

# Virginia Results Planning and Performance Report

November 13, 2006

## Department for the Aging (163)

### Agency Head Contact Information

Name: Jay W. DeBoer, J.D. Phone: 804 662-9333  
Email: jay.deboer@vda.virginia.gov

### Planning and Performance Contact Information

Name: Tim M. Catherman Title: Deputy Commissioner, Support Services  
Telephone: 804 662-9309 Email: tim.catherman@vda.virginia.gov  
Agency Website: <http://www.vda.virginia.gov>

### Mission Statement

The mission of the Department for the Aging is to foster the independence, security, and dignity of older Virginians by promoting partnerships with families and communities.

### Objectives

1. Maintain in FY 2005 the total number of congregate (group) and home delivered meals served by the 25 area agencies on aging (AAAs) in FY 2003.
2. Maintain in FY 2005 the number of transportation one-way trips provided by the 25 area agencies on aging (AAAs) in FY 2003.
3. Increase in FY 2005 by 5% the number Informational Requests provided by the Department for the Aging in FY 2003.
4. Reduce by 20% in FY 2005 the number of repeat Findings identified during a previous Performance and Compliance Review.
5. Continue in FY 2005 to serve the elderly most risk of institutionalization.

### Activities

1. **Home and Community Based Services:** Efforts to provide services for individuals that include adult day care, homemaker, personal care, nutrition, transportation, health education and screening, disease prevention, socialization and recreation, care coordination, public information, and the Respite Care Incentive Grant Program.
2. **Elder Rights and Protection:** Efforts to provide educational, legal assistance, consumer protection, crime and fraud prevention, and TRIAD (program developed to expand and implement effective crime prevention and education, implemented in Virginia by the Department for the Aging, law enforcement, and the Attorney General), and to administer the Public Guardian and Conservator Program and the Long-Term Care Ombudsman Program.

3. **Monitoring, Education, Research, and Partnership Expansion:** Efforts to assure quality and cost-effectiveness of services and programs through service standards, policy guidelines, contract administration, monitoring and technical assistance. This activity also involves analyzing demographic data and encouraging private-sector initiatives.
4. **Agency Administration and Support:** Efforts to conduct day-to-day operations of the agency, including fiscal, information systems, and administrative support functions.

<b>Customers</b>	<b>Growth Trend</b>
Older Virginians and their families	Increasing
Contractors - agencies on aging and non-profit service providers	Same
Federal and state agencies, Governor's Office, Governor's Secretaries, General Assembly	Same
Community businesses and industries	Increasing

<b>Governor's and Other Initiatives</b>	<b>Status</b>
<i>No Initiatives have been entered for this agency.</i>	

## Performance Measures

### Measure #1

Increase the total number of congregate (group) and home delivered meals served by the 25 Area Agencies on Aging (AAAs).

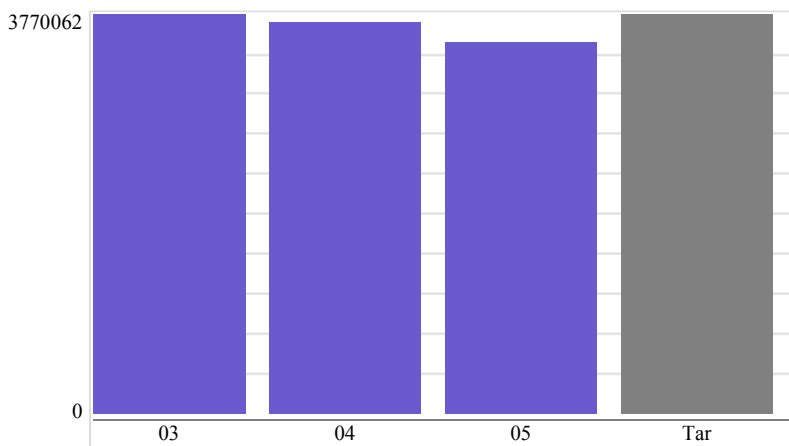
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	3,770,061
2004	3,703,524
2005	3,515,009
2006	



### Explanatory Note

In tight budget times and increasing costs, AAAs strive to find additional resources or alternative methods to provide cost effective elderly nutrition.

### Title or brief description of the primary data source(s)

Aging Monthly Reports.

### Describe how the measure is calculated

Sum the total number of congregate (group) and home delivered meals provided by the 25 Area Agencies on Aging.

### Describe how the target is calculated

The target is based on FY 2003 actual.

### Measure #2

Increase the number of transportation one-way trips provided by the 25 Area Agencies on Aging (AAAs).

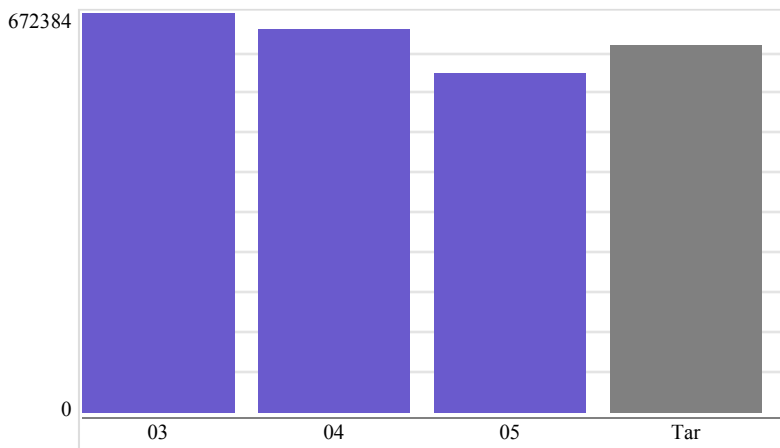
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	672,383
2004	645,874
2005	571,095
2006	



**Explanatory Note**

In tight budget times and increasing costs, AAAs strive to find additional resources or alternative methods to provide cost effective transportation.

**Title or brief description of the primary data source(s)**

Aging Monthly Reports.

**Describe how the measure is calculated**

Summing the total number of transportation one-way trips provided by the 25 Area Agencies on Aging.

**Describe how the target is calculated**

The target is based on FY 2005 with slightly increased funding coupled with an increase in fuel costs.

**Measure #3**

Increase the number Informational Requests provided by the Department for the Aging.

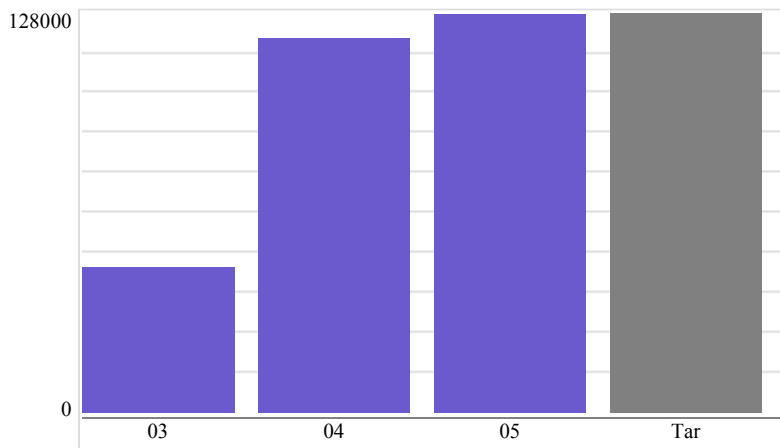
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	46,690
2004	119,374
2005	127,306
2006	

**Explanatory Note**

The Department for the Aging continues to become the Commonwealth's clearing house for elderly information such as Medicare/Medicaid, prescription drugs and the GrandDriver Program.

**Title or brief description of the primary data source(s)**

VITA monthly telephone bill listing number of 800 calls, Aging Information System database and web hit counter for prescription drugs and the GrandDriver Program.

**Describe how the measure is calculated**

Sum the number of incoming calls on the 800 toll-free hotline, number of publications mailed, and number of web hits for prescription drugs and the GrandDriver program.

**Describe how the target is calculated**

The target is based on projected 800 calls, publications mailed, and prescription drug hits for FY05 and allowing for some growth.

**Measure #4**

Maintain the number of repeat Findings identified during the previous Performance and

Compliance Review year.

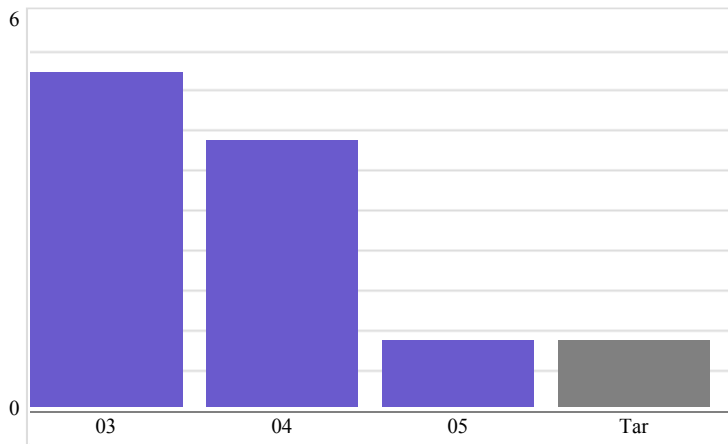
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2003	5	
2004	4	
2005	1	
2006		



#### Explanatory Note

All Area Agencies on Aging and other contractors receive an annual onsite financial review. At the beginning of the year, the Department will identify 1/3 of Area Agencies on Aging and other contractors for onsite programmatic reviews. The AAA and other contracts are issued Findings for major issues in which they have been found to be non-complaint. The subsequent year, the findings identified previously are reviewed. The findings identified previously should be resolved.

#### Title or brief description of the primary data source(s)

Performance and Compliance Reviews

#### Describe how the measure is calculated

This measure is calculated by identifying the number of repeat Findings for the same contractor two years in a row and comparing it with the number of repeat Findings identified in the prior year.

#### Describe how the target is calculated

The number of repeated findings in FY 2005 was 1.

#### Measure #5

Continue to serve the elderly at most risk of institutionalization.

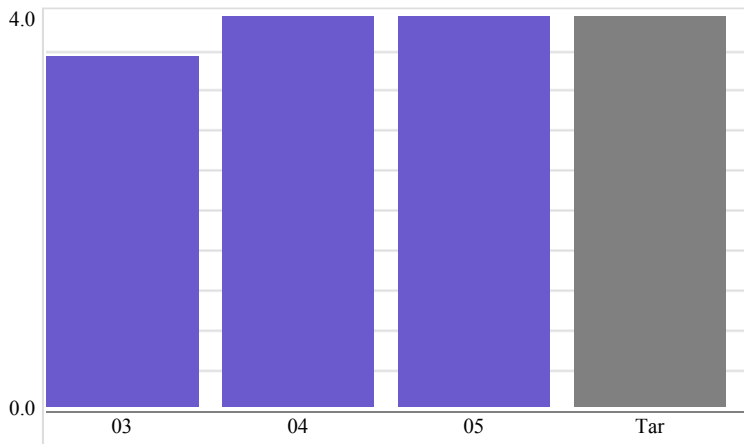
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2003	3.5	
2004	3.9	
2005	3.9	
2006		



#### Explanatory Note

For FY 2003, the AAAs average client's age and ADL for each service were as follows: Service Avg. Age Avg. ADL Home Delivered Meals 79 2.8 Personal Care 80 3.5 Care Coordination 78 ½ 3.2 Homemaker 80 2.7 Chore 78 5.1 Adult Day Care 80 3.4 Of the services listed above, Personal Care is the best representation of the elderly most at risk of institutionalization. Data for FY 2006 will not be available until November 2006. The data is collected based on the federal fiscal year of October 1 through September 30 of each year.

#### Title or brief description of the primary data source(s)

Personal Care Service statistics obtain through the Advanced Information Management (AIM) database of Uniform Assessments.

#### Describe how the measure is calculated

The measure is based on a custom report that identifies the average age and Activity of Daily Living (ADL) deficits for clients receiving Personal Care Services.

#### Describe how the target is calculated

Based on clients during fiscal year 2004 and 2005.

#### Measure #6

Increase the number of individual rides for seniors.

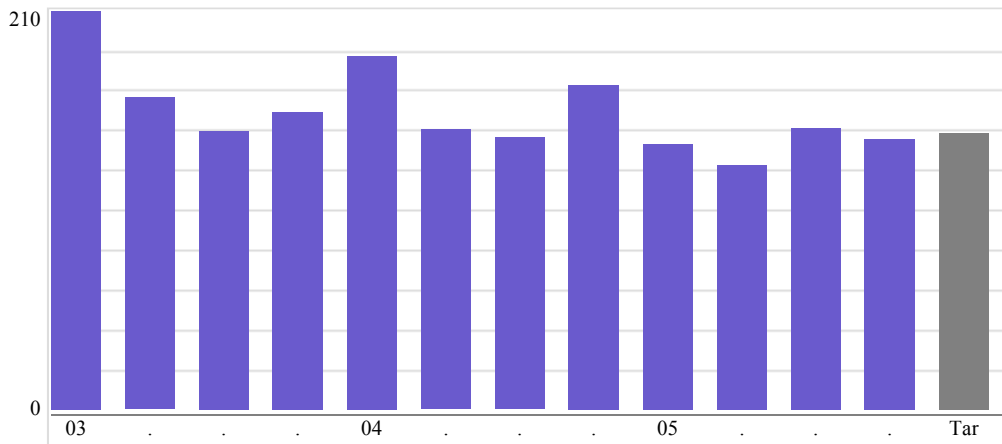
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	208.7	163.9	145.6	156.0
2004	185.4	147.1	143.2	170.2
2005	139.8	128.3	147.7	142.2
2006				



### Explanatory Note

Thousands of one-way trips.

### Title or brief description of the primary data source(s)

The Area Agencies on Aging submit an Aging Monthly Report (AMR) that identifies one-trips.

### Describe how the measure is calculated

The Area Agencies on Aging count number of people they are transporting to each destination. This number is aggregated by each agency.

### Describe how the target is calculated

The target is based on anticipated trips based on historical records.



**Measure #7**

Maintain funding for one program which provides access to critical prescriptions for low-income elderly Virginians, and in conjunction with the Virginia Health Care Foundation, to develop plans to expand the program to three (3) additional areas of the Commonwealth.

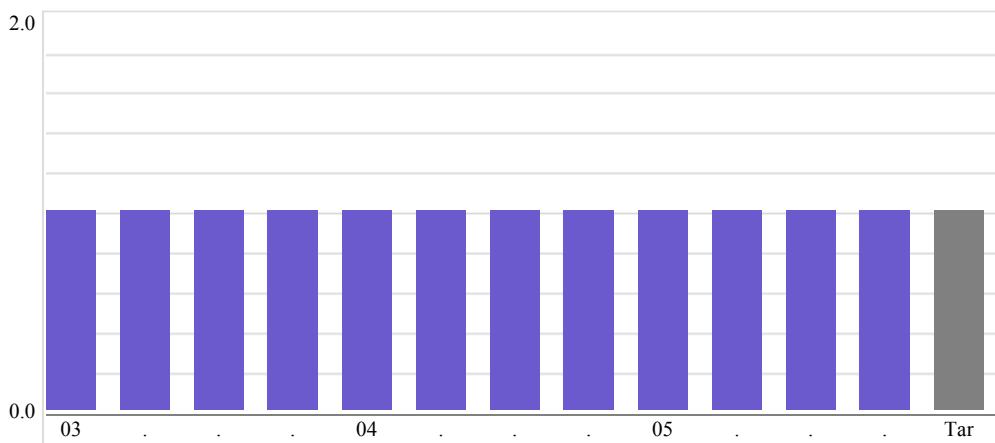
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	1.0	1.0	1.0	1.0
2004	1.0	1.0	1.0	1.0
2005	1.0	1.0	1.0	1.0
2006				

**Explanatory Note**

Number of Prescription assistance programs operative in VA.

**Title or brief description of the primary data source(s)**

VDA/VHCF/AAA data

**Describe how the measure is calculated**

The measure is number of critical prescriptions programs funded.

**Describe how the target is calculated**

The target is number of critical prescriptions programs funded since FY 2003.

**Measure #8**

Increase the number of nutritional meals for Virginia's frail and vulnerable citizens.

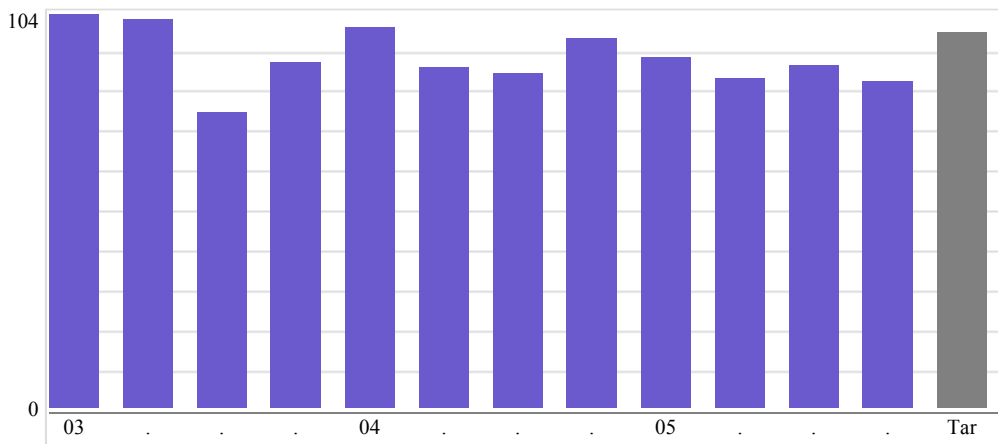
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **97.5** Target Date **FY 2006**

Data Begins **2003** Collection Frequency **Quarterly**

	Q1	Q2	Q3	Q4	
2003	102.5	100.7	76.9	89.8	
2004	99.0	88.2	86.8	96.4	
2005	91.1	85.9	88.9	84.8	
2006					

**Explanatory Note**

Measure in ten-thousands of meals.

**Title or brief description of the primary data source(s)**

Aging Monthly Reports (AMRs).

**Describe how the measure is calculated**

The Area Agencies on Aging count number of meals they provide. This number is aggregated by each agency.

**Describe how the target is calculated**

The target is based the number of meals provided in FY 2003. The target is 3,900,000 for FY 2006, which translates into 975,000 meals each quarter.

**Measure #9**

Increase the number of information and assistance contacts, to and from the public, regarding information about aging services and programs.

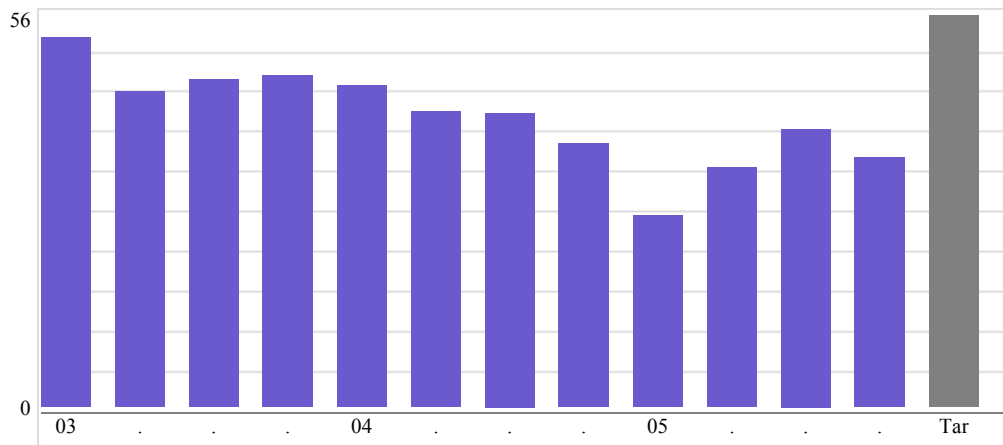
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **55** Target Date **FY 2006**

Data Begins **2003** Collection Frequency **Quarterly**

	Q1	Q2	Q3	Q4	
2003	51.8	44.3	45.8	46.5	
2004	45.2	41.5	41.2	37.0	
2005	27.0	33.6	39.0	35.0	
2006					



**Explanatory Note**

Expressed in thousands of contacts

**Title or brief description of the primary data source(s)**

I&R records from AAA's and VDA

**Describe how the measure is calculated**

The Area Agencies on Aging count the number of contacts to whom they provide information and assistance. This number is aggregated by each agency.

**Describe how the target is calculated**

The target is based the number of information and assistance contacts provided in FY 2003. The target for FY 2006 is 220,000, which translates into 55,000 per quarter.

**Measure #10**

Increase the number of persons served needing respite care and other elderly services.

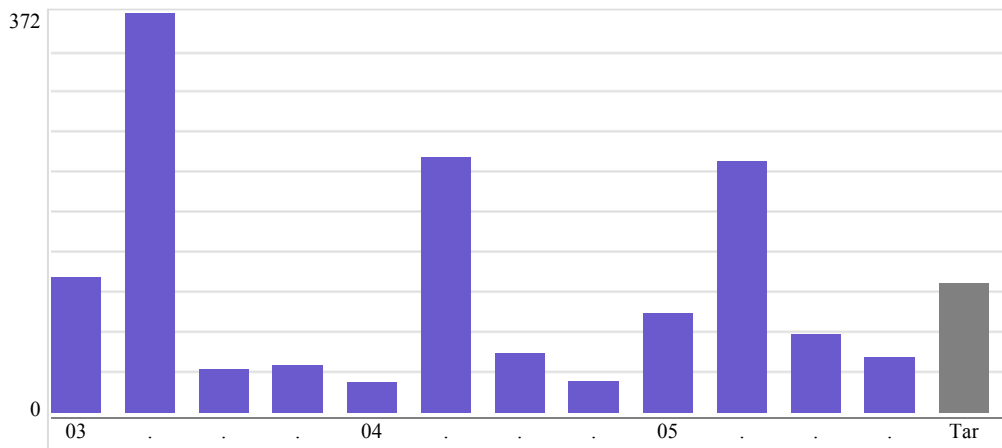
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2003	127.0	372.0	40.0	44.0	
2004	28.0	239.0	56.0	30.0	
2005	93.0	234.0	72.0	53.0	
2006					

**Explanatory Note**

Persons served in Adult Day care.

**Title or brief description of the primary data source(s)**

Adult Day care and other respite care providers throughout the Commonwealth.

**Describe how the measure is calculated**

The number is an "unduplicated count" of individuals served, and not a cumulative total in any quarter. New customers/consumers are shown in each quarter.

**Describe how the target is calculated**

The target is based on the number of respite care clients provided services in FY 2005. The target for FY 2006 is 480, which translates into 120 per quarter.

**Measure #11**

Expand existing ten Virginia Public Guardian and Conservatorship programs to 11 during FY 2006.

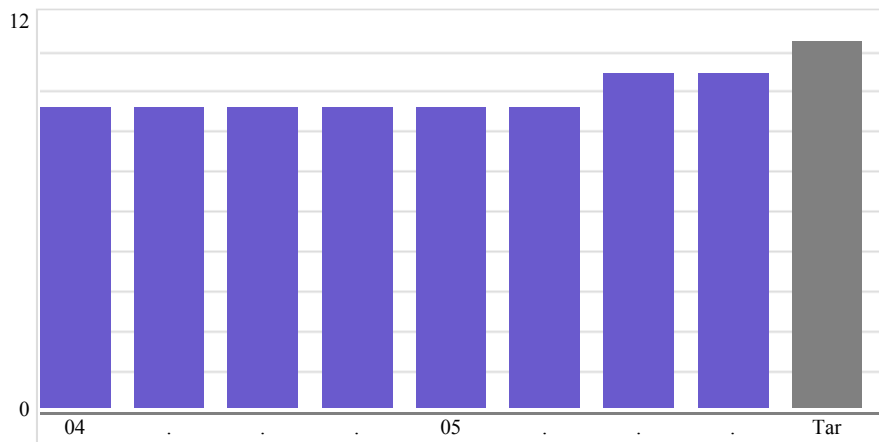
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2004	9.0	9.0	9.0	9.0	
2005	9.0	9.0	10.0	10.0	
2006					

**Explanatory Note**

The Virginia Public Guardianship and Conservatorship program provides guardianship services for those who require the same, but for whom no alternative guardian may be found.

**Title or brief description of the primary data source(s)**

Count of individual programs participating.

**Describe how the measure is calculated**

The measure is calculated by summing the number Virginia Public Guardian and Conservatorship contracts awarded.

**Describe how the target is calculated**

The target is calculated by estimating the number Virginia Public Guardian and Conservatorship contracts that will be awarded in FY 2006.

**Measure #12**

Increase the number of clients being served by the Virginia Public Guardian and Conservatorship Program (assuming available resources).

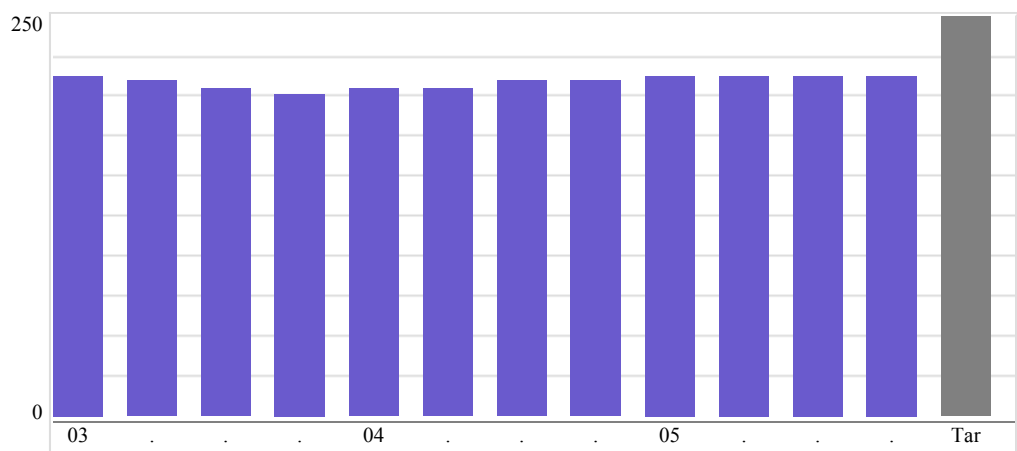
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	212.0	210.0	205.0	201.0
2004	205.0	205.0	210.0	210.0
2005	213.0	213.0	213.0	213.0
2006				



**Explanatory Note**

None.

**Title or brief description of the primary data source(s)**

Virginia Public Guardian and Conservatorship program reports to VDA

**Describe how the measure is calculated**

The measure is calculated by summing the number of Virginia Public Guardian and Conservatorship clients served.

**Describe how the target is calculated**

The target is based the number of respite care clients Virginia Public Guardian and Conservatorship clients served each quarter in FY 2003.

**Measure #13**

Increase the number of ombudsmen for the Virginia Long-Term Care Ombudsman Program to meet the Institute of Medicine's staffing recommendations.

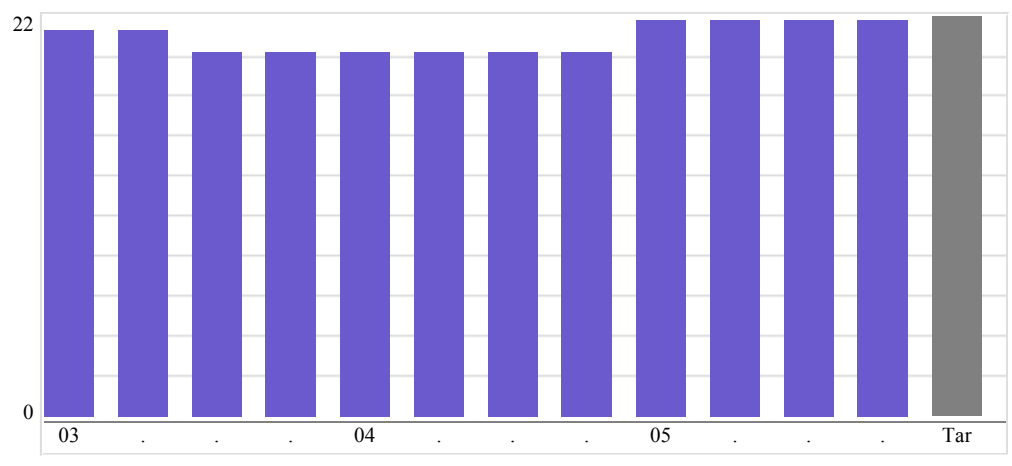
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **22** Target Date **FY 2006**

Data Begins **2003** Collection Frequency **Quarterly**

	Q1	Q2	Q3	Q4	
2003	21.2	21.2	20.0	20.0	
2004	20.0	20.0	20.0	20.0	
2005	21.8	21.8	21.8	21.8	
2006					



**Explanatory Note**

None.

**Title or brief description of the primary data source(s)**

Virginia Long Term Care Ombudsman Program

**Describe how the measure is calculated**

Actual count within Long Term Care Ombudsman program.

**Describe how the target is calculated**

The target is a base number of Ombudsmen in the local programs measured against the regulated beds and slots within the Commonwealth.

**Measure #14**

Increase the number of collaborative efforts with partners on grant applications and funding opportunities.

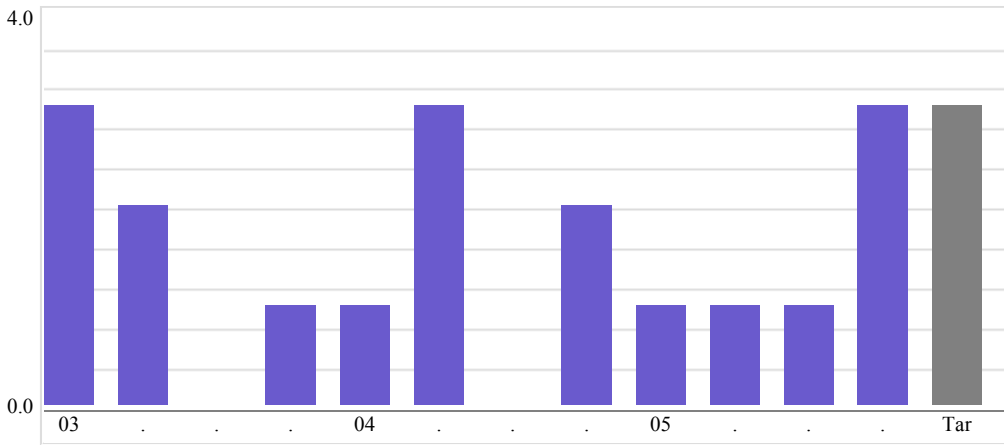
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	3.0	2.0	0.0	1.0
2004	1.0	3.0	0.0	2.0
2005	1.0	1.0	1.0	3.0
2006				



**Explanatory Note**

During FY 2005, VDA worked with DRPT, VDH, Alzheimer's Associations, ADRC, and No Wrong Door Work Groups.

**Title or brief description of the primary data source(s)**

Virginia Poverty Law Center; Virginia Tech; Alzheimer's Association of Central Va.; Virginia Tech; Center for Excellence in Aging, College of William and Mary; other partners of the agency.

**Describe how the measure is calculated**

The measure is calculated by summing the number collaborations on grant applications. Collaborations can be letters of support, work groups participation, joint applications, etc.

**Describe how the target is calculated**

The target is based on the number of collaborative efforts achieved in FY 2004.



## Comprehensive Services for At-Risk Youth and Families (200)

### Planning and Performance Contact Information

Name: CHARLES SAVAGE Title: BUSINESS MANAGER  
Telephone: 804-662-9818 Email: CES992@CENTRAL.DSS.STATE.VA.US  
Agency Website: <http://www.csa.state.va.us/>

### Mission Statement

To direct a cost effective, collaborative system of services for youths that is child centered, family focused and community based.

