



## **Health & Human Services FY2021 Performance Indicators**

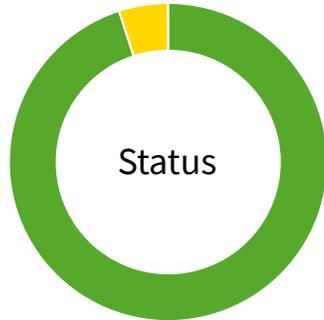
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Report Created On: Sep 09, 2021

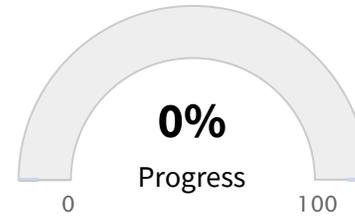
20

Goal

### Overall Summary



On Track	95.0
Some Disruption	5.0



**Report Legend**

 No Update

 Overdue

 **Priority**

**Goal 1.1.4**

Ongoing - Ongoing

On Track

Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

*Owner: Kim Shuskey*

*Update provided by Kim Shuskey on Jul 09, 2021 19:13:15*

Update this period: Next steps: Disruptions (if necessary): DCVP met all metrics in this goal.

Goal 1.1.4 > Metric

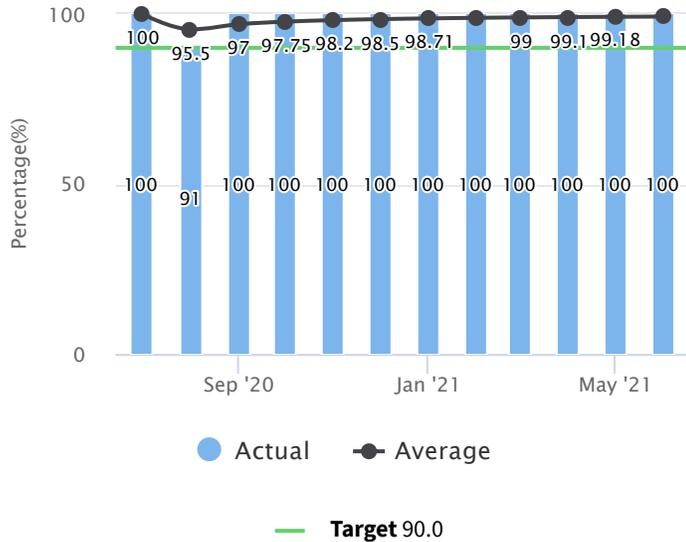
### Clients filing for a 50B who were referred to Legal Aid

Percent of clients filing for an Exparte / 50B that received a referral to Legal Aid NC for court date (Goal: 90% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:12:57



**Comment**

Legal Aid of North Carolina is a statewide, nonprofit law firm that provides free legal services in civil matters to low-income people in order to ensure equal access to justice and to remove legal barriers to economic opportunity. Referring clients filing Exparte/50Bs can help them better understand their rights and help protect them. Most clients filing Exparte/50Bs are referred to Legal Aid for services. Those who can not be helped by that agency are offered other legal assistance.

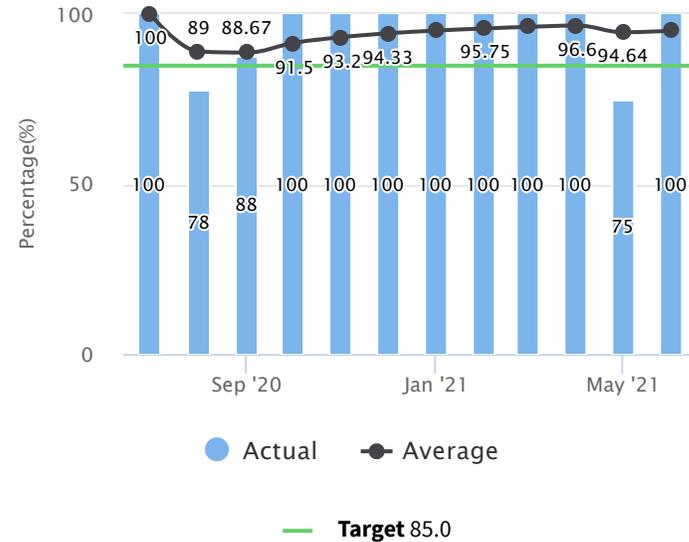
### Clients reporting they feel safer after DCVP services

Percentage of clients reporting that they feel safer after receiving services from Davie County Violence Prevention (Goal: 85% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Justin White, Brandi Patti, and Kim Shuskey

Last Update: Jul 09, 2021 18:53:02



**Comment**

Safety planning is an important part of the work of the Davie Center for Violence Prevention. Whether or not a client chooses to leave an abusive situation, safety planning is always offered as a service .

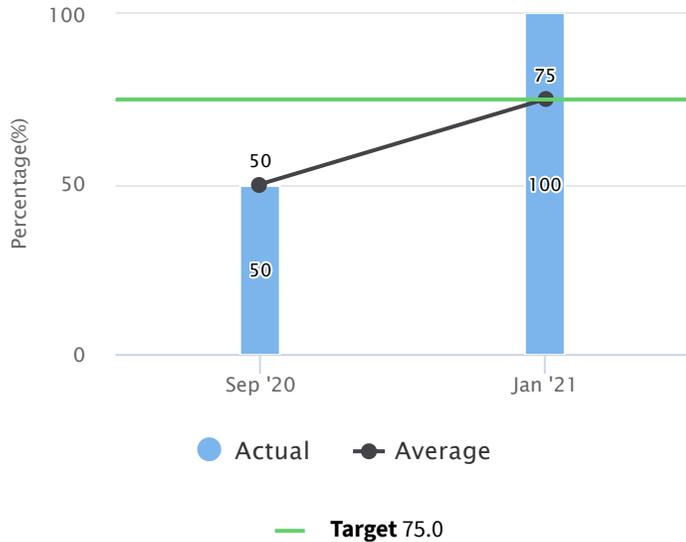
### Support group attendees who report improvements

Percentage of support group attendees who report an improvement in self-esteem (Goal: 75% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 18:53:44



#### Comment

Self-esteem is important because it heavily influences people's choices and decisions. In other words, self-esteem serves a motivational function by making it more or less likely that people will take care of themselves and explore their full potential. This measure is critical in illustrating clients continued progress through support group attendance. COVID-19 has impacted support group meetings. These are now being conducted virtually, which sometimes hampers efforts to collect surveys.

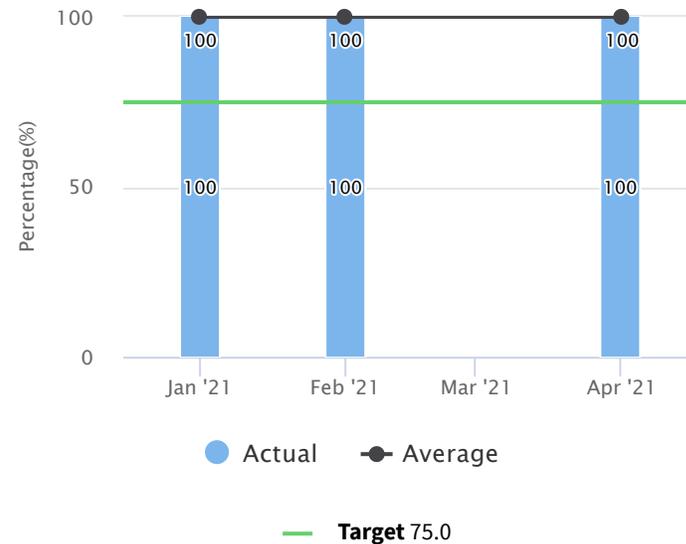
### Students who have an increased knowledge of abuse

Percent of educational event participants who report increased knowledge in the areas of domestic violence and sexual assault (Goal: 75% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:11:07



#### Comment

In addition to measuring how much students have improved in one training, a post-test can be a valuable diagnostic tool for more effective teaching. Covid has disrupted trainings, but we are slowly getting back to conducting these training events.

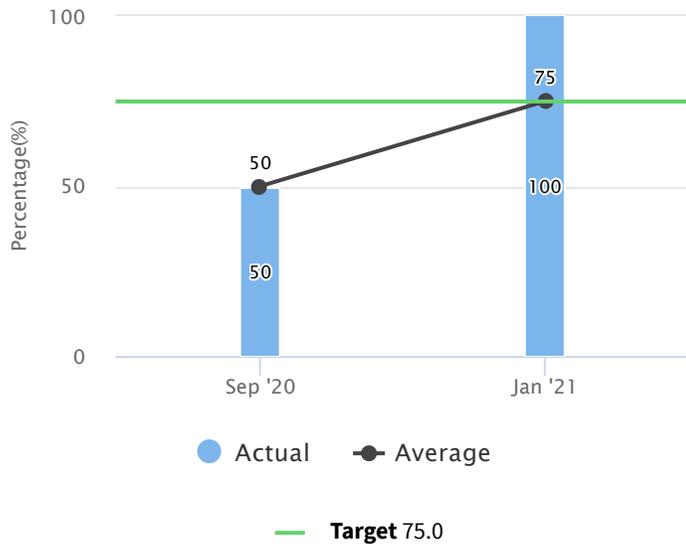
### Support group attendees who report decreased stress

Percentage of support group attendees who report an improvement in stress level (Goal: 75% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 18:54:44



#### Comment

Stress is a common condition that can have serious adverse effects on an individual's quality of life and health. It occurs when an individual feels too much pressure that they are unable to cope with. Reducing stress improves sleep and reduces irritability, anxiety and depression; and overall health/well-being. This measure is critical in illustrating clients continued progress through support group attendance. COVID-19 has altered support groups to virtual meetings instead of in-person, which makes it more difficult to collect surveys.

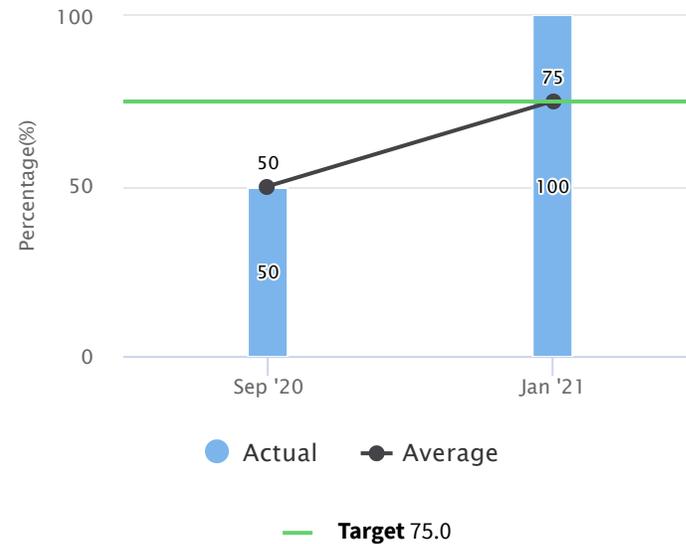
### Support group attendees who report less isolation

Percentage of support group attendees who report a reduced feeling of isolation (Goal: 75% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 18:54:55



#### Comment

Isolation is a condition growing more common that can have serious adverse effects on an individual's quality of life and health. Evidence has linked perceived social isolation with adverse health consequences including depression, poor sleep quality, impaired executive function, accelerated cognitive decline, poor cardiovascular function and impaired immunity at every stage of life. This measure is critical in illustrating clients continued progress through support group attendance. COVID-19 has altered support group meetings to virtual, rather than in-person, making it more difficult to collect surveys.

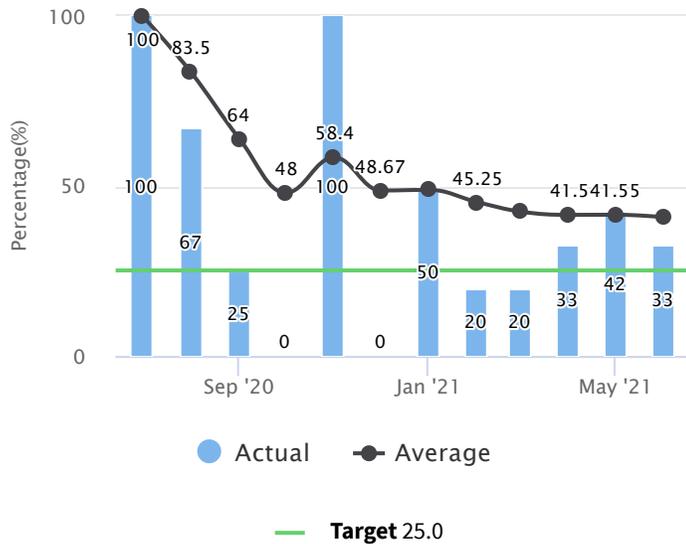
### Clients who are referred to individual counseling services

Percentage of clients who are referred to individual counseling services that attend sessions. (Goal: 25% or greater)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 18:56:34



#### Comment

Domestic violence counseling can be a crucial factor in emotionally recovering from your domestic violence experience. Counseling is always offered and encouraged as an option for clients seen by Davie Center for Violence Prevention, although we have no control as to whether or not the client actually attends.

During COVID in person counseling was temporarily halted, then resumed by way of telehealth. In person counseling has now resumed.

### Clients needing shelter -connected to emergency shelter options

Percentage of clients who needed emergency shelter and were connected to emergency shelter options - either inside or outside of the county (Goal: 100%)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 18:59:14



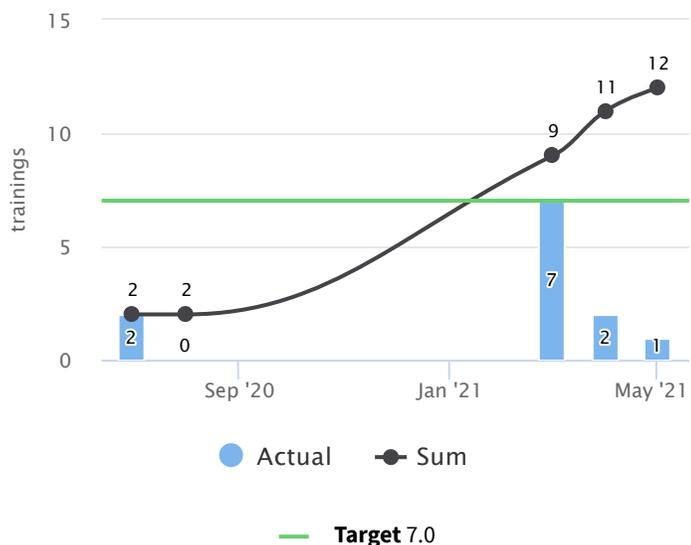
### Trainings conducted for front line workers

Number of violence prevention training sessions conducted for law enforcement, social workers and other county staff. (Goal: 7 or more by June 30, 2021)

Goal 1.1.4 Improve abuse/neglect prevention efforts through Davie Center for Violence Prevention

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:00:14



#### Comment

Having training in domestic violence and prevention can make all the difference for someone experiencing it and for the professionals in the public who may spot it and ultimately prevent it from occurring. The goal is to help as many people as possible understand what domestic abuse is, the typical warning signs, and how to respond and address these concerns. COVID-19 unfortunately has disrupted the trainings available, but we are slowly getting back to these training events.

