

**DASHBOARD MEASURES**  
***Children's Division (CD) Performance Indicators***

	Measure	Type	Definition
1	CAN Victims Without Recurrence of CAN Within 6 Months	Quality	Percentage determined by number of unduplicated children without a recurrence of substantiated child abuse and/or neglect (CAN) within six months divided by the number of unduplicated children with substantiated CAN.
2	Foster Children Free From Abuse and Neglect	Quality	Percentage determined by number of unduplicated foster care children in Legal Status 1 (care and custody of Children's Division) who do not have a substantiated case of child abuse and/or neglect while in care where the alleged perpetrator has the relationship of placement provider divided by the number of unduplicated foster care children.
3	Children in Intact Families Receiving Family Centered Services (FCS) Free from Abuse and Neglect	Quality	The total number of Intact Families receiving Family Centered Services having no preponderance of evidence (POE) incidents while receiving services. (Based on child abuse and/or neglect incident date)
4	Rate of CAN Review Board Reversals	Quality	Percentage determined by reversed cases divided by number cases referred to the Child Abuse/Neglect Review Board (CANRB).
5	Children Returning Home Within 12 Months	Quality	Percentage based on number of children who return home within 12 months divided by the total number of children exiting custody.
6	Children Exiting to Adoption Within 24 Months	Quality	Percentage based on number of children in custody that are adopted within 24 months of entry into custody divided by the total number of adoptions from Children's Division custody.
7	Children Not Returning to Foster Care	Quality	Percentage based on number of children exiting foster care without re-entry within 12 months divided by the total exits from foster care from the previous 12 months.
8	Children in Two or Fewer Foster Care Placements	Quality	Percentage based on number of children with two or fewer foster care placements within 12 months divided by the total number of children placed in foster care within the last 12 months.
9	Completion of CAN Reports Within Prescribed Timeframe (45 days)	Operational	Percentage determined by number of child abuse and/or neglect (CAN) reports that are completed within 45 days of the incident or are marked as delayed conclusion divided by the total number of reports which were due during the time period.
10	CAN Hotline Calls	Operational	Number of reports of suspected child abuse, neglect or exploitation received through the DSS toll-free telephone line.
11	Substantiated CAN Children	Operational	Unduplicated number of children found to have substantiated CAN upon completed investigation/assessment during the month (Note: children may be duplicated).
12	Monthly Caseworker Visits With Foster Care Children	Operational	Percentage of foster care children with 1 worker visit per month based on the federal requirement.
13	Foster Care Cost Per Child x Length of Stay	Operational	To determine the average cost to keep a child in foster care, the per member per month (PMPM) cost for foster care is multiplied by the average length of stay; costs are based on Legal Status 1 (care and custody of Children's Division) children only; Foster Care costs include Case Management, Administration, Special Expenses, Resource Development, Foster Care Rates, RTS & Specialized Care Contracts; the average length of stay is based on children exiting CD custody.

