

# MiScorecard Performance Summary

**Business Unit:** Human Services  
**Executive/Director Name:** Maura Corrigan  
**Reporting Period:** Jul 2014

**Green** >90% of target  
**Yellow** >= 75% - 90% of target  
**Red** <75% of target  
 Date Approved: 8/15/2014

Metric ID	Metric	Status	Progress	Target	Current	Previous	Frequency	Metric Definition
<b>Improve Employee Relations</b>								
DIV1	Deliver online diversity training			90%	0%	0%	CY Annually	Percent of DHS staff who have taken online diversity training (approximately 12,000 staff)
<b>Child Safety, Well-Being and Permanence</b>								
YAVFC2	Develop a work plan for YAVFC Implementation (if approved)			Done 2/1/14	N/A		CY Annually	Develop a work plan for implementation by 2/1/2014 (if decision to implement is approved).
<b>Demonstrate Good Stewardship of Taxpayer Dollars</b>								
F1	Recipient Front End Eligibility (FEE) Investigation Referrals			30,000	Annual metric	25,801	FY Annually	FEE is a fraud detection program to reduce errors and prevent fraud prior to issuance of public assistance. Count of FEE investigation referrals received by OIG.
F2	Recipient FEE and Fraud Investigations Completed			35,000	Annual metric	34,759	FY Annually	Measurement of pre and post certification investigations completed by OIG Staff.
EF1	Cross Agency Fraud Analysis			6,000	Annual metric	4,865	FY Annually	Number of OIG investigations initiated from cross agency data comparison.
R1	Total amount of Food Assistance Program (FAP) recoupment claim dollars collected.	Green	👍	\$10200000.00	\$9515965.48	\$8379629.79	FY Annually	FY dollar amount collected by the state for all FAP claims: client error, agency error, and intentional fraud.
R2	FAP recoupment from client error and intentional fraud.	Green	=	\$2630000.00	\$2422381.07	\$2422381.07	FY Annually	FY dollar amount retained by the state for recovery of FAP client error and Intentional Program Violation (IPV) claims.
R4	Office Quality Assurance identified FAP over-issuance claims processed timely.			100	Annual Metric	90	FY Annually	Food and Nutrition Service requires the department to evaluate and establish claims identified through Quality Assurance reviews within 90 days of referral.
AHP1	Medical Hearings Pilot Project with Spectrum Hospital	Green	👎	25%	33%	38%	Quarterly	Reduce administrative hearing requests that proceed to the hearing level by 25% of the requests received. This reduction will be the result of the introduction of the meaningful prehearing conference.
CAP1	Corrective Action Plan Development	Green	=	100%	100%	100%	Monthly	Ensure that a Corrective Action Plan is developed for all valid audit findings.
CAP2	Corrective Action Plan Implementation	Green	=	100%	100%	100%	Monthly	Monitor and report on the status of all open Corrective Action Plans to ensure timely resolution.
F-3	Food assistance payment accuracy rate	Green	👍	94.00%	96.00%	95.76%	Monthly	Percent of benefits accurately issued to clients based on audits completed by the Office of Quality Assurance & Internal Control.
<b>Interrupt Generational Poverty and Support Families</b>								
P2P1	Decrease chronic absenteeism			100%	0%	0%	FY Annually	Percent of Pathways schools which have decreased chronic absenteeism by 33% from the previous school year. Pathways schools are considered locations that have been fully converted to the Pathways model for a full school year (152 schools for the 2013-2014 school year).
P2P2	Create Community Schools	Green	=	24	23	23	Monthly	Create a Community School model within Detroit, Flint, Pontiac, and Saginaw that includes a success coach and a community school coordinator to better link additional supporting services within the school for the students and surrounding community. Services can include health clinics, employment services, literacy classes, tutoring, mentoring, transportation, housing solutions, etc.
P2P3	Increase number of Pathways sites statewide.	Green	=	184	169	169	Monthly	Increase number of Pathways sites statewide
Vet1	Veterans currently receiving DHS assistance and VA referrals			500	378	0	CY Annually	Number of DHS customers who have been identified through the (CO-Location Pilot) as Veterans through the PARIS (federal veterans database) file and referred to the VA
Vet2	Veterans who were receiving DHS assistance and as a result of the DHS referral process are now receiving VA assistance.			100	55	0	CY Annually	Number of Identified Veterans as a result of the DHS/VA referral process, who are now receiving VA benefits and disbursements
Vet3	DHS/VA CO-Location Veteran Project Expansion			2	1	0	CY Annually	Number of state-wide Co-Location Pilot Programs to be developed
Vet4	DHS Kiosk-Expansion to Assist Veterans			12	8	0	CY Annually	Increase the number of kiosks/computers available to veterans in community locations (including VA housing, churches, food pantries, homeless shelters, etc.) by 12
Vet5	External Veteran Outreach			8	8	0	CY Annually	Number of veteran outreach forums provided
Path3	Meet Monthly Federal Work Participation Rate	Green	👍	50.00%	60.72% FY 2014 Oct 2013 - May 2014	58.96%	Monthly	The participation rate of the state for all families receiving federally funded TANF that includes an adult or minor child head of household who is engaged in work or employment and training activities, recorded as a percentage.
Path4	Recognize successful clients under Vision 100 plans.	Green	=	1	3	3	Quarterly	A client who completes the 21-day PATH program and becomes employed and as a result a FIP case is closed or is reduced due to earned income and who has shown exemplary characteristics or qualities to move toward independence
Path5	Establish Employee Resource Networks (ERN) <sup>1</sup>	Yellow	👍	3	2	0	FY Annually	Establish two ERN's by 9/30/14
EAP	Energy Assistance Program <sup>2</sup>	Green	👍	50.00%	52.02%	41.50%	Monthly	Decrease in the number of State Emergency Relief

