levels are established to assess the relative improvement in the proportion of Oregonians eligible for Supplemental Nutrition Assistance Program (SNAP) who are accessing the program. An increase in the proportion eligible that accesses the program is a positive outcome. The targets are set using the Program Access Index (PAI), which is one of the measures Food and Nutrition Services (FNS) uses to reward states for high performance.

The PAI is an index of the average monthly number of SNAP participants over the course of a calendar year to the number of people with income below 125 percent of the official poverty level. FNS computes average monthly participation over a calendar year – rather than the Federal fiscal year – to better align the participation count with the annual poverty measure. FNS makes an adjustment to the counts of participants, the numerator of this index, to better reflect State performance in the administration of SNAP.

3. HOW WE ARE DOING

SNAP participation (persons receiving benefits) has increased monthly for several years. In just the last 12-month period (07/2013-07/2014), the number of households receiving SNAP in Oregon decreased: from 443,618 to 439,865 households 789,001 persons, the decline is likely due to increased economic recovery in Oregon. (1 in 5 state residents The DHS SNAP has received federal participation bonuses for the past three federal fiscal years for ranking in the top three states nation-wide in participation rate.

4. HOW WE COMPARE

In 2007 Oregon was ranked number 18 in the nation in participation according to the PAI. In 2008 and 2009, Oregon was ranked second in the nation in SNAP participation based on the PAI and has remained one of the highest ranked states for participation. FNS ranking is based on the number of potential eligibles compared to the number receiving benefits.

There are eight states within the FNS Western Region: Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon and Washington. (Guam is excluded from this comparison because of its small size and temporary suspension of SNAP.) Within the region, Oregon continues to be ranked 1st in participation (5th in the nation), the next closest state is Washington, ranked 8th in the nation. California is last in the Western Region and in the nation (ranked 50th). An additional comparison looks at Oregon and other states outside of the Western Region. These states have similar populations and a similar mix of relatively few urban/population centers with larger rural/remote areas as is found in Oregon. These states are: Alabama, ranked 25th; Kentucky, ranked 14th; Minnesota, 43rd; Oklahoma, ranked 26th; and South Carolina, 24th.

5. FACTORS AFFECTING RESULTS

Oregon has had great success in encouraging use of the on-line application, which is one of several efforts to ease access to SNAP benefits. The recession created critical need for basic necessities such as food in households that never expected asking for help. Oregon is also working to expand outreach efforts to identify and remove barriers to the SNAP program in all populations.

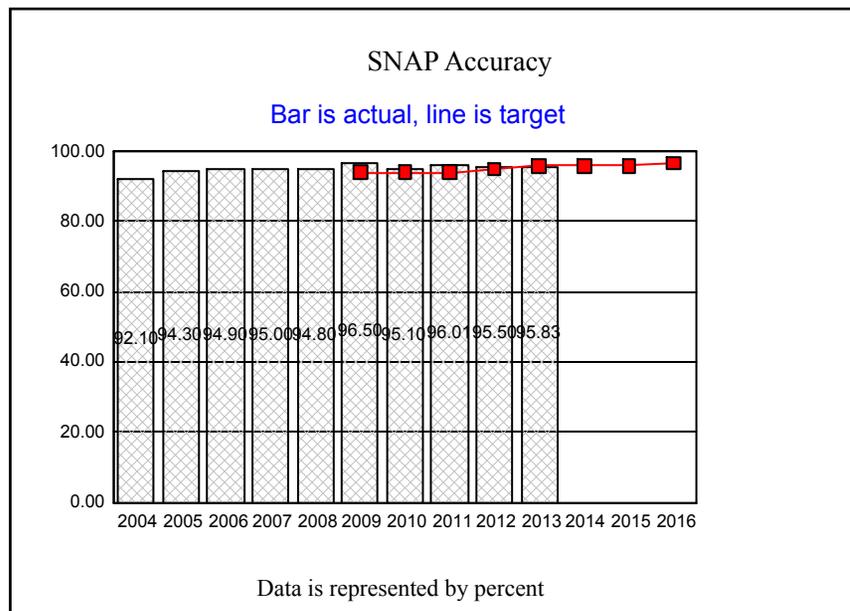
6. WHAT NEEDS TO BE DONE

Despite our outstanding performance in getting benefits to eligible households, Oregon as a state has a hunger problem. For several years, Oregon ranked among the top three states in food insecurity: the number of households in which residents were not certain where their next meal was coming from. Finally, the state is making progress. In the latest USDA data on very low food security or hunger, Oregon ranks 15th in the nation^[1]. Oregon continues efforts in outreach and improved customer service to reach more Oregonians; including working to increase population segments that are underserved. Oregon also partners with many anti-hunger organizations to help understand the issues and try to identify new ways to fight hunger in Oregon.

7. ABOUT THE DATA

Reporting cycle – calendar year. Reports submitted to Food and Nutrition Services (FNS) from our Food Stamp Management Information system is compared by FNS to Census estimates of Oregonians living at or below the federal poverty level.

KPM #5	SNAP (Supplemental Nutrition Assistance Program) ACCURACY - The percentage of accurate SNAP payments	2009
Goal	People are able to support themselves and their families	
Oregon Context	This measure links to Oregon Benchmark #58 and the DHS high-level outcome, "Percent of Oregon households that are food insecure as a percentage of the US."	
Data Source	Quality Control (QC) Active case accuracy rate.	
Owner	DHS, Office of Self Sufficiency Programs, Belit Burke, (503) 947-5389	



1. OUR STRATEGY

DHS has utilized an effective strategy in the past several years to reduce the error rate to below the national standard . This includes:

§ Use of the SNAP Steering Committee, including field representatives, advocacy groups, policy, and Program Integrity, to oversee accuracy, access and customer services initiatives.

§ Making available a variety of training tools for all levels of field staff, including materials listed on the SNAP policy website. Tools include classroom training, NetLink classes, monthly skill challenges, “On Target” and “In the Loop” accuracy newsletters and e-learning.

§ Continuation and enhancement of a local review process which utilizes dedicated program accuracy reviewers. Over three thousand SNAP cases are assessed each month and feedback is shared with local offices. Reports produced from the database help identify areas of concern and keep track of accuracy targets.

§ Updating and expanding SNAP related training, including SNAP core training, interview and narration training, and refresher training.

§ Pursuit of continuous improvement concepts through Program Integrity Steering Committee.

§ Making QC and Quality Assurance (QA) data available through the Office of Program Integrity (OPI) intranet website.

2. ABOUT THE TARGETS

The target for this measure is for the state’s payment error rate to be below the national standard. The national standard changes every year based on each state’s performance. The national standard has improved each year since FY 06. In FY 13, the national error rate was 3.20 percent, a historic low.

3. HOW WE ARE DOING

In FY 09, Oregon reached an all-time low error rate of 3.54 percent. The rate increased to 4.88 in FY 10 and decreased to 3.99 percent in FY 11. Oregon was placed into first year liability status in FY12, based on the error rate of 4.66 percent. In FY 13 our rate decreased to 4.17 percent.

4. HOW WE COMPARE

There are eight states and one territory within the FNS Western Region: Alaska, Arizona, California, Guam, Hawaii, Idaho, Nevada, Oregon and Washington. (Guam is excluded from this comparison because of its small size.) In FY13, Oregon was ranked fifth in our region in accuracy. Within the region, Oregon continues to be ranked 1st in participation (5th in the nation). The next closest state is Washington, ranked 8th in the nation.

An additional comparison looks at Oregon and other states outside of the Western Region. These states have similar populations and a

similar mix of relatively few urban/population centers with large rural/remote areas, as is found in Oregon. For this comparison, Oregon ranks 5th in accuracy.

Similar Population

South Carolina – 1.75%

Alabama – 1.70%

Oregon – 4.17%

Minnesota – 4.08%

Kentucky – 5.78%

Oklahoma – 3.99%

Among the top five states with high participation rates, Oregon ranks 5th in accuracy

Top Participation Rates

Delaware – 3.53%

Washington D.C. – 6.87%

Vermont – 9.66%

Maine – 2.48%

Oregon – 4.17%

5. FACTORS AFFECTING RESULTS

Oregon has worked hard to improve our Quality Control Payment Error Rate over the past decade. Despite increasing caseloads, efforts have been successful in reducing the error rate to 3.54 percent in FY 09, an all-time low, and to 4.5 percent in FY 12. Strategies contributing to this success include:

- § Statewide Quality Control (QC) Panel video-conference meetings are held each month to discuss QC errors and preventative measures. This collaborative effort includes participation from field staff, SNAP policy staff, program integrity and training staff.
- § DHS continues to use an improved intake process. Clients are seen more quickly, benefits are issued sooner and errors caused by delays in processing are reduced.
- § “Error Trends” training is provided by Program Integrity staff to selected branch offices across the state .

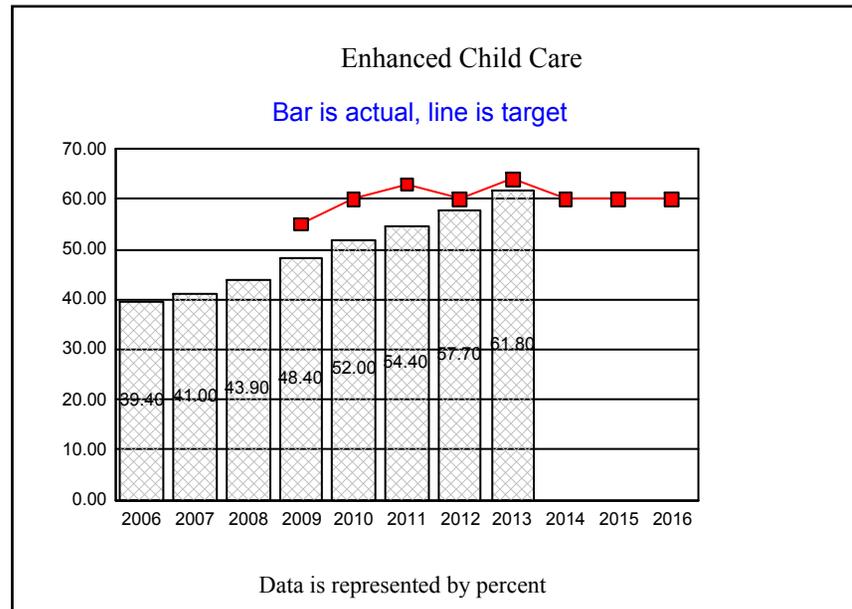
6. WHAT NEEDS TO BE DONE

Oregon needs to maintain focus on SNAP accuracy. This will be accomplished by implementing the strategies listed above and by ongoing collaborative efforts with Office of Program Integrity, field staff, the SNAP policy unit and training staff. In addition, continuing to move forward with modernization efforts is expected to result in increased program accuracy in SNAP.

