FY 2015 Performance Accountability Report
Department of Human Services

The Performance Accountability Report (PAR) measures each agency's performance for the fiscal year against the agency's performance plan and includes major accomplishments, updates on initiatives' progress and key performance indicators (KPIs).

MISSION
The mission of the District of Columbia Department of Human Services (DHS), in collaboration with the community, is to assist low-income individuals and families to maximize their potential for economic security and self-sufficiency.

SUMMARY OF SERVICES
The mission of DHS is achieved via the following agency programs:

- Agency Management – provides for administrative and operational support to achieve programmatic results.
- Family Services Administration
  - Homeless Services – provides a continuum of services to individuals and families who are homeless or at risk of homelessness, so that they can obtain and/or maintain improved housing;
  - Family Services – provides social services, case management and crisis intervention to meet the needs of vulnerable adults and families with children;
- Economic Security Administration
  - Income Assistance Services –
    - Administers the Temporary Assistance for Needy Families (TANF) program, which provides temporary income support assistance for low-income families while helping them improve their long-term employability and achieve family-sustaining income;
    - Administers the Food Stamp program, which is designed to provide supplemental nutrition assistance to individuals and families in need, and support their return to long-term employability; and
    - Administers the District of Columbia Interim Disability Assistance program, which provides assistance to Supplemental Security Income (SSI) applicants pending SSI determination.
  - Eligibility Determination Services –
    - Determines eligibility for the District of Columbia's child care subsidy program and an array of Federal and District medical assistance programs, including Medicaid, Children's Health Insurance Program (CHIP), and the D.C. Healthcare Alliance Program.

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OVERVIEW – AGENCY PERFORMANCE

The following section provides a summary of DHS performance in FY 2015 by listing DHS's top three accomplishments, and a summary of its progress achieving its initiatives and progress on key performance indicators.
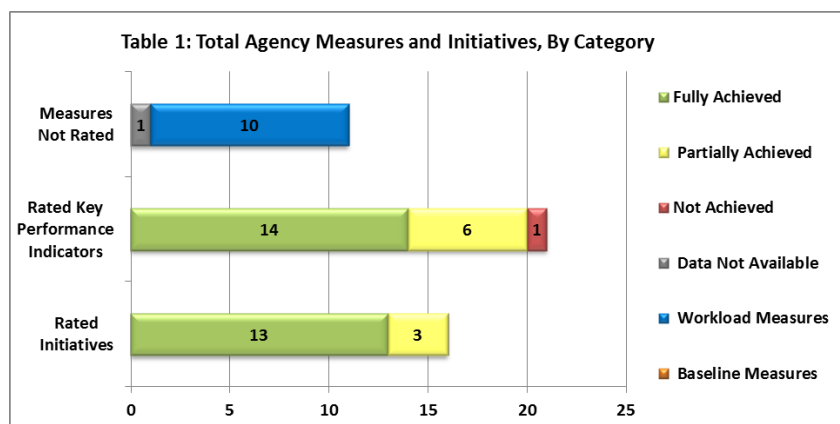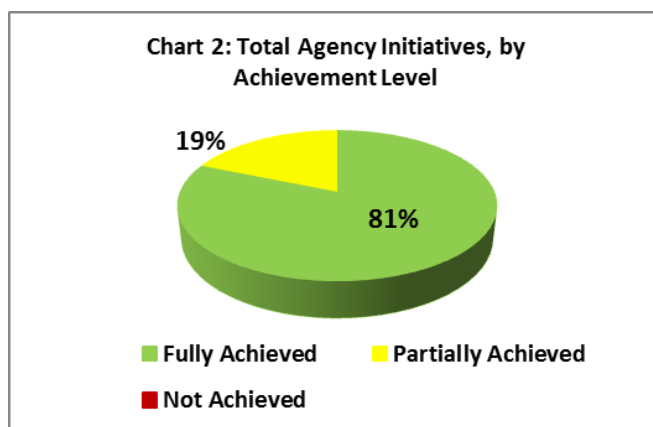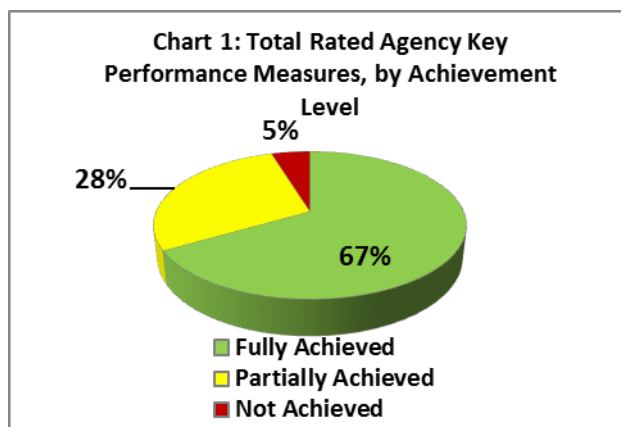
TOP THREE ACCOMPLISHMENTS