**DASHBOARD MEASURES**  
***Children's Division (CD) Performance Indicators***

	Measure	Type	Definition
14	Foster Care Children	Operational	Number of children in Legal Status 1 (care and custody of Children's Division).
	14a) Percent of Foster Care Children in Residential Care	Operational	The percentage (of the total) of LS1 alternative care children (unduplicated) placed in a residential facility as of the last day of the month and year-to-date. Children count if they were in a placement type of RFA, RFP, RF2, RF3, RF4, RFE, RFM, RFI, RFT and TLG.
	14b) Percent of Foster Care Children in Kinship/Relative Placement	Operational	The percentage (of the total ) of LS1 alternative care children (unduplicated) placed as of the last day of the month and year-to-date with relative and/or kinship providers. Children count if they were in a placement type of RHO, RHB, RHM, RHU, CTO (with sub-type of c), KHO, KHU, KHB, or KHM.
15	Foster Care LOS	Operational	Average length of stay of children exiting CD custody (in months).
16	Adoptions Finalized	Operational	Number of adoptions finalized.
17	Children Receiving Subsidized Child Care	Operational	Number of unduplicated children receiving subsidized child care.
18	CD - MBE Expenditure Ratio	Operational	Percentage of all CD discretionary expenditures to registered minority businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
19	CD - WBE Expenditure Ratio	Operational	Percentage of all CD discretionary expenditures to registered women-owned businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
20	Initial Child Contact Within 24 Hours of Hotline Call	Customer Service	Percentage determined by number of incidents of initial child contacts which take place within 24 hours of a hotline call divided by the total number of hotline calls which required a child contact. (Note: Based upon investigations/assessments completed during the month. Does not include incidents where the only alleged category of abuse/neglect was educational neglect.)
21	Timely Permanency Planning Review Team Meetings	Customer Service	The number of Permanency Planning Review Team (PPRT) meetings (defined as a meeting held by a group of individuals meeting under division authorization for a child in the legal custody of the Children's Division) occurring within 6 months divided by the total number of meetings which are prescribed to be held. Foster children is defined as Legal Status 1 (care and custody of the Children's Division) only. In addition, at least one person not responsible for the case management of, or delivery of services to, either the child or the parents must participate in the meeting in order for it to be counted as a PPRT. Requirements for a timely PPRT include the meeting must be held prior to six months from the date the child entered care and then every six months thereafter for as long as the CD maintains custody. Per the Adoptions Assistance and Child Welfare Act of 1980, the child's status is to be reviewed periodically but no less frequently than once every six months.

**DASHBOARD MEASURES**  
***Children's Division (CD) Performance Indicators***

	Measure	Type	Definition
22	Children's Division Customers Treated Professionally With Quality Services	Customer Service	Reports findings of the Children's Division (CD) survey of youth and foster care parents. Survey percentages are based on the number of respondents that are satisfied with CD divided by total respondents completing survey.
	22a) Percent of Youth	Customer Service	Survey percentages based on the number of youth respondents that are satisfied with CD (two questions averaged for youth) divided by total youth respondents completing survey. Measure data available starting in February 2009.
	22b) Percent of Foster Parents/Relatives	Customer Service	Survey percentages are based on the number of foster parent/relative respondents that are satisfied with CD (six questions averaged for foster care parents) divided by total foster parent/relative respondents completing survey. Measure data available starting in April 2009.
23	CD - Employee Turnover Rate	Employee	CD employee terminations divided by CD FTE count.
24	CD - Number of Staff (FTE)	Employee	Number of CD Full Time Equivalents (FTE).
25	CD - Compensation of Staff	Employee	Total Personal Service Expenditures for CD Staff.

**DASHBOARD MEASURES**  
**Family Support Division (FSD) Performance Indicators**

	Measure	Type	Definition
1	Food Stamp Participation Rate	Quality	Percentage of individuals receiving food stamps compared to the number of Missourians under 130% FPL. Due to the age of the US Census data for population eligible for Food Stamps compared to the total receiving food stamp the rate may exceed 100%.
2	Percentage of Child Support Cases With Support Orders Established	Quality	Percentage determined by dividing the number of IV-D child support cases with support orders established by the total number of IV-D child support cases.
3	Percentage of Current Child Support Collected	Quality	Represents the percent of current support due that was paid. OCSE-157 line 25 divided by Line 24. Data for quarters ending in September of each year is from the FFY-end OCSE-157 report, while other quarters are from a quarterly internal run of the 157. Year-end data is for the entire FFY, while other quarters are for that quarter only.
4	Percent of Child Support Cases Current	Quality	Percentage of IV-D cases that are current on collections. Sum of active IV-D enforcement cases with zero arrears and active IV-D enforcement cases with arrears greater than zero but less than the monthly support obligation, divided by the total number of active IV-D enforcement cases. Measure was established in August 2009 and is the first month data is available.
5	Percent of Child Support Cases with Regular Payment of Arrearage	Quality	Regular payment of arrearage as three consecutive months of payments distributed to an arrearage debt.
6	Vocational Rehabilitation Program Rate of Rehabilitation	Quality	Percentage of individuals completing the program successfully compared to all those participating in the vocational services program.
7	Food Stamp Payment Accuracy	Operational	Payment accuracy is based on the Quality Control Unit's methodology (dollars in error divided by total dollars). Historically, reviews are done for cases several months in arrears. (Includes positive only). Reports are ran four months behind.
8	Food Stamp Participants and Households		
	8a) Count for Participants	Operational	Number of individuals receiving Food Stamps each month.
	8b) Count for Households	Operational	Number of households receiving Food Stamps each month.
9	TA Determination Accuracy	Operational	Accuracy is based on FSD eligibility workers' decisions in calculating the cash benefit due to participants, as defined in the FSD IM Case Reading Tool.
10	TA Individuals and Families(includes TEB data)		
	10a) Count for Individuals	Operational	Number of individuals receiving Temporary Assistance (TA) each month. As of March 2011, data includes TEB individuals.
	10b) Count for Families	Operational	Number of families receiving Temporary Assistance (TA) each month. As of March 2011, data includes TEB families.
11	TA Work Participation Rates	Operational	TANF participants actively engaged in work related activities shown as a percentage of TANF work participants .
12	Percentage of MO HealthNet Eligibility Correctly Determined	Operational	Percentage determined by dividing the number of cases that have been correctly determined to be MO HealthNet eligible during case reading by the number of MO HealthNet cases read.

