

Performance Update for Senior Leadership Team - September 2017

Adult Protective Services Program Office

Adult Protection - Program Scorecard September 2017

| Region | Circuit | Reports Received ¹ | | Investigations Commenced Within 24 Hours (Target = 99%) | | Victims Seen Within 24 Hours (Target = 93%) | | Initial ASAs Submitted Within 6 Days (Target = 98%) | | Investigations Closed Within 60 Days (Target = 99%) | |
|--------|-----------------------------|-------------------------------|-----------------------|---|----------|---|----------|---|----------|---|----------|
| | | Current | Previous ² | Current | Previous | Current | Previous | Current | Previous | Current | Previous |
| NWR | 1 | 177 | 198 | 100.00% | 99.55% | 98.50% | 94.12% | 100.00% | 99.55% | 99.19% | 100.00% |
| NWR | 2 | 158 | 178 | 98.36% | 100.00% | 94.24% | 96.79% | 100.00% | 100.00% | 99.18% | 100.00% |
| NWR | 14 | 103 | 117 | 100.00% | 100.00% | 94.44% | 95.54% | 100.00% | 100.00% | 100.00% | 100.00% |
| | | 438 | 493 | | | | | | | | |
| NER | 3 & 8 | 170 | 195 | 100.00% | 100.00% | 91.43% | 93.98% | 99.38% | 100.00% | 98.76% | 99.49% |
| NER | 4 | 226 | 270 | 100.00% | 99.71% | 93.98% | 92.00% | 96.15% | 99.71% | 98.08% | 95.00% |
| NER | 7 | 266 | 323 | 100.00% | 100.00% | 93.90% | 93.67% | 99.56% | 99.00% | 94.22% | 94.68% |
| | | 662 | 788 | | | | | | | | |
| CNR | 5 | 340 | 333 | 100.00% | 100.00% | 97.95% | 98.20% | 100.00% | 100.00% | 98.61% | 100.00% |
| CNR | 9 | 254 | 293 | 100.00% | 100.00% | 99.08% | 97.75% | 100.00% | 100.00% | 98.01% | 99.52% |
| CNR | 10 | 197 | 176 | 100.00% | 100.00% | 98.44% | 97.14% | 100.00% | 100.00% | 100.00% | 100.00% |
| CNR | 18 | 238 | 295 | 100.00% | 100.00% | 97.78% | 98.91% | 100.00% | 99.18% | 100.00% | 100.00% |
| | | 1029 | 1097 | | | | | | | | |
| SCR | 6 | 435 | 496 | 99.38% | 99.12% | 93.98% | 93.58% | 99.69% | 99.34% | 100.00% | 100.00% |
| SCR | 12 | 182 | 218 | 100.00% | 100.00% | 96.03% | 99.43% | 100.00% | 100.00% | 100.00% | 100.00% |
| SCR | 13 | 247 | 310 | 98.37% | 99.18% | 93.09% | 92.22% | 97.28% | 100.00% | 97.83% | 100.00% |
| SCR | 20 | 246 | 248 | 99.44% | 100.00% | 91.75% | 98.52% | 97.21% | 100.00% | 100.00% | 100.00% |
| | | 1110 | 1272 | | | | | | | | |
| SER | 15 | 229 | 288 | 100.00% | 100.00% | 96.02% | 95.96% | 97.63% | 98.05% | 97.16% | 99.22% |
| SER | 17 | 305 | 350 | 100.00% | 100.00% | 96.35% | 97.85% | 100.00% | 100.00% | 99.64% | 100.00% |
| SER | 19 | 127 | 151 | 100.00% | 100.00% | 95.50% | 94.02% | 97.12% | 97.22% | 100.00% | 98.15% |
| | | 661 | 789 | | | | | | | | |
| SNR | 11 | 340 | 387 | 100.00% | 100.00% | 93.31% | 93.17% | 99.56% | 100.00% | 98.23% | 99.34% |
| SNR | 16 | 6 | 12 | 100.00% | 100.00% | 100.00% | 90.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| | | 346 | 399 | | | | | | | | |
| State | | 4,246 | 4,520 | 99.75% | 99.82% | 95.29% | 95.37% | 99.14% | 99.60% | 98.71% | 99.07% |
| | % Inc./Dec. vs. Prev. Month | -6.06% | | | | | | | | # Invs. in Backlog, Statewide | 32 |

Statewide Services and Wait Lists

| HCDA Waitlist Population | | HCDA Clients Being Served | | CCDA Waitlist Population | | CCDA Clients Being Served | | % of Adults with Disabilities Receiving Services Who are Not Placed in a Nursing Home, FY 16/17 & 15/16 | |
|--------------------------|----------|---------------------------|----------|--------------------------|----------|---------------------------|----------|---|--------|
| Current | Previous | Current | Previous | Current | Previous | Current | Previous | | |
| 546 | 528 | 1,080 | 1,015 | 1,750 | 1,814 | 292 | 298 | 99.08% | 99.42% |

Per Capita Abuse Rates for Adults with Disabilities, Age 18-59 and Elderly Person, per 1,000/Population

| Abuse Rate Among Persons with Disabilities per 1,000 | | Abuse Rate Among Elderly Persons, per 1,000 | |
|--|----------|---|----------|
| Current | Previous | Current | Previous |
| 0.09 | 0.13 | 0.09 | 0.15 |

¹ Data in "Previous" columns represents August 2017, unless otherwise noted.

² Reports received is a workload measure counting Initial and Additional reports, excluding Supplemental reports

 indicates missing target by one-half percent or less
 indicates missing target by more than one-half percent