

Social Services Appropriations Subcommittee - Line Item Performance Measures

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Health					
Children's Health Insurance Program					
Percent of children less than 15 months old that received at least six or more well-child visits	60%	47%	70%	In name change "less than 15 months" to "less than 30 months"	Core set for 2021 changed to less than 30 months rather than less than 15 months. Used 2020 core set logic to calculate less than 15 months number.
(3-17 years of age) who had an outpatient visit with a primary care practitioner or obstetrics/gynecologist and who had evidence of Body Mass Index percentile documentation	77%	77%	70%	Delete	Only available through 2019, which was measured as 77% (https://stats.health.utah.gov/publications/2020-health-plan-quality/#weight-assessment-and-counseling-for-nutrition-and-physical-activity-for-children-and-adolescents---bmi-percentile---total). According to OHCS, 2020 results should be available in December.
Percent of adolescents who received one meningococcal vaccine and one TDAP (tetanus, diphtheria, and pertussis) between the members' 10th and 13th birthdays	28%	33%	80%		Only available through 2019, which was measured as 38% (https://stats.health.utah.gov/publications/2020-health-plan-quality/#immunizations-for-adolescents---combination-2). According to OHCS, 2020 results should be available in December.
Disease Control and Prevention					
Gonorrhea cases per 100,000 population	90.8	108.7	<89	Propose changing target to <108.7	FY20 Results was updated to 90.8 (from 91.6) to reflect current more accurate data; Data for FY21 is preliminary as UDOH has yet to finalize these case counts. Health believes that changing target to 108.7 to reflect maintaining current rates of infectious would be considered a success.
Percentage of adults who are current smokers	8%	N/A	<7.5%	Delete	We just recently received the 2020 adult current smoker rate and it is at 8.3%. We do not yet have results for 2021.
Complete forensic toxicology law enforcement and medical examiner testing within 45 days	91%	95%	95%	Delete	LE cases: 7878, avg TAT = 31 days; OME cases: 2513, avg TAT 22 days
Utah youth use of electronic cigarettes in grades 8, 10, and 12	N/A	7.8%	<11.1%	(1) Change name to: The rate of youth in grades 8, 10, and 12 who are current vape product users (2) Propose changing target to 7%	The 2021 SHARP survey results show that vaping among youth in grades 8, 10, and 12 fell dramatically from 12.4% in 2019 to 7.8% in 2021. Due to Covid-19, electronic cigarette use behaviors may have changes in unexpected ways. It will be interesting to see if these results remain consistent over time.
				Add measure: Accidental/Undetermined Overdose Deaths Involving at Least One Opioid Prescription (Target = 220)	
Executive Director's Operations					
Percent of known restricted applications/systems that have reviewed, planned for, or mitigated identified risks according to procedure	100%	90%	100%	Delete	COVID-19 necessitated redirecting of security resources to support response efforts.
Births occurring in a hospital are entered accurately by hospital staff into the electronic birth registration system within 10 calendar days	94%	96%	99%	Change name to: Births occurring in a hospital are entered by hospital staff into the electronic birth registration system within 10 calendar days	
Percentage of all deaths registered in the electronic death registration system within five calendar days	91%	92%	80%	Propose changing target to 90%	Last year we updated this measure to align with SUCCESS, that changed the measure from registered within the death registration to registered within 5 days. We are not sure the numbers in this sheet represent the updated numbers we are checking to see if the target needs to change or if the measures for the past three years need to be updated to reflect the measure change. We should have this clarification by next week.

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Number of requests for data products produced by the Office of Health Care Statistics	167	106	139	Delete	It is assumed this is because agencies were more focused on COVID response and so demand for the data was reduced.
Family Health and Preparedness					
Percentage of children who demonstrated improvement in social-emotional skills, including social relationships	61%	54%	69%	Propose changing target to 55%	The Baby Watch Early Intervention Program is revising the Performance Measure target beginning SFY21 to 55%. This revision is due to using a new evaluation tool to measure child progress, which is standardized vs subjective. This tool was implemented for all children entering the early intervention program beginning in November 2018. Through natural attrition, children who entered the program with the subjective tool have now exited, and therefore, we have determined a new target. This target will be proposed to the Office of Special Education Programs in February 2022. The previous target of 69% was also updated to 63% in order to be consistent with how data is being reported to the Office of Special Education Programs for this Performance Measure.
Annually perform on-site survey inspections of health care facilities	79%	77%	80%	Change to: Monthly average for time between inspections for assisted living facilities (Target = 24 months)	
The Bureau will identify five EMS agencies that are considered to be having financial issues for an audit. The Bureau will then review and resolve the audit findings with each agency.	100%	100%	80%	Delete	The Bureau of EMS and Preparedness provides a list of at least 5 agencies each year to the Office of Internal Audit (OIA) for review. Upon completion of the audit, the Bureau and OIA then works with each agency to resolve findings within a reasonable amount of time.
				Add measure: Percentage of Live Utah Births Screened for the Mandated Newborn Heel Stick Conditions (Excluding Those Parents who Refused Newborn Blood Screening) (Target = 100%)	
Local Health Departments					
Number of local health departments that maintain a board of health that annually adopts a budget, appoints a local health officer, conducts an annual performance review for the local health officer, and reports to county commissioners on health issues	13	13	13 or 100%	Delete	
Number of local health departments that provide communicable disease epidemiology and control services including disease reporting, response to outbreaks, and measures to control tuberculosis	13	13	13 or 100%	Delete	
Number of local health departments that maintain a program of environmental sanitation which provides oversight of restaurants food safety, swimming pools, and the Indoor Clean Air Act	13	13	13 or 100%	Delete	
Achieve and maintain an effective coverage rate for universally recommended vaccinations among young children up to 35 months of age	13	13	12 or 90%	Delete	
Reduce the number of cases of pertussis among children under 1 year of age, and among adolescents aged 11 to 18 years	19/66	1/4	<73/<322	Change target to <395	Masking and social distancing made a huge impact on the number of cases.