The top three accomplishments of DHS in FY 2015 are as follows:

- Year round access to family shelter: Connecting more than 463 families with emergency shelter since the end of hypothermia season, as compared to only 77 families who were provided emergency shelter during the same period in FY14. DHS has also increased the rate at which families exit shelter to permanent housing. In FY15, DHS helped 1012 families exit shelter to permanent housing, compared to 887 families in FY15—an increase of nearly 15%.
- Effectively eliminated wait times for assignments to TEP providers: In FY14, the number of TANF customers waiting to be assigned to employment assistance providers was more than 3,000. As of September 30, 2015, that number was only 22.
- Adult Protective Services recognized: In FY15 Adult Protective Services earned full accreditation from the Council on Accreditation (COA). In 2012 Adult Protective Services applied to COA, which provides a rigorous evaluation of human service organizations against best practice standards.

SUMMARY OF PROGRESS TOWARD COMPLETING FY 2015 INITIATIVES AND PROGRESS ON KEY PERFORMANCE INDICATORS

Table 1 (see below) shows the overall progress the DHS made on completing its initiatives, and how overall progress is being made on achieving the agency's objectives, as measured by their key performance indicators.

Table 1: Total Agency Measures and Initiatives, By Category

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Chart 1: Total Rated Agency Key Performance Measures, by Achievement Level

- Fully Achieved: 67%
- Partially Achieved: 28%
- Not Achieved: 5%

Chart 2: Total Agency Initiatives, by Achievement Level

- Fully Achieved: 81%
- Partially Achieved: 19%
- Not Achieved

Default KPI Rating:

>= 100%	Fully Achieved
75 - 99.99%	Partially Achieved
< 75%	Not Achieved

In FY 2015, DHS fully achieved more than four-fifths of its initiatives and more than 65% of its rated key performance measures. **Table 1** provides a breakdown of the total number of performance metrics DHS uses, including key performance indicators and workload measures, initiatives, and whether or not some of those items were achieved, partially achieved or not achieved. **Chart 1** displays the overall progress is being made on achieving DHS' objectives, as measured by their rated key performance indicators. Please note that chart 2 contains only rated performance measures. Rated performance measures do not include measures where data is not available, workload measures or baseline measures. **Chart 2** displays the overall progress DHS made on completing its initiatives, by level of achievement.

The next sections provide greater detail on the specific metrics and initiatives for DHS in FY 2015.

PERFORMANCE INITIATIVES – ASSESSMENT DETAILS

Agency Management Program

OBJECTIVE 1: Coordinate and provide administrative and quality control support mechanisms to assist low-income individuals and families to maximize their potential for economic security and self-sufficiency.

> **INITIATIVE 1.1: Implement the Affordable Care Act mandates for the District of Columbia as part of the consolidated health and human services modernization project.**

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The District of Columbia continues to improve services provided through the DC Access System (DCAS) for the residents, employee and employers of the District. From October 1, 2013 to July 9, 2014, 51,029 people have enrolled through DC Health Link in private health plans or Medicaid:

- 12,530 people enrolled in private health plans through the DC Health Link individual and family marketplace.

- 13,779 people enrolled through the DC Health Link small business marketplace.

- 24,720 people were determined eligible for Medicaid coverage through DC Health Link.

