



**Office of
Financial Management**
STATE OF WASHINGTON

Performance Measure Assessment

DSHS - Health and Recovery Services (HRS) - Division of Alcohol and Substance Abuse (DASA)

Aug. 7, 2007

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Agency Participants:

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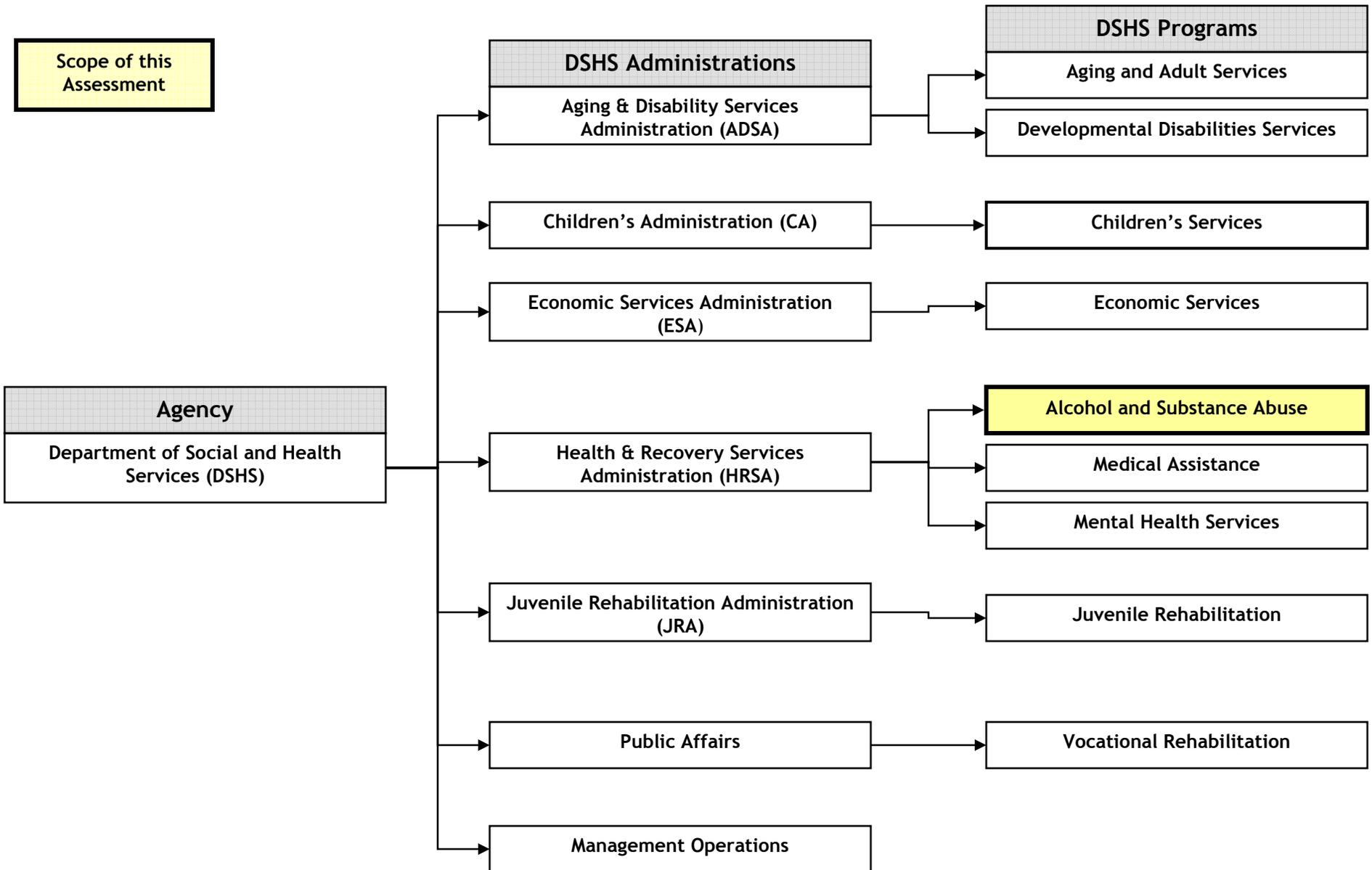
Pam Mann

Ted Lamb

Bryce Andersen

Based on a review of the following: OFM Performance Measure Tracking (PMT) data for DSHS DASA (agency 300, program 070); HRSA Strategic Plan, 2007-2011, DASA Strategic Plan 2007-2011; Health Care GMAP presentations (July 12, 2006); DASA Management Review, Sept. 2006 and Dec. 2006; *Tobacco, Alcohol, & Other Drug Abuse Trends in Washington State, 2006 Report*, DASA (Dec. 2006)

DSHS Administration/Program Alignment - Scope of this Assessment



Current Strengths and Good Practices

- DASA has a wealth of data, measures, and expert staff who analyze it for publications such as the annual *Abuse Trends* reports.
- DASA's Strategic Plan has a number of meaningful measures (see page 7.)
- Several measures are used for other purposes besides OFM's system, including Governor's GMAP Forums, internal management review, and measuring strategic plan progress.
- DASA managers have shown commitment to finding improved performance measures.