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Local health departments will increase the number of health and safety related school buildings and premises inspections by 10%	37%	39%	From 80% to 90%	Delete	(1) COVID response measures and school shutdown during the 2020-2021 school season hampered inspections by the LHDS. More inspections occurred during FY21, but the 80% goal was not met. The LHDs have not been able to report those to the UDOH yet. Schools were provided guidance for safely reopening. (2) Utah County HD has not yet reported. For the other 12 LHDs, during FY21 39% of schools, in their jurisdictions, were inspected.
Medicaid and Health Financing					
Average decision time on pharmacy prior authorizations	3.6	5.5	=<24 hours		Sufficient staff have been focused on pharmacy PAs to ensure the statutory turnaround is better than mandated.
Percent of clean claims adjudicated within 30 days of submission	99%	99%	98%		
Total count of Medicaid and CHIP clients educated on proper benefit use and plan selection	168,693	182,096	150,000	Change to: Number of calls related to topics covered by training (Target = staff to work with agency)	The total call volume for the [Heath Plan Representatives] HPRs was higher than in the past due to the increased number of members during the pandemic. During those calls, we focused on HPRs educating more on benefits and plan selections.
Medicaid Sanctions					
Met federal requirements which constrain its use	Yes	Yes	Yes/No	Delete	
Medicaid Services					
Percentage of children 3-17 years of age who had an outpatient visit with a primary care practitioner or OB/GYN and who had evidence of BMI percentile documentation			70%		Only available through 2019, which was measured as 77% (https://stats.health.utah.gov/publications/2020-health-plan-quality/#weight-assessment-and-counseling-for-nutrition-and-physical-activity-for-children-and-adolescents---bmi-percentile---total). According to OHCS, 2020 results should be available in December.
The percentage of adults 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled	61%		65%		Only available through 2019, which was measured as 61% (https://stats.health.utah.gov/publications/2020-health-plan-quality/#controlling-high-blood-pressure). According to OHCS, 2020 results should be available in December.
Annual state general funds saved through preferred drug list (PDL)	\$22.17 million	Unavailable until end November	\$16.0 million	Change to target to \$23.0 million	In general, the reason we have been able to increase PDL savings over the years is through annual review of the PDL list and in contracting for supplemental rebates. As has been seen over the past few years, the year over year savings have been flattening.
				Add measure: Average Days to Approve Placement of Medicaid Clients in Nursing Home Facilities (Target = 7.0)	
Primary Care Workforce Financial Assistance					
Percentage of available funding awarded	100%	50%	100%	Delete	Awards under this program involve multi-year service commitments that are paid over multiple fiscal years as the service obligations are met. Breaking up the performance measures would allow OPRCH to report on the percentage of the annual appropriation awarded during the current fiscal year, while recognizing separately the percentage that will be liquidated in future years.
Total individuals served	78,858	6,149	5,000	Delete	This was a new program in FY21. Due to significant interest in the program, we were able to make more awards than projected.
Total uninsured individuals served	12,450	1,038	1,250	Delete	This was a new program in FY21, and the reported figures reflect partial year results. Specifically, since the first awards were made in December 2020, the initial Progress Reports (covering six months of service) were only received in June 2021.