### Objectives

1. By YE FY05, assist all localities in submitting complete and accurate child service/cost information within 60 days of the close of each quarter, evaluate the usefulness of the data in measuring performance and modify reporting requirements as necessary.
2. Each year provide 30 local governments a detailed evaluation of the communities CSA demographic/financial data, accompanied by technical assistance to facilitate efficient and effective provision of services to emotionally and behaviorally troubled youth
3. Assist 25 percent of the localities each of the next four years in utilizing a standardized CSA services contract with private providers.
4. By the close of FY2005 and each year thereafter, assist service providers and local purchasers in disaggregating a minimum of three additional service categories, to facilitate billing of federal funding sources.
5. Publish and disseminate state-of-the-art fiscal, administrative, and child serving practices, beginning with three per quarter in FY2005, and averaging 4 per quarter in FY2006, 5 per quarter in FY2007 and 6 per quarter in FY2008.

### Activities

1. **Pool Fund Service Expenditures:** Efforts to ensure that local governments are reimbursed the appropriate state share of expenditures for services to assist at-risk children and their families served by the Comprehensive Services Act.

### Customers

Growth Trend

Legislative Branch of Government  
Other State Agencies  
Service Providers, public and private  
Local Government  
Virginia Taxpayers  
Youth and Their Families

Governor's and Other Initiatives	Status
<p>Provide support to the OSHHR as it: Assumes the chairmanship of the CSA Executive Council; Improves CSA's data capacity by designing and implementing an electronic data system to capture minimal child specific data; Improves CSA capacity to evaluate and monitor child specific service levels; Better utilization of Medicaid and Title IV-E funds; Implements an optional standardized purchase of service contract; Improve data collection, coordination and sharing among CSA member state agencies.</p>	<p>All areas of the SHHR study have been addressed. Major initiatives include implementation of a child specific information data set, review of managed care review practices, continued evaluation of funding opportunities, and addressing service unbundling.</p>
<p>At least 3 times annually, local governments will provide data to load into their human services data warehouse.</p>	<p>All child specific information is loaded in the human services data warehouse in accordance with FY05 modified reporting protocol as recommended by the Data Set Users group and endorsed by the OCS IT Workgroup.</p>
<p>At least four times annually, a locality's successful practices will be spotlighted on the CSA web site. The CSA Training Advisory Group (TAG) will assist in the determination of which locality should be spotlighted. Only localities having multiple year successes of controlling costs will be considered.</p>	<p>There have been 4 quarterly postings in FY05, each posting spotlighting at least 3 different locality best practices.</p>
<p>A partnership team will review at least one locality per quarter determining if that locality's residential service cases are in compliance with program statute/policy requirements regarding service delivery management.</p>	<p>In FY05, there have been 158 locality requests for supplemental funding (thru Sept 20, 2005). Each review encompasses a compliance review of residential cases, including FAPT and utilization management review compliance with program policy.</p>
<p>At least one locality will be provided a partnership team review and technical assistance session per quarter. The OCS will partner with staff from the DMAS and the DSS to assist the localities in the identification of opportunities to utilize Medicaid and/or Title IV-E funds to offset their state funded CSA costs.</p>	<p>In FY05, 18 site visits (14 local gov't and 4 providers) were performed. Staff participated in 7 regional symposiums and provided 7 regional training sessions. SEC retreat held in April to map strategic direction of CSA.</p>

## Performance Measures

### Measure #1

Statewide average cost per youth receiving benefits in the Comprehensive Services Act program (in thousands)

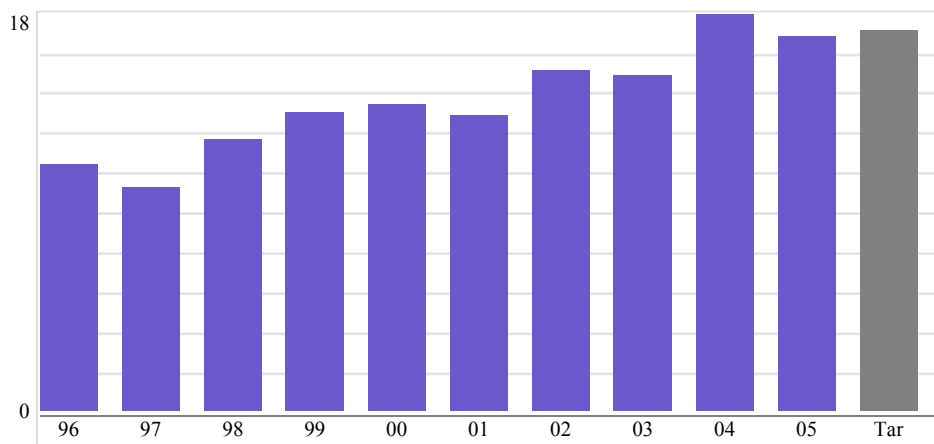
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1996	11.1
1997	10.1
1998	12.2
1999	13.4
2000	13.8
2001	13.3
2002	15.3
2003	15.1
2004	17.8
2005	16.8
2006	



### Explanatory Note

A lower than anticipated increase in FY05 actual expenditures (5.3%) coupled with a higher FY05 caseload increase (11.5%), resulted in the deciling actual average rate.

### Title or brief description of the primary data source(s)

Primary data sources include local government census reporting and the Department of

Education CSA expenditure reporting system.

**Describe how the measure is calculated**

The ratio is calculated by dividing annual expenditures by the total unduplicated CSA census.

**Describe how the target is calculated**

The target represents projected unit cost based on a 4% annual increase on CSA funded unduplicated census, netted for an anticipated increase in pool fund expenditure cost of 6%.

**Measure #2**

Annual program expenditure growth rate

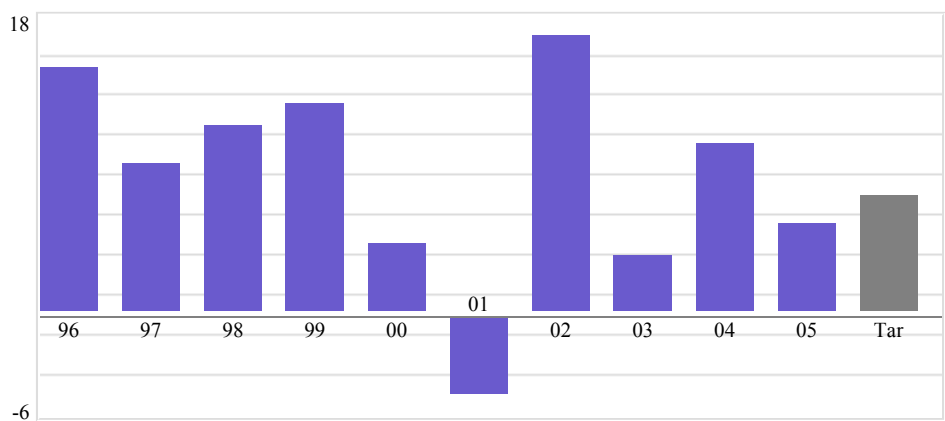
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1996	14.6
1997	8.9
1998	11.2
1999	12.5
2000	4.1
2001	-4.5
2002	16.5
2003	3.4
2004	10.1
2005	5.3
2006	



**Explanatory Note**

The declining rate of increase results in the use of Medicaid as an alternative funding source, where applicable, along with increased emphasis on effective utilization management at the local level.

**Title or brief description of the primary data source(s)**

Information is obtained from CSA expenditure summary information and the Department of Education CSA expenditure reporting system

**Describe how the measure is calculated**

The measure is calculated by determining the percentage change in total CSA expenditures by

year.

**Describe how the target is calculated**

The target represents the projected expenditure growth for CSA funded children, not considering the effect of Medicaid related cost.

**Measure #3**

The percentage of Comprehensive Services Act (CSA) youth served in community and family based settings compared to CSA total youth served

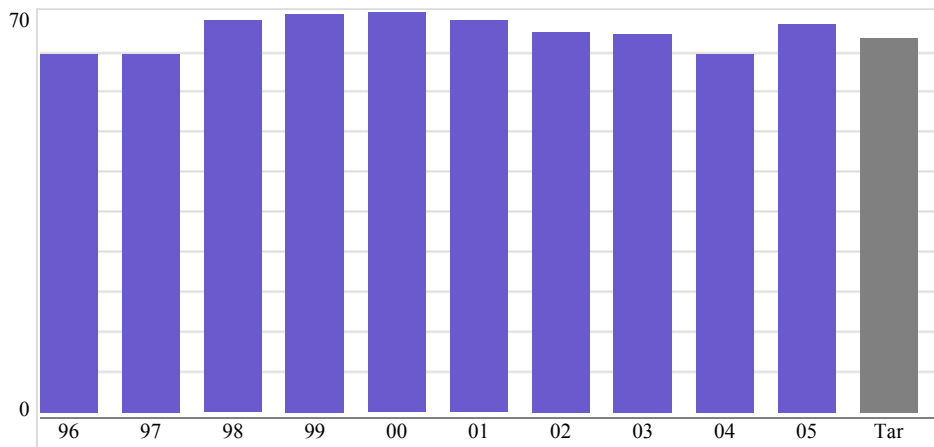
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1996	62.5
1997	62.5
1998	68.5
1999	69.5
2000	70.0
2001	68.7
2002	66.6
2003	66.0
2004	62.8
2005	68.0
2006	

**Explanatory Note**

The FY04 percentage is believed to be too low. This is a result of the initial year of implementation of the CSA data set. The FY05 result of 68.0% is in line with historical percentages.

**Title or brief description of the primary data source(s)**

This percentage represents the percent of CSA funded children served in community and family based settings.

**Describe how the measure is calculated**

The measure is calculated utilizing census information submitted by local governments that separates children served in residential versus non-residential settings.

**Describe how the target is calculated**

The target is determined by historical analysis based on the most recent 2 year actual results.



**Measure #4**

Increase the number of grant availability discrete listings by 10%.

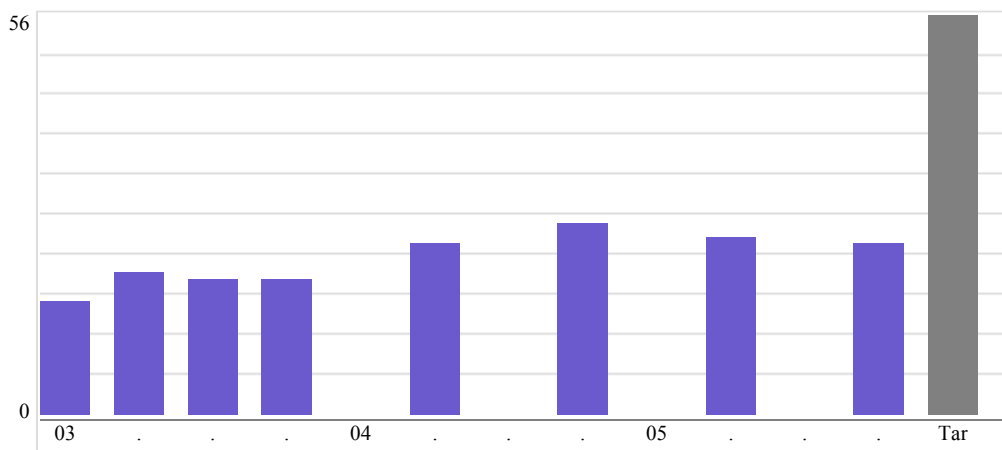
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	16.0	20.0	19.0	19.0
2004		24.0		27.0
2005		25.0		24.0
2006				



**Explanatory Note**

This data is reported biannually. Local governments were also advised of a grant made to the Department of Mental Health, Mental Retardation and Substance Abuse Services to provide technical assistance to localities to assist with substance abuse issues in those cases in which children are at-risk for foster care due to family problems with substance abuse.

**Title or brief description of the primary data source(s)**

Various web based resource sites.

**Describe how the measure is calculated**

The measure is calculated by actual count of the total grant opportunities posted to the CSA web site for use by local governments.

**Describe how the target is calculated**

The target is calculated by increasing the actual grant postings for the previous year by a percentage factor.

## Department of Health Professions (223)

### Agency Head Contact Information

Name: Robert A. Nebiker Phone: 804-662-9920  
Email: Robert.Nebiker@dhp.virginia.gov

### Planning and Performance Contact Information

Name: Susan Stanbach Title: Agency Management Lead Analyst  
Telephone: 804-662-9514 Email: Susan.Stanbach@dhp.virginia.gov  
Agency Website: <http://www.dhp.state.va.us/>

### Mission Statement

Enhance access to the delivery of safe and competent health care services by licensing health care providers, enforcing standards governing practice and providing information to practitioners and consumers.

### Objectives

1. Improve the public access to safe healthcare by increasing compliance with agency standards for the prompt resolution of cases where misconduct is alleged by 5 percent each year through FY 2008.
2. Assure the maximum numbers of health care providers are authorized to practice by effectively processing applications for licensure as measured by an increase of 1% above a positive 90% in surveys of applicant satisfaction each year through FY 2008.
3. Prevent the diversion of drugs with a high potential for abuse through effective operation of a prescription monitoring system as reflected in a doubling of reports provided to prescribers and others authorized each year through FY 2008.
4. Improve access to and the quality of health care services by increasing visits to the agency's web sites by 10% each year through FY 2008.

### Activities

1. **Licensure, Permitting, and Certification:** Efforts to ensure that individuals and entities meet the statutory licensure requirements to practice as health care professionals in Virginia, in order to protect patients and clients.
2. **Investigation and Adjudication:** Efforts to identify violations of regulations governing health care providers designed for public safety and to take appropriate action to protect the public in the future.
3. **Nurse Scholarships:** Efforts to encourage individuals to become nurses to assure adequate health care.
4. **Administration and Support:** Efforts to conduct operations of the agency in response to its constituencies.

<b>Customers</b>	<b>Growth Trend</b>
Consumers of health care services	Increasing
Providers of health care services	Increasing
Victims of misconduct	Increasing
Applicants for licensure	Increasing

<b>Governor's and Other Initiatives</b>	<b>Status</b>
Work with members of the administration (HHS and PS), the Attorney General and stakeholders to obtain authorization and funding for a prescription monitoring in South West Virginia.	Completed by December 31, 2002
Prepare in conjunction with stakeholders, including patient advocates, providers and law enforcement ,a study to evaluate the impact of drug monitoring on (1) pharmaceutical drug diversion and (ii) the availability of drugs to alleviate pain.	Underway August 2004. Conference on topic scheduled for October 7 and 8, 2004. Report to 2005 General Assembly.
Identify and propose any changes in law that may be necessary to facilitate appropriate and timely response by health care practitioners, including allowing licensees from other states to deliver care in declared emergencies by August 31,2002.	Completed August 2002
Establish a database for the Virginia Department of Health that identifies healthcare practitioners who are willing volunteer to assist in the event of an emergency by March 30,2004	Initial database completed March 30, 2004. Updates of information ongoing.
Health regulatory board scorecard is defined and developed; appears on website	Data on website at: <a href="http://www.dhp.virginia.gov/about/quarterly-stats.htm">www.dhp.virginia.gov/about/quarterly-stats.htm</a>
Evaluate the usefulness of DHP web site using three focus groups in FY 05.	This data will be reported January 2005.
Identify information on 41 types of health care practitioners that could be made available to the Department of Emergency Management (DEM) emergency preparedness by August 31, 2003.	Completed August 2003
Upon obtaining funding, establish a Monitoring Program in Southwest Virginia covering 300 pharmacies by December 31, 2003.	Completed December 2003
Require all approved training programs to identify resources necessary to meet 90% of the demand for qualified registered nurses in the Commonwealth through 2013.	Completed June 30, 2003.

## Performance Measures

### Measure #1

Customer satisfaction with licensure application process

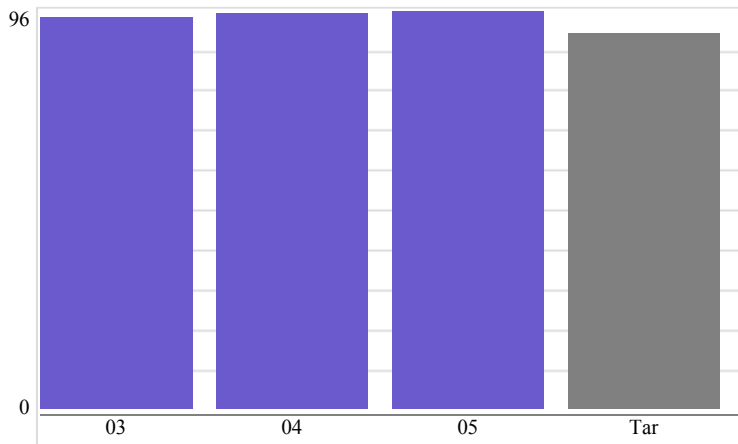
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	94.1
2004	95.2
2005	95.7
2006	



### Explanatory Note

none

### Title or brief description of the primary data source(s)

Completed surveys from licensure applicants

### Describe how the measure is calculated

Percentage of positive responses

### Describe how the target is calculated

Historic trends of survey responses at or below 90%.

**Measure #2**

Customer satisfaction with application processing time (percentage of customers who "agree" or "strongly agree" that their application for licensure was promptly processed)

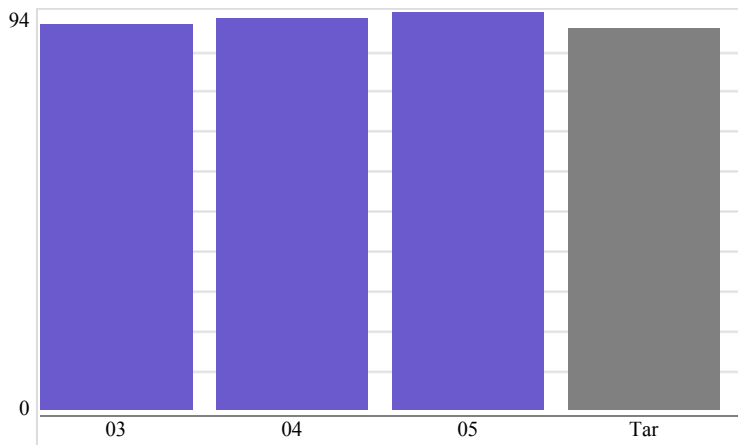
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	90.9
2004	92.3
2005	93.5
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Completed surveys from initial licensure applicants

**Describe how the measure is calculated**

Percentage of total number of customers who "agree" or "strongly agree" that their application for licensure was promptly processed

**Describe how the target is calculated**

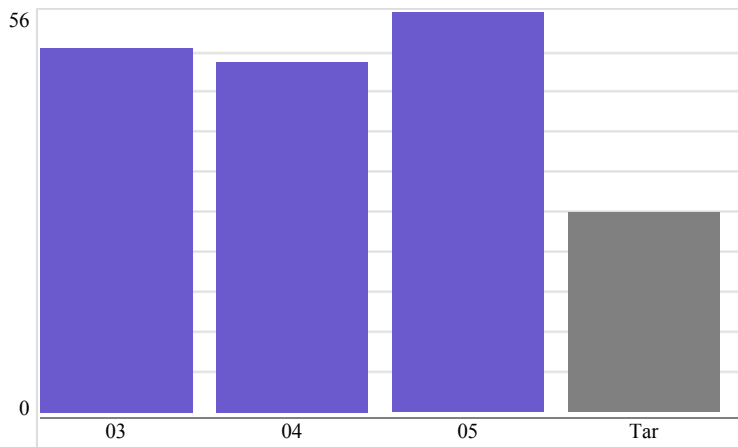
Historic trends at or below 90%.

**Measure #3**

Average time in days to investigate priority-one (A) allegations of misconduct by health care providers

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

Year	Measurement
2003	51
2004	49
2005	56
2006	

**Explanatory Note**

Backlog due to increased case load.

**Title or brief description of the primary data source(s)**

License 2000 database

**Describe how the measure is calculated**

Average number of days the cases are in this category.

**Describe how the target is calculated**

Minimum time necessary to investigate high priority cases.

**Measure #4**

Average number of days to investigate priority-two (B) allegations of misconduct by health care providers.

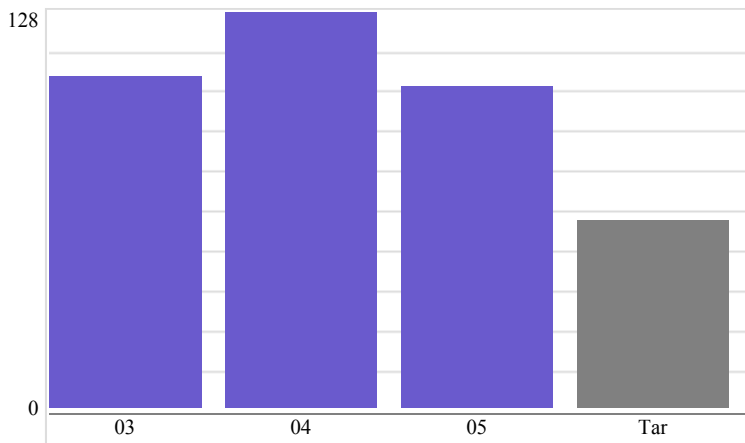
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	106
2004	127
2005	103
2006	

**Explanatory Note**

Backlog due to increased case load

**Title or brief description of the primary data source(s)**

License 2000 database

**Describe how the measure is calculated**

Average days cases are in the investigative stage

**Describe how the target is calculated**

Minimum number of days to investigate priority-2 (B) cases.

**Measure #5**

Have 60% of all licenses renewed on-line in FY 05.

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

Year	Measurement	
2004		
2005	75	
2006		

Not enough data to graph

**Explanatory Note**

Began on-line license renewal in December of 2003

**Title or brief description of the primary data source(s)**

Agency Files;DHP's License 2000 System

**Describe how the measure is calculated**

Percent of individuals renewing on-line.

**Describe how the target is calculated**

Performance of on-line renewals in other states.



**Measure #6**

Increase the number of visits to the Department's website by 10% in FY 05.

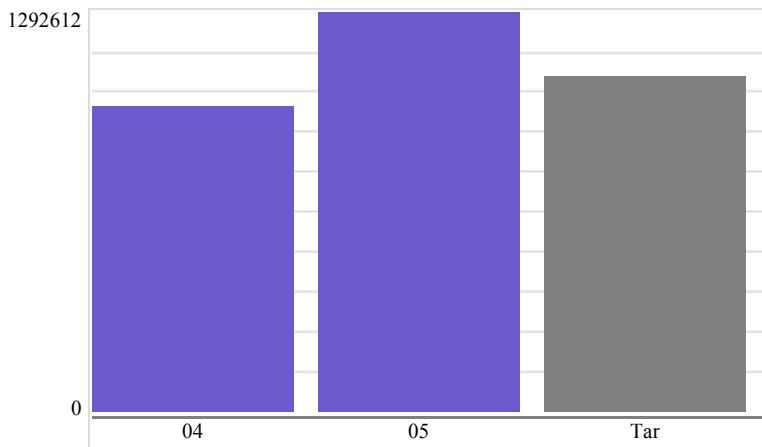
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2004	989,865
2005	1,292,612
2006	

**Explanatory Note**

Increased by approximately 31%.

**Title or brief description of the primary data source(s)**

Webtrends Composite report

**Describe how the measure is calculated**

Visits to DHP website

**Describe how the target is calculated**

FY04 visits plus 10%

**Measure #7**

Increase the compliance with agency standards for timely case resolution to 55% for all cases closed in FY 05.

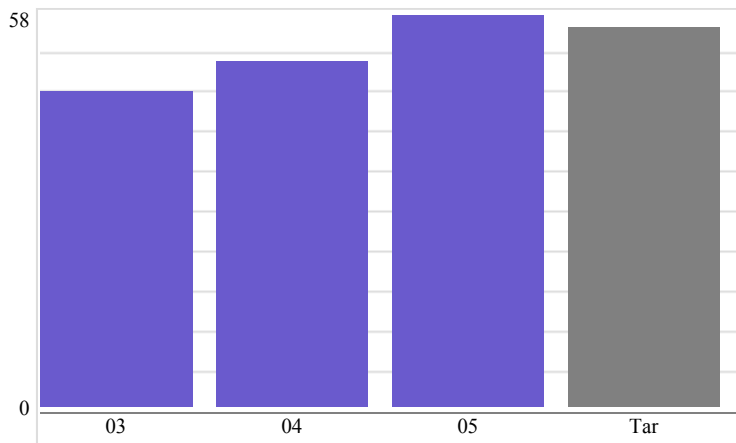
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	45.9
2004	50.2
2005	56.7
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Department of Health Profession AHLADIN System Case Tracking System

**Describe how the measure is calculated**

Percent of cases compliant with standard

**Describe how the target is calculated**

Published agency performance standards

**Measure #8**

Collect relevant manpower information from 60% of nurses, pharmacists, dentists and medical doctors renewing licenses on line FY05.

Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2004		
2005	68	
2006		

Not enough data to graph

**Explanatory Note**

Began collecting surveys January 2004

**Title or brief description of the primary data source(s)**

License 2000

**Describe how the measure is calculated**

Percentage of those renewing on-line who complete surveys

**Describe how the target is calculated**

Calculated based on previous surveys conducted by the Department

## Department of Rehabilitative Services (262)

### Agency Head Contact Information

Name: James A. Rothrock Phone: 804-662-7010  
Email: Rothroja@drs.state.va.us

### Planning and Performance Contact Information

Name: elizabeth smith Title: policy and planning director  
Telephone: 804-662-7071 Email: smithee@drs.state.va.us  
Agency Website: <http://www.vadrs.org/>

### Mission Statement

In partnership with people with disabilities and their families, the agency collaborates with the public and private sectors to provide and advocate for the highest quality services that empower individuals with disabilities to maximize their employment, independence and full inclusion into society.

### Objectives

1. Improve the employability of persons with disabilities attending the Woodrow Wilson Rehabilitation Center's training programs, by ensuring an annual 70% or more employment rate of training graduates for SFY 2005-2008.
2. Assist Virginians with disabilities in becoming independent and self-sufficient by ensuring that annually 3900 or more vocational rehabilitation (VR) consumers exit the VR program having achieved an employment outcome for FFY 2005-2008.
3. Increase the number of consumers served by the Woodrow Wilson Rehabilitation Center incrementally by 1% for SFY 2005, 2% for SFY 2006, 3% for SFY 2007, and 4% for SFY 2008, for a total 10% increase by the end of SFY 2008.
4. Provide quality services to Social Security Disability Insurance, Supplemental Security Income and Medicaid claimants by ensuring an annual accuracy rate of at least 91.4% for claims processed for FFY 2005-2008.
5. Increase the vocational rehabilitation (VR) rate incrementally by 1% for each year of FFY 2005-2007 and 2% for FFY 2008, for a total 5% increase by the end of FFY 2008.

### Activities

1. **Vocational Rehabilitation Services:** Efforts to provide direct delivery of services to persons with disabilities to help them remove barriers to employment and reach an employment goal.
2. **Community Rehabilitation Program:** Efforts to improve the employability and independence of the most severely disabled persons. Long-term services needed by clients for successful job placement include sheltered and supported employment and

personal assistance services.

3. **Disability Determination Services:** Efforts to provide accurate, timely, efficient and cost-effective evaluations of medical evidence related to claims filed by citizens of Virginia for benefits under the Social Security Act; and to process claims filed for Medicaid based on disability in a timely and accurate manner.
4. **Agency Support Activities:** Efforts to ensure compliance with all state and federal laws and guidelines related to fund usage, accounting, and procurement of goods and services, including general management, policy and planning, human resources, fiscal, and information technology services.

Customers	Growth Trend
Individuals with disabilities	Increasing
Employers	Increasing
Federal agencies (Rehabilitation Services Administration, Social Security Administration)	Same
Service Providers (Employment Services Organizations, Centers for Independent Living)	Increasing
Other state agencies, schools and colleges	Same
Local government	Same

Governor's and Other Initiatives	Status
<i>No Initiatives have been entered for this agency.</i>	

## Performance Measures

### Measure #1

Annual vocational rehabilitation program consumer satisfaction level will be at least 80%.

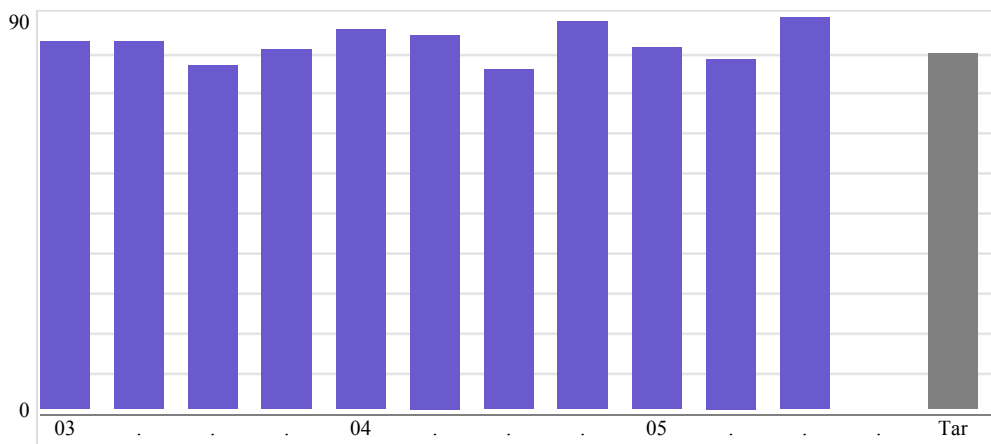
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2003	82.9	82.6	77.6	80.8
2004	85.6	84.0	76.6	87.3
2005	81.3	78.6	88.2	
2006				



### Explanatory Note

The data represents consumers exiting the program during the quarter. First thru third quarter data for FFY 2005 are preliminary as results are being verified. Data for 4th quarter 2005 is not yet available as this quarter will not end until September 30, 2005 and there are not sufficient survey responses to make a projection.

### Title or brief description of the primary data source(s)

Data sources for FFY 2003 and 2004 are data files received from the contractor who collected the data. The data source for FFY 2005 is the in-house cumulative data file as of August 11, 2005.

### Describe how the measure is calculated

Satisfaction survey responses from a sample of VR consumers; those whose cases are closed as successfully rehabilitated and those closed without a successful rehabilitation. Percent is # who said very or somewhat satisfied divided by total responders

### Describe how the target is calculated

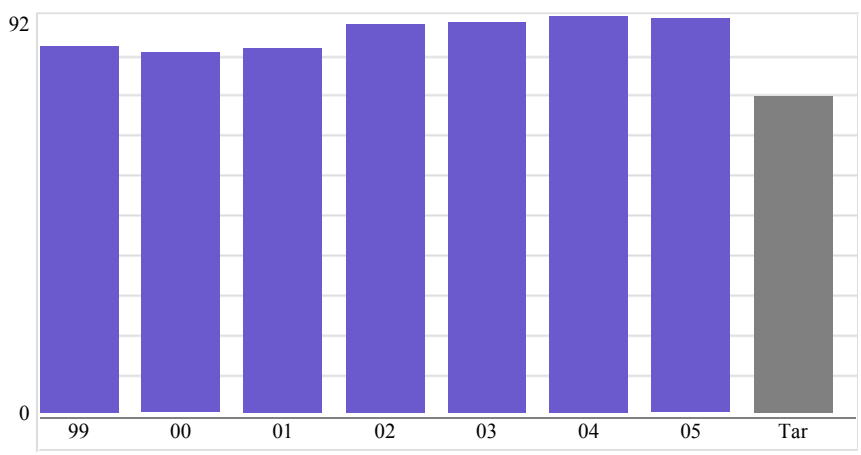
Trends for this measure in the past.