Comments About the Budget Activity Measures

- Three Activities have no performance measures associated with them.
- Several performance measures currently in OFM's system should be deleted, as DASA staff have no data on, or would have difficulty getting data for, these measures.
- In part because DASA staff has not had direct access to OFM's performance measure tracking system, there is little performance data in the system.

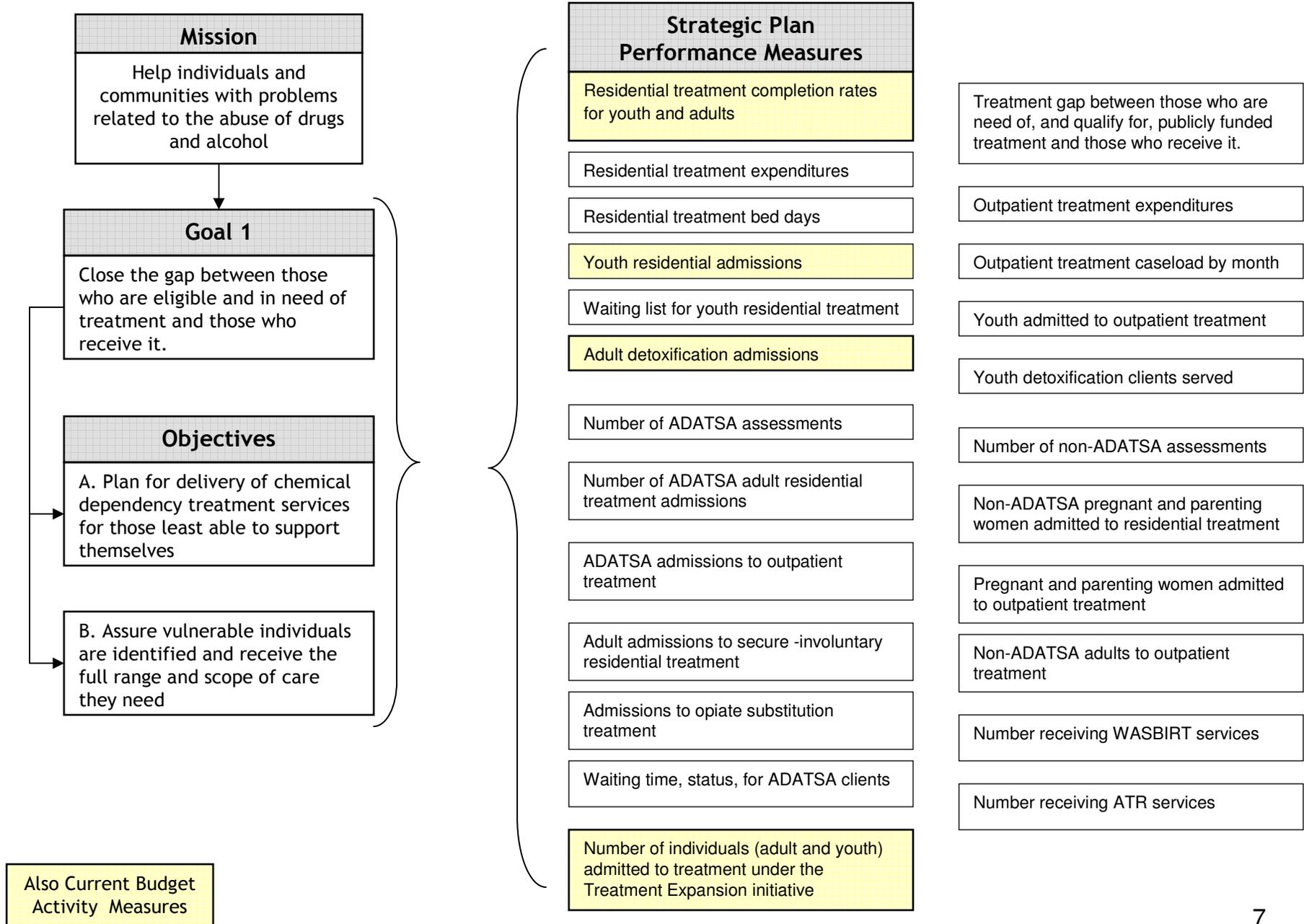
Potential Improvements

1. DASA managers and staff and DSHS Budget staff should discuss measures to replace those that do not work for them, and work with their OFM Budget Analyst to implement those in the system.
2. Ideally, new performance measures would:
 - Be based on data that's already gathered and used by agency managers and staff.
 - Tell a meaningful story about DASA's activities and work, such as contracting, certification, and training (see slides 16 and 17 for DASA Activity and work.)
 - Show progress on outcomes that matter: preventing and treating the problems of substance abuse.