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Total underserved individuals served	23,561	3,395	1,750	Change to: Percentage of clinicians that remained at their service obligation site for up to one year after completing their obligation (Target = 75%)	This was a new program in FY21. Awardees work in "publicly funded facilities," and their patient mix in year 1 reflected that they provided more support for underserved than uninsured patients.
Rural Physicians Loan Repayment Assistance					
Percentage of available funding awarded	78%	96%	100%	Delete	
Total individuals served	31,064	6,612	7,500	Delete	This program is for physicians working in rural hospitals. Due to COVID-19, the number of total individuals served went down in FY21.
Total uninsured individuals served	2,288	703	1,000	Delete	This program is for physicians working in rural hospitals. Due to COVID-19, the number of uninsured individuals seeking hospital-based services went down.
Total underserved individuals served	10,593	4,265	2,500	Change target to 4,000	
Vaccine Commodities					
Ensure that Utah children, adolescents and adults can receive vaccine in accordance with state and federal guidelines	Done	Done	Done	Replace with: Increase the number of providers reporting vaccine administrations to the Utah Statewide Immunization Information System (USIIS) by 2% over the previous year (Target = staff to work with agency)	
Validate that Vaccines for Children-enrolled providers comply with Vaccines for Children program requirements as defined by Centers for Disease Control Operations Guide	100%	100%	100%	Change to: Vaccination rates among teens age 13-15 with one Tdap (Tetanus, Diphtheria, Pertussis), two Varicella, one Meningococcal conjugate (Target = 80%)	
Continue to improve and sustain immunization coverage levels among children, adolescents and adults	Done	Done	Done	Change to: Percentage of Utah children age 24 months who have received all recommended vaccines (Target = 75%)	
Organ Donation Contribution Fund					
Increase Division of Motor Vehicles/Drivers License Division donations from a base of \$90,000	3%	11%	3%	Change to: Increase Division of Motor Vehicle/Drivers License Division donations (Target = \$103,000)	Approximately one year ago DonorConnect made major revisions to their advertising, public awareness, and marketing efforts. The changes are reflected in the following: 1. Shift from traditional broadcasting to digital media. 2. Significantly greater capacity to track advertising effectiveness, and make adjustments to marketing activities (In other words, DonorConnect can quickly identify and abandon less effective awareness vehicles, and focus on activities that produce higher awareness). 3. Ability to directly target audiences in geographic areas that are underperforming. 4. Greater emphasis on social media activities (Social media has proven to be extremely effective). 5. Enhanced engagement with media partners in the SLC designated market area (DMA).
Increase donor registrants from a base of 1.5 million	2%	12%	2%	Delete	DonorConnect was able to establish a relationship with, and circulate donation awareness materials through the State of Utah's Department of Professional Licensing (DOPL).
Increase donor awareness education by obtaining one new audience	1	1	1	Delete	
Pediatric Neuro-Rehabilitation Fund					

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Number of children that received an intake assessment	66	6	30	Delete	The Covid pandemic had an indirect effect on Pediatric Fund services as elective surgical procedures were put on hold, which is a criteria for enrollment. We established strict mask, exposure and symptom policies to ensure both patient and staff safety. Also during the pandemic, only "essential" patients were being seen and the vast majority of the patient caseload was being cancelled. Due to the cancellation and overall decrease in the number of surgeries, we were not able to enroll nearly the number of patients that were anticipated.
Percentage of children that had an increase in activity	48%	100%	70%	Delete	Because of the pandemic a small number of children were seen making the percentage higher.
Percentage of children that had and increase in body/function	27%	100%	70%	Change name to: Percentage of children that had an increase in functional activity	Because of the pandemic a small number of children were seen making the percentage higher.
Spinal Cord and Brain Injury Rehabilitation Fund					
Number of clients that received an intake assessment	70	58	101	Delete	The pandemic effected the amount of people who were receiving in person services. Also with the addition to some therapies to Medicaid providers were able to use other sources as the fund is payor of last resort.
Number of physical, speech or occupational therapy services provided	4,199	5,377	4,000	Delete	Same as above.
Percent of clients that returned to work and/or school	65%	85%	50%	Change to: Percentage of those receiving Medicaid/Medicare at intake that are no longer using Medicaid/Medicare 12 months after discharge (Target = 50%)	Because of the fund the providers are able to continue therapy having a positive result in getting people back to work or school.
Traumatic Brain Injury Fund					
Number of individuals with traumatic brain injury that received resource facilitation services through the Traumatic Brain Injury Fund contractors	66	48	150	Delete	Providers used telehealth or phone interviews for Resource Facilitation services but COVID-19 made obtaining records difficult.
Number of Traumatic Brain Injury Fund clients referred for a neuro-psych exam or MRI (Magnetic Resonance Imaging) that receive an exam	48	17	40	Change to: The percentage of Traumatic Brain Injury Fund clients referred for a neuro-psych exam or MRI that receive an exam (Target = 100%)	Neuro-psych providers were not providing this service due to no in-person assessments for most of the year.
Number of community and professional education presentations and trainings	27	32	60	Delete	Because of the Covid pandemic, training and education outreach nearly stopped. The three providers were able to adjust to virtual trainings toward the end of the year. One of the providers had a change in leadership as was unable to complete trainings until the positions were filled. All three providers are now fully staffed.
Qualified Patient Enterprise Fund					
License medical cannabis pharmacies by the end of March 2021	3	11	7	(Changed via accountable base budget recommendations)	All 14 medical cannabis pharmacies were licensed and fully operational during FY21.
Ambulance Service Provider Assessment Fund					
Percentage of providers invoiced	100%	100%	100%	Delete	
Percentage of providers who have paid by the due date	78%	85%	=>85%		
Percentage of providers who have paid within 30 days after the due date	88%	96%	=>95%	Delete	
Hospital Provider Assessment Expendable Revenue Fund					
Percentage of hospitals invoiced	100%	100%	100%	Delete	