Goal 1.1.5 Ongoing - Ongoing On Track

Promote Citizenship through Davie Center for Violence Prevention staff

Owner: Kim Shuskey

Update provided by Kim Shuskey on Jul 09, 2021 19:08:54

Update this period: Next steps: Disruptions (if necessary): Although COVID affected the ability to utilize volunteers, DCVP has been able to meet this goal.

Goal 1.1.5 > Metric

### Volunteer hours provided on the 24-hour crisis line

Number of hours that volunteers provide on the Davie Center for Violence Prevention crisis line (Goal: 1,800 or greater)

Goal 1.1.5 Promote Citizenship through Davie Center for Violence Prevention staff

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:05:31



#### Comment

The Hotline provides lifesaving tools and immediate support to empower victims and survivors to find safety and live free of abuse. Ensuring we have enough trained volunteers helps keep this critical service running.

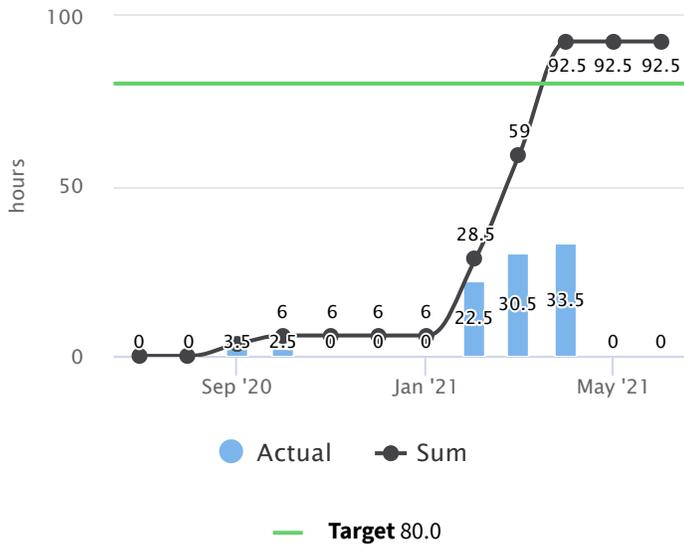
### Volunteer hours provided for office assistance at Davie Center for Violence Prevention

Number of hours that volunteers provide for Davie Center for Violence Prevention office assistance (Goal: 80 or greater)

Goal 1.1.5 Promote Citizenship through Davie Center for Violence Prevention staff

Owner: Brandi Patti, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:06:34



Comment  
 COVID-19 has greatly altered our ability to have in-office volunteers, but we are slowly getting back to in-office assistance.

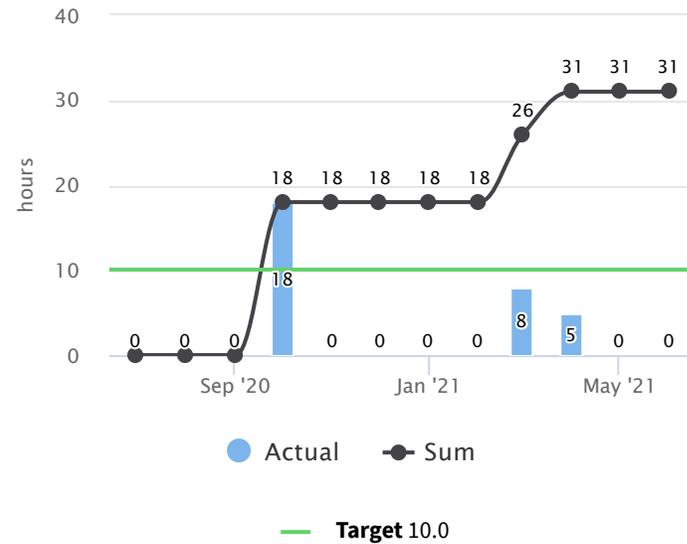
### Volunteer hours provided in DCVP community outreach

Number of hours that DCVP volunteers provide in community outreach settings (Goal: 10 or greater)

Goal 1.1.5 Promote Citizenship through Davie Center for Violence Prevention staff

Owner: Kim Shuskey, Brandi Patti, and Justin White

Last Update: Jul 09, 2021 19:08:10



Comment  
 COVID-19 has hampered our ability to provide community events, but we are slowly getting back to these efforts.

Goal 1.1.12 Ongoing - Ongoing On Track

Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Update provided by Justin White on Jul 16, 2021 01:02:54

Face to Face interaction was scaled back and limited due to COVID-19

**BCCCP participants screened for breast & cervical cancer**

Percentage of Breast and Cervical Cancer Control Program (BCCCP) participants who are screened for breast and cervical cancer (goal: 90% or more)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 16, 2021 01:00:09



**Comment**

Commentary: It is important to have breast exams, mammograms and pap smears for the detection of breast and cervical cancer. This program makes resources accessible for a population that does not have insurance, which increases the access to care for many individuals. Every BCCCP participant is screened for breast and cervical cancer as funding allows, if they meet the eligibility requirements. BCCCP numbers will be higher in the months of March, June, September, and December when the mobile MMG unit is on-site. Due to COVID-19, the March 2020 and June 2020 mobile MMG clinic days were cancelled.

**BCCCP participants referred and followed**

Percentage of Breast and Cervical Cancer Control Program (BCCCP) participants screened for breast cancer who are referred and followed by Davie County Health Department (DCHD) for additional testing (goal: 100%)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 06, 2021 15:05:46



**Comment**

Commentary: Patients are referred for an identified abnormality whether from a breast exam, mammogram or a pap smear, to rule out breast cancer and/or cervical cancer.

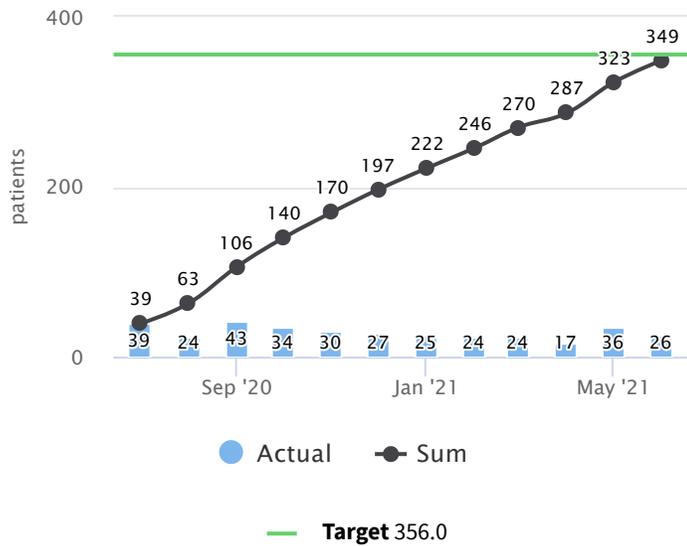
### Non-Medicaid patients receiving family planning services from Women's Reproductive Health

Number of unduplicated non-Medicaid patients receiving family planning services from Women's Reproductive Health Services (goal: 356 or greater)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 06, 2021 14:53:54



#### Comment

Commentary: The agency provides Family Planning Services to insured and non-insured clients. The target population for the state funding is for the agency to provide services for non-insured and under insured clients for Family Planning Services.

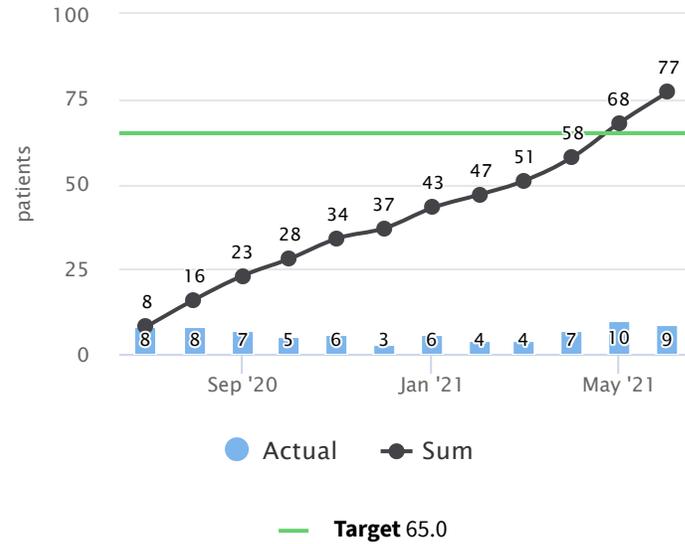
### Non-Medicaid patients served through Maternal Health Services

Number of unduplicated non-Medicaid patients served through Maternal Health Services (goal: 65 or more)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 06, 2021 15:04:11



#### Comment

Commentary: The agency provides Maternal Health Services to insured and non-insured clients. The target population for the state funding is for the agency to provide services for non-insured and under insured clients for Maternal Health Services. The agency is the only maternal health provider in Davie County.

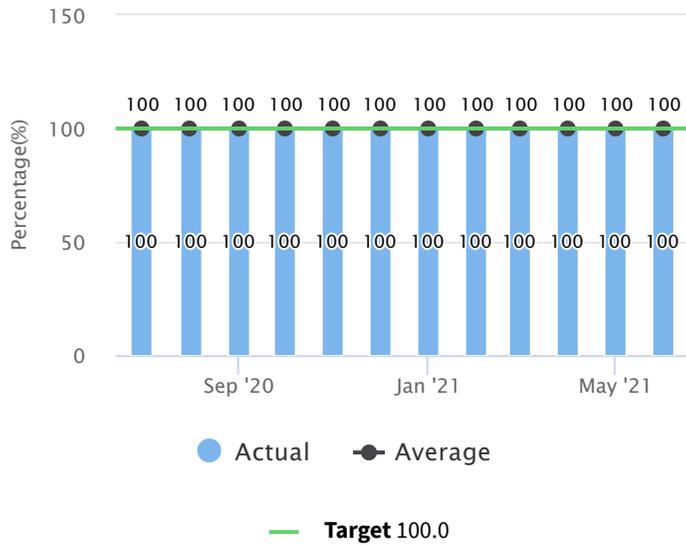
### Women receiving early and adequate prenatal care

Percentage of women receiving early and adequate prenatal care at DCHD, beginning before 3rd trimester (Goal: 100%)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 06, 2021 15:11:01



#### Comment

It is important that women receive early prenatal care to decrease issues or risk of infant mortality, and morbidity of pregnant women. The agency is the only maternal health provider in Davie County.

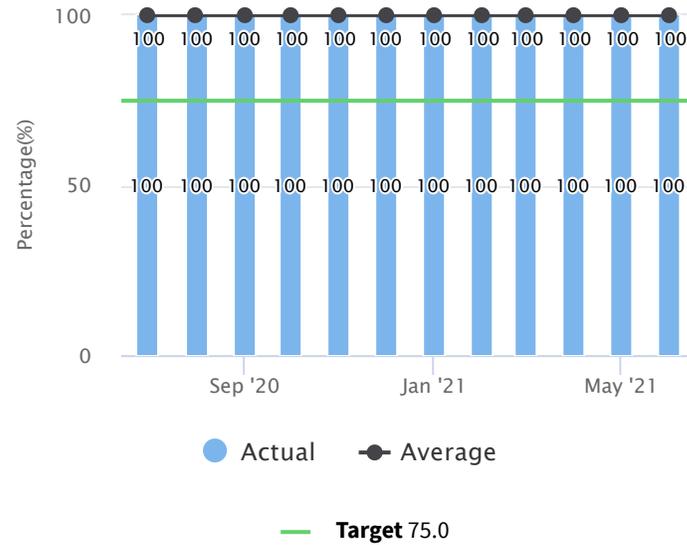
### Women access Family Planning services after pregnancy

Percentage of women who access Family Planning services after pregnancy (goal:75% or greater)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 06, 2021 15:11:51



#### Comment

These services are vital so that women can determine their future plans for childbearing and utilization of contraceptive methods to prevent pregnancy and/or promote healthy birth spacing.

### Pregnant women receiving CMHRP services

Percentage of pregnant women in managed or monitored episode status that are receiving Care Management for High Risk Pregnancy (CMHRP) services that have Presumptive Medicaid or Medicaid, or have initiated the process to enroll in Medicaid. (Goal: 95% or greater)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 01, 2021 19:05:08



#### Comment

Medicaid for Pregnant Women (MPW) and Presumptive Medicaid provide coverage for maternal services with the goal of improving the quality of maternity care, improving birth outcomes, and providing continuity of care. Pregnancy Care Managers assist pregnant women with obtaining medical coverage to help decrease barriers to maternal health services.

### Pregnant women with a care plan through CMHRP

Percentage of pregnant women receiving CMHRP services with a care plan within 30 days of referral receipt by care manager or 3 documented attempts. (Goal: 100%)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 01, 2021 19:04:34



#### Comment

Pregnancy Care Managers assist pregnant women with obtaining medical coverage to help decrease barriers to maternal health services. Getting a care plan in place early on increases the chances of successful outcomes and improves long-term health.

### Pregnant women contacted within 30 days CMHRP

Percentage of pregnant women receiving CMHRP services who are contacted within 30 days or 3 documented attempts. (Goal: 100%)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 02, 2021 16:20:04



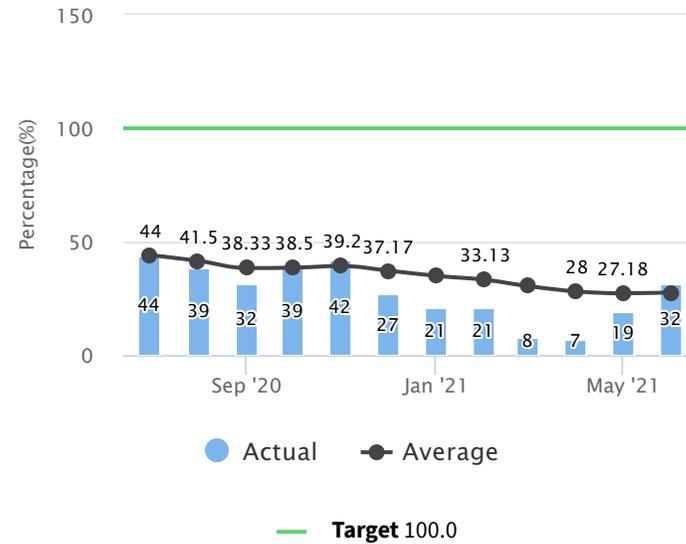
### Pregnant women with CMHRP and face to face interaction

Percentage of pregnant women receiving CMHRP services who have received a face to face interaction within 30 days, or 3 documented attempts. (Goal: 100%) EXEMPTED Metric due to COVID-19

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 01, 2021 18:59:46



#### Comment

Pregnancy Care Managers assist pregnant women with obtaining medical coverage to help decrease barriers to maternal health services. Getting a care plan in place early on increases the chances of successful outcomes and improves long-term health. Having face-to-face interactions help ensure plans to stay on track.

In the first quarter of the fiscal year face-to-face visits have not been possible in all occurrences. Due to being in Phase 2 of Covid-19 NC State of Emergency planning, Home visits/Face to Face visits have been stayed. 100% of the women were contacted either by phone, face-to-face interaction or medical visit.

