#### Data collection through 12/31/2016

		Data collection	Anou	gir ras.	517201	<u> </u>					- David	and the second	and sound	and and							
											Data	a collec	tion p	period						( THE OWNER OF TAXABLE PARTY OF TAXABLE	
ID	Measure	Definition	Red	Yellow	Green	Destrod	Q1 2014	02 2014	Q3 2014	Q4 2014	Q1 2015	02 2015	Q3 2015	Q4 2015	01 2016	02 2016	03 2016	Q4 2016	Target Met	Trend	Owner
OM	Outcome Measures																-				
OM 1a	Youth feel safe - facility	Percent of youth in close custody who do not fear for their safety.		80 to 90			1	80,91		78,41		80,08		75.97		80,43		76.26		M	McClellan
	Note	e: Addressing with in-service training, PHD	V	Updated:	: 02, 04												Current	t target:	82.		<u></u>
OM 1b	Youth feel safe - residential	Percent of youth in community substitute care who do not fear for their safety,		80 to 90				90.		89.		99,		98.		H2.		99,		$\sim$	Cox
	Note:	A	V	Updated:	: 02, 04						_				_		Current	t target:	100.		2°
OM 2a	Youth are safe - facility	Injuries to youth per 100 days of youth confinement,	> 0,3	0.3 to 0.25	<= 0.25	•	E			0,18	0.247	0.226	6.235	0.185	0.183	0,182	0.193	0.217	1	M	* McClellan
	Note:	£	V	Jpdated <sup>.</sup>	d: Q1, Q2,	03,04		-		-							Current	t target:	0.22	the state of the s	
OM 2b	Youth are safe - residential	Number of assaults and fights requiring more than first aid on OYA youth supervised in residential facilities.	>1	1101	<= 1	¥	۵	e	4	0	۵.	٩	2	٩	a	,Q	Q	0.	1		- Cox
	Note:	A	V	Jpdated:	d: Q1, Q2.	. Q3, Q4									_		Current	t target:	1.		<u></u>
OM 3	Youth are healthy (composite)	Average of (1) Youth are healthy - immunizations, (2) Youth are healthy - Chlamydia, and (3) Youth are healthy - obesity.	< 85	85 to 90	1 >= 90	Ť	97.8	99.1	97.5	92.5	98.5	97.57	68.2	96.27	92,1	100.	SE 4	100.	1	N	Adams
	Note	e: Ultimate target = 100%	V	Jpdated:	d: Q1, Q2,	Q3, Q4											Current	t target:	99.		
OM 3a	Youth are healthy - immunizations	Percent of youth who are up to date on immunizations three months after entering OYA.	< 85	85 ko 90	) >= 90	4	95.2	97,5	98,5	97	<b>a</b> 7.	94.8	97,	88,6	97.6	100.	92.1	100.	1	~~~~	Adams
	Note	e: Ultimate target = 100%	V	Jpdated:	d: Q1, Q2,	Q3, Q4								_		- 1	Current	t target:	99.		
OM 3b	Youth are healthy - Chlamydia	Number of youth who undergo Chlamydia testing while on intake unit divided by number of youth on intake unit for the same quarter.	< 85	85 to 90	) >= 90	+	99,1	100.	94.8	100,	98.6	99,1	198,4	100,	56.H	102	99,2	100.	1	m	Adams
	Note	e: Uttimate target = 100%	V	Jpdated:	d: Q1, Q2,	. Q3, Q4											Current	t target:	99.		
OM 3c	Youth are healthy - obesity	Number of youth who are assessed for obesity during initial physical exam divided by number of youth who receive a physical exam,	< 85	85 to 90	10 >= 90	÷	99,1	1 100.	96,3	196.	100.	100.	90.2	106.	99.6	100.	96.9	100.	1	www	Adams
	Note	e: Ultimate target = 100%	ľ	Jpdated:	d: Q1, Q2,	, Q3, Q4										- 1	Current	t target:	99.		
OM 4	Youth have transition services	Percent of youth released from close custody who are receiving transition services per criminogenic risk and needs (domains) identified in OYA case plan (KPM 9).					91.5	5 56.3	64.3	86.5	83,1	79.6	85.2	86,7	84.1	88.7	85.2	90.3	1	M	Cox
	Note:	4	V	Jpdated:	d: Q1, Q2,	03,04		and the second								1	Current	t target:	85.		-
OM 5		Percent of individual facility goals met for structured activities and participation in treatment.			-	Ť			_	-											McClellan
	Data issue	e: Establishing new practices for tracking these activities	Ľ	Jpdated:	d: not repo	orted				_	_						Current	t target:	not set		-
OM 6a	facility	Percent of close custody youth whose records indicate active domains in an OYA case plan as identified in the OYA/RNA, within 60 days of commitment or admission (KPM 7).		65 to 90		10.21								67,3	56.6	533	65,3	61.8		V	- McClellan
	Pilot measure:	<u>A</u>	V	Jpdated:	d: Q1, Q2,	Q3, Q4											Current	t target:	95.		
OM 6b	Youth receive case management - probation	Percent of probalion youth whose records indicate active domains in an OYA case plan as identified in the OYA/RNA, within 60 days of commitment or admission (KPM 7)	< 65	65 to 90	) >= 90	Ŷ								88.4	83.1	90.5	74.4:	89.7		Ŵ	Cox

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Data collection through 12/31/2016

		Data collection	throu	gh 12/	31/201	6															
			125								Data	collec	tion p	boing						in Marchae	
ID	Measure	Definition	Red	Yellow	Green	Dissigni Dissenti	Q1 2014	02 2014	03 2014	Q4 2014		02 2015		QA 2015	Q1 2016			Q4 2016	Target Met	Trend	Owner
_	Pilot measure		l	Ipdated	: 01.02	Q3. Q4		_	_	_			_			C	urrent t	arget: 9	0.	_	-
OM 7a	Youth have family involvement - facility	Percent of youth whose families actively participate in their youth's MDT process,	< 45	45 to 60	>= 60	Ť		50,5	48,6	47,2	44,3	50,4	53,1	48,2	49,6	48	49.9	<mark>52.1</mark>	✓	VW	Fuimaono
	Note	<ul> <li>Pilot data based on new report. Results do not exclude families where involvement is contraindicated.</li> </ul>	L	Jpdated	Q1, Q2,	Q3, Q4										C	urrent t	arget: 50	D.		
OM 7b	Youth have family involvement - residential	Percent of youth whose families actively participate in their youth's MDT process.																			Cox
-	Data issue	: Measure result pending development of a new report.	ι	Jpdated	: not rept	rted										C	urrent t	arget: n	ot set		
OM 8	Youth have appropriate lengths of stay (out-of-home)	Median length of stay for youth offenders in out-of-home care placements.	> 299	299 lo 241	<= 241	¥	125	145	14.5	139,	138,	165.	163	131.	108.	151.	108.	93,	1	~~~	Cox
	Note		L	Jpdated	Q1, Q2	Q3, Q4			_					-			_	38.7 2	30.		-
OM 9a	Youth have few revocations	Percent of juvenile admissions to OYA facilities due to revocation during the quarter,				↓		1	•	44.	46.	43.	50.	48.	50.	38	43.2	38.7		M	Cox
	Pilot measure		L	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: n	ot set		-
OM 9b	Youth have few revocations (6- months)	The percent of youth revoked within 6 months of parole release per quarter,				Ψ				29,	59,:	69,	32	72	60	71.'	59,3	61.1		M	Cox
	Pilot measure		1	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: n	ot set		
OM 10a	Staff feel safe - physical	Percent of staff who feel physically safe in their workplace. (Mean rating on 2 physical safety-related questions on the Employee Survey is positive.)	< 80	80 lo 90	>= 90	Υ				70.2				74				77.4		/	O'Leary
	Note		1	Jpdated	: Q4											С	urrent t	arget: 8	0.		
OM 10b	Staff feel safe - emotional	Percent of stalf who feel emotionally safe in their workplace. (Mean rating on 3 emotional safety-related questions on the Employee Survey is positive.)	< 80	80 to 90	>= 90	Ŷ				55.8		1		62,3		1		66.7		/	O'Leary
	Note			Jpdated	Q4								_			C	urrent t	arget: 8	0.	_	_
OM 11	Staff are safe	Total number of SAIF injury claims during the quarter.	> 35	35 to 30	<= 30	Ψ	77	27	27,	22.	30.	28.	43	30.	25.	25.	35,	25.	-	~~	O'Leary
	Note	: 25 total claims. Decrease of 10 claims from 3rd quarter.	1	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: 2	9.		
OM 12	Agency supports diversity	Percent of staff with a positive perception about diversity in the OYA workplace. (Mean rating on 2 diversity-related questions on the Employee Survey is positive.)	< 50	50 lo 70	) >= 70	Υ				82.2				85.2				87.6	1	/	Campbell
	Note		1	Updated	: Q4											C	urrent t	arget: 6	5.		
OM 13	Employees are confident in leadership	Percent of staff who have confidence in the leadership, (Answer Strongly Agree or Agree to "My agency leaders generate high levels of motivation and commitment in the workforce" on the Employee Survey.)	< <del>5</del> 0	50 to 70	) >= 70	1				45.1				45.2		1		47.6		_	O'Leary
	Note	:	1	Updated	: Q4			S - 28								C	urrent t	arget: 5	0.		
OM 14	Employees trust leadership	Percent of staff who trust what management says. (Answer Strongly Agree or Agree to "I trust OYA leadership" on the Employee Survey.)	< 50	50 10 70	) >= 70	Ť				54.1				52.1				58.5	1	~	O'Leary
	Note		l	Jpdated	Q4											C	urrent t	arget: 5	5.		

