Performance Accountability and the Scorecard at the Agency of Human Services

PRESENTATION TO HOUSE HUMAN SERVICES AND SENATE HEALTH AND WELFARE COMMITTEES

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RBA in a Nutshell

2 - kinds of accountability

<u>Population</u> accountability > <u>Population Indicators</u> <u>Performance</u> accountability > <u>Performance Measures</u>

3 - kinds of performance measures

- How much did we do?
- How well did we do it?
- Is anyone better off?

7 – questions, from ends to means Turning the Curve

Common Language

		Term	Framework Idea
ion bility		Outcome	1. A condition of well-being for children, adults, families, or communities (a whole population)
ulat ntal	$\langle \rangle$	Indicator	A measure that helps quantify the achievement of an outcome
Population ccountabili		Strategy	A coherent set of interventions that has a reasoned chance of working (to improve an outcome)
A	(Goal	The desired accomplishment of staff, strategy, program, agency, or service system
ce lity		Performance Measure	A measure of how well a program, agency, or service system is working
Performanc Accountabilit		Quantity	How much are we doing? Measures of the quantity or amount of effort, how hard did we try to deliver service, how much service was delivered
Perfo		Quality	How well are we doing it? Measures of the quality of effort, how well the service delivery and support functions were performed
A A		Impact	<i>Is anyone better off?</i> Measures of the quantity and quality of effect on customer's lives

AHS Strategic Plan

Population outcomes and indicators

- 1. All Vermonters are free from the impacts of poverty
 - a. pre-term birth rateb. employment ratec. achievement gap

2. All Vermonters are healthy and safe

a. rate of obesityb. rate of recidivismc. rate of homelessnessd. rate of fall-related deaths



- a. Medicaid enrollment
- b. access to a patient-centered medical home

Program performance measures from across the Agency:

childcare centers engaged with VDH in developing policy and environmental change strategies to address poor nutrition and physical inactivity.

of people receiving AAA evidencebased healthy aging/strengthening/falls prevention programs

AHS Results Scorecard

- Monitor population indicators and Agency performance measures
- Use data to make decisions
- Use data to work with communities and partners to improve outcomes
- Share data with the public and legislature

R SAStat All Vermonters are Healthy and Safe	Time Period	Actual Value	Target Value	Current Trend
I AHS % of persons age 12+ who need and do not receive alcohol treatment	2012	6%	5%	Š 2
Data Source: National Survey on Drug Use and Health (NSDUH)	2011	7%	5%	Š 1
	2010	8%	5%	7 1
	2009	7%	5%	→ 1
	2008	7%	5%	<u>Й</u> 1
	2007	8%	5%	→ 1
	2006	8%	5%	→ 0
2006 2007 2008 2009 2010 2011 2012 ResultsScorecard.com				
Story Behind the Curve Partners What Works Strategy				All Data Showing
• AHS % of persons age 12+ who need and do not receive treatment for illicit drug use	2012	3%	2%	→ 4
P Stat Vermont Department of Health	Time Period	Actual Value	Target Value	Current Trend
PM VDH Substance Abuse System Capacity: Number of people treated through the ASAM Guided, ADAP provider system.	Q3 2013	5,259	5,000	7 4
Data Source: Vermont Substance Abuse Treatment Information System (SATIS)	Q2 2013	5,145	5,000	🛪 з
	Q12013	4,974	5,000	7 2
5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000	Q42012	4,701	5,000	7 1
	Q3 2012	4,629	5,000	Š 1
	Q2 2012	4,827	5,000	🛪 з
	O1 2012	4,742	5,000	7 2
	QIZUIZ			
Q1 2012 Q2 2012 Q3 2012 Q4 2012 Q1 2013 Q2 2013 Q3 2013 ResultsCorrecard.com	Q12012 Q42011	4,442	5,000	7 1



Act 186 Outcomes and Indicators

Outcomes of Well-Being for Vermonters (Act 186 - Agency of Human Services)

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This Scorecard demonstrates the outcomes of well-being for Vermonters as established in Act 186, and indicators that quantify the status of these outcomes in Vermont. This list only includes those outcomes and indicators that the Agency of Human Services most directly contributes to improving through the work that we do, alongside other public, private, and non-profit sector partners. The Agency of Human Services collects and reports this population-level data annually to the Legislature through the Chief Performance Officer.