7. ABOUT THE DATA

This data is available in June every year for the previous Federal Fiscal Year. The data is regressed by federal validation and allows comparison of Oregon to other states. FY 12 and FY 13 payment accuracy data has been regressed by federal validation. Error rates are published on the FNS Partnerweb website at <https://www.partnerweb.usda.gov>. The QC active case payment accuracy rate will be determined by subtracting the error rate from 100.

KPM #6	ENHANCED CHILD CARE - The percentage of children receiving care from providers who are receiving the enhanced or licensed rate for child care subsidized by DHS	2009
Goal	People are able to support themselves and their families	
Oregon Context	This performance measure links to the DHS goal, "People are able to support themselves and their families." With respect to children in care this measure links to the DHS goals, "People are healthy" and "People are safe."	
Data Source	DHS Provider Pay system. Percent of children receiving care from providers paid through DHS Provider Pay system receiving the enhanced or licensed rate.	
Owner	DHS - Self Sufficiency, Rhonda Prodzinski, (503) 945-6108	



1. OUR STRATEGY

To improve the quality of care available to subsidized families, DHS provides an incentive of 8 to 15% above the standard rate, dependent on the provider's

geographic location, for license-exempt providers who meet the same basic training requirements that are required of licensed family providers. DHS partners with Child Care Resource & Referral Agencies (CCR&R), American Federation of State, County and Municipal Employees (AFSCME), Service Employees International Union Local 503 (SEIU) and the Oregon Registry. The CCR&R's educate parents and help them find quality child care. They also assist with provider training that is required to qualify for the DHS enhanced rate and encourage licensed and enhanced providers to care for DHS subsidy families. The Oregon Registry documents provider training. DHS, the CCR&Rs, AFSCME, SEIU and the Oregon Registry team together to publicize training and resources available.

All license-exempt and registered providers must take a two hour pre-service online Child Care Basic Health and Safety class before they can be approved as a subsidy provider. A Child Care Orientation class is required for all newly approved license-exempt providers. The Orientation class includes information on resources available including no-cost training on First Aid/CPR, Recognizing and Reporting Child Abuse and Neglect, and Food Handlers to publicize the enhanced rate as well as the USDA Food Program. Providers also receive a license-exempt provider Literacy Tool Kit

DHS, in collaboration with the Oregon Department of Education, Early Learning Division (ELD) leveraged the existing Head Start contracted child care and expanded through a three year field test to Oregon Program of Quality providers. The key goals of the field test are for children to have access to continuous quality child care, for providers to have stable funding and for families to have continuity of quality child care to support their employment. A statewide research team has been engaged in evaluating the field test which is in its third year. The field test for expanding contracted child care is related to priorities set by the Governor and the Early Learning Council (ELC) to better prepare children for kindergarten and beyond. OPQ was Oregon's first step in creating a quality child care system for providers.

As ELD progressed their quality system, they adopted a new version to align with the Federal level movement for quality. With this shift, Oregon has developed a Quality Improvement Rating System (QRIS) for providers. QRIS is a star rating system that raises the quality and consistency of child care and early learning programs across the state. It helps ensure children in QRIS programs are ready for kindergarten, star rating starts at a C2Q (commitment to quality) and continues upward with 3, 4 and 5 Star. QRIS is currently in a pilot stage with rollout beginning state wide. DHS hopes to increase contracting efforts with QRIS in the near future. The Early Learning Division and DHS are also excited about the prospect of expanding contracted child care opportunities with Head Start as they partner with Child Care programs in their communities through the federal Early Head Start – Child Care Partnership grants. These partnerships provide more of Oregon's children with the opportunity to have high quality child care. DHS is engaged in this work and is building stronger collaborations with other agencies and partners to integrate our ERDC program with the state's early learning system. Guiding more of our providers through the Quality Improvement Rating System will be a priority.

2. ABOUT THE TARGETS

The targets were set based on an anticipated - and desired - increase in the numbers of children receiving care from providers who meet the training standards required to become licensed. These training standards promote child safety, well-being and enhance the quality of child care which encourages a more stable provider base. Stability in care arrangements promotes healthy child development, continuity of care and helps parents remain employed.

3. HOW WE ARE DOING

There was a steady increase in the percentage of children receiving care either from a license-exempt provider receiving the enhanced rate or from a licensed provider from 2009 through present. There was also an increase in the number of license exempt providers who became registered providers with the Early Learning Division.

4. HOW WE COMPARE

Although a number of states have a tiered reimbursement system for child care providers, requirements vary too widely to draw meaningful comparisons.

5. FACTORS AFFECTING RESULTS

The 2007 Legislature authorized significant rate increases that took effect October 1, 2007. This gave parents increased access to licensed providers. In addition the Legislature authorized significant funding for outreach and training for license-exempt providers. The combination of more parents selecting licensed providers and increased investment in exempt provider training resulted in a steady increase in the percentage of children receiving care from providers earning the enhanced rate or the licensed rate. In July 2010, a Child Care Orientation class became required for all new license-exempt providers.

In July of 2013 an agreement was reached to increase licensed family child care provider rates effective October 1, followed by an agreement to increase license-exempt family provider rates effective November 1 of 2013.

An analysis of Subsidy Employment by Industry Sector was completed by the DHS Forecasting Unit in April 2010. The majority of ERDC clients work in industries that constrain child care options. Many subsidy parents work evening or night shifts, weekend shift or have a week or less advance notice of work schedule. A recent study confirmed that the majority of subsidy participants have two or more constraints on child care options. Most regulated child care facilities only operate during the day, and many require the parent pay for a part-time or full-time slot, so this limits subsidy parents

A new federal strategic framework from the Administration for Children and Families was made available in June of 2013. The Office of Child Care is recognizing the importance of access to quality childcare that supports parental employment in stable jobs that help parents provide for their families, that leads to healthy, happy and competent children who are ready for school with the necessary pre-academic skills; and high functioning CCDF grantees that use program dollars effectively, efficiently and with integrity, to the benefit of eligible children and families. The goal for DHS which aligns with federal ideals is to build a child care subsidy system that is child-focused, family friendly and fair to providers.

The Race to the Top Early Learning Challenge Grant is a four year federal grant recognizing Oregon's early learning work, and strengthening a statewide early care and education system. State recipients were chosen based on their ability to implement coherent, compelling, and comprehensive early learning education reform. This funding is designed to spur broad system improvement over four years to ensure Oregon children enter school ready to learn and succeed. The Early

Learning Council prioritized the activities below through determining the greatest impact on young children, and that fit grant scope and requirements:

- Tiered Quality Rating Improvement System

Race to the Top resources will engage providers with more training, mentorship, and professional development.

- Early Childhood Workforce

Race to the Top resources will provide professional development to support career pathways for early childhood educators to develop expertise in quality early learning and best practices.

- Family and Community Access

Race to the Top resources will provide dedicated outreach to build an informed, engaged public around quality early learning environments.

- Enhance the QRIS Data System

Race to the Top resources will enhance and connect data systems to capture quality information to deliver service providers, policy makers, and funders information needed to ensure better outcomes for children.

- Kindergarten Assessment

Race to the Top resources will allow Oregon to align statewide early learning with K-12 Common Core standards, launch the statewide rollout of the assessment, and gauge where children are at when they enter school.

Activities connecting early learning programs and the K-12 system are a priority throughout. Grant funding provides Oregon an opportunity to execute the system, making historic progress.

6. WHAT NEEDS TO BE DONE

DHS will continue to work with the Early Learning Division to promote innovations in subsidy intake and consumer education to increase access to high quality child care.

Efforts to inform parents and providers of the importance of quality child care and training continue to be improved. Exempt providers are represented by SEIU. DHS, Child Care Resource and Referral agencies and SEIU will continue to work together to promote the enhanced rate and help exempt providers access the training required to earn the enhanced rate.

HB 2013 legislatively mandated the Professional Development and Quality Improvement Committee for license-exempt family child care providers that receive subsidy. The committee shall develop a quality improvement system for self-employed child care providers and must use evidence-based approaches. Any quality standards established for the subsidy program are subject to collective bargaining.

New Proposed Federal Rules for CCDF – The proposed regulatory action is needed to improve accountability broadly across many areas of the CCDF program, but is especially focused on ensuring children supported by CCDF funds are in safe, healthy, quality child care, and empowering parents with transparent information about the child care choices available to them.

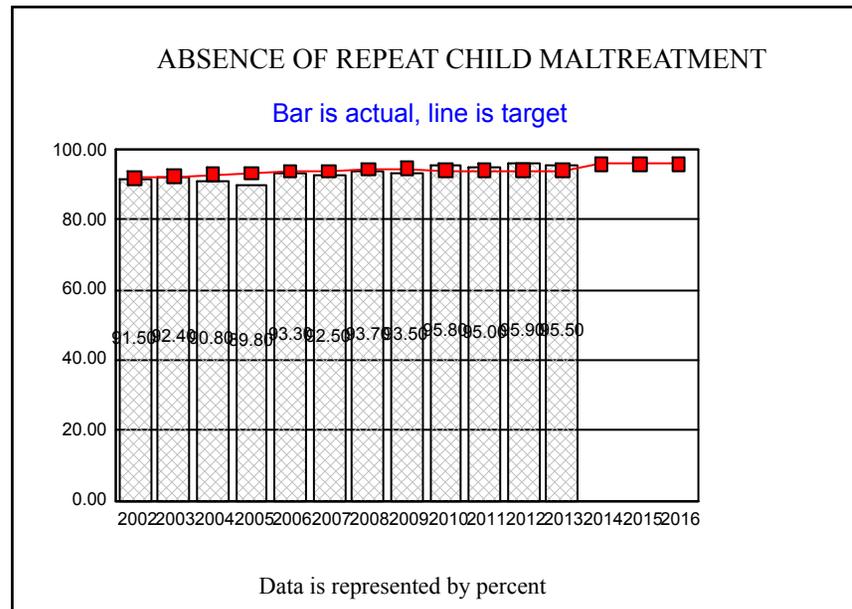
The new proposed rule would provide the first comprehensive update of CCDF regulations since 1998. The changes have the twin goals of promoting families' economic self-sufficiency by making child care more affordable, and fostering healthy child development and school success by improving the quality of child care. This NPRM is needed to improve accountability broadly across many areas of the CCDF program, but is especially focused on ensuring children supported by CCDF funds are in safe, healthy, quality child

care, and empowering parents with transparent information about the child care choices available to them.

7. ABOUT THE DATA

Reporting cycle - point in time, October of each year. This measure is reported as a percentage. The data are taken from the DHS Provider Pay system and compares the number of children in care with providers earning the enhanced and licensed rate to the total number of active providers in the system. As a result, the number is very reliable. Any variance caused by possible coding errors would be too small to be statistically significant. The data has been adjusted to include Head Start. Beginning, September 1, 2012, OPQ contracted child care was included.