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Data collection through 12/31/2016

		Data collection	throu	gh 12/	31/201	6															
			125		14						Data	collec	tion p	boing						in Marchae	
ID	Measure	Definition	Red	Yellow	Green	Dissigni Dissenti	Q1 2014	02 2014	03 2014	Q4 2014		02 2015		QA 2015	Q1 2016			Q4 2016	Target Met	Trend	Owner
_	Pilot measure		l	Ipdated	: 01.02	Q3. Q4		_	_	_			_			C	urrent t	arget: 9	0.	_	-
OM 7a	Youth have family involvement - facility	Percent of youth whose families actively participate in their youth's MDT process,	< 45	45 to 60	>= 60	Ť		50,5	48,6	47,2	44,3	50,4	53,1	48,2	49,6	48	49.9	<mark>52.1</mark>	✓	VW	Fuimaono
	Note	<ul> <li>Pilot data based on new report. Results do not exclude families where involvement is contraindicated.</li> </ul>	L	Jpdated	Q1, Q2,	Q3, Q4										C	urrent t	arget: 50	D.		
OM 7b	Youth have family involvement - residential	Percent of youth whose families actively participate in their youth's MDT process.																			Cox
-	Data issue	: Measure result pending development of a new report.	ι	Jpdated	: not rept	rted										C	urrent t	arget: n	ot set		
OM 8	Youth have appropriate lengths of stay (out-of-home)	Median length of stay for youth offenders in out-of-home care placements.	> 299	299 lo 241	<= 241	¥	125	145	14.5	139,	138,	165.	163	131.	108.	151.	108.	93,	1	~~~	Cox
	Note		L	Jpdated	Q1, Q2	Q3, Q4			_					-			_	38.7 2	30.		-
OM 9a	Youth have few revocations	Percent of juvenile admissions to OYA facilities due to revocation during the quarter,				↓		1	•	44.	46.	43.	50.	48.	50.	38	43.2	38.7		M	Cox
	Pilot measure		L	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: n	ot set		-
OM 9b	Youth have few revocations (6- months)	The percent of youth revoked within 6 months of parole release per quarter,				Ψ				29,	59,:	69,	32	72	60	71.'	59,3	61.1		M	Cox
	Pilot measure		1	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: n	ot set		
OM 10a	Staff feel safe - physical	Percent of staff who feel physically safe in their workplace. (Mean rating on 2 physical safety-related questions on the Employee Survey is positive.)	< 80	80 lo 90	>= 90	Υ				70.2				74				77.4		/	O'Leary
	Note		1	Jpdated	: Q4											С	urrent t	arget: 8	0.		
OM 10b	Staff feel safe - emotional	Percent of stalf who feel emotionally safe in their workplace. (Mean rating on 3 emotional safety-related questions on the Employee Survey is positive.)	< 80	80 to 90	>= 90	Ŷ				55.8		1		62,3		1		66.7		/	O'Leary
	Note			Jpdated	Q4								_			C	urrent t	arget: 8	0.	_	_
OM 11	Staff are safe	Total number of SAIF injury claims during the quarter.	> 35	35 to 30	<= 30	Ψ	77	27	27,	22.	30.	28.	43	30.	25.	25.	35,	25.	-	~~	O'Leary
	Note	: 25 total claims. Decrease of 10 claims from 3rd quarter.	1	Jpdated	: Q1, Q2	Q3, Q4										C	urrent t	arget: 2	9.		
OM 12	Agency supports diversity	Percent of staff with a positive perception about diversity in the OYA workplace. (Mean rating on 2 diversity-related questions on the Employee Survey is positive.)	< 50	50 lo 70	) >= 70	Υ				82.2				85.2				87.6	1	/	Campbell
	Note		1	Updated	: Q4											C	urrent t	arget: 6	5.		
OM 13	Employees are confident in leadership	Percent of staff who have confidence in the leadership, (Answer Strongly Agree or Agree to "My agency leaders generate high levels of motivation and commitment in the workforce" on the Employee Survey.)	< <del>5</del> 0	50 to 70	) >= 70	1				45.1				45.2		1		47.6		_	O'Leary
	Note	:	1	Updated	: Q4			S - 28								C	urrent t	arget: 5	0.		
OM 14	Employees trust leadership	Percent of staff who trust what management says. (Answer Strongly Agree or Agree to "I trust OYA leadership" on the Employee Survey.)	< 50	50 10 70	) >= 70	Ť				54.1				52.1				58.5	1	~	O'Leary
	Note		l	Jpdated	Q4											C	urrent t	arget: 5	5.		

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#### Data collection through 12/31/2016 Data collection period **Fargot Met** Q4 2016 02 2014 04 2014 04 2015 2014 ollow Measure 8 Definition Trend Owner Percent of staff who are engaged with their work at OYA. (Mean rating on 6 engagement-related questions on the < 50 50 to 70 >= 70 OM 15 Employees are engaged 1 66,4 68.2 72.8 1 O'Leary Employee Survey is positive,) Note: Updated: Q4 Current target: 65. 220 10 OM 16 Employee overtime use is low Ψ 214.1 252.3 195. 330. 220.8 211. 175. 173.39 140.11 156.94 Average monthly facility-wide mandated overtime in hours. > 220 McClellan 1 Note: Updated: Q1, Q2, Q3, Q4 Current target: 165. OM 17 Agency performs to budget Percent of programs at or below their allocated budget. 1 Shibley Data issue: Updated: Q1, Q2, Q3, Q4 Current target: not set > 22,77 22,77 to 20,79 <= 20,79 OM 18a The public is safe - probation 36-month recklivism rate of youth committed to OYA probation (KPM 13c). 22,1 21.2 :01 Note: FYTD Probation = 22.2% (71 recidivist / 320 youth) Updated: Q2 Current target: 19.8 > 35.65 32.55 <= 32.55 OM 18b The public is safe - parole 36-month recidivism rate of youth released to OYA parole (KPM 12c). 4 22 30. 29,8 101 Note: FYTD Parole = 28.7% (58 recidivists / 202 youth) Updated: Q2 Current target: 31. OM 18c The public is safe - DOC 4 38-month recidivism rate of DOC youth released to post-prison supervision from OYA close custody. 24. 21.6 30.9 AcClellan Note: FYTD DOC = 14.1% (13 recidivist / 92 youth) Updated: Q2 Current target: OP 1.0 Managing youth and staff safety. OP 1.1 Youth runaways Number of runaway youth from residential providers and foster care homes per guarter (KPM 2). >75 75 to 61 <= 61 4 104 72 24 65, Note: Updated: Q1, Q2, Q3, Q4 Current target: 80. OP 1.2 Escapes ¥ Number of youth escapes from youth correctional facilities and transition programs per quarter (KPM 1). >3 3 to 3 <= 3 Note: Updated: Q1, Q2, Q3, Q4 Current target: 1. 0.06 to OP 1.3 Youth-on-staff assaults Assaults on staff per 100 person-days of youth confinement. > 0.06 4 0.061 0.036 0.047 0.075 0.048 0.032 0.059 0.041 0.046 Note: Updated: Q1, Q2, Q3, Q4 Current target: 0,03 > 0.15 0.08 <= 0.08 OP 1.4 Youth-on-youth assaults Assaults on youth per 100 person-days of youth confinement. 0.089 0.115 0.075 0.15# 0.082 0.133 0.091 0.12 0.137 Note: Updated: Q1, Q2, Q3, Q4 Current target: 0.1 ÷ OP 1.5 Sexual behavior allegations Average number of sexual behavior allegations in facilities that are reviewed by the PREA coordinator per month. 65. 33. 29. 38.7 28. 38, 76. 40. 29. 31. 43. 30. Note: Updated: Q1, Q2, Q3, Q4 Current target: not set OP 1.6 Facility staff safety Percent of facility staff who do not fear for their safety at work. < 80 80 to 90 >= 90 84.3 79.4 Clellan