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Percentage of hospitals who have paid by the due date	80%	84%	=>85%		
Percentage of hospitals who have paid within 30 days after the due date	96%	97%	=>95%	Delete	
Medicaid Expansion Fund					
Percentage of hospitals invoiced	100%	100%	100%	Delete	
Percentage of hospitals who have paid by the due date	80%	84%	=>85%		
Percentage of hospitals who have paid within 30 days after the due date	96%	97%	=>95%	Delete	
Nursing Care Facilities Provider Assessment Fund					
Percentage of nursing facilities reporting by the due date	96%	96%	80%	Delete	Nursing facilities have been more dutiful to report. Additionally, staff have been working with providers to encourage timely submission of their assessment and reporting.
Percentage of nursing facilities who have paid by the due date	83%	82%	85%		
Percentage of nursing facilities who have paid within 30 days after the due date	89%	88%	95%	Delete	Some facilities have not been as judicious in submitting their assessment. Some misinterpretation of the statute has been clarified to help encourage providers to be timely.
Human Services					
Aging and Adult Services					
Medicaid Aging Waiver: Average cost of client at 15% or less of nursing home cost	15%	17%	15%		
Adult Protective Services: Protective needs resolved positively	98%	97%	95%		
Meals on Wheels: Total meals served			9,200		
Child and Family Services					
Administrative performance: Percent satisfactory outcomes on Qualitative Case Reviews for Child Status and System Performance	91% / 91%	91.5%/91.5%	85% / 85%		
Child Protective Services: Absence of maltreatment recurrence within 6 months	93.7%	94.2%	94.6%		
Out of Home Services: Percent of cases closed to permanency outcome/median months closed to permanency	87.5% / 12 months	88.5%/12 months	90% / 12 months		
Executive Director Operations					
Office of Quality and Design: Percent of contracted providers who meet or exceed the Department of Human Services quality standard		53%	85%		
Office of Licensing: Initial foster care homes licensed within three months of application completion	94%	91%	96%		
System of Care: Percent of children placed in residential treatment out of children at-risk for out-of-home placement	3%	10%	10%		
Office of Public Guardian					
Percent of cases transferred to a family member or associate	27%	22%	10%		
Annual cumulative score on quarterly case process reviews	86%	89%	85%		

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Percent reduction in the amount of time taken to process open referrals	New Measure		25%		
Office of Recovery Services					
Statewide Paternity Establishment Percentage (PEP score)			90%		
Child support services: Percent of support paid			70.3%		
Ratio of collections to cost	\$5.00 to \$1	>\$6.25 to \$4.95	> \$6.25 to \$1		
Services for People with Disabilities					
Community-based services: Percent of providers meeting fiscal and non-fiscal requirements of contract	99%	100%	100%		
Community-based services: Percent of individuals who report that their supports and services help them lead a good life (National Core Indicators In-Person Survey)	89%	89%	100%		
Utah State Developmental Center: Percent of maladaptive behaviors reduced from time of admission to discharge	89%		80%		
Substance Abuse and Mental Health					
Local substance abuse services: Percent of clients successfully completing treatment	46%	45%	60%		
Mental health centers: Percent of clients stable, improved, or in recovery while in current treatment (Adult and Youth Outcomes Questionnaire)	88%	88%	84%		
Utah State Hospital: Percent of forensic patients found competent to proceed with trial	84%	70%	65%		
Out and About Homebound Transportation Assistance Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
State Developmental Center Long-Term Sustainability Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
State Developmental Center Miscellaneous Donation Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
State Developmental Center Workshop Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
State Hospital Unit Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
Human Services Client Trust Fund					

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
Human Services Office of Recovery Services (ORS) Support Collections					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
Maurice N. Warshaw Trust Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
Mental Health Services Donation Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements		1	1	New Fund -- New Measure Proposed for FY 2023	
State Developmental Center Patient Account					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
State Hospital Patient Trust Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements	1	1	1		
Suicide Prevention and Education Fund					
Number of internal reviews completed for compliance with statute, federal regulations, and other requirements			1	New Fund -- New Measure Proposed for FY 2023	
Workforce Services					
Administration					
Provide accurate and timely department-wide fiscal administration <u>as measured by audit findings or responses.</u>	0	0	No audit findings	Provide accurate and timely department-wide fiscal administration <u>as measured by audit findings or responses.</u>	
Percent of DWS programs/systems that have reviewed, planned for, or mitigated identified risks	100%	100%	100%		
Percent of Facilities for which an annual facilities risk assessment is completed	100%	100%	98%		
Operations and Policy					