<u>Act 186</u>

Vantage Pilot

AHS Performance Accountability

Pre-Term Birth

e =

R Pre-Term All Vermonters are Free from the Impacts of Poverty	Time Period	Actual Value	Target Value	Current Trend
© I VDH AHS % of live resident births that are preterm (< 37 weeks gestation)	2010	8%	8%	¥ 2
P AHS Department for Children and Families	Time Period	Actual Value	Target Value	Current Trend
© PM VDCF AHS SP # of prenatal and postpartum clients who have received home visits through CDD/CIS in a year	2014	4,418	-	7 1
P AHS Vermont Department of Health	Time Period	Actual Value	Target Value	Current Trend
PM VDH Family Planning % of Nurse Family Partnership clients who are counseled postpartum about the health benefits associated with optimal inter-pregnancy interval and receive referral to family planning services, as needed	Q32014	98%	100%	¥ 1
PM VDH MCH % of pregnant smokers seen by WIC who are referred to the 802Quits Network	Q3 2014	34%	100%	7 2
Data Source: WIC Program Administrative Data	Q2 2014	33%	100%	7 1
100% 100% 100% 100% 100% 100%	Q1 2014	32%	100%	→ 1
	Q4 2013	32%	100%	¥ 1
	Q3 2013	34%	100%	7 1
21% 24% 22% 22% 23% 24%	Q2 2013	26%	100%	¥ 1
21% 22% 22% 22% 24%	Q1 2013	31%	100%	🛪 з
Q1 2018 Q2 2018 Q4 2018 Q4 2018 Q1 2014 Q2 2014 Q2 2014 ResultsScorecard.com	Q4 2012	30%	100%	2
	Q3 2012	20%	100%	7 1
Story Behind the Curve Partners What Works Action Plan	Q2 2012	18%	100%	1 More »
PM VDH MCH % of Nurse Family Partnership clients who screen positive for tobacce use who are referred to the 802Quits or other cessation services	Q3 2014	99%	100%	7 1

What the Agency of Human Services is doing to reduce the % of live resident births that are pre-term in Vermont.

Pre-Term Birth

3Squares Enrollment

What does this mean for Legislators?

Programs and Agencies have two kinds of responsibility:

- **1. Program Management:** Produce best possible performance best outcomes for people served
- **2. Community Leadership:** Bring together partners to make progress at the population level

Legislators also have two kinds of responsibility:

- **1. Appropriation:** Support and sustain programs/initiatives that produce the best possible performance and outcomes for people served
- **2. Public Policy:** Set the direction and create the opportunity for partners across sectors to make progress at the population level

How does the Scorecard help?

Performance Management

- Helps AHS monitor and drive performance to improve outcomes at all levels
- Helps keep Governor's Office, Oversight Committees, etc. informed of performance developments

Public Information and Policy-Making

- Presents important population indicators and measures of performance to Legislature for:
 - Oversight
 - Policy decision-making
- One-stop-shop for the public and media seeking data and information related to Vermont data/information and Agency performance.

Department of Health



Tobacco Use

Performance Dashboard: Population Indicators and Performance Measures

Select a measure to see the trend data.



Home > HV2020 > Performance Dashboard > Here



Scorecard



Questions and Comments

Links to Scorecards

AHS: <u>http://humanservices.vermont.gov/copy_of_ahs-results-scorecard</u> Act 186 Vantage Pilot Strategic Plan Indicators Performance Measures

VDH: http://healthvermont.gov/hv2020/index.aspx#hvtoolkit

DAIL: <u>http://app.resultsscorecard.com/Scorecard/Embed/8865</u>

Performance Measures