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#### Data collection through 12/31/2016 Data collection period **Fargot Met** Q4 2016 02 2014 04 2014 04 2015 2014 ollow Measure 8 Definition Trend Owner Percent of staff who are engaged with their work at OYA. (Mean rating on 6 engagement-related questions on the < 50 50 to 70 >= 70 OM 15 Employees are engaged 1 66,4 68.2 72.8 1 O'Leary Employee Survey is positive,) Note: Updated: Q4 Current target: 65. 220 to OM 16 Employee overtime use is low Ψ 214.1 252.3 195. 330. 220.8 211. 175. 173.39 140.11 156.94 Average monthly facility-wide mandated overtime in hours. > 220 McClellan 1 Note: Updated: Q1, Q2, Q3, Q4 Current target: 165. OM 17 Agency performs to budget Percent of programs at or below their allocated budget. 1 Shibley Data issue: Updated: Q1, Q2, Q3, Q4 Current target: not set > 22.77 22.77 to 20.79 <= 20.79 OM 18a The public is safe - probation 36-month recklivism rate of youth committed to OYA probation (KPM 13c). 22,1 21.2 :01 Note: FYTD Probation = 22.2% (71 recidivist / 320 youth) Updated: Q2 Current target: 19.8 > 35.65 32.55 <= 32.55 OM 18b The public is safe - parole 36-month recidivism rate of youth released to OYA parole (KPM 12c). 4 22 30. 29,8 101 Note: FYTD Parole = 28.7% (58 recidivists / 202 youth) Updated: Q2 Current target: 31. OM 18c The public is safe - DOC 4 38-month recidivism rate of DOC youth released to post-prison supervision from OYA close custody. 24. 21.6 30.9 AcClellan Note: FYTD DOC = 14.1% (13 recidivist / 92 youth) Updated: Q2 Current target: OP 1.0 Managing youth and staff safety. OP 1.1 Youth runaways Number of runaway youth from residential providers and foster care homes per guarter (KPM 2). >75 75 to 61 <= 61 4 104 72 24 65, Note: Updated: Q1, Q2, Q3, Q4 Current target: 80. OP 1.2 Escapes ¥ Number of youth escapes from youth correctional facilities and transition programs per quarter (KPM 1). >3 3 to 3 <= 3 Note: Updated: Q1, Q2, Q3, Q4 Current target: 1. 0.06 to OP 1.3 Youth-on-staff assaults Assaults on staff per 100 person-days of youth confinement. > 0.06 4 0.061 0.036 0.047 0.075 0.048 0.032 0.059 0.041 0.046 Note: Updated: Q1, Q2, Q3, Q4 Current target: 0,03 > 0.15 0.08 <= 0.08 OP 1.4 Youth-on-youth assaults Assaults on youth per 100 person-days of youth confinement. 0.089 0.115 0.075 0.15# 0.082 0.133 0.091 0.12 0.137 Note: Updated: Q1, Q2, Q3, Q4 Current target: 0.1 ÷ OP 1.5 Sexual behavior allegations Average number of sexual behavior allegations in facilities that are reviewed by the PREA coordinator per month. 65. 33. 29. 38.7 28. 38, 76. 40. 29. 31. 43. 30. Note: Updated: Q1, Q2, Q3, Q4 Current target: not set OP 1.6 Facility staff safety Percent of facility staff who do not fear for their safety at work. < 80 80 to 90 >= 90 84.3 79.4 Clellan

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Data collection through 12/31/2016

		Data collection	throu	igh 12/	31/2016	5														
										j.	Data col	lection	period							
ID	Measure	Definition In-service training in development, PHD implementation, FS strategic plan focusing on	Rođ	Nolla Jpdated:	<b>uaug</b> Q2, Q4	(Deserved) (Deserved)	Q1 2014	0.2 2014	Q3 2014	04 2014	02 2016	Q3 2015	Q4 2015	Q1 2016			9402 ¥0 arget: 85	Target Met	Trend	Owner
-		behavior management strategies	1	275 to	-			- 1	-	1			100		- and			1.	1	Contract and the second second
OP 1.7	Isolation episodes	Average number of isolation episodes per month during the quarter,	> 275	225	<= 225	Ŧ	306	291,	286.	254.	261. 22	3, 273	264.	269.	277.	SIL	283.3		w	<ul> <li>McClellan</li> </ul>
	active (pilot	):	l	Jpdated:	Q1, Q2,	Q3, Q4							_		C	urrent ta	arget: 25	0.		_
OP 1.8	Isolation episode duration	Average duration of isolation episodes during the quarter (hours),				↓				2	7,88 24	51 26.66	25,96	27_76 <sup>;</sup>	23,52	22,22	25.55		M	McCleilan
-	active (pilot		1	Updated:	Q1, Q2,	Q3, Q4							_		C	urrent ta	arget: no	t set		
OP 2.8	Managing the youth commitme	nt process	-	1.6-1		-	-	12		6.E.S	-	-					100	-	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	-
OP 2.1	Access to community services - capacity	Number of youth on wait list divided by total number of youth referred to a community program.														1				Cox
	Data issu	e: New report in development		Jpdated:	not repo	rted	_	_	-			_			C	urrent ta	arget: no	t set		-
OP 2.2	Access to community services - timeliness	Bapsed time between referral and community program intake,																		Cax
	Data issu	e: New report in development	1	Updated:	not repo	rted	_	_	_	_			_	_	C	urrent ta	arget: no	tset		-
OP 2.3	Victims notified of rights	Percent of identified victims that receive notice of rights within 30 days of an OYA youth's commitment to a YCF.	< 91	91 lo 97	>= 97	1	82.	86.	91.	64,	83. E	9 95	. 95.	97.	96.	93 2	96.	1 -	V	Cox
	Not	e:	1	Updated:	Q1, Q2,	Q3, Q4		_		_	_	_			С	urrent ta	arget: 95	k		-
OP 2,4	Victims notified prior to parole	Percent of OYA youths' victims with requested rights that receive notification of parole prior to actual parole date,	< 91	91 lo 97	>= 97	1	79.	72	62.	21.	57. 6	3, 50	<b>#1.</b>	100.	95.	93	93.		M	Cox
-	Not		1	Updated:	Q1, Q2,	Q3, Q4			_		_	_	_	_	C	urrent ta	arget: 95			
OP 3.0	Managing youth intake and ass	essment	-		_		-	-	-		-	-	Committee of	-	100	100	Contract of the local division of the local	-		1
OP 3,1a	Intake RNA completion - facility	Percent of facility youth whose RNA assessments are completed within 30 days of commitment (KPM $6$ ),		85 to 90		•	952	950	88.	925	73. 85	.7 🍝	100	987	1	88.2	94.9		Wr	McClellan
	Not	ê:	1	Updated:	Q1, Q2,	Q3, Q4	-	_	-	-	-	-	Station of the	-	C	urrent ta	arget: 95	L		-
OP 3,1b		Percent of probation youth whose RNA assessments are completed within 30 days of commitment (KPM 6).		85 to 90		1	91.7	86.5	77.5	85.7	84.7 81	.5 85.6	¥1.	82.1		81.8	90.6	~	m	Cox
_	Not	e:	1	Updated:	Q1, Q2,	Q3, Q4	-	_	_		-	-	-	_	c	urrent ta	arget: 90	).	1** x /**	-1
OP 3.2a	Case plan relevance to RNA (facilities)	Percent of audited case plans which reflect risk needs assessment,	< 85	85 to 90	>= 90	Ť	91.3	100	100.	100.	92 10	0, 98,9	97,6	102	100.	100.	100,	✓ /		McClellan
_	Not	e:		Updated:	01, 02,	Q3, Q4	_	_	-		_	_	_	_	C	urrent to	arget: 10	0.		
OP 3.2b	Case plan relevance to RNA (field)	Percent of audited case plans which reflect risk needs assessment.	< 85	85 to 98	>= 98	1	94,1	<b>98</b> ,5	96.6	97,6	100 10	ic. 100	100.	584	100.	100.	100.	1		Cox
	Not	e:	(	Updated	Q1, Q2,	Q3. Q4					_	_	_	_	C	urrent t	arget: 98	3.		-
OP 3.3	Intake length-of-stay	Average LOS during facility intake process.	> 60	60 to 45	<= 45	¥	23.6	253	29.9	47.1	98.E 21	7 24	294	38,3	46.5	35.6	41,6		$\sim$	McCtellan