KPM #7	ABSENCE OF REPEAT MALTREATMENT - The percentage of abused/neglected children who were not subsequently victimized within 6 months of prior victimization.	1997
Goal	People are safe	
Oregon Context	This performance measure links to the DHS goal, "People are safe." It also links to Oregon Benchmark #50 and the DHS high-level outcome, "Number of children per 1,000 persons under 18, who are: a) neglected/abused, b) at a substantial risk of being neglected/abused." This measure concerns children who are victims in founded cases of abuse. The term "founded" means that there is reasonable cause to believe that child abuse or neglect has occurred.	
Data Source	State Child Welfare SACWIS data system.	
Owner	DHS - Child Safety Program, Office of Child Welfare Programs, Stacey Ayers (503) 945-6696	



1. OUR STRATEGY

The state Child Welfare Program in conjunction with the National Resource Center for Child Protective Services (NRCCPS) developed and

implemented a comprehensive Safety Intervention Model in March 2007. The Safety Intervention Model, known as the Oregon Safety Model (OSM) includes all actions and decisions required throughout the life of a case to:

- Define Child Welfare (CW) as the “safety expert” and assure that all child welfare staff receives training in child safety interventions .
- Assess allegations of child abuse in a timely manner and provide a comprehensive protective capacity assessment of caregivers when a child has been determined to be unsafe.
- Develop focused service plans in families impacted by issues of abuse and create change goals to increase capacity and restore safety for children.
- The OSM has specific requirements regarding confirming and *reconfirming* the safety of children in their own homes or in out-of-home care throughout the life of the case. Active safety monitoring will enhance safety of children and decrease the potential of reabuse.
- The OSM moves away from incident-based child abuse assessments toward comprehensive safety assessments which focus on six factors related to child safety: 1) The extent of the abuse or neglect; 2) The circumstances surrounding the abuse or neglect; 3) Child functioning; 4) Adult functioning ; 5) Parenting; and 6) Disciplinary practices.

2. ABOUT THE TARGETS

Oregon performed above the Target of 94.1 percent in 2013. The current national standard for Absence of Repeat Maltreatment is 94.6 percent. The Target of 96 percent for 2014 and 2015 show a desire to increase our performance in keeping children safe.

3. HOW WE ARE DOING

From 2012 to 2013, Oregon saw a slight decrease in this performance measure of .4%. While 95.5% is still above the national standard, this is a measurement Oregon will continue to closely monitor to ensure it does not continue to drop.

4. HOW WE COMPARE

Oregon's absence of repeat maltreatment rate is better than the national standard of 94.6%.

5. FACTORS AFFECTING RESULTS

The comprehensiveness of child abuse/neglect assessments takes significant resources and workload demand and urgency. The major factors affecting families of abused and neglected children are drug/alcohol abuse, parental involvement with law enforcement, domestic violence and poverty. Often, there are several of these factors co-occurring in families of child abuse/neglect victims.

6. WHAT NEEDS TO BE DONE

In February 2013, the NRCCPS assisted the department to develop curriculum for OSM training for each of the department's child welfare supervisors. The training consisted of 4 ½ days in a classroom setting and focused on the comprehensive assessment as well as other key concepts of the OSM. The training was piloted from April through September 2013, in 6 counties including Multnomah, Marion, Polk, Yamhill, Klamath and Lake. A total of 74 participants including child welfare supervisors, program managers and a representative from Portland State University Training unit completed this 4 ½ day training over a period of 6 months.

Following each classroom session, Intensive Field Consultation was provided to approximately 63 CPS & Permanency supervisors by the Child Protective Services Program consultants. The consultants were able to provide a minimum of two hours per week of Intensive Field Consultation for each supervisor to further their learning and application of the OSM concepts with their casework staff .

From October 2013 through May 2014, nearly 180 child welfare supervisors and program managers participated in the training and received intensive field consultation. Currently, another round of training for new supervisors and program managers is scheduled to begin the last week of August 2014. This has started.

In addition to the OSM training that was developed for supervisors, the CPS program is currently developing an interactive, OSM computer based training for child welfare caseworkers and other DHS staff. While some modules of the training are still in production, modules related to comprehensive assessments have been released and are being used by child welfare staff .

Oregon is also in the beginning stages of implementing a Differential Response (DR) system. For those families who are eligible for Child Protective Services, Differential Response is about providing more than one pathway for families to enter and exit the child welfare system . Assessing the needs of each family on an individual basis and offering services to meet those needs will continue to be critical to our work with families. Additionally, a DR system allows for greater flexibility in responding earlier and more meaningfully towards a collaborative helping process for families.

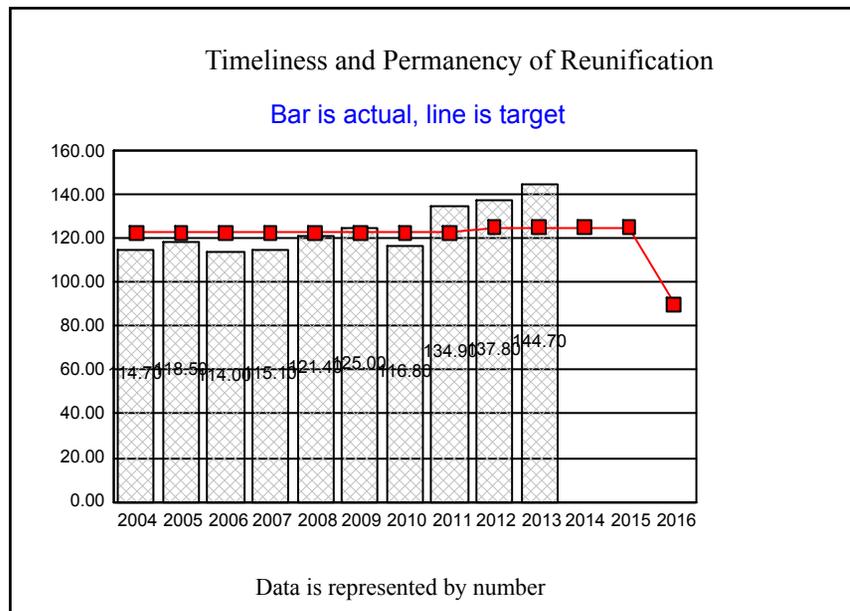
Finally, DHS is continuing to implement the Strengthening, Preserving, and Reunifying Families Act (SPRF) which requires DHS and county partners to implement programs to provide family preservation services to eligible families and reunification services for children in the custody of DHS, with the goal of fostering collaboration across programs and resources to help children remain safely with their families and thereby reduce the number of Oregon children in foster care.

Both Differential Response and SB 964 provide earlier interventions that connect families with preventive, community based services which can prevent further contact with the Child Welfare System, thus further reducing the reabuse rate.

7. ABOUT THE DATA

Definition: Of all children who were victims of a substantiated maltreatment allegation during the first 6 months of the year, the percent who were not victims of another substantiated maltreatment allegation within 6 months of the original abuse/neglect. Due to availability of more timely data in the Result Oriented Management system, we have transition to gathering the data from this source.

KPM #8	TIMELINESS AND PERMANENCY OF REUNIFICATION OF CHILDREN	2009
Goal	People are safe	
Oregon Context	This systemic KPM aligns with Oregon’s vision to have safe, caring and engaged communities.	
Data Source	The data used for this KPM are the same data gathered and reported to the federal government every six months as part of Oregon’s Federal Child and Family Services Review (CFSR).	
Owner	DHS - Child Well-Being Program, Office of Child Welfare Programs DHS Kevin George (503) 945-5987	



1. OUR STRATEGY

While children need and deserve timely permanency, the processes to terminate parental rights and establish a legal and emotional relationship with a new (adoptive) family is complex and time consuming. This process is being accomplished with due care given to

protecting the civil rights of the biological family while at the same time assuring, as much as possible using good social work practice, that the child's new (adoptive) family will truly be permanent and meet his or her current and life-long needs.

Identification and implementation of efficiencies in the adoption process intended to decrease the length of time to achieve finalization and increased monitoring and support of cases and families as they move through the process to finalization, to include:

- Use of the SAFE Home Study model as a common study approach to approval of families
- In-state general applicant adoptive home recruitment that includes an intra-state web-based photo exchange
- Increased focus of placement of children with relatives upon entering care
- Work with JCIP on the impact Judges can have on increasing timeliness of adoption
- Evaluation of barriers to timely adoptions occurring in targeted branch offices. Branch specific plans to address those barriers
- Increased training regarding the adoption process
- Addition of permanency consultants to the Permanency Unit to consult earlier and throughout the life of a Child Welfare case

2. ABOUT THE TARGETS

The target for this measure represents the goal within Oregon's Program Improvement Plan. The national standard for this measure is 104.4 or higher. The national standard represents the 75th percentile in performance among states (i.e. 75% of states have a Timeliness of Adoptions score LOWER than 104.4).

3. HOW WE ARE DOING

KPM #9 is a composite measure taking into account separate performance components impacted by practice, policy, and statute. 2011 data was not reported in the last round. Three components, C2.2 Median Months to Adoption, C2.3 Timeliness to Adoption for those children who are legally free or who have been in foster care for 17 or more months and C2.4 Children in care 17 months or longer who became legally free during the first 6 months of the year all remained stable for 2012 as compared to 2011, with slight positive changes to 2 of these 3 components. However, the other two components, C2.1 Adopted in less than 24 months from removal from the home and C2.5 Adopted in less than 12 months from legally free date both showed significant decreases in performance for 2011 and 2012. The net result was a decrease in performance in this KPM by 9.1% from the 2010 to 2011 level, and a decrease of 12.6% from the 2011 to 2012 level. An increase occurred in 2013 but Oregon is still below the target for this measure.

4. HOW WE COMPARE

Currently, Oregon's performance is below the national standard.

5. FACTORS AFFECTING RESULTS

With the implementation of Oregon's SACWIS system, the department has continued to revise the Federal AFCARS file which is the source for calculating the data in this measure.

The department has developed key strategic efforts to address the issue of foster care long stayers. These efforts include increased training and focus for how to work with teens on their permanency plans, specific case consultation on cases of youth who are in long term foster care, Casey Family plans in identified counties that focus on reduction of long stayers, and specific case consultation on children for whom reunification has not been timely achieved. Success in getting long stayers out of foster care and into a permanent plan, specifically adoption, will reduce the composite score in this key performance measure.

Another factor that affects the results of this composite is workload of field caseworkers. The process of freeing, placing, and finalizing an adoption is paperwork intensive on the part of field caseworkers. When staffing levels are down which they were during the recession, not all work gets completed in a timely manner. With the addition of casework staff over the past year, the performance of this composite should be affected in a positive manner.