While the system is operating, the next phase of the project, Release 2, was started in January 2014. In FY15, Department of Human Services, Department of Health Care Finance, DC Health Benefit Exchange and Office of Chief Technology Officer will be working to further improve production services and complete the design and development of software programs that will migrate the administration of Medicaid (non-MAGI) onto the DCAS platform. After extensive testing and approval by federal funding agencies, DHS expects to Go-Live with all the new functionality in 2016. **Completion Date: December, 2015.**

Performance Assessment Key: **Fully Achieved.** In 2015, the DCAS project made significant progress. For the first time, 36,000 Medicaid cases were automatically (passively) renewed through our new technology and process. Further, 23,318 people enrolled in private health plans through DC Health Link's individual and family marketplace since 2014, and 8,110 people enrolled through DC Health Link's small business marketplace (SHOP) since 2014. In the same time period, 99,746 people were determined eligible for Medicaid coverage through DC Health Link. Finally, 182,203 people have enrolled through DC Health Link's private health plans or been determined eligible for Medicaid since its October 1, 2013 inception

The MAGI ("modified adjusted gross income, "a simplified method for calculating eligibility) Medicaid portion of the system continues to operate and Release 2 of the system is still on track for a 2016 implementation. The Release 2 plan has been modified since 2015 and Non-MAGI Medicaid functionality will now be part of Release 3 of the system, which does not yet have a scheduled go-live date. The current functionality for Release 2 will still include all of DHS's Cash and Food Assistance programs. The system will initially support eligibility enrollment and processing by DHS staff but will expand in FY17 to have a public-facing web portal for self-service options.

INITIATIVE 1.2: Expand existing personnel to better serve District residents.
In FY14, DHS hired and trained 34 additional staff members in the Office of Work Opportunity (OWO) to provide case coordination services for TANF customers. In FY15, DHS will hire

additional personnel to support the operations of the DC Access System (DCAS). **Completion Date: September, 2015.**

○ *Performance Assessment Key:* **Fully Achieved.** In FY15, DHS human resources staff supported a significant hiring demand and brought on a total of 124 new staff.

INITIATIVE 1.3: Develop a comprehensive Risk Management Assessment.
DHS will develop a comprehensive Risk Management Assessment to identify, assess, mitigate, monitor and control risks that may prevent, in part or in whole, achievement of the DHS mission, goals or objectives. Basic components include, training for staff, contractors and other stakeholders in risk identification and reporting, processes, methods, tools and techniques for capturing and compiling risks in a centralized inventory, assessing and prioritizing risks, developing strategies for mitigating, monitoring and controlling risks, and integrating risk data and information into the agency's continual improvement efforts. **Completion Date: September, 2015.**

○ *Performance Assessment Key:* **Fully Achieved.** In 2015, DHS hired a dedicated risk manager within the Office of Program Review, Monitoring, and Investigation (OPRMI). In June 2015, DHS senior management met to identify and assess the full range of risks to the agency, and prioritized and assessed those risks. Input from the meeting was documented in the DHS comprehensive Risk Management Plan. In September 2015, a Risk Assessment and Control Committee (RACC), made up of agency senior management and union leadership, was reconvened to recommend training for staff and develop strategies to mitigate identified areas of risk.

KEY PERFORMANCE INDICATORS– Agency Management Program

	KPI	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program
○	1.1	Percent of shelter and supportive housing staff trained on new Unusual Incident reporting system	100%	100%	100%	83%[1]	83%	AMP

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[1] Several new providers began providing services in late FY15 after the last Unusual Incident Reporting training, which lowered the percentage. In FY16, this number will return to 100%, since trainings will be offered monthly.

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⬤	**1.2**	Number of homeless service programs monitored	56	111	110[2]	110	100%	AMP
⬤	**1.3**	Percent of upgrades made to DHS facilities that serve the public	35%	25%	Not Applicable	Not Applicable[3]	Not Applicable	Not Applicable

Family Services Administration

OBJECTIVE 1: Address the needs of the homeless in the District of Columbia.

> **INITIATIVE 1.1: Continue providing permanent supportive housing to individuals, families and seniors (Age-Friendly DC Goal: Domain # 3).**
> Permanent supportive housing provides long-term housing subsidies and supportive services for chronically homeless individuals and families with histories of homelessness. In FY14, DHS increased the number of scattered site placements by 150, including services focused on the senior adult population, maintained permanent supportive housing beyond the scattered sites component at three site-based projects for women and families and completed construction on a new site-based project for 40 veterans and chronically homeless men. In FY15, the agency will open this new project and maintain permanent supportive housing for the current participants. **Completion Date: September, 2015.**

⬤   *Performance Assessment Key:* **Fully Achieved.** In FY15, DHS completed construction on the new PSH site-based project for 40 veterans and chronically homeless men. The facility is fully occupied and clients are receiving services from a case management provider. In FY15, DHS opened the Adams Place Walk-In Day Center which services homeless clients by providing services and connecting clients to benefits.