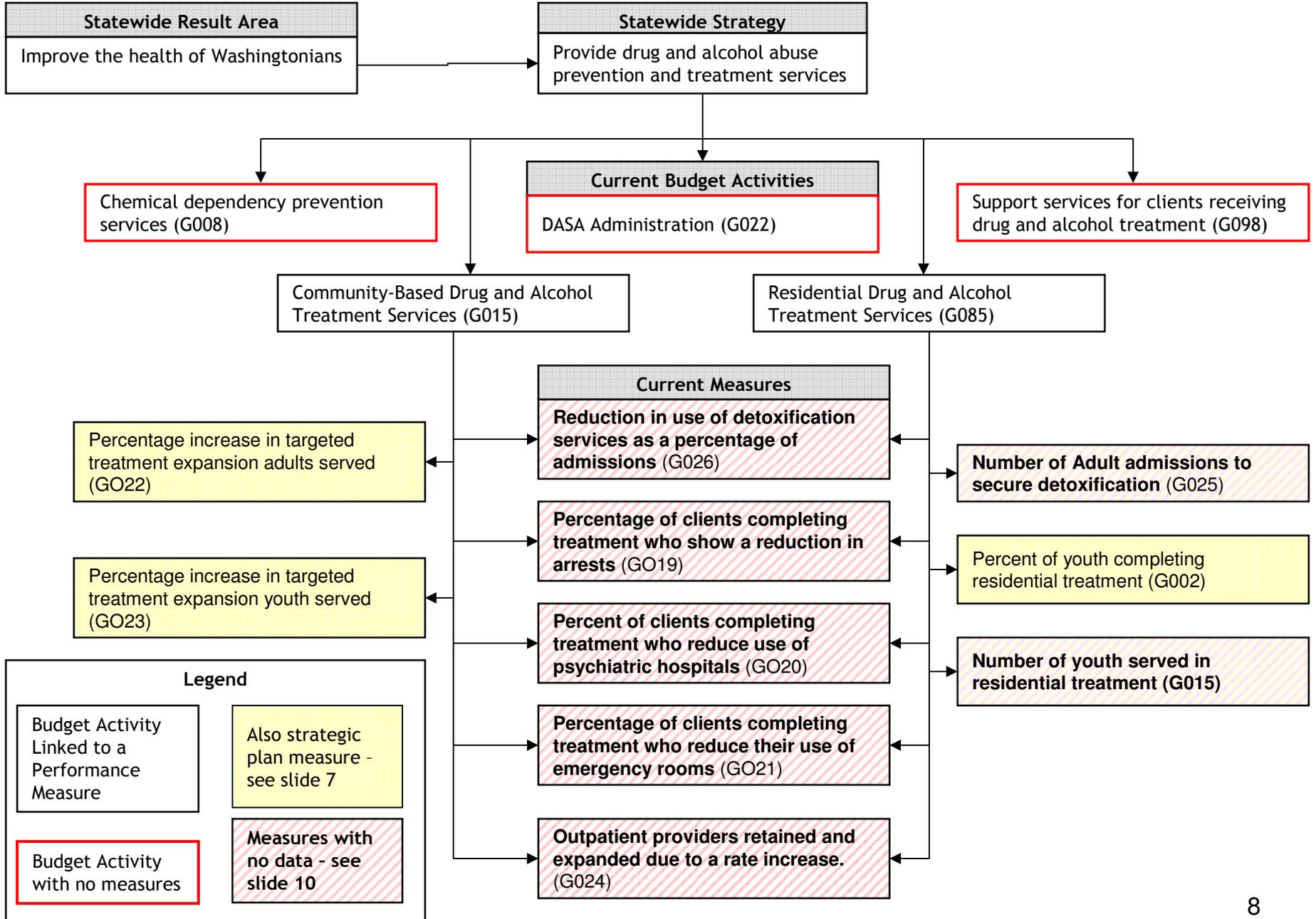
Agency Comments and Future Actions

- We would like to add performance measures for 1) Science-based prevention and 2) Medicaid cost savings for treatment expansion.
- We would like OFM to include outpatient completion rates as an outcome measure and the number of youths served in outpatient treatment.
- We are asking that the following measures be eliminated. These are not relevant or not possible to track on a quarterly basis:
 - Reduction in use of detoxification as a percentage of admissions (entering detoxification more than once is not uncommon and not necessarily a bad thing - addiction is a chronic disease).
 - Number of adult admission to secure detoxification (this is a pilot project in two sites in the state. It is currently slated to end in 2008).
 - Outpatient providers retained, expanded due to rate increase (this measure has been around for a long time and we just received a rate increase for 2007-2009).
 - Percentage of clients completing treatment who reduce the use of inpatient psychiatric hospitals (this is not possible to track on a quarter basis - it is a research question. DASA has conducted this research).
 - Percentage of clients completing treatment who reduce their use of emergency rooms (this is not possible to track on a quarter basis - it is a research question. DASA has conducted this research).