6. WHAT NEEDS TO BE DONE

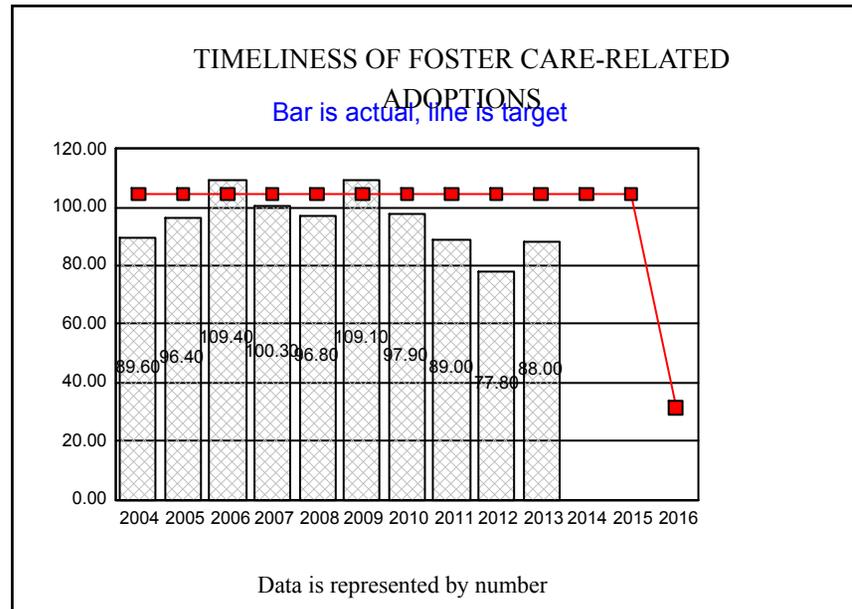
The Department should continue to proceed with implementation and development of the various activities identified in OUR STRATEGY section.

7. ABOUT THE DATA

The timeliness of adoptions composite KPM is made up of five individual measures. There are two measures around timeliness of adoptions, two measures around the progress being made for children in care at least 17 months, and one measure for those children who are legally free and progress towards finalization.

Each of these measures has been combined into one overarching score. A higher score represents better performance. The data represents performance during a federal fiscal year (October – September).

KPM #9	TIMELINESS OF FOSTER CARE RELATED ADOPTIONS	2009
Goal	People are safe	
Oregon Context	This systemic KPM aligns with Oregon’s vision to have safe, caring and engaged communities.	
Data Source	The data used for this KPM are the same data gathered and reported to the federal government every six months as part of Oregon’s AFCARS (Adoption and Foster Care Analysis & Reporting System) file, and used in the Federal Child and Family Services Review (CFSR).	
Owner	DHS -Office of Child Welfare Programs, Kathy Prouty, Permanency & Adoptions Program Manager, 503-947-5358	



1. OUR STRATEGY

While children need and deserve timely permanency, the processes to terminate parental rights and establish a legal and emotional

relationship with a new (adoptive) family is complex and time consuming. This process is being accomplished with due care given to protecting the civil rights of the biological family while at the same time assuring, as much as possible using good social work practice, that the child's new (adoptive) family will truly be permanent and meet his or her current and life-long needs.

Identification and implementation of efficiencies in the adoption process intended to decrease the length of time to achieve finalization and increased monitoring and support of cases and families as they move through the process to finalization, to include:

- Use of the SAFE Home Study model as a common study approach to approval of families
- In-state general applicant adoptive home recruitment that includes an intra-state web-based photo exchange
- Increased focus of placement of children with relatives upon entering care
- Work with JCIP on the impact Judges can have on increasing timeliness of adoption
- Evaluation of barriers to timely adoptions occurring in targeted branch offices. Branch specific plans to address those barriers
- Increased training regarding the adoption process
- Addition of permanency consultants to the Permanency Unit to consult earlier and throughout the life of a Child Welfare case

2. ABOUT THE TARGETS

The target for this measure represents the goal within Oregon's Program Improvement Plan. The national standard for this measure is 104.4 or higher. The national standard represents the 75th percentile in performance among states (i.e. 75% of states have a Timeliness of Adoptions score LOWER than 104.4).

3. HOW WE ARE DOING

KPM #9 is a composite measure taking into account separate performance components impacted by practice, policy, and statute. 2011 data was not reported in the last round. Three components, C2.2 Median Months to Adoption, C2.3 Timeliness to Adoption for those children who are legally free or who have been in foster care for 17 or more months and C2.4 Children in care 17 months or longer who became legally free during the first 6 months of the year all remained stable for 2012 as compared to 2011, with slight positive changes to 2 of these 3 components. However, the other two components, C2.1 Adopted in less than 24 months from removal from the home and C2.5 Adopted in less than 12 months from legally free date both showed significant decreases in performance for 2011 and 2012. The net result was a decrease in performance in this KPM by 9.1% from the 2010 to 2011 level, and a decrease of 12.6% from the 2011 to 2012 level. An increase occurred in 2013 but Oregon is still below the target for this measure.

4. HOW WE COMPARE

Currently, Oregon's performance is below the national standard.

5. FACTORS AFFECTING RESULTS

With the implementation of Oregon's SACWIS system, the department has continued to revise the Federal AFCARS file which is the source for calculating the data in this measure.

The department has developed key strategic efforts to address the issue of foster care long stayers. These efforts include increased training and focus for how to work with teens on their permanency plans, specific case consultation on cases of youth who are in long term foster care, Casey Family plans in identified counties that focus on reduction of long stayers, and specific case consultation on children for whom reunification has not been timely achieved. Success in getting long stayers out of foster care and into a permanent plan, specifically adoption, will reduce the composite score in this key performance measure.

Another factor that affects the results of this composite is workload of field caseworkers. The process of freeing, placing, and finalizing an adoption is paperwork intensive on the part of field caseworkers. When staffing levels are down which they were during the recession, not all work gets completed in a timely manner. With the addition of casework staff over the past year, the performance of this composite should be affected in a positive manner.

6. WHAT NEEDS TO BE DONE

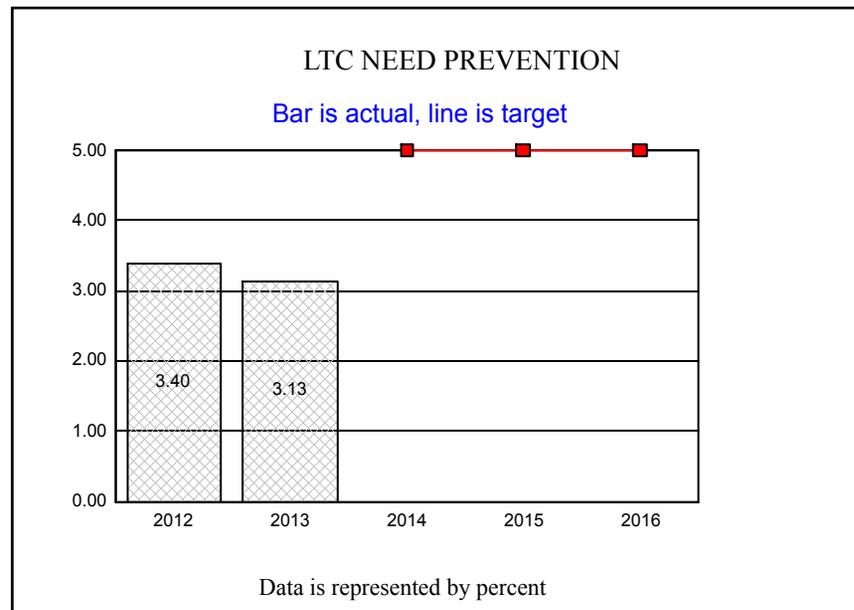
The Department should continue to proceed with implementation and development of the various activities identified in OUR STRATEGY section.

7. ABOUT THE DATA

The timeliness of adoptions composite KPM is made up of five individual measures. There are two measures around timeliness of adoptions, two measures around the progress being made for children in care at least 17 months, and one measure for those children who are legally free and progress towards finalization.

Each of these measures has been combined into one overarching score. A higher score represents better performance. The data represents performance during a federal fiscal year (October – September).

KPM #10	LTC NEED PREVENTION - Percentage of seniors (65+) needing publicly-funded long term care services.	2012
Goal	Independence – People are living as independently as possible.	
Oregon Context	DHS high-level outcome – Independent seniors	
Data Source	DHS data warehouse, the Office of Forecasting, Research-Analysis and Census data	
Owner	DHS - Aging and People with Disabilities, Mike McCormick, (503) 945-6229	



1. OUR STRATEGY

This performance measure links to the DHS goal – “People are living as independently as possible.” This measure also links to Oregon Benchmark #58 and the DHS high-level outcome “Percent of seniors (over 65) living independently.”

This key performance measure will focus APD efforts on keeping people independent, healthy and safe for longer periods of time. With the aging demographic rapidly approaching,

it's key that Oregon design and implement systems that will keep seniors independent for longer periods of time .

2. ABOUT THE TARGETS

The targets were established by the 2013 Legislative Assembly.

3. HOW WE ARE DOING

In 2012, only 3.4% of Oregonians 65 or older needed assistance with publicly funded long term care. In 2013, only 3.13% of Oregonians 65 or older needed assistance with publicly funded long term care. For both years, APD is currently performing better than the goal established by the Legislative Assembly for 2014.

4. HOW WE COMPARE

We are unaware of how other states are measuring this.

5. FACTORS AFFECTING RESULTS

The success of the Coordinated Care Model (Better health, better care, lower costs) should contribute towards the success of this measure. Additionally, the success of the AAA network administering Oregon Project Independence and Older Americans Act program contribute towards keeping seniors independent .

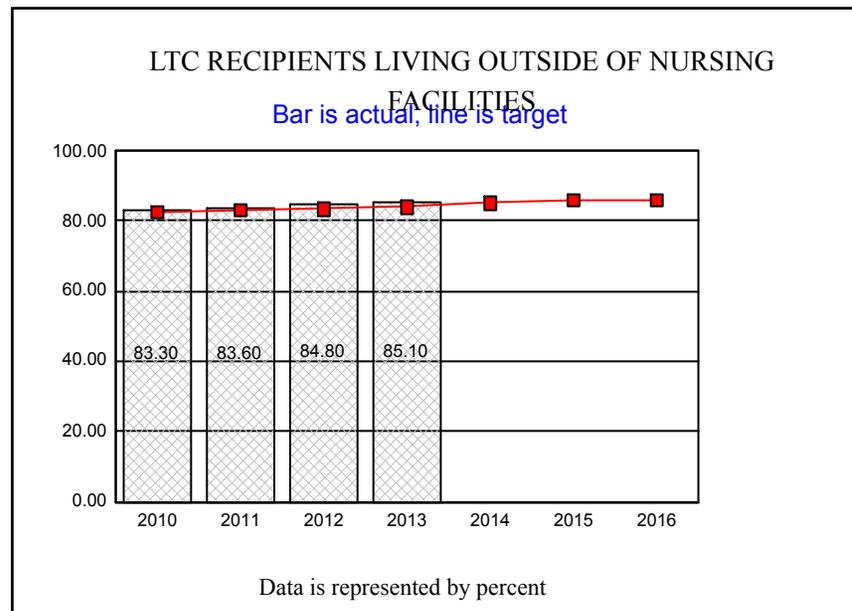
6. WHAT NEEDS TO BE DONE

In 2013, the Legislature recognized the need to get ahead of the demographic growth and passed SB21. This bill requires the State to develop a plan to strengthen and improve Oregon's system of long term care. It also requires the identification of factors that drive the need for long term care services. Strategies have been identified that will keep more seniors independent for a longer period of time. The Department intends to present those results to the 2015 Legislative Assembly.