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#### Data collection through 12/31/2016 Data collection period arget Mel Q3 2016 2016 2016 ID Measure Definition 2 Trend Owne Note: Updated: Q1, Q2, Q3, Q4 Current target: 35. OP 3.4a Timely case plan audits - facilities Percent of case plan audits due that were completed during the quarter. < 85 85 to 90 >= 90 🔨 53.1 100 625 55.1 62.5 74.5 58.5 59.3 67.7 97.1 McClollar Note: Updated: Q1, Q2, Q3, Q4 Current target: 80 OP 3.4b Timely case plan audits - field < 85 85 lo 95 >= 95 Percent of case plan audits due that were completed during the guarter. 1 97.7 93.1 97.3 94.3 91.7 94.4 100. 100 36.2 98.6 Note: Updated: Q1, Q2, Q3, Q4 Current target: 95. OP 3.5 Initial psychological evaluations Percent of youth receiving an initial psychological evaluation within 30 days of admission, < 85 85 to 89 >= 89 1 95; 98.1 25 Note: Updated: Q1, Q2, Q3, Q4 Current target: 95. OP 3.6 ATOD assessments Percent of youth receiving ATOD assessment within 30 days of admission to a certified OYA facility ATOD program <70 70 to 80 >= 80 54, 60.5 66, 68, 75.27 71.6 77.33 B4.3 68. 04 84.4 Note: Updated: Q1, Q2, Q3, Q4 Current target: 80. OP 4.0 Managing youth health care Number of youth assessed for suicide risk within one hour of intake divided by total number of youths entering intake OP 4.1 Suicidal risk assessment < 99 99 to 99 >= 99 4 100 68.4 Fuimaono during the quarter. Data issue: Report is now prototyped and in review by Treatment Services. Updated: Q1, Q2, Q3, Q4 Current target: 100. OP 4.2 Treatment service delivery Percentage of treatment interventions provided per psychological intake recommendation. umanno Data issue: Mental health breakthrough workgroup is finalizing the form. Updated: not reported Current target: not set Response to psychology referrals -OP 4.3 Average length of time between psychology referral and first session with provider (psychologist/psychiatrist). Fuimaono timeliness Data issue: Working on data integrity and development of a new JJIS report Updated: not reported Current target: not set Medical exam and care plan Number of youth who get a physical exam and their identified medical needs assessed within 7 days of entering OP 4.4 < 80 80 to 90 >= 90 A 97.7 05.F 50.0 99.1 98.6 99.7 94.5 93.8 100. 100. 88.4 development close custody divided by number of youths entering close custody during that guarter. Note: Ultimate target = 100% Updated: Q1, Q2, Q3, Q4 Current target: 99. OP 4.5 Dental care < 85 85 to 90 >= 90 🔨 Percent of youth receiving oral hygiene instruction within three months of intake. 18.2 959 97,9 792 515 86.9 365 6 OR A 66.5 94.7 Note: Updated: Q1, Q2, Q3, Q4 Current target: 100 Medication administration errors -Average number of errors committed while administering medications during a 30-day period at all facilities due to 4 OP 4.6a >5 5 to 1 <= 1 23 23 17 1.7 103 1.3 17 1.7 0,3 giving the wrong medication. medication Note: Ultimate target = 0 Updated: Q1, Q2, Q3, Q4 Current target: 0. Medication administration errors -Average number of errors committed while administering medications during a 30-day period at all facilities due to OP 4.6b >5 5 to 1 <= 1 ¥ 43 27 43 23 3 1.7 7.2 2 25 94 12 4. giving the wrong dose. dosage Note: Ultimate target = 0

Updated: Q1, Q2, Q3, Q4

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Current target: 0.

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		Data collection	throu	gh 12/	31/201	6		_					_		_	_	_	_		
											Data	collec	tion p	eriod						-
IÐ	Measure	Definition	Red	Yellow	Green	Deserve	Q1 2014	02 2014	Q3 2014	Q4 2014	01 2015	Q2 2015	03 2015	04 2015	Q1 2016	012 2016 013 2016	04 2016	Target Met	Trend	Owne
P 4.6c	Medication administration errors - timeliness	Average number of errors committed while administering medications during a 30-day period at all facilities due to giving at the wrong time,	>5	5 to 1	<= 1	¥	17	66	5,2	7	5.	1	6,5	23,	3,	3,7	43	9.7	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Adams
	Note	: Ultimate target = 0	I	Jpdated:	Q1. Q2	Q3, Q4		-	-					_	_	Cu	rrent tar	get: 0.	-	
OP 4.6d	Medication administration errors - youth	Average number of errors committed while administering medications during a 30-day period at all facilities due to giving medication to the wrong youth,	> 0	0 to 0	<= 0	¥	6,3	0,3	2	0.7	23	9	0	2.3	27	0.	ia.	0.3	A	Adams
	Note	: Ultimate target = 0	ι	Jpdated:	Q1, Q2	Q3, Q4		_	_	_	_	_	_	-	-	Cu	rrent tar	get: 0.		
DP 4.6e	Medication administration errors -	Average number of errors committed while administering medications during a 30-day period at all facilities, where the error is no documentation.	> 20	20 lo 16	<= 16	≁	88,3	80,6	115.7	47.	28.	47.7	787	79,7	58.3	337 3	9.7	34.	A	Adams
1	Note	: Ultimate target = 0	L	Jpdated:	Q1, Q2	Q3, Q4				_			_		_	Cu	rrent tar	get: 10.		
OP 4.6f	Medication administration errors - availability	Average number of errors committed while administering medications during a 30-day period at all facilities due to medication unavailable,	> 10	10 to 5	<= 5	¥	3	23	16.	8,3	8,7	2	1.3.	a	23	13	2.2	0. 🗸	A	Adams
	Note	: Ultimete target = 0	1	Updated:	Q1, Q2	03, 04	_		_		-	-	_	_	_	Си	rrent tar	get: 2.	16	41
OP 4,7	Immunization administration	Number of facility youth leaving OYA who are current on immunizations divided by total number of youths leaving OYA close custody facilities,	< 80	80 to 90	>= 90	Ŷ	100	97.5	98.5	93.9	97.8	:95,7	-94.4	.645	07:8		19	100. 🗸	W	Adams
	Note	: Ultimate target = 100%	3	Updated:	Q1, Q2	03.04	_		_	_	_		_	_	_	Cu	rrent tar	get: 100.		
OP 4.8	Response to sick call requests - timeliness	Number of medigrams reviewed and initialed by a nurse within 24 hours of submission during a 30-day period divided by total medigrams submitted by youth during that same period (average for the quarter).	< 80	80 lo 90	>= 90	<b>T</b>	98.5	947	94.9	95.4	84	93.9	96.4	65	95,5		1	96.9	hr	- Adams
	110700	: Ultimate target = 100%	1	Updated:	Q1, Q2	03, 04	-	_		_		-				Cu	rrent tar	get: 100.		_
OP 5.0	Providing basic services		_			-	-			-	4			-			-			
DP 5.1	Access to family - visits	Percent of facility youth receiving at least one visitor, including video visits (monthly average).		50 to 60		1	51.	. 56.1	55.9	53.3	54,9	56,1	55,8	52,3	54 <u>.</u> 8	57.	<u></u>	56. 🗸		Fuimaor
	Note	: Adding/evaluating technical options that will provide greater access (e.g., GoToMeeting, Skype)		Updated	: Q1, Q2	, Q3, Q4	_	_	_		_		_		_	Cu	rrent tai	get: 55.		
OP 5,2	Access to family - calls	Average number of phone calls with family per facility youth per month,		5.5 to 6		1	6	8.7	6,7	72	ē.7	*	7.1	32	24	7.2	1	7.8	m	McClella
_	Note			Updated	: Q1, Q2	. Q3, Q4	_	_	_	_	-	_	_	_		Cu	rrent tai	get: 6.	-	
OP 5.2a	Access to family - no contact	Number of facility youth who receive no visit or contact during quarter.				₩		È.											_	McClella
	Note	: Not an agency-wide measure; being piloted as a local measure in facilities.	0.0	Updated	: Q1, Q2	Q3. Q4	-		_	_	_	_	-	-	_	Cu	rrent ta	get: not s	et	Ne 1
OP 5.3	Participation in cultural groups	Number of distinct facility youth participating in cultural support groups during the quarter,	< 275	300	~- 300			210.	202.	154.	203.	194.	132.	95	118.			224.	~	Campbe
	Note	Target and ranges increased by 100 in Q4. Previouly 224 would have been green, now it is red.		Updated	Q1, Q2	, Q3, Q4	_			_				_	_	Cu	rrent ta	get: 275.		2
OP 5.4	Grievance system responsiveness	Percent of interviewed youth who report fling a grievance within the last six months who said it was taken care of in some way while at this facility.	< 40	40 10 60	>= 60	1		66(38		58.33	_	50,		55.74	the second se	50.81		0.59	1~	McClell
	Note	2		Updated	Q2, Q4				_							Cu	rrent ta	rget: 60.		