Overview of DASA Strategic Planning & Performance Measure Alignment



Budget Activity & Performance Measure Linkages



Activity Measure Perspectives

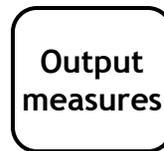
Process characteristics that customers/stakeholders want



Process characteristics the agency wants

Reduction in use of detoxification services as a percentage of admissions (G026)

Product or service attributes customers/stakeholders want



Product/service attributes the agency wants

Number of youth served in residential treatment (G015)

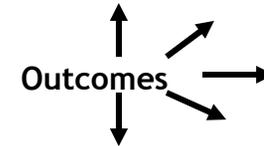
Number of Adult admissions to secure detoxification (G025)

Percentage increase in targeted treatment expansion adults served (G022)

Percentage increase in targeted treatment expansion youth served (G023)

Percentage of clients completing treatment who show a reduction in arrests (GO19)

Customer/stakeholder desired outcomes



Agency desired outcomes

Percent of youth completing residential treatment (G002)

Outpatient providers retained, expanded due to rate increase (G024)

Percentage of clients completing treatment who reduce use of inpatient psychiatric hospitals (GO20)

Percentage of clients completing treatment who reduce their use of emergency rooms (GO21)

Measures Not Analyzed in this Assessment

Note: A number of measures do not have data in OFM's system. DASA Staff was able to provide data for some of these, but the following measures do not have data and are proposed for removal by DASA staff. DASA managers and staff are considering new measures, and have committed to working with OFM staff to find replacements.

Measures with no data	Discussion
G024 - Outpatient providers retained and expanded due to a rate increase.	From the unpublished notes ("2007-09 Biennium PL-GB Outpatient Rate Increase"), this performance measure is associated with a budget proposal (PL = Policy Level). DASA accomplishes its work through outpatient providers, so some measure of its work with them would be informative.
G025 - Number of adult admissions to secure detoxification facilities	Although this is also in DASA's Strategic Plan, this (along with G026, below) is a pilot program, in limited parts of the state, that is due to end in 2008.
G026 - Reduction in the use of detoxification services as a percentage of Chemical Dependency admissions	Same comments as above for G025.
G015 - Number of youth served in residential treatment	No data entered in OFM system, nor provided by DASA.
G019 - Percentage of clients completing treatment who show a reduction in arrests during the time they are in treatment compared to the year before admission.	Only targets in OFM system (= 80%), no data. If data was easily available, this would be a good outcome indicator.
G020 - Percentage of clients completing treatment who reduce use of inpatient psychiatric hospitals during the time they are in treatment compared to the year before admission	Only targets in OFM system (=75%), no data. If data was easily available, this would be a good outcome indicator.
G021 - Percentage of clients completing treatment who reduce their use of emergency rooms during the time they are in treatment compared to the year before admission.	Only targets in OFM system (=83%), no data. If data was easily available, this would be a good outcome indicator.

Activity Measure Assessment— Percent of Youth Completing Treatment

<p>Performance Measure Description: Percent of youth successfully completing residential treatment (G002)</p>	<p style="text-align: center;">Percent of youth completing residential treatment</p> <table border="1" style="margin-top: 10px;"> <caption>Approximate Quarterly Data from Graph</caption> <thead> <tr> <th>Year</th> <th>Q5</th> <th>Q6</th> <th>Q7</th> <th>Q8</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Q5</th> <th>Q6</th> <th>Q7</th> <th>Q8</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Q5</th> <th>Q6</th> <th>Q7</th> </tr> </thead> <tbody> <tr> <td>2001-03</td> <td>64.5%</td> <td>70.5%</td> <td>64.5%</td> <td>64.5%</td> <td>62.0%</td> <td>63.0%</td> <td>58.5%</td> <td>66.0%</td> <td>61.0%</td> <td>59.0%</td> <td>61.5%</td> <td>61.0%</td> <td>64.0%</td> <td>64.5%</td> <td>68.0%</td> <td>67.0%</td> <td>67.0%</td> <td>71.5%</td> <td>68.0%</td> </tr> <tr> <td>2003-05</td> <td></td> </tr> <tr> <td>2005-07</td> <td></td> </tr> </tbody> </table>	Year	Q5	Q6	Q7	Q8	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q1	Q2	Q3	Q4	Q5	Q6	Q7	2001-03	64.5%	70.5%	64.5%	64.5%	62.0%	63.0%	58.5%	66.0%	61.0%	59.0%	61.5%	61.0%	64.0%	64.5%	68.0%	67.0%	67.0%	71.5%	68.0%	2003-05																				2005-07																			
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<p>Budget Activity Links: Residential Drug and Alcohol Treatment Services (G085)</p>																																																																																	
<p>Category of Measure: Completed treatment is associated with client success, so this is an outcome measure.</p>																																																																																	
<p>Analysis of Variation: There is a slight overall increasing trend in the share of youth completing residential treatment (not shown here, about 3/4 % per year.) Performance declined until 2003-05, but has improved since Q6 2003-05.</p>																																																																																	
<p>Analysis of Targeted vs. Actual Performance: Performance has exceeded the target every quarter this biennium, which is not surprising since the target is set below the five-year average.</p>																																																																																	