**DASHBOARD MEASURES**  
**Family Support Division (FSD) Performance Indicators**

	Measure	Type	Definition
13	Total Enrollment in MO HealthNet (MHN)	Operational	Number of MO HealthNet (MHN) participants as of the first day of the month; does not include Women's Health Services participants
	13a) MHN Count for Persons With Disabilities	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: Permanently and Totally Disabled, Aid to the Blind, Blind Pension, Specified Low-Income Medicare Beneficiary and Ticket to Work Health Assurance Program (TWHAP).
	13b) MHN Count for Seniors	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: Old Age Assistance and Qualified Medicare Beneficiary (QMB).
	13c) MHN Count for Custodial Parents	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Families-Adult, Refugee, Women with Breast or Cervical Cancer and Independent Foster Care Children Ages 18-21.
	13d) MHN Count for Children	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Children; S-CHIP; MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected (HDN); DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities (MOCDD); Presumptive Eligibility for Children; and, Voluntary Placement.
	13e) MHN Count for Pregnant Women	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Pregnant Women (Poverty and Income) and Presumptive Eligibility for Pregnant Women.
14	MHN Enrollment in Women's Health Services	Operational	Number of MO HealthNet (MHN) participants in the Women's Health Services category.
15	Paternity Establishment	Operational	Number of children born out of wedlock from the previous year, divided by paternities established this year and a supplemental paternity report from Department of Health and Senior Services Bureau of Vital Records that identifies paternity establishments not recorded in MACSS.
16	Child Support Collections	Operational	Total dollar amount (in millions) of distributed IV-D collections posted to the Missouri Automated Child Support System (MACSS).
17	Child Support Collections Per Administrative Dollar Spent	Operational	Dollar amount of child support collections divided by the administrative dollar expended.
18	Child Support Arrearage Collection Percentage	Operational	The percent of cases with arrears that received any arrearage payment throughout the FFY.
19	Vocational Rehabilitation Program (VR)		
	19a) Number of VR clients closed as successfully employed	Operational	Number of clients closed as successfully employed in the Vocational Rehabilitation program.
	19b) Number of VR applicants	Operational	Number of applicants to the Vocational Rehabilitation program.
	19c) Average hourly wage rate for a competitive closure	Operational	Total weekly earnings at closure divided by total hours worked in a week at closure for individuals who achieved a competitive employment outcome.