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											Data	collec	tion (	period					2.17		
ID	Measure	Definition	Red	Yellow	Green	Bestral Breadon	Q1 2014	02 2014	Q3 2014	04 2014	Q1 2015	02 2015	Q3 2015	Q4 2016	Q1 2016	02 2016	03 2016	04 2016	Target Met	Trend	Owner
OP 6.0	Managing youth reformation se	rvices	_			firm,												200	1.320	20 A. 10	100
OP 6,1	Residential program performance	Percentage of BRS domains in compliance out of BRS required domains.	< 80	80 to 9(	) >= 90	1	57.	77,	77,	89.	78.	85.	93.	92.	85.	93	57.	93.	1	m	Cox
_	Not	e: 456/491 applicable domains		Updated	: Q1, Q2	Q3, Q4										(	Current	t target:	90.		
OP 6.2a	Educational services - special programming (facility)	Parcent of youth with special program needs committed to OYA close custody for more than 60 days who receive th services prescribed in their education plan (KPM 8),	< 80	80 to 90	) >= 90	1	88,4	88.5	86,4	85,3	84.9	86.8	86.6	86,1	85,1	86,7	86.3	86.8		w	Fuimaono
	Note	B:	ii.	Updated	: 01, 02	Q3, Q4									-	(	Current	t target:	90.		•
OP 6.2b	Educational services - special programming (probation)	Percent of youth with special program needs committed to OYA probation for more than 60 days who receive the services prescribed in their education plan (KPM 8).	< 80	90 of 08	) >= 90	Υ	92.6	\$3.6	14	52.5	42.5	92.5	90.2	88,8	90,4	21.3	92.2	93.		~~	Cox
	Not	ie	1	Updated	: Q1, Q2	Q3, Q4	-	_						_		(	Current	t target:	95.		
OP 6.3	Treatment assessment	Placaholder.									1					1					Fuimaono
	Placeholde	r: Definition pending YRS and PEC		Updated	: not rep	orted			_							(	Current	t target:	not set		
OP 6.4	Treatment progress	Percent of youth who demonstrate improvement in thinking skills, as indicated through pra/post testing using the "Thinking Skills Inventory."	< 50	50 to 74	4 >= 74	Ŷ	68.	73.	58.	57.	61.	62.	45.	55.	27.3					m	Fuimaono
_	Pilot measure	e:	- 1	Updated	: 01, 02	Q3, Q4							_			(	Current	t target:	75.		
OP 6.5	School and work engagement - fiel	d Percent of youth living in OYA family foster care, independently, or at home (on OYA parole/probation) who are engaged in school, work, or both within 30 days of placement (KPM 10).	< 59	59 to 66	5 >= 66	ŕ	60.	76.1	62.1	744	74.0	723	65.9	78,	79.5	78.2	85.4	76.6		VVV	Cox
	Note	P1		Updated	: 01, 02	Q3, Q4		-	-			_				- (	Current	t target:	80.		
OP 6.6	Restitution paid	Percent of restitution paid on restitution orders closed during the quarter (includes restitution orders of \$10,000 or less) (KPM 11).	< 34	34 ko 38	3 >= 38	Ť	63,3	20,5	80,5	41,4	38.4	36,7	47.3	245	47.7	59.5	58.7	34.3		M	Cox
_	Note	e:		Updated	: Q1, Q2	Q3, Q4										(	Current	t target:	40.		<u> </u>
OP 6.7	Treatment fidelity	Placeholder.																			Fuimaono
_	Placeholde	r: Pending YRS and PEC	1	Updated	: not rep	orted	_	-		_			_			(	Current	t target:	not set		
OP 6.8	Initial MDT completion	Percent of youth whose MDT was completed within 30 days of a new facility placement,			-													2			McCiellan
_	Data issue	Di anti anti anti anti anti anti anti ant		Updated	: not rep	orted		_			_	_			_	(	Current	t target:	not set		
OP 6,9	Post-secondary programs (facility)	Percent of eligible youth enrolled in a vocational training program or college (VESOY program).				1	1.1.		-												McClellan
	Data issu		1	Updated	: Q1, Q2	Q3, Q4	_				_					(	Current	t target:	not set		·
SP 1.0	Communicating with internal as	nd external stakeholders	_		1112		-					100			1.1	TIL					
SP 1.1	Executive notifications	Number of incident notifications received by the Communications Office from outside sources before an internal notification occurred.	>1	1100	<= 0	¥					4	ţ.	ŧ	4	1.	U.	4	0.	1	h	Evans
	Pilot measure	e:	<b>n</b> .	Updated	Q1, Q2	Q3, Q4	14							-		(	Current	t target:	0.		

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			1								Data	collec	tion p	eriod					1.37		-
ID	Measure	Definition	Red	Yellow	Green	Distant	Q1 2014	02 2014	03 2014	Q4 2014	Q1 2015	02 2015	03 2015	04 2015	Q1 2016	02 2016	Q3 2016	04 2016	Target Met	Trend	Own
P 1,2	Executive communications	Number of email messages and other written communications distributed by Cabinet members to their service area and/or OYA World (average messages per month),	s < 3	3 to 4	>= 4	Ť	4.3	87		11.6	3.	47	±1.	3.	13	9.	12.	15.	1	M	Evans
		Note:	1.1	Updated:	Q1. Q2	Q3, Q4		-	_		_	_	-	_		Cı	urrent t	target: 4	4.		_
6P 1.3	Message generation	Percent of OYA media coverage generated by OYA (monthly average),	< 55	55 to 60	>= 60	Ŷ	74.6	98,2		85	197	50.5	72	4	83,	-83	65.	84.	1	$\sim$	Evans
_		Note: Total media mentions = 150; generated by OYA = 130		Updated	01, 02,	Q3, Q4			-	_	-	_	_	_	_	Ci	urrent t	target:	75.		
SP 1.4	Public reputation	Percent of OYA media coverage with neutral or positive mention of OYA (monthly average),		85 to 90		↑	100.	98.2		100.	99.	100	98.	×	93	100	102	100.	✓	M	Evans
		Note: During November, one negative comment about OYA was made in the feed in the Statesman's online comments about the Governor's budget priorities.		Updated	Q1, Q2,	Q3, Q4		_				_				Cı	urrent t	target:	100.		
SP 1.5	Public engagement	Average number of volunteer hours per youth in close custody per month,		1.5 to 2.5	-		1.95	3,14	2,72	2.19	2.58	2,76	2.17	2,1	1.98		2.62	2.49	1	M	McCle
		Note:		Updated	: Q1, Q2	03,04	_	_			-	_		_	-	Ci	urrent	target:	2.	-	-
SP 2.0	Conducting strategic and o	perations planning	-						-	-			-	-	THE OF				0018	1	-
SP 2.1	Breakthrough initiatives	Placeholder,												_							O'Lear
-	Placeh	older:	-	Updated	: not repo	orted	_	_	_		-		_	-	-	C	urrent	target:	not set	-	AL
SP 2.2	Current agency policies	Percent of OYA policies reviewed for change or repeal within a two-year review cycle,	100	85 to 95		1	94.	94.	96	-95	94.	94,	94,	92.	低	95,	93.	96,	1	~~~	O'Lea
		Note:	1	Updated	: Q1, Q2	Q3, Q4	-	_	_	_		_	-	_	_	C	urrent	target:	95.		_
SP 3.0	Evaluating and improving p	performance	-			-	-	-	-		-	-	-						_	1	1
SP 3.1	Idea implementation	Number of improvement ideas generated by staff and adopted per employee,		_												1					O'Lea
	Data	issue: Pending lean daily mgt system	-	Updated	: not rep	orted	-		-	-	-	-				C	urrent	target:	notset	141 24	
SP 3,2	Staff involvement	Number of designated QTRs scheduled divided by number of designated QTRs.		80 to 90			100	100.	91,9	100.	100.	91.6	97.	97.	97.	97.	87.5	94.	1	V V	V O'Lea
		Note:	-	Updated	: 01, 02	Q3. Q4	_	_	_	-			-	-	-	C	urrent	target:	90.	1	
SP 3.3	Measures improving	Percent of measures updated in the current quarter that improved or had no room to improve,				Ť	49.	. 55.	47.	48,	48.	52.5	46.	51.	51.		45.8	59.6		no	O'Lea
-	active	pilot):	-	Updated	: Q1, Q2	, Q3, Q4	_		_	_		_	_	_	_	c	urrent	target:	not set	, ,	4
SP 3.4	Measures meeting target	Percent of measures updated in the current quarter that met their targets $\ensuremath{I}$				Ť	48	49	55,	44,	46,	52.7	50.	42.	62.1	-	48.2	57.9		w	V O'Lea
	active	pilot):	-	Updated	: Q1, Q2	, Q3, Q4		-	_	_	-	_	_	_		С	urrent	target:	not set	-	_
SP 3.5	Outcome evaluation effectiver	Ness Percent of evaluations demonstrating effectiveness.										1									O'Lea
	Data	issue: No data yet		Updated	not rep	orted		-					-			C	urrent	target:	not set		

