



Key Performance Indicators Report:

KPI

Volume 7, Issue 4

February, 2018

Economic Assistance and Work Services

EAWS Caseload (chart 1):

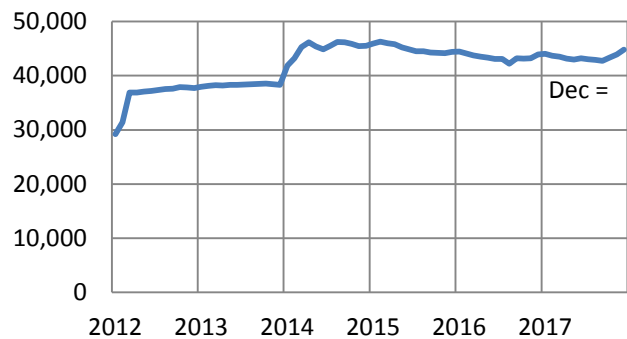
There was a spike in EAWS caseloads in the 4th quarter of 2017. Caseloads reached a high for the year of 44,785 in December. Average caseload for the quarter was 44,012.

Call Center Activity (charts 2 and 3):

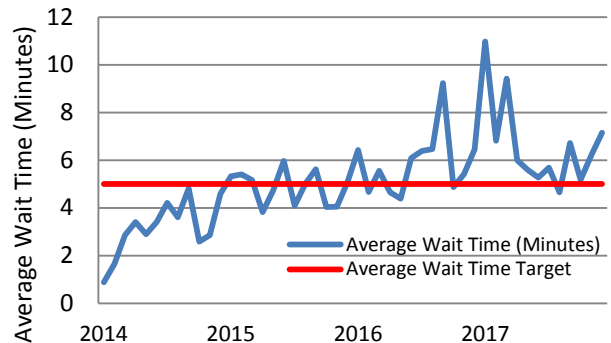
The Call Center serves 8 counties including Dane. Standards of performance have been established. The agency's goal for average wait time for answering the phone is five minutes or less. The goal for the percentage of calls answered by agents is 85% or greater of total calls.

In the 4th quarter of 2017, Call Center volume reached a high of 27,039 calls in October and a low of 23,186 calls in December. Wait times were longer than the benchmark of 5 minutes for each month of the quarter. The answer rate was consistently better than the 85% benchmark.

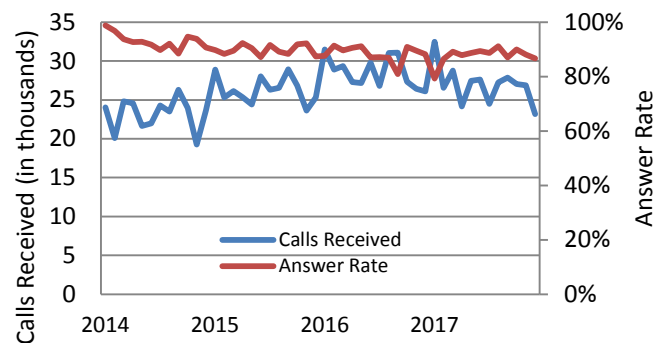
EAWS - Unduplicated Cases



Average Wait Time (Phone)



Calls Received and Answer Rate



Adult Community Services

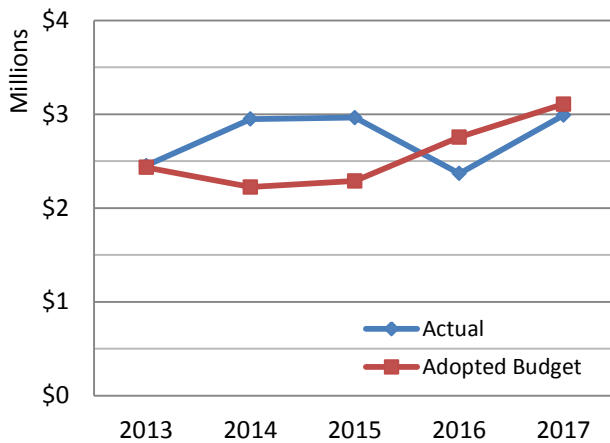
Inpatient utilization: Mendota Mental Health Institute and Community Hospitals

For more than 10 years ACS Division work plans have included a strategic initiative to reduce inpatient utilization for adults in state institutions including adults admitted to the gero-psychiatric treatment unit at Mendota Mental Health Institute (MMHI). Placements cost about \$1,000/day with Medicare, Medicaid and private insurance covering a portion of the cost.

