



# Key Performance Indicators Report:

# KPI

Volume 8, Issue 3

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## Economic Assistance and Work Services

### EAWS Caseload (chart 1):

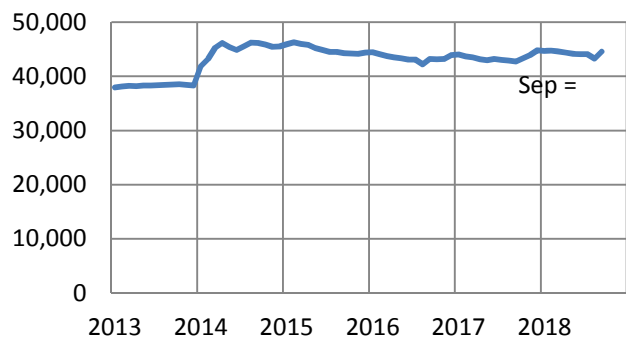
Caseloads remained steady in the 3rd quarter of 2018. Average caseload for the quarter was 43,984.

### Call Center Activity (charts 2 and 3):

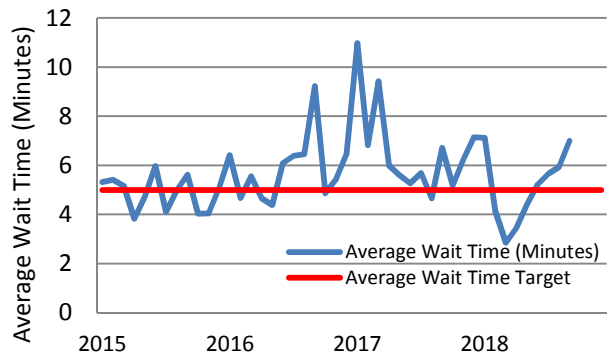
The Call Center serves 8 counties including Dane. Standards of performance have been established. The agency's goal for average wait time for answering the phone is five minutes or less. The goal for the percentage of calls answered by agents is 85% or greater of total calls.

Through the 3rd quarter, Call Center volume rose to 27,099 calls in August. Wait times in the 3rd quarter were above the benchmark of 5 minutes. The answer rate was consistently better than the 85% benchmark.

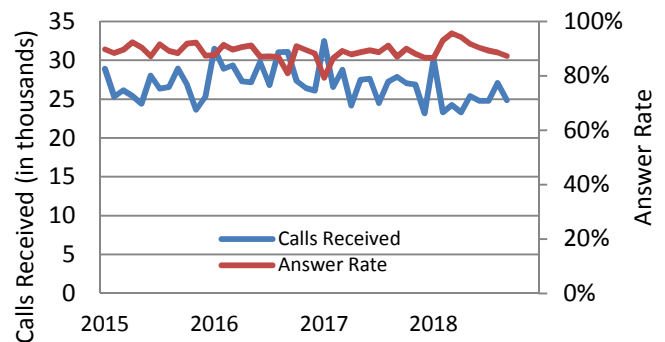
EAWS - Unduplicated Cases



Average Wait Time (Phone)



Calls Received and Answer Rate



# Adult Community Services

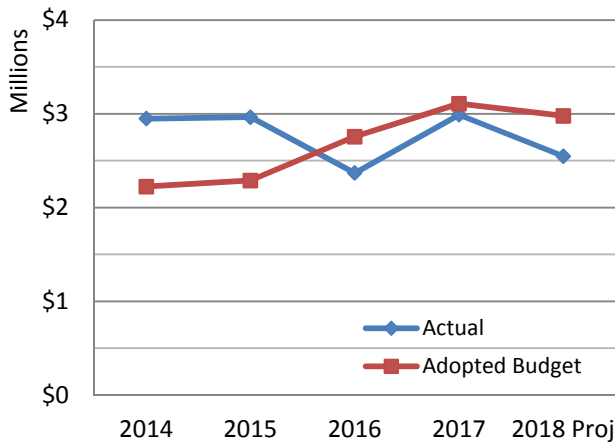
## Inpatient utilization: Mendota Mental Health Institute and Community Hospitals

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 \$1,100/day with Medicare, Medicaid and private insurance covering approximately 41% of the cost.