Update on 1/7/2021 from Beth Lovette. 1. Medicaid Care Management Staff: Effective immediately, and for at least two weeks, LHDs can instruct CMARC (CC4C) and CMHRP (OBCM) care managers to reduce to triaging and addressing urgent/emergent issues and spend all other available work hours to support vaccine work at your health department.

Update 2/24/21 from Michelle Moore, SW, Regional Consultant: Face-to-face visits are still waived, for now, for safety reasons for CMHRP.

### Pregnant women with updated care plan - CMHRP

Percentage of pregnant women receiving CMHRP services who have an updated care plan every 30 days, or 3 documented attempts. (Goal: 100%)

Goal 1.1.12 Improve access to physical and behavioral health care for indigent population

Owner: Justin White

Last Update: Jul 16, 2021 00:32:15



**Goal 1.1.13** Ongoing - Ongoing On Track

Maintain optimal environmental health services

*Owner: Justin White*

*Update provided by Justin White on Jul 16, 2021 15:37:25*

100% of Food, Lodging, and Institution inspections for the year were completed. COVID-19 staffing issues kept some response longer than desired but with steady staff and reduction in COVID response within Environmental Health, response times should be back within reason.

Goal 1.1.13 > Metric

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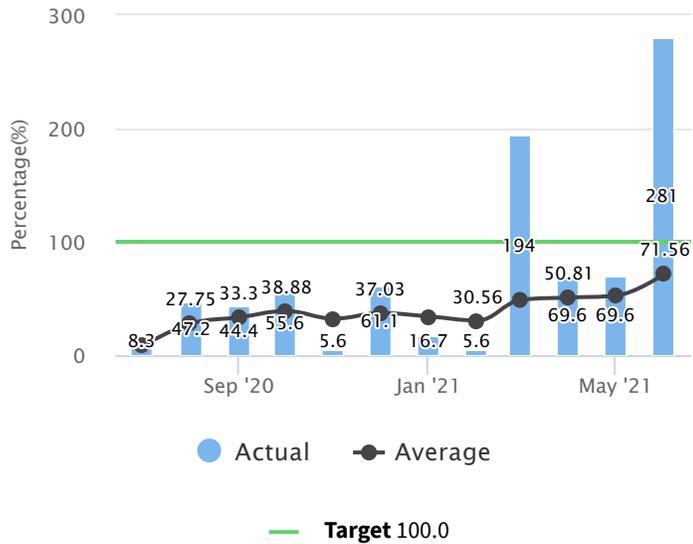
### Food and Lodging Inspections annually

Percent of Food and Lodging Inspections completed by fiscal year end (Goal: 100%) EXEMPTED Metric due to COVID-19

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:41:52



#### Comment

This metric measures completion of food, lodging, and institution inspections. This makes sure the staff is completing inspections in a timely manner and that Environmental Health receives the full state reimbursement for completed inspections. Limitations include the total number of required inspections changing throughout the year as establishments open and close and the seasonal nature of other establishments.

Due to COVID-19 the timelines for food and lodging inspections changed, which affected what percentage of inspections remain to be completed within the year.

Staff coverage in the the Food and Lodging program was limited due to COVID-19, extended FMLA leave for multiple staff members

### Septic repair applications responded to within 4 days

Percentage of septic repair applications responded to within 4 business days (Goal: 75% or greater) EXEMPTED Metric due to COVID-19

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:44:25



#### Comment

This measures the response time to complete repair applications and ensures a timely response to homeowners with failing systems which can be an urgent public health issue.

Due to the COVID-19 pandemic and staffing shortages, operations were functioning in a limited capacity, and Environmental Health staff efforts were primarily focused on the pandemic, which resulted in longer response time for some septic repair applications.

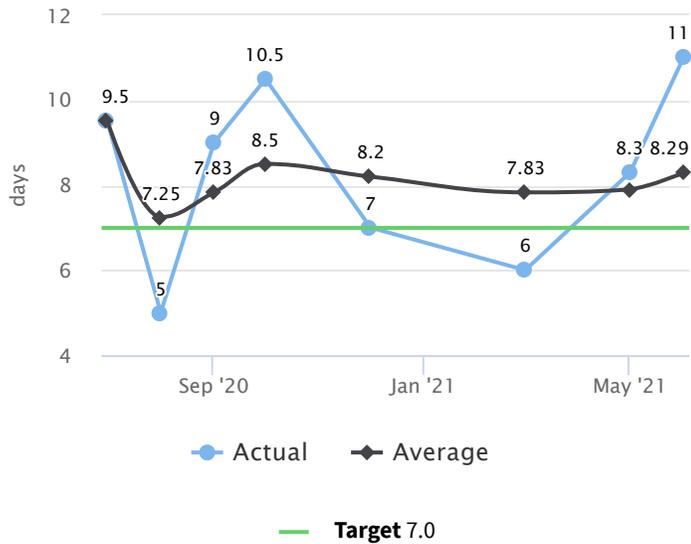
### Average number of days to collect well water samples

Average number of days to collect well samples (State Standard: 10 days / County goal: 7 days) EXEMPTED Metric due to COVID-19

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:49:23



#### Comment

Commentary: This measures timeliness of Environmental Health staff in the collection of water samples. This helps homeowners gain knowledge of what contaminants are in the drinking water from wells. Limitations include the state lab schedule which only allows us to pull samples on Monday, Tuesday and Wednesday before 12:00 pm and the homeowner availability if the sample is being pulled from an inside spigot.

Due to COVID-19, state lab was limited on sampling. Also, the state courier was limited on how often samples were picked up to go to state lab. All of which limited ability to collect samples

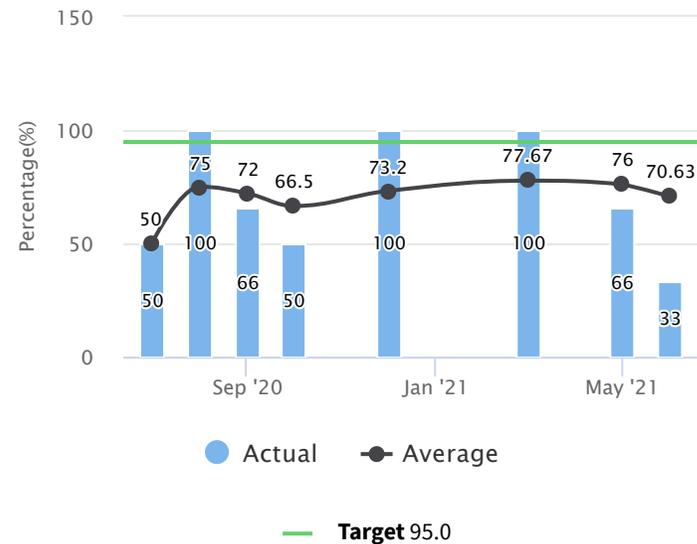
### Well water samples collected in less than 10 days

Percentage of well water samples collected in less than 10 days of the request (excluding new wells that are not ready to be sampled) (State Standard: 10 days or less) (Goal: 10 days or less at 95% or greater-internal goal of 7 days) EXEMPTED Metric due to COVID-19

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:52:59



#### Comment

This measures timeliness of Environmental Health staff in the collection of water samples. This helps homeowners gain knowledge of what contaminants are in the drinking water from wells. Limitations include the state lab schedule which only allows us to pull samples on Monday, Tuesday and Wednesday before 12:00 pm and the homeowner availability if the sample is being pulled from an inside spigot.

Due to COVID-19, state lab was limited on sampling. Also, the state courier was limited on how often samples were picked up to go to state lab. All of which limited ability to collect samples

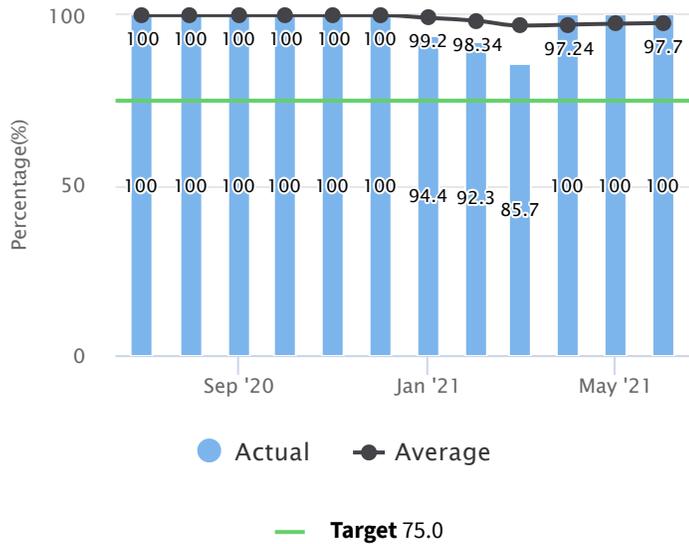
### Site/soil evaluation applications responded to in 5 days

Percentage of completed site/soil evaluation applications responded to within 5 business days (Goal: 75% or greater)

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:57:26



Comment

Commentary: This measures response time of environmental health staff to new soil/site evaluation applications. This encourages a timely response to new applications which is the first step to building a house or selling land.

### Well permit applications responded to within 10 days

Percentage of completed well permit applications responded to within 10 days (Goal 95% or greater)

Goal 1.1.13 Maintain optimal environmental health services

Owner: Justin White

Last Update: Jul 16, 2021 00:59:30



Comment

Measures response time of Environmental Health staff to well permit applications. Promotes a reasonable response time to homeowners who are installing or abandoning a well.

#### Goal 1.1.14

Ongoing - Ongoing

On Track

Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

To continue to meet and exceed the set metrics to serve the population of Davie County.

Goal 1.1.14 > Metric

### Patients in CMARC who have a Personal Care Provider

Percentage of Care Management for At Risk Children (CMARC) children in managed or monitored episode status who have a Personal Care Provider (PCP), or who have been referred to a PCP (Goal: 90% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:21:29



Comment

Commentary: Care Managers assist families in obtaining a Personal Care Provider (PCP) for well visits, immunizations, dental and sick care. Care Managers also assist with education regarding the use of a PCP and urgent care services when applicable as an alternative to Emergency Room visits that can expose children to illnesses and inflate the medical bill.

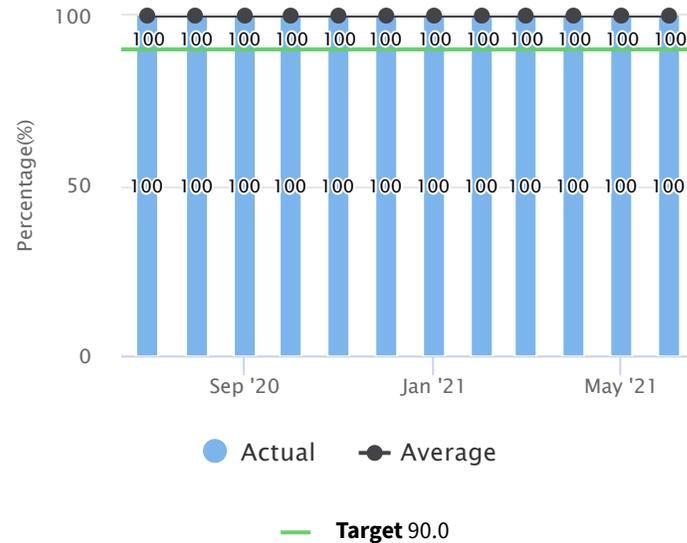
### Patients in CMARC who have a dental home

Percentage of CMARC children in managed or monitored episode status who have access to a Dental Home, or who have been referred to a Dental Home (Goal: 90% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:22:24



Comment

Commentary: While only about half of all children receive preventive dental services in a given year, Medicaid covers dental services. The Care Manager discusses healthy dental care and provides referrals to parents/guardians/foster parents to dental providers in order to help prevent decay and problems with primary teeth.

### Children in CMARC who are contacted within 72 hours

Percentage of children in CMARC program who are contacted within 72 hours following hospital (re)admission or Emergency Room visit (Goal: 75% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:20:56



#### Comment

The Care Manager discusses the use of the Emergency Room with parents/guardians/foster parents continually and promotes PCP and urgent care visits for non-life-threatening illnesses. Care Coordination for Children (CC4C) is a program for children who are at risk for problems and possible hospital stays. The Care Manager remains in contact with families during those times.

### WIC clients who are participating in WIC benefits

Percentage of Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) clients who are participating in WIC benefits (Goal: 90% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 13, 2021 18:18:15



#### Comment

Commentary: Through the Agreement Addendum with the state, the Davie County WIC office is provided a caseload. This measure looks at the percentage of the caseload who receive benefits and/or services. Participation percentage is based on a caseload of 922 recipients. The families who participate have been determined to be at nutritional risk due to food insecurity or other qualifying risk factors. To enroll, participants must also be residents of North Carolina, must meet the income requirement, and must be categorically eligible (pregnant, postpartum up to six months, breastfeeding up to a year, infants and children up to age 5 etc.). WIC strives to reach all who are eligible to receive benefits in the County.

### Children, ages 0 to 5, receiving WIC benefits, per 1,000

Number of Davie County children (ages 0-5) receiving Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits per 1,000 (Goal: increase from previous year)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 13, 2021 18:17:06



#### Comment

Commentary: There are 2,086 children under the age of 5 in the County, and this metric looks at the percentage per 1,000 of those who receive WIC services of the total number of children in Davie County. This metric measures the reach of WIC within Davie County.

### Children with CMARC who have a PCP

Percentage of children in foster care receiving CMARC services who have a primary care provider (PCP), or have been referred to a PCP (Goal: 85% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:22:51



### Children with CMARC and special health care needs

Percentage of children in foster care receiving CMARC services who have special healthcare needs who are referred for healthcare services (Goal: 85% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:24:03



### Children with CMARC and developmental delays

Percentage of CMARC children who exhibit signs of developmental delay and have referral for developmental services (Goal: 90% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 02, 2021 16:23:41



Comment

All patients received CDSA and preschool referrals as needed.