**DASHBOARD MEASURES**  
**Family Support Division (FSD) Performance Indicators**

	Measure	Type	Definition
	19d) Progress Toward Source of Income Standard/Performance Indicator 1.6	Operational	Of all individuals who exit the VR program in competitive employment, the difference between the percentage who report their own income as the largest single source of economic support at the time they exit the VR program and the percentage who report their own income as the largest single source of support at the time they apply for VR services.
20	Older Blind Services (OBS): Number of Applicants	Operational	Number of applicants to the Older Blind Services program.
21	FSD - MBE Expenditure Ratio	Operational	Percentage of all FSD discretionary expenditures to registered minority businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
22	FSD - WBE Expenditure Ratio	Operational	Percentage of all FSD discretionary expenditures to registered women-owned businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
23	FS Application Currency Rate	Customer Service	Measures how quickly Food Stamp applications are processed. The percentage is determined by dividing the number of Food Stamp applications completed on time by the number of Food Stamp applications that were completed. Food Stamp initial applications and nontimely recertifications are required to be done in 30 days or less.
24	TA Application Currency Rate	Customer Service	Measures how quickly TANF applications are processed. The percentage is determined by dividing the number of TA applications completed on time by the number of TA applications/recertifications required to be done in 45 days or less.
25	MO HealthNet Application Currency	Customer Service	Measures how quickly MO HealthNet applications are processed. Application currency is based on type of case. MHK and MHF applications currency is 30 days or less (MMR, Table 10); MO HealthNet For Pregnant Women applications currency is 15 days or less (MMR, Table 11); MHABD Non-Blind Applications For Persons < 65 Years Of Age currency is 90 days or less (MMR, Tables 15 ); MHABD Non-Blind Applications For Persons 65+ Years Of Age currency is 45 days or less (MMR, Table 16); and MHABD Blind Applications currency is 90 days or less (MMR, Table 17). Timely applications are totaled and divided by the total resolved for all categories.

FSD Employee Measures			
26	Child Support Call Center Answered Calls	Customer Service	The numbers reported reflect the calls answered for a month; these calls were taken by the customer service center for child support
27	FSD - Employee Turnover Rate	Employee	FSD employee terminations are shown as a percentage of the FSD FTE count
28	FSD - Number of Staff (FTE)	Employee	Number of FSD full time equivalent (FTE) staff
29	FSD - Compensation of Staff	Employee	Total Personal Service dollars expended for FSD staff

**DASHBOARD MEASURES**  
**MO HealthNet (MHD) Performance Indicators**

	Measure	Type	Definition
1	Total MHN Claims Payments (in millions)	Operational	Total dollar amount of claims payments for all MO HealthNet (MHN) participants
	1a) Persons With Disabilities	Operational	MHN claims payments for Permanently and Totally Disabled, Aid to the Blind, Blind Pension, Specified Low-Income Medicare Beneficiary and Ticket to Work Health Assurance Program (TWHAP) participants
	1b) Seniors	Operational	MHN claims payments for Old Age Assistance and Qualified Medicare Beneficiary (QMB) participants
	1c) Custodial Parents	Operational	MHN claims payments for MO HealthNet for Families-Adult, Refugee, Women with Breast or Cervical Cancer and Independent Foster Care Children Ages 18-21 participants
	1d) Children	Operational	MHN claims payments for MO HealthNet for Children; S-CHIP (including no cost and premium enrollees); MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected (HDN); DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities (MOCDD); Presumptive Eligibility for Children; and, Voluntary Placements
	1e) Pregnant Women	Operational	MHN claims payments for Pregnant Women (Poverty and Income) and Presumptive Eligibility for Pregnant Women participants
	1f) Women's Health Services	Operational	MHN claims payments for Women's Health Services participants
2	Total MHN Claims Payments and Payouts (in millions)	Operational	MHN net paid claims and payouts processed (including FRA add-ons, DSH, GME, transplants and settlements)
	2a) Nursing Facilities	Operational	MHN nursing facility paid claims and payouts
	2b) Hospital	Operational	MHN hospital paid claims and payouts (including FRA add-ons, DSH, GME, transplants and settlements)
	2c) Pharmacy	Operational	MHN pharmacy paid claims and payouts
	2d) Physician	Operational	MHN physician paid claims and payouts
	2e) Managed Care	Operational	MHN managed care paid premiums and payouts
	2f) Rehab and Specialty	Operational	MHN rehab and specialty services paid claims and payouts
3	Total MHN PMPM	Operational	This measures the average MHN cost per member per month (PMPM) based on paid claims
	Total Enrollment in MO HealthNet (MHN) [FSD-13]	Operational	Number of MO HealthNet (MHN) participants as of the first day of the month; does not include Women's Health Services participants
	3a) Persons With Disabilities PMPM	Operational	This measures the average MHN cost per member per month (PMPM) for persons with disabilities (defined as Permanently and Totally Disabled, Aid to the Blind, Blind Pension, Specified Low-Income Medicare Beneficiary and Ticket to Work Health Assurance Program [TWHAP]) based on paid claims
	MHN Count for Persons With Disabilities (FSD-13a)	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: Permanently and Totally Disabled, Aid to the Blind, Blind Pension, Specified Low-Income Medicare Beneficiary and Ticket to Work Health Assurance Program (TWHAP)