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Data collection through 12/31/2016 Data collection period arget Met 02 2016 04 2016 02 2014 @3 2014 04 2014 QA 2015 2014 ellow -80 Measure Definition Trend Owner Percent of PSO cases completed in timeframe, Average of a) percent of investigations completed within 60 days of SP 3.6 Timely PSO cases < 80 80 10 90 >= 90 82 86 70.5 83.5 \* 98 75 150 50. 91.5 95. 92.5 Janley opening the case and b) percent of incidents completed within 30 days of opening the case. Note: 17 or 17 gualified investigations completed in 60 days, 153 of 181 gualified incidents Updated: Q1, Q2, Q3, Q4 Current target: 90. completed within 30 days. Percent of closed investigative cases that have a determinable outcome either substantiating or unsubstantiating the SP 3.7 Investigation disposition outcome < 65 65 to 75 >= 75 1 100 67 103. 100. 100 100. case. (Cases unable to be determined will lower the measure.) Note: 17 of 17 qualified investigative cases determined, 0 were unable to determine. Updated: Q1, Q2, Q3, Q4 Current target: 75, SP 3.8 Timely response to hotline Percent of holline calls that are returned by the end of the next business day following retrieval of the message, < 90 90 to 95 >= 95 1 93, 93. Note: 71 or 76 Hotline calls returned within 24 hours. Updated: Q1, Q2, Q3, Q4 Current target: 95 SP 4.0 Managing organizational finances Number of errors identified during the cardholder review of purchase logs divided by the total number of transactions >25 25 to 10 <= 10 4 SP 4.1a SPOTS card usage - errors n reviewed Note: Updated: Q1, Q2, Q3, Q4 Current target: 10. SP 4.1b SPOTS card usage - negligence Number of SPOTS card purchases that were negligent. >1 1120 <=0  $\mathbf{\Psi}$ Note: Updated: Q1, Q2, Q3, Q4 Current target: 0. 4 SP 4.2a Payroll accuracy - DAS Percentage of over/under payments due to DAS error. >5 5 to 1 <= 1 O. 1 0 Note: Updated: Q1, Q2, Q3, Q4 Current target: 1. SP 4.2b Payroll accuracy - OYA Percentage of over/under payments due to OYA error. >5 51o1 <⇒1 4 0.71 0.24 0.87 0.86 0.71 0.61 3.4 3.65 0.03 0.48 Note: Updated: Q1, Q2, Q3, Q4 Current target: 1. SP 4.3 Collection efforts Percent of payments due during the quarter that were received within 45 days of invoice date. < 85 85 to 90 >= 90 \* 60.44; 86.33, 86.31 94.64 54.05 29.64 57.75 85.58 57.75 89.86 Note: Updated: Q1, Q2, Q3, Q4 Current target: 95. SP 4.4 Travel claims Number of errors divided by the number of claims. > 10 10 to 5 <= 5 Ψ 34.6 31.8 207 385 14,07 32 75.1 38.4 10.57 9.66 Note: Updated: Q1, Q2, Q3, Q4 Current target: 5. SP 4.5 Accounting corrections Number of accounting corrections processed divided by the number of accounting transactions processed. >10 10 10 10 5 <= 5 4 03 0,4 2 2.33 3.3 1.94 1.1 3.1 3.76 1.0 0.85 0.41 Note: Updated: Q1, Q2, Q3, Q4 Current target: 5. SP 5.0 Developing human resources SP 5.1 Time loss due to injury - claims Percent of Workers Comp claims filed during the quarter that result in time loss, > 29 29 10 26 <= 26 Æ 35 20

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		Data collection	throu	gh 12/	31/201	6															
				1911							Data o	ollect	ion pe	ariod							
ID	Measure	Definition Time loss claims remain sleady at 9 but time loss percent increased because overall claims	Red	Aellow	uaay 01.02	parage Q3, Q4	Q1 2014	02 2014	03 2014	Q4 2014		02 2015	Q3 2015	Q4 2015	Q1 2016	9102 70 Cu		9102 PO	Target Met	Trend	Owner
_		decreased from 35 to 25 (time loss claims / total claims).		• 0/W-88	100,200				_		_	_									
SP 5.2	Applicant diversity	Total number of disclosed affirmative action designations divided by total number of applicants.	< 5	5 to 8	>= B	Ť	18	28.	35	28	41	34	31.	35	34	29	55.	34.	1	M	r Shibley
_	Note		U	lpdated:	01, 02	Q3, Q4		_		_	_	_		-	_	Çu	rrent ta	rget: 10	D.		
SP 5.3a	I-Learn training completion - facilities	Number of new facility employees who have taken the mandatory training within 8 weeks of hire divided by the total number of facility employees required to take the training,	< 75	75 to 85	>= 85	1	45.	22.2	50.	75,	100	88	76.	100	55	87. 8	9.5	80.	1	$\checkmark$	Fuimaon
	Note		L	Ipdated:	Q1, Q2	Q3. Q4				_	_		_			Cu	rrent ta	rget: 75	5.		
SP 5.3b	I-Learn training completion - field	Number of new field employees who have taken the mandatory training within 8 weeks of hirs divided by the total number of field employees required to take the training.	< 75	75 to 85	>= 85	1		100.			100.	100.	100.	100,	100.	100.	75.	100.	1		Fuimaon
	Note		ι	Ipdated:	Q1. Q2	Q3, Q4			1		-					Cu	rrent ta	rget: 75	5,		
SP 5.3c	I-Learn training completion - all others	Number of new employees outside of field and facilities who have taken the mandalory training within 8 weeks of hire divided by the total number of employees outside of field and facilities required to take the training.	<75	75 lo 85	>= 85	↑	¥7.	25.	66.	42	100	90	591	100	89	.93	91:6	<b>75.</b>	1	M	Fuimaon
	Note		L	Ipdated:	Q1, Q2	Q3, Q4		_		_	_					Cu	rrent ta	arget: 7	5.		
SP 5.4	Hiring and oversight	Total number of employees passing trial service divided by total number of new hires,	< 76	76 to 84	>= 84	1	100.	100.	96	89.	100,	87.	88.	83.		<u> </u>	93	98.	<	N	Shibley
_	Note			Jpdated:	Q1, Q2	Q3, Q4	-	_	_		-	_	_	-	_	Cu	rrent ta	arget: 98	5.		
SP 5.5	Performance appraisals	Number of performance appraisals received during the quarter divided by 25% of employees not on trial service,		50 to 74		•					51,	40.	51,	79	35.	11	52.	51.		$\sim$	Shibley
	Pilot measure		1	Jpdated:	01,02	03, 04							_	_		Cu	rrent ta	irget: 60	0		
SP 6.0	Securing and managing goods,	services and facilities	_				-	-	-			-	-		-	_	-				-
SP 6.1	Purchasing satisfaction	Percent of survey responses marked either a 4 or 5 on a scale of 1-5,		80 to 85		1	100.	100.	100.	100.	100.	100.	342.	109.	63.33	and the second		91,67	1		V Shibley
	Note			Jpdated:	Q1, Q2	Q3, Q4	-	_	_	-	_	-	-	-	_	Cu	rrent ta	arget: 9	0.		- 21
SP 6.2	Contract processing - timeliness	Percent of contracts processed in 30 days from date contract request is approved to the day the contract is sent to the vendor for signing.		70 to 85		1	89.	83.	76,	84.52	88.75	81.61	89.68	88,61	85.24 8		8,48	92.5		$\sim$	Shibley
	· Note	:	1	Jpdated	: Q1, Q2	Q3, Q4	_	_	_	_	_	_	_	_	-	Cu	irrent ta	arget: 9	5.	-	_
SP 6,3	Purchase order processing - timeliness	Percentage of purchase orders that are retroactive: Number of non-emergency retroactive purchase orders divided by total number of purchase orders.	>9	9 lo 6	<= 6	¥		9.	7.	19.2	8.9	29.5	61,3	52.5	-		33.2	5.7		~	Shibley
	Note		1	Jpdated:	: Q1, Q2	03.04	-	_					_		-	Cu	rrent ta	arget: 5.	<ul> <li></li></ul>		
SP 6.4a	Physical plant work order responsiveness - level 1	Percent of level 1 physical plant operation emergency work orders that are completed within the prescribed response time.		94 to 100			100.	96,	300.	94,	150	100	100.	100	100			75.		~~	Shibley
_	Note		1	Jpdated	: Q1, Q2	03,04	_			_			_	154		Cu	irrent ta	arget: 1	00.	-	_
SP 6.4b	Physical plant work order responsiveness - levels 2 to 5	Percent of level 2 to 5 physical plant operation work orders that are completed within the prescribed response time.	< 80	80 to 90	>= 90	4	97	97,	62	6	100,	ii.	91.	88,;	87.			83.		N	Shibley
	Note		ļ	Jpdated	: Q1, Q2	, Q3, Q4										Cu	irrent ta	arget: 9	0.		