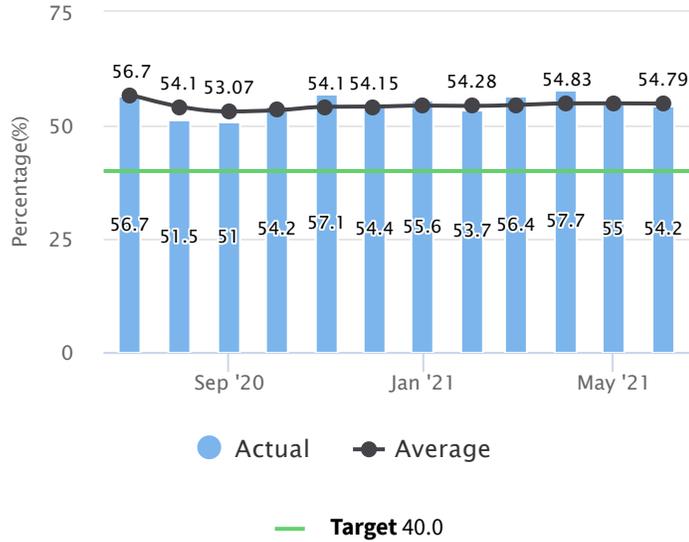
### Postpartum women receiving WIC who breast feed

Percentage of postpartum women in WIC fully or partially breast feeding. (Goal: 40% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 13, 2021 18:12:22



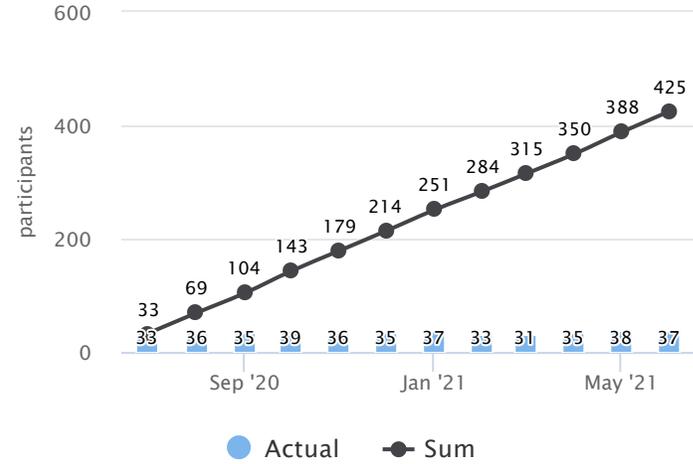
### WIC Participants enrolled in Breast Feeding Peer Counseling

Number of participants in WIC enrolled in Breast Feeding Peer Counselor program. (Goal: increase from prior year)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 13, 2021 18:02:26



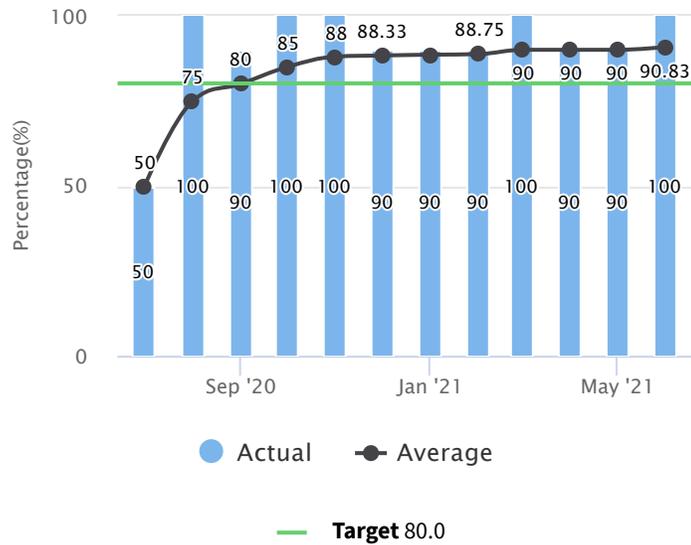
## WIC Compliance

Percentage of participants contacted in compliance with the requirements of WIC, after monitoring 10 random participant files in the WIC Breast Feeding Peer Counselor program. (Goal: 80% or greater)

Goal 1.1.14 Improve health outcomes for vulnerable children - Davie County Health Department

Owner: Justin White

Last Update: Jul 16, 2021 15:01:44



**Goal 1.1.15** Ongoing - Ongoing On Track

Support employee wellness

Owner: Justin White

Update provided by Cindy Hendricks on Aug 30, 2021 12:46:44

Update this period: Next steps: Disruptions (if necessary): The partnership with Innovative Employee Health Solutions (IEHS) has proven to be successful again this year. This is a tremendous benefit to employees for preventive health and acute health needs.

## Compliance with Health Risk Assessment requirements for Employee Wellness Clinic

Percent of employees and spouses covered by county insurance who are compliant with Health Risk Assessment requirements for Employee Wellness Clinic (goal: 5% increase or greater from previous calendar year - 85% )

Goal 1.1.15 Support employee wellness

Owner: Justin White

Last Update: Aug 17, 2021 19:32:03

### Comment

To improve the overall health of the County's workforce, Davie County requires each employee and spouse (if applicable) on the County's insurance plan to receive a Health Risk Assessment (HRA) annually. A small penalty is charged to employees who do not comply with this requirement by their birthday month. The penalty is removed when the employee (and covered spouse) is found to be in compliance.

The Davie County Employee Health Clinic Population Report comes in at the end of the fiscal year in July. At that time we can update support employee wellness performance measures. The health risk assessment is an important metric for gauging the health and wellness of county staff.

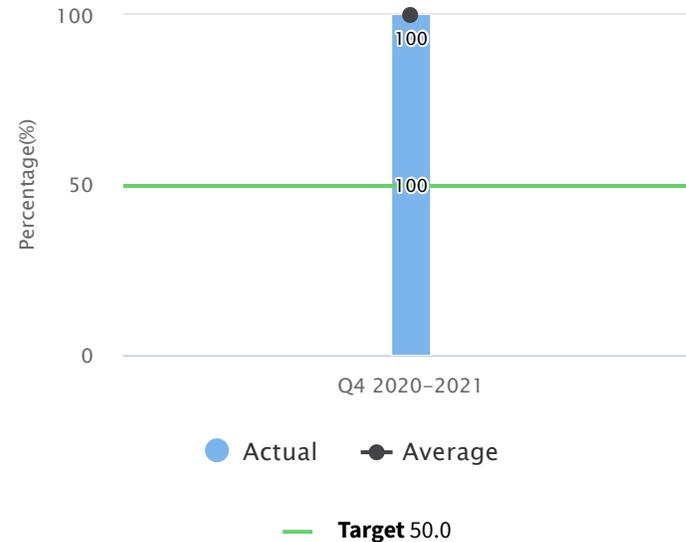
## Employee Wellness Clinic participants - high risk

Percentage of Employee Wellness Clinic participants identified as high risk who are monitored and directed to appropriate care or programming in a calendar year (goal: 50% or greater)

Goal 1.1.15 Support employee wellness

Owner: Justin White

Last Update: Aug 17, 2021 19:37:58



### Comment

To improve the overall health of the County's workforce, Davie County requires each employee and spouse (if applicable) on the County's insurance plan to receive an annual Health Risk Assessment (HRA). For the required HRA, health indicator measures include weight, height, Body Mass Index (BMI), blood pressure, cholesterol, and blood glucose (hemoglobin A1C)/or blood sugar. These are measures that can be tracked and compared over time. Any employee with HRA measures that meet the parameters for a moderate or high risk is educated, monitored, and/or referred for maintenance or additional medical attention.

The Davie County Employee Health Clinic Population Report comes in at the end of the fiscal year in July. At that time we can update support employee wellness performance measures. The health risk assessment is an important metric for gauging the health and wellness of county staff.

Improve healthy lifestyles and nutrition access and programming - Public Health

Owner: Justin White

Update provided by Justin White on Jul 16, 2021 14:01:45

Goal: to promote the importance of vaccinations for children 24 months or less and to maintain the 80% desired metric of vaccination rates.

Goal 1.1.16 > Metric

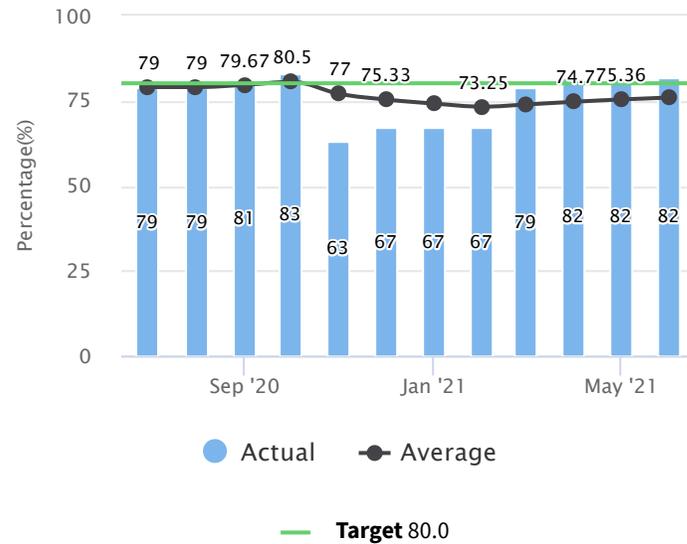
**DCHD immunization rate for children under 24 months old**

Davie County Health Department immunization rate for children under 24 months old (Goal: 80% or greater)

Goal 1.1.16 Improve healthy lifestyles and nutrition access and programming - Public Health

Owner: Justin White

Last Update: Jul 06, 2021 15:43:59



Comment

The primary vaccinations are the most important because of the risk of communicable disease. Children under 24 months are the most vulnerable. Davie County Health Department (DCHD) is to ensure that all

eligible 2-year-old children residing in the County shall have documentation of age-appropriate immunizations in the immunization registry.

Of the individuals who visit the DCHD, not all are here for vaccinations, as individuals come for WIC, a flu shot while a child is sick, or other reasons. All are counted in this number, despite some not coming into contact with the clinic. Some families when presented the option choose not to vaccinate, others cannot receive vaccinations at the point of contact with the DCHD as a result of their child being sick, and others who come to the Health Department still get vaccines but from a different provider.

The population of infants and children less than or equal to 24 months of age resets every October or November, resulting in a lower percentage of immunized children. Once the population of infants & children resets, the percentage will move upward as this group receives immunizations. In addition, some clients the DCHD is being held accountable for are not DCHD patients, or are individuals who have had an address change to a county other than Davie. This information is updated in a database however, the updates are not immediately effective but should be reflected in the following month. This can also contribute to a lower percentage for a given month.

### Patients with a sexually transmitted disease and treated

Percent of patients diagnosed with a sexually transmitted disease who are treated within two weeks (goal: 99% or greater within DCHD control)

Goal 1.1.16 Improve healthy lifestyles and nutrition access and programming - Public Health

Owner: Justin White

Last Update: Jul 06, 2021 15:23:46



#### Comment

Commentary: The standard for chlamydia and gonorrhea is treatment within 14 days of the specimen collection for 85% of the population, and within 30 days for 95% of the population. The earliest possible treatment prevents the transmission of the disease to other people.

### Patients diagnosed with active Tuberculosis who comply

Percentage of patients diagnosed with active Tuberculosis who comply with treatment plan (Goal: 100%)

Goal 1.1.16 Improve healthy lifestyles and nutrition access and programming - Public Health

Owner: Justin White

Last Update: Jul 16, 2021 14:01:02



#### Comment

The more patients who comply with the treatment plan, the lower the risk of active tuberculosis spreading to others within the community.

**Goal 1.1.17** Ongoing - Ongoing On Track

Improved accountability and fiscal outcomes for Public Health

Owner: Justin White

Update provided by Justin White on Jan 13, 2021 01:56:17

Update this period: Next steps: Disruptions (if necessary): On Track

**Participation in programmatic monitoring and audits**

Percent participation in programmatic monitoring and audits - 15 programs (Goal: 100%)

Goal 1.1.17 Improved accountability and fiscal outcomes for Public Health

Owner: Justin White

Last Update: Jul 06, 2021 15:25:02



**Comment**

Commentary: Measures the percent of compliance with mandatory and non-mandatory programmatic monitoring and audits. This is to ensure that Davie County Health and Human Services is a good steward of county, state, federal and grant funding.

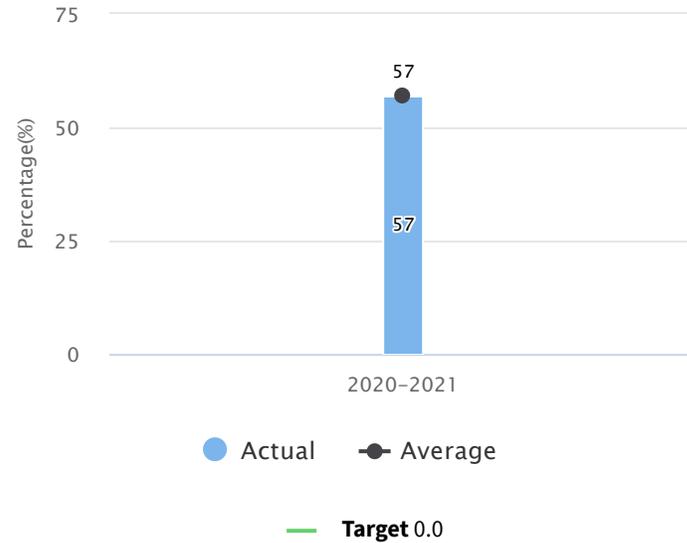
**Savings -Employee Wellness Clinic and outsourced costs**

Percent savings between Employee Wellness Clinic and outsourced costs for health services and pharmaceuticals (Goal: maintain or increase over prior year -factoring in additional service costs)

Goal 1.1.17 Improved accountability and fiscal outcomes for Public Health

Owner: Justin White

Last Update: Jul 29, 2021 18:59:27



**Comment**

The Employee Wellness and Acute Care Clinic was established to improve the health of Davie County’s workforce, reduce out-of-pocket costs for employees, and reduce or maintain insurance premium costs for the County. By providing in-house wellness, acute care, rehabilitation, lab services, DOT physicals, employment drug screening, and limited Workers Compensation services, Davie County could reduce expenses related to primary care, emergency, pharmaceutical, occupational and rehabilitation services. The percent savings is calculated annually after all visit counts, services, and current private-pay rates for each is confirmed and calculated.

FY 20-21: There were 3,515 visits, \$95,175 saved in out-of-pocket medical co-pays for employees, and 98,910 saved in out-of-pocket pharmacy co-pays (not included in the % of cost savings for the overall clinic).

### Death certificates processed within required 5 days

Percentage of death certificates processed within required 5 days of receipt (Goal: 100%)

Goal 1.1.17 Improved accountability and fiscal outcomes for Public Health

Owner: Justin White

Last Update: Jul 16, 2021 14:13:06



#### Comment

Commentary: Measures how quickly death certificates are processed from the time of receipt. North Carolina vital records general statutes requires processing to be completed within 5-7 days of the date of death. Limitations would include funeral homes not completing their portion in a timely manner and lack of other authorized agents to complete death certificates.

#### Goal 1.1.18

Ongoing - Ongoing

On Track

Strengthen Disaster Preparedness efforts - Department of Social Services

Owner: Justin White

Update provided by Justin White on Jan 13, 2021 01:57:29

Update this period: Next steps: Disruptions (if necessary): Due June 30, 2021 end of fiscal year. Data to be entered at that time

Goal 1.1.18 > Metric

### Complete Disaster / Emergency Shelter Plan

Revise and complete the disaster / emergency shelter plan in accordance with the Memorandum of Agreement between the American Red Cross and the State of North Carolina Department of Health & Human Services. (Goal: 100% complete by June 30, 2021)

Goal 1.1.18 Strengthen Disaster Preparedness efforts - Department of Social Services

Owner: Justin White

Last Update: Oct 10, 2020 12:33:57

Goal 1.1.23 Ongoing - Ongoing On Track

Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Katie Brewer

Update provided by Katie Brewer on Jul 18, 2021 23:14:54

Update this period: Next steps: Disruptions (if necessary):

The Division of Child Welfare continues to work towards efficiency and effectiveness in its approach to maltreatment response and prevention through data tracking, supervisory oversight and engagement with community partners. Repeated engagement (i.e., recidivism) with families due to methamphetamine and opioid abuse continues to remain a high need since substance recovery is a long-term process. The Division of Child Welfare has partnered with the Division of Public Health to address opioid abuse through a grant, which fully launched efforts in Child Welfare during the fourth quarter of the fiscal year.