7. ABOUT THE DATA

Data comes from DHS data warehouse, the Office of Forecasting, Research-Analysis and Census data.

KPM #11	LTC RECIPIENTS LIVING OUTSIDE OF NURSING FACILITIES – The percentage of Oregonians accessing publicly-funded long-term care services who are living outside of nursing facilities.	2012
Goal	People are living as independently as possible.	
Oregon Context	DHS high-level outcome – Independent seniors	
Data Source	The Office of Forecasting, Research and Analysis	
Owner	DHS - Aging and People with Disabilities, Mike McCormick, (503) 945-6229	



1. OUR STRATEGY

This performance measure links to the DHS goal – “People are living as independently as possible.” This measure also links to Oregon Benchmark #58 and the DHS high-level outcome “Percent of seniors (over 65) living independently.” This measure concerns serving seniors and people with physical disabilities in the most independent settings.

Institutionalization of people age 65 and older has historically been used as a marker of the degree to which seniors are living independently and has been extensively tracked. A nursing facility is an institution; people who live in their own homes, in the homes of family, or in community based care settings, adult foster homes, assisted living facilities, and residential care facilities are considered to be living independently. DHS strategy continues to emphasize maintaining seniors in their home communities, outside of institutions, to the maximum extent possible.

APD has increased its efforts to divert or relocate people who receive Medicaid-funded long-term services from nursing facilities and into home or community settings.

2. ABOUT THE TARGETS

This measure is used by APD to track its performance at helping seniors and people with disabilities age in their own communities. APD recognizes that some people must be served in institutional settings, but some institutionalized individuals could receive services in other less restrictive settings if they were available. Oregon continues to be the nation's leader in identifying and establishing community based options to institutional care, and as a result, the values of choice, dignity, and independence for Oregon's senior and disabled citizens continue to be the focus of all agency activities.

3. HOW WE ARE DOING

APD is making steady, continued progress at serving seniors and people with disabilities in settings less restrictive than nursing facilities.

4. HOW WE COMPARE

In a recent nationwide study conducted by AARP, Oregon's long term care system was ranked #3 over a wide variety of factors.

5. FACTORS AFFECTING RESULTS

Hospitals continue to discharge patients "sicker and quicker". In many cases, hospital preference on discharge of a senior who needs additional care is a nursing facility. While institutional care may be appropriate for certain individuals for short periods of time, DHS must continue to aggressively ensure that seniors are appropriately discharged from nursing facilities.

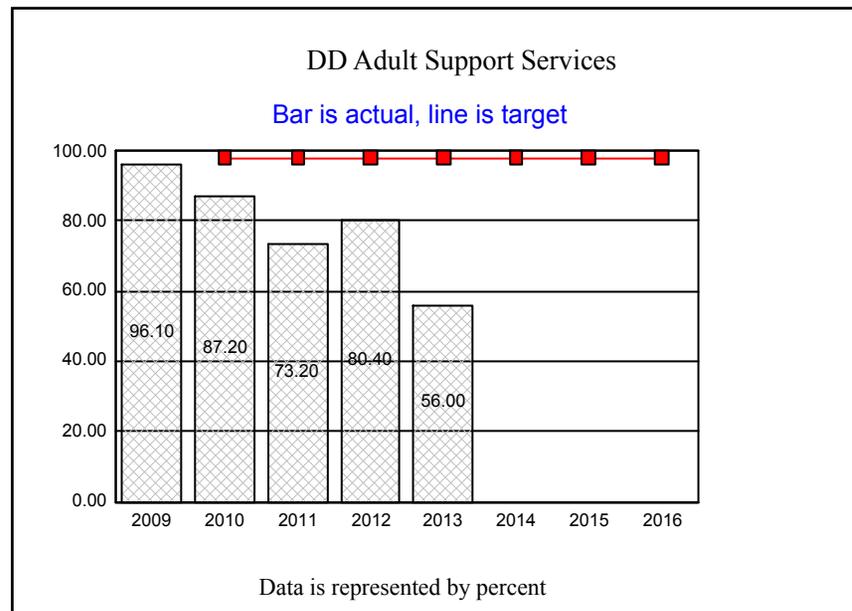
6. WHAT NEEDS TO BE DONE

Using the significant investment dollars made available by the K Plan and Legislative decisions, APD should continue to develop community resources to address the needs of seniors who may not be able to live fully independently, but need not live in an institution. APD needs to continually reinforce the importance of its diversion and transition program to ensure the steady rate of deinstitutionalization remains.

7. ABOUT THE DATA

Data comes from the Office of Forecasting, Research and Analysis. The Office of Forecasting, Research and Analysis publishes actual caseloads in long term care each month. The calculation is $1 - (\text{Total Nursing Facility Long Term Care} / \text{Total Long Term Care})$. An average of each calendar year is reported.

KPM #12	DEVELOPMENTAL DISABILITY SUPPORT SERVICES - The percentage of eligible adults who are receiving adult support services within 90 days of request.	2009
Goal	People are independent. People are safe.	
Oregon Context	Oregon Benchmark - Working Disabled	
Data Source	Express Payment & Reporting System (eXPRS)	
Owner	DHS – Developmental Disabilities, Leaann Stutheit, 503-945-9783	



1. OUR STRATEGY

Office of Developmental Disability Services (ODDS) tracks individuals enrolled in case management for developmental disabilities services who will be turning 18 or otherwise eligible for Adult Support Services using the case management service enrolment data system. In addition, all exits from Support Service Brokerages are tracked to best utilize

vacant capacity. Contracts are modified or new providers solicited to meet the forecasted need as resources allow.

2. ABOUT THE TARGETS

Adult Support Services were developed as a result of the Staley Settlement Agreement. This in-home service for adults with developmental disabilities was the key service accessed to eliminate the wait list for services. Based on the provisions of the settlement, these services needed to be accessed within 90-days of eligibility. The settlement agreement ended in June of 2011. But ODDS is still maintaining the 90-day access threshold as a performance measure, since timely access to service and avoidance of a wait list are important system features.

3. HOW WE ARE DOING

Meeting this target is an ongoing challenge. While individuals are still accessing services, the absolute target of 90-days is not always met.

4. HOW WE COMPARE

There is no equivalency in other states or systems from which to make comparisons. This measure needs to be assessed within its own baselines and metrics.

5. FACTORS AFFECTING RESULTS

In October 2011, Legislative action required that only adults with developmental disabilities eligible for federally funded Home and Community-Based Service Waivers would be eligible for Adult Support Services. Up to that time, this was not a requirement for accessing adult support services. This created another level of action prior to enrollment which as slowed down the process. Additionally, costs per case have escalated, this has caused less resources to be available to expand services to meet forecasted needs.

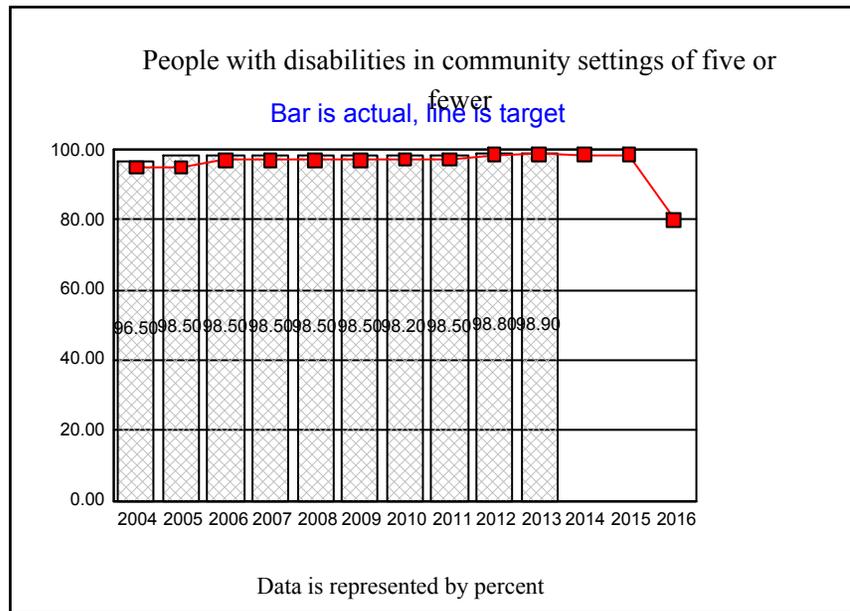
6. WHAT NEEDS TO BE DONE

ODDS is working with the DHS/OHA Forecast and Budget Units to identify trends, future growth, and associated costs. Some modifications to the data collection process may be necessary to assure accurate reporting and analysis.

7. ABOUT THE DATA

Data comes from Express Payment & Reporting System (eXPRS). The reporting cycle is fiscal year. The calculation is: Number of adults receiving adult support services within 90 days of request divided by the number of adults who were eligible and referred for adult support services.

KPM #13	PEOPLE WITH DISABILITIES IN COMMUNITY SETTINGS – The percentage of individuals with developmental disabilities who live in community settings of five or fewer.	2002
Goal	People are living as independently as possible.	
Oregon Context	Increase the percentage of Oregonians with a lasting developmental, mental and/or physical disability who could live on their own with adequate support.	
Data Source	Express Payment & Reporting System (eXPRS)	
Owner	DHS - Developmental Disabilities, Leaann Stutheit, 503-945-9783	



1. OUR STRATEGY

The Office of Developmental Disability Services (ODDS) provides an array of support for people that qualify for services. Historically, many services were

provided in large institutions or other congregate care situation. In recent years focus has been on the development of small (5 or less) residential service settings or the provision of supports in the private home of the individual with developmental disabilities or their family. Critical partners include County Developmental Disabilities Programs, Oregon's network of private service provider entities, and a variety of advocacy/stakeholder organizations.