> **INITIATIVE 1.2: Continue the Emergency Solutions Grants Program (ESG).**
> DHS will work in partnership with The Community Partnership for the Prevention of Homelessness (TCP) to continue the implementation of ESG. ESG is funded by the Department of Housing and Urban Development (HUD) to fund prevention and re-housing services for individuals and families who are homeless or at-risk of homelessness. In FY15, ESG will provide

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[2] The target for homeless service programs should have been 110 rather than 111 (a hypothermia-only contract was included in the original count, but that provider was already included in the 110).

[3] As of January 2015, this measure is no longer being tracked because it was problematic.

prevention assistance to approximately 100 families and 75 individuals. **Completion Date: September, 2015.**

⬤ *Performance Assessment Key:* **Fully Achieved.** In FY15, a total of $1.7 million in ESG funding was spent to assist over 100 families and over 100 individuals through Rapid Rehousing. DHS allocated an additional $460,000 to allow additional families to receive Rapid Rehousing. DHS expects to receive another $1.2 million from HUD in December 2015 to be used for prevention, rehousing services, and shelter operations.

INITIATIVE 1.3: Implement Phase 2 of the Homeless Services Integration (HSI) Project.
In April of 2012, DHS began an exciting and innovative effort to integrate the services and resources available to families under its two administrations: the Economic Security Administration's (ESA) Temporary Assistance for Needy Families (TANF) program and the Family Services Administrations' (FSA) Homeless Services program. The initiative's main priorities focused on the Virginia Williams Family Resource Center (VWFRC), DHS' central intake center for families experiencing housing instability, and the frontline emergency shelters utilized by these families.

The past two year's accomplishments have become known as "Phase 1" of HSI. HSI Phase 1 has successfully integrated TANF and Homeless Services for families by updating and refining IT infrastructure and broadening system access for case planning purposes, creating unified assessment and eligibility screening tools, engaging in business process re-engineering, and drafting new policies and procedures for more efficient and effective practices to serve families in need.

In FY15, the agency will launch Phase 2 of HSI. Phase 2 is designed to extend the integration of the TANF Redesign and Family Homeless Services to the Homeless Services Continuum of Care, as well as broaden the reach of the integrated business process and prevention efforts in motion at VWFRC. **Completion Date: September, 2015.**

⬤ *Performance Assessment Key:* **Fully Achieved.** Over the course of FY15, DHS designed and implemented Phase 2 of the HSI strategy to integrate the TANF and Homeless Services program models for families receiving TANF and homeless case management services from providers across the Homeless Services Continuum of Care (CoC). The provider community included all family frontline shelter programs, rapid re-housing programs, transitional housing programs, and permanent supportive housing programs. Early in the fiscal year, DHS held a series of stakeholder work group meetings to design and build a training course on Unified Case Planning and use of the CATCH TANF case management system. During the remainder of the fiscal year, DHS delivered a series of training courses for all TANF Employment Program (TEP) providers and all DHS Housing Case Management providers, ensuring all parties were aware of each other's responsibilities and were equipped to update and share case information in the CATCH system. For the first time, case managers that work with the same

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family can jointly craft work plans, review case notes and reinforce strategies to improve participation. By the end of the year, over 300 provider staff were trained on the unified case planning process.

In addition to the training, DHS updated the TEP Manual with information targeting the homeless case management providers and distributed to all providers. Now that the training and manual have been completed, DHS is focused on ongoing technical assistance and a user-maintenance strategy—providing monthly trainings for new staff hires and newly added providers as well as dedicated support to enhance providers' capacity to seamlessly serve shared customers. In September 2015, DHS also trained all prevention provider staff to access case information in CATCH.

OBJECTIVE 2: Reduce status offenses (truancy, running away, curfew violations, and extreme disobedience) and low-level delinquency offenses in the District of Columbia.

INITIATIVE 2.1: Continue refinement of the Parent and Adolescent Support Services Program (PASS).
PASS works to divert youth who have committed status offenses from court involvement and detention by conducting comprehensive youth assessments and providing intensive case management, in-home family counseling (Functional Family Therapy), and linkages to other supportive services. In FY14, PASS expanded its direct service menu to include Transition to Independence Process (TIP), an evidence-based case management model implemented in partnership with the Department of Behavioral Health. In FY15, PASS will serve approximately 200 youths. **Completion Date: September, 2015.**

Performance Assessment Key: **Fully Achieved.** The Parent and Adolescent Support Services Program (PASS) was successful in offering early intervention services to youth who have committed status offenses facilitating reengagement with school and improved functioning overall. In FY15, 204 clients received direct services from PASS, services ranging from Intensive Case Management, Transition to Independence Process (TIP), and Functional Family Therapy services.