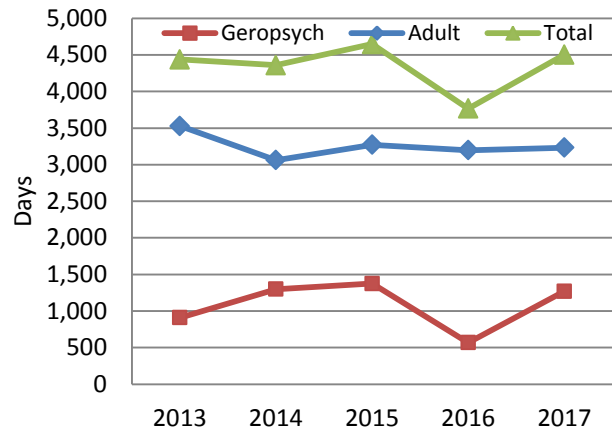
With data through the 4th quarter, inpatient days for adult mental health have remained steady over the last 3 years. Gero-psychiatric population days have increased due to the increase in ADP. The year ended with a budget surplus of \$117,000.

Utilization of community hospital beds remains low. The year ended with a budget deficit of (\$40,500).

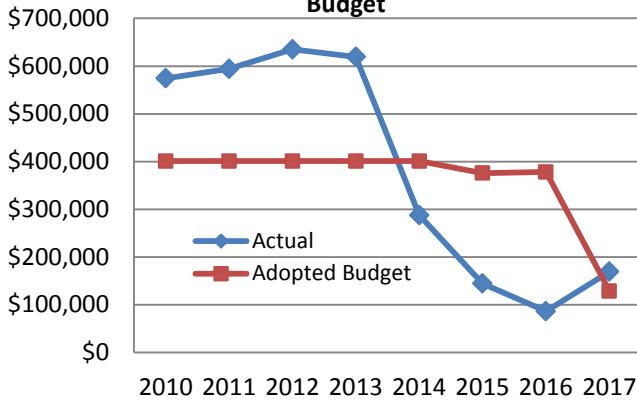
ACS - State Institutional Costs vs Budget



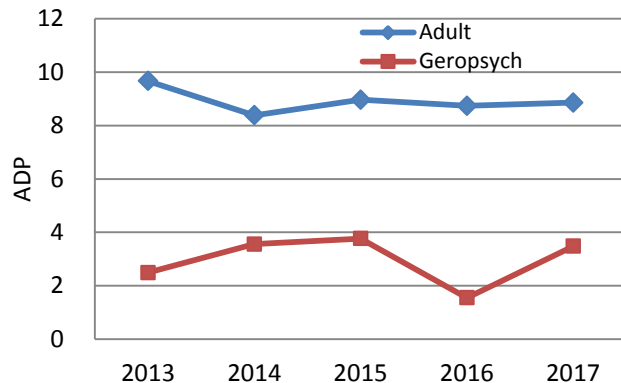
ACS - State Institutional Mental Hospital Days



Community Hospitals - Actual vs Adopted Budget



ACS - State Institutional Mental Hospital Average Daily Population (ADP)



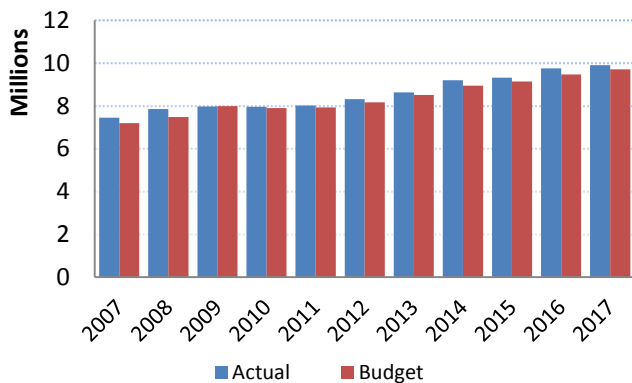
Badger Prairie Health Care Center

Residential Care Costs

Personnel related costs are the largest component of service costs at BPHCC. These include staff salaries, overtime, LTE and agency contracting. Sick leave usage, leave without pay including family and medical leave, high levels of accrued leave time, and worker’s compensation injuries have a direct result on open shifts and vacated shifts that need to be filled. On the revenue side, census at the center or average daily population (ADP) has a significant impact on revenues coming into the facility.