Goal 1.1.23 > Metric

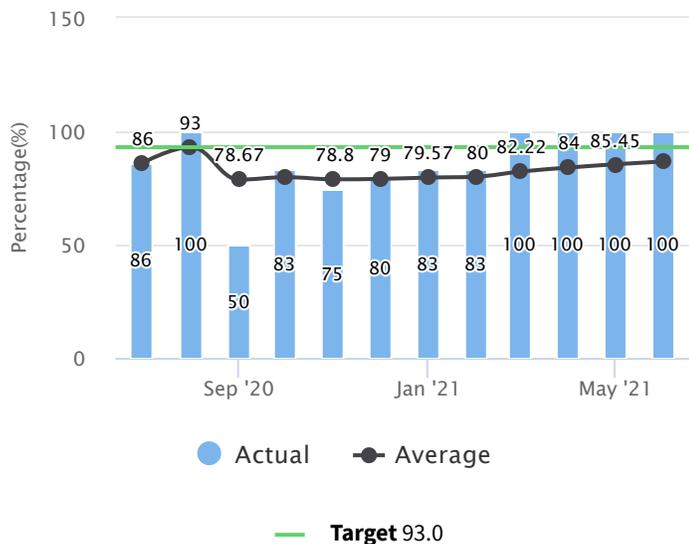
### Victim children do not have another substantiated report

Percentage of cases in which victim children do not have another substantiated report within twelve months of the first report (State Standard 91%) (Goal: 93% or greater)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 13, 2021 19:06:17



#### Comment

The Division approaches recidivism for Child Protective Services (CPS) cases through evidence-based practice and policy compliance. Over the past year, most recidivism cases have occurred during CPS In Home cases (i.e., case management). This means that cases open in CPS In Home Services received new CPS reports and subsequent investigative or assessment findings. On a positive note, this trend reinforced the basis for sending CPS cases to case management services in the first place.

### Reduce repeat maltreatment of children after In-Home

Percentage of children who received in-home services within twelve months who were not victims of repeat maltreatment within six months of case closure (Goal: 95% or greater)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 13, 2021 16:57:45



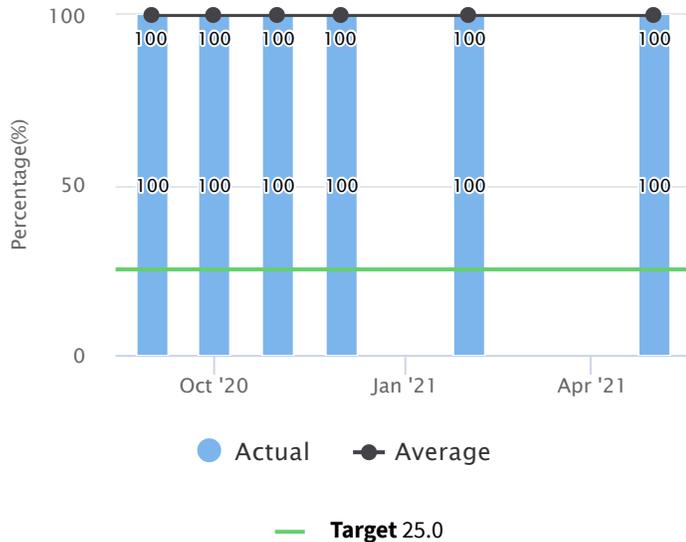
### Foster care children who are referred for CCA

Percentage of foster care children (ages 5 and above) that meet the requirements for Comprehensive Clinical Assessment (CCA) who are referred to CCA within 7 days of coming into care (Goal: 25% or greater)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:30:35



#### Comment

There were no children applicable for this metric in July 2020, August 2020, January 2021, March 2021, April 2021 and June 2021.

### Percentage of screened-in reports initiated on time

Percentage of screened-in reports initiated within required time frames with child(ren)

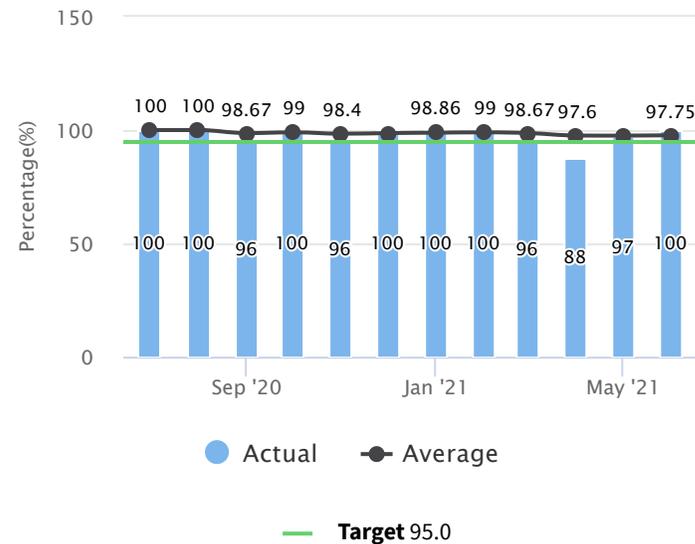
Abandonment - Immediate; Abuse - within 24 hours;

Neglect/Dependency - within 72 hours (State standard: 95%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:34:16



#### Comment

Prior to entering the FY 2020-2021, the Division make a concerted effort to ensure reports were initiated timely. Some of these efforts included the Child Protective Services Supervisor reviewing the screen-in log on a daily basis, following up with staff on the success of initiations and initiations beginning immediately regardless of assigned timeframe. These efforts assisted the Division in meeting this metric for FY 2020-2021.

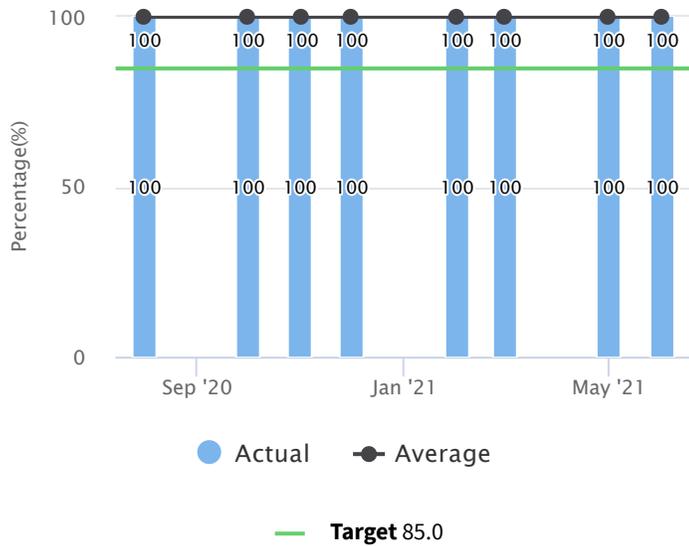
### Documented permanency goals for foster youth

Percentage of Out of Home Family Service Agreements that were completed with caregivers/family within 30 days of the child's removal from the home to achieve permanency goals. (State Policy: Within 30 days of a child's removal from the home. Goal: 85%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:40:00



**Comment**

There were no families applicable for this metric in July 2020, September 2020, January 2021 and April 2021.

### APS Evaluations for abuse or neglect

Percentage of adult protective services evaluations involving allegations of abuse or neglect that were completed within 30 days of the report. (State standard: 95%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 12, 2021 18:04:49



**Comment**

The agency did not receive any reports involving abuse or neglect for the month of December.

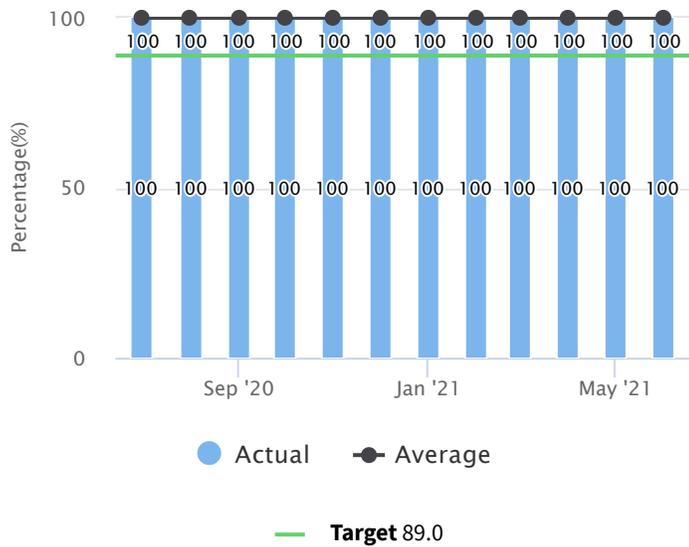
### Adults who experience abuse, neglect, or exploitation

Percentage of adults who experience abuse, neglect, or exploitation who do not experience a repeat incident within twelve months of case closure. (State performance 89%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 12, 2021 18:04:24



### Adult Care Homes monitored and complaint investigation

Fiscal year percentage of Adult Care Homes monitored and complaint investigations completed within policy and best practice standards (State performance 89%) (Goal: 95% or greater)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 18:03:51



#### Comment

Complaint Investigation completed in July and September, no monitoring completed in July, August and September due to COVID-19

### Special Assistance for the Aged applications processed

Percentage of Special Assistance for the Aged (SAA) applications that were processed within 45 calendar days of the application date. (State standard: 85%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:41:14



### Special Assistance for the Disabled applications processed within 60 calendar days

Percentage of Special Assistance for the Disabled (SAD) applications that were processed within 60 calendar days of the application date. (State standard: 85%) (Goal: 100%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:42:34



### APS evaluations for exploitation

Percentage of adult protective services evaluations involving allegations of exploitation that were completed within 45 days of the report. (State standard: 95%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 18:03:28



**Comment**

The agency did not receive any reports involving exploitation for the month of August, October, January, February, March and April.

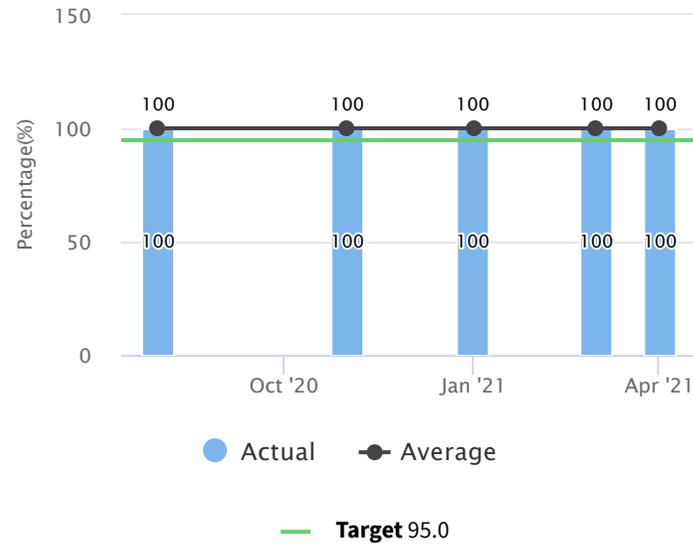
### Intensive Family Preservation services

Percentage of families who receive in-home services who are referred to and successfully complete Intensive Family Preservation Services. (Goal: 95%)

Goal 1.1.23 Improve abuse/neglect prevention efforts for vulnerable children and adults

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 08, 2021 21:41:10



**Comment**

Intensive Family Preservations Services is a four week program for families involved in Child Protective Services In-Home. For months showing no activity, families were either actively participating in the program (but not yet finished) or no new referrals occurred.

**Goal 1.1.24**

Ongoing - Ongoing

On Track

Improved permanency and health outcomes for vulnerable children

Owner: Katie Brewer

Update this period: Next steps: Disruptions (if necessary):

The Division of Child Welfare continues to make progress in meeting permanency and health outcomes for children. Notably, the Division is outpacing counties of similar size, the judicial district and the state in achieving permanency for children who enter foster care and are reunified within 12 months. This goal is reflective of federal and state mandates. The Division remains engaged with key stakeholders about continuing to improve permanency timeframes with upcoming District Court Collaborative meetings planned for all stakeholders in the upcoming fiscal year.

Goal 1.1.24 > Metric

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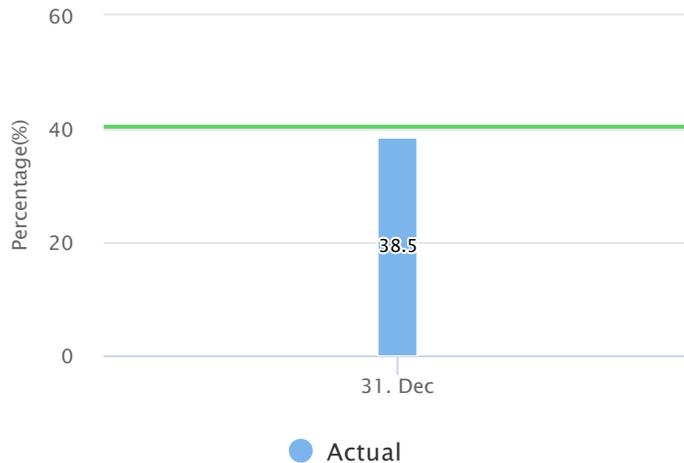
## Children who achieve permanency within 12 months

Percentage of children who achieve permanency within 12 months of entering custody (State standard: 40.5%) (Goal: 40.5% or greater)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 13, 2021 19:10:54



### Comment

NC DHHS provides data for this metric at quarterly intervals. The most recent data is for the time period of January 1, 2020 to December 31, 2020. For that period, 38.5% of children in foster care in Davie County achieved permanency within 12 months compared to

- 25.9% for North Carolina
- 28.1% for small counties
- 28.5% for the NC Judicial District of 22B
- 40.5% for the national standard

[http://sasweb.unc.edu/cgibin/broker\\_service=default&county=Davie&entry=6&label=County&format=html&\\_program=cwweb.cfsr3net.sas&plot=0&meas=2a&DatShow=0&year=2020](http://sasweb.unc.edu/cgibin/broker_service=default&county=Davie&entry=6&label=County&format=html&_program=cwweb.cfsr3net.sas&plot=0&meas=2a&DatShow=0&year=2020)

Thus, Davie County outperformed the average permanency rate in NC as a whole, for similar sized counties and the judicial district. Furthermore, Davie County is very close to meet national standard.

At the beginning of FY 2020-2021, the permanency planning team began shifting its focus to working with parents extensively within the first six months of custody to reach permanency. The Division also created quarterly Barriers to Permanency Meetings in July 2020 with the agency attorney, Child Welfare leadership team and social work staff to track and strategize efforts to achieve timely permanency.

## Foster youth who have monthly face to face visits

Percentage of foster youth who have monthly face to face visits by their Social Worker each month (State Standard: 95%)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:43:09



For that period, 38.5% of children in foster care in Davie County achieved permanency within 12 months compared to

- 25.9% for North Carolina
- 28.1% for small counties
- 28.5% for the NC Judicial District of 22B
- 40.5% for the national standard

Thus, Davie County outperformed the average permanency rate in NC as a whole, for similar sized counties and the judicial district. Furthermore, Davie County is very close to meet national standard.

At the beginning of FY 2020-2021, the permanency planning team began shifting its focus to working with parents extensively within the first six months of custody to reach permanency. The Division also created quarterly Barriers to Permanency Meetings in July 2020 with the agency attorney, Child Welfare leadership team and social work staff to track and strategize efforts to achieve timely permanency.