**DASHBOARD MEASURES**  
**MO HealthNet (MHD) Performance Indicators**

	Measure	Type	Definition
	3b) Seniors PMPM	Operational	This measures the average MHN cost per member per month (PMPM) for seniors (defined as Old Age Assistance and Qualified Medicare Beneficiary [QMB] participants) based on paid claims
	MHN Count for Seniors (FSD-13b)	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: Old Age Assistance and Qualified Medicare Beneficiary (QMB)
	3c) Custodial Parents PMPM	Operational	This measures the average cost per member per month (PMPM) for custodial parents (defined as MO HealthNet for Families-Adult, Refugee, Women with Breast or Cervical Cancer and Independent Foster Care Children Ages 18-21) based on paid claims
	MHN Count for Custodial Parents (FSD-13c)	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Families-Adult, Refugee, Women with Breast or Cervical Cancer and Independent Foster Care Children Ages 18-21
	3d) Children PMPM	Operational	This measures the average cost per member per month (PMPM) for children (defined as MO HealthNet for Children; S-CHIP [including no cost and premium enrollees]; MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected [HDN]; DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities [MOCDD]; Presumptive Eligibility for Children; and, Voluntary Placements) based on paid claims
	MHN Count for Children (FSD-13d)	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Children; S-CHIP; MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected (HDN); DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities (MOCDD); Presumptive Eligibility for Children; and Voluntary Placement
	3e) Pregnant Women PMPM	Operational	This measures the average MHN cost per member per month (PMPM) for pregnant women (defined as Pregnant Women [Poverty and Income] and Presumptive Eligibility for Pregnant Women) based on paid claims
	MHN Count for Pregnant Women (FSD-13e)	Operational	Number of MO HealthNet (MHN) participants in the following eligibility categories: MO HealthNet for Pregnant Women (Poverty and Income) and Presumptive Eligibility for Pregnant Women
	3f) Women's Health Services PMPM	Operational	This measures the average cost per member per month (PMPM) for Women's Health Services participants based on paid claims
	Total Enrollment in Women's Health Services (FSD-14)	Operational	Number of MO HealthNet (MHN) participants in the Women's Health Services category
4	Managed Care Non-Capitation Payments		
	4a) MC Non-Capitation Claims	Operational	Claims for additional payments above the capitated rate made to the managed care health plans for each delivered child and very low birth weight newborns
	4b) MC Non-Capitation Payments	Operational	Additional payments above the capitated rate made to the managed care health plans for each delivered child and very low birth weight newborns
5	MO Rx Members	Operational	Number of people enrolled in the MO Rx program
6	MO Rx Payments	Operational	Claims payments made for MO Rx services