									Program requests, as compared to previous fiscal year Average Net Registrations. (FY13 SER Net Registrations per month= 51841.6)
<b>Improve Employee Relations</b>									
COM1	Local office visits by Director and Chief Deputy <sup>3</sup>	Green		100.00%	65.625%	40.625%	Monthly		The percentage of DHS counties personally visited by the Director or Chief Deputy. Visit all remaining counties (32) by 12/31/2014
DIV3	Discriminatory Harassment training for new employees	Red		90%	35%	26%	Quarterly		Percent of all new hires who have taken the training within four weeks of start date.
DIV4	Discriminatory Harassment training for current employees	Yellow		90.00%	75.20%	85.00%	FY Annually		Percent of DHS employees who have taken the online quick knowledge training by 9/30/2014.
LEAD2	Supervisory training			80%	100%		Twice a Year		Percent of new DHS first-line supervisors participating in NSI within first 6 months of appointment (first measure by April 2014)
COM2	Bureaucracy Busters/"Anonymous Box" Ideas implemented/responded			50%	62%	0%	Quarterly		Number of responses and ideas implemented
COM3	Constituent concerns responded and closed			90%	89%	0%	Quarterly		Percentage of constituent concerns responded to and closed
LEAD1	Decrease Turnover Rate	Green		6.0%	4.3%	4.5%	Quarterly		The statewide ratio of the number of workers replaced in a given time period to the average number of workers.
<b>Child Safety, Well-Being and Permanence</b>									
MSA1	Children exiting foster care to permanent placements.	Green		83.0%	79.3%	78.5%	Monthly		Of all children who were served in foster care during the reporting period, what percent exited the foster care system to permanent placements.
MSA2	Children free from recurrence of maltreatment.	Green		94.60%	92.1%	93.70%	Monthly		Of all the children who were victims of child abuse/neglect, Category I, II, or III cases during the first 6 months of the reporting period, what percent were not victims of another Category I, II, or III case within a 6-month period.
MSA3	Children free from abuse or neglect in foster care.	Green		99.68%	99.06%	99.03%	Monthly		Of all the children who were served in foster care during the reporting period, what percent were not victims of a Category I, II, or III case within the period, with the perpetrator being a foster care parent or child caring institution staff.
MSA4	Children adopted within 24 months.	Green		36.60%	42.7%	42.50%	Monthly		Percent of children legally free for adoption who were discharged from foster care to a finalized adoption within 24 months of date of latest removal from home.
MSA5	Youth achieving permanency through juvenile guardianships.	Green		165	508	458	CY Annually		The number of juvenile guardianships finalized during the calendar year. 11/14/2013 - Will be measure for 2013 calendar year.
YAVFC1	Assess potential to implement YAVFC for eligible juvenile justice youth	Green	=	Done 12/1/13	Completed	Completed	CY Annually		Assess all policy, practice, MiSACWIS/technology, budget, training and legislative impacts necessary to implement the expansion of YAVFC for eligible juvenile justice youth by 12/1/2013.
MiTeam	Implement enhanced content of MITEAM child welfare case practice model.			By 2/1/14	0	0	FY Annually		Begin implementation of enhanced MITEAM content in three champion counties by 2/1/2014.
SS	Provide leadership in the Michigan Safe Sleep Task Force.	Green		90.00%	100.00%	0.00%	Quarterly		Provide leadership in the Michigan Safe Sleep Task Force (DHS, DCH, MDE, stakeholders) to develop and monitor a work plan which will coordinate statewide activities in reducing the number of deaths from unsafe sleep situations. Develop, monitor and update the Michigan Safe Sleep Task Force Work Plan on a quarterly basis.
IVE1	Implement Protect MI FAMILY, Michigan's Title IV-E Demonstration Waiver project.	Green	=	Done 2/28/14	Completed	Completed	CY Annually		Protect MI FAMILY is a prevention strategy for Children's Protective Services families in three counties. Submit semi-annual progress report to the federal government by 2/28/2014 and 8/29/2014.
Elder	Implement Michigan's Elder Abuse Protocol.			20	0		FY Annually		Number of Michigan counties to adopt and implement the Michigan Elder Abuse Protocol by 9/30/2014.

<sup>1</sup> The status color for this metric reflects breaking points at 0% to 90% of the established target value.

<sup>2</sup> The status color for this metric reflects breaking points at 10% to 50% of the established target value.

<sup>3</sup> The status color for this metric reflects breaking points at 15% to 25% of the established target value.