INITIATIVE 2.2: Fully implement the Alternatives to the Court Experience Diversion Program (ACE).
In the summer of 2014, DHS introduced ACE, which has since become the sole program available to the Metropolitan Police Department (MPD), Court Social Services (CSS) and the Office of the Attorney General (OAG) to divert youth from prosecution for truancy and low-level delinquency offenses. ACE, a six month program, is a collaborative effort between DHS, the Department of Behavioral Health (DBH), the DC Trust, the juvenile justice entities, and community-based service providers. ACE offers individually-tailored and clinically-appropriate

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services to youth and families as alternatives to prosecution. The program works to reduce recidivism, re-engage youths in school, and improve overall youth functioning, as indicated through the Child and Adolescent Functional Assessment Scale (CAFAS). In FY15, ACE will serve approximately 500 youths. **Completion Date: September, 2015**.

○ *Performance Assessment Key:* **Fully Achieved.** In FY15, the Alternatives to the Court Experience Diversion Program was successful in providing an alternative to Court involvement to 566 diverted youth (324 cases were still actively receiving services at the end of FY15 and 242 cases completed the diversion program). The program marked a significant impact on the diverted youth: 84 percent of diverted youth completed the program and 76 percent almost always participated in the diversion service. Further, 88 percent of the diverted youth did not have subsequent legal involvement while participating in ACE, and 91 percent continued to avoid further legal involvement after completing the program.

OBJECTIVE 3: Provide assessment, intervention, stabilization and referral services for families in crisis.

INITIATIVE 3.1: Administer critical support services to District families in crisis and coordinate services for TANF and SSI recipients presented with barriers to self-sufficiency. The Strong Families Program provides immediate crisis intervention, stabilization and assessment services to District families experiencing acute crisis through intense case management and referral services. In FY15, Strong Families will work with families that receive TANF to coordinate services with vendors and to develop a comprehensive plan that facilitates client entry to the workforce or vocational and educational training. For customers with recorded history of persistent mental health or chronic medical conditions, Strong Families will prepare the necessary documentation for the Supplemental Security Income application. **Completion Date: September, 2015.**

○ *Performance Assessment Key:* **Fully Achieved.** The Strong Families program provided comprehensive case management services to 248 TANF recipients. In addition, the program provided psycho-educational services to five TANF vendors to address issues of trauma, self-esteem, domestic violence and prevention. In FY15 Strong Families initiated a partnership with the Department of Behavioral Health (DBH) to address the diagnosed behavioral, mental and emotional needs of TANF recipients and decrease the negative impact of these diagnoses on recipients' ability to participate in employment programs.

INITIATIVE 3.2: Provide emergency services assistance to District families during emergency situations.

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The Strong Families program provides crisis intervention, stabilization, case management and relocation services to District families experiencing crisis due to emergency situations (critical incidents) such as building closures, natural disasters, fire emergencies, power outages and crime emergencies. Additionally, staff members collaborate with other District agencies to coordinate services that ensure District families are stabilized as soon as possible after experiencing crisis due to emergency situations. In FY15, Strong Families anticipates serving 1,300 residents. **Completion Date: September, 2015.**

○ *Performance Assessment Key:* **Fully Achieved.** Strong Families along with the Office of Tenant Advocate (OTA) and the Department of Consumer and Regulatory Affairs (DCRA) provided crisis intervention and relocation services to 32 District families following the closure of their residence. In addition, 26 families were assisted with stabilization services and relocation following a fire in their residence. Strong Families provided crisis intervention services to 609 residents who were unable to pay their water (473), gas (107) and electric (109) bills. Strong Families also ensured that 38 of these families did not lose their housing vouchers because of arrears in their bills and end up becoming homeless. Strong Families, in conjunction with other FSA staff, provided case management, relocation and crisis intervention services to one 109 families housed motels throughout the District.

OBJECTIVE 4: Intervene to protect District residents who are vulnerable to abuse, neglect and exploitation and promote positive youth development and growth despite current challenges and circumstances.