**DASHBOARD MEASURES**  
**MO HealthNet (MHD) Performance Indicators**

	Measure	Type	Definition
7	Prescriptions Per Participant	Operational	Average number of paid prescriptions per participant
	7a) Prescriptions Per Participant for Persons With Disabilities	Operational	Average number of paid prescriptions for Permanently and Totally Disabled, Aid to the Blind, Blind Pension, Specified Low-Income Medicare Beneficiary and Ticket to Work Health Assurance Program (TWHAP) participants
	7b) Prescriptions Per Participant for Seniors	Operational	Average number of paid prescriptions for Old Age Assistance and Qualified Medicare Beneficiary (QMB) participants
	7c) Prescriptions Per Participant for Custodial Parents	Operational	Average number of paid prescriptions for MO HealthNet for Families-Adult, Refugee, Women with Breast or Cervical Cancer and Independent Foster Care Children Ages 18-21 participants
	7d) Prescriptions Per Participant for Children	Operational	Average number of paid prescriptions for MO HealthNet for Children; S-CHIP (including no cost and premium enrollees); MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected (HDN); DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities (MOCDD); Presumptive Eligibility for Children; and, Voluntary Placements
	7e) Prescriptions Per Participant for Pregnant Women	Operational	Average number of paid prescriptions for Pregnant Women (Poverty and Income) and Presumptive Eligibility for Pregnant Women participants
	7f) Prescriptions Per Participant for Women's Health Services	Operational	Average number of paid prescriptions for Women's Health Services participants
8	Outpatient Claims	Operational	Number of paid claims for services provided in an outpatient hospital setting
9	Outpatient Cost Per Claim	Operational	Average cost per paid outpatient hospital claim
10	Hospital Inpatient Length of Stay	Operational	Average paid inpatient days per participant inpatient episode of care at discharge
12	Inpatient Claims	Operational	Number of paid claims for services provided in an inpatient hospital setting
12	Inpatient Cost Per Claim	Operational	Average cost per paid inpatient hospital claim
13	Rate of Recovery to MHN FFS Participant	Operational	The rate of MHD's cost recovery/cost avoidance dollars to MHN fee-for-service (FFS) participants
	13a) Cost Recovery by Contractor	Operational	The MO HealthNet cost recovery from contracted services
	13b) Cost Recovery by MHD Staff	Operational	The MO HealthNet cost recovery from MHD staff
14	MHN Payment Timeliness	Operational	The measures how well MHD meets the federal requirements for payment timeliness (defined as 90% of claims paid within 30 days and 99% within 90 days)
	14a) Percent of Claims Paid Within 30 Days	Operational	Number of claims paid within 30 days divided by claims processed
	14b) Percent of Claims Paid Within 90 Days	Operational	Number of claims paid within 90 days divided by claims processed

**DASHBOARD MEASURES**  
**MO HealthNet (MHD) Performance Indicators**

	Measure	Type	Definition
15	MHD - MBE Expenditure Ratio	Operational	Percentage of all MHD discretionary expenditures to registered minority businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments
16	MHD - WBE Expenditure Ratio	Operational	Percentage of all MHD discretionary expenditures to registered women-owned businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments
17	Percentage of Abandoned Customer Calls	Operational	Under development
	17a) Participant Abandoned Calls	Operational	Under development
	17b) Provider Abandoned Calls	Operational	Under development
18	MHD Employee Turnover Rate	Operational	MHD employee terminations are shown as a percentage of the MHD full time equivalent (FTE) count
19	MHD - Number of Staff (FTE)	Operational	Number of MHD full time equivalent (FTE) staff
20	MHD - Compensation of Staff	Operational	Total Personal Service dollars expended for MHD staff