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Labor Exchange - Total job placements	32,486	63,877	30,000/quarter		"The department has focused on increasing awareness of labor exchange services to help connect job seekers with employers. The trend in total job seekers placed follows changes in the economy. Although many Utahns were laid off during the pandemic, the increase in job seeker placements is not reflected in the FY 2020 data because many of those laid off were receiving unemployment and anticipated returning to their previous employer. In addition, for the majority of the past year the state was at near full employment and fewer job seekers were looking for work. Our labor exchange system continues to be updated based on direct employer and job seeker feedback to help meet employer needs and we continue to focus on increasing public awareness of no cost labor exchange services."
TANF Recipients - Positive closure rate	72%	71.2%	78%/month		"Although the economy was impacted by COVID-19 during FY 2021, those laid off were able to access rich unemployment benefits and connect back to employment. Those remaining on cash assistance caseloads during FY 2021 face multiple challenges and barriers to employment and require extra assistance to meet goals and positive closures such as employment or increased earnings. Due to the prescriptive nature of TANF work participation requirements there is often a disconnect between the work participation rate and our rate of positive closure. The countable activities may not always reflect the actual employment activities that families are engaged in."
Eligibility Services - Internal review compliance accuracy	94%	95%	95%		
Utah Data Research Center - Provision of statutory reports related to research	Yes	Yes	Reports provided	Utah Data Research Center - total number of research items completed for the year meeting statutory requirements and research center's priorities	
Nutrition Assistance					
Federal SNAP Quality Control Accuracy - Actives	FFY	95.7%	97%	SNAP accuracy, defined as accuracy of paid benefits as measured by the federal SNAP Quality Control standards and reported nationally by all states.	"Cases are selected randomly for SNAP QC review. State reviewers make a determination whether the case is correct or if there is an error. FNS (our federal partners) re-review a sample and come to an official accuracy rate on active (open) cases. Our 97% target goal is higher than the national expectations. Federal expectation is higher than 94%."
Food Stamps - Certification timeliness	94.4%	95.6%	95%	SNAP certification timeliness, defined as the percentage of cases where a decision of eligibility was made within 30 calendar days.	
Food Stamps - Certification days to decision	13	11	12 days	SNAP days to decision, defined as calendar days from application submission to eligibility decision.	"SNAP policy requires DWS to make a decision of eligibility for SNAP in 30 calendar days. The goal of 12 days is a stretch goal set by the department."
General Assistance					

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Positive closure rate, positive closures include receipt of Supplemental Security Income (SSI) or closed with earnings	63%	55.2%	65%		"GA employment counselors continue to focus on efforts to help long term disabled individuals on GA assistance successfully transition to SSI/SSDI by helping these individuals navigate the SSI/SSDI application process and through communication with the local DDS workers and Social Security office. Over the past year, social security decisions were delayed due to the impacts of the COVID-19 pandemic which has resulted in cases closing for time limits prior to receiving SSDI which in turn has impacted the outcomes."
Average monthly consumers served	603	583	730		"We have observed with improved economic conditions, some have opted to pursue part time employment instead of the General Assistance grant as they can acquire more income from this approach. During the COVID-19 pandemic rich unemployment benefits and other resources have been available to temporarily replace the unemployment increase. We have continued to focus on efforts to improve and simplify the information gathering so that it captures information to identify those truly unable to work and to receive consistent information from doctors as to prevent ""doctor shopping for a diagnosis"". As a result of these changes, we observed a slight normalization in the caseload sizes that have created a variance between older comparison years versus newer comparison years. The number of clients served monthly is smaller in size which also results in swings in data. During the pandemic, those who have been unemployed have been able to receive generous unemployment benefits until they can return to work. The intent of this metric is to monitor enrollment and consider its possible effects on the budget. This is to help the general assistance program remain open for disabled individuals until they can receive social security disability during times of high caseloads with a limited general fund budget."
Internal review compliance accuracy	94%	90.9%	95%		
Unemployment Insurance					
Percentage of new employer status determination made within 90 days after business is liable	97%	97%	98.5%	Percentage of employers registered with the department within 90 days of employers first reporting employee wages.	"This is a nationally reported measure, during the same time period the national rate was 88.5%."
Percentage of Unemployment Insurance separation determinations with quality scores >= 98 points	99%	80%	98%	Percentage of unemployment insurance separation determinations that meet quality standards as outlined and defined by the USDOL.	"This measure is an evaluation of the accuracy of the separation decision, meaning was the reason for loss of employment correctly assessed to accurately determine benefit eligibility, and this measure is reported nationally. This year only contains six months of data, as the measure was temporarily suspended because of the pandemic (has since been reinstated). With the temporary suspension, we believe the current target should remain for the upcoming year, allowing any changes to the target to be assessed with a full year of data."
Percentage of Unemployment Insurance benefits payments made within 14 days	86%	59%	98%	Percentage of unemployment insurance benefit payments made within 14 calendar days.	"The decrease in benefit payments made within 14 days is a direct result of the unprecedented demand for unemployment benefits resulting from the pandemic. Unemployment received over 230,000 new claims for benefits during the final four months of FY2020, a higher number of new claims received in the previous four years combined. While the actual result for FY 2020 fell below the target, with the economy recovering, we expect this to stabilize and believe the target goal to remain a solid target moving forward."