<p style="text-align: center;">Comments About Desirable Characteristics</p>		<p>General Comments & Explanations:</p> <ul style="list-style-type: none"> • This appears to be a good measure, closely related to DASA’s treatment work, with data available on a timely basis. • DASA may want to consider setting a higher target to reflect its recent performance success.
<p>Relevance: Very relevant to the Activity</p>	<p>Timeliness: Good - data appears to be available monthly, with fairly minimal lag.</p>	
<p>Understandability: Very understandable, although the target does not help the reader understand what good performance looks like.</p>	<p>Reliability: Very good - DASA provided monthly data for 5 years.</p>	
<p>Comparability: Should be comparable.</p>	<p>Cost Effectiveness: Good - this measure is also in DASA’s strategic plan and internal management review.</p>	

Activity Measure Assessment— Percent of Adults Completing Treatment

<p>Performance Measure Description: Percent of adults successfully completing residential treatment (proposed new measure, comparable to youth residential treatment completion rate, previous page)</p>	<p style="text-align: center;">Percent of adults completing residential treatment</p> <table border="1"> <caption>Approximate data points from the chart</caption> <thead> <tr> <th>Quarter</th> <th>Year</th> <th>Percent</th> </tr> </thead> <tbody> <tr><td>Q5</td><td>2001-03</td><td>77.5%</td></tr> <tr><td>Q6</td><td>2001-03</td><td>77.8%</td></tr> <tr><td>Q7</td><td>2001-03</td><td>76.0%</td></tr> <tr><td>Q8</td><td>2001-03</td><td>75.5%</td></tr> <tr><td>Q1</td><td>2003-05</td><td>76.0%</td></tr> <tr><td>Q2</td><td>2003-05</td><td>77.8%</td></tr> <tr><td>Q3</td><td>2003-05</td><td>77.8%</td></tr> <tr><td>Q4</td><td>2003-05</td><td>78.5%</td></tr> <tr><td>Q5</td><td>2003-05</td><td>76.5%</td></tr> <tr><td>Q6</td><td>2003-05</td><td>77.8%</td></tr> <tr><td>Q7</td><td>2003-05</td><td>74.8%</td></tr> <tr><td>Q8</td><td>2003-05</td><td>74.5%</td></tr> <tr><td>Q1</td><td>2005-07</td><td>76.0%</td></tr> <tr><td>Q2</td><td>2005-07</td><td>77.0%</td></tr> <tr><td>Q3</td><td>2005-07</td><td>77.2%</td></tr> <tr><td>Q4</td><td>2005-07</td><td>76.0%</td></tr> <tr><td>Q5</td><td>2005-07</td><td>75.8%</td></tr> <tr><td>Q6</td><td>2005-07</td><td>75.2%</td></tr> <tr><td>Q7</td><td>2005-07</td><td>75.0%</td></tr> </tbody> </table>	Quarter	Year	Percent	Q5	2001-03	77.5%	Q6	2001-03	77.8%	Q7	2001-03	76.0%	Q8	2001-03	75.5%	Q1	2003-05	76.0%	Q2	2003-05	77.8%	Q3	2003-05	77.8%	Q4	2003-05	78.5%	Q5	2003-05	76.5%	Q6	2003-05	77.8%	Q7	2003-05	74.8%	Q8	2003-05	74.5%	Q1	2005-07	76.0%	Q2	2005-07	77.0%	Q3	2005-07	77.2%	Q4	2005-07	76.0%	Q5	2005-07	75.8%	Q6	2005-07	75.2%	Q7	2005-07	75.0%
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<p>Category of Measure: Completing a treatment program is an immediate outcome of DASA work.</p>																																																													
<p>Budget Activity Links: None yet</p>																																																													
<p>Analysis of Variation: There is a trend of slightly declining adult residential treatment completion rates (about -.4 % per year) that appears consistent and predictable.</p>																																																													
<p>Analysis of Targeted vs. Actual Performance: The target is set very close to the average, so actual performance should achieve the target roughly 50% of the time</p>																																																													

Comments About Desirable Characteristics		General Comments & Explanations:
<p>Relevance: Very relevant to the Activity.</p>	<p>Timeliness: Good - data appears to be available monthly, with fairly minimal lag.</p>	
<p>Understandability: Very understandable, although the target does not help the reader understand what good performance looks like.</p>	<p>Reliability: Very good - DASA provided monthly data for 5 years.</p>	
<p>Comparability: Should be comparable.</p>	<p>Cost Effectiveness: Good - this measure is also in DASA's strategic plan and internal management review.</p>	