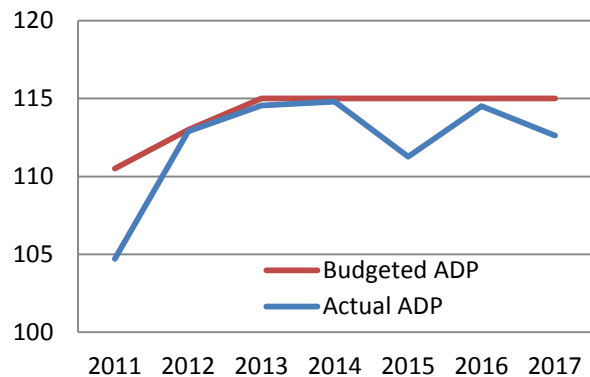
With data through December, personnel costs exceeded budget resulting in a deficit (\$193,000). The Census is budgeted at 115 persons. The Average Daily Population (ADP) for 2017 was 112.62. Leave without pay and sick leave are trending down. There was a slight reduction in unplanned absences. Worker’s compensation expenses for 2017 were \$131,253. This lowest they have been in 7 years.

Total Personnel Expenses: BPHCC

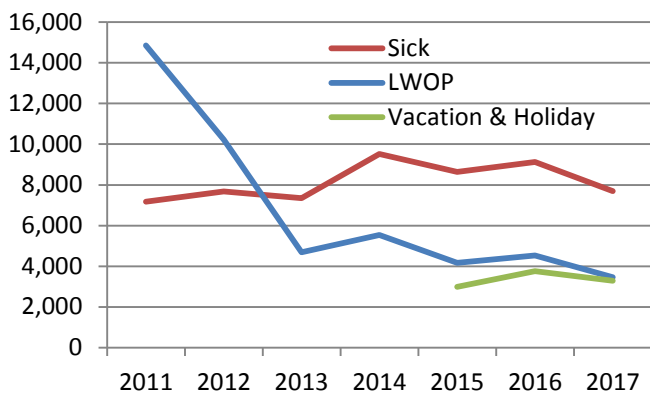


* includes Personnel, Overtime, LTE, & Contract

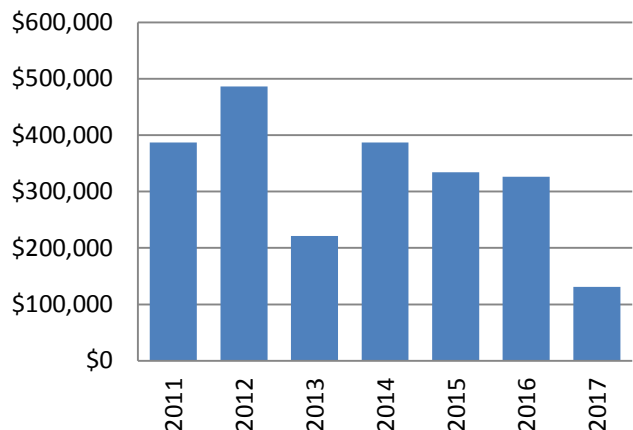
Average Daily Population 2011-2017



Unplanned Absences (in hours) by Type



Worker's Comp. Expenses



Children, Youth and Families

Alternate Care: One of the main variable costs for the Children, Youth and Families (CYF) Division is Alternate Care (AC). Youth are placed in AC when they have been abused, maltreated, committed delinquent acts, or have mental health needs and it is not possible to maintain them in their family homes or in the community. Graphs show the budgeted Average Daily Population (ADP) as the black line along with the Actual ADP's for each type of care. With information through December of 2017, Alternate Care is projected to produce a surplus of roughly \$2,600,000 mostly due to low Corrections and Group Home costs.