**DASHBOARD MEASURES**  
***Division of Youth Services (DYS) Performance Indicators***

	Measure	Type	Definition
1	Percentage of Law-Abiding Citizens (e.g., No Recombitment, Adult Probation or Incarceration)	Quality	Percentage of youth released from DYS custody that do not return to DYS or become involved in the adult correctional system divided by total youth exiting DYS custody.
	1a) Within 36 Months After Release From DYS	Quality	Percentage of youth released from DYS custody that do not return to DYS or become involved in the adult correctional system within 36 months divided by total youth exiting DYS custody.
	1b) Within 24 Months After Release From DYS	Quality	Percentage of youth released from DYS custody that do not return to DYS or become involved in the adult correctional system within 24 months divided by total youth exiting DYS custody.
	1c) Within 12 Months After Release From DYS	Quality	Percentage of youth released from DYS custody that do not return to DYS or become involved in the adult correctional system within 12 months divided by total youth exiting DYS custody.
2	Productively Involved Youth	Quality	Percentage is determined by dividing the number of "productively involved" (defined as working, actively seeking work and/or enrolled in education) youth at the time of discharge by the number of youth discharged from the Division of Youth Services.
3	Educational Pursuit and Completion (Ages 17+)	Quality	The percentage is determined by dividing the number of DYS youth ages 17 and older who are actively pursuing education or have obtained a high school diploma or GED prior to discharge compared to total discharges over age 17. Note: Age increased from 16 due to change of statute in 2009 (SB291).
	3a) Educational Completion	Quality	The percentage is determined by dividing the number of DYS youth ages 17 and older who have obtained a high school diploma or GED prior to discharge compared to total discharges over age 17. Note: Age increased from 16 due to change of statute in 2009 (SB291).
	3b) Youth Achieving Diploma or GED	Quality	The number of DYS youth ages 17 and older who obtain a high school diploma or GED prior to discharge. Note: Age increased from 16 due to change of statute in 2009 (SB291).
	3c) Actively Pursuing Education	Quality	The number of DYS youth ages 17 and older who are actively pursuing education upon discharge.
4	Academic Progress	Quality	Percentage is determined by dividing the number of DYS youth that show "successful academic progress" (defined as monthly achievement on par with standard academic achievement based on the test scores between the pre- and post-Woodcock-Johnson tests) achievement or passed the GED divided by the total number of DYS youth that take the post test or GED.
5	Percentage of Families of DYS Youth Participating in Family Therapy	Operational	Families of DYS youth that have completed at least one family therapy session at the point of discharge divided by families of DYS youth that are determined to need the service.
6	Critical Incident Free Days at DYS Residential Facilities	Operational	Percentage of residential youth observations per 100 days that did not have a "critical incident" (defined as being a run from a DYS residential care facility or assaultive behavior resulting in outside medical attention) divided by total residential youth observations per 100 days.
7	Youth Committed	Operational	Number of youth committed or recommitted to DYS custody.
	7a) Recombitment Rate	Operational	Percentage of youth recommitted to total commitments in DYS custody.

**DASHBOARD MEASURES**  
***Division of Youth Services (DYS) Performance Indicators***

	Measure	Type	Definition
8	Length of Stay in DYS Custody	Operational	The average length of stay for youth at release from DYS residential care.
9	Youth Facility Population		
	9a) Residential Facilities	Operational	Average number of youth in DYS residential facilities.
	9b) Day Treatment Facilities	Operational	Average number of youth in DYS day treatment facilities.
10	Timely Youth Placement	Operational	Percentage of DYS committed youth appropriately placed, based on plan of care, within 15 or less days from date of commitment.
11	DYS - MBE Expenditure Ratio	Operational	Percentage of all DYS discretionary expenditures to registered minority businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
12	DYS - WBE Expenditure Ratio	Operational	Percentage of all DYS discretionary expenditures to registered women-owned businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
13	Customer Satisfaction Surveys of Youth, Parents or Guardians and Courts	Customer Service	Percentage of DYS satisfaction based on monthly survey results of youth, parents or guardians and courts.
14	DYS - Overtime Hours Accrued Per Worker	Employee	DYS overtime hours per overtime eligible worker.
15	DYS - Employee Turnover Rate	Employee	DYS employee terminations are shown as a percentage of the DYS FTE count.
16	DYS - Number of Staff (FTE)	Employee	Number of DYS full time equivalent (FTE) staff.
17	DYS - Compensation of Staff	Employee	Total Personal Service dollars expended for DYS staff.

