

Performance Update for Senior Leadership Team - December 2017
Adult Protective Services Program Office

Adult Protection - Program Scorecard
January 2018

| 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 | 164 | 168 | 100.00% | 100.00% | 89.09% | 94.80% | 100.00% | 99.40% | 99.33% | 100.00% |
| NWR | 2 | 198 | 134 | 99.36% | 100.00% | 92.98% | 92.19% | 99.36% | 99.12% | 99.36% | 100.00% |
| NWR | 14 | 82 | 79 | 98.73% | 100.00% | 89.29% | 95.35% | 98.73% | 100.00% | 100.00% | 100.00% |
| | | 444 | 381 | | | | | | | | |
| NER | 3 & 8 | 213 | 209 | 99.56% | 100.00% | 88.55% | 92.17% | 99.12% | 99.33% | 100.00% | 98.66% |
| NER | 4 | 280 | 202 | 98.64% | 100.00% | 92.83% | 89.71% | 100.00% | 99.56% | 99.55% | 100.00% |
| NER | 7 | 227 | 209 | 100.00% | 100.00% | 94.22% | 96.74% | 98.10% | 98.83% | 97.14% | 89.06% |
| | | 720 | 620 | | | | | | | | |
| CNR | 5 | 297 | 302 | 100.00% | 100.00% | 99.14% | 99.58% | 100.00% | 100.00% | 100.00% | 100.00% |
| CNR | 9 | 246 | 239 | 100.00% | 100.00% | 98.03% | 97.62% | 100.00% | 100.00% | 100.00% | 99.15% |
| CNR | 10 | 188 | 175 | 100.00% | 100.00% | 97.16% | 97.92% | 100.00% | 99.24% | 100.00% | 100.00% |
| CNR | 18 | 275 | 206 | 100.00% | 100.00% | 98.40% | 99.43% | 100.00% | 100.00% | 100.00% | 100.00% |
| | | 1006 | 922 | | | | | | | | |
| SCR | 6 | 457 | 408 | 100.00% | 99.72% | 95.58% | 94.29% | 99.72% | 100.00% | 100.00% | 100.00% |
| SCR | 12 | 207 | 162 | 100.00% | 100.00% | 92.68% | 95.65% | 99.12% | 99.35% | 100.00% | 100.00% |
| SCR | 13 | 272 | 250 | 97.97% | 100.00% | 90.60% | 94.56% | 100.00% | 100.00% | 100.00% | 100.00% |
| SCR | 20 | 246 | 217 | 99.02% | 100.00% | 98.18% | 98.42% | 99.51% | 100.00% | 100.00% | 100.00% |
| | | 1182 | 1037 | | | | | | | | |
| SER | 15 | 260 | 237 | 100.00% | 100.00% | 95.34% | 94.14% | 98.18% | 100.00% | 97.27% | 98.64% |
| SER | 17 | 329 | 279 | 100.00% | 100.00% | 95.35% | 96.55% | 100.00% | 100.00% | 99.30% | 100.00% |
| SER | 19 | 153 | 119 | 100.00% | 100.00% | 96.43% | 95.73% | 99.04% | 99.07% | 98.08% | 97.22% |
| | | 742 | 635 | | | | | | | | |
| SNR | 11 | 323 | 300 | 99.70% | 99.57% | 93.48% | 95.20% | 100.00% | 99.57% | 99.70% | 99.57% |
| SNR | 16 | 13 | 12 | 100.00% | 100.00% | 91.67% | 66.67% | 100.00% | 100.00% | 100.00% | 83.33% |
| | | 336 | 312 | | | | | | | | |
| State | | 4,430 | 3,907 | 99.61% | 99.94% | 94.38% | 95.51% | 99.56% | 99.69% | 99.45% | 98.86% |
| | % Inc./Dec. vs. Prev. Month | 13.39% | | | | | | | | # Invs. in Backlog, Statewide | 4 |

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 | | |
| 604 | 588 | 1,100 | 1,106 | 1,610 | 1,637 | 290 | 297 | 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 | 0.10 | 0.10 | 0.10 |

¹ Data in "Previous" columns represents December 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