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#### Data collection through 12/31/2016

	Uported and an and a second										Data	a collec	ction	perior	đ						
ID	Measure	Definition	Red	Yellow	Green	pination Mendion	Q1 2014	02 2014	03 2014	Q4 2014	Q1 2015	02 2015	03 2015	Q4 2015	Q1 2016	02 2016	Q3 2016	04 2016	Target Met	Trend	Owner
P7.0	Loveraging data, research and	d technology				desta															
	JJIS/OTIS	Percent of time Oracle database is up.	< 95	95 to 99	>= 99	Ť	99.58	90.99	39.99	59,59	99.95	100	99.69	90.00	99.4	99,76	199.96	99.99	1	V	Shibley
		Note: Manual process. Production jabs run every 15 minutes and if a job can't login to Cracle, we can count as down time.	U	Updated:	Q1, Q2,	Q3, Q4			_								Curre	ent target:	99.98		A
	Enterprise application uplime - Network server	Percent of time state data center network is available.	< 95	95 to 99	>= 99	1	96.807	7 100.	100.	99.87	98.87	95,94	91.95	10,85	93.5			20000	1	1	Shibley
		Note: Nagios server to monitor servers using stored logs	ľ	Updated:	Q1, Q2	, Q3, Q4											Curre	ent target:	99.98		<u>i</u>
SP 7.1c	Enterprise application uptime - Email	Percent of time OYA email systems are available.		95 to 99			95,379	100.	92.96	99.59	100,	100.	69.85	5 100.	100.	98.61	1 69.95	99,95	1		Shibley
	N	Note: Nagios server to monitor servers using stored logs.	ľ	Updated:	: Q1, Q2	. Q3, Q4		_									Curre	ent target:	99.5	_	
SP 7.1d	Enterprise application uptime - JJ web services	JJIS Percent of time JJIS web is available;		95 to 99	1.000	1 - 1 - 1		1,99,984	100.	100.	100.	100,	97,064	4 99.96	99,9	6 90,99	99,41	2 100.	1	\	Shibley
	N	Note: Neglas server to monitor servers using stored logs.	V	Updated:	: Q1, Q2	, Q3, Q4	<u></u>								_		Curre	ent target:	99.5		-
	Enterprise application uptime - Unified access gateway	Percent of time unified access galeway is available,	< 95	95 to 99	>= 99	Ť	95.371	100	59.94	4 100.	99.99	100.	59,945	6 55.11	99.52	2 100	a 100.	98		/ V	Shibley
0	N	Note: Neglos server to monitor servers using stored logs	ľ	Updated:	: 01.02	03.04							1			-	Curre	ent target:	99.5		<i>.</i> *
SP 7.1f	Enterprise application uptime - O	OYA Percent of time OYANet is accessible.	< 95	95 to 99	>= 99	Ŷ	95.371	1 86,589	500	95.58	89.54	99.94	96,855	100.	99.57	6 59.00	251.98	99.9	1	/	Shibley
	N	Note: Nagios server to monitor servers using stored logs.	J	Updated:	: Q1, Q2	. Q3, Q4									_		Curre	ent target:	99.5		2
	Enterprise application uptime - 24 7 facility network	24 x Percent of time network services available at facilities.		95 lo 99			95,365	90.9	92.96	99,87	99.96	99.95	99.75	39.78	92.9	47 <u>100.89</u>				/	Shibley
	N	Note: Nagios server to monitor servers using stored logs.	T	Updated:	: Q1, Q2	. Q3, Q4									_		Curre	ent larget	99.5		
SP 7.2	IT customer satisfaction	Percent of IS customers who report being "Very Satisfied" or "Satisfied" on customer satisfaction surveys.		80 to 90		LICE IS	56.52	2 58.9	9 85.6	91.	95.5	97.3	88.	8. 89.	9425	65.5	5 55.19	9 97.45	1	M	Shibley
	N	Note: Reports 100%; Development 95.24%; Tech Services 98%		Updated:	: Q1, Q2	. Q3, Q4						_					Curre	ent target	90.		
SP 7.3	IT project management	Percent of "projects" completed by initial projected completion date.		70 to 90	_		67	100.	100,	75.	100.	×		100.				1		M	Shibley
	N/	Note:	V	Updated:	. Q1, Q2	. 03, 04							_		_	_	Curre	ent target	99.		
SP 7.4	Information security	Average score from annual DAS Information Security Business Risk Assessment (ISBRA).		2 to 4	10000	1										3.5					Shibley
	N	Note: Score range 0 - 5. Most recent annual audit was held early 2016 for 2015 data and reported to OVA 6/16.	V	Updated:	Q5			-									Curre	ent target	: 2.5		-
SP 7.5	Service desk efficiency	Percent of closed IS Work Order/Tickets completed by estimated initial service delivery date	< 90	90 to 95	>= 95	Ť	95.	i 92.	2 92.	93,	91.	91.	91,	1. 94.	. 45	8. 98.	a. 55	95		4	Shibley

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Data collection through 12/31/2016

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			1				Ш				Data	collee	tion p	eriod							
ID	Measure	Definition	Red	Yellow	Green	oreand Discussion	01 2014	02 2014	03 2014	04 2014	Q1 2015	02 2015	03 2016	04 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Target Met	Trend	Owner
		Note: There were 2,233 Requests creaated during Q4 2016. Of those, 2,119 (95%) were closed within the quarter. Additionally, 190 Requests created prior to 2016 Q4 were closed within the quarter. At the end of Q4 2016, there were 114 Open Requests, of which 14 were created prior to Q4 2016.		Jpdated:	Q1, Q2,	Q3, Q4										Ci	urrent t	arget: 97	7.		
SP 7.6	Completed JJIS reports	Percent of raquests expected to be completed,	< 70	70 to 79	>= 79	Ŷ	67.	60.	78.	65,	76.	59,	72	64	35	75.	89	86,	1	M	Shibley
		Note: Total expected to be completed = 14; Total closed = 12; Percentage expected were cosed = 86% - 1 or 2 remain open that were expected to close in the next week.		Updated:	Q1, Q2,	Q3, Q4										C	urrent t	arget: 72	2.		
SP 7.7	Successful JJIS report uploads	Number of times the Reports database refresh fails in quarter.	>5	5 to 3	<= 3	Ψ			2	2	÷i,	- 14	4	4	ġ,	9	1	1.	-	A	Shibley
		Note: Reports build occurs 4x per week. 1 failures during Q4 2016. Dates and cause: Dec. 27	1	Jpdated:	Q1. Q2.	Q3. Q4										C	urrent t	arget: 0.			