## DASHBOARD MEASURES

### *Division of Finance and Administrative Services (DFAS) Performance Indicators*

#### **MHD-Quality Health Care**

	Measure	Type	Definition
1	Payment Submission Error Rate	Operational	This is the percentage of payment documents that are returned by DFAS to the submitting division due to divisional staff errors. Examples include missing approval signature, reimbursement request is not in accordance with policy and duplicate payments. Errors are corrected by the division or DFAS before a payment is issued to the vendor. Error rates are based on a per document basis regardless of the number of errors on the document.
2	Compensation of DSS Staff	Operational	Actual personal service expenditures are compared to an expected expenditure amount based on the net available (budget less any reserves).
3	DSS - MBE Expenditure Ratio	Operational	Percentage of all DSS discretionary expenditures to registered minority businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments.
4	DSS - WBE Expenditure Ratio	Operational	Percentage of all DSS discretionary expenditures to registered women-owned businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments.
5	DFAS - MBE Expenditure Ratio	Operational	Percentage of all DFAS discretionary expenditures to registered minority businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments.
6	DFAS - WBE Expenditure Ratio	Operational	Percentage of all DFAS discretionary expenditures to registered women-owned businesses; expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract; this measure excludes non-discretionary expenditures, such as client assistance payments.
7	Invoice Payment Timeliness	Customer Service	Number of days between invoice date and payment. (Payments are generated two days after the acceptance date).
8	DFAS - Employee Turnover Rate	Employee	DFAS employee terminations are shown as a percentage of DFAS full time equivalent (FTE) count.
9	DFAS - Number of Budgeted Staff (FTE)	Employee	Number of budgeted DFAS full time equivalent (FTE) staff.
10	DFAS - Compensation of Staff	Employee	Total Personal Service dollars expended for DFAS staff.
11	Timely Child Care Payments	Customer Service	Percentage determined by dividing the number of payments made before the end of the month following the service date by all payments made within the reporting period.

**DASHBOARD MEASURES**  
***Division of Legal Services (DLS) Performance Indicators***

	Measure	Type	Definition
1	Percentage of Hearing Decisions Delayed due to Scrivener's Errors	Operational	The number of requests the DLS hearing unit receives to correct scrivener errors during the month divided by the number of hearing decisions mailed that month. Data is not available prior to February 2009
2	Sunshine Requests	Customer Service	Number of Sunshine Requests Filed
3	Protective Services Cases Resolved Within 15 Months	Customer Service	The percentage of protective services cases that are resolved by DLS within 15 months.
4	Time to Schedule Child Support Hearing (in months)	Customer Service	Time in months that new child support hearing requests received will be scheduled into the future. The hearings are scheduled within 2 days of receipt in the DLS office. The hearing dates are scheduled based on the volume of hearings and the number of staff available to hold the hearings.
5	Child Support Hearing Decision Timeliness	Customer Service	Child Support hearings decided in a timely manner divided by all hearing decisions that are decided or beyond timeliness. Timeliness defined as decisions written within 60 days of the closing of the record. Decisions that are 61 days or later are untimely.
6	DLS - MBE Expenditure Ratio	Customer Service	Percentage of all DLS discretionary expenditures to registered minority businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
7	DLS - WBE Expenditure Ratio	Customer Service	Percentage of all DLS discretionary expenditures to registered women-owned businesses. Expenditures may not be tied to a contract if the expenditure is under the threshold requiring a competitively bid contract. This measure excludes non-discretionary expenditures, such as client assistance payments.
8	DLS - Employee Turnover Rate	Employee	DLS employee terminations divided by DLS FTE count.
9	DLS - Number of Staff (FTE)	Employee	Number of DLS Full Time Equivalents (FTE).
10	DLS - Compensation of Staff	Employee	Total Personal Service Expenditures for DLS Staff.

**DASHBOARD MEASURES**  
***Human Resource Center (HRC) Performance Indicators***

	Measure	Type	Definition
1	Percent of Actions Affirmed by AHC	Operational	Affirmed decisions shown as a percentage of all DSS HR cases reviewed by the Administrative Hearings Commission (AHC).
2	Percent of Successful Grievance Arbitration Decisions	Operational	Successful grievance arbitration decisions
3	DSS Employee Turnover Rate	Operational	DSS employee terminations divided by the average number of salaried staff.
4	Number of DSS Staff (FTE)	Operational	Full time equivalent (FTE) staff is compared to the budgeted FTE less adjustments for reserves.

**HRC Employee Measures**

5	DSS - Worker's Compensation Claims (in millions)	Operational	Total expenditures paid for DSS Workers' Compensation claims.
6	HRC - Employee Turnover Rate	Employee	HRC employee terminations divided by the average number of salaried staff.
7	HRC-Number of Staff (FTE)	Employee	Number of HRC full time equivalent (FTE) staff.
8	HRC - Compensation of Staff	Employee	Total Personal Service dollars expended for HRC staff.