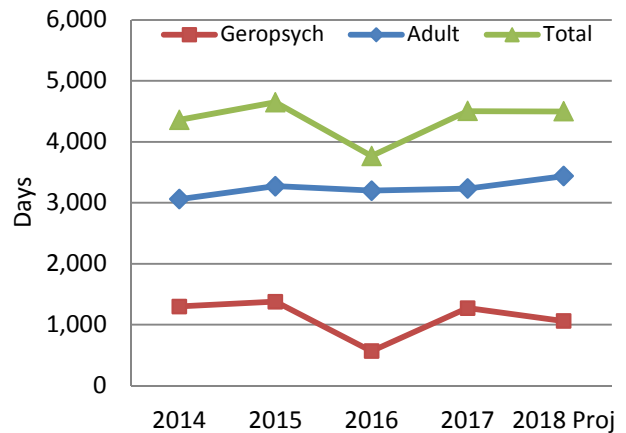
With data through September 2018, adult mental health treatment days are showing a slight upward trend in comparison to 2017. Gero-psychiatric treatment days have declined. The current projection indicates a year end surplus of \$400,000.

Utilization of psychiatric hospital beds within Dane County has increased. With data through September 2018, this line is projecting a year end deficit of (\$55,000).

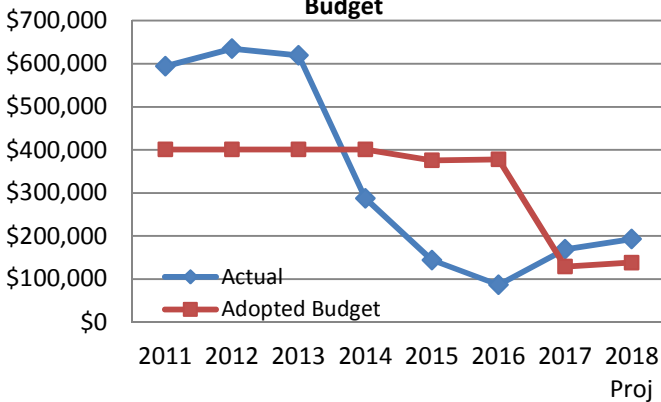
ACS - State Institutional Costs vs Budget



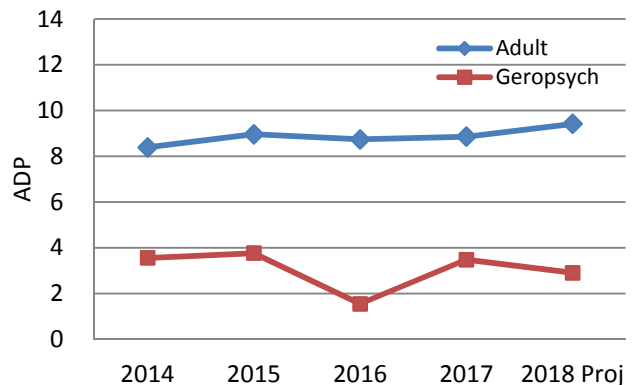
ACS - State Institutional Mental Hospital Days



Community Hospitals - Actual vs Adopted Budget



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



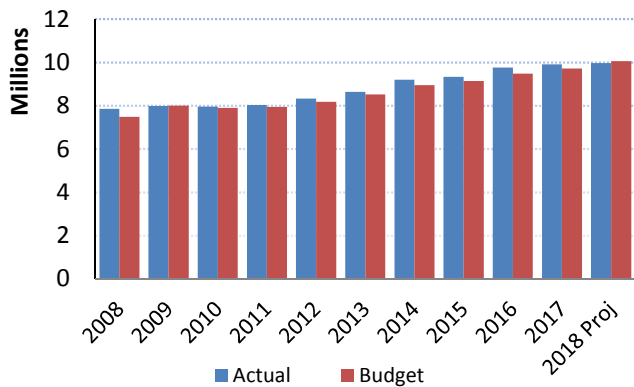
# Badger Prairie Health Care Center

## Residential Care Costs

Personnel related costs are the largest component of service costs at BPHCC. These include staff salaries, overtime and LTE costs. 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.