2. ABOUT THE TARGETS

ODDS provides opportunities to individuals with developmental disabilities to become better integrated with and included in their local communities. By making it possible for people with developmental disabilities to live in small community settings or their own/family homes service outcomes are improved, client satisfaction is higher, and cost efficiencies are achieved. Smaller service settings also provide individuals a chance to experience living in an environment that approximates those experienced by all other Oregon citizens. Additionally, people with developmental disabilities can take advantage of everyday community life and involvement and take advantage of the opportunities this offers.

3. HOW WE ARE DOING

DHS has met or exceeded its target for the past years.

4. HOW WE COMPARE

Oregon ranks near the top in states that provide small residential or in-home services. Oregon is one of only three states that have no public or private institutions (Intermediate Care Facilities for individuals with Intellectual Disabilities – ICF/ID) serving individuals with developmental disabilities.

5. FACTORS AFFECTING RESULTS

ODDS, in recent years through the implementation of the Staley Settlement Agreement and development of Family Support and other in-home type services continues momentum in providing small community-based or family setting services to people with developmental disabilities. Continued implementation of Crisis Diversion assists in keeping people from institutional placement. PASRR- the Pre-Admission Screening Resident Review - is a screening tool which is used to prevent the placement of individuals with mental illness or intellectual or other developmental disabilities (I/DD) in a nursing facility unless their medical needs clearly indicate they require the level of care provided by a nursing facility. When placement into a nursing facility is ruled out, smaller, community based settings are explored. In-home support services and establishment of the Housing Trust Fund also support this measure.

ODDS reviews the programs with people greater than five persons to determine their ability to fill vacancies in the program. Agencies are required to offer

vacancies to individuals determined to be in crisis and in need of residential services. If the larger size program cannot meet the need due to low staff to high client ratio, programmatic changes may be required.

6. WHAT NEEDS TO BE DONE

Preservation of policy and funding structures that contribute to the maintenance and / or improvement of efforts for providing in-home services to persons with developmental disabilities, and continued attention to the impact of aging family caregivers and their needs. Access to funding for modifications of homes to assure their accessibility and appropriateness in regard to individual needs. Finally, access to low income housing options is a major barrier and needs to be addressed.

Next steps also include a focus on quality of life issues, particularly for those clients under age 18, and review of existing larger (6 or more) group homes with respect to their ability to meet the needs of the community.

7. ABOUT THE DATA

Reporting cycle is calendar year. Data comes from the following source:

-- Express Payment & Reporting System (eXPRS) - count of people receiving Case Management (Service Element 48) and count of residents in settings 6 or more. Formula used for this report is:

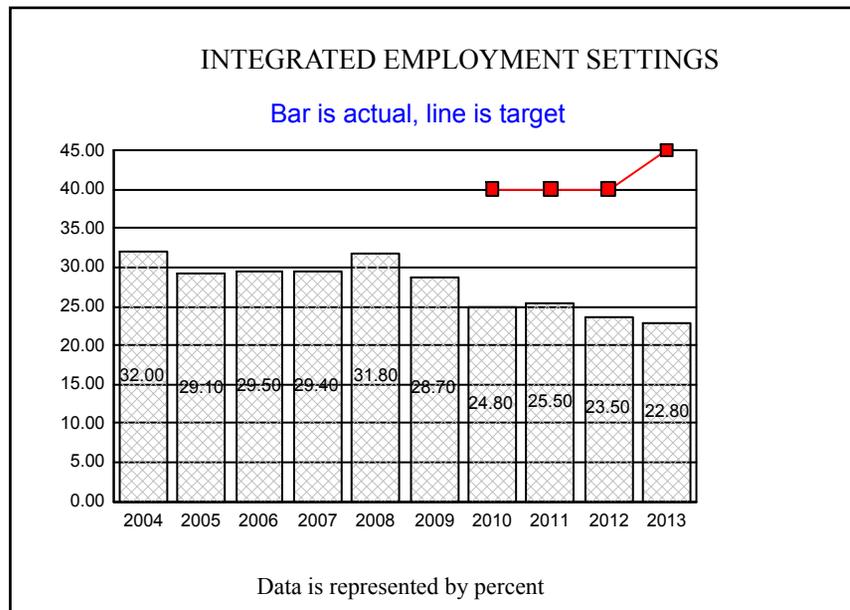
Calendar Year (SE 48 Count – Count of residents in settings 6 or more) / (SE 48 Count)

2012 data disaggregated: Count of people receiving Case Management = 21,545

Calendar Year (# of residents in settings 6 or more)= 251 (21,545 – 251) / (21,545) = 98.8%

(21,294) / (21,545) = 0.98835

KPM #14	INTEGRATED EMPLOYMENT SETTINGS - The percentage of adults with developmental disabilities who receive ODDS services who are working in integrated employment settings.	2009
Goal	People are living as independently as possible.	
Oregon Context	People with developmental disabilities who are employed value their wage-earning capacity. People are able to achieve a desired lifestyle. People become less financially dependent over time on long-term state and federal programs.	
Data Source	DEVELOPMENTAL. After September 1, 2014 the data source will be from planned and actual service utilization from the eXPRS payment system. It will be necessary to use supplemental sources of information beyond that system using periodic surveys or data sharing agreements with other state agencies. Data prior to 9/1/14 has relied on use the Employment Outcome System for people in comprehensive services and semi-annual surveys for people in adult support services to determine the percentage of people employed in integrated employment settings.	
Owner	DHS - Developmental Disabilities, Mike Maley, 503-947-4228	



1. OUR STRATEGY

The Office of Developmental Disability Services (ODDS) has developed and trained to an Employment First Policy which requires case managers to ask at each annual client planning meeting about the person with intellectual and other developmental disabilities (I/DD) seeking and maintaining employment in an integrated community setting. This policy was reinforced by Executive Order 13-04, “Providing Employment Services to Individuals with Intellectual and Developmental Disabilities”, issued by Governor Kitzhaber in April 2013.

2. ABOUT THE TARGETS

The targets are being set by a Statewide Policy Group established by the Executive Order 13-04. The timelines will align with the Executive Order, that includes an implementation schedule ending July 1, 2022. Achieving improved employment outcomes for working age adults with developmental disabilities is a key component to the system sustainability plan adopted by ODDS and fulfilling the mission of DHS and its Office of Developmental Disability Services.

3. HOW WE ARE DOING

In general people with experience unemployment at a significant amount greater than individuals who are not disabled, people with I/DD face a greater rate of unemployment. The present employment market and economic continue to represent an additional challenge to the employment to individuals receiving services from ODDS. Consequently, meeting targets has been a challenge. The original targets have not been met. However, DHS has instituted in that past months policy and practice changes targeted to increase integrated employment opportunities for individuals with I/DD.

4. HOW WE COMPARE

The Institute of Community Inclusion has been collecting national data, while it is often hard to compare data from state to state, based on the latest published report (2013) Oregon continues to hold it relative position to other reporting states. Of the 42 states reporting, 9 states reported a percentage of people with I/DD in integrated employment services higher than Oregon. This means Oregon remains above the norm for state’s reporting on integrated employment for working age adults with I/DD.

5. FACTORS AFFECTING RESULTS

Obtaining paid integrated employment for individuals with I/DD is a challenge in Oregon and nationwide. Many factors affect results such as attitudes/knowledge among prospective employers, work disincentives that exist with public funding streams, the general economic conditions and business climate and the availability of public resources

allocated to this goal, and provider capacity. As indicated earlier, in recent months DHS has instituted policy and practice changes to address factors affecting results.

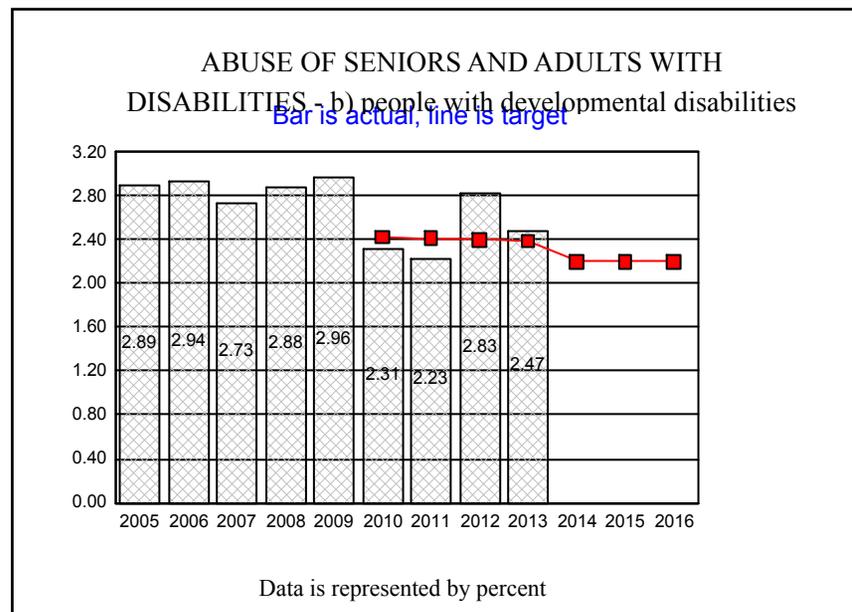
6. WHAT NEEDS TO BE DONE

Continued efforts need to be made in several areas. Included are the areas of continued training and technical assistance, specific service capacity building efforts, improving individual service planning processes as they relate to employment, employer education efforts, the alignment of key policies/practices between agencies such as ODDS, Vocational Rehabilitation, and the Department of Education, integrating efforts with the State's general workforce development and employer engagement strategies, and education/awareness effort with key stakeholders. ODDS/DHS also needs to engage in new approaches such as customized employment approaches and pilot promising new practices.

7. ABOUT THE DATA

As noted earlier, the historic reporting cycle is 6-month "snapshot" of available information. These reported data months are March and September. Use the Employment Outcome System for people in comprehensive services and semi-annual surveys for people in adult support services to determine the percentage of people employed in integrated employment settings. More reliance for data will now be placed on the DHS eXPRS payment system in addition to supplemental sources to data.

KPM #15	ABUSE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES - The percentage of people with developmental disabilities experiencing abuse.	2010
Goal	People are safe	
Oregon Context	Elder abuse	
Data Source	Office of Adult Abuse Prevention and Investigations (OAAPI)	
Owner	DHS - Office of Adult Abuse Prevention and Investigations, Marie Cervantes, (503) 945-9491	



1. OUR STRATEGY

Developmental disabilities: Ensuring the safety of people with developmental disabilities (DD) is an important part OAAPI’s Safety Outcome Area. Decreasing the incidence of DD abuse in Oregon will lead to fewer people experiencing harm and allows us to measure the impact of prevention strategies. Increasing public

awareness of abuse, strengthening collaboration with community partners and developing education and prevention initiatives that focus on the people we serve, their families, providers and the community at large are important elements of our strategy. In addition, continued focus on training for local protective service investigators and collaboration with brokerages who serve people with developmental disabilities in their own home are high priorities.