**Measure #2**

Of all individuals determined to have achieved an employment outcome, the percentage who exit the VR program in competitive, self-, or business enterprise program (BEP) employment with earnings equivalent to at least the minimum wage.

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

Year	Measurement
1999	84.0
2000	83.0
2001	83.8
2002	89.3
2003	89.7
2004	91.2
2005	90.7
2006	



**Explanatory Note**

The data for 2005 is a projection as this measure is calculated on the federal fiscal year which will not end until September 30, 2005. The target for this measure is established by the federal Rehabilitation Services Administration.

**Title or brief description of the primary data source(s)**

Virginia Rehabilitation Information System (VRIS)

**Describe how the measure is calculated**

Total number of rehabilitated closures earning at least minimum wage and in competitive employment is divided by total number of rehabilitated closures.

**Describe how the target is calculated**



The target is established by the Federal Rehabilitation Services Administration.

**Measure #3**

Serve at least 175 consumers per quarter through the state-funded Personal Assistance Services (PAS) program, with a goal of assisting consumers in nursing homes to move to community settings. .

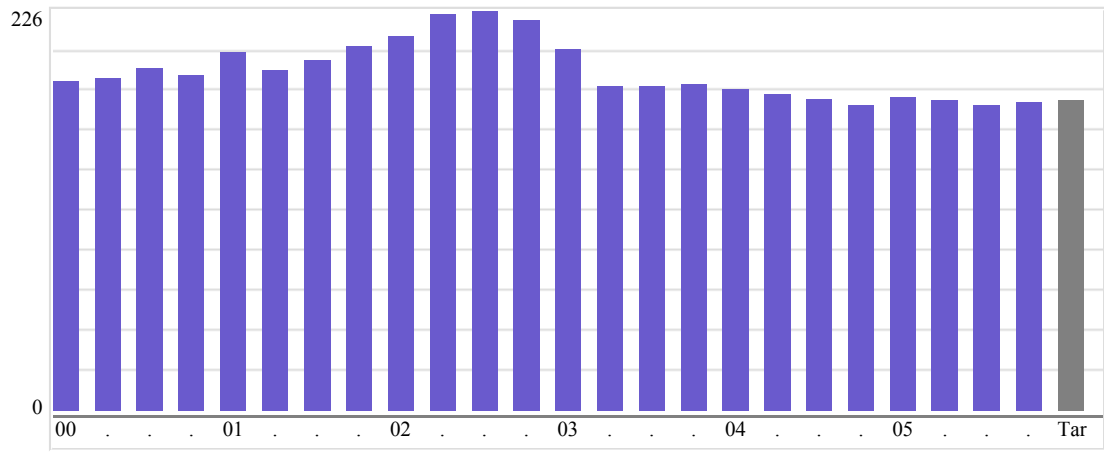
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2000	186.0	188.0	193.0	190.0
2001	202.0	192.0	198.0	206.0
2002	211.0	224.0	226.0	220.0
2003	204.0	183.0	183.0	184.0
2004	182.0	178.0	176.0	173.0
2005	177.0	175.0	173.0	174.0
2006				



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Agency Access database designed for PAS system.

**Describe how the measure is calculated**

Number of consumers served by the state-funded PAS program, which includes state-funded PAS and Brain Injury PAS.

**Describe how the target is calculated**

Based on amount of state appropriations to provide services.

**Measure #4**

Mean processing time of disability claims processes.

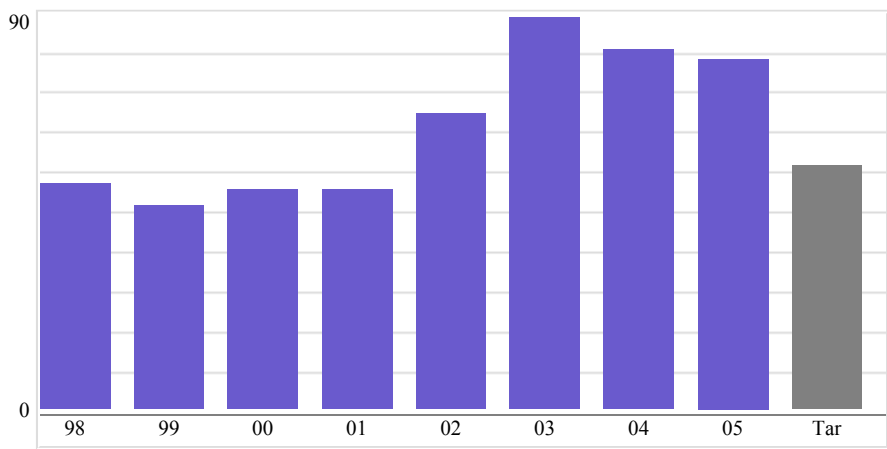
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1998	50.7
1999	45.7
2000	49.6
2001	49.6
2002	66.5
2003	88.2
2004	81.2
2005	78.7
2006	



**Explanatory Note**

Data for 2005 is a projection as this measure is for the federal fiscal year which will not end until September 30, 2005. The target is established by the Social Security Administration.

**Title or brief description of the primary data source(s)**

Disability Determination Services internal database.

**Describe how the measure is calculated**

The number of days from assignment date to clearance date is divided by the total number of claims processed.

**Describe how the target is calculated**

As established by SSA, the target is the average of the number of days for Title II initial claims

and the average of the number of days for Title XVI initial claims for the previous year.

**Measure #5**

The Disability Determination Services division will adjudicate claims at the annual rate of 245 or more cases per employee.

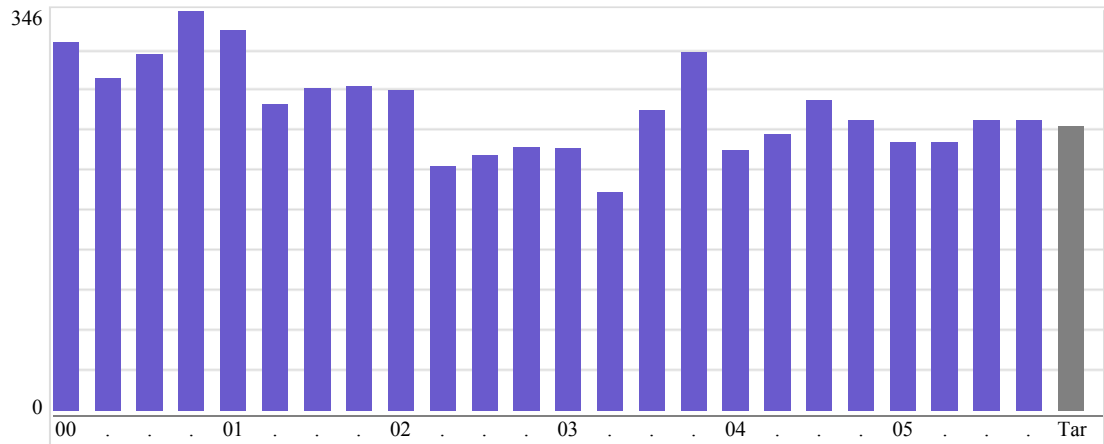
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2000	318.1	288.0	308.1	345.9
2001	328.5	264.7	277.8	280.5
2002	276.0	211.4	220.6	228.6
2003	226.9	188.6	260.0	309.4
2004	224.2	239.2	267.9	250.0
2005	232.2	231.7	250.9	250.0
2006				



**Explanatory Note**

Data for 4th quarter of 2005 is a projection as this measure is reported on the federal fiscal year which will not end until September 30, 2005.

**Title or brief description of the primary data source(s)**

Social Security Administration produced Disability Determination Services staffing and workload analysis report.

**Describe how the measure is calculated**

Calculation for the claims adjudicated per employee is based on the number of claims processed divided by the work years. Work years is equivalent to the number of employees working full time during the period.

**Describe how the target is calculated**

The target for number of claims adjudicated by employees was reduced due to the change in the

staffing mix and because 41% of the staff have less than two years experience, thus they are unable to produce at the same level as experienced employees.

**Measure #6**

Percentage of graduates from Woodrow Wilson Rehabilitation Center training programs who are employed at one year.

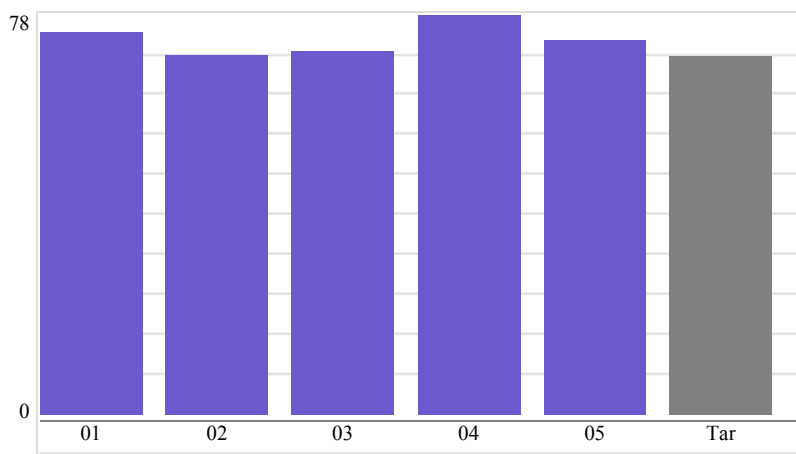
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2001	74.4
2002	70.1
2003	71.0
2004	78.0
2005	73.0
2006	



**Explanatory Note**

The data for FY 2005 is preliminary as WWRC is in the process of verifying the results of the survey.

**Title or brief description of the primary data source(s)**

WWRC training client follow up database.

**Describe how the measure is calculated**

The number of WWRC graduates contacted who are employed at one year after graduation divided by the total number of WWRC graduates contacted from training.

**Describe how the target is calculated**

Based on the trend for this variable in previous years.

**Measure #7**

Number of clients served by Woodrow Wilson Rehabilitation Center.

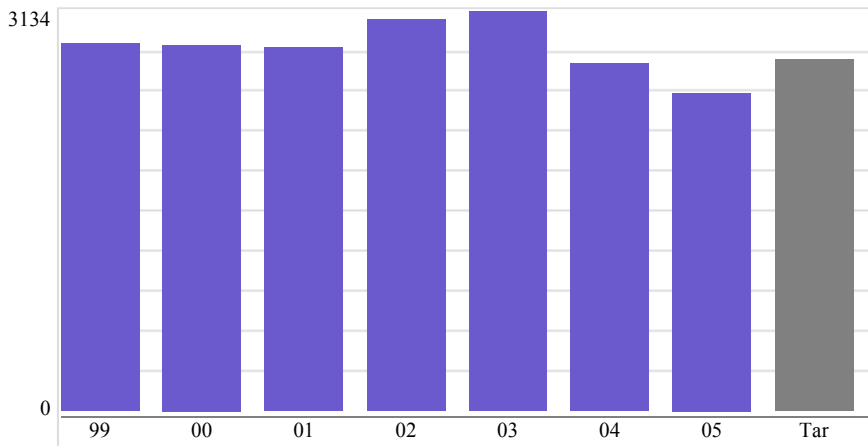
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1999	2,878.0
2000	2,863.0
2001	2,850.0
2002	3,065.0
2003	3,134.0
2004	2,727.0
2005	2,498.0
2006	



**Explanatory Note**

Performance for fiscal year 2005 was impacted by the Department of Rehabilitative Services' vocational rehabilitation program being in order of selection. The vocational rehabilitation program is a major referral source for Woodrow Wilson and during FY 05 the vocational rehabilitation program was not able to serve all eligible individuals. Therefore, many consumers were placed on a waiting list for services and could not be referred to Woodrow Wilson for services.

**Title or brief description of the primary data source(s)**

WWRC maintained database.

**Describe how the measure is calculated**

Number of episodes of care recieved by individuals in a state fiscal year. Individuals may recieve more than one episode of care in a year.

**Describe how the target is calculated**



Based on trend for this variable in previous years.

## Department of Health (601)

### Agency Head Contact Information

Name: Robert B. Stroube Phone: 804-864-7005  
Email: Robert.Stroube@vdh.virginia.gov

### Planning and Performance Contact Information

Name: Steve Sullivan Title: Budget Director  
Telephone: 804-864-7071 Email: Steve.Sullivan@vdh.virginia.gov  
Agency Website: <http://www.vdh.state.va.us>

### Mission Statement

The Virginia Department of Health is dedicated to promoting and protecting the health of Virginians.

### Objectives

1. Continue an all-hazards approach to planning for and contributing to the response in any emergency, natural or man-made, that could threaten the lives or health of Virginians by expanding and delivering comprehensive public health preparedness training to 42,000 Emergency Medical Services providers, local health department staff and other public and private partners by FY 2008.
2. Ensure the health of Virginia's children by increasing to 90 percent the percentage of 2 year-olds who have completed a set of immunizations to protect them against diphtheria, tetanus, pertussis, polio, hepatitis B, measles, mumps, rubella, chicken pox, and Haemophilus influenzae B by the end of FY 2008.
3. Ensure quality health care by maintaining an 85 percent or greater performance rate for investigating nursing home care complaints within 10 days for FY 2005 and every subsequent year through FY 2008.
4. Increase to 80,000 the cumulative number of citizens who are provided an adequate quality and quantity of drinking water as a result of loans and grants from the Drinking Water State Revolving Loan Program by the end of FY 2005.
5. By FY 2006, improve the health of Virginia's children by ensuring that 98 percent of newborns screened and found to have metabolic disorders are referred for recommended follow-up services by the age of 6 months.

### Activities

1. **Emergency Preparedness and Response:** Efforts to establish and continually evaluate and maintain up-to-date, coordinated, and functioning emergency response plans at the local, regional, and state levels by working effectively with health care providers and state and federal preparedness programs.

2. **Communicable Disease Prevention:** Efforts to protect all Virginians through the effective prevention and control of sexually transmitted diseases, tuberculosis, and other diseases or conditions.
3. **Environmental Health Hazards Protection:** Efforts to protect all Virginians by preventing and controlling food-borne illnesses in restaurants and other food service operations, by ensuring safe drinking water, and by the timely and appropriate permitting of well and septic systems.
4. **Public Health Data Collection and Analysis:** Efforts to collect and provide critical health data and vital records such as birth and death certificates in a timely and accurate manner.
5. **Family Health and Promotion, Education, and Injury Prevention:** Efforts to provide services designed to improve the health of families, with a particular focus on the health of women and children through efforts such as the federal Women, Infants, and Children (WIC) food program, maternity and well child services, and children's special health needs.
6. **Quality Oversight and Consumer Protection:** Efforts to ensure the thorough and fair investigation of nursing home and hospital care complaints through an effective licensing and certification program.
7. **Primary Health Care:** Efforts to provide affordable and accessible health care through local health departments statewide. This is especially critical in rural and other areas with less-than-adequate private health care resources to address poorer citizens' health care needs.
8. **Emergency Medical Services:** Efforts to ensure that emergency medical service personnel statewide are properly trained and licensed through various educational and training programs, and to help localities address equipment needs for emergency medical services.
9. **Medical Examiner Services:** To ensure a thorough medical investigation of murders, suicides, accidents, and unexplained deaths including providing scientific information to the courts in cases of criminal investigations or prosecutions.
10. **Oral Health:** Efforts to provide affordable and accessible dental care through the state's local health departments, including preventive services largely for children to avoid more complicated and costly dental problems.
11. **Health Leadership and Operational Support:** Efforts to effectively lead the agency's various services and programs designed to improve and maintain the health of all Virginians.

<b>Customers</b>	<b>Growth Trend</b>
Business Community	Same
Communities and Local Governments	Same
Federal Government	Increasing
Individual and Families	Increasing
State Quasi-governmental Entities	Increasing
Virginia Executive and Legislative Branches	Same

<b>Governor's and Other Initiatives</b>	<b>Status</b>
Establish and implement CDC/HRSA Bioterrorism Grant Advisory Committee and hold quarterly meetings to assist VDH emergency preparedness and response staff.	The Grant Advisory Committee in its current form was established in 2003 in accordance with CDC/HRSA grant requirements. Three meetings were held in 2003 and meetings are called as appropriate, with 2 to date in 2004 in June (Surge Planning) and October.

## Performance Measures

### Measure #1

Number of inquiries and customers assisted with Health Professional Shortage Area (HPSA) questions and the number of completed HPSA applications submitted to the Health Resources and Services Administration (HRSA) for designation as primary, mental or dental HPSA.

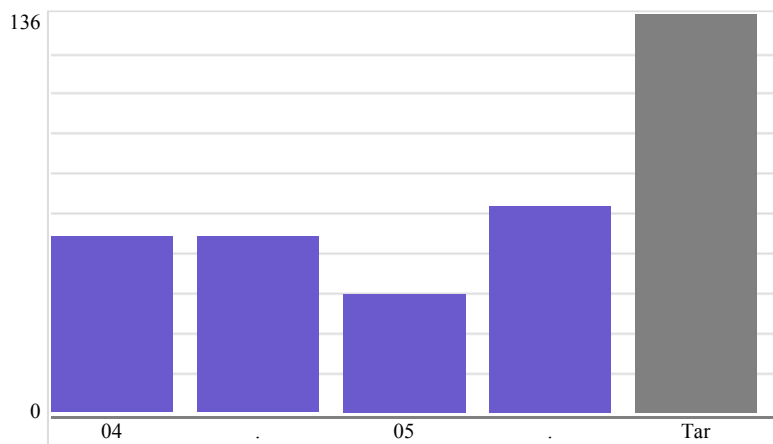
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	60	60	
2005	40	70	
2006			



### Explanatory Note

Target is for combination of inquiries/customers assisted and number of applications submitted to HRSA. A vacancy in the staff position responsible for administering the designation process during FY05 was a contributing factor in failing to achieve the target.

### Title or brief description of the primary data source(s)

VDH Office of Health Policy and Planning

### Describe how the measure is calculated

Count of customers assisted and applications submitted

### Describe how the target is calculated

12.5 increase over baseline

### Measure #2

Number of Emergency Medical Service providers, local health department staff and other public and private partners that receive comprehensive public health preparedness training from VDH.

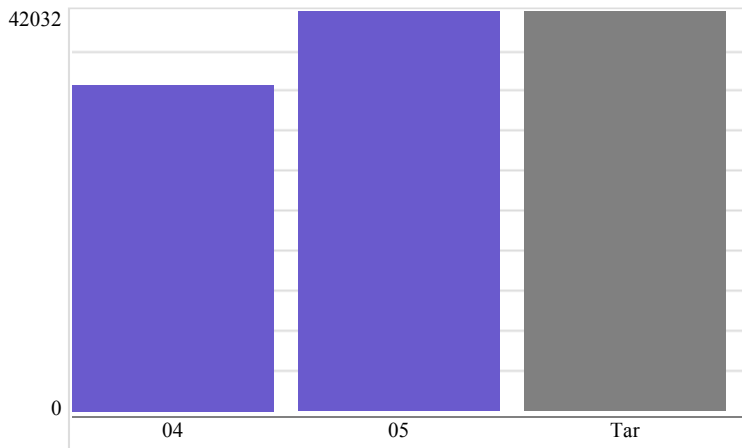
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2004	34,164	
2005	42,032	
2006		



**Explanatory Note**

Data begins in FY 2004 because this is a newly established performance measure to capture critical agency activity/objective. 2005 data is for FY05.

**Title or brief description of the primary data source(s)**

EMS training and certification program participants Emergency Preparedness & Response training participants

**Describe how the measure is calculated**

Total number of individuals receiving applicable training and/or participating in training/certification programs provided by VDH's Office of Emergency Medical Services.

**Describe how the target is calculated**

Based on anticipated growth in target populations and current plans to use federal preparedness funding to expand current public health preparedness training programs and exercises. Annual targets:

**Measure #3**

Increase the percentage of 2 year-olds who have completed a set of immunizations against various childhood illnesses.

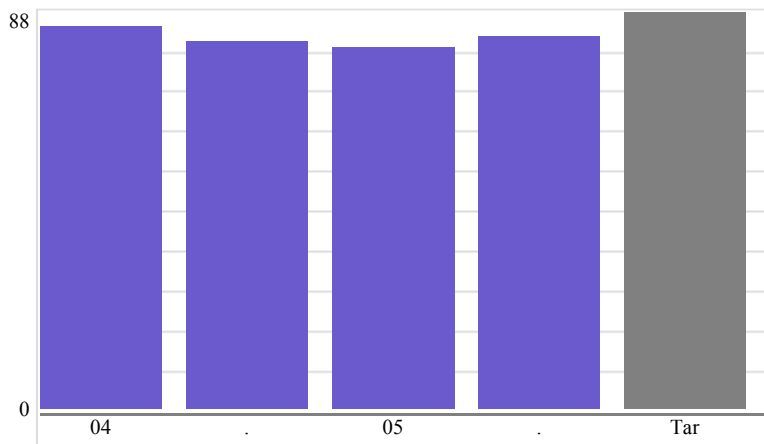
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	84.0	81.0	
2005	79.8	81.7	
2006			

**Explanatory Note**

The immunization program's long term goal for this measure is 90% by FY 2010.

**Title or brief description of the primary data source(s)**

Local health department and private provider immunization records.

**Describe how the measure is calculated**

Number of children completing the recommended set of immunizations divided by the total number of 2 year-old Virginians.

**Describe how the target is calculated**

Based on experience with chicken pox vaccination rates and other childhood immunization data. Annual percentage targets: FY05=82%; FY06=84%; FY07=86%; FY08=87%. The program's goal by FY 2010 is 90%.

**Measure #4**

Performance rate for investigating nursing home care complaints within 10 days.

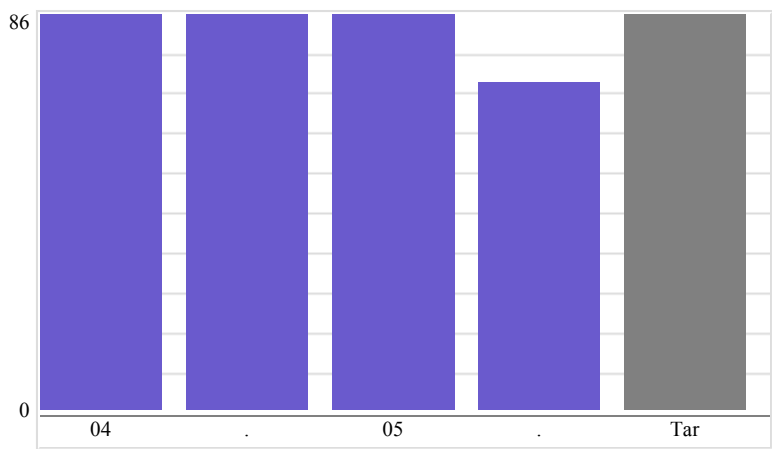
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	85.0	85.0	
2005	85.0	70.7	
2006			



**Explanatory Note**

2005 data is for first half of FY05 (as of December 31, 2004). Significant staff turnover during the second half of FY05 was a contributing factor in not achieving the target.

**Title or brief description of the primary data source(s)**

VDH's Center for Quality Health Care and Consumer Services complaint investigation records.

**Describe how the measure is calculated**

Number of investigations within 10 days, divided by the total number of nursing home care complaints.

**Describe how the target is calculated**

This target is an ongoing investigation standard established by the federal government as an expectation of continued federal Medicare funding.



**Measure #5**

Cumulative number of citizens who are provided an adequate quality and quantity of drinking water as a result of loans and grants from the Drinking Water State Revolving Loan Program.

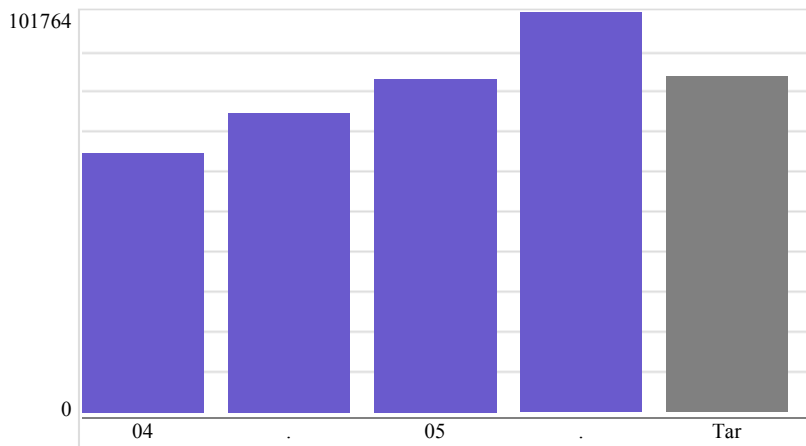
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	66,144	76,494	
2005	85,108	101,764	
2006			

**Explanatory Note**

Data are cumulative from the original implementation date of the Drinking Water State Revolving Loan Program.

**Title or brief description of the primary data source(s)**

Monthly reports from waterworks to VDH's Office of Drinking Water.

**Describe how the measure is calculated**

Total number of homes with increased access to safe, affordable drinking water multiplied by 2.8 (statewide average number of persons per home).

**Describe how the target is calculated**

Based on current program planning and recent trendline information.

**Measure #6**

Percentage of newborns screened for metabolic disorders and referred to recommended follow-up services by the age of 6 months.

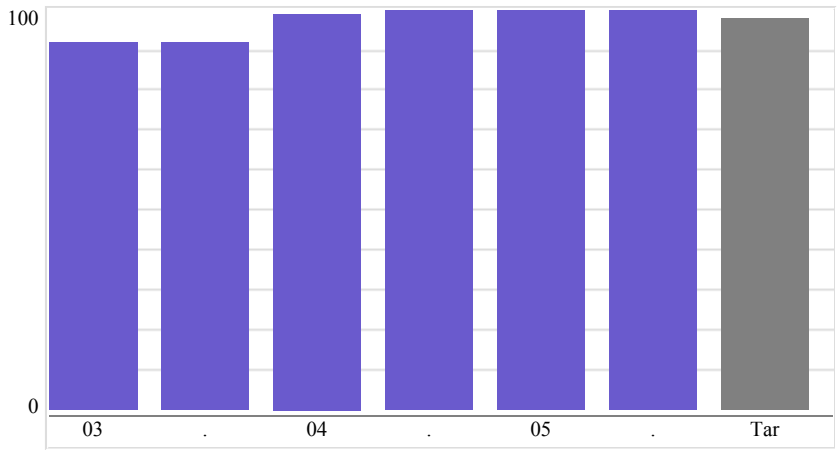
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	92	92	
2004	99	100	
2005	100	100	
2006			



**Explanatory Note**

Progress toward an optimal performance rate is anticipated - 100% compliance will never be consistently possible because of factors outside VDH's control, however VDH will strive to maintain a 98% or greater performance rate from FY 2006 on.

**Title or brief description of the primary data source(s)**

Virginia Newborn Screening Services program records and program reports.

**Describe how the measure is calculated**

Number of newborns screened and properly referred, divided by the total number of newborns screened.

**Describe how the target is calculated**

This report represents all babies born in the Commonwealth from 01/01/04 through 06/30/04, as referral data is complete for those babies by six months of age. Based on current agency planning designed to ensure that the maximum number of children are pro

**Measure #7**

Number of appropriate Emergency Preparedness and Response staff hired and trained: Baseline FY 04 - 118; Target FY 07 - 140.

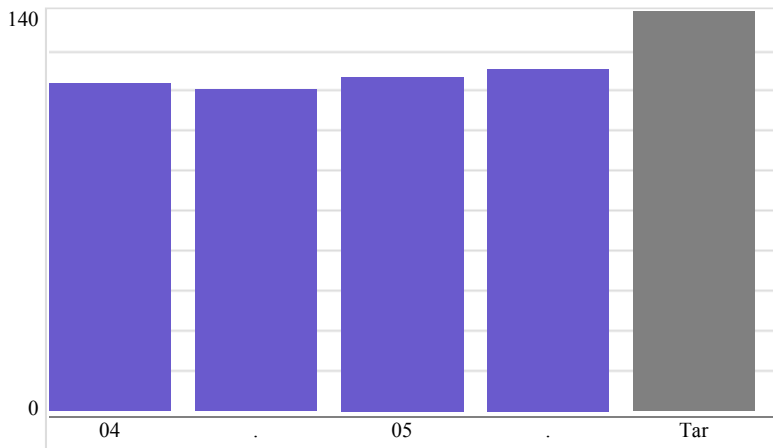
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **140** Target Date **FY 2007**

Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	115	113	
2005	117	120	
2006			



**Explanatory Note**

Thirteen additional positions are under recruitment as of July 15, 2005.

**Title or brief description of the primary data source(s)**

Weekly hiring reports from VDH Human Resources.

**Describe how the measure is calculated**

Count of currently filled positions

**Describe how the target is calculated**

Filling of 100% of MEL

**Measure #8**

Number of exercises to test emergency plans and readiness participated in by VDH Staff.  
 Baseline FY04:6, Target FY07: 6 (1 statewide and 5 local/regional exercises)

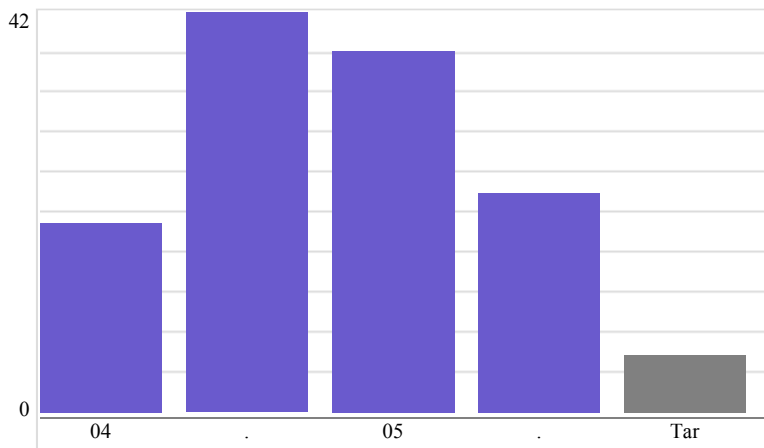
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	20	42	
2005	38	23	
2006			

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

VDH Office of Emergency Preparedness and Response

**Describe how the measure is calculated**

Number of exercises documented and reported

**Describe how the target is calculated**

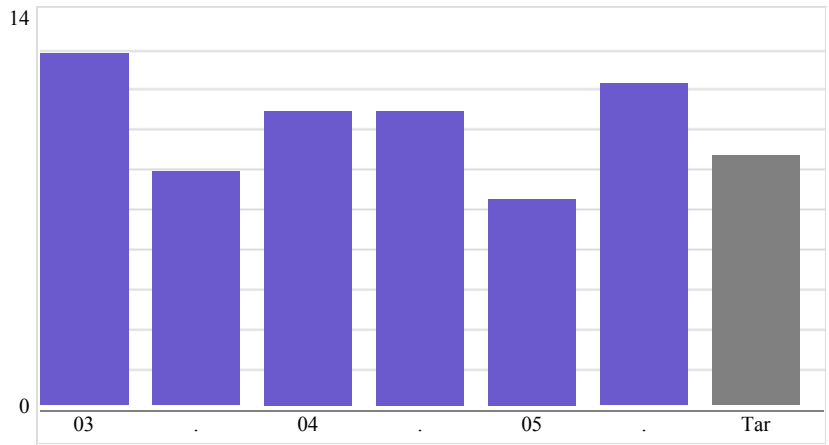
Maintenance of baseline level of performance

**Measure #9**

Number and rate of new cases of infectious syphilis in Richmond City. Baseline FY04(mean) - 20 cases (rate= 11.27/100,000); Target FY07- 17 cases (rate= 8.73/100,000)

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

	First Half	Second Half	
2003	12.3	8.2	
2004	10.3	10.3	
2005	7.2	11.3	
2006			



**Explanatory Note**

Reported as a case rate/100,000 population. Due to staff shortages, VDH was able to provide the City of Richmond with only limited investigative assistance during FY05. However, additional VDH staff have been trained and will soon be available to provide a greater level of assistance to the city.