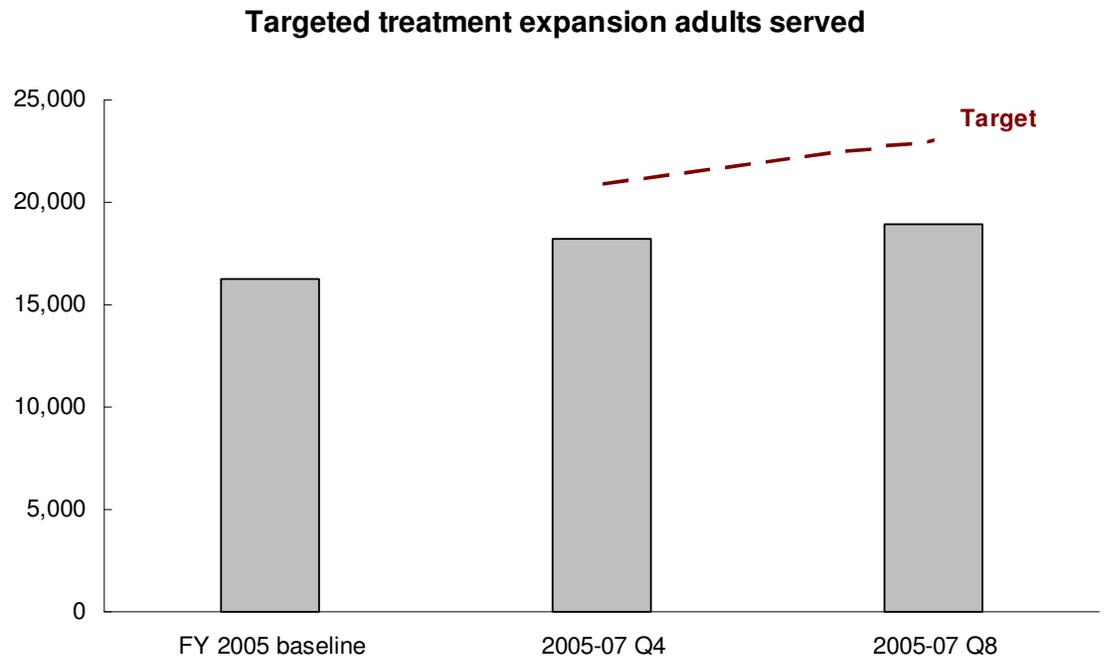
Activity Measure Assessment— Increase in targeted adults served

<p>Performance Measure Description: Increase in targeted treatment expansion adults served, beyond the similar adult population served in State Fiscal Year 2005 (G022)</p>	<p>Percentage increase in targeted treatment expansion adults served</p> <table border="1" style="margin: 10px auto;"> <caption>Actual vs Target Performance</caption> <thead> <tr> <th>Period</th> <th>Actual Performance (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2005-07 Q4</td> <td>12%</td> <td>29%</td> </tr> <tr> <td>2005-07 Q8</td> <td>16%</td> <td>42%</td> </tr> </tbody> </table>	Period	Actual Performance (%)	Target (%)	2005-07 Q4	12%	29%	2005-07 Q8	16%	42%
Period		Actual Performance (%)	Target (%)							
2005-07 Q4		12%	29%							
2005-07 Q8		16%	42%							
<p>Budget Activity Links: Community-Based Drug and Alcohol Treatment Services (G015)</p>										
<p>Category of Measure: Output measure</p>										
<p>Analysis of Variation: Not enough data to judge. See General Comments, below right, for more about what this shows.</p>										
<p>Analysis of Targeted vs. Actual Performance: Although the Q8 data is incomplete (only through May), performance appears to be falling short of expected levels both years.</p>										

Comments About Desirable Characteristics		<p>General Comments & Explanations:</p> <ul style="list-style-type: none"> This measure seems to operate like this: There’s a baseline of participation given in the footnotes (“State Fiscal Year 2005 base for the adult population is 16,210 adults served.”) At the end of each year, DASA compares participation against the baseline. The goal (target) is to have 29% more participants in year 1, and 42% more than the baseline in year two (a cumulative increase - year one and two combined). Actual participation increased 12% in year 1, and about 16% so far in year 2, which means it fell below the target, but there’s no sense of scale or magnitude. It would be much clearer, and more informative, to just report participation (see next slide) or, if trying to reach people in a targeted audience, the percent of target reached compared to the raw numbers treated could be interesting.
<p>Relevance: Treating adults is this activity’s purpose, so expanding treatment would be very relevant. However, it’s not clear how “targeted expansion” relates to this core mission.</p>	<p>Timeliness: Once a year is not particularly timely.</p>	
<p>Understandability: Not good - the terms “targeted treatment expansion” are not clear, nor is the method used in this measure - see General Comments, right.</p>	<p>Reliability: Assume good, as DASA has data about participation.</p>	
<p>Comparability: Because the percent increase relies on an unstated baseline number, it is difficult to use this measure for comparison.</p>	<p>Cost Effectiveness: Good - this is used for strategic planning as well as OFM’s system.</p>	

Activity Measure Assessment— Increase in targeted adults served - alternative

<p>Performance Measure Description: Number of targeted treatment expansion adults served, based on data provided by DASA for previous measure (G023)</p>
<p>Budget Activity Links: Community-Based Drug and Alcohol Treatment Services (G015)</p>
<p>Category of Measure: Output</p>
<p>Analysis of Targeted vs. Actual Performance: This is the same performance data as the previous slide, just shown in a different way. Participation is increasing, but not as quickly as DASA has targeted.</p>
<p>General Comments & Explanations:</p> <ul style="list-style-type: none"> • This shows the data upon which the previous slide was based: the number of adults participating in targeted treatment expansion beginning with the baseline year. • Because the baseline figure wasn't shown on the previous measure, there was no sense of magnitude or scale. • With this, it's easy to see how many people are involved, what actual performance has been, and how far DASA may have to go to meet the target. • The next slide shows comparable measures for targeted youth expansion served.