2. ABOUT THE TARGETS

This is a new measure and targets will be established for 2013 by conducting retrospective analysis of the prior three years (2010 thru 2012). In the abuse rate table, lower numbers are better.)

People with developmental disabilities: The types of services being received by over 20,000 individuals with developmental disabilities is significantly changing. The abuse rate primarily reflects licensed and certified settings, such as DD group homes and adult fosters homes licensed through ODDS, as well as vocational and employment programs. Reports of suspected abuse in these settings have traditionally been nearly 70% of all reported abuse. As individuals receiving brokerage services have surpassed those in residential settings, overall reporting of suspected abuse has increased. With the passage of HB 2442, additional definitions of abuse are now included (for example verbal abuse, financial abuse/exploitation and wrongful restraint) for these individuals that were not in place prior to 2010. While overall reporting for this population has increased, the “reporting rate” for community DD settings is much lower than the rate of reporting for licensed and certified settings. Individual decision-making, self-determination and autonomy will also affect the ability to provide protection in community DD settings. In comparison, licensed settings have more control over who may have access to a vulnerable person thru the employment process. The baseline is, therefore, unclear. Because of the changes in the abuse definitions for community clients, including those receiving brokerage services, we propose that the 2010 thru 2012 data be used to establish a baseline and an appropriate target going forward. Strategies for intervention and abuse reduction will continue, however.

3. HOW WE ARE DOING

Developmental disabilities: Analysis of the 2006 thru 2009 abuse and neglect data showed a gradual increase the overall abuse rate from 2.9 to 3.1 percent for this population. Analysis of the 2010 thru 2012 abuse and neglect data showed a drop in the abuse rate (range of 2.4 - 2.8) when compared to the 2006-09 data. The numbers of investigations for abuse and neglect have been relatively consistent over this time period. While the data for substantiated allegations do show some annual fluctuation, they are also relatively consistent. Between 2006 and 2009 there were an average of 546 substantiated findings per year, and between 2010 and 2012 the average annual number of substantiations was 533 per year. The number of clients receiving services has significantly increased over this time and is more likely the reason for the drop in the abuse rate. This finding does raise concern that there may be a lack of reporting in community/brokerage programs.

The most serious types of substantiated abuse such as sexual abuse (2%) and physical abuse (10%) have remained relatively low as percentage of all substantiated findings. Neglect is by far the most commonly substantiated abuse type and represents nearly 40% of all findings. Financial exploitation has decreased in recent years, but remains the second largest substantiated abuse at approximately 20%. Verbal abuse has increased recently and is the third most common abuse at 15%. Strategies to improve performance on these measures include initiation of a prevention initiative which will increase training to providers consumers advocates and the public; leadership of an initiative to address sexual abuse of persons with developmental disabilities that is sponsored by the Attorney General’s Sexual Assault Task

Force' collaboration with community partners to solicit a grant that will expand local capacity of domestic violence and sexual assault programs to meet the needs of victims of abuse who are developmentally disabled

4. HOW WE COMPARE

Developmental disabilities: There is no National data on abuse rates. Oregon is a national leader in this area as we are one of a very few number of states that track and report this data publicly.

5. FACTORS AFFECTING RESULTS

Developmental disabilities: For people with developmental disabilities, primarily due to their cognitive limitations, there is a pronounced level of vulnerability resulting in an inability to self-report incidents that may be abuse, and so the initiation of protective services depends on a healthy reporting system and mandatory abuse reporting by care givers when they suspect abuse. In addition people with developmental disabilities often show an inability to protect themselves. Factors affecting performance to target include high turnover of staff in licensed and certified programs; right to self determination; response of the criminal justice system; lack of services with the knowledge and capacity to respond and support developmentally disabled victims of abuse (e.g. domestic violence shelters, counseling resources).

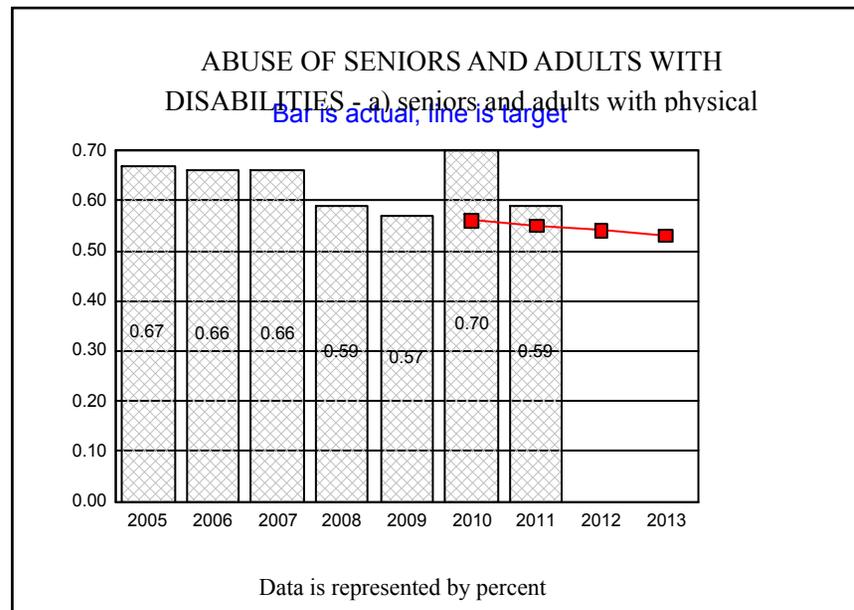
6. WHAT NEEDS TO BE DONE

Developmental disabilities: Additional training for protective service investigators and brokerage staff who are serving people in their own homes. Research on, and collaboration with community response systems including domestic violence and sexual assault needs to be explored further. Initiate program focusing on prevention of abuse such as the Attorney General's Sexual Assault Task Force Developmental Disability Initiative and inclusion of clients, their family and the community at large. Additional research on reporting rates to explore why some settings such as DD group homes have much higher reporting of possible abuse compared to DD adult foster care and brokerage settings.

7. ABOUT THE DATA

Reporting cycle is Calendar Year, and will reflect all case that closed during the reporting cycle. Data is maintained by the Office Adult Abuse Prevention and Investigation (OAAPI). The data source is the DD and MH Abuse Database, which reflects the investigation reports submitted to OAAPI by county and state DD and MH abuse investigators. Several quality assurance checks are conducted before final reports are generated from the database. The data for performance measure was checked for duplication.

KPM #16	PLACEHOLDER: ADULT PROTECTIVE SERVICES	2010
Goal	People are safe	
Oregon Context	People are safe. Oregon Benchmark #52 - Elder abuse	
Data Source	Office of Adult Abuse Prevention and Investigation (OAAPI)	
Owner	DHS - Office of Adult Abuse Prevention and Investigations, Marie Cervantes, (503) 945-9491	



1. OUR STRATEGY

Increase public awareness, strengthen collaboration with community partners, strengthen and increase Protective Service Training.

2. ABOUT THE TARGETS

This is a new measure and targets will be established for 2013 by conducting retrospective analysis of the prior three years (2010 thru 2012). In the abuse rate graphs, lower numbers are better.) In order to measure success in reducing abuse in the community, a preliminary target of under 1% is established. The primary strategy is to assist the victim in moving from the abusive living situations or to remove the abuser from the situation. The underlying ethical value for the Seniors and Adults with Disabilities' protective service model is to balance our obligation to protect older adults and adults with disabilities with their rights to self-determination. Independent adults can make decisions about their own life and the course of action to be taken in abuse situations. Performance to target comparison could be affected by a number of variables. This includes but is not limited to the following for Seniors and Adults with Disabilities:

- Right to self-determination;
- Limited resources including local community, state and federal resources;
- Additional training and development needed for APS Specialist's;
- Response of the criminal justice system;
- Development and understanding of intra-agency functions; Self-neglect: The abuse data figures include those clients that are categorized under self-neglect. This may be a result of an individual's right to self-determination that results in abuse, and may not be due to any of the other potential contributory factors.

3. HOW WE ARE DOING

Since our Department currently is below the preliminary target of 1% for the percentage of seniors and adults with disabilities who are abused, it appears that we are meeting the goals of our intervention model described above. However, abuse in the community can be difficult to lower due to the individual's right to make decisions about their own life and the course of action. Additionally, as public awareness of the signs of abuse increases so do the number of abuse reports received by the department resulting in more investigations and interventions. The department wants to encourage individuals to report as suspected abuse.

Strategies to improve the department's performance include:

- On-going Adult Protective Service training including fundamentals of and advanced training for experienced APS workers.

-Continuation of public education efforts;

-Technical Assistance to field offices;

-Basic Adult Protective Service Specialist functions such as screening, consultation, triage, assessment, investigation, intervention, documentation and risk management;

-Collaboration with community partners;

-Continuation of intra-agency relationships/training with other agencies that serve Adult Protective Service clients such as those with mental illness, developmental disabilities, and the Office of Investigations and Training.

4. HOW WE COMPARE

There is no National data on abuse rates.

5. FACTORS AFFECTING RESULTS

Performance to target comparison could be affected by a number of variables. This includes but is not limited to the following for Seniors and Adults with Disabilities:

-Right to self-determination;

-Limited resources including state, federal, and community-type(s);

-Additional training and development needed for APS

Specialist's;

-Response of the criminal justice system;

-Development and understanding of intra-agency functions;

-Self-neglect: The abuse data figures include those clients that are categorized under self-neglect. This could be interpreted to mean that it may be an individual's right to self-determination that results in re-abuse, and may not be due to any of the other potential contributory factors.