### Children who reenter foster care within 12 months

Percentage of children who were in foster care for less than 12 months and who re-enter foster care within 12 months of discharge (State standard: 8.3%)

(Goal: 5% or lower)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:43:53



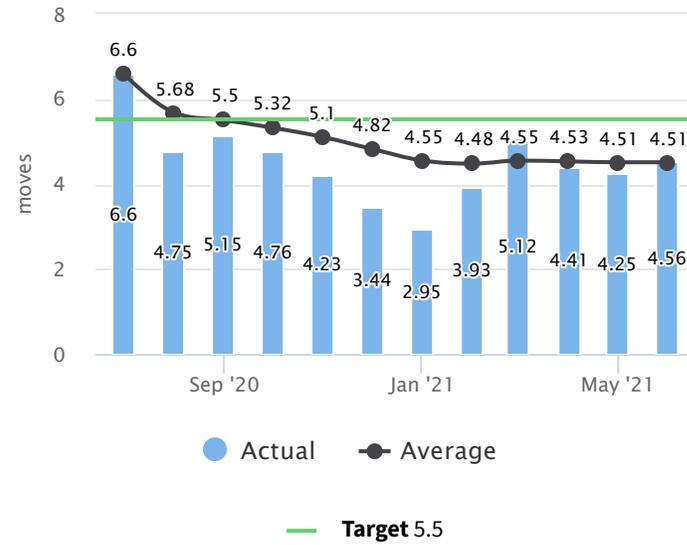
### Average placement moves per year of foster children

Of all children who entered foster care in a 12 month period, the average placement moves per 1,000 days of care (State Standard: 4.1) (Goal: 5.5 or less)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:45:19



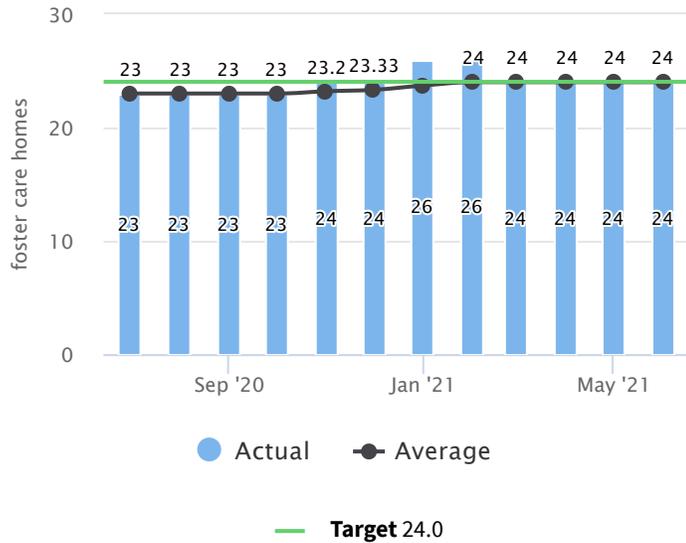
### Number of foster care homes per fiscal year

Average number of foster care homes per fiscal year (Goal: 24 homes to accommodate Davie County children)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:52:21



#### Comment

Many families who adopt children end their license upon adoption of a child or children. In FY 2020-2021, 21 adoptions were processed. This is the highest number of adoptions ever processed in DC DHHS. While the Division has continued to recruit and train new foster parents (despite the challenges of COVID-19), the backlog of adoptions entering FY 2020-2021 and renewed ability to process adoptions timely has created a situation where the Department has licensed new foster parents at a similar pace existing licenses have ended. Following state guidance, the agency has also licensed kinship placements, which are child-specific licenses. When children in these placements are adopted or return home, the license on the kinship homes usually terminate.

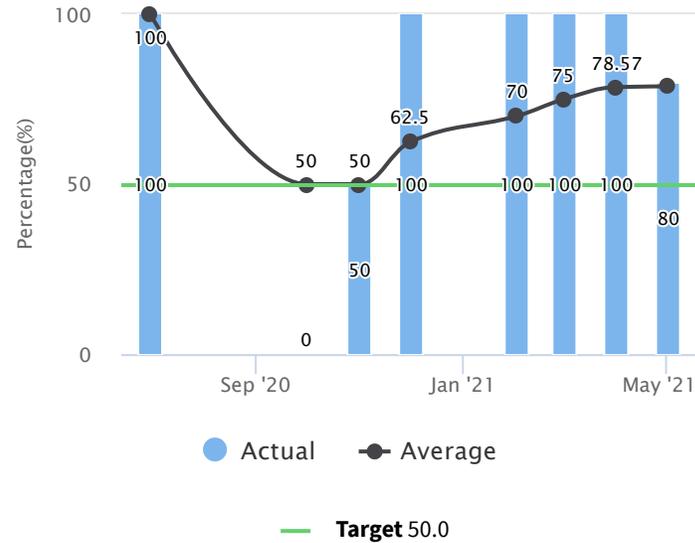
### Adoptions finalized within 6 months of legal clearance

Percentage of adoptions that are finalized within 6 months of legal clearance (Goal: 50% or greater)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:54:31



#### Comment

No adoptions occurred in August 2020, September 2020 and June 2021.

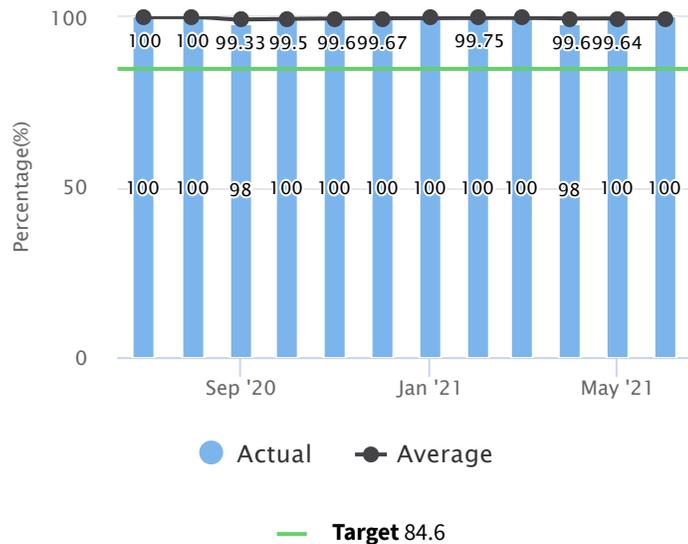
### Children in foster care current on dental and medical

Percentage of children in foster care who are current on dental and medical screenings (State performance 84.6%)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 21:57:46



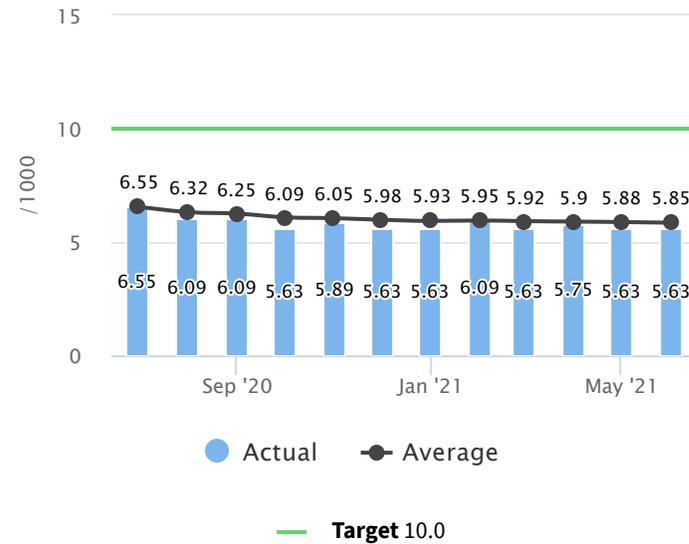
### Children in foster care per 1,000

Children in foster care per 1,000 (State average 6.7) (Goal: 10 or less)

Goal 1.1.24 Improved permanency and health outcomes for vulnerable children

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 22:03:06



**Goal 1.1.25** Ongoing - Ongoing On Track

Improve employee satisfaction and retention -Department of Social Services

Owner: Katie Brewer

Update provided by Katie Brewer on Jul 18, 2021 23:17:28

Update this period: Next steps: Disruptions (if necessary):

Overall, the Division of Child Welfare remained below the state average for turnover for the fiscal year. The Division has experienced alignment with state recommended caseloads for all service areas in Child Welfare; however, the statewide reduction in overall CPS reports due to barriers from COVID-19 (such as mandated reporters having reduced contact with children) likely accounts for some of this alignment. The Child Welfare leadership team continues to focus on retention efforts, including but not limited to staff recognition, promotion of self-care, individualized support and professional development opportunities.

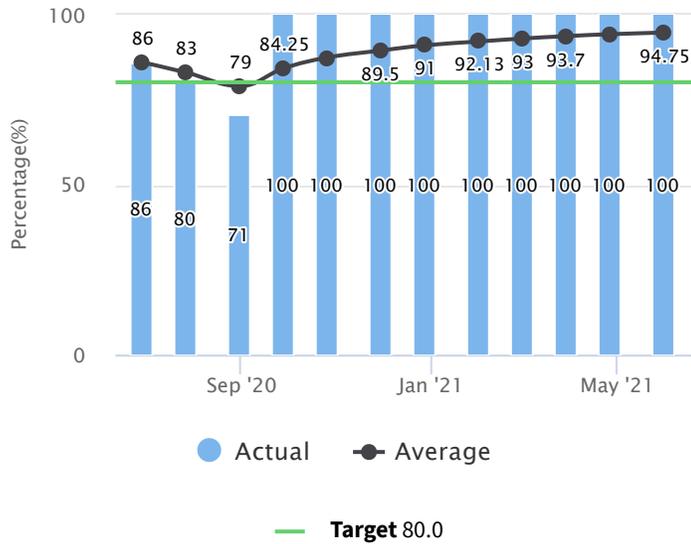
### Child Protective Services social work caseloads

Percentage of Child Protective Services social work caseloads which are compliant with the state recommended caseload number (State Recommended Caseload Number is 10 CPS) (Goal: 80% or greater)

Goal 1.1.25 Improve employee satisfaction and retention -Department of Social Services

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 22:05:03



**Comment**

A temporary social worker has been assisting the Child Protective Services team since August 2020. This worker has filled the role of an open position on the team, effectively enabling the team to stay at state recommended caseload levels. Interviews are underway to fill this position.

### Foster Care social worker caseloads

Percentage of Foster Care social work caseloads which are compliant with the state recommended caseload number (State Recommended Caseload Number is, 15 FC) (Goal: 80% or greater)

Goal 1.1.25 Improve employee satisfaction and retention -Department of Social Services

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 22:06:19



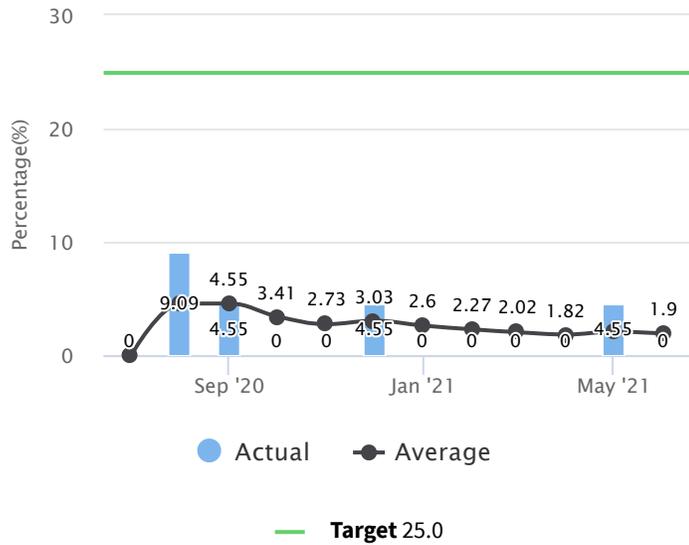
### Social worker voluntary turnover rate

Average social worker voluntary turnover rate (State Standard: 15%) (U.S. Standard: 30%) (Goal: under 25%)

Goal 1.1.25 Improve employee satisfaction and retention -Department of Social Services

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 08, 2021 22:19:21



Comment

The social worker that left the agency in December returned four months later.

### Goal 1.1.26

Ongoing - Ongoing

On Track

Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Crista Ramroop

Update provided by Crista Ramroop on Jul 19, 2021 13:25:25

Update this period: Next steps: Disruptions (if necessary):

### Ensuring all educational and health needs of children

Percentage of caretakers receiving Work First who participate in ensuring all educational and health needs of children are being met in care plan (State Standard: 84.3%) (Goal: 90% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Crista Ramroop, and Katie Brewer

Last Update: Jul 19, 2021 13:31:07



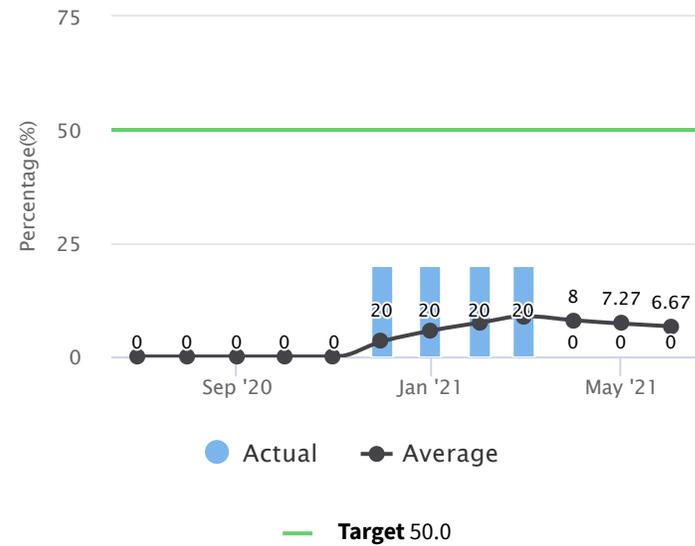
### Work First Individual completions

Percentage of work-eligible individuals that demonstrates completion of the required number of hours of federally countable work activities that provides documentation to support the hours completed. (State standard: 50%) (Goal: 50% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 17:54:49



#### Comment

Legislation requires county departments of social services to provide a wide range of services for families with income at or below 150 or 200 percent of the federal poverty level if the family meets the eligibility criteria. This is an important service in helping families remain off assistance. It is often a critical source of services for helping families who may have never received assistance. Services may include but aren't limited to, employment-related services, transportation to and from work, short-term child care, post-employment short-term skills training, and child and family enrichment services.

Federal regulation has Work First services count clients that are work exempt, even with a doctor's note. This significantly reduces county percentages states-wide.