INITIATIVE 4.1: Investigate, assess and provide services for vulnerable adults at risk of abuse, neglect, self-neglect and exploitation through the Adult Protective Services Program (APS) (Age-Friendly DC Goal: Domain # 10).
Adult Protective Services (APS) is a crisis–centered and investigation-based program that receives referrals for alleged abuse, neglect, self-neglect and exploitation 24 hours a day, seven days a week. In FY15, APS will continue to investigate reports of abuse, neglect, self-neglect and exploitation. APS will continue implementation of processes and procedures to streamline policies and practices to align with national best practices. Some of these include: completing the accreditation process through the Council on Accreditation (COA), developing a Vulnerable Adult Fatality Review Committee in partnership with the District of Columbia Office of the Chief Medical Examiner and the Office on Aging, enhancing mandatory reporter awareness throughout the city, and implementing a revised policies and procedures manual. **Completion Date: September, 2015.**

○ *Performance Assessment Key:* **Fully Achieved.** Several project initiatives were completed in FY15. These include the revision and implementation of the APS Policies and Procedures Manual, accomplishing accreditation through the Council on Accreditation (COA), developing a partnership with the Office of the Chief Medical Examiner in relation to the Vulnerable Adult

Fatality Review Committee, and implementation of the Review, Evaluate and Decide (RED) Model, designed to identify the appropriateness of referrals received.

Although DHS had success in enhancing mandatory reporter awareness throughout the city in FY15, efforts will continue in FY 16 through presentations with stakeholders, including: Working Inter-disciplinary Network of Guardianship Stakeholders (WINGS), LTC Ombudsman Long Term Support Services' Forum (LTSS), mental habilitation, Guardianship orientation, DC Superior Court Probate Division Guardianship conference, the Office on Aging Senior Network, government agencies and healthcare facilities.

INITIATIVE 4.2: **Assess and implement a stabilization plan for teen parents who receive TANF and have not yet earned their high school diploma or GED.**
The Teen Parent Assessment Program (TPAP) provides services to teen parents ages 17 and under who receive TANF. TPAP's goal is to move program participants towards self-sufficiency through completion of their high school or GED program. In FY14, TPAP staff received training in the evidence-based case management model, Transition to Independence Process (TIP). In FY15, TPAP will continue providing direct case management and support services to teen parents. Additionally, TPAP will continue to partner with community-based agencies, the New Heights Program, DCPS and local recreational centers to conduct workshops geared towards prevention, abstinence, safe sex initiatives, social and life skills, and parenting skills. **Completion Date: September, 2015.**

⬤ *Performance Assessment Key:* **Partially Achieved.** The Teen Parent Assessment Program provided direct case management and Transition to Independence Process case management services to teen parents ages 17 and under who receive TANF. While we have exceeded the FY15 target for the percentage of teens that did not have additional pregnancies while participating in the program, the program fell short of meeting the projected target for percentage of youth who consistently participated or graduated from an educational program while receiving TPAP services.

KEY PERFORMANCE INDICATORS– Family Services Administration

⬤ ⬤ ⬤ ⬤	KPI	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program
⬤	1.1	Number of formerly homeless households receiving housing	1,398	1,595	Not Applicable	1,661	100%	Family Services Admin

		and supportive services through the permanent supportive housing					
●	1.2	Percent of participants in permanent supportive housing that were housed in the prior fiscal year that maintain housing in the current fiscal year	94%	90%	Not Applicable	98%	98%	Family Services Admin
●	2.1	Percent of youth engaged in the Parent and Adolescent Support Services Program whose cases are closed successfully due to reported decreases in curfew violations, running away, truancy and extreme disobedience.	78%	65%	65%	69%	100%	Family Services Admin
●	2.2	Percent of youth diverted to ACE who complete the program without additional legal involvement and show improvements in overall functioning, as indicated by their Child and Adolescent Functional Assessment (CAFAS) scores	Not Applicable	70%	70%	92%	100%	Family Services Admin
●	2.3	Percent of youth diverted to ACE who complete the program and show improvements in overall functioning, as indicated by	Not Applicable	70%	70%	86%	100%	Family Services Admin