**Title or brief description of the primary data source(s)**

STD Management Information System

**Describe how the measure is calculated**

Number of cases per 100,000 population

**Describe how the target is calculated**

Reduction of three cases from baseline

**Measure #10**

Percentage of immunizations recorded in the VISION system within 72 hours of provision of service. Baseline FY04: 76%, Target FY07: 85%.

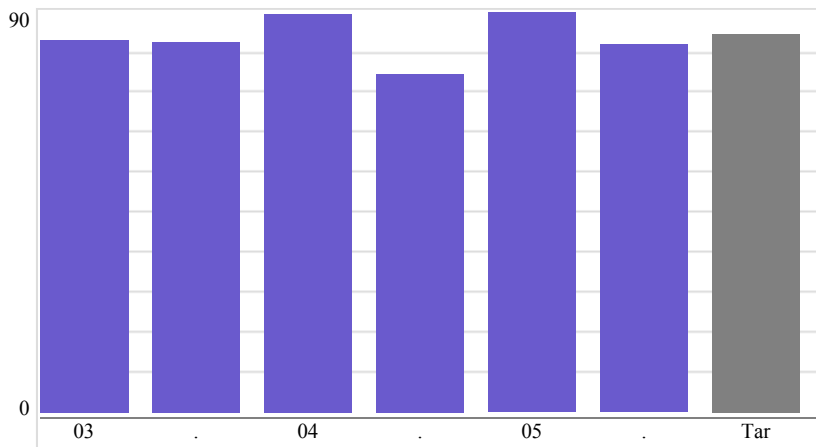
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	83.8	83.3	
2004	89.7	76.0	
2005	89.9	82.7	
2006			

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

VISION

**Describe how the measure is calculated**

Percentage

**Describe how the target is calculated**

9 percent increase over benchmark

**Measure #11**

Percentage of Vaccines for Children providers receiving annual quality assurance reviews and immunization updates. Baseline FY04: 92%, Target FY07: 95%.

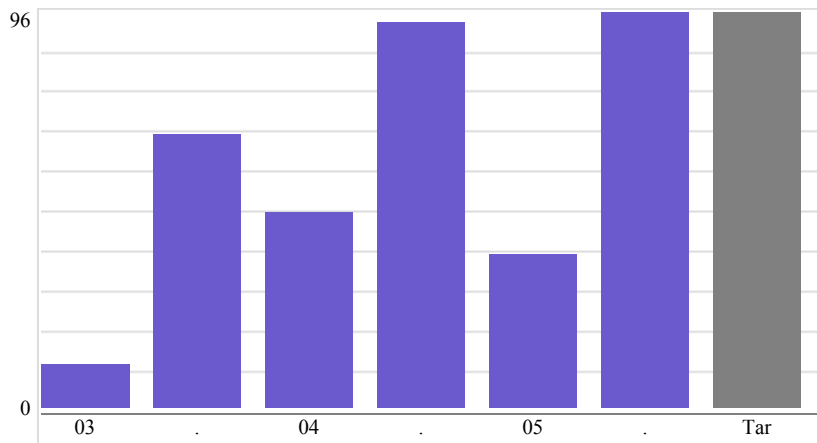
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	10.7	65.6	
2004	47.0	92.6	
2005	36.8	94.9	
2006			

**Explanatory Note**

semi-annual data are cumulative over the entire fiscal year.

**Title or brief description of the primary data source(s)**

VFC Program Data

**Describe how the measure is calculated**

Percentage of all provides

**Describe how the target is calculated**

3 percent increase over baseline

**Measure #12**

Number of clients certified as eligible for WIC services through computer-assisted assessment.  
 Baseline FY04 - 64,979; Target FY07 - 68,000

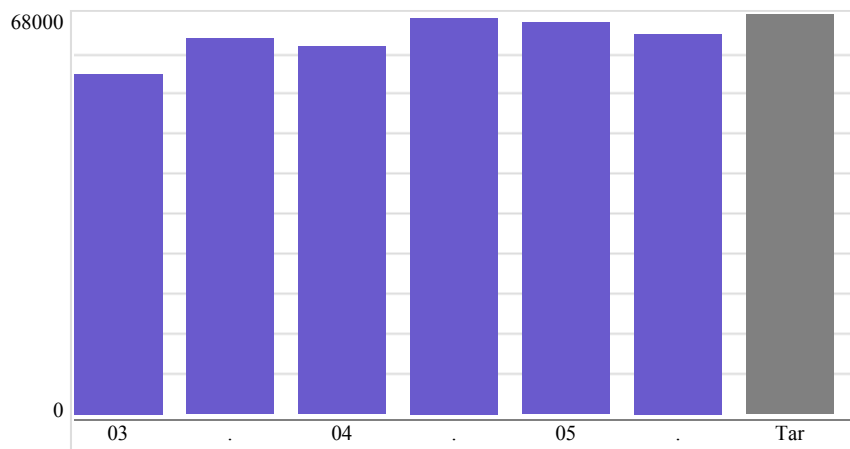
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	57,854.0	64,061.0	
2004	62,662.0	67,345.0	
2005	66,645.0	64,563.0	
2006			

**Explanatory Note**

Data refers to the number of individuals newly certified, or recertified.

**Title or brief description of the primary data source(s)**

WICNet system reports.

**Describe how the measure is calculated**

Count of certified eligible clients

**Describe how the target is calculated**

3,000+ increase over baseline



**Measure #13**

Number of children participating in the fluoride rinse program. Baseline FY04: 43,969; Target FY07: 45,500.

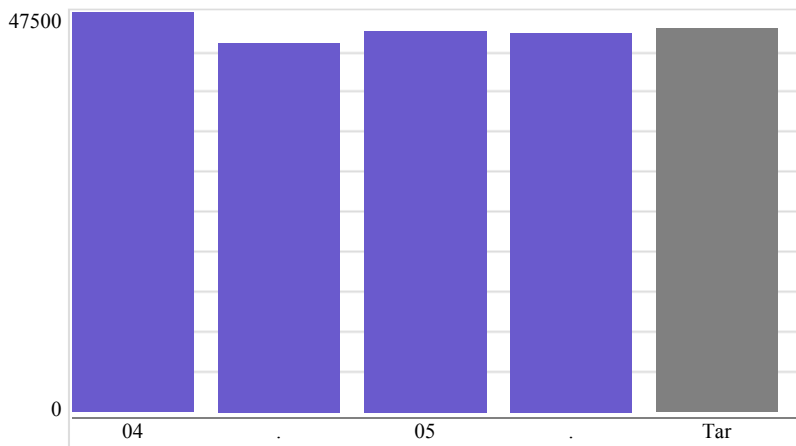
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **45,500** Target Date **FY 2007**

Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	47,500	43,976	
2005	45,313	45,117	
2006			

**Explanatory Note**

FY04 baseline encompasses students in 202 schools. FY05 target encompasses students in 205 schools. Numerous vacancies in VDH dental positions during FY05 were a contributing factor in failing to achieve the target.

**Title or brief description of the primary data source(s)**

VDH Division of Dental Health program records

**Describe how the measure is calculated**

Count of program participants

**Describe how the target is calculated**

Increase of 1,500+ over baseline

**Measure #14**

Number of protective sealants placed on children's teeth at public health clinics. Baseline FY04: 19,429; Target FY07: 21,000.

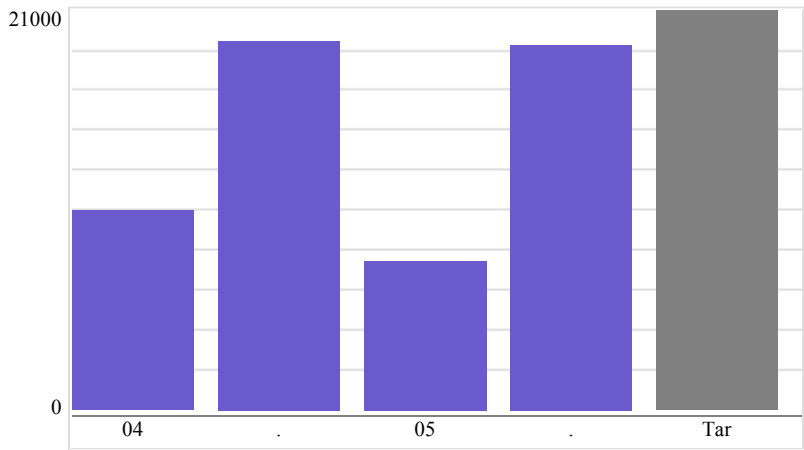
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	10,466	19,429	
2005	7,854	19,178	
2006			



**Explanatory Note**

Semi-annual data are cumulative. Numerous vacancies in VDH dental positions during FY05 were a contributing factor in failing to achieve the target.

**Title or brief description of the primary data source(s)**

VDH Division of Dental Health program records

**Describe how the measure is calculated**

Count of number of sealants applied

**Describe how the target is calculated**

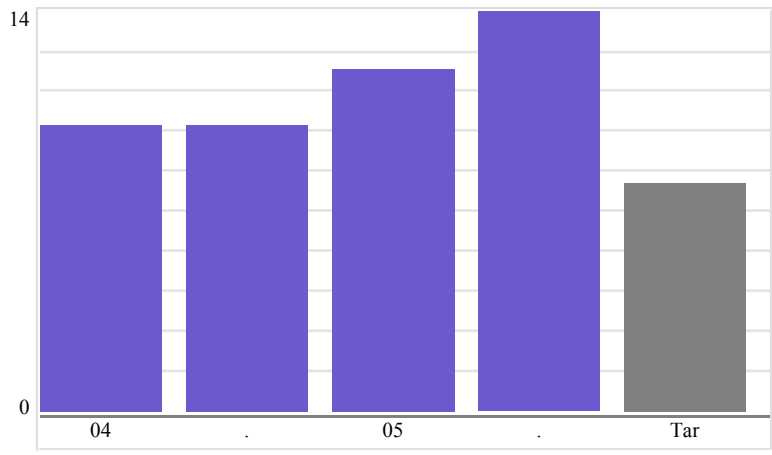
Increase of 1,500+ over the baseline

**Measure #15**

Number of stakeholder organizations (e.g., state and local agencies, medical professionals, forensic technicians, teachers) participating, either through attendance or training assistance, in the medicolegal death investigation seminars. Baseline FY04: 7 Target FY07: 8

Is this measure a number or percent **Number**  
The preferred direction of the trend **Increase**  
Target Value **8** Target Date **FY 2007**  
Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	10	10	
2005	12	14	
2006			



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Death seminar records

**Describe how the measure is calculated**

Cumulative count of number of stakeholder organizations involved

**Describe how the target is calculated**

Increase of one over the benchmark

### Measure #16

Number of citizens provided an adequate quality and quantity of drinking water as a result of loans and grants from the Drinking Water State Revolving Fund Program. Baseline FY 04 - 76,494; Target FY 07 - 85,650

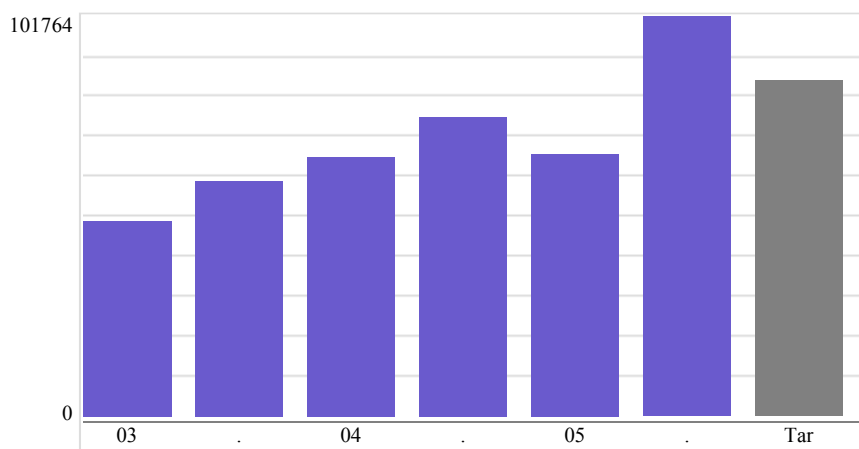
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	50,055.0	60,202.0	
2004	66,144.0	76,494.0	
2005	66,645.0	101,764.0	
2006			



#### Explanatory Note

Semi-annual data are cumulative

#### Title or brief description of the primary data source(s)

Monthly reports from waterworks to VDH.

#### Describe how the measure is calculated

Number of homes with increased access to safe, affordable drinking water are added and multiplied by 2.8 (statewide average of number of persons per home)

#### Describe how the target is calculated

Additional 9,000+ over the benchmark

**Measure #17**

Number of long term care and acute care facilities complaint investigations completed within 10-day requirement. Baseline FY04- 83%; Target FY07 - 85%

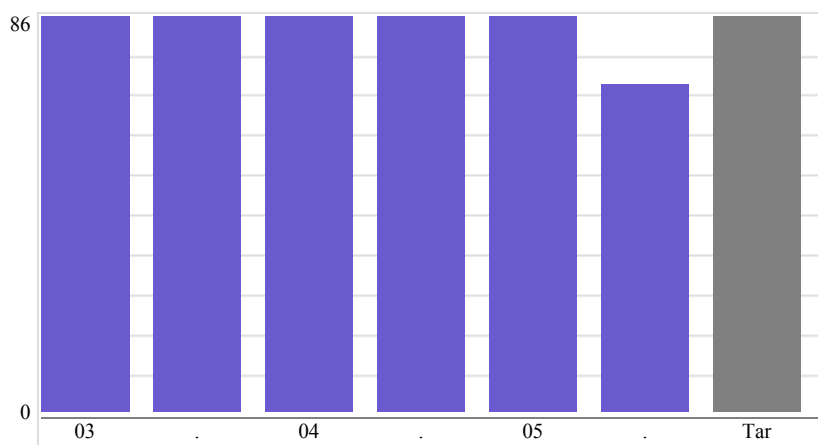
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	85.0	85.0	
2004	85.0	85.0	
2005	85.0	70.7	
2006			

**Explanatory Note**

Significant staff turnover affected VDH's ability to reach its performance target during the second half of FY05. The VDH Center for Quality Health Care Services and Consumer Protection (the Center) had a 21% staff turn over the past year. Facility surveyors must pass a federal Surveyor Minimum Qualification test prior to being able to survey independently. The U.S. Center for Medicare and Medicaid Services (CMS) requires that surveyors have several months of field experience with preceptors prior to being approved by CMS to take the test. VDH instituted an 8% salary increase to aid in retention. VDH is also starting a mentoring program, different from those staff as designated preceptors, to support even experienced field staff in effort to retain staff. VDH has hired five new surveyors who are currently in training. For nearly six months we have been down by half the number of long term care supervisors. The vacancies have severely impacted the work flow. One new supervisor has been hired and is in training. The new supervisor was hired from the outside so has a significant learning curve. The other supervisor position was vacated at the end of a vacation then three month family illness leave. That position has just closed. We have utilized wage staff and cross trained staff to address the work flow issues. In addition, the Center has had to participate in several CMS legal proceedings that take significant supervisor and surveyor time. The Center's focus has been on completing those requirements that carry a CMS fiscal penalty if not met.

**Title or brief description of the primary data source(s)**

Program complaint log.

**Describe how the measure is calculated**

Number of complaints measured within 10 days as percentage of all complaints received

**Describe how the target is calculated**

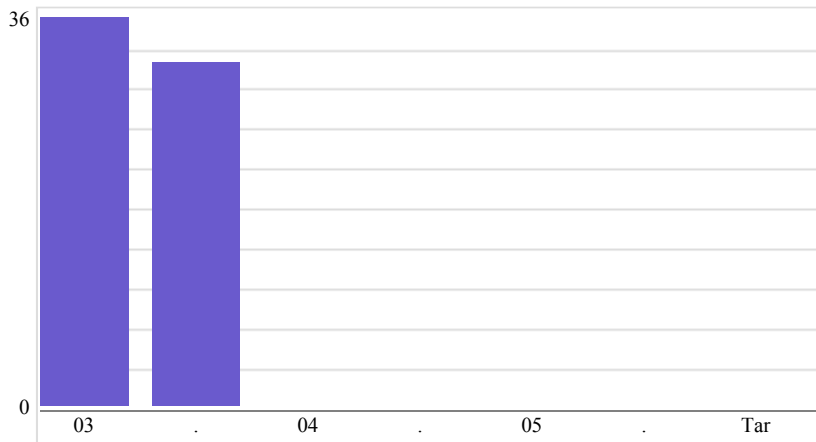
Maintenance of baseline level of performance

**Measure #18**

Number of duplicate databases. Baseline FY04 - 0; Target FY07 - 0

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

	First Half	Second Half	
2003	35.0	31.0	
2004	0.0	0.0	
2005	0.0	0.0	
2006			

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Program reports.

**Describe how the measure is calculated**

Count of number of duplicate databases

**Describe how the target is calculated**

Maintenance of benchmark level of performance

**Measure #19**

Percentage of culture positive TB cases for which drug susceptibility testing is performed.  
 Baseline CY99-CY03(mean): 94%, Target CY07: 96%

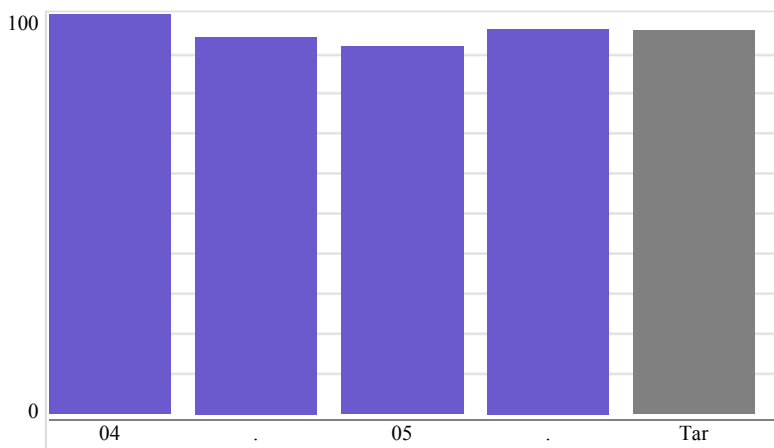
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	100.0	94.7	
2005	92.0	96.5	
2006			

**Explanatory Note**

This measure is consistent with national objectives for TB elimination, and with the provisions of the cooperative agreement between VDH and the U.S. Centers for Disease Control. It can take more than one year to complete a TB case. Since the measure is based on completed TB cases, there will always be an unavoidable lag in the timeliness of the data. For that reason, data from FY02 is used as a proxy for FY04.

**Title or brief description of the primary data source(s)**

VDH Division of Tuberculosis Control

**Describe how the measure is calculated**

Number of culture positive TB cases for which drug susceptibility testing is performed/Number of culture positive TB cases X 100

**Describe how the target is calculated**

2% increase over benchmark

**Measure #20**

Percentage of patients with active TB disease completing appropriate therapy within prescribed



timeframes. Baseline CY99-CY03(mean): 92%, Target CY07: 92%

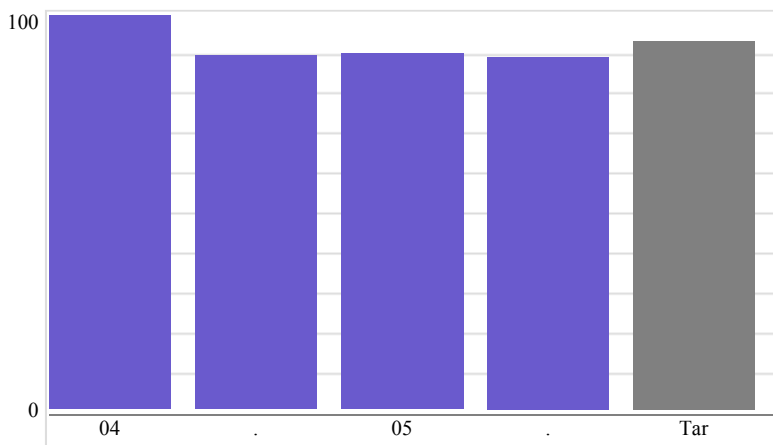
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	98.5	88.4	
2005	89.0	88.0	
2006			



**Explanatory Note**

This measure is consistent with national objectives for TB elimination, and with the provisions of the cooperative agreement between VDH and the U.S. Centers for Disease Control. It can take more than one year to complete treatment of a TB case. Since the measure is based on completed TB cases, there will always be an unavoidable lag in the timeliness of the data. For that reason, data from first half of FY02 is used as a proxy for first half of FY04.

**Title or brief description of the primary data source(s)**

VDH Division of Tuberculosis Control program records

**Describe how the measure is calculated**

Number of patients completing appropriate therapy within prescribed timeframes/Total Number of patients completing appropriate therapy X 100

**Describe how the target is calculated**

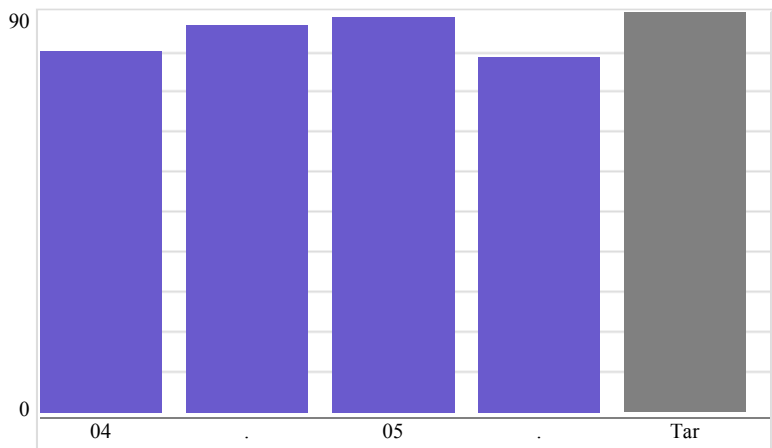
Maintenance of benchmark level of performance

**Measure #21**

Percentage of patients with active TB disease receiving Directly Observed Therapy. Baseline CY99-CY03(mean): 81%, Target CY07: 90%

Is this measure a number or percent **Percent**  
The preferred direction of the trend **Increase**  
Target Value **90** Target Date **FY 2007**  
Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	81.5	87.2	
2005	89.0	80.0	
2006			



**Explanatory Note**

This measure is consistent with national objectives for TB elimination, and with the provisions of the cooperative agreement between VDH and the U.S. Centers for Disease Control. It can take more than one year to complete a TB case. Since the measure is based on completed TB cases, there will always be an unavoidable lag in the timeliness of the data. For that reason, data from FY02 is used as a proxy for FY04.

**Title or brief description of the primary data source(s)**

VDH Division of Tuberculosis Control

**Describe how the measure is calculated**

Number of TB patients/Number of TB patients receiving directly observed therapy X 100

**Describe how the target is calculated**

9% increase over benchmark

**Measure #22**

Number of medico-legal death investigation seminars conducted. Baseline FY04: 6, Target FY07: 7.

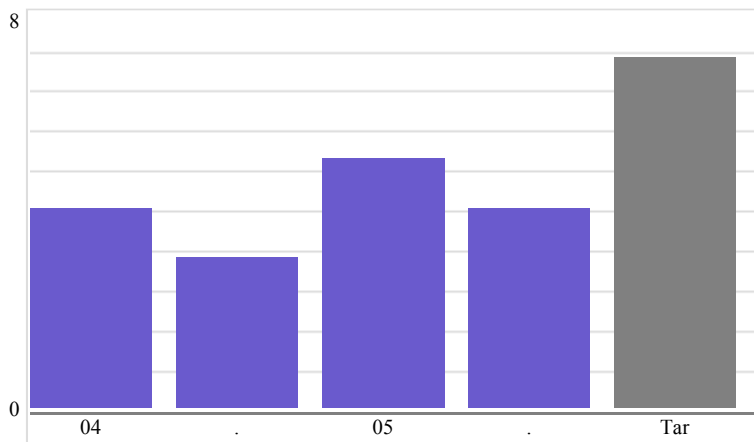
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	4	3	
2005	5	4	
2006			

**Explanatory Note**

A total of nine seminars were provided in FY05

**Title or brief description of the primary data source(s)**

Death Seminar records

**Describe how the measure is calculated**

Cumulative count of death seminars conducted

**Describe how the target is calculated**

Increase of one over the benchmark

**Measure #23**

Percentage of newborns screened for hearing loss that received at least one recommended follow-up service by 3 months of age. Baseline FY03: 74%, Target FY07: 78%.

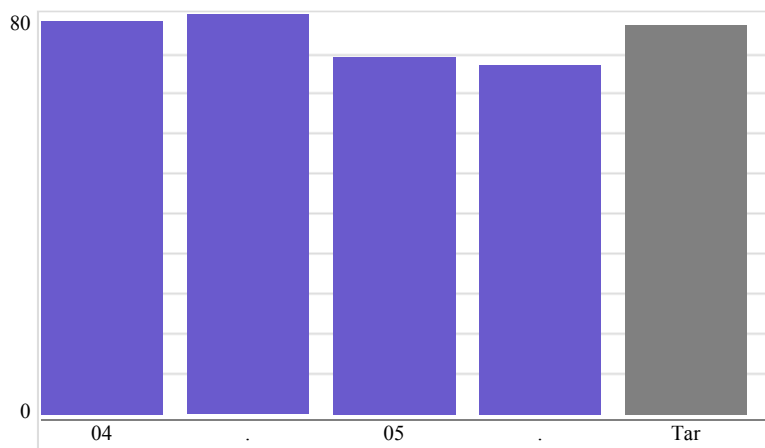
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	78.6	80.0	
2005	71.5	69.9	
2006			

**Explanatory Note**

The Virginia Early Hearing Detection and Intervention (VEHDI) Program is reporting on infants who were born between October 1, 2004 and March 31, 2005 who did not pass the newborn hearing screening. These infants would have turned 3 months of age during the 3rd and Fourth quarters of FY 05. The target for FY05 was not met. One contributing factor may be that follow-up reports from audiologists and physicians are not sent to the VDH EHDl Program in a timely fashion. Some do not send in a report unless prompted by the Follow Up Coordinator. Several steps are being taken to improve the rate, including sending a quarterly report to each audiologist and follow-up facility. This recently-initiated mailing communicates the number of reports received from the audiologist, the average number of days between the visit date and the date the report was received by VDH, and serves to remind the audiologist about the reporting requirements.

**Title or brief description of the primary data source(s)**

Virginia Early Hearing Detection and Intervention program records

**Describe how the measure is calculated**

Count of patients receiving follow-up by three months of age

**Describe how the target is calculated**

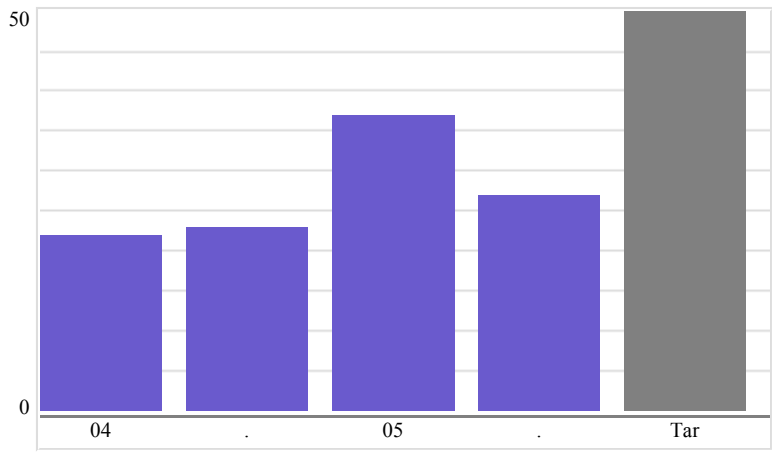
4% increase over benchmark

**Measure #24**

Number of new practitioners working in underserved areas that received assistance through VDH administered recruitment programs (i.e., scholarships, loan repayment, J-1 visa waiver, online recruitment). Baseline FY07 - 45

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

	First Half	Second Half	
2004	22	23	
2005	37	27	
2006			



**Explanatory Note**

Semi-annual data are cumulative

**Title or brief description of the primary data source(s)**

VDH Office of Health Policy and Planning

**Describe how the measure is calculated**

Count of new practitioners working in underserved areas

**Describe how the target is calculated**

Increase of five over the baseline

**Measure #25**

Number of business days required to respond to a mailed-in request for a vital record. Baseline FY04: 10; Target FY07: 5.

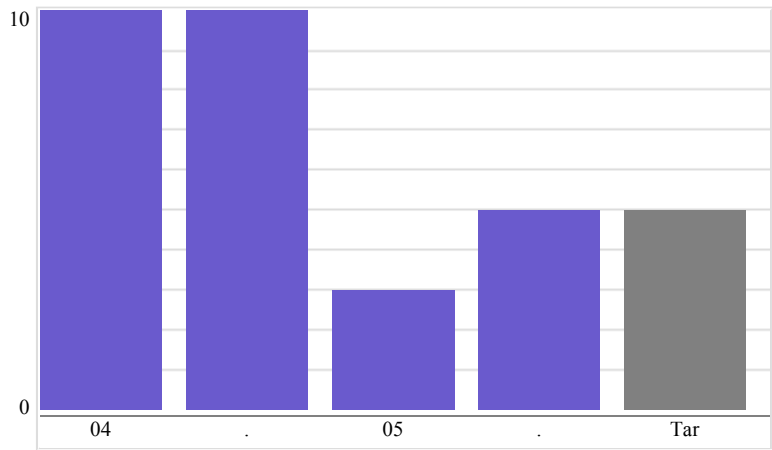
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	10	10	
2005	3	5	
2006			



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

VDH Division of Vital Records program statistics.

**Describe how the measure is calculated**

Number of days from receipt of request to delivery of vital record

**Describe how the target is calculated**

50% reduction from baseline

**Measure #26**

Percentage of EMS providers who successfully obtain initial certification. Baseline FY04: 85%, Target FY07: 85%.