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Utah State Office of Rehabilitation					
Vocational Rehabilitation - Increase the percentage of clients served who are youth		41.2%	>=39.8%	Percentage of youth with disabilities (defined as between ages of 14 - 24) receiving vocational rehabilitation services as compared to total of all individuals receiving vocational rehabilitation services.	
Vocational Rehabilitation - Maintain or increase a successful rehabilitation closure rate		48%	55%		"A "successful closure" is defined as an individual with a disability who has received vocational rehabilitation services that has obtained and/or maintained competitive, integrated employment for at least 90 days at the time of case closure." "Operations were significantly impacted by COVID19. All of our large public events for individuals and families that are typically held Spring - Fall were cancelled due to pandemic related restrictions. In-person classes typically held at the center were also cancelled, redesigned to be provided in electronic formats. Additional online events have now been developed, but will not make up for the in-person events typically held in a year."
Deaf and Hard of Hearing - Increase in the number of individuals served by DSDHH programs	4,134	4,985	8,000	Deaf and Hard of Hearing - Total number of individuals served with DSDHH programs.	
Housing and Community Development					
Number of eligible households assisted with home energy costs	38,070	36,479	28,000	Unique number of eligible households assisted with home energy costs.	"38,087 includes supplemental payments made with CARES Act funding for LIHEAP. Total regular households served was 24,766 and 13,321 households received a supplemental benefit. We believe the target to still be appropriate."
Number of low income households assisted by installing permanent energy conservation measures	362	333	504	Number of unique low income households assisted by installing permanent energy conservation measures.	"FY20 Production was interrupted due to the COVID-19 pandemic. Program was halted in the last month of Q3 and all of Q4."
			2800	Affordable housing units funded from Olene Walker and Private Activity Bonds.	"This measure reports the number of units funded from the Olene Walker and Private Activity Bond. Given existing funding, the target for FY 2022 is 2,800 units."
Office of Homeless Services					
Reduce average length of stay in Emergency Shelters	FFY	1.70%	10%		"This measure looks at all Emergency Shelter and Transitional Housing projects and finds the average number of days that a person was homeless in sheltered homelessness during the reporting period."
	19.43%		Reduce 10%	New Goal - HUD Performance Measure: Length of time persons remain homeless	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30) as reported in the Homeless Management Information System. FFY18 _ 54.5 days FFY19 _ 55.11 days FFY20 _ 65.82 days FFY21 Goal _ 59 days https://www.omnicalculator.com/math/percentage-change "

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
					"This measure evaluates how many people exited homelessness to permanent housing 24 months before the reporting period, then calculates how many returned to homelessness at different intervals.
	-9.38%	FFY	Reduce 10%	New Goal - HUD Performance Measure: The extent to which persons who exit homelessness to permanent housing destinations return to homelessness	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30). FFY18 _ 34% FFY19 _ 32% FFY20 _ 29% FFY21 Goal _ 26% https://www.marshu.com/articles/calculate-percent-increase-decrease-difference-between-percent-percentages-calculator.php "DWS Additional Information - This measure represents an unduplicated count of people in Emergency Shelter and Transitional Housing projects during the reporting period.
	-15.48%	FFY	Reduce by 8%	New Goal - HUD Performance Measure: Number of homeless persons	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30) as reported in the Homeless Management Information System. FFY18 _ 13,570 FFY19 _ 12,832 FFY20 _ 10,846 FFY21 Goal _ 9,978 https://www.omnicalculator.com/math/percentage-change "DWS Additional Information - This measure shows the percentage of people only in CoC-federally funded programs who increased income during the reporting period. Individuals have not exited from the project during the reporting period and have been in the project for at least 365 days ("Stayers"). • CoC programs are programs funded through the CoC competition with HUD.
	16.13%	FFY	Increase 10%	New Goal - HUD Performance Measure: Jobs and income growth for homeless persons in CoC Program-funded projects	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30) as reported in the Homeless Management Information System. FFY18 _ 39% FFY19 _ 31% FFY20 _ 36% FFY21 Goal _ 40% https://www.marshu.com/articles/calculate-percent-increase-decrease-difference-between-percent-percentages-calculator.php

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
					"DWS Additional Information - This measure includes all Emergency Shelter, Transitional Housing, and Permanent Housing projects' enrollment start dates during the reporting period. The measure then looks back 24 months to see if 10 the individual experiencing homelessness was in another Emergency Shelter, Transitional Housing, and Permanent Housing project during that time. If they were not, they are considered first-time homeless.
	-16.83%	FFY	Decrease 6%	New Goal - HUD Performance Measure: Number of persons who become homeless for the first time	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30) as reported in the Homeless Management Information System. FFY18 _ 9,258 FFY19 _ 8,937 FFY20 _ 7,433 FY21 Goal _ 6,987 https://www.omnicalculator.com/math/percentage-change "DWS Additional Information - This measure looks at people who retained permanent housing or exited to a permanent housing destination during the reporting period.
	94.81%	FFY	93% or above	New Goal - HUD Performance Measure: successful housing placement - Successful exits or retention of housing from Permanent Housing (PH)	Data reported for HUD performance measures is for the Federal Fiscal Year time frame (October 1 - September 30) as reported in the Homeless Management Information System. FFY18 _ 93.41% FFY19 _ 92.97% FFY20 _ 94.81% FFY21 Goal _ 93% or above"
			TBD	New Goal - Goal centered in overall health improvement (mental, physical, behavioral) - to be developed in conjunction with the strategic plan, HMIS improvement projects, and identification of an assessment tool by October 1, 2022	"These new performance measure categories are being suggested per information gathering by the Homelessness Coordinator and the Office of Homeless Services (OHS). This new structure on the governance of homeless services and the creation of OHS went into effect three months ago, on July 1, 2021. The Homeless Coordinator, along with the OHS, have been developing plans for changes that need to be implemented, at which time this goal can be more formalized."
			TBD	New Goal - Goal centered in overall health improvement (mental, physical, behavioral) - to be developed in conjunction with the strategic plan, HMIS improvement projects, and identification of an assessment tool by October 1, 2022	"These new performance measure categories are being suggested per information gathering by the Homelessness Coordinator and the Office of Homeless Services (OHS). This new structure on the governance of homeless services and the creation of OHS went into effect three months ago, on July 1, 2021. The Homeless Coordinator, along with the OHS, have been developing plans for changes that need to be implemented, at which time this goal can be more formalized."