Activity Measure Assessment - Increase in targeted youths served

Performance Measure Description: Increase in targeted treatment expansion youths served, beyond the similar youth population served in 2005 (G023) (top chart, current measure in OFM system) and Number of targeted treatment expansion youth served (drawn from the same underlying data, lower chart).

Budget Activity Links: Community-Based Drug and Alcohol Treatment Services (G015)

Category of Measure: Output measure

Analysis of Variation: Not enough data to judge

Analysis of Targeted vs. Actual Performance: Instead of a 43% increase in youth served (which would have been a 3,000 increase over the baseline of 6,200 served), participation was flat the first year, and declined by about 300 so far this year, a five percent decrease.

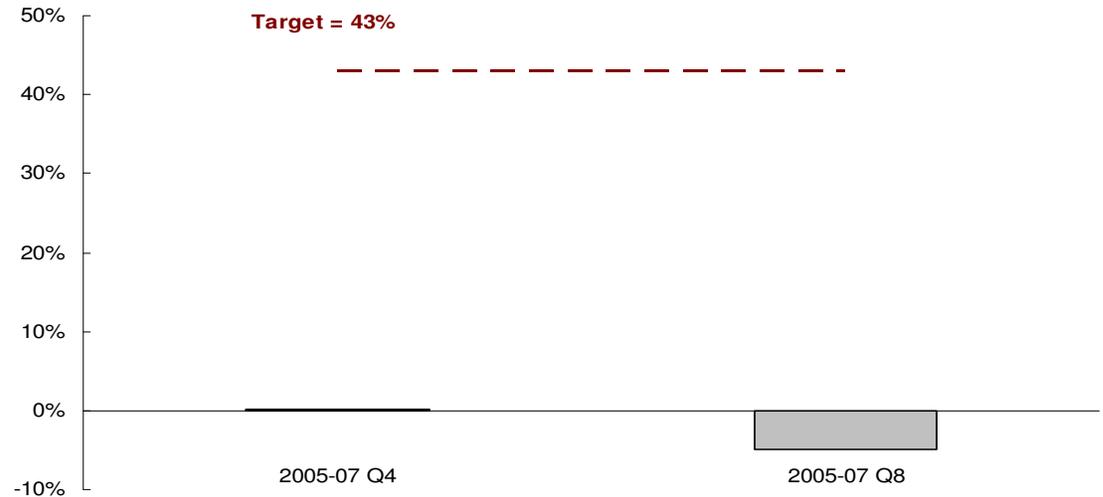
Comments about desirable characteristics (relevance, understandability, comparability, reliability, timeliness, and cost effectiveness):

Same comments as slide 13, "Increase in targeted treatment expansion adults served."

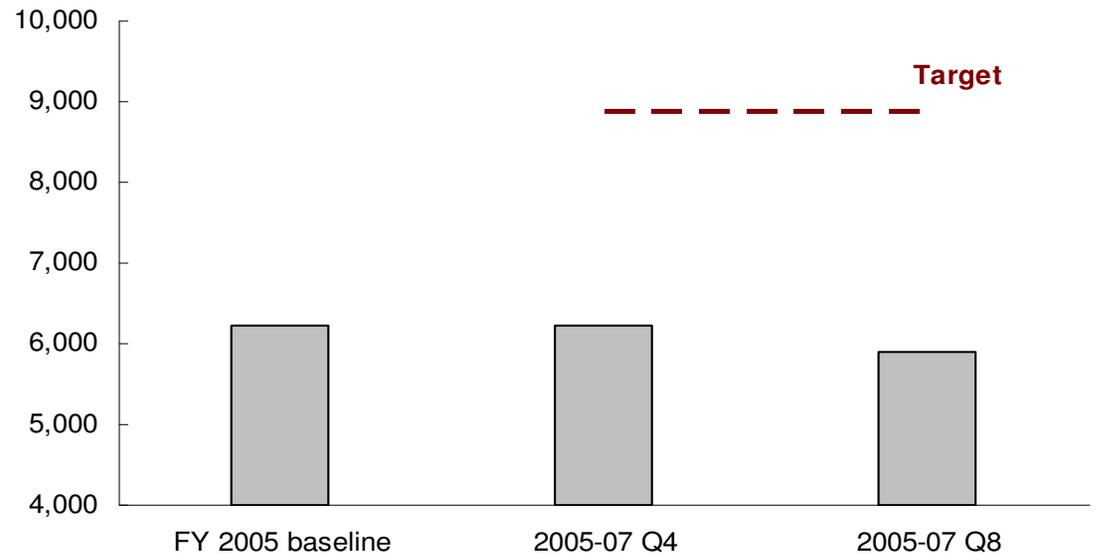
General Comments & Explanations:

- From footnotes: "State Fiscal Year 2005 base for the youth population is 6,213 served," i.e. the baseline.
- If higher is better, DASA will need to examine the reasons for the decline in participation in order to get performance going the right direction.
- In general, measuring and showing numbers is easier for users to comprehend than comparing percentage targets where there's no sense of scale or magnitude.