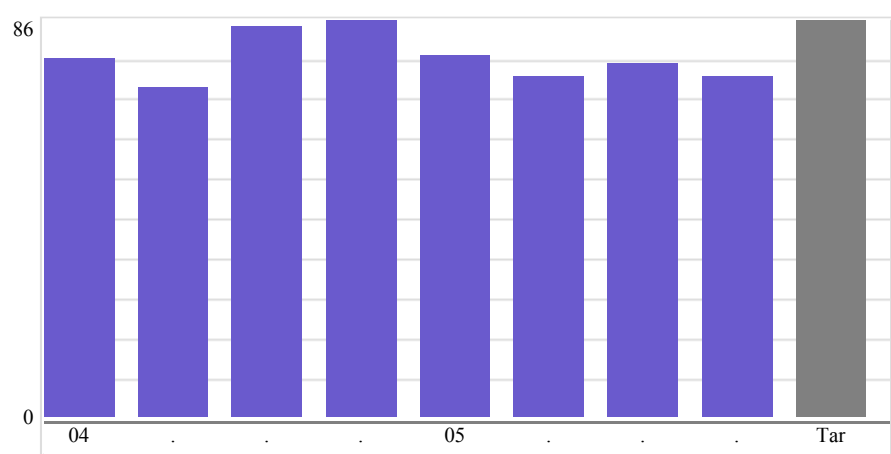
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2004	77	71	84	85	
2005	78	73	76	73	
2006					



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

VDH Office of Emergency Medical Services program records

**Describe how the measure is calculated**

Count of individuals who pass the certification exam

**Describe how the target is calculated**

Maintenance of baseline level of performance

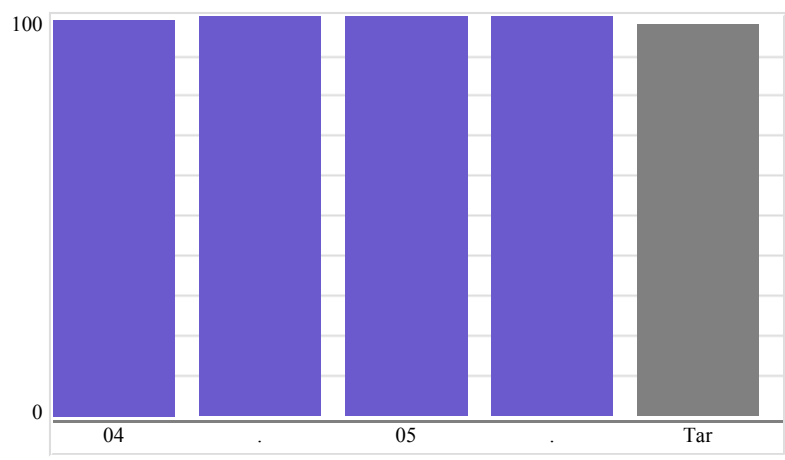


**Measure #27**

Percentage of newborns identified with a "critical result" at the time of screening for genetic diseases that were referred for recommended follow-up services by six months of age. Baseline FY04: 96%, Target FY07: 98%.

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

	First Half	Second Half	
2004	99	100	
2005	100	100	
2006			



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Virginia Newborn Screening Services program reports

**Describe how the measure is calculated**

Count of patients referred for recommended follow-up

**Describe how the target is calculated**

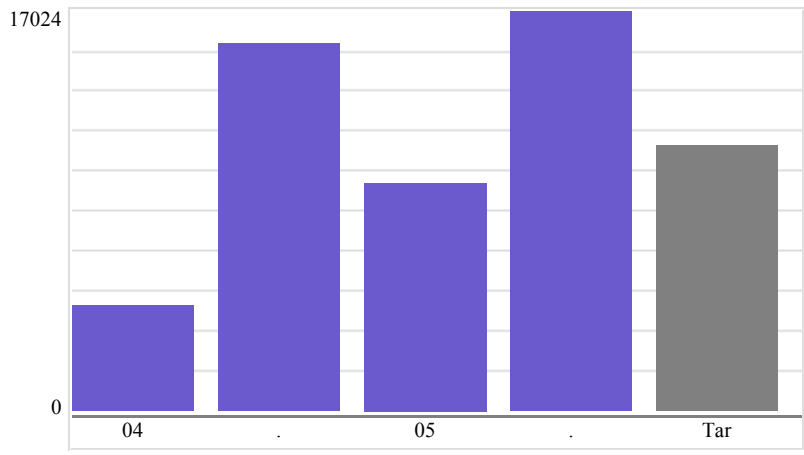
2% increase over benchmark

**Measure #28**

Number of Medicaid-eligible children identified as having been screened for elevated blood lead levels, with subsequent notification to DMAS for follow-up care. Baseline FY00-FY03(mean): 9,854; Target FY07: 11,332.

Is this measure a number or percent **Number**  
The preferred direction of the trend **Increase**  
Target Value **11,332** Target Date **FY 2007**  
Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	4,472	15,675	
2005	9,727	17,024	
2006			



**Explanatory Note**

These data are cumulative and will increase over the course of the fiscal year.

**Title or brief description of the primary data source(s)**

Virginia Department of Health, Division of Child and Adolescent Health

**Describe how the measure is calculated**

Count of the number of Medicaid children under six years of age screened and matched with the Department of Medical Assistance Services

**Describe how the target is calculated**

1,400+ increase over benchmark

**Measure #29**

Number of children screened for elevated blood lead levels within targeted areas of the State (identified by city and FIPS code). Baseline CY00-03 (mean): 3,319; Target FY07: 3,485.

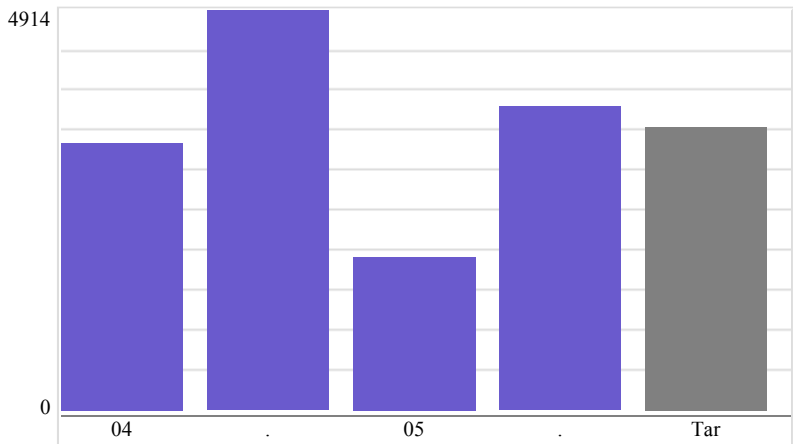
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	3,283	4,914	
2005	1,887	3,729	
2006			



**Explanatory Note**

Semi- annual data are cumulative. The two targeted areas are Richmond City and Norfolk

**Title or brief description of the primary data source(s)**

VDH Lead Safe Virginia Program

**Describe how the measure is calculated**

Count of number of children screened

**Describe how the target is calculated**

166 additional children screened

**Measure #30**

Average number of monthly visits to VDH Internet site containing results of restaurant inspections. Baseline FY04: 59,000; Target FY07: 59,000.

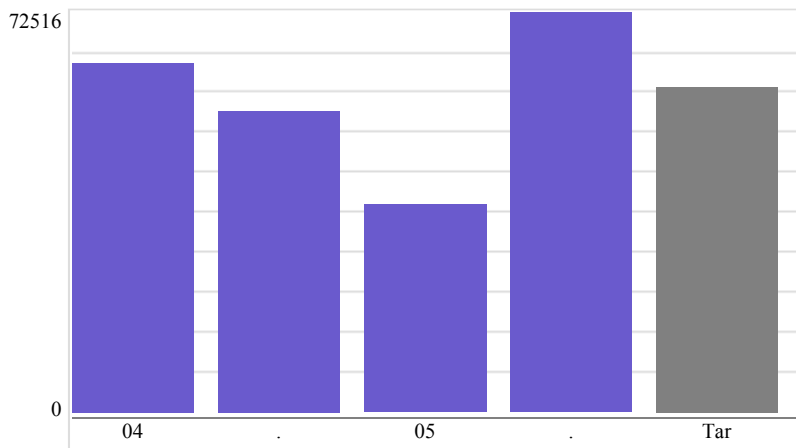
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	63,490	54,748	
2005	37,535	72,515	
2006			

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

VDH HealthSpace environmental health database

**Describe how the measure is calculated**

Total number of websites divided by six

**Describe how the target is calculated**

Maintenance of baseline level of performance

### Measure #31

Percentage of restaurant inspections conducted on time in accordance with department policy. Baseline FY04: 53%; Target FY07: 70%. [Note: Statute requires at least an annual inspection. VDH is in compliance with this statutory requirement. VDH policy is more aggressive - requiring more frequent inspections based on a restaurant's risk classification.]

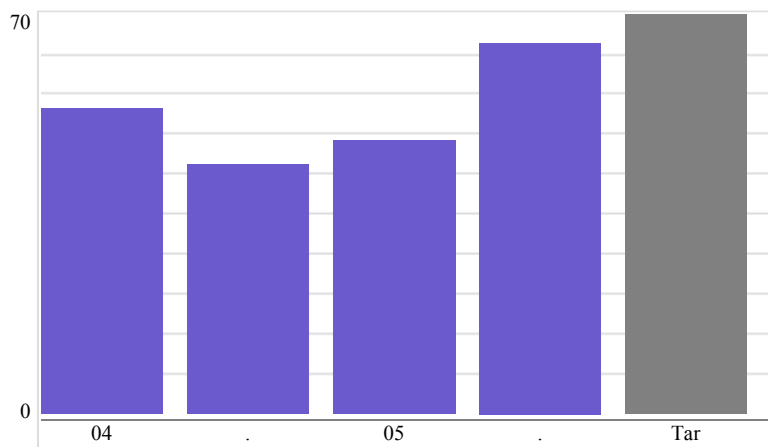
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	53.4	43.6	
2005	48.0	65.0	
2006			



### Explanatory Note

A lower target of 65% is established for those localities that experience a greater than 10% increase in the number of restaurants during FY05

### Title or brief description of the primary data source(s)

VDH HealthSpace environmental health database

### Describe how the measure is calculated

Date of actual restaurant inspection is compared to date on which inspection was due per VDH policy. Total number of on-time inspections are divided by total inspections to yield on-time percentage.

### Describe how the target is calculated

5% increase over baseline (for those localities that do not experience greater than 10 percent increase in restaurants during FY05).

### Measure #32

Number of anti-fraud training sessions held for vital records employees in collaboration with law enforcement. Baseline FY04: 1; Target FY07: 2.

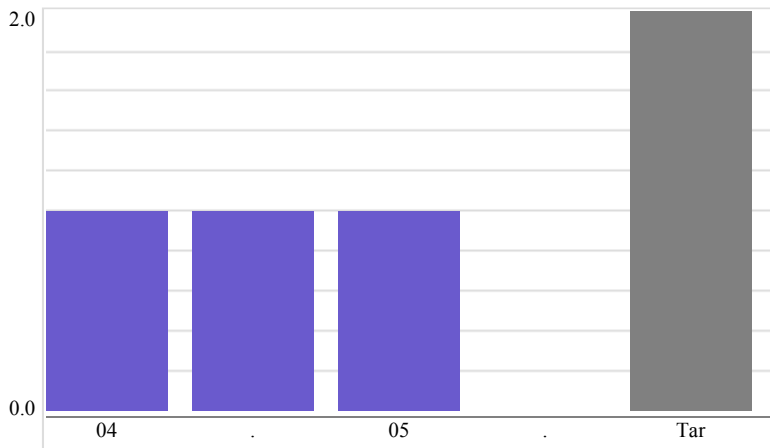
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	1	1	
2005	1	0	
2006			



**Explanatory Note**

Semi-annual data are cumulative

**Title or brief description of the primary data source(s)**

VDH Division of Vital Records program information

**Describe how the measure is calculated**

Count of number of sessions

**Describe how the target is calculated**

Doubling of baseline

**Measure #33**

Number of underserved or rural practice sites provided technical assistance with practice management, reimbursement issues, practitioner referrals, or retention initiatives. FY04 Baseline - 99, FY07 target - 140

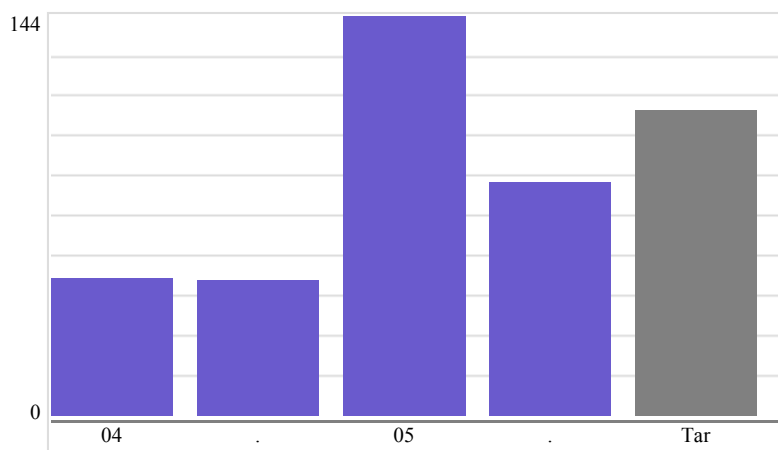
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2004	50	49	
2005	144	84	
2006			

**Explanatory Note**

Semi-annual data are cumulative

**Title or brief description of the primary data source(s)**

VDH Office of Health Policy and Planning program records

**Describe how the measure is calculated**

Count of practice sites

**Describe how the target is calculated**

Increase of 41 over the baseline

## Department of Medical Assistance Services (602)

### Agency Head Contact Information

Name: Pat Finnerty Phone: 804-786-8099  
Email: patrick.finnerty@dmas.virginia.gov

### Planning and Performance Contact Information

Name: Michael Jay Title: Budget Director  
Telephone: 804-371-6043 Email: michael.jay@dmas.virginia.gov  
Agency Website: <http://www.dmas.virginia.gov>

### Mission Statement

Provide a comprehensive system of high quality and cost effective health care services to qualifying Virginians and their families.

### Objectives

1. In an effort to improve the health status of Virginia's children, DMAS will increase the number of children enrolled in Medicaid and FAMIS to 90% of the estimated children potentially eligible for the program by September 2005; to 91% by September 2006, to 92% by September 2007, and to 93% by September 2008.
2. Increase the utilization rate of dental services for children ages 3-20 enrolled in Medicaid or FAMIS to 30% in FY 2006.
3. Increase the percentage of children enrolled in Medicaid or FAMIS who receive well child visits to 85% in FY 2006.
4. Increase by two the number of applications for All-Inclusive Care for the Elderly (PACE) programs in the Commonwealth by July 2006.

### Activities

1. **Medicaid Program Delivery:** Efforts to provide a system of high-quality comprehensive health services to qualified members of Virginia's low-income and medically-needy populations.
2. **Children's Health Insurance Program Delivery:** Efforts to provide comprehensive health benefits to Virginia's children through the age of 18 in families with incomes less than or equal to 200 percent of the federal poverty level who do not have health insurance coverage and who are ineligible for Medicaid.
3. **Administration and Support:** Efforts to provide the manpower and overall administrative support necessary to successfully operate the agency's programs.
4. **Indigent Healthcare Trust Fund Administration:** Efforts to more evenly distribute the indigent health care burden among Virginia's acute care hospitals and reimburse for part of the charity care they provide.



5. **State and Local Hospitalization Program:** Efforts to cover the care and treatment provided by hospitals, ambulatory and surgical centers, and local health department clinics to medically indigent individuals in localities throughout the Commonwealth.
6. **Health Premium Assistance for HIV-Positive Individuals:** Efforts to pay for health insurance premiums for HIV-positive individuals who are at or below 250 percent of the federal poverty guidelines and are unable to continue working, yet who are eligible to continue receiving coverage through their employer's group policy.
7. **Involuntary Mental Commitment Services:** Efforts to reimburse hospitals for the cost of caring for court-ordered detentions.
8. **Regular Assisted Living Payments for Residents of Adult Homes:** Efforts to provide assistance to eligible low-income recipients in adult care residences who require some help with daily living activities.

<b>Customers</b>	<b>Growth Trend</b>
Clients/Beneficiaries	Increasing
Business Types: Providers, Practitioners, Pharmacies, Hospitals, HMOs, Nursing Homes & Advocates	Increasing
State Agencies – Governor, General Assembly, Secretaries of Health/Human Resources & Finance	Same
State Agency Health Care Service Providers of Services Covered and Reimbursed by Medicaid or FAMIS	Same
Federal Agencies - Centers for Medicare & Medicaid Services and Social Security Administration	Same
Boards, Advisory Groups, Advocacy Groups	Same

<b>Governor's and Other Initiatives</b>	<b>Status</b>
Preferred drug list program is implemented by January 1, 2004.	The preferred drug list has been completely and successfully implemented.

## Performance Measures

### Measure #1

Percentage of Medicaid children who are fully immunized by the age of two in accordance with the American Academy of Pediatrics immunization schedule

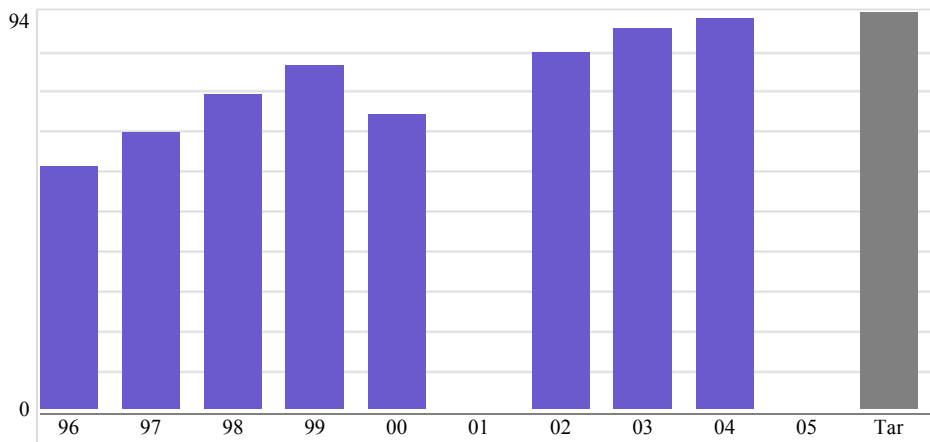
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1996	57.0
1997	64.9
1998	74.0
1999	81.0
2000	69.3
2001	
2002	83.7
2003	89.2
2004	91.5
2005	
2006	



### Explanatory Note

Low rate in 2000 due to new, more reliable calculation method and U.S. shortage of vaccines. No study performed in 2001 due to budget constraints. Data is obtained from a study of medical records and is lagged approximately 12 months.

### Title or brief description of the primary data source(s)

Primary Care Physicians medical records.

**Describe how the measure is calculated**

Percent of children in sample who have completed the 4:3:1 Series of immunizations.

**Describe how the target is calculated**

The target is based upon the performance and progress made since the initial year of the measure.

**Measure #2**

Number of children enrolled in the State Children's Health Insurance Program (S-CHIP) which includes FAMIS and the Medicaid expansion program. (in thousands)

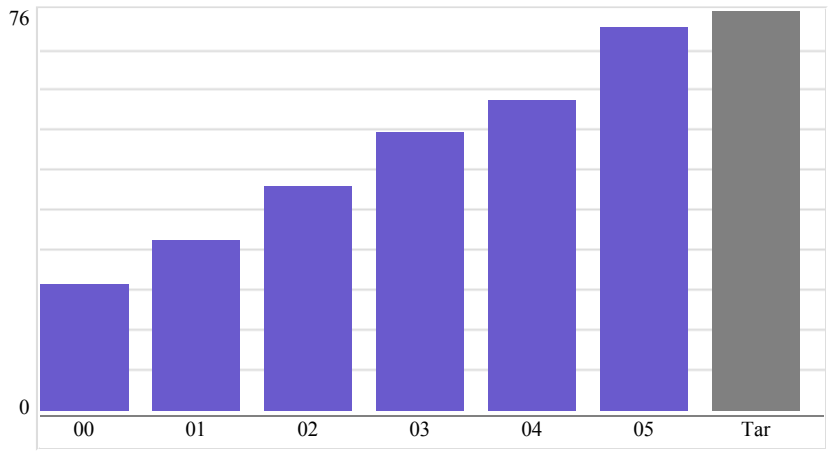
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2000	24.0
2001	32.3
2002	42.4
2003	52.8
2004	58.8
2005	73.1
2006	



**Explanatory Note**

Enrollment in the SCHIP program continues to grow at a significant rate.

**Title or brief description of the primary data source(s)**

FAMIS and Medicaid eligibility enrollment files

**Describe how the measure is calculated**

Monthly enrollment information provided off of FAMIS and Medicaid enrollment systems

**Describe how the target is calculated**

Based on an analysis of enrollment trends and analyzing outreach efforts

**Measure #3**

Utilization rate of dental services provided to children ages 3-20 who are enrolled in Medicaid or FAMIS.

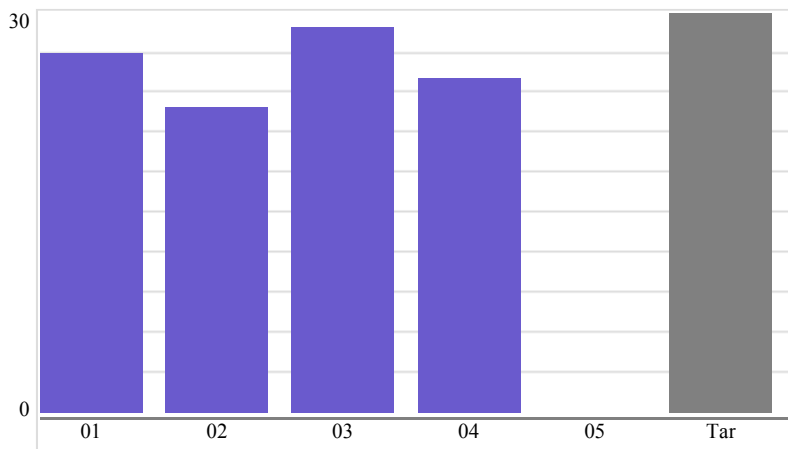
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2001	27.0
2002	23.0
2003	28.9
2004	25.1
2005	
2006	



#### Explanatory Note

DMAS is working with the Virginia Dental Association to identify access barriers and develop proactive strategies to address recent decline in utilization. FY 2005 data will be available by November 2006.

#### Title or brief description of the primary data source(s)

CMS 416 Report (EPSDT Report) derives numbers from claims data based upon the Federal Fiscal Year which accounts for the lag in reporting time.

#### Describe how the measure is calculated

The measure is calculated by dividing total number EPSDT eligibles by the number of eligibles receiving dental services for children ages 3-20. Both data elements are taken from the CMS 416 Report.

#### Describe how the target is calculated

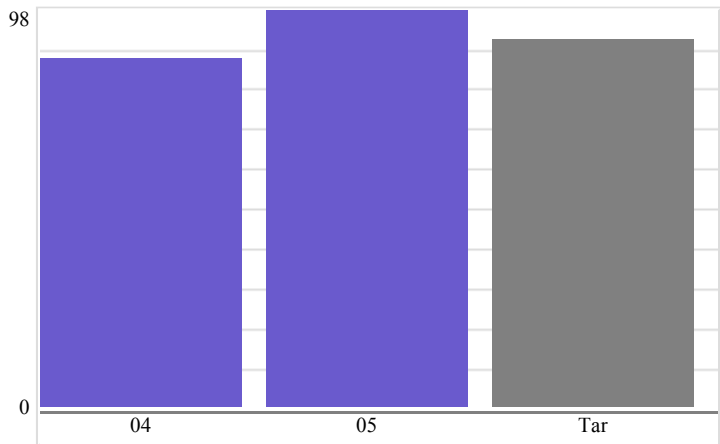
The target is based upon performance and progress made since the initial year of the measure.

**Measure #4**

Error-free payment request transactions for provider claims processing are adjudicated within 20 days of receipt by Fiscal Agent.

Is this measure a number or percent **Percent**  
The preferred direction of the trend **Increase**  
Target Value **90** Target Date **2006**  
Data Begins **2004** Collection Frequency **Annual**

Year	Measurement
2004	85.3
2005	96.9
2006	



**Explanatory Note**

The 2004 percentage is based on the last 6 months of the state fiscal year. The percent of claims adjudicated within the 20 days time frame has steadily increased as issues with the new MMIS have been resolved.

**Title or brief description of the primary data source(s)**

DMAS utilizes a Contract Project Monitoring (CPM) system that tracks this performance measure. Information is posted to the CPM database monthly using data reported by the MMIS in a standard system report.

**Describe how the measure is calculated**

The measure is calculated by dividing the number of claims that take more than 20 days to be adjudicated to by the total number of error free claims submitted during the year.

**Describe how the target is calculated**

The target is based on industry standards and expectations for contract performance.

**Measure #5**

Medicaid client eligibility verification is operational on a 7 days a week, 24 hours per day basis

for at least 97% of the time.

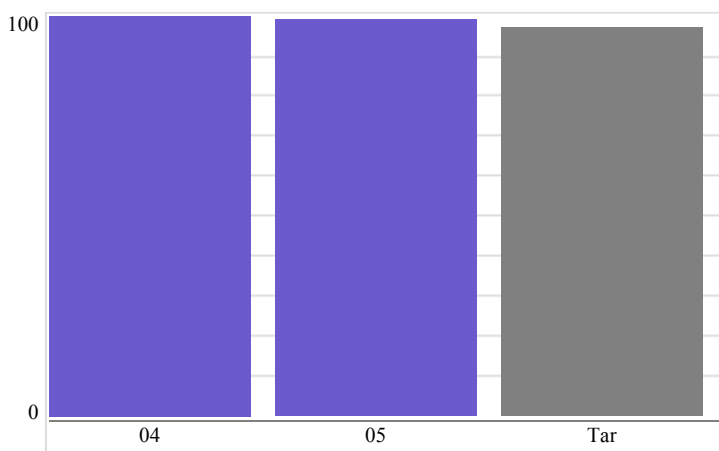
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2004	99.9	
2005	99.0	
2006		



#### Explanatory Note

The 99.9% figure reflects that this operational standard is being met.

#### Title or brief description of the primary data source(s)

DMAS uses a Contract Project Monitoring (CPM) system to track this performance measure. Information is posted to the CPM database monthly by the fiscal agent using information from system service level reports produced by their Data Center.

#### Describe how the measure is calculated

The measure is calculated by the amount of time the verification system is not operational in each month during the year.

#### Describe how the target is calculated

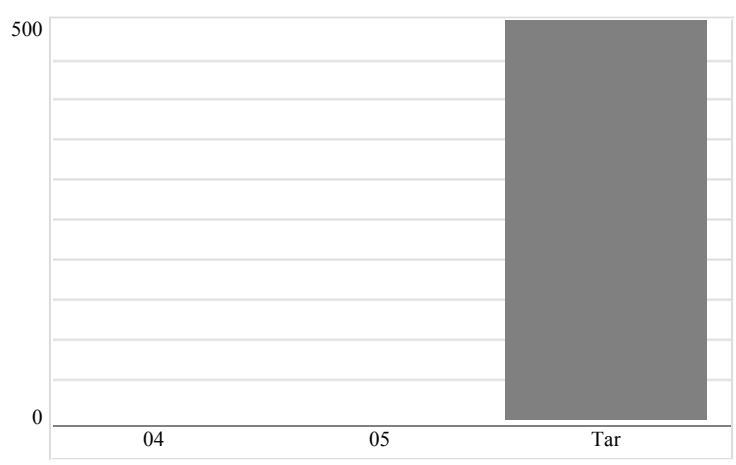
The target is based on industry standards and expectations for contract performance.

**Measure #6**

The agency shall develop two new waivers that will place 500 new elderly and disabled persons in waiver programs by the end of FY 06.

Is this measure a number or percent **Number**  
The preferred direction of the trend **Increase**  
Target Value **500** Target Date **2006**  
Data Begins **2004** Collection Frequency **Annual**

Year	Measurement	
2004	0	
2005	0	
2006		



**Explanatory Note**

The 2004 Appropriation Act authorized DMAS to implement 2 new waivers during the 2004-2006 biennium. The Mental Retardation Day Support Waiver will have 300 slots and the Alzheimer’s/Dementia Assisted Living Waiver will have 200 slots. No data will be available until FY 2006.

**Title or brief description of the primary data source(s)**

DMAS’ eligibility file which includes information on waiver enrollment.

**Describe how the measure is calculated**

The number of individuals enrolled in the new Mental Retardation Day Support Waiver and the new Alzheimer’s/Dementia Assisted Living Waiver by the end of FY 2006

**Describe how the target is calculated**

The target is based on enrollment targets included in the Appropriation Act for the new waivers.



### Agency Head Contact Information

Name: Heidi Lawyer Phone: 804-786-9369

Email: lawyerhl@vbpd.state.va.us

### Planning and Performance Contact Information

Name: Barbara Ettner Title: Director of Policy, Planning and Research

Telephone: 804-786-7333 Email: ettnerbj@vbpd.state.va.us

Agency Website:  
<http://www.vaboard.org/>

### Mission Statement

Enrich lives by providing a VOICE: Vision of communities that welcome people with disabilities Outreach to individuals, families & advocates Innovation through grant projects & sponsored programs Collaboration with providers of disability services Education of policymakers on disability issues

### Objectives

1. Beginning in 2005 and beyond, increase the number of public awareness initiatives implemented and materials developed by 10 percent annually.
2. By September 2005 and every two years thereafter, produce and deliver to the Governor, a Biennial assessment on the met and unmet needs and available resources and services for persons with developmental disabilities.
3. In 2005 and thereafter, increase Board input into and influence on state level policy and legislation through involvement in at least one new significant education, policy or advocacy initiative per year.
4. By 2005 and beyond, increase by 10 percent annually, the response rate to the competitive and innovative grant programs, which fund demonstration, research and other systems change projects.
5. By 2005, increase by 10 percent annually, the number of individuals with developmental disabilities who successfully complete Board leadership and advocacy training.

### Activities

1. **Programs and Project Grants:** Efforts to provide grant funding to conduct targeted projects designed to improve the service delivery system for people with developmental disabilities. The board funds grants in such areas of community inclusion, education, employment, housing, and transportation.
2. **Monitoring and Advocacy:** Efforts to develop programs for self-determination, advocacy, and leadership; monitor and assess service delivery systems, help design initiatives to improve the lives of persons with developmental disabilities; and advise

the Governor, executive branch agencies and legislators on policy and legislative issues affecting persons with disabilities.

3. **General Management and Administrative Services:** Efforts to provide supervision, guidance, and administrative services in direct support of the management and operations of the 40-member board mandated under federal and state law and to comply with all other federal and state mandates.

<b>Customers</b>	Growth Trend
Developmental disability advocacy & consumer organizations	
Governor, Executive Branch agencies, General Assembly	
State & Local service providers	
Taxpayers of Virginia	
Virginians with developmental disabilities and their families	

<b>Governor's and Other Initiatives</b>	<b>Status</b>
<i>No Initiatives have been entered for this agency.</i>	

## Performance Measures

### Measure #1

Percentage of advocates reporting they significantly benefited from board sponsored leadership and advocacy training programs. (FY02 Baseline = 80%; FY 03 Target = 85%)

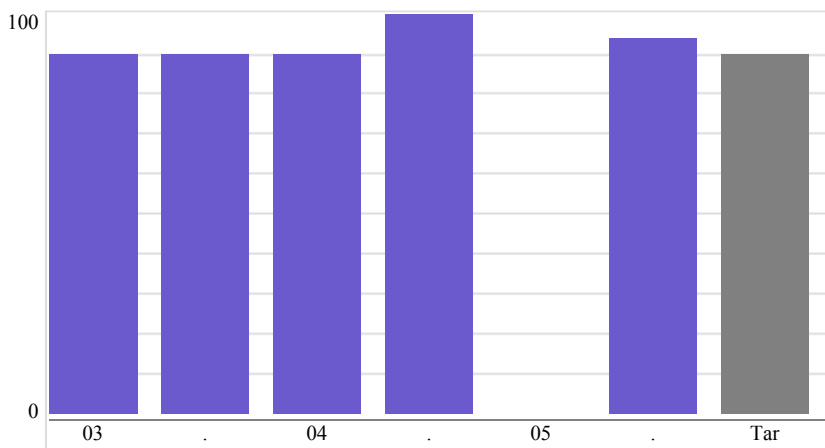
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	90.0	90.0	
2004	90.0	100.0	
2005		94.0	
2006			



### Explanatory Note

Results from Partners in Policymaking Program and YLF ended July '05. Per instructions, switched to semi annual reporting in FY 04.