○		their Child and Adolescent Functional Assessment (CAFAS) scores					
●	3.1	Number of families provided with crisis intervention and stabilization services through the Strong Families Program	1,300	1,500	Not Applicable	1,203	86.89%	Family Services Admin
●	4.1	Percent of teen parents receiving services from the Teen Parent Assessment program who are consistently attending their educational program (high school, GED, or other program) or who consistently attended and fulfilled the other requirements to successfully complete their educational program	68%	70%	70%	63%	90%	Family Services Admin
●	4.2	Percent of teen parents receiving services from the Teen Parent Assessment Program who do not have additional pregnancies during the reporting year	99%	95%	95%	98%	100%	Family Services Admin
●	4.3	Percent of referrals in non- emergency cases where initial client contact and investigation takes place within ten working days for	98%	95%	95%	98%	100%	Family Services Admin

		the Adult Protective Services Program					
🟡	**4.4**	Percent of cases where investigations, substantiation of allegations, the provision of services to mitigate immediate risk have been completed and are transferred to the continuing services unit are completed within sixty working days for the Adult Protective Services Program	82%	95%	95%	93%	96.73%	Family Services Admin
🟢	**4.5**	Percent of client cases where substantiated allegations and identified risk to clients has been mitigated before case closure within the Adult Protective Services Program	95%	100%	100%	100%	100%	Family Services Admin

Economic Security Administration

OBJECTIVE 1: Facilitate an integrated approach to service delivery.

INITIATIVE 1.1: Expand integrated service delivery to continue to improve stability of families in crisis and improve outcomes.
DHS now has complete assessments and customized individual responsibility plans for all existing TANF customers. In addition, ESA and FSA designed and implemented an integrated TANF and Homeless Services intake and case coordination process for homeless families. ESA expanded services to TANF families by entering into a MOU with the Department of Behavioral Health to hire a mental health professional for each of the family resource centers, and provided co-located staff from Office of the Attorney General Child Support Services and the State Superintendent for Education for placement and transportation for children in shelter. ESA assigned case coordinators to the Child and Family Services Agency (CFSA) to

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provide technical assistance to CFSA staff on unifying case plans, assessing new families, and working with teen parents aging out of foster care to reduce incidences of homelessness and improve their economic stability.

In FY 2015, ESA will expand the partnership with sister agencies to include the Rehabilitation Services Administration of the Department of Disability Services (DDS) as well as the Department of Employment Services (DOES) and the Office of the State Superintendent for Education (OSSE). OSSE is building Reengagement Centers for youth ages 18-24, and DHS hopes to leverage those services to serve TANF customers in that universe. In addition, ESA will implement an asset-building program to ensure that participants are afforded the opportunity to increase their knowledge and understanding of asset building. **Completion Date: September, 2015.**

Performance Assessment Key: **Fully Achieved.** DHS is working in partnership with DDS on the implementation of the Workforce Innovation and Opportunity Act (WIOA) and on the District's Career Pathways project. DHS entered into an MOA with OSSE, and has begun both leveraging OSSE's e-CASAS assessment tool and referring customers to OSSE's Reengagement Center. Further, DHS and DOES entered into the LEAP Academy partnership. Finally, DHS issued a grant to the Capitol Area Asset Builders (CAAB) to develop an asset building program. That program was implemented at DC General among the TANF families who are also receiving homeless services.

INITIATIVE: 1.2: Develop the FSET programs to better meet the needs of FSET customers and leverage the work done with the TANF redesign efforts.
In FY14, ESA expanded the Food Stamp Employment and Training (FSET) program to include sister agencies (OSSE and DOES) as well as third party grantees. In FY14, ESA also moved FSET from a mandatory program to an all-volunteer program. In FY15, ESA will implement the ORAW assessment tool for all customers accessing FSET services. This will allow for better and more efficient referrals and a better service delivery model. ESA will also continue to expand the partnerships with OSSE, DOES and 3rd party providers to maximize the resources available to District residents. **Completion Date: September, 2015.**

Performance Assessment Key: **Partially Achieved.** In FY15, DHS expanded the FSET program from three third-party providers to eight. Two additional grantees will come on board in the first quarter of FY16. In addition, DHS and DOES developed a strategy for the District to leverage Federal FSET funds to augment the FSET employment and training services provided by DOES. This strategy will be executed in FY16 through the DHS FSET State Plan and if approved, will allow DOES to expand FSET services. Further, the Online Work Readiness Assessment (OWRA) application was modified to meet the needs of the FSET program. As it has done for our TANF program, the use of OWRA for the FSET program will provide a robust assessment of strengths, barriers and employment needs for our FSET customers. These

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system enhancements were developed and piloted in FY15 and will be fully implemented in the first quarter of FY16.

OBJECTIVE 2: Streamline operations and improve quality assurance.