6. WHAT NEEDS TO BE DONE

Continue to develop data tracking systems for baseline figures needed for comparison;

Continue Department activities related to this measure;

-Address the variances and see if any reductions can be made in order to achieve the Department's goals;

Gather data from public/private industry sources for comparison;

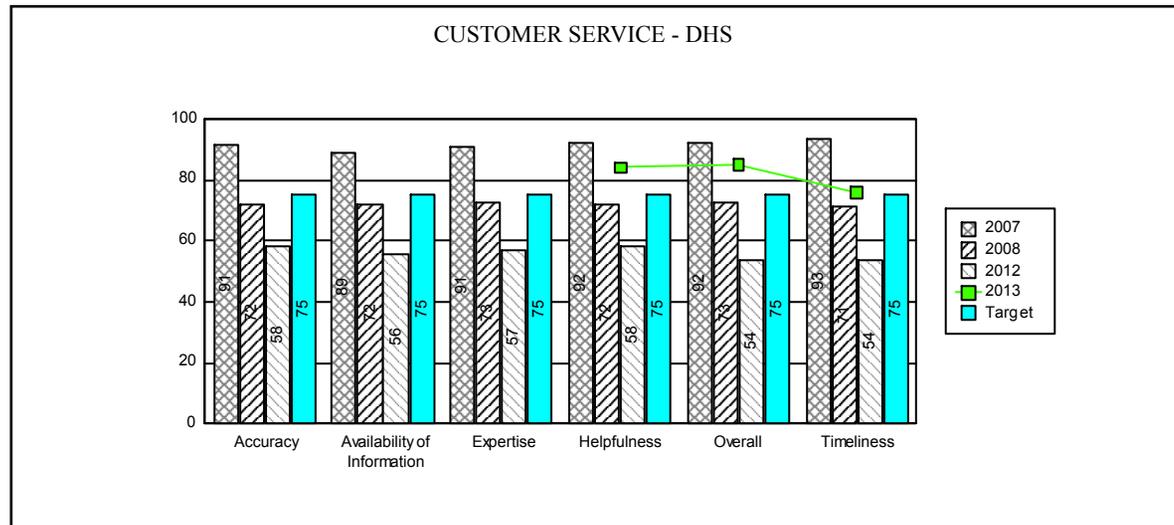
Respond to legislative request to direct efforts at maintaining to 5%.<

7. ABOUT THE DATA

Reporting cycle is Calendar Year, and will reflect all case that closed during the reporting cycle. Data is maintained by the Office of Licensing and Quality of Care, Quality Assessment and Monitoring Unit. Original data source is Oregon ACCESS for Community APS and QMDB for facility APS. Since Lane County does not use Oregon Access, abuse data is sent in electronically and then appended to the abuse data. Oregon ACCESS has system edits the help prevent duplication in data. Reports are checked for duplication.

Data for Seniors and Adults with Disabilities can be obtained by contacting the *Office of Licencing & Quality of Care Adult Protective Services*.

KPM #17	CUSTOMER SERVICE - Percentage of customers rating their satisfaction with DHS above average or excellent: overall, timeliness, accuracy, helpfulness, expertise, availability of information.	2005
Goal	People are independent, self-sufficient, safe & healthy.	
Oregon Context	DHS Mission – Safety, health and independence for all Oregonians	
Data Source	2013 data source: under development; 2012 data source: Online Client Survey (January through December 2012 results) 2008 data source: Consumer Assessment of Health Plans Survey (CAHPS) 2007 data source: Mail surveys to CAF and SPD clients 2006 data source: Web-based survey	
Owner	DHS - Gene Evans, 503-947-5286	



1. OUR STRATEGY

The mission of DHS is to help Oregonians in their own communities achieve well-being and independence through opportunities that

protect, empower, respect choice and preserve dignity. DHS is responsible for the care for our most vulnerable citizens □□ children, people with disabilities and seniors. The agency seeks to collaborate with families and among agencies and community organizations, whenever possible. DHS believes that the prevention of problems will result in long□term benefits and savings, and DHS strives to deliver services that are prioritized, innovative and streamlined. Finally, the agency seeks to continuously improve and innovate to increase efficiency with public resources.

2. ABOUT THE TARGETS

Our methodology has varied greatly from year to year making it difficult to develop meaningful targets . In addition, with the split of DHS into two agencies it is unclear how the earlier targets were set. The current DHS Online Client Survey is part of an outcome tracked through the agency's management system. The management system includes a status reporting process. Status for each outcome is reported quarterly and is reported as red, yellow or green. Green status (90% of target or higher) represents outcome areas that have reached agency target. As a result, the agency target for client satisfaction is 90 percent. The legislatively approved Target for these measures is 75 percent.

3. HOW WE ARE DOING

Each year we've used a different methodology, therefore it's impossible, at this time, to determine whether or not were seeing an improvement in the service we provide to clients. The current DHS Online Client Survey began in December 2011, and was discontinued at the end of 2012. The 2013 numbers are the first attempt at a random sample of customer experience.

4. HOW WE COMPARE

At this time, we are unable to compare our results to other agencies, organizations or jurisdictions. We can't compare our results from year to year because of the changes in survey methodology. The 2013 results give us a baseline to work with, based on the first random survey of clients and customers in all DHS programs.

5. FACTORS AFFECTING RESULTS

Two main factors affect results: Changes in the survey methodology and agency reorganization. In July 2011, DHS was split into two separate agencies – DHS and the Oregon Health Authority (OHA). The DHS customer base changed after the split when several divisions (Addictions and Mental Health, Division of Medical Assistance Programs and the Public Health Division) transferred to OHA. Today, the DHS customer base includes clients who receive services from the following programs: Child Welfare, Self Sufficiency, Aging and People with Disabilities, Developmental Disabilities and Vocational Rehabilitation.

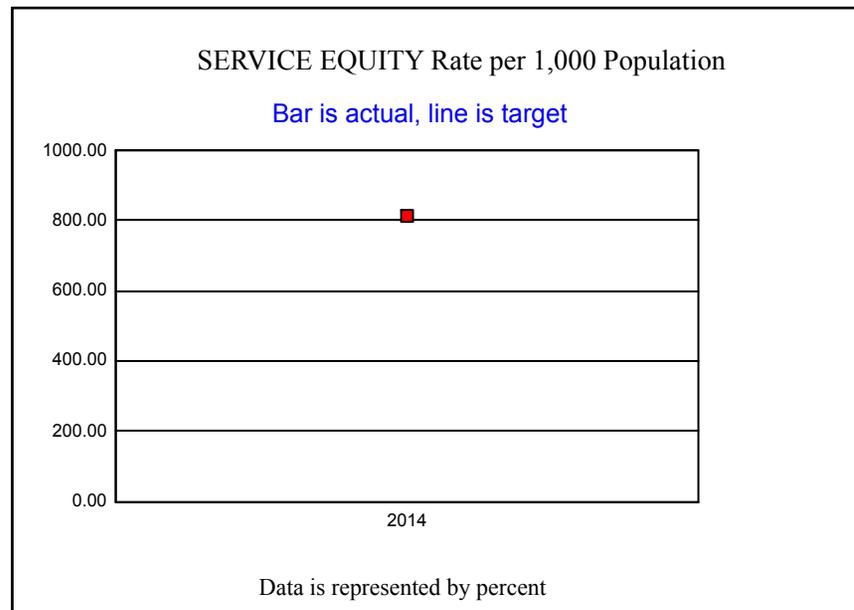
6. WHAT NEEDS TO BE DONE

The agency split created a need for DHS to revisit how it will collect and evaluate satisfaction data from its redefined customer base. An online survey was created and posted in December 2011. The agency is working to develop a consistent, comprehensive and sustainable measurement of customer service. Measuring customer satisfaction is a priority for the agency, and the measure has been incorporated into the management system to be tracked quarterly by the DHS Director and Executive Leadership Team.

7. ABOUT THE DATA

This data was collected from October 2013-June 2014 of customers who had an experience with DHS within the past 6-9 months. The survey is administered in English and Spanish, and there were more than 700 respondents during three quarterly administrations. The 2008 results are from the Consumer Assessment of Health Plans Survey (CAHPS). It was administered through the Division of Medical Assistance Programs (DMAP) over a 10-week period (October-December 2007) using a mixed-mode (mail and telephone) five-wave protocol. Respondents were surveyed in English and Spanish. The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per plan in each age group. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2006. The final selected sample consisted of 13,962 adult OHP enrollees and 13,747 child OHP enrollees. For the customer service questions, we received approximately 10,600 responses. The CAHPS survey is a biennial survey.

KPM #18	PLACEHOLDER: SERVICE EQUITY	2014
Goal	Health, independence and well-being	
Oregon Context	Health, independence and well-being	
Data Source	State of Equity Report.	
Owner		



1. OUR STRATEGY

2. ABOUT THE TARGETS

3. HOW WE ARE DOING

4. HOW WE COMPARE

5. FACTORS AFFECTING RESULTS

6. WHAT NEEDS TO BE DONE

7. ABOUT THE DATA

Agency Mission: Assisting people to become independent, healthy and safe.
--

Contact: Anna Cox, DHS Data Collection & Reporting	Contact Phone: 503-945-6680
---	------------------------------------

Alternate: Angela Long, DHS Office of Business Intelligence	Alternate Phone: 503-945-6170
--	--------------------------------------

The following questions indicate how performance measures and data are used for management and accountability purposes.

1. INCLUSIVITY	<p>* Staff: Staff are involved in the identification and refinement of Key Performance Measures. This is more true than ever, as DHS use the Quarterly Business Reviews to review measures that will ideally replace or roll-up into Key Performance Measures. Feedback is sought to validate the measures. Over the next biennium, staff will become more involved in identifying, tracking and using performance metrics to make improvements to the work we do.</p> <p>* Elected Officials: Elected officials provide input to the agency KPMs, targets and strategies.</p> <p>* Stakeholders: Customer feedback is gathered to help guide strategies for effective service delivery. We continue to work closely with Legislative Fiscal Office and DAS Budget and Management to ensure we are making continuous improvements to our KPMs so they provide useful and relevant information for decision-making and management.</p> <p>* Citizens: Community forums related to budget development and priority-setting are a way to identify and validate priorities, expectations and performance areas.</p>
2 MANAGING FOR RESULTS	<p>As a result of Transformation efforts, there is an emphasis on using metrics to identify where improvements are needed, make changes, and track and report results to make sure improvements are sustained. The department has been training work units in the Lean Daily Management System® (LDMS®) which includes a component for developing metrics at the work unit level for the team’s main processes. Key Performance Measures provide a high-level picture of our results, but the underlying metrics provide a more meaningful and actionable management tool.</p>
3 STAFF TRAINING	<p>Management and staff continue to receive training related to transformation and continuous improvement. Training in both online and classroom formats is available. The courses are introducing staff to the principles and concepts for thinking about work in terms of systems, processes and process improvement. A component of these trainings focus on metrics and how to effectively measure the results of our work. People are becoming more familiar with using data and information to inform our strategies and decision-making.</p> <p>Required courses for managers teach about creating a culture of continuous improvement to achieve results to become a world-class organization and sustain the transformation. Workshops help prepare managers to assist their work groups</p>

	to establish and sustain LDMS® elements and practices, and improve their ability to guide work teams to constructively and practically select and use metrics to improve their work.
4 COMMUNICATING RESULTS	<p>* Staff : The annual performance report is posted online and used for information sharing. One goal of the Transformation Initiative is to make data and metrics more visible at all levels of the organization. As work units begin using the Lean Daily Management System® (LDMS®), they create visual display boards to post in their areas that include data and metrics about the team’s work to provide current information about the results they are achieving and goals they are working toward. Work unit members meet in front of the display board regularly to review metrics, share information, set priorities and problem-solve when needed.</p> <p>* Elected Officials: The annual performance report is posted online and included in the agency request document for purposes of sharing performance results, showing accountability, and informing the budget development process. KPMs are presented during the Ways & Means presentations to describe program results.</p> <p>* Stakeholders: The annual performance report is posted online and used for information sharing.</p> <p>* Citizens: The annual performance report is posted online and used for information sharing.</p>