### Title or brief description of the primary data source(s)

Program evaluations completed by participants in YLF and Partners sponsored programs

### Describe how the measure is calculated

Analyze results from satisfaction survey

### Describe how the target is calculated

Calculate survey results

### Measure #2

Percentage of project outcomes achieved by community inclusion grant recipients. (FY '02 Baseline = 80%; FY '04 Target = 85%)

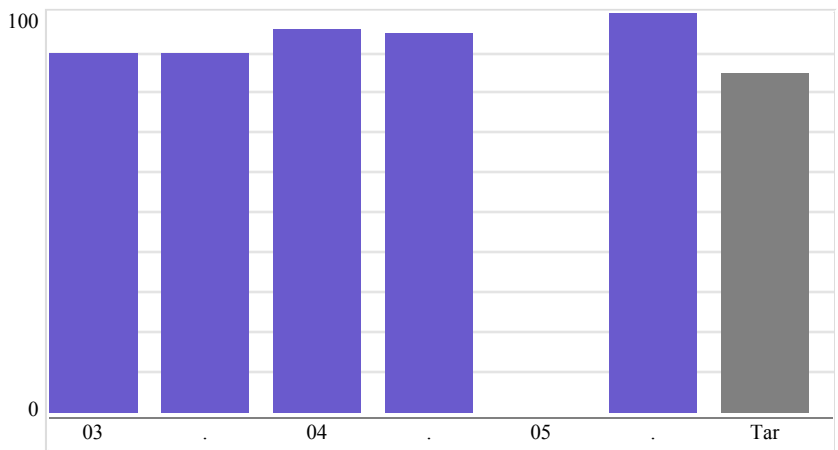
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2003	90.0	90.0	
2004	96.0	95.0	
2005		100.0	
2006			



**Explanatory Note**

No exploratory note. Per instructions, switched to semi annual reporting in FY 04.

**Title or brief description of the primary data source(s)**

Quarterly grant Outcome Status Reports submitted by grantees to Project Managers and Final Report Data in Community Inclusion Area of Emphasis

**Describe how the measure is calculated**

Grantees provide quarterly reports on objectives

**Describe how the target is calculated**

Average length of grant period

**Measure #3**

The number of disability policy recommendations presented to the Governor and Executive Branch officials. (FY '02 Baseline = 4; FY '03 Target = 6)

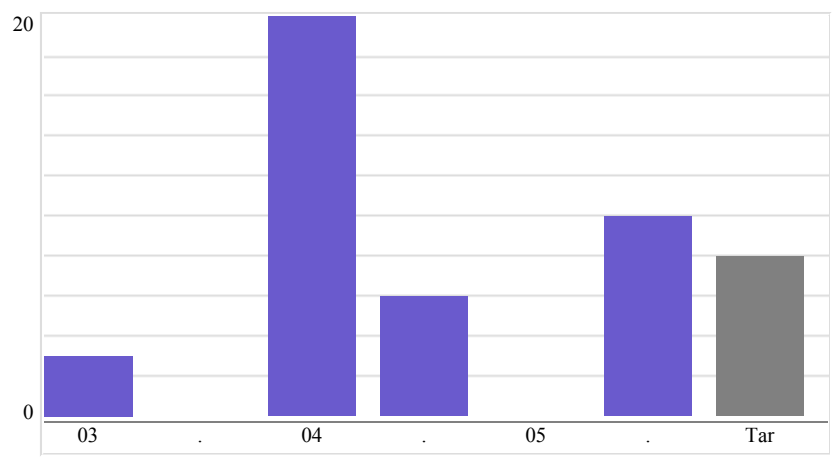
Is this measure a number or percent **Number**

The preferred direction of the trend **Increase**

Target Value **8** Target Date **9/2006**

Data Begins **2003** Collection Frequency **Semi-annual**

	First Half	Second Half	
2003	3.0	0.0	
2004	20.0	6.0	
2005		10.0	
2006			



**Explanatory Note**

APS legislation input; Olmstead implementation team activities; Disability Commission' DMH Restructuring/MR Populations subgroup; MR Waiver TAsk Force; MiCASSA Legislation and Money Follows the Person. Per instructions, switched to semi annual reporting in FY 04.

**Title or brief description of the primary data source(s)**

Studies, meetings, policy analysis, staff liaison duties

**Describe how the measure is calculated**

Track formal recommendations

**Describe how the target is calculated**

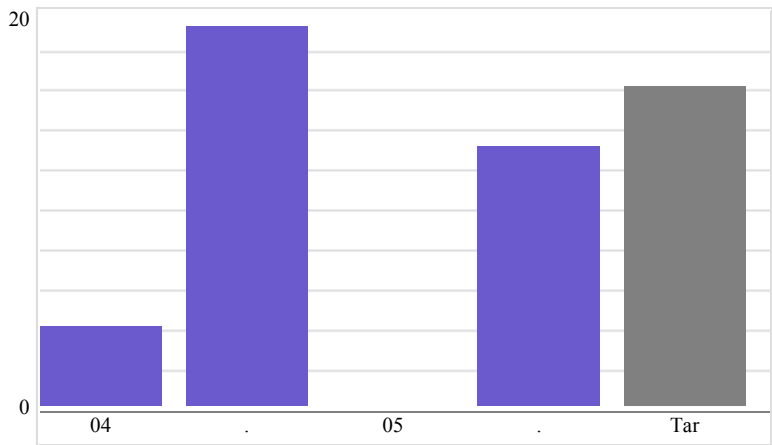
Seeking an average of 2 a quarter

**Measure #4**

The number of individuals with disabilities and family members forwarded to the Governor for appointment to boards and commissions throughout the state (FY '02 Baseline = 8; FY '03 Target = 16).

Is this measure a number or percent **Number**  
The preferred direction of the trend **Maintain**  
Target Value **16** Target Date **6/2006**  
Data Begins **2004** Collection Frequency **Semi-annual**

	First Half	Second Half	
2004	4	19	
2005		13	
2006			



**Explanatory Note**

Purpose is to solicit people to serve on the board and encourage participation. Per instructions, switched to semi annual reporting in FY 04.

**Title or brief description of the primary data source(s)**

Board records and tracking

**Describe how the measure is calculated**

Count applications

**Describe how the target is calculated**

Seeking to increase outreach

## Department for the Blind and Vision Impaired (702)

### Agency Head Contact Information

Name: Joseph A. Bowman Phone: 804-371-3145

Email: bowmanja@dbvi.state.va.us

### Planning and Performance Contact Information

Name: William Pega Title: Special Assistant to the Commissioner

Telephone: 804-371-3110 Email: pegawj@dbvi.state.va.us

Agency Website:  
<http://www.vdbvi.org>

### Mission Statement

The mission of the Department for the Blind and Vision Impaired is to empower blind, visually impaired and deafblind individuals to achieve their maximum level of employment, education, and personal independence.

### Objectives

1. Increase to 55.1% in FY 2005, 56.8% in FY 2006, 58.4% in FY 2007, and 60% in FY 2008 the percent of blind individuals who, having successfully completed their vocational rehabilitation programs, enter full-time employment (35+ hours per week).
2. Increase to 89% in FY 2005, 90% in FY 2006, 91% in FY 2007 and 92% in FY 2008 the percent of blind and visually impaired seniors who, upon completion of their training programs, achieve a majority of their independent living goals.
3. Increase to 82% in FY 2005, 84% in FY 2006, 86% in FY 2007 and 90% in FY 2008 the percent of blind and visually impaired students that receive their Braille and large print textbooks on time.

### Activities

1. **Rehabilitation Services:** Efforts to enable blind individuals to acquire the special skills they need to enter, re-enter or maintain employment and live independently.
2. **Education Services:** Efforts to enable blind and visually impaired students to fully participate in public or private schools; to provide infant developmental programs; and to provide braille, large-print and recorded textbooks and library materials to all visually impaired Virginians.
3. **Business Enterprises:** Efforts to create and provide job opportunities for blind and visually impaired individuals.
4. **Administration and Support Services:** Efforts to provide leadership, direction, and administrative support to the agency's rehabilitation, education, and business enterprises programs.
5. **Regional Office Support and Administration:** Efforts to provide direction and

supervision to staff who provide direct customer services.

<b>Customers</b>	<b>Growth Trend</b>
Blind adults who want to live independently and their families	Increasing
Blind or deafblind people who want to work and be independent	Increasing
Employers, service providers and consumer organizations that advocate for the blind.	Increasing
Infants, children and youth who are blind, vision impaired or deafblind, their families and teachers	Increasing
Licensed Blind Vendors.	Increasing
Retail customers who purchase VIB and vending stand products.	Increasing

<b>Governor's and Other Initiatives</b>	<b>Status</b>
<i>No Initiatives have been entered for this agency.</i>	



## Performance Measures

### Measure #1

Achieve the established federal Rehabilitation Services Administration performance standard of .59 as the two-year ratio between the average hourly earning of all individuals who exit the DBVI vocational rehabilitation program in employment to the state's average hourly earning for all individuals in the state who are employed. Baseline: FFY 02 .596; FFY 03 -.596

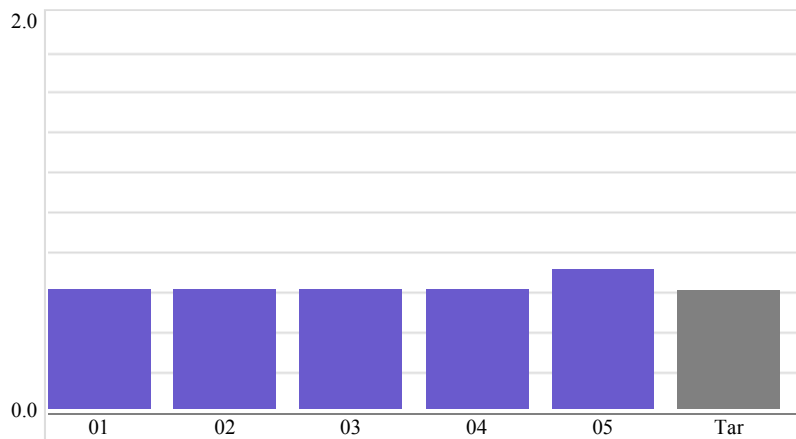
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2001	0.6
2002	0.6
2003	0.6
2004	0.6
2005	0.7
2006	



### Explanatory Note

This data is collected on a FFY basis. FFY 2005 - .680 FFY 2004 - .579 FFY 2003 - .596 FFY 2002 -.596 FFY 2001 - .572

### Title or brief description of the primary data source(s)

Rehabilitation Services Administration Annual Performance Standards and Indicators report

### Describe how the measure is calculated

Divide average hourly earnings for all blind individuals who exited the VR program in employment in integrated employment with earnings equivalent to at least the minimum wage by average hourly earnings for all individuals in the State who are employed.

**Describe how the target is calculated**

The target is established by the Rehabilitation Services Administration for state agencies for the blind and is calculated per the measure calculation described above.

**Measure #2**

Place 2% more blind people in jobs in Federal Fiscal Year 2005 (10/1/04 to 9/30/05) over FFY 2004 (10/1/03 to 9/30/04). Baseline: FFY 04 - 216

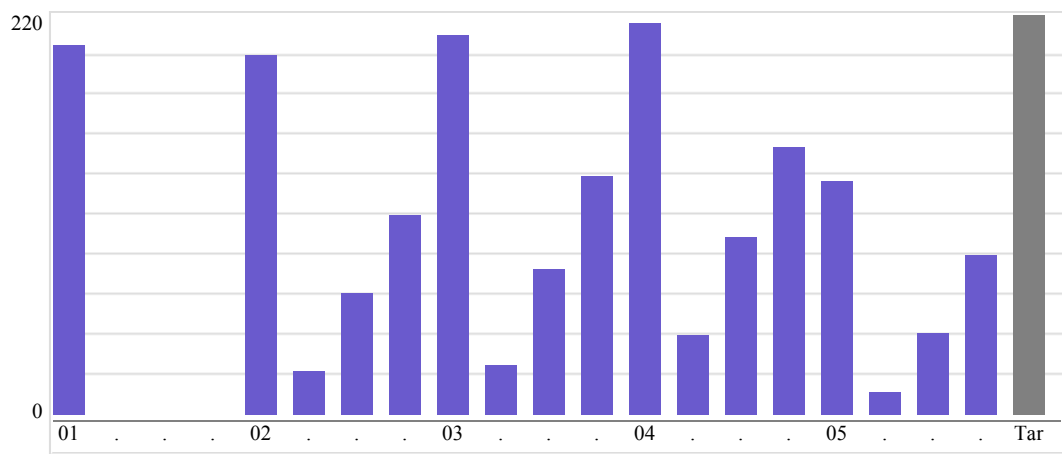
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2001	203.0	0.0	0.0	0.0
2002	198.0	24.0	67.0	110.0
2003	209.0	28.0	80.0	131.0
2004	216.0	44.0	98.0	147.0
2005	129.0	12.0	45.0	88.0
2006				



**Explanatory Note**

Performance this year has been negatively impacted by Order of Selection (insufficient federal funds to serve all eligible applicants for vocational rehabilitation services.) Quarterly data not available prior to FFY 2002. This data is collected on a FFY basis. Q2 is FFY Q1; Q3 is FFY Q2, etc. Q1 is FFY Q4 or federal Y-T-D total data.

**Title or brief description of the primary data source(s)**

Report ID: SSBRR367 VR Closure Report

**Describe how the measure is calculated**

Calculate the percentage change from previous year.

**Describe how the target is calculated**

Add 2% increase (rounded) to previous year's total of people placed in jobs.

**Measure #3**

Maintain the number of seniors (age 55+) that receive training from DBVI who successfully complete individualized programs in skills of independent living. Baseline: FFY 03 - 949

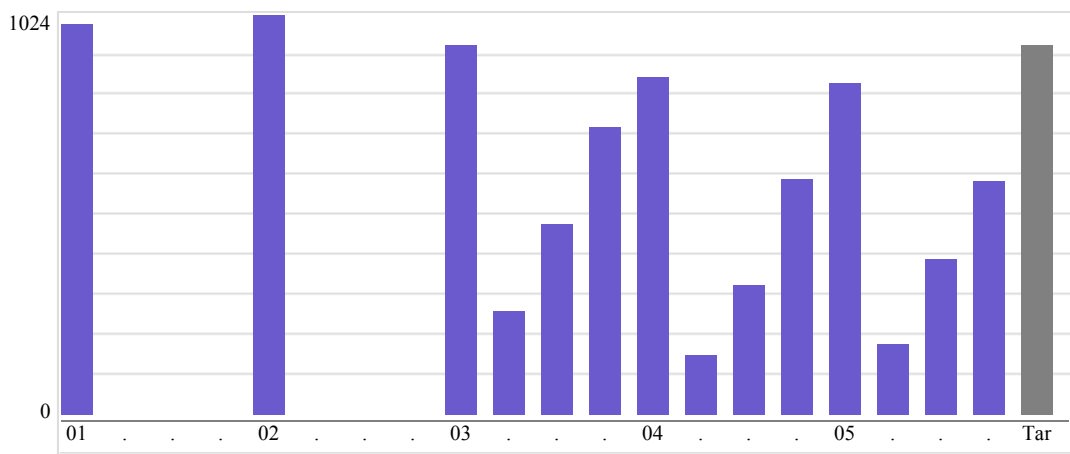
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2001	996.0	0.0	0.0	0.0
2002	1,023.0	0.0	0.0	0.0
2003	949.0	268.0	484.0	738.0
2004	865.0	154.0	332.0	604.0
2005	850.0	179.0	398.0	599.0
2006				



**Explanatory Note**

Quarterly data is not available prior to FY 2003. Funding for services to age 55 and older was reduced significantly during budget reductions. Target is to maintain level of individuals achieving their goals even though there is less funding for services. This data is collected on a FFY basis. Q2 is FFY Q1; Q3 is FFY Q2, etc. Q1 is FFY Q4 or federal Y-T-D total data.

**Title or brief description of the primary data source(s)**

SSBRR70B Annual Report on Independent Living Services for Older Individuals who are Blind

**Describe how the measure is calculated**

Total count of all blind individuals age 55 and over who received services from the department in federal fiscal year 2004 and who successfully complete their goals for independent living.

**Describe how the target is calculated**

Maintain federal fiscal year 2003 level of successful closures.

**Measure #4**

Maintain customer satisfaction rating at 90 each year for those consumers who exit the VR program

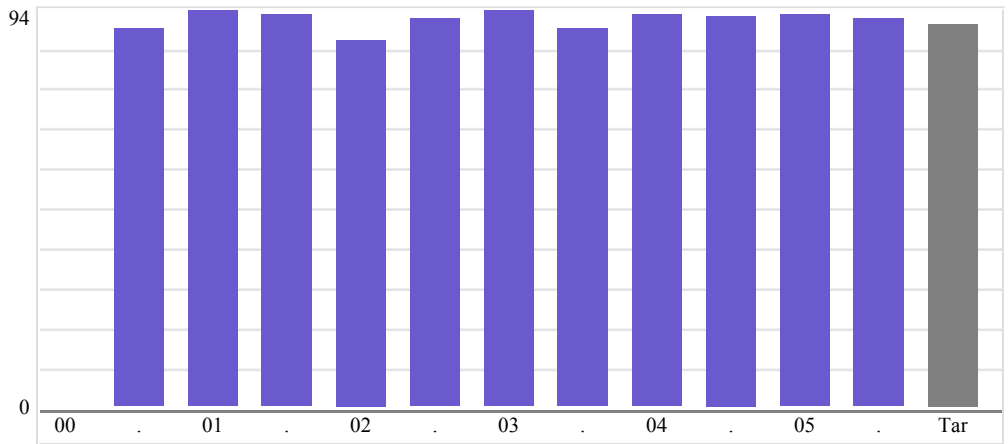
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	First Half	Second Half	
2000	0.0	89.0	
2001	93.0	92.0	
2002	86.0	91.0	
2003	93.0	89.0	
2004	92.0	91.5	
2005	92.0	91.0	
2006			



**Explanatory Note**

First Half data not available prior to FY 2001.

**Title or brief description of the primary data source(s)**

Semi-annual consumer satisfaction survey of vocational rehabilitation services.

**Describe how the measure is calculated**

The average overall satisfaction rating (based on a 100 point scale) of all consumers who exit the program and respond to the Consumer Satisfaction Survey of Vocational Rehabilitation Services.

**Describe how the target is calculated**

Our agency standard for overall consumer satisfaction in our vocational rehabilitation program is 90 based on a 100 point scale.

## Department of Mental Health, Mental Retardation, and Substance Abuse Services (720)

### Planning and Performance Contact Information

Name: Charline Davidson Title: Director, Office of Planning and Development

Telephone: 804-786-7357 Email: cdavidson@dmhmrsas.state.va.us

Agency Website:  
<http://www.dmhmrsas.state.va.us/>

### Mission Statement

Provide leadership and service to improve our system of quality treatment, habilitation and prevention services for people and their families whose lives are affected by mental illness, mental retardation or substance use disorders and to promote dignity, choice, recovery and community participation

### Objectives

1. Reduce by 10 percent the average daily census of state mental health and mental retardation facilities through improved utilization of services system resources by July 2008.
2. Increase to 65 percent the number of persons referred to a CSB for treatment who receive face-to-face services within 7 days of discharge from a state MH facility or a local hospital that is participating in a regional acute care project by July 2008.
3. Reduce by 35 percent the percent of persons who currently need but are not receiving MR Home and Community-Based Waiver services by July 2006.
4. Decrease by 10 percent the rate (hours of restraint as a percent of inpatient hours) of behavioral restraint use in state mental health and mental retardation facilities by July 2006.

### Activities

1. **Community Emergency Services:** Efforts to provide around-the-clock community crisis intervention services to individuals in crisis, including referral assistance, emergency services, home visits, and jail services.
2. **Inpatient Mental Health Services:** Efforts to provide intensive psychiatric services in state mental health facilities, including acute stabilization and longer-term rehabilitation (civil and forensic), and specialized adult, geriatric, and child or adolescent services.
3. **Inpatient Mental Retardation Services:** Efforts to provide intermediate care and skilled nursing services to individuals in state training centers, including residential care and training in language, self-care, independent living, socialization, academic skills, and motor development.
4. **Medical Services:** Efforts to provide medical care needed by patients or residents of state facilities, either at the state facility or in community hospitals.

5. **Community Local Inpatient Services:** Efforts to provide intensive short-term psychiatric services and medical detoxification services purchased by community services boards as an alternative to hospitalization in a state mental health facility.
6. **Community Ambulatory Services:** Efforts to provide community case management, outpatient, day support, early intervention, and prevention services.
7. **Community Residential Services:** Efforts to provide short- and long-term overnight supervision or supportive services in the community, including residential treatment centers, group homes, supervised apartments, assisted living, and family support.
8. **Inpatient Behavioral Rehabilitation Services:** Efforts to provide treatment services in a secure state facility to individuals who are civilly committed as sexually violent predators.
9. **Ancillary Services:** Efforts to provide state facility medical support, medications, and other ancillary patient or resident services.
10. **Facility Support Services:** Efforts to provide nutritious meals and dietary services, physical plant, laundry, and housekeeping services in state facilities.
11. **Facility Administration:** Efforts to carry out the administrative functions needed to operate state mental health and mental retardation facilities.
12. **System Development and Management:** Efforts to carry out the services system strategic direction, leadership, oversight, administrative, and management responsibilities of the department's central office.

<b>Customers</b>	<b>Growth Trend</b>
Individuals who are in crisis, present a danger to self or others, or cannot care for themselves due to a mental illness or substance use disorder	Increasing
Adults who have a serious mental illness and children and adolescents who have or are at risk of developing a serious emotional disturbance.	Increasing
Individuals who have mental retardation or a cognitive developmental delay.	Increasing
Individuals who have or are at risk of developing a substance use disorder.	Increasing
Individuals who are committed to the DMHMRSAS as a sexually violent predator.	Increasing

<b>Governor's and Other Initiatives</b>	<b>Status</b>
Specific performance measures to determine increased use of local and regional community-based services through reinvestment by July 1, 2003.	Accomplished. Three measures adopted: (i) new community services - 4 in place; (ii) expanded community services - 8 in place; (iii) decreased reliance on state facilities - admissions/operating bed capacity lowered at 3 state hospitals.

## Performance Measures

### Measure #1

Percentage of state hospital discharges seen for a non-emergent, scheduled appointment within 7 days of discharge.

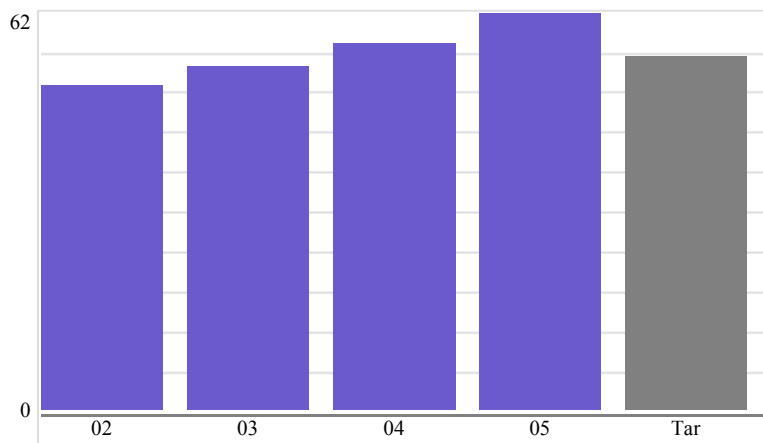
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2002	50.1
2003	53.4
2004	56.6
2005	61.4
2006	



### Explanatory Note

Data reflects consumers discharged Qtr '03 and Qtr'04.

### Title or brief description of the primary data source(s)

Patient/Resident Automated Information System and the local CSB MIS/AVATAR

### Describe how the measure is calculated

Number of state hospital discharges with a referral for MH services to a CSB who were seen for a non-emergent scheduled appointment within 7 days of discharge divided by the total number of state hosp

### Describe how the target is calculated

Based on performance for the previous year



**Measure #2**

Percentage of state hospital discharges readmitted within 30 days of discharge

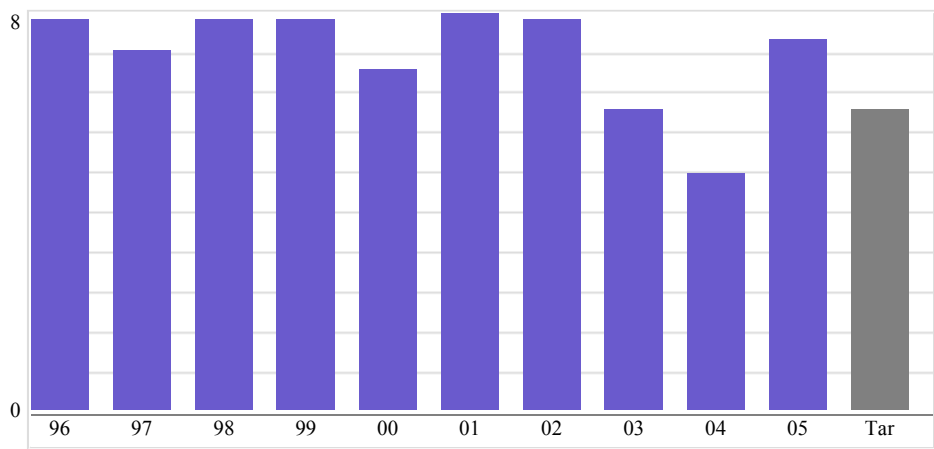
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1996	7.8
1997	7.2
1998	7.8
1999	7.8
2000	6.8
2001	7.9
2002	7.8
2003	6.0
2004	4.7
2005	7.4
2006	



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Patient/Resident Automated Information System/AVATAR

**Describe how the measure is calculated**

The number of state hospital discharges in which the patient is readmitted to any state hospital within 30 days of the initial discharge divided by the total number of discharges from a state hospital

**Describe how the target is calculated**

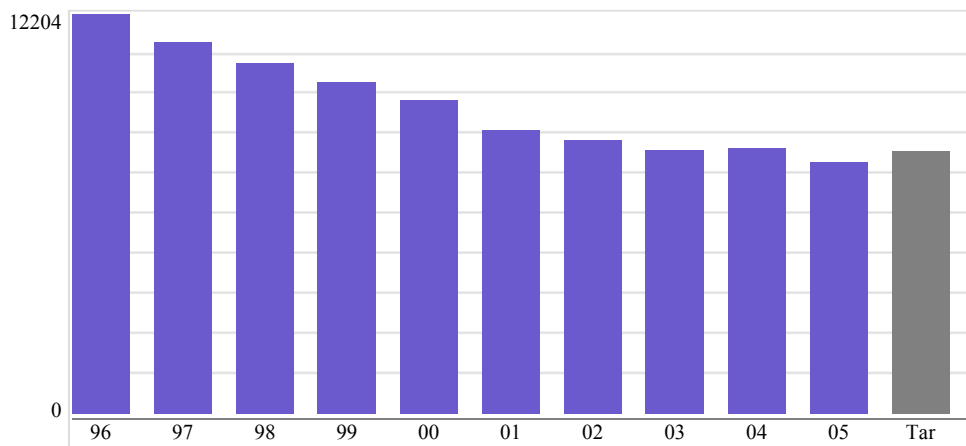
The target for a given year is based on performance for the previous year and national data for a similar measure.

**Measure #3**

Number of bed days used at state training centers per 100,000 population

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

Year	Measurement
1996	12,203.0
1997	11,363.0
1998	10,701.0
1999	10,118.0
2000	9,595.0
2001	8,664.0
2002	8,343.0
2003	8,029.0
2004	8,108.1
2005	7,707.7
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Patient/Resident Automated Information System/AVATAR

**Describe how the measure is calculated**

Number of bed days used at state training centers per 100,000 population in the state.

**Describe how the target is calculated**

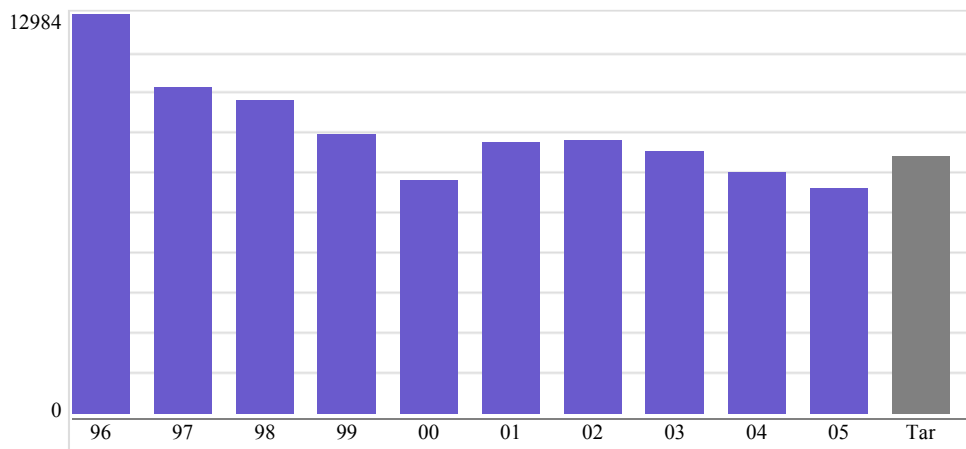
Targets for a given year are based on actual performance for the previous year and an assessment of the capacity to serve additional patients in the community.

**Measure #4**

Number of bed days used at state hospitals per 100,000 population

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

Year	Measurement
1996	12,984.0
1997	10,595.0
1998	10,172.0
1999	9,099.0
2000	7,579.0
2001	8,842.0
2002	8,883.0
2003	8,531.0
2004	7,854.7
2005	7,321.5
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Patient/Resident Automated Information System/AVATAR

**Describe how the measure is calculated**

Number of bed days used in state psychiatric hospitals (excluding forensic bed days) per 100,000 population in the state.

**Describe how the target is calculated**

Targets for a given year are based on actual performance for the previous year and an assessment of the capacity to serve additional patients in the community.

**Measure #5**

Percentage of consumers/family members reporting satisfaction with Community Service Board services

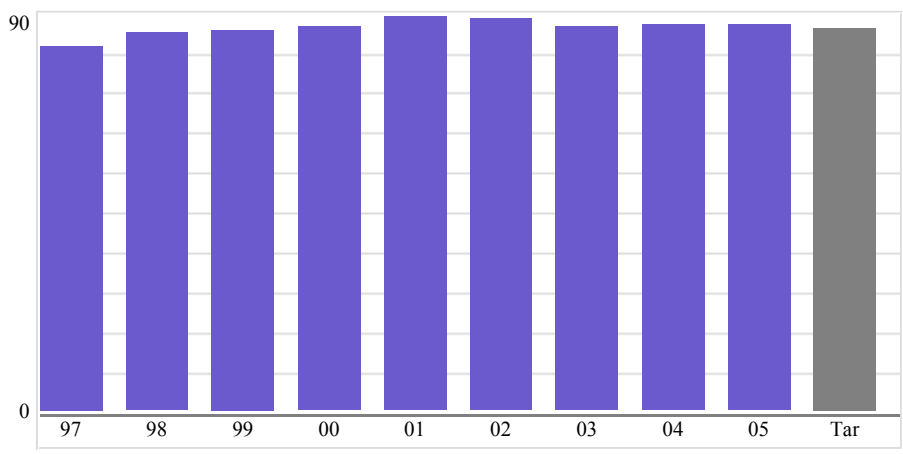
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
1997	82.0
1998	85.0
1999	85.4
2000	86.5
2001	88.7
2002	88.3
2003	86.3
2004	86.9
2005	87.0
2006	



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Annual, cross-sectional survey of community services board consumers. The survey uses a questionnaire developed for the Federal Center for Mental Health Services.