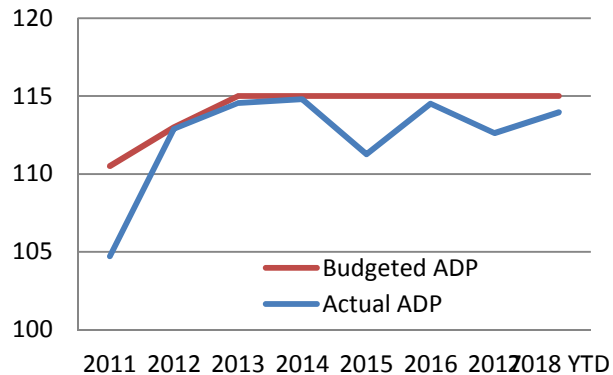
With data through September 2018, personnel costs are projected to stay within budget. The Census is budgeted at 115 persons. The projected Average Daily Population (ADP) for 2018 is 113.96. Based on 3rd quarter data leave without pay, sick leave and unplanned absences (vacation/holiday) continue to trend upward. Projected worker’s compensation incident only incidents (those that result in less than 3 days of lost time) decreased and lost time incidents (those that result in 4 or more days of lost time) remain steady in comparison to 2017 data.

**Total Personnel Expenses: BPHCC**

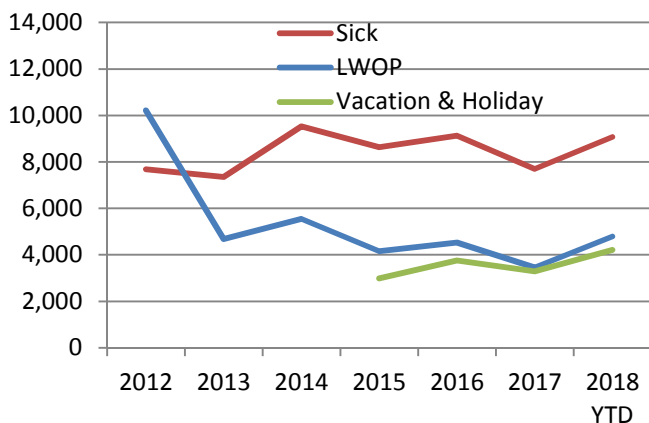


\* includes Personnel, Overtime, LTE, & Contract

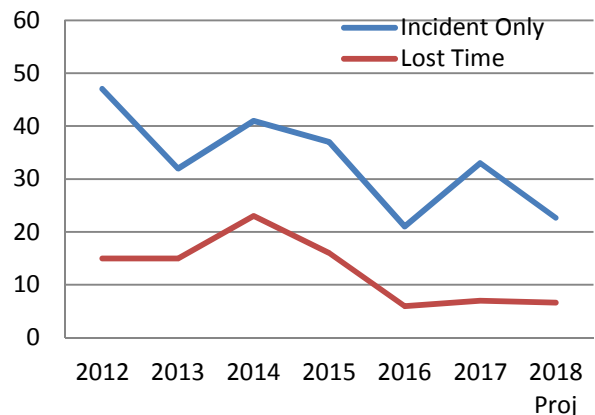
**Average Daily Population 2011-2018**



**Unplanned Absences (in hours) by Type**



**Worker's Comp. Incidents by Type**



# 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 September of 2018, Alternate Care is projected to produce a surplus of roughly \$511,000 mostly due to low Corrections and and Psych. Hospital costs.