### Families who have applied for child care subsidy

Annual percentage of families who have applied for child care subsidy who are eligible and receive services (Goal: 95% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:13:15



### Child Care Subsidy applications processed in 30 days

Percentage of Child Care Subsidy applications processed within 30 calendar days of the application date. (State standard: 95%)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:13:39



### Medicaid applications processed within the State standard of 45 days

Percentage of Medicaid applications processed within the State standard of 45 days (Goal: 95% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:16:29



Comment  
February and March metrics were lower due to the volume of applications

### Medicaid re-certifications processed on time

Percentage of traditional Medicaid re-certifications processed on time, each month. (Goal: 93% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 18:33:25



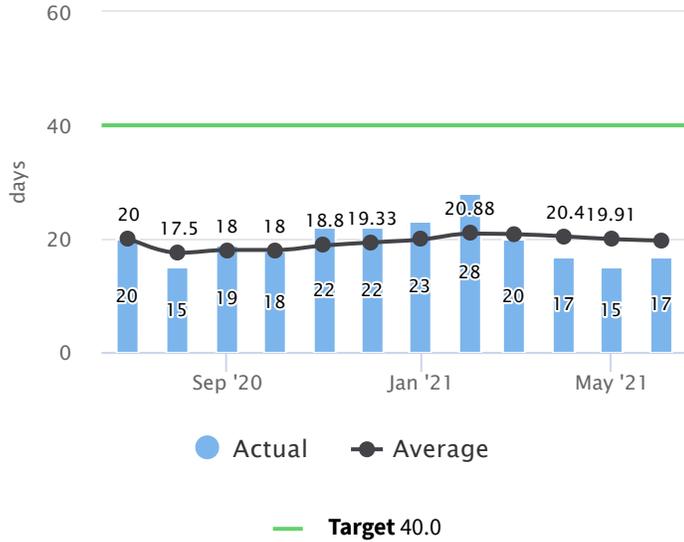
### Number of days for processing Medicaid applications

Average number of days for processing Child and Family Medicaid applications (Goal: 40 days or less)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:18:27



### Food assistance applications processed within 25 days

Percentage of regular Food & Nutrition Services applications processed within 25 days of application (Goal: 95% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:18:51



#### Comment

95% of applications were processed within 4 days of the date they were received in the first half of the fiscal year.

### Food and Nutrition Services re-certifications processed

Percentage of Food & Nutrition Services re-certifications which are processed on time, each month (Goal: 95% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:25:44



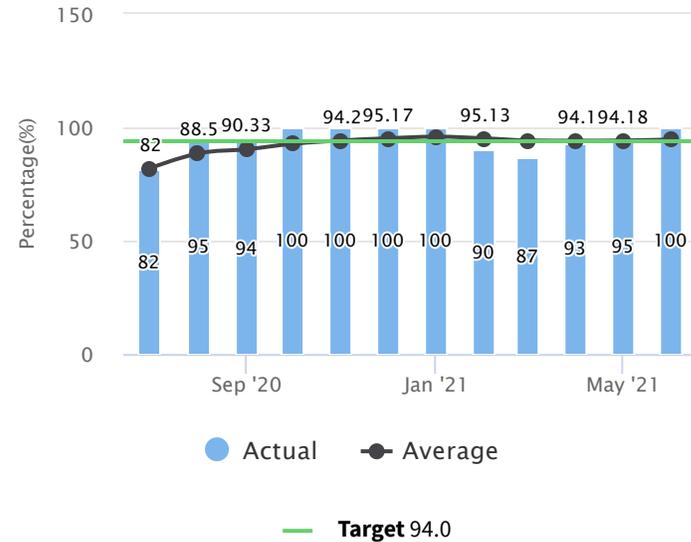
### Disability Adult Medicaid applications processed

Percentage of Disability Adult Medicaid applications processed within state standard of 90 days (Goal: 94% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:35:39



#### Comment

Medicaid in North Carolina is available to people aged 65 or older (who can also apply for Medicare), people who are blind, disabled, or need long-term care. It is an essential resource for those who need it and are eligible. Applications metrics lower due to volume, staff shortage- worker on FMLA, and information provided by the client often on the last day which is beyond the control of the caseworker.

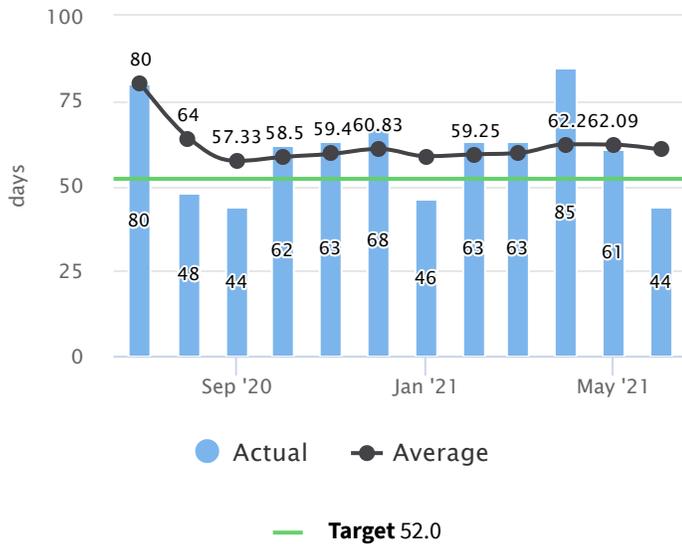
## Number of days for processing Disability Adult Medicaid applications

Average number of days for processing Disability Adult Medicaid applications (Goal: 52 days or less)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:31:55



Comment

Average number of days increased due to staff shortage, worker on FMLA, and volume of disability applications.

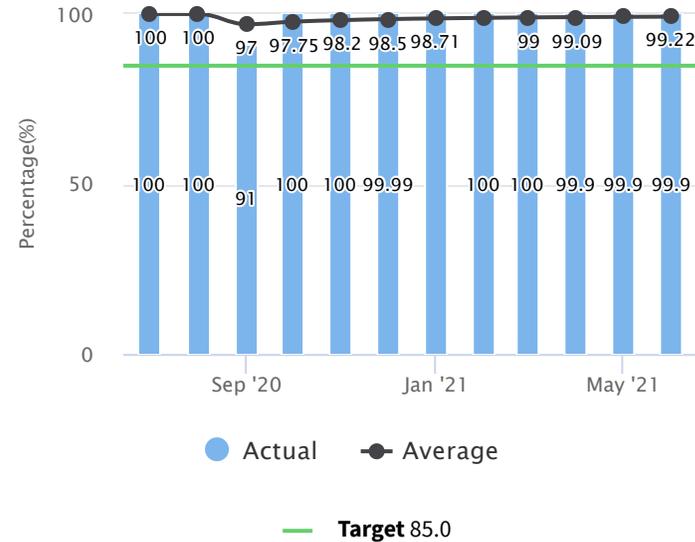
## MAGI Medicaid re-certifications processed on time

Percentage of Modified Adjusted Gross Income (MAGI) Medicaid re-certifications processed on time, each month. (Goal: 85% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:30:04



Comment

The Affordable Care Act established a new methodology for determining income eligibility for Medicaid, which is based on Modified Adjusted Gross Income (MAGI). MAGI is used to determine financial eligibility for Medicaid, CHIP, and premium tax credits and cost-sharing reductions available through the health insurance marketplace. By using one set of income counting rules and a single application across programs, the Affordable Care Act made it easier for people to apply and enroll in the appropriate program.

In March, due to Covid-19, the state extended all recertifications.

### Adult Protective Service referrals

Percent of Adult Protective Service clients referred to appropriate local community resources to remain safely in the community (Goal: 100%)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 17:52:14



### Expedited Food and Nutrition Services Applications

Percent of Expedited Food and Nutrition Services applications that were processed within 4 calendar days from the date of application. (State standard: 95%)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:19:29



### Work First 2-Parent work activities

Percentage of two-parent families with work-eligible individuals that verify that they have completed the required number of hours of federally countable work activities that provide documentation to support the work activities (State Standard: 90% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 13:08:46

#### Comment

The agency did not have any two-parent families with work-eligible individuals in the Work First program for fiscal year.

### Work First applications processed within 45 days

Percentage of Work First applications that are processed within 45 days of receipt. (State standard: 95%) (Goal: 95% or higher)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:27:57



### Work First re-certifications processed on time

Percentage of Work First re-certifications processed no later than the last day of the current recertification period (State Standard: 95%) (Goal: 95% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 13:07:22



#### Comment

here were no recertification applications for July, August, October, November, December February , March, April, May and June.

### Disability Adult Medicaid re-certifications processed

Percentage of Disability Adult Medicaid re-certifications processed on time, each month (Goal: 93% or greater)

Goal 1.1.26 Improve healthy lifestyles and nutrition access and programming- Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 16:28:53



**Goal 1.1.27** Ongoing - Ongoing On Track

Improved accountability and fiscal outcomes - Department of Social Services

Owner: Crista Ramroop

Update provided by Crista Ramroop on Jul 19, 2021 13:25:57

Update this period:

One of the cases with our agency is being counted as overdue by the state, but is out of our control because it is being held up with the District Attorney's office. Excluding this case, we will be at 100% for October, November, December, January, February and March.

**State & Federal dollars maximized to achieve results**

Percentage of state and federal dollars maximized to achieve results while minimizing county dollars (Goal: 95% or greater)

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Apr 09, 2021 23:39:57



**Comment**

One of the cases with our agency is being counted as overdue by the state, but is out of our control because it is being held up with the District Attorney's office. Excluding this case, we will be at 100% for January, February, and March.

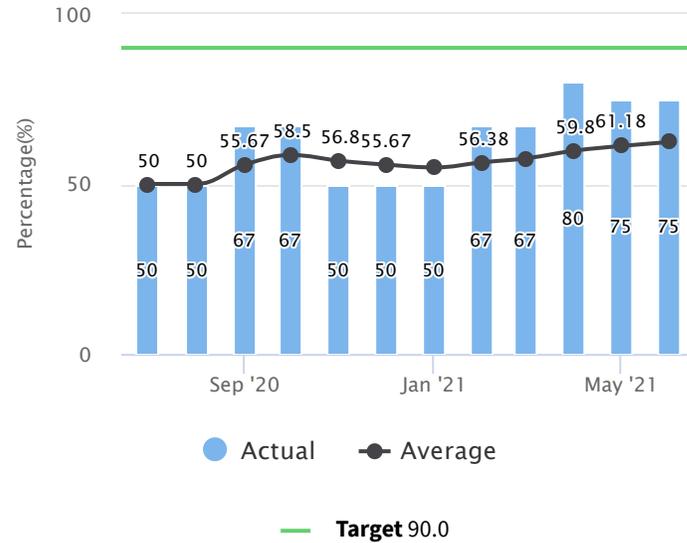
**Program Integrity claims established within 180 days**

Percentage of Program Integrity claims that are established within 180 days of the date of discovery. (State standard: 90%) (Goal: 90% or greater) EXEMPTED Metric due to COVID-19

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 19:40:02



**Comment**

For this metric, the work queue set up for referrals to come from the state was not set up to the Program Integrity workers correct profile. As a result, the cases assigned to them were not being seen.

This position has been limited to part-time employment until March 2021. The contracted was terminated with the part-time worker and a has been replaced with a full-time staff member.

Additionally, one of the our cases has been counted as overdue by the state; however, this has been out of the worker's control as it was given to the District Attorney's office in October 2019 for prosecution. Excluding this case, the metric would be at 100% for the majority of months.

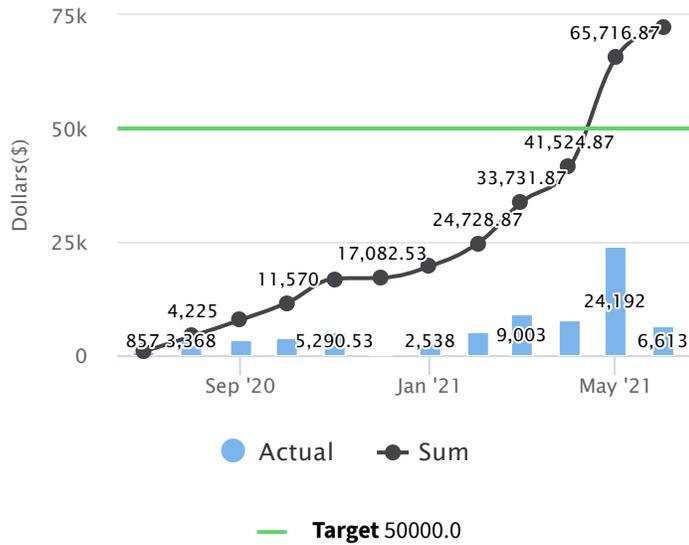
### Annual dollars saved and recovered through programs

Annual dollars saved and recovered through program integrity / fraud efforts (Goal: \$50,000 or greater)

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 12, 2021 21:36:01



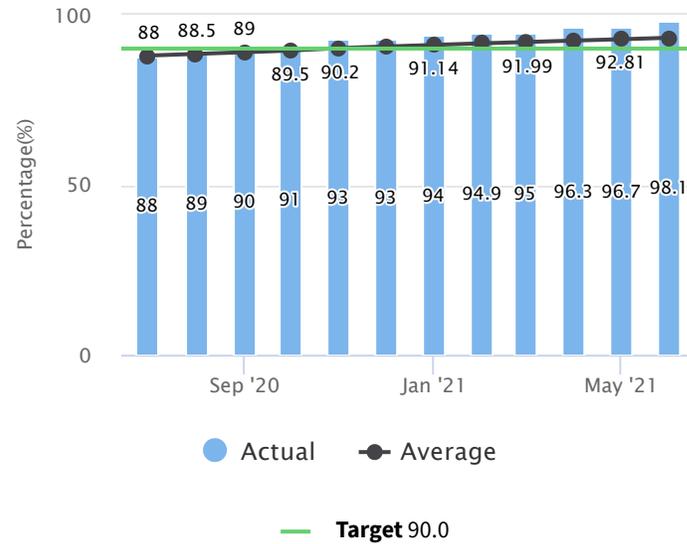
### Child Support paternities established for children

Percentage of paternities established or acknowledged (for child support) for children born out of wedlock. (National standard: 90%) (Goal: 90% or greater) Federal & State Goal was updated for COVID impact to 50%

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 15:05:49



#### Comment

Paternity Establishment MOU goal was changed to 50% State Standard. MOU goals for SFY2020-2021 are based on each County's performance at the end of SFY 2019-2020.

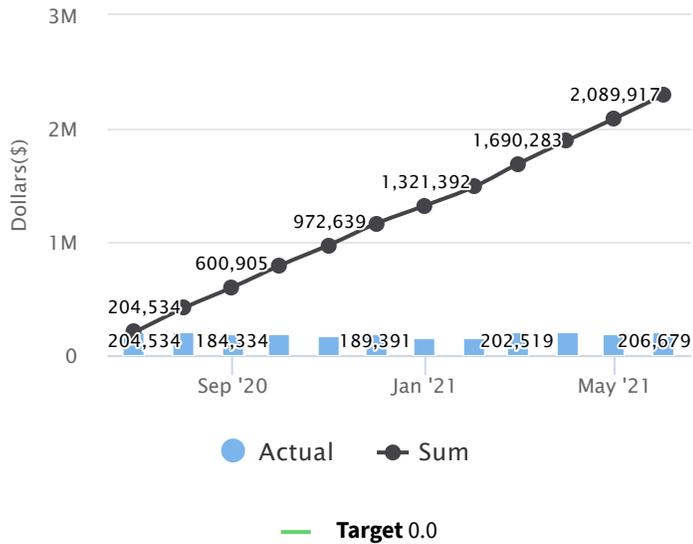
### Annual amount of child support collected

Amount of child support collected per fiscal year. (Goal: \$ 1,500,00) State goal was amended for COVID impact. No specified amount.