**Describe how the measure is calculated**

Percentage of consumers completing the survey who report satisfaciton with CSB services as indicated by an average item score of less than or equal to 2.5.

**Describe how the target is calculated**

The target for a given year is established based on performance for the previous year and results from other states using the same or similar surveys.



**Measure #6**

Reduce the rate of use of mechanical, behavioral restraints in state facilities by 5%. Baseline = FY 03 monthly average

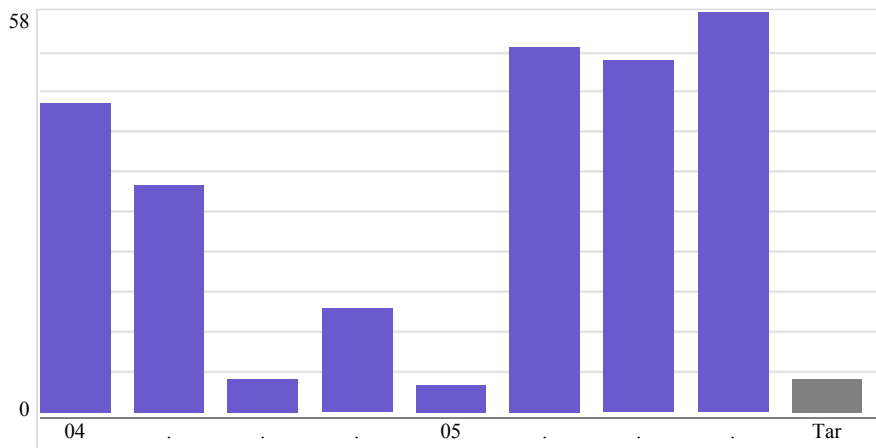
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2004	45	33	5	15	
2005	4	53	51	58	
2006					

**Explanatory Note**

Q1 reflects estimates from indiv facility systems during construction of centralized database. Q2 reflects changes in reporting requirements of new system. Q3 is 5% INCREASE, based on stabilized reporting w/new system. Q4 reflects actual practice changes.

**Title or brief description of the primary data source(s)**

DMHMRSAS seclusion/restraint database and Avatar billing system.

**Describe how the measure is calculated**

Total number of restraint hours quarterly per facility inpatient hours

**Describe how the target is calculated**

Baseline = 0.00060 hours mechanical restraints per patient hours (FY quarterly average)

**Measure #7**

Maintain the FY 04 reduction in the average number of citations for failure to comply with licensing regulations from the initial to the subsequent review among providers who have (1) experienced a reduction in the term of their license as a result of multiple citations; or (2) received a provisional license.

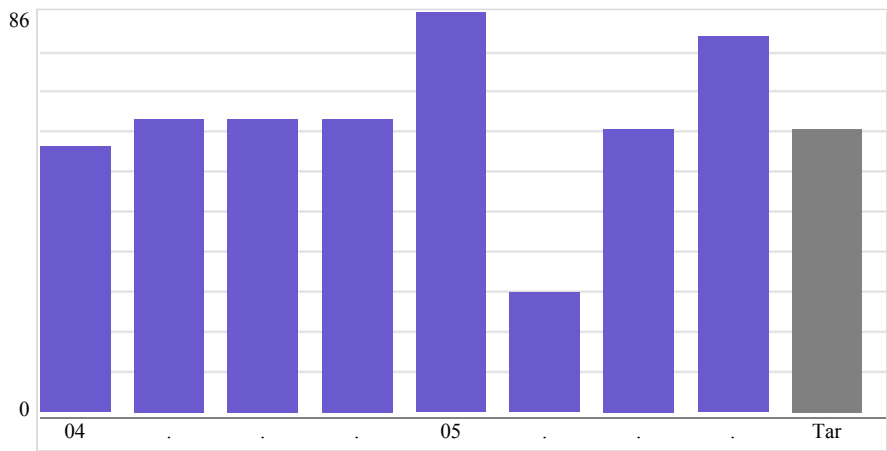
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2004	57	63	63	63	
2005	86	26	61	81	
2006					



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Inspections reports from OLIS, the DMHMRSAS licensing information system.

**Describe how the measure is calculated**

Calculate number of citations when license is reduced, or provisional license is issued. Calculate number of citations when subsequent license is issued. Average the individual measures.

**Describe how the target is calculated**

Based on the FY 04 reduction in the average number of citations

**Measure #8**

Increase to 55% the number of discharges from state hospitals that were followed by at least one scheduled face-to-face (non-emergency) outpatient visit at a CSB within 7 days.  
 BASELINE=52% (FY 03 target)

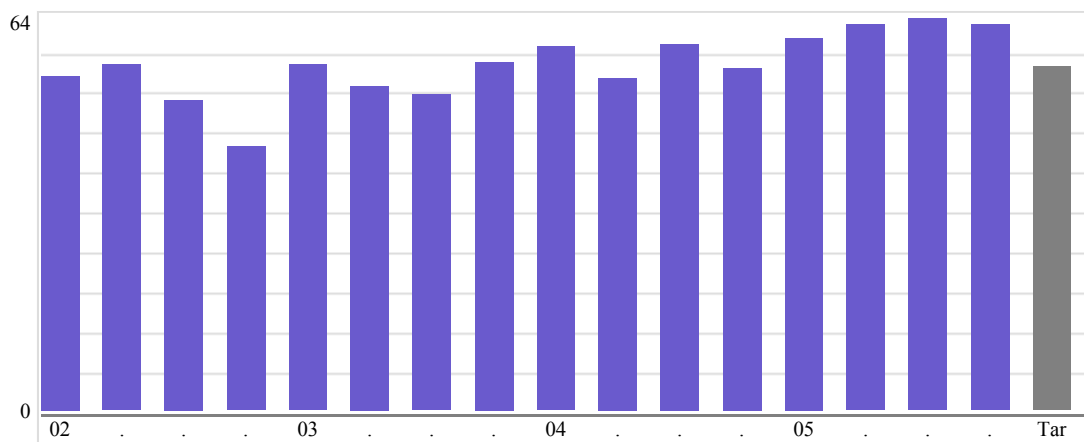
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2002	53.3	55.3	49.6	42.2
2003	55.4	51.8	50.7	55.8
2004	58.1	53.0	58.5	54.8
2005	59.6	61.7	62.6	61.8
2006				

**Explanatory Note**

Data for a particular quarter reflects consumers discharged in two quarters previous. Example: Quarter 1 2003 data reflects consumers discharged from Qtr 3 2002. Qts 3rd & 4th '05 reflect data from 39 CSBs.

**Title or brief description of the primary data source(s)**

Patient/Resident Automated Information System and the local CSB MIS./AVATAR

**Describe how the measure is calculated**

Number of state hospital discharges with a referral for MH services to a CSB who were seen for non-emergent scheduled appt. w/in 7 days of discharge divided by total number of state hospital discharges

**Describe how the target is calculated**

Based on performance for previous year

**Measure #9**

Increase by 2% the number of infants and toddlers with disabilities being served through the Part C Early Intervention System (federal legislation that was enacted by Congress in 1986 as an amendment to the Education of the Handicapped Children’s Act (1975) to ensure that all children with disabilities from birth through the age of three would receive appropriate early intervention services).BASELINE=FY 03 number served.

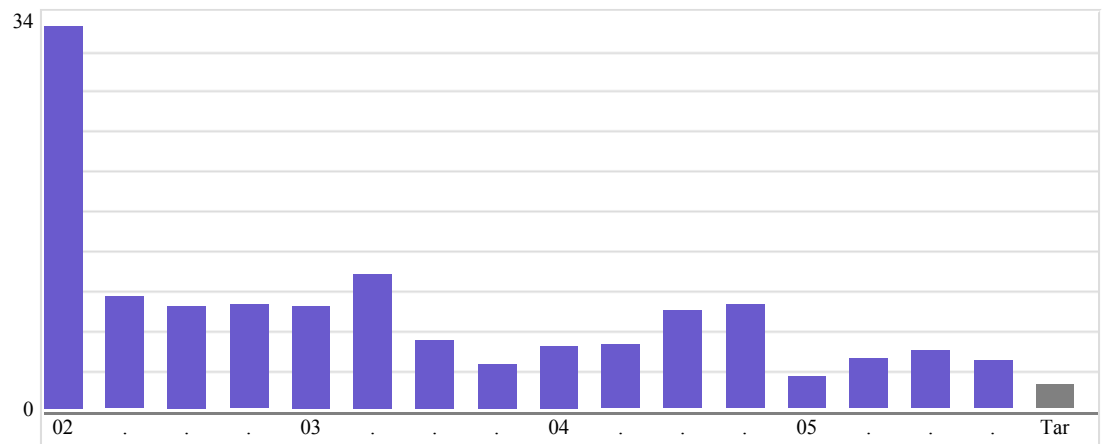
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4	
2002	32.5	9.6	8.6	8.8	
2003	8.6	11.4	5.7	3.7	
2004	5.3	5.4	8.3	8.8	
2005	2.8	4.2	4.9	4.0	
2006					



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

Part C early intervention data service is called Infants and Toddlers On-line Tracking System (iTOTS). This is a web-based data system that track all eligible children receiving services.

**Describe how the measure is calculated**

Number of infants and toddlers with disabilities being served divided by baseline FY 2003 number.

**Describe how the target is calculated**

Targets for a given year are based on actual performance for the previous year.

**Measure #10**

Increase by 2% the number of medically fragile children receiving early intervention services (fragile children are those who have a chronic condition and/or who require technology or ongoing support to prevent adverse physical consequences). BASELINE= FY 03 number served

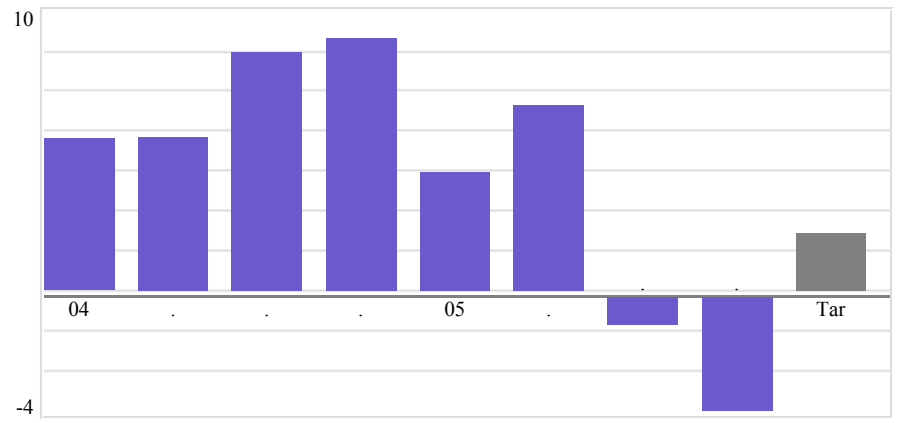
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

	Q1	Q2	Q3	Q4
2004	5.3	5.4	8.3	8.8
2005	4.1	6.5	-1.0	-4.0
2006				



**Explanatory Note**

Below target in 3rd & 4th qtrs '05. DMHMRSAS will review and assess numbers to determine if more public awareness might assure more appropriate referrals to the VA Infant & Toddler Connection program.

**Title or brief description of the primary data source(s)**

Part C early intervention data service is called Infants and Toddlers On-line Tracking System (iTOTS). This is a web-based data system that track all eligible children receiving services.

**Describe how the measure is calculated**

Number of medically fragile children receiving early intervention services divided by baseline FY 2003 number.

**Describe how the target is calculated**

Targets for a given year are based on actual performance for the previous year.

## Department for the Deaf & Hard-of-Hearing (751)

### Agency Head Contact Information

Name: Ronald L. Lanier Phone: 662-9706  
Email: [lanierl@ddhh.state.va.us](mailto:lanierl@ddhh.state.va.us)

### Planning and Performance Contact Information

Name: Leslie Hutcheson Prince Title: Policy and Planning Manager  
Telephone: 804-662-9703 Email: [princelh@ddhh.state.va.us](mailto:princelh@ddhh.state.va.us)  
Agency Website: <http://www.vddhh.org/>

### Mission Statement

To reduce barriers and enhance communications for the deaf and hard of hearing with their families and those who interact with them. Communication is the most critical issue facing persons who are deaf or hard of hearing and the foundation of all programs at VDDHH.

### Objectives

1. Increase responsiveness to customer feedback regarding all agency services by implementing a minimum of 5 program enhancements based on solicited and unsolicited customer feedback each year between FY05 and FY08.
2. By the end of FY07 and as a result of Outreach Program efforts, reduce by 10% the number of emergency calls from deaf and hard of hearing consumers received by Va Relay which should have been received directly by 9-1-1 services.
3. Improve telecommunications access for Virginians who are deaf, hard of hearing, or speech-impaired by integrating 2 major technological enhancements to Virginia Relay and/or the VDDHH Technology Assistance Program each year between FY2005 and FY2007.
4. Improve access to Virginia Quality Assurance Screening Written Assessment for candidates from all areas of the state by providing on-line Written Assessments to 25% of all eligible applicants by July 1, 2005, 50% by July 1, 2006 and 75% by July 1, 2007.

### Activities

1. **Hearing Technology Services:** Efforts to ensure communications access for persons who are deaf or hard of hearing by providing specific assistive technology, on a loan or ownership basis, directly to consumers; and to provide oversight for the operations of the federally mandated Virginia Relay (enables communication by TTY (text telephone) or another assistive telephone device with anyone who uses a standard telephone).
2. **Consumer, Interpreter, and Community Support Services:** Efforts to ensure communications access for consumers by providing community-based outreach

services, coordination of nterpreter services, quality assurance screening for interpreters(skills assessment), and specialized library services.

3. **Administration and Computer Services:** Efforts to provide policy and program development and leadership as well as administrative and technical support to all department activities to ensure consumer access and quality customer service. (Note: All information technology services are provided under contract with the Department of Rehabilitative Services.)

<b>Customers</b>	<b>Growth Trend</b>
Deaf, hard of hearing, late-deafened, and speech impaired consumers	Increasing
Family members and friends of deaf, hard of hearing, late-deafened, and speech impaired consumers	Increasing
Sign language interpreters and transliterators	Same
Virginia courts, state agencies, businesses	Same
Public schools	Same
Employers of deaf, hard of hearing, late-deafened and speech impaired	Increasing

<b>Governor's and Other Initiatives</b>	<b>Status</b>
By January 1, 2006, VQAS Written Assessment will be available on line.	VQAS On-line Written assessment is in testing phase. Full implementation expected in January 05. Delays resulted from DSA IS switch to new security system.
By July 1, 2003, VQAS registration will be available on-line.	Fully implemented since September 2003. VQAS registration was on-line in test mode by July 1, 2003. On-line registration was fully implemented in September 2003. Since that time, approximately 50% of all candidates use the on-line registration program.
Establish plan to address communications access in medical settings by March 1, 2004.	Plan established in 3/04. On-going activities include promoting remote interpreting services as a means of communication access and working with the Advisory Board, private coordination agencies, and training programs to increase the pool of interpreters.

## Performance Measures

### Measure #1

The number of calls processed by Virginia Relay annually (in millions)

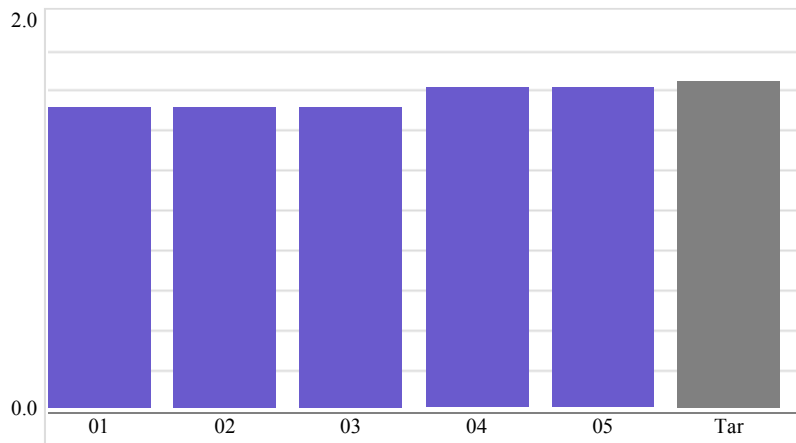
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2001	1.5
2002	1.5
2003	1.5
2004	1.6
2005	1.6
2006	



### Explanatory Note

The number of relay calls for FY05, 1,594,260, represents a .3% increase from FY04. The total increase since FY 01 effectively meets the target value. The number of relay calls for FY 04, 1,590,491, represents a 3% increase from FY 03. This increase can be attributed to the Virginia Relay Education and Technical Assistance campaign that began in April 2003.

### Title or brief description of the primary data source(s)

Monthly reports required to be provided by the Relay contractor

### Describe how the measure is calculated

Review of annual reports call volume and mathematical calculation of percent increase in volume over the previous year.

### Describe how the target is calculated



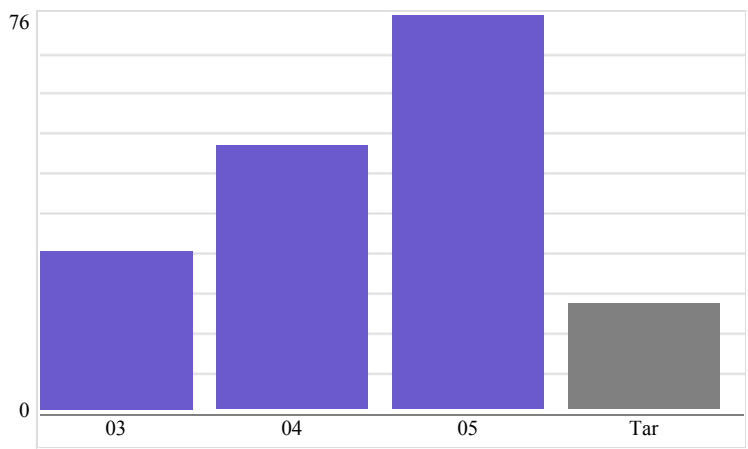
Calculating a 2.5% increase in call volume over the course of the year

**Measure #2**

Track the percentage of VQAS candidates taking written exam on-line (Target - 20% of all Written Assessments will be administered on-line by January 2005)

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

Year	Measurement
2003	30
2004	50
2005	75
2006	



**Explanatory Note**

FY05 Notes: data represents the percentage of the development work which has been completed. The Written Assessment is currently scheduled to be available to candidates on-line by January 1, 2006. FY04 Notes: No quarterly reports were required during the first three quarters of the year. Q4 percentage represents work done towards implementation. VIPNET no longer involved. Working with DSA IS to develop and test on-line written assessment. Testing to begin this fall. FY03 Notes: Working with VIPNET to set up secure on-line testing protocol. Anticipate 7/03 (or earlier) implementation of on-line assessments. Q4 - Further discussions with VIPNET show that this task will be more complex and more costly than initially thought. A new memo of understanding is in process and will include revised time frames.

**Title or brief description of the primary data source(s)**

VQAS Written Assessment records.

**Describe how the measure is calculated**

The agency reviews the total number of Written Assessments administered and the percentage of those which were administered on line.

**Describe how the target is calculated**

Target calculated based on 20% of all VQAS Written assessments to be administered on-line as opposed to on paper.

**Measure #3**

Track the number of VQAS candidates registering on-line (Target 40% of all VQAS registrations received on line by March 2004)

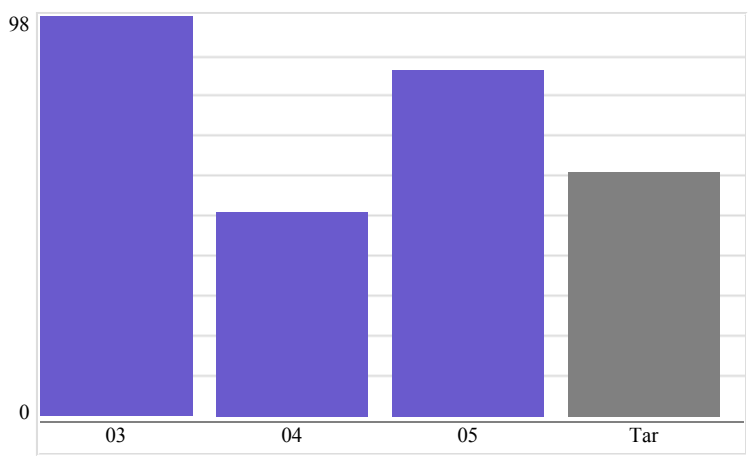
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	98
2004	50
2005	85
2006	



**Explanatory Note**

FY04 Notes: data is annualized as no reports were required in Q1, Q2, or Q3.. 50% of all candidates who have registered since on-line registration became available have completed the registration process on-line. FY03 Notes: Current percentage reflects progress towards implementation. Anticipate 7/03(or earlier) launch of on-line service. Q4 - Online registration is ready to go pending final testing and staff training.

**Title or brief description of the primary data source(s)**

Written Assessment records.

**Describe how the measure is calculated**

The agency reviews the total number of registrations received and calculates how many of that total were received on-line.

**Describe how the target is calculated**

Target calculated based on 60% of all VQAS registrations received on-line.

**Measure #4**

Track the number of VQAS candidates who seek additional training based on diagnostic feedback. (Target - Annually, 25% of those who receive the diagnostic feedback indicate that they intend to seek specific training as a result of the feedback.) Baseline: 0% surveyed in FY2002.

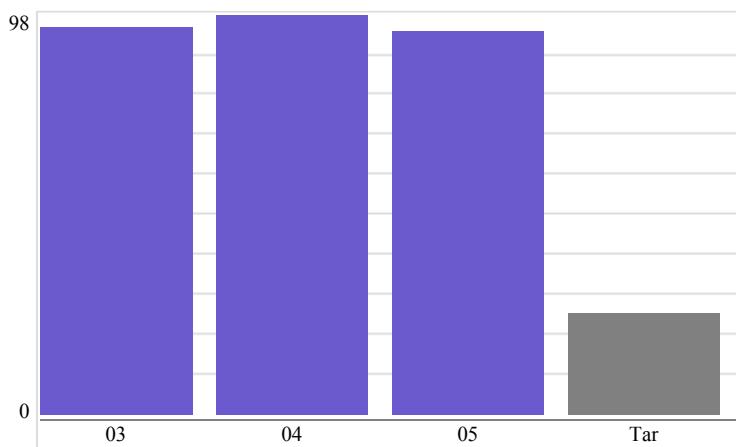
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	95
2004	98
2005	94
2006	



**Explanatory Note**

2005 Data is cumulative for the year as no quarterly reports were required. 2004 Data is cumulative for the year as no quarterly reports were required during Q1, Q2, or Q3. 2003 - No data available for Q1 and Q2 - data collection mech. was being developed. Since 7/1/02, 150 individuals have received diagnostics. All have been surveyed. Survey response rate is at 28% with 21% of respondents indicating they have or will seek training based on the diagnostics. Q4 - 37 candidates surveyed in Q4, 56% response rate. Of those responding, 95% indicated that they would receive training based on diagnostic feedback. This represents 51.3% of all candidates in the 4th quarter.

**Title or brief description of the primary data source(s)**

Candidate survey responses.

**Describe how the measure is calculated**

The agency provides each candidate with a survey form when they receive their diagnostic feedback. These forms are tallied monthly.

**Describe how the target is calculated**

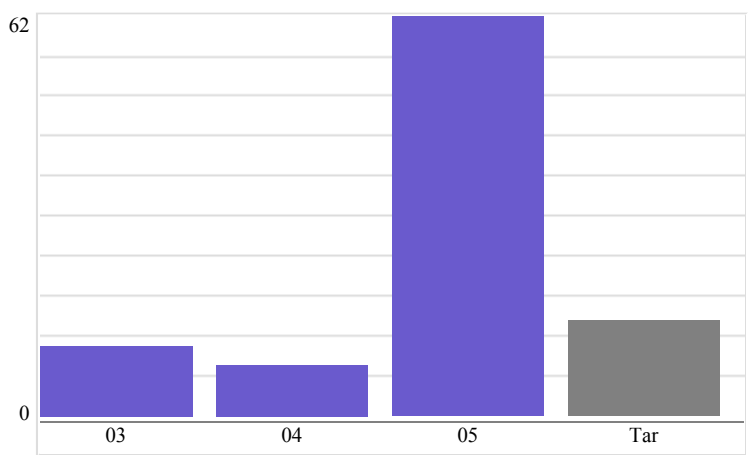
Target calculated based on 25% of VQAS candidates who complete the survey reporting that they have sought or plan to seek additional training based on the diagnostic feedback provided by the agency.

**Measure #5**

Monitor the number of relay customers rating the quality of service as "good" or "excellent". Target - Increase Customer Commendations by 15% by June 30, 2004. Baseline: 110 Customer Commendations received in FY2002.

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

Year	Measurement
2003	11.0
2004	8.0
2005	62.0
2006	



**Explanatory Note**

FY05 Note: During FY05, a record 225 service commendations were received from consumers, an increase of 62% over the previous 12 month reporting period. Note: changed to an annual calculation. Total percentage increase over baseline is 19%. Q2 data includes previously unavailable data from Sept. Also note that number of complaints has decreased by 20% as compared with the same time period last year.

**Title or brief description of the primary data source(s)**

Customer Commendation Records

**Describe how the measure is calculated**

The agency reviews all reports from the contractor to determine the number of commendations received on a quarterly basis.

**Describe how the target is calculated**

Compare the total number of commendations received with the baseline of 110 from 2002.

**Measure #6**

Document percentage increase of TAP applicants certified by AAA representatives. Target - 5% of all TAP applications received each year to be certified by AAA. Baseline: >1% certified by AAA in FY2002.

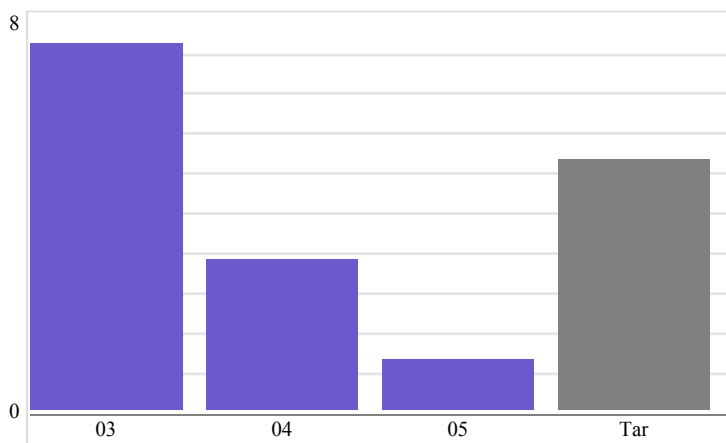
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	7.3
2004	3.0
2005	1.0
2006	

**Explanatory Note**

FY05 Notes: The reported percentage is annualized. A new application form which will better capture certification by AAA representatives was issued in May 2005. This should result in a higher percentage of applications noted as certified by these representatives in the coming year.  
 FY04 Notes: The reported percentage is annualized as quarterly reports were not required in Q1, Q2 or Q3. Actual number of AAA certified applications is greater than the previous year, however, Outreach representation at the Governor's Health Fairs generated an unusually large number of applications which lowered the overall percentage of AAA certified applications.  
 FY03 Notes: Developing data collection mechanism. Q1 - Q2 data less than 1%. Q4 - improved data collection mechanism aided in determining this quarter's activity.

**Title or brief description of the primary data source(s)**

TAP database

**Describe how the measure is calculated**

Review of certifying authority on all TAP applications received to identify those certified by AAA representatives.

**Describe how the target is calculated**



Calculate number of AAA certified applications as a percentage of total applications received.

**Measure #7**

Document integration of new TAP devices, relay technology and features (Caption Telephone, Video Relay Service, Internet Protocol Relay, etc.) annually. Target - 2 major features integrated per fiscal year. Baseline: 0 in FY 2002.

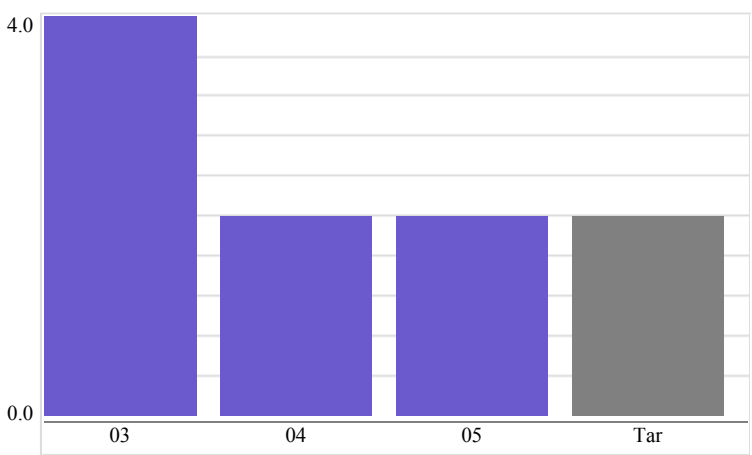
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	4.0
2004	2.0
2005	2.0
2006	



**Explanatory Note**

FY05 Notes: In FY05, 1 new device (enhanced VCO phone) and 1 new relay technology (VA Relay Text Messaging) were incorporated into agency programs. FY 04 NOTES: Fully implemented CapTel Service and Video Relay Service in FY04. No quarterly reports required in Q1, Q2, or Q3. FY03 NOTES: Q1 - The agency has implemented a pilot program for CAPTEL and is working to ensure ongoing availability beyond the pilot phase. Q2 - True Caller ID and Multi-User Relay Choice Profile implemented 10/01/03 and planning for Video Relay Implementation and Internet Protocol Relay in Q3. Q3 - implementation of video relay trial. Also, CAPTEL trial extended beyond original period. Q4 - no enhancements implemented this quarter.

**Title or brief description of the primary data source(s)**

Virginia Relay and VDDHH records of program enhancements.

**Describe how the measure is calculated**

The agency reviews program records to determine the number of features or devices incorporated into contracts or programs during the reporting period.

**Describe how the target is calculated**

The number of devices or features added equals two or more compared with the baseline of 0.

**Measure #8**

Document the number of enhancements implemented in agency programs as a result of feedback received from VDDHH customer service survey(s). (Target - A minimum of 5 feedback-based service enhancements agency-wide annually. Baseline: 3 thru 4th quarter of 2003.)