INITIATIVE 2.1: Redesign the eligibility determination process.
During FY14, DHS continued to play a key role in the design and development of the new eligibility system. In FY14, the first phase of the system, which served individuals covered under the Affordable Care Act, was deployed. The new eligibility system will provide new forms of access to public benefits for residents. This includes the implementation of telephone and online applications for medical assistance, new call center functionality, and paper and electronic notices provided through an online "My Account". In FY15, the second release of the system will be initiated; this phase will include Medicaid, Food Stamps and TANF, among other programs. This will continue to improve access to services as well as program integrity. **Completion Date: September, 2015.**

⬤ *Performance Assessment Key:* **Fully Achieved.** Objective 1, Initiative 1.1 describes the progress made on the second release of the DCAS eligibility system. In addition to changes to the eligibility system, ESA deployed desktop scanners for service center staff to use to facilitate the processing of benefits and upgraded the Service Center Intake Log to make the purpose of visits more clear to staff and ensure clients are routed appropriately.

INITIATIVE 2.2: Develop and implement a staff realignment plan.
In FY14, ESA's Office of the Administrator engaged a workgroup, which included union and other agency staff to develop a realignment plan that better aligns staff qualifications with roles; complements the new business process; and ensures that staff resources are allocated to meet customer needs. In FY15, ESA will submit the plan to DCHR for approval. **Completion Date: September, 2015.**

⬤ *Performance Assessment Key:* **Partially Achieved** due to delays. This effort will be a component of the business process redesign initiative to take place in FY16. National experts will make recommendations for improvements to our service center operations and staff roles will be adjusted accordingly.

KEY PERFORMANCE INDICATORS- Economic Security Administration

⬤⬤⬤⬤	KPI	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program

🟡	**1.1**	Food Stamp error rate percentage	7.14	7.72%	Not Applicable	7.97%[4]	96.86%	ESA
🟢	**1.2**	Percent of new TANF or recertifying applicants who completed their preliminary assessment and orientation from the date of implementation	100%	100%	Not Applicable	100%	100%	ESA
🟢	**1.3**	Percent of vendor assigned not-employed TANF customers who meets his/her full monthly work participation requirements	30%	31%	Not Applicable	31.99%	103.19%	ESA
🟢	**1.4**	Percent of customers placed by "Job Placement" provider in unsubsidized employment	30%	31%	Not Applicable	32.52	104.9%	ESA
🟢	**1.5**	Percent of customers placed by "work readiness" provider in unsubsidized employment	25%	26%	Not Applicable	27.42	105.45%	ESA
🔴	**1.6**	Percent of customers placed in unsubsidized employment by "job placement" provider who meets his/her full monthly work participation requirements	35%	40%	Not Applicable	27.98%	69.95%	ESA

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[4] Food stamp error rate for FY15 is subject to final reconciliation through Jan 2016 and may be adjusted further.

🟡	**1.7**	Percent of customers placed in unsubsidized employment by "Work Readiness" provider who meets his/her full monthly work participation requirements	25%	48%	Not Applicable	41.1%	85.62%	ESA
🟢	**1.8**	Number of TANF recipients who exit off of TANF due to increased income.	1,708	2,200	Not Applicable	2,357	107.14%	ESA

WORKLOAD MEASURES – APPENDIX

WORKLOAD MEASURES 🔵

Measure Name	FY 2013 YE Actual	FY 2014 YE Actual	FY 2015 YE Actual	Budget Program
Number of literally homeless single persons according to annual Point-in-Time (PIT) count	3,696	3,953	3,821	Office of the Director
Number of literally homeless families according to annual Point-in-Time (PIT) count	983	1,231	1,131	Family Services
Number of unsheltered individuals according to annual Point-in-Time (PIT) count	512	396	544	Family Services
Number of individuals who are chronically homeless in the District according to annual Point-in-Time (PIT) count	1,764	1,785	1,593	Family Services

Monthly average of unique clients served	238,333	238,081	262,938	ESA
Monthly average of clients receiving Food Stamps	138,749	134,888	134,275	ESA
Monthly average of clients receiving TANF	44,820	44,725	41,818	ESA
Monthly average of clients receiving Medical Assistance	234,271	253,572	255,352	ESA
Percent of clients receiving a combination of 2 benefits	41%	37%	35%	ESA
Percent of clients receiving a combination of 3 benefits	18	16%	12%	ESA