Percent increase in targeted treatment expansion youth served



Targeted treatment expansion youth served



DASA Budget Activities & Expected Results (see slide 5)

Current DASA Budget Activities

G008 Chemical Dependency Prevention Services - are contracted by DASA through counties, Superintendent of Public Instruction, and community-based providers. Prevention Services are designed to prevent or reduce misuse of alcohol, tobacco, and other drugs.

G015 - Community Based Drug and Alcohol Treatment Services are community-based out-patient (non-residential) treatment services managed by counties and tribes. DASA contracts directly with counties and tribes who then contract with provider networks in their communities. Services include assessment, outpatient treatment, triage services including non-hospital detoxification services, outreach, intervention, referral, and opiate substitution treatment. To the extent that clients are Medicaid-eligible, counties use Medicaid matching funds to leverage services

G-085 Residential Drug and Alcohol Treatment Services include adult intensive inpatient treatment; long-term, recovery house, involuntary treatment; and youth and pregnant/postpartum treatment. DASA contracts directly with a continuum of certified treatment services who serve indigent, low-income individuals and their families experiencing a range of abuse and addiction problems. Services are designed to address the gender, age, culture, ethnicity, and sexual orientation of individuals and their families, with the goals of abstinence from alcohol and other drugs and reducing the harmful effects of these substances on people's lives.

G098 - Support services for clients receiving Drug and Alcohol Treatment. DASA contracts for services to assist clients in treatment and dependents, including youth, pregnant/post-partum women, Fetal Alcohol Syndrome, counselor training, interpreter services, and childcare.

G022 DASA Administration - The Alcohol and Substance Abuse Program helps people avoid and recover from alcoholism and drug addiction. Through a statewide network of prevention, public education, treatment, and support services, the program provides people with the tools necessary to establish and maintain alcohol and drug-free lifestyles. Program Support provides the administrative support for alcohol and substance abuse services. Activities include statewide program development, strategic planning, information system management, personnel, budget oversight, and research and evaluation.

Current Expected Results

The Department will make timely, accurate payments for the support services rendered by its government partners. (7 FTE, \$20.6m/biennium)

Implement a continuum of intervention and treatment services to meet local, regional, tribal, and statewide needs, that specifically address the needs of low-income adults, youth, women, children, and families (25 FTE, \$163m/biennium)

Provide low-income and indigent adults and adolescents with referral and access to detoxification residential treatment agencies while ensuring a high quality continuum of care, including access to integrated, effective outpatient services. (13 FTE, \$100m/biennium)

Integrate chemical dependency and infectious disease prevention and treatment services, and provide cross training and technical assistance to those serving chemically dependent individuals with infectious diseases or at high risk for them. (18 FTE, \$16.8m/biennium)

Provide and ensure quality services that support individuals and families in their efforts to raise children who are free of alcohol, tobacco, and other drugs. (39 FTE, \$14.1m/biennium)

DASA Sections and Duties from Web (see slide 5)

DASA is the state agency that coordinates efforts to help individuals and communities with problems related to the abuse of drugs and alcohol. DASA contracts with organizations in the community to provide prevention, treatment, and other support services for individuals with problems related to alcohol, tobacco, and drugs.



The image shows a screenshot of the DASA website's navigation menu. It consists of a vertical list of blue buttons with white text. The buttons are: 'DASA Main Page', 'What's New?', 'Sections', 'References', and 'Resources'. To the right of the 'Sections' button, a sub-menu is visible, listing 'Certification', 'Evaluation and Quality', 'Prevention', 'Training', and 'Treatment'.

DASA Main Page	
What's New?	
Sections	Certification
References	Evaluation and Quality
Resources	Prevention
	Training
	Treatment

- **Who are DASA's partners?**
- DASA contracts with counties for community-based services, and directly with treatment agencies for statewide residential services. DASA also has government-to-government contracts with 29 tribes for prevention and treatment services for Native Americans. Six DASA Regional Administrators work with county coordinators and County Substance Abuse Administrative Boards to plan services and monitor contracts.
- Of DASA's total 05-07 biennial budget (\$329 million), \$150 million is contracted to counties for prevention and treatment services and \$98 million is contracted with non-profit agencies to provide statewide residential treatment services. Counties usually contract with local non-profit agencies rather than provide direct service.

<http://www1.dshs.wa.gov/dasa/overview.shtml>