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
			TBD	New Goal - Number of chronically homeless individuals who obtain permanent housing.	"This new performance measure is suggested because often people who experience chronic homelessness have multiple chronic and disabling health and behavioral health conditions. These individuals often have frequent hospitalizations and emergency room visits, as well as may use crisis and institutional care in ways that are very costly. Housing and wrap around support services are a well researched and effective intervention. A report from HMIS will need to be developed in order to run data for this measure. Data may be available for this measure by November 30, 2021."
Special Service Districts					
Total pass - through of funds to qualifying special service districts in counties of the 5th, 6th, and 7th class	Yes	Yes	Completed Quarterly	This money comes from Mineral Lease Funds. Given that DWS is simply a passthrough agency and monitoring does not occur, we suggest this PM be deleted and replaced with the two new PMs below. List of how much is spent in each county Passthrough funds to qualifying special service districts	
State Small Business Credit Initiative Program Fund					
Minimize loan losses		0%	<3%		
Permanent Community Impact Fund					
New receipts invested in communities annually	100%	100%	100%		"Because all new CIB funding is spent annually, this measure should be replaced. For FY 2021 this new PM measure was not tracked, if approved, we will begin to track the data for this PM in FY 2022 and moving forward."
Fund Regional Planning Program to assist local communities	58	55	24 communities	Provide technical assistance, prepare tools, guides, and resources to ensure communities meet compliance with land use planning regulations Note: in SB 7 "The Community Impact Board funds the Regional Planning Program and community development specialists, who provide technical assistance, prepare tools, guides, and resources to ensure communities meet compliance with land use planning regulations"	"These activities are 100% reliant on eligible communities requesting CIB funds for planning and study activities as described in the legislation. Q1 FY 2022 only 3 applications were received. We believe the target of 24 for FY 2022 is appropriate."
Maintain minimum ratio of loan-to-grant funding for projects	77%	51%	45% loans/55% grants	Maintain minimum ratio of loan (45%) to grant (55%) funding for projects.	The loan to grant ratio of 45% to 55% was adopted by the CIB board based on previous audits, managing the balance of the fund, and the variety of factors that impact the final outcome (i.e. - type of project, geography, population, etc...). For FY 20 the types of projects resulted in missing the target ratio, however for FY21 we are projecting a 51% loan to 49% grant ratio; better aligned with the given target.
Olene Walker Housing Loan Fund					

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Housing units preserved or created	985	1,002	811	New target: 2750	"Units preserved or created vary based on applications received. Each project submitted is based on the community need. Some projects are much larger than others to accommodate the area being served. Whether preserved or created, both are critical to affordable housing." "DWS agrees that the target can be raised and proposes the new target to be 2,750. This new target was chosen factoring in the supply chain concerns / issues weighted by the improving economy and optimism is discussions with developers given the current economic activity. The target is dependent on current market conditions, as such DWS believes this target to be reasonable and a stretch goal."
Construction jobs preserved or created	3,390	3,036	2,111		"This is a measure of leveraging funds; so for every \$1.00 of Olene Walker Housing Loan Funds there was \$15.89 of other funding source dollars in housing projects funded by the Olene Walker Housing Loan Fund."
Leveraging of other funds in each project to Olene Walker Housing Loan Fund monies	15.89	14.78:1	15:1		
Uintah Basin Revitalization Fund					
Provide Revitalization Board with support, resources and data to allocate new and re-allocated funds to improve the quality of life for those living in the Uintah Basin	\$8,041,861	\$5,510,925	Allocate revenues within 1 year	Propose new measure	"DWS agrees that this measure is lacking and staff are actively exploring options to improve it. Measures such as establishing a goal to measure the ratio of admin used / total allocated funding to measures admin efficiency. Or measure the average time to release of funds (including both approval and expense request) could measure efficiency. We kindly request another year to study the above proposals and verify whether such data could be collected. It is important to note that DWS staff assist the board but don't determine applicants or funding decisions. As a result, we believe the above potential measures make the most sense for new performance measures."
Navajo Revitalization Fund					
Provide support to Navajo Revitalization Board with resources and data to enable allocation of new and re-allocated funds to improve the quality of life for those living on the Utah portion of the Navajo Reservation	\$1,584,593	\$863,350	Allocate revenues within 1 year	Propose new measure	"DWS agrees that this measure is lacking and staff are actively exploring options to improve it. Measures such as establishing a goal to measure the ratio of admin used / total allocated funding to measures admin efficiency. Or measure the average time to release of funds (including both approval and expense request) could measure efficiency. We kindly request another year to study the above proposals and verify whether such data could be collected. It is important to note that DWS staff assist the board but don't determine applicants or funding decisions. As a result, we believe the above potential measures make the most sense for new performance measures."
Qualified Emergency Food Agencies Fund					
Number of households served by QEFAF agencies	45,204	56,597	50,000		"In FY18, Most agencies were reporting households served while others reported individuals served. We are working to have all agencies report households served for future reporting."
Percent of QEFAF funds obligated to QEFAF agencies	100%	100%	100%		
Intermountain Weatherization Training Fund					
Number of individuals trained each year	3	7	>=6		"DWS believes that measuring the number of individuals training is measuring impact. This measure is specific to the training of private contractors. The IWTF trains private contractors, but it is a secondary focus to the primary mission of training Weatherization personnel, so that they can deliver the program locally. DWS provides training and certification to private individuals to match industry need."