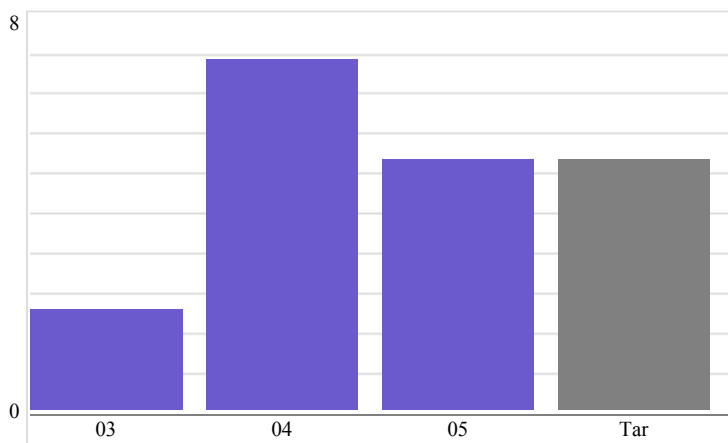
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	2.0
2004	7.0
2005	5.0
2006	

**Explanatory Note**

FY05 Notes: In FY05, the agency launched an electronic newsletter, redesigned the TAP application package to provide a single page application in a user-friendly folder, purchased library materials on DVD and in Spanish, expanded the Video Relay Room, and revised the TAP coupon/award letter to be more customer friendly. FY04 NOTES: Q4 data is annualized. No quarterly reports were required in Q1, Q2, or Q3. Four Relay enhancements were implemented in the new contract based on customer feedback: in-bound international calls, in-state accounts manager, in-center customer care desk and ASL translation as default. In addition, three Library Services enhancements were implemented based on Patron Survey: pilot program of extended evening and Saturday library hours; limits on number of items checked out per patron; and changes in loan period (books and videos both loaned for 1 month). FY03 NOTES: Q1 - No specific feedback-based program enhancements. Q2 - Library Patron Sign-in/Motor voter request. On-line Town Hall Forum set for launch in Q3. Q3 - TownHall site launched this quarter. In addition, specific changes have been made to the VQAS Diagnostic Feedback format in response to candidate comments on the customer satisfaction survey for that program. Q4 - TAPLOAN has initiated a program to provide long-term loan of the Crystal Tone Phone to AAAs in response to feedback received from those providers. This will enhance their ability to assist older Virginians in accessing the TAP program and finding appropriate technology. In addition, the Library is responding to requests to move toward online access of the Library materials list by improving the formatting of the listing to make it web-friendly.

**Title or brief description of the primary data source(s)**

Consumer surveys and anecdotal feedback.

**Describe how the measure is calculated**

The agency reviews program policies and procedures to determine enhancements made during the reporting period based on consumer input.

**Describe how the target is calculated**

At least 5 program policies or other enhancements added each year agency-wide.

## Department of Social Services (765)

### Agency Head Contact Information

Name: Anthony Conyers, Jr. Phone: 804-726-7011

Email: anthony.conyers@dss.virginia.gov

### Planning and Performance Contact Information

Name: Margaret Schultze Title: Special Advisor to the Commissioner

Telephone: 804-726-7012 Email: margaret.schultze@dss.virginia.gov

Agency Website: <http://www.dss.virginia.gov>

### Mission Statement

People helping people triumph over poverty, abuse and neglect to shape strong futures for themselves, their families, and communities

### Objectives

1. Increase employment income of current and former employable clients by 3 percent each fiscal year in fiscal years 2005 and 2006.
2. Increase family income and resources by 3 percent each fiscal year in fiscal years 2005 and 2006
3. Increase the number of adults (persons age 60 and older, and incapacitated persons age 18 and older) and children who are known to the system and remain safely in their own homes by 5 percent each fiscal year in fiscal years 2005 and 2006
4. Increase the number of eligible people receiving food stamp benefits by 5 percent each fiscal years 2005 and 2006
5. Increase the number of eligible people receiving Medicaid by 3 percent each fiscal year in fiscal years 2005 and 2006

### Activities

1. **Welfare Reform Services:** Efforts to promote economic self-reliance of Virginians in order to reduce dependence on public assistance by providing employment services and child care subsidies to assist families obtain and maintain employment.
2. **Child Support Enforcement:** Efforts to establish child support orders, and to collect and disburse child support payments that assist custodial parents to attain or retain economic independence.
3. **Quality and At-Risk Day Care:** Efforts to support economic self-sufficiency of families by providing child care services while parents or guardians seek or maintain employment.
4. **Child Protective Services:** Efforts to protect children who have been or are at-risk

of being abused, neglected, or exploited.

5. **Foster Care and Adoption Services:** Efforts to provide safe living environments, both permanent and temporary, for children who have been abused, neglected, or exploited.
6. **Adult and Child Care Facilities Licensure:** Efforts to assure that facilities for children and elderly adults meet state standards through a system of licensure and inspection.
7. **Adult Protection and Services:** Efforts to protect adults who have been or are at-risk of, being abused, neglected, or exploited; and also to assist elderly adults with daily living activities in their homes.
8. **Eligibility and Benefits Determination for Food stamp and Medicaid programs:** Efforts to make federal Food Stamp and Medicaid benefits accessible to eligible indigent citizens.
9. **General Relief:** Efforts to provide benefits and services to indigent persons not eligible for the major federal assistance programs.
10. **Auxiliary Grants:** Efforts to supplement the incomes of indigent aged, blind, or disabled persons who reside in adult living facilities.
11. **Community Action Grants:** Efforts to provide a wide range of services to the low-income population through the network of 26 local community action agencies.
12. **Energy, Newcomer, and Refugee Assistance:** Efforts to assure access of eligible persons to federal energy and refugee assistance benefits.
13. **General Administrative Oversight and Support for Local Programs:** Efforts to provide the administrative and management infrastructure to operate and oversee the department's 16 major programs and 112 local agencies.

**Customers**

Growth Trend

Business (for profit)and (not for profit)

Children and families

Low income individuals and families

Non-custodial parents

Policy makers; state & local governments; federal agencies

Vulnerable adults (individual 18 or over, incapacitated, & unable to make reasonable decisions)

Governor's and Other Initiatives	Status
All audit findings will be resolved or be virtually resolved within the fiscal year in fiscal years 2004 through 2006	Department is working to comply with initiative

## Performance Measures

### Measure #1

The amount spent for state-sponsored training for local and state employees will increase by 5 percent each fiscal year in fiscal years 2004 through 2006 (establish a baseline during fiscal year 2004)

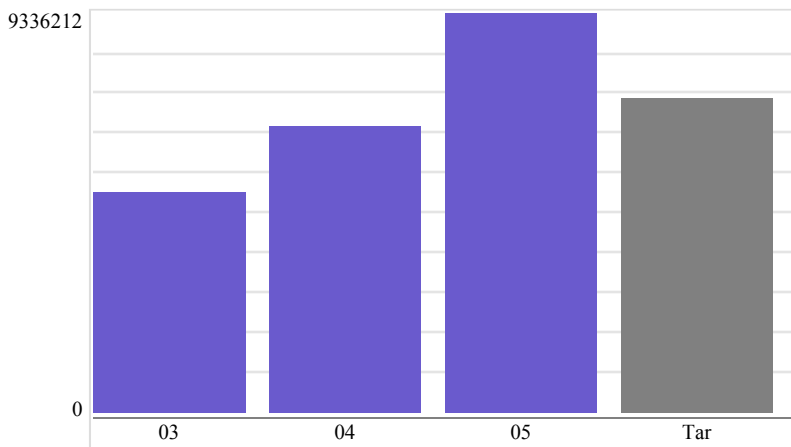
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	5,146,335
2004	6,659,237
2005	9,336,212
2006	



### Explanatory Note

Dollar figure represents dollars expended for VISSTA training activities

### Title or brief description of the primary data source(s)

Direct expenditures from subprogram and cost codes within CARS

### Describe how the measure is calculated

Sum of dollar figures from applicable cost codes within CARS

### Describe how the target is calculated

Base \$ figure from 2004 plus 5%

### Measure #2



Percentage of VIEW cases with individuals in a work activity (subsidized or unsubsidized employment or community work experience) will increase from by 5 percent each year for the next two years

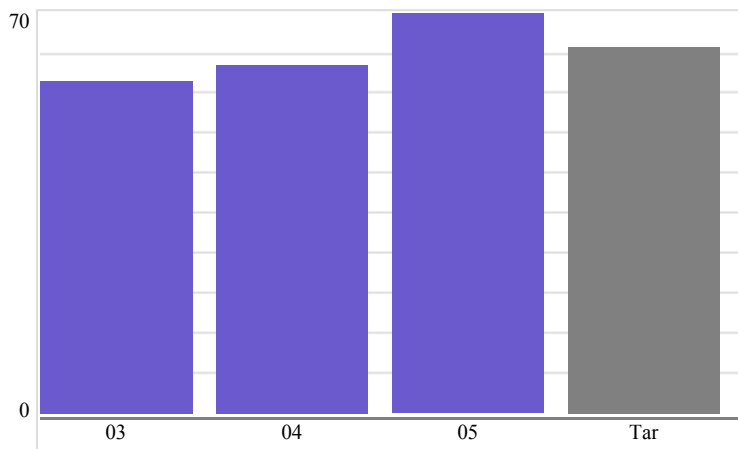
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	58
2004	61
2005	70
2006	



### Explanatory Note

The federal government requires that 50% of non-exempt individuals receiving cash assistance paid for with TANF funds to participate in a work activity or be employed.

### Title or brief description of the primary data source(s)

Data from ADAPT and ESPAS

### Describe how the measure is calculated

Divide the total number of TANF cases with participants engaged in a work activity by the total TANF caseload minus child only cases and cases with children under 12 months of age.

### Describe how the target is calculated

A 5% increase each year in TANF cases with participants engaged in a work activity was chosen to mirror federal targets. The target is determined by adding 5% to the previous year's performance data.

### Measure #3

Of all children who are reunified with their parents/guardians when discharged from foster care,

the percentage reunified in less than 12 months from the time of the removal from their home will increase from 73.3% to 76.2%, by FFY 2004

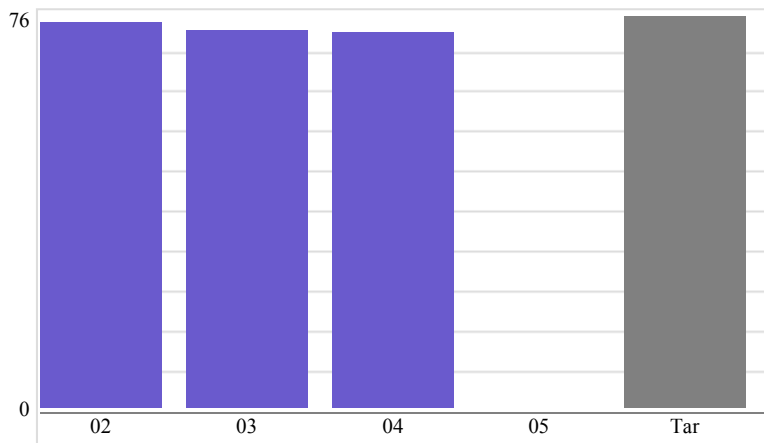
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2002	73.3
2003	72.0
2004	71.4
2005	
2006	



#### Explanatory Note

FFY 2005 data will not be available until April 2006. FFY 2006 target has been established and will be updated after FY 2005 data is reported.

#### Title or brief description of the primary data source(s)

Local departments of social services' staff inputs data on foster care children into OASIS.

#### Describe how the measure is calculated

The number of children reunified with parent/guardian during the FFY divided by the number of children reunified with parent/guardian within 12 months of entry into care.

#### Describe how the target is calculated

The Children's Bureau calculated the data that was available from states to establish a national standard for timeliness of foster care reunification. The national standard was established at 76.2%.

#### Measure #4

Child support collections will increase from \$506 million in state fiscal year 2003 to \$530

million in state fiscal year 2004

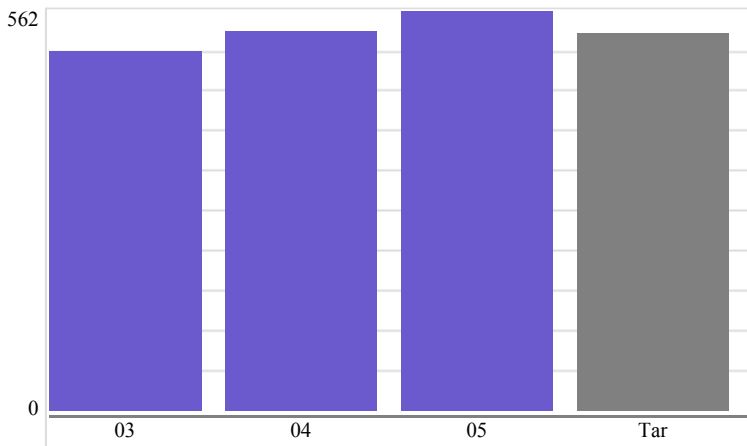
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement	
2003	506.0	
2004	534.0	
2005	561.0	
2006		



#### Explanatory Note

Performance data is millions in US dollars, example, \$250M

#### Title or brief description of the primary data source(s)

Collection report from APECS

#### Describe how the measure is calculated

Total IV-D child support collections received during state fiscal year

#### Describe how the target is calculated

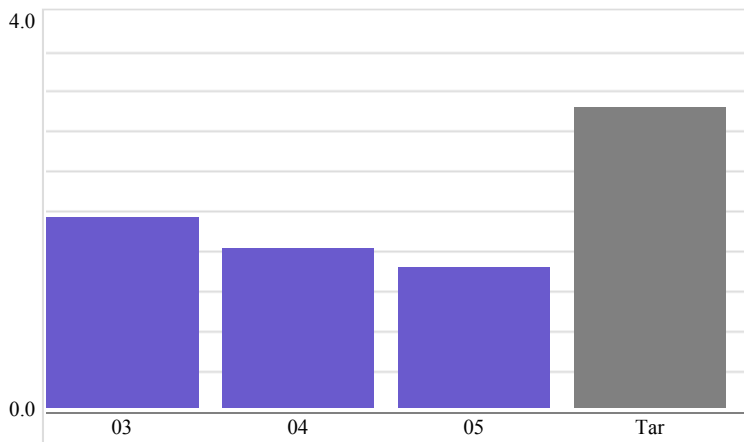
Historical trends with current economic conditions as modifying factor

**Measure #5**

Undistributed collection balances will not exceed 3 percent of annual child support collections

Is this measure a number or percent The preferred direction of the trend Target Value  Target Date Data Begins  Collection Frequency 

Year	Measurement
2003	1.9
2004	1.6
2005	1.4
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

APECS Undistributed Receipts Report

**Describe how the measure is calculated**

The amount of child support remaining undistributed at the end of the state fiscal year.

**Describe how the target is calculated**

Evaluation of historical trends in both undistributed collections and total collections

**Measure #6**

Virginia will be below 105 percent of the annual national average error rate for food stamp accuracy

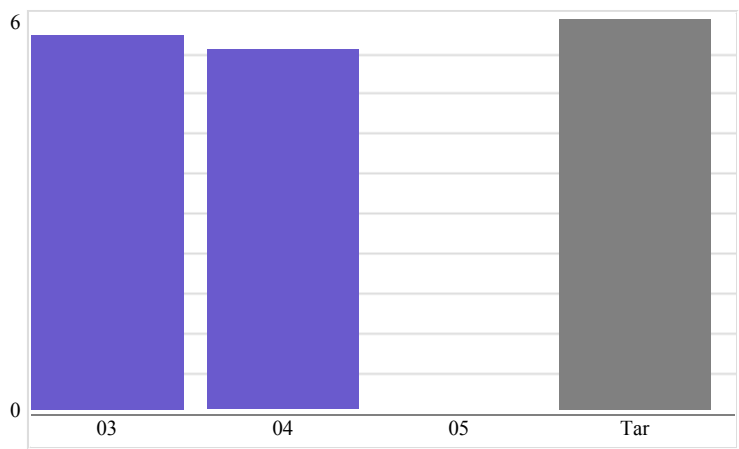
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	5.6
2004	5.4
2005	
2006	



**Explanatory Note**

The U.S. Department of Agriculture mandates a quality control process where a sample of cases are selected to determine if the eligibility and benefit calculations were done correctly. States that fall below 105% of the national average in two consecutive years are subject to a sanction. The national average varies each year according to the performance of the states. Data not yet available from federal government.

**Title or brief description of the primary data source(s)**

Food stamp issuance data sample from ADAPT system

**Describe how the measure is calculated**

Food stamp dollars issued in error to quality control sample population for the federal fiscal year divided by total amount of food stamp dollars issued to the same quality control sample population

**Describe how the target is calculated**

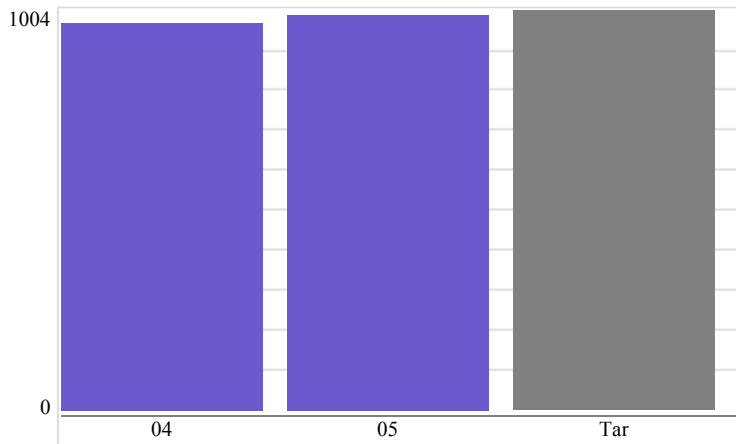
The target is slightly less than 105 percent of the national average for the previous year

**Measure #7**

Increase employment income of current and former employable clients by 3 percent each fiscal year in fiscal years 2005 and 2006 (establish a baseline during fiscal year 2004)

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

Year	Measurement	
2004	974	
2005	996	
2006		



**Explanatory Note**

The social services system operates workforce programs including the Virginia Initiative for Employment not Welfare (VIEW) and the Food Stamp Employment and Training Program (FSET). The purpose of these programs is to assist low-income individuals in obtaining employment and succeeding in the labor market. This measure tracks the average employment income of current and former participants in these programs.

**Title or brief description of the primary data source(s)**

ESPAS

**Describe how the measure is calculated**

Aggregate average monthly income of current and former participants.

**Describe how the target is calculated**

Aggregate average monthly income of current and former participants.

**Measure #8**

Increase the number of households receiving food stamp benefits by 5 percent each fiscal year in fiscal years 2004 through 2006

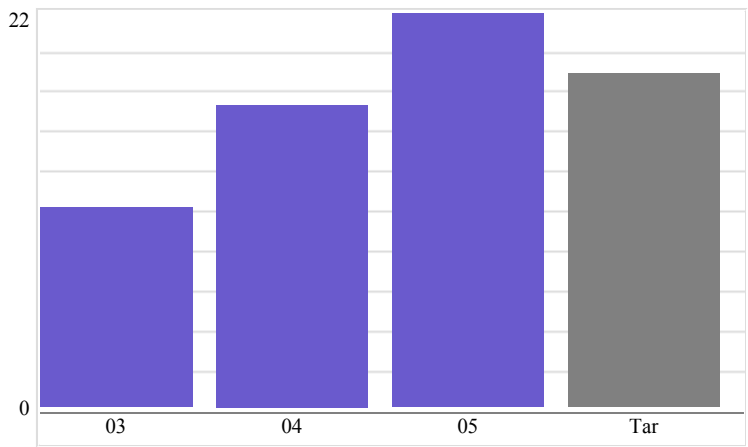
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	11.0
2004	16.6
2005	21.7
2006	



**Explanatory Note**

One of the principal outcomes of the Food Stamp program is to increase the number of eligible households receiving this nutrition assistance benefit. Food Stamp benefits are paid 100% by the federal government, providing important individual and economic benefits to the Commonwealth's citizens and businesses.

**Title or brief description of the primary data source(s)**

ADAPT

**Describe how the measure is calculated**

Percentage increase of participants -- (current year total participants - last year's total participants/last year's total participants) \* 100

**Describe how the target is calculated**

Five percent increase from the previous fiscal year.

**Measure #9**

Increase the number of people receiving Medicaid by 3 percent each fiscal year in fiscal years

2004 through 2006 (data from fiscal year 2003 will be used as the baseline)

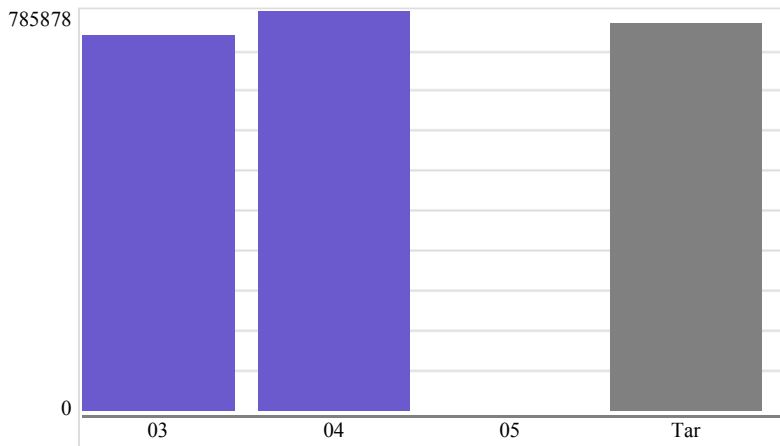
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2003	739,497
2004	785,878
2005	
2006	



**Explanatory Note**

One of the principal outcomes of the Medicaid program is to increase the number of eligible households receiving this medical insurance benefit. The 2005 data will not be available until analysis occurs following the close of federal fiscal year 2005.

**Title or brief description of the primary data source(s)**

VAMMIS

**Describe how the measure is calculated**

Percentage increase of participants -- (current year total participants - last year's total participants/last year's total participants) \* 100

**Describe how the target is calculated**

Three percent increase from the previous fiscal year.



**Measure #10**

Increase the number of customers satisfied with the products and services offered by the system by 3 percent each fiscal year in fiscal years 2005 and 2006 (establish a baseline during fiscal year 2004)

Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2004	
2005	
2006	

Not enough data to graph

**Explanatory Note**

The establishment of a baseline was attempted by a survey of local department of social services customers Spring/Summer 2004. The customer measures were not conducted in FY 2005 in anticipation of revisions to the agency's strategic plan that would result in a more meaningful measure of customer satisfaction.

**Title or brief description of the primary data source(s)**

Customer Service Survey

**Describe how the measure is calculated**

Measure is calculated by analysis the responses of customer service surveys "Overall Service" satisfaction.

**Describe how the target is calculated**

Three percent increase from the previous fiscal year.

## Office of the Inspector General (A08)

### Agency Head Contact Information

Name: James W. Stewart, III Phone: 804-692-0276  
Email: jim.stewart@oig.virginia.gov

### Planning and Performance Contact Information

Name: James W. Stewart, III Title: Inspector General  
Telephone: 804-692-0276 Email: jim.stewart@oig.virginia.gov  
Agency Website: www.oig.virginia.gov.

### Mission Statement

It is the mission of the Office of the Inspector General to serve as a catalyst for improving the quality, effectiveness, and efficiency of services for people and their families whose lives are affected by mental illness, mental retardation and substance use disorders.

### Objectives

1. Redesign and implement the process for inspecting state facilities to enable more effective system-wide assessment and the formulation of recommendations that will improve care across all facilities by July 1, 2005.
2. Improve the skill of OIG staff through targeted training of staff who have primary responsibility for conducting inspections by July 1, 2006.
3. Expand oversight activities of the OIG to include community providers by July 1, 2006.
4. Design and implement a system for assessing organizational effectiveness of facilities by July 1, 2006.

### Activities

*No Activities have been entered for this agency.*

### Customers

	Growth Trend
Governor's Office	Same
General Assembly	Same

### Governor's and Other Initiatives

#### Status

*No Initiatives have been entered for this agency.*

## Performance Measures

### Measure #1

Percentage of non-emergency inquiries and complaints received by the OIG that are responded to within two business days of receipt. (Emergency inquiries and complaints will be responded to as quickly as possible.)

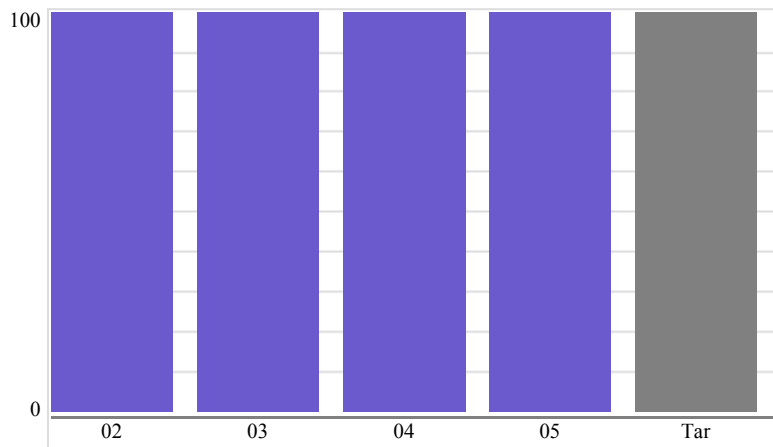
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2002	100.0
2003	100.0
2004	100.0
2005	100.0
2006	



### Explanatory Note

#### Title or brief description of the primary data source(s)

OIG Records

#### Describe how the measure is calculated

Number of non-emergency inquiries and complaints received by the OIG that are reviewed within two business days divided by the total number of non-emergency inquiries and complaints received by the OIG.

#### Describe how the target is calculated

Target is 100% of non-emergency inquiries and complaints received by the OIG.

**Measure #2**

Percentage of critical incident reports reviewed by the OIG within two business days of receipt from DMHMRSAS.

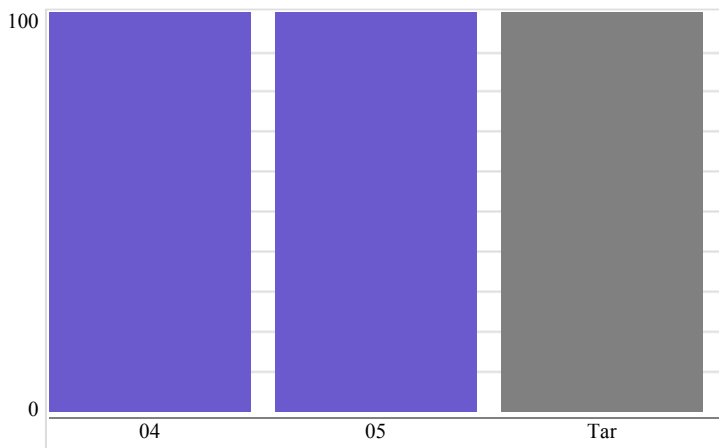
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2004	100.0
2005	100.0
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

OIG records

**Describe how the measure is calculated**

Number of critical incidents reviewed within two business days of receipt divided by total number of critical incident reports received from DMHMRSAS.

**Describe how the target is calculated**

Target is 100% of critical incident reports received from DMHMRSAS.

**Measure #3**

Percentage of state mental health hospitals and mental retardation training centers at which the OIG conducts at least one unannounced inspection within a twelve month period.

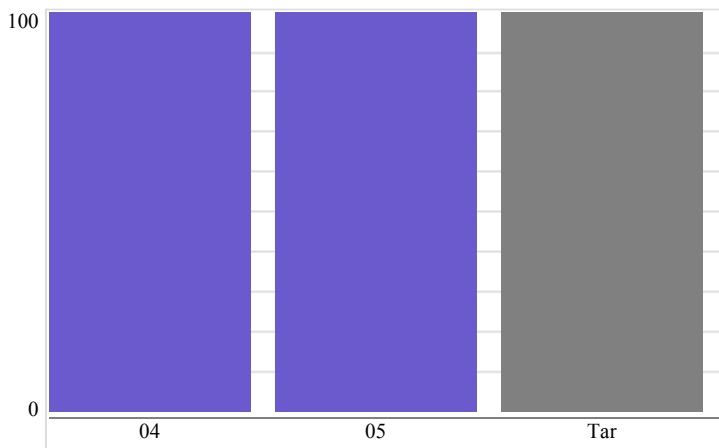
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2004	100.0
2005	100.0
2006	

**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

OIG records

**Describe how the measure is calculated**

Total number of state mental health hospitals and mental retardation training centers at which at least one unannounced inspection is conducted by the OIG divided by the total number of state mental health hospitals & mental retardation training centers.

**Describe how the target is calculated**

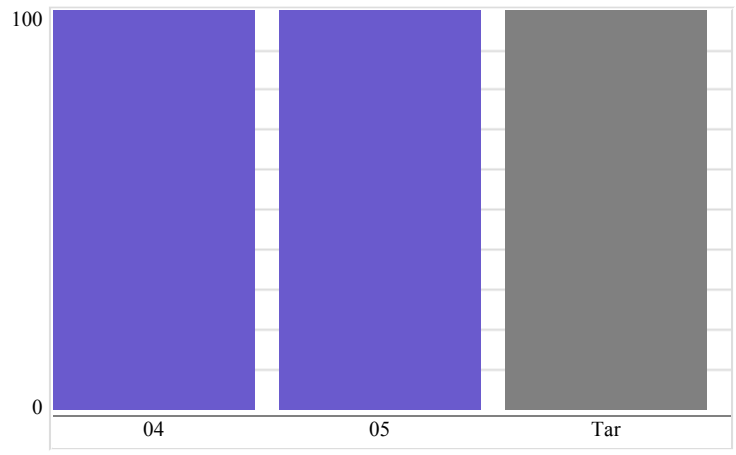
Target is 100% of the state mental health hospitals and mental retardation training centers.

**Measure #4**

Percentage of departmental instructions, state board regulations, and other reports provided by DMHMRSAS that are reviewed by the OIG.

Is this measure a number or percent   
The preferred direction of the trend   
Target Value  Target Date   
Data Begins  Collection Frequency

Year	Measurement	
2004	100.0	
2005	100.0	
2006		



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

OIG records

**Describe how the measure is calculated**

The number of departmental instructions, state board regulations, and other reports reviewed by the OIG divided by the total number of departmental instructions, state board regulations, and other reports received from DMHMRSAS.

**Describe how the target is calculated**

Target is 100% of the departmental instructions, state board regulations, and other reports provided to the OIG by DMHMRSAS.

**Measure #5**

Percentage of reports released by the Governor's Office that are posted on the OIG website within two weeks of the completion of the review process.

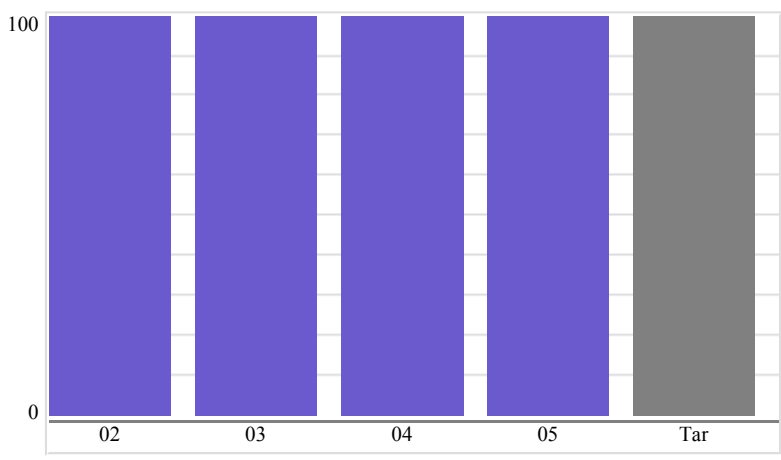
Is this measure a number or percent

The preferred direction of the trend

Target Value  Target Date

Data Begins  Collection Frequency

Year	Measurement
2002	100.0
2003	100.0
2004	100.0
2005	100.0
2006	



**Explanatory Note**

none

**Title or brief description of the primary data source(s)**

OIG Records

**Describe how the measure is calculated**

Number of OIG reports released by the Governor's Office that are posted on the OIG website within two weeks of the completion of the review process.

**Describe how the target is calculated**

Target is 100% of OIG reports that have completed the review process that are released by the Governor's Office.