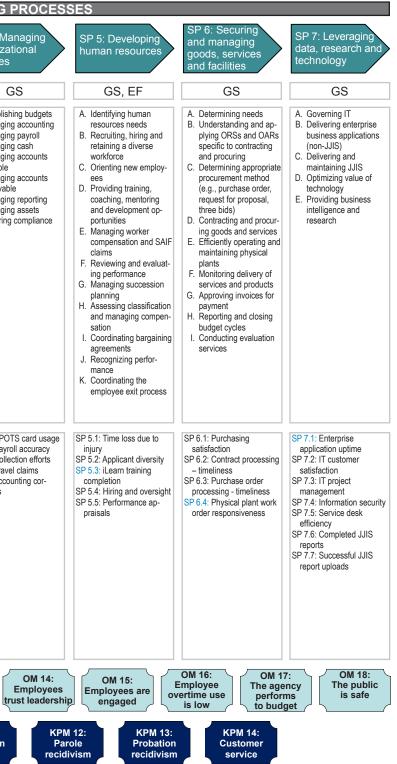
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KEY GOALS	AU	THO	ODEDATING	Highly effect and efficie organizat	ent security an	and produc	compet	ent and comment and transfer	borative, aunicative ansparent dership	ORTING PI
CORE PROCESSES	OP 1: Managing youth and staff safety	OP 2: Managing the youth commit- ment process	OP 3: Managing youth intake and assessment	OP 4: Managing youth health care	OP 5: Providing basic youth services	OP 6: Managing youth reformation services	SP 1: Communi- cating with inter- nal and external stakeholders	SP 2: Conduct- ing strategic and operations planning	SP 3: Evaluating and improving performance	SP 4: Man organizatio finances
PROCESS	PC, CM, GS	PC, CM	PC, CM, MA	MA, EF	PC, CM, GS, BC	CM, PC, EF, BC	SE, CM, BC, EF	JO, PC, CM, GS	JO, PC, CM, EF	GS
OWNERS SUB PROCESSES	<ul> <li>A. Ensuring daily operations are effectively managed</li> <li>B. Ensuring physical plants are safe and secure</li> <li>C. Selecting and maintaining appropriate equipment and technical systems</li> <li>D. Preventing self-harm and assault of others</li> <li>E. Ensuring safe transportation of youth</li> <li>F. Deploying appropriate staffing</li> <li>G. Managing systems resources to maximize youth, staff and public safety</li> <li>H. Preventing and managing escapees and runaways</li> <li>I. Maintaining sanitation</li> <li>J. Meeting PREA standards for monitoring, responding and following up on sexual abuse allegations</li> </ul>	<ul><li>A. Receiving delinquency information</li><li>B. Staffing cases with</li></ul>	<ul> <li>A. Confirming documentation received</li> <li>B. Confirming first-day checklists</li> <li>C. Assessing criminogenic risks and needs</li> <li>D. Assessing physical, mental and behavioral health</li> <li>E. Assessing special needs</li> <li>F. Reviewing youth behavior during the assessment period</li> <li>G. Identifying appropriate treatment and placement resources</li> <li>H. Managing the youth offender population via a validated youth classification system</li> <li>I. Making recommendations to the Administrative Review Board</li> </ul>	<ul> <li>A. Performing physical and dental evaluations</li> <li>B. Creating medical care plans</li> <li>C. Assessing and treating mental health conditions</li> <li>D. Screening for infectious diseases</li> <li>E. Educating youth and staff on health care issues</li> <li>F. Responding to youth health care requests (medigrams)</li> <li>G. Administering medications</li> <li>H. Administering immunizations</li> <li>I. Developing and maintaining health care policies and procedures</li> <li>J. Managing contracts for medical services and products, and with contracted primary and specialty health care providers</li> </ul>	<ul> <li>A. Providing food services</li> <li>B. Providing canteen services</li> <li>C. Providing calterniation of the services</li> <li>D. Providing clothing, linens and laundry svs.</li> <li>E. Providing for family communications and visits</li> <li>G. Providing recreation opportunities</li> <li>H. Transferring and transporting youth</li> <li>I. Overseeing community out-of-home placements</li> <li>J. Making culturally spe- cific services available</li> <li>K. Facilitating access to faith services</li> <li>L. Ensuring a system for grievances and appeals</li> <li>M. Managing youth behavior</li> <li>N. Providing access to courts and counsel</li> <li>O. Identifying and securing resource entilements</li> <li>P. Managing youth funds</li> </ul>	<ul> <li>A. Holding youth accountable</li> <li>B. Using assessment information to develop case plans</li> <li>C. Initiating case plan reformation recommendations</li> <li>D. Delivering case plan services</li> <li>E. Providing treatment</li> <li>F. Managing restitution to victims</li> <li>G. Assessing and re-assessing youth progress on an ongoing basis</li> <li>H. Adjusting case plans based on assessments</li> <li>I. Meeting case plan objectives</li> <li>J. Engaging families in reformation</li> <li>K. Providing treatment formation and vocational services</li> <li>L. Managing re-entry and/ or transitions</li> <li>M. Closing cases</li> </ul>	<ul> <li>A. Developing and implementing communication strategies</li> <li>B. Developing communication materials</li> <li>C. Managing internal communications</li> <li>D. Managing external communications</li> <li>E. Involving citizens as advisors and volunteers</li> <li>F. Monitoring outcomes</li> </ul>	<ul> <li>A. Identifying trends and changing needs</li> <li>B. Complying with new legal mandates</li> <li>C. Defining current state of agency operations and program delivery</li> <li>D. Defining the desired future state of agency operations and program delivery</li> <li>E. Identifying the gaps between the current and desired future states</li> <li>F. Identifying the financial and other resources needed to close the gap</li> <li>G. Developing implementation plans</li> <li>H. Developing timelines and measures</li> <li>I. Conducting target reviews and making adjustments as required</li> <li>J. Maintaining emergency response plan</li> <li>K. Keeping agency rules and ploicies compliant with laws and standards.</li> </ul>	<ul> <li>A. Defining baseline (current state of strengths and weaknesses)</li> <li>B. Identifying industry benchmarks using research-based best practices</li> <li>C. Setting outcome and process targets</li> <li>D. Identifying the gaps between the current state and the desired targets</li> <li>E. Prioritizing initiatives</li> <li>F. Implementing process improvements</li> <li>G. Monitoring outcomes and adjusting actions as needed</li> <li>H. Conducting program evaluations</li> <li>I. Conducting regular internal audits to reduce agency risk</li> <li>J. Responding to reports of youth and staff misconduct</li> </ul>	<ul> <li>A. Establishing</li> <li>B. Managing a</li> <li>C. Managing p</li> <li>D. Managing c</li> <li>E. Managing a</li> <li>payable</li> <li>F. Managing a</li> <li>receivable</li> <li>G. Managing r</li> <li>H. Managing a</li> <li>I. Ensuring co</li> </ul>
PROCESS MEASURES Blue indicates measures with sub-measures	OP 1.1: Runaways OP 1.2: Escapes OP 1.3: Youth-on-staff assaults OP 1.4: Youth-on-youth assaults OP 1.5: Sexual behavior allegations OP 1.6: Facility staff safety	OP 2.1: Access to commu- nity services – capacity OP 2.2: Access to commu- nity services – timeliness OP 2.3: Victims notified of rights OP 2.4: Victims notified prior to parole	OP 3.1: Intake RNA completion OP 3.2: Case plan rel- evance to RNA OP 3.3: Intake length-of-stay OP 3.4: Timely case plan audits OP 3.5: Initial psychological evaluations OP 3.6: ATOD assessments	OP 4.1: Suicidal risk assessment OP 4.2: Treatment service delivery OP 4.3: Response to psychology referrals – timeliness OP 4.4: Medical examina- tion and care plan development OP 4.5: Dental care OP 4.6: Medication adminis- tration errors OP 4.7: Immunization administration OP 4.8: Response to sick call requests – timeliness	OP 5.1: Access to family – visits OP 5.2: Access to family – calls OP 5.3: Participation in cultural groups OP 5.4: Grievance system responsiveness	OP 6.1: Residential program performance OP 6.2: Educational services - special programming OP 6.3: Treatment assess- ment OP 6.4: Treatment progress OP 6.5: School and work engagement - field OP 6.6: Restitution paid OP 6.7: Treatment fidelity OP 6.8: Initial MDT completion OP 6.9: Post-secondary programs - facility	SP 1.1: Executive notifica- tions SP 1.2: Executive com- munications SP 1.3: Message generation SP 1.4: Public reputation SP 1.5: Public engagement	SP 2.1: Breakthrough initiatives SP 2.2: Current agency policies	SP 3.1: Idea implementation SP 3.2: Staff involvement SP 3.3: Measures showing improvement (pilot) SP 3.4: Measures meeting target (pilot) SP 3.5: Outcome evaluation effectiveness SP 3.6: Timely PSO cases SP 3.7: Investigation dispo- sition outcomes SP 3.8: Timely response to hotline	SP 4.1: SPOTS SP 4.2: Payroll : SP 4.3: Collecti SP 4.4: Travel c SP 4.5: Account rections

# OREGON YOUTH AUTHORITY PERFORMANCE MANAGEMENT SYSTEM FUNDAMENTALS MAP January 1, 2017



Data collection through 12/31/2016

				0						C	Data col	lection	period	l						
ID OP 3.0	Measure Managing youth intake and asse	Definition	Red	Yellow	Green	Desired Direction	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Target Met	Trend	Owner
UP 3.0	Managing youth intake and asse	ssment													_					
OP 3.1a	Intake RNA completion - facility	Percent of facility youth whose RNA assessments are completed within 30 days of commitment (KPM 6).		85 to 90		↑	95.2	95.9	88.	92.5	78. 85	.7 96.4	l 100.	96.7			94.9			McClellan
	Note		-	Updated	Q1, Q2,	Q3, Q4						_			0	Current	target:	95.		
OP 3.1b	Intake RNA completion - probation	Percent of probation youth whose RNA assessments are completed within 30 days of commitment (KPM 6).	< 85	85 to 90	>= 90	↑	91.7	86.5	77.3	85.7	84.7 87	.5 85.5	5 81.	82.1	94.9	83.8	90.6	$\checkmark$	V	Cox
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	90.	·	
OP 3.2a	Case plan relevance to RNA (facilities)	Percent of audited case plans which reflect risk needs assessment.	< 85	85 to 90	>= 90	↑	91.3	100.	100.	100.	92. 10	0. 96.9	97.6	100.	100.	100.	100.	$\checkmark$	$\sum$	McClellan
	Note			Updated	Q1, Q2,	Q3, Q4							·		C	Current	target:	100.	<u> </u>	
OP 3.2b	Case plan relevance to RNA (field)	Percent of audited case plans which reflect risk needs assessment.	< 85	85 to 98	>= 98	↑	94.1	98.5	98.6	97.6 ·	100. 10	0. 100	. 100.	98.4	100.	100.	100.	✓	$\sum_{i=1}^{n-1}$	Cox
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	98.		_
OP 3.3	Intake length-of-stay	Average LOS during facility intake process.	> 60	60 to 45	<= 45	≁	23.6	25.3	29.9	47.1	36.8 28	.7 24.4	29.4	38.3	46.5	35.6	41.6		$\mathcal{N}$	V McClellan
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	35.		
OP 3.4a	Timely case plan audits - facilities	Percent of case plan audits due that were completed during the quarter.	< 85	85 to 90	>= 90	↑	92.	81.	53.1	58. (	62.5 56	.1 62.5	5 74.5	58.5	59.3	67.7	97.1	✓	In	McClellan
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	80.		
OP 3.4b	Timely case plan audits - field	Percent of case plan audits due that were completed during the quarter.	< 85	85 to 95	>= 95	↑	97.7	93.1	97.3	94.3	100. 91	.7 94.4	100.	98.5	98.4	96.2	98.6	✓	$\mathbb{W}$	✓ Cox
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	95.		_
OP 3.5	Initial psychological evaluations	Percent of youth receiving an initial psychological evaluation within 30 days of admission.	< 85	85 to 89	>= 89	↑	98.	100.	98.	98. ·	100. 9	9. 98	. 94.	85.	95.	95.	98.1	✓	$\widehat{}$	Adams
	Note			Updated	Q1, Q2,	Q3, Q4									C	Current	target:	95.	· · · ·	
OP 3.6	ATOD assessments	Percent of youth receiving ATOD assessment within 30 days of admission to a certified OYA facility ATOD program.	< 70	70 to 80	>= 80	↑		54.	60.5	66.	68. 75.2	27 71.6	6 77.33	84.3	68.	94.	84.4		and a	Fuimaono
	Note	:		Updated	Q1, Q2,	Q3, Q4									C	Current	target:	80.	-	