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
	399	843	400	Excluding contractors, the total number of weatherization assistance program individuals trained.	"With this additional PM, the new PM added to the existing PM would equal total individuals trained at the center." Performance comment: "FY 2021 was an outlier year due to COVID – 19. During lock down we did a tremendous amount of training."
Utah Community Center for the Deaf Fund					
Increase the number of individuals accessing interpreter certification exams in Southern Utah		0	25		"New measure as adopted in legislative intent language in the 2021 General Session, SB 7, Item 101. The implementation of this was delayed by COVID and the unavailability of certain technology and equipment. The department hopes to have the testing lab up by the end of October, 2021."
Individuals with Visual Impairment Fund					
Grantees will maintain or increase the number of individuals served	FFY	FFY	>=165		New measure as adopted in legislative intent language in the 2021 General Session, SB 7, Item 94. Contracts for this are on a Federal Fiscal year, so the department will have FY 2021 numbers in November for SFY21.
Grantees will maintain or increase the number of services provided			>=906	Number of individuals provided low-vision services	"New measure as adopted in legislative intent language in the 2021 General Session, SB 7, Item 94. Contracts for this are on a Federal Fiscal year, so the department will have FY 2021 numbers in November for SFY21. "This measures the number of services provided to individuals identified as low-vision across the state."
Individuals with Visual Impairment Vendor Fund					
Funds used to assist different business locations with purchasing upgraded equipment	9	5	12	Number of business locations receiving upgraded equipment purchased by fund will meet or exceed previous year's total	"Decrease in numbers is directly related to reduced access to closed business locations during COVID19."
Funds used to assist different business locations with repairing and maintaining of equipment	23	21	32	Number of business locations receiving equipment repairs and/or maintenance will meet or exceed previous year's total	"Decrease in numbers is directly related to reduced access to closed business locations during COVID19."
Maintain or increase total yearly contributions to the Business Enterprise Program Owner Set Aside Fund	\$33,166	\$33,166	\$70,000/year	Business Enterprise Program will establish new business locations in government and/or private businesses to provide additional employment opportunities; target = 4	"4 new locations is an appropriate number because of the restrictions on spending for this fund and the trend towards telework which decreases location opportunities."
Unemployment Compensation Fund					
Unemployment Insurance Trust Fund balance is greater than the minimum adequate reserve amount and less than the maximum adequate reserve amount	No - Less than minimum	\$753,819,068	Varies		"The minimum and maximum adequate reserve are defined in state statute. While there is not a penalty for being outside the max and minimum range, falling below the adequate range increases the risk of trust fund insolvency."
The average high cost multiple is the Unemployment Insurance Trust Fund balance as a percentage of total Unemployment Insurance wages divided by the average high cost rate	1.3	1.23	Equal to or greater than 1	Maintain the average high cost multiple, a nationally recognized solvency measure, greater than 1 for the Unemployment Insurance Trust Fund balance.	"The US Department of Labor (USDOL) measure that evaluates the health of each state's Unemployment Insurance trust fund is called the average high cost multiple. The higher the number, the healthier the fund. USDOL recommends each state has a score of at least "1." A score of 1 represents a state's ability to pay the average weekly benefit amount for one year without any additional tax revenue. For Utah, the metric has declined during FY 2020 as a direct result of the unprecedented demand for unemployment benefits resulting from the pandemic. While it has decreased, it remains above the target goal."

Performance Measure Name	FY20 Results	FY21 Results	Target	Proposed Changes to Performance Measures and Targets	Comments
Contributory employers Unemployment Insurance contributions due paid timely	91%	94%	>=95%	"Contributory employers unemployment insurance contributions due paid timely, or paid by the employer before the last day of the month that follows each calendar quarter end."	

For more years of historical data for many measures please visit <https://cobi.utah.gov/2021/5/overview> and look for entries on the "Performance" tab after finding the budget program of interest.