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 08, 2021 17:31:57



### Crisis Intervention Program applications processed

Percentage of Crisis Intervention Program (CIP) applications which are processed within state mandated timeline. (State standard: 95%)

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 13:05:04



#### Comment

The CIP and LIEAP program is now on EPASS, this started in January. With the EPASS system, individuals are able to apply for services on line. In January the agency received several EPASS applications, however individuals did not attach/upload documents needed to complete the applications. Staff had to contact individuals to obtain documents needed this caused the agency to have untimely applications.

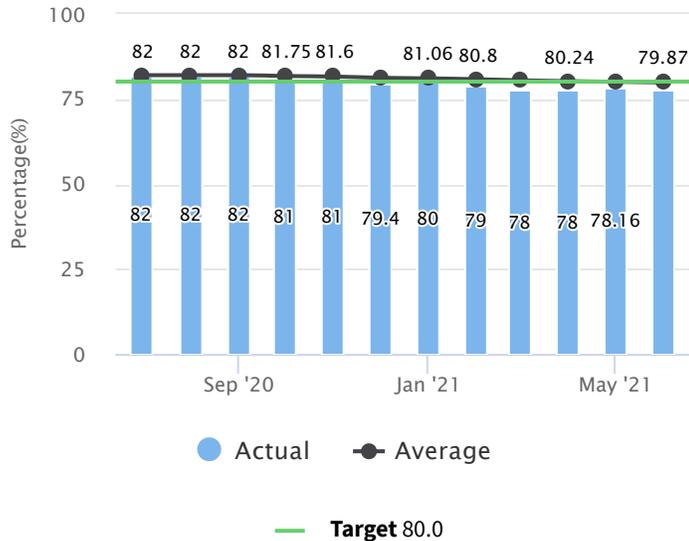
### Child Support Cases with Court order

Percentage of Child Support cases that have a court order establishing support obligations. (State standard: 80% or greater) State standard was amended for COVID impact to 50%

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 15:10:15



#### Comment

The Child Support unit has been without an Establishment Agent since the November, 2020. Not having someone to work that caseload on a full time basis will effect this metric greatly. Our office being closed to the public and court dates being canceled due to COVID-19 has also made it difficult to establish orders. Cases Under Order MOU goal was changed to 50% State Standard. MOU goals for SFY2020-2021 are based on each County's performance at the end of SFY 2019-2020.

### Child Support Paid

Percentage of current Child Support paid. ( State standard: 68%) (Goal: 68% or greater) Federal and State standard amended for COVID impact to 40%

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 08, 2021 17:34:55



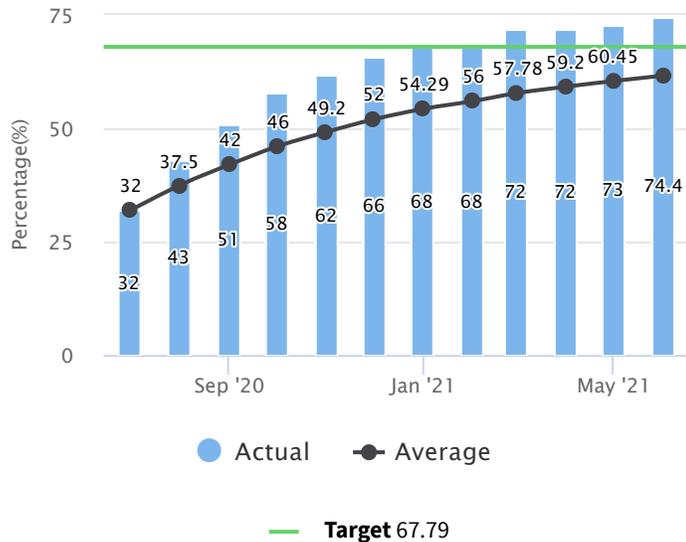
### Child Support arrears payments

Percentage of Child Support cases receiving a payment towards arrears. (State standard: 67.79%) (Goal: 67.79% or greater) Federal & State goals were amended due to COVID to 40%

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Jul 19, 2021 15:11:26



#### Comment

Payment to Arrears MOU goal was changed to 40% State Standard. MOU goals for SFY2020-2021 are based on each County's performance at the end of SFY 2019-2020.

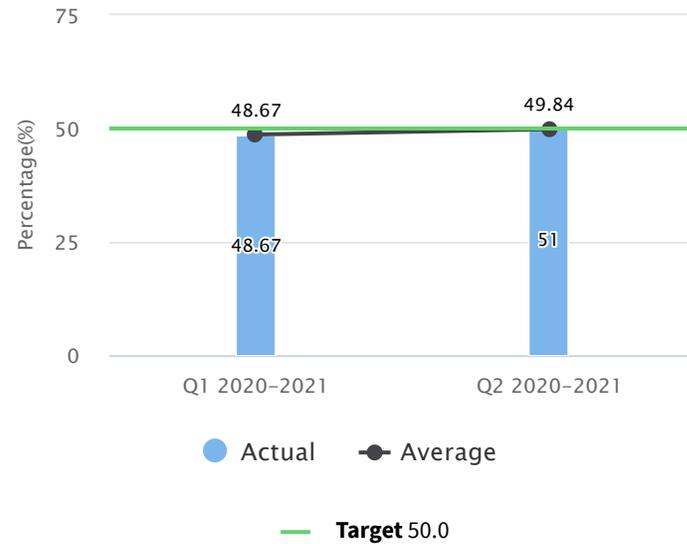
### DSS expenditures reimbursed by state and federal govt

Percentage of DSS expenditures that are reimbursed by state and federal dollars (State average 43%) (Goal: 50% or greater)

Goal 1.1.27 Improved accountability and fiscal outcomes - Department of Social Services

Owner: Justin White, Katie Brewer, and Crista Ramroop

Last Update: Nov 13, 2020 19:03:00



#### Comment

This metric looks at state and federal reimbursement dollars based on the expenditures DSS reports. Expenditures are reported at the end of a month to the state and reimbursement will follow a month later, therefore this metric will always be one month behind in reporting until year-end. This percentage will also fluctuate with DSS agencies having greater reimbursement at the beginning of a quarter when more funding codes are available and less towards the end of a quarter when funds are spent out.

The true measure of an agency's performance in this metric is done on an annual basis and reported in Septemeber the following year but it is still useful to track the monthly progression. For the fiscal year 2020, our annual percentage was 57.73%.

Goal 1.1.32 Ongoing - Ongoing On Track

### Strengthen Disaster Preparedness - Public Health

Owner: Justin White

Update provided by Justin White on Jul 16, 2021 14:03:20

Update this period: Next steps: Disruptions (if necessary):

Goal 1.1.32 > Metric

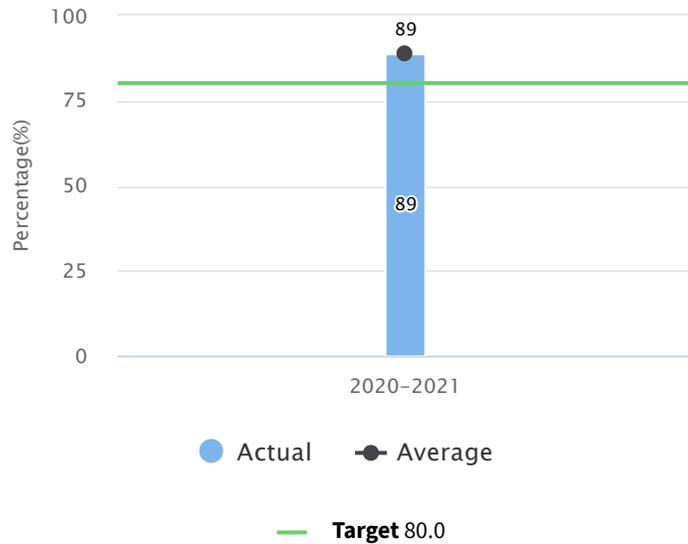
#### Public Health employees who could respond to emergency

Percentage of Public Health employees who could respond to an emergency call down drill within 4 hours. (Goal: 80% or greater)

Goal 1.1.32 Strengthen Disaster Preparedness - Public Health

Owner: Crista Ramroop, Katie Brewer, and Justin White

Last Update: Oct 12, 2020 14:19:20



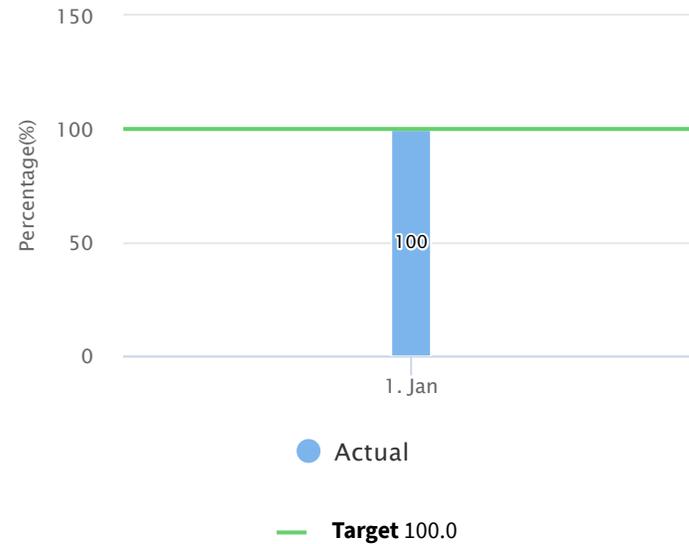
#### Conduct Preparedness Training

Conduct one preparedness training for staff, as defined by the Public Health Preparedness Agreement addenda (Goal: 100% completed by June 30, 2021)

Goal 1.1.32 Strengthen Disaster Preparedness - Public Health

Owner: Crista Ramroop, Katie Brewer, and Justin White

Last Update: Jul 16, 2021 14:02:58



**Goal 4.1.13** Ongoing - Ongoing On Track

Improve healthy lifestyles and nutrition access and programming

Owner: Kim Shuskey

Update provided by Kim Shuskey on Jul 09, 2021 19:22:55

Update this period: Next steps: Disruptions (if necessary): Although COVID has made it impossible to conduct programming in a traditional sense, Senior Services has implemented processes to serve our seniors in innovative ways and have exceeded this goal.

Goal 4.1.13 > Metric

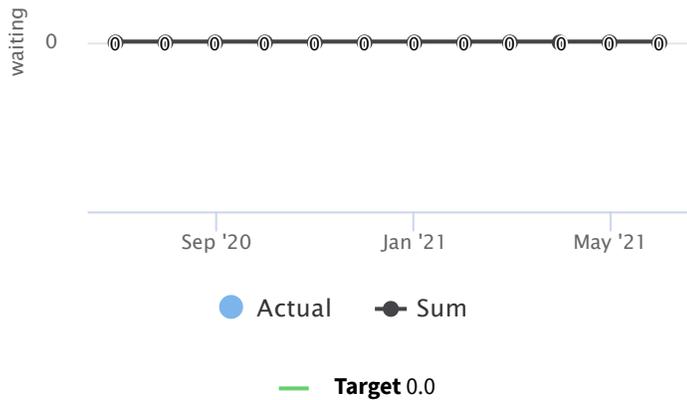
**Number on waiting list for Homebound meals**

Number on waiting list for service for Homebound Meals (Goal: 0)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:16:15



Comment

Our goal is to maintain 0 people waiting for service so that everyone who needs a meal will get one.

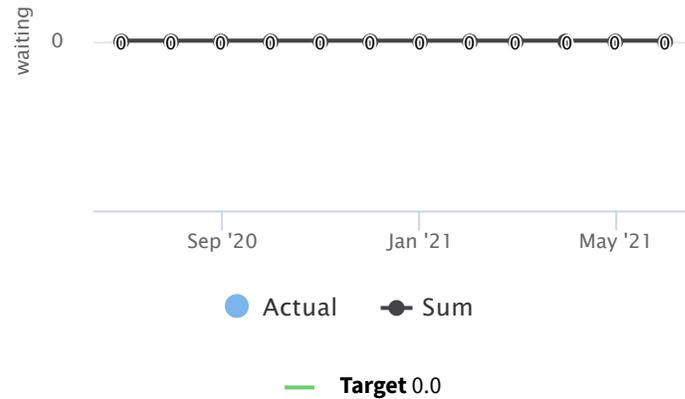
**Number on waiting list for Congregate Lunch program**

Number on waiting list for service for Congregate Lunch Program (Goal: 0)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:16:46



Comment

Our goal is to maintain 0 people waiting for service so that everyone who needs a meal will get one.

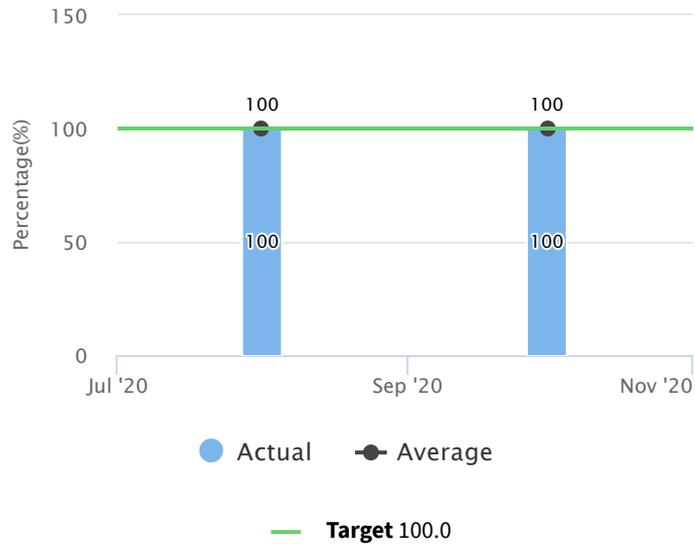
### Senior assistance In-Home applications processes

Percentage of Senior Assistance In-Home applications processed within 7 working days -the time period mandated by state standards (Goal: 100%)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:17:09



Comment

The months without data mean no applications were made that month.

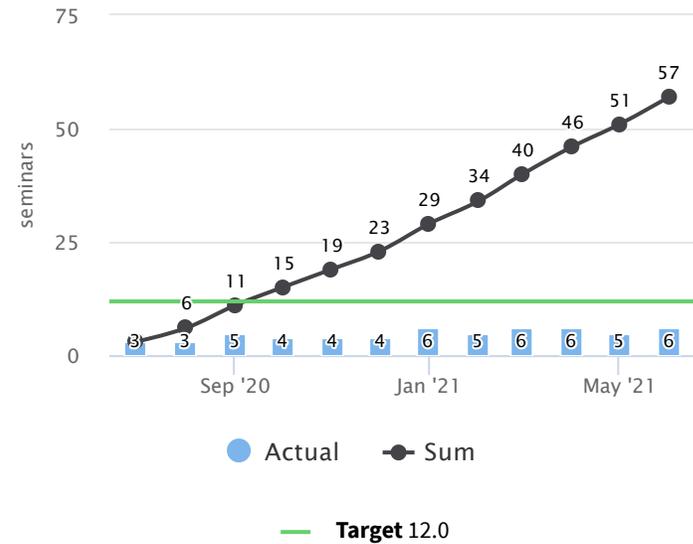
### Health education seminars provided by Senior Services

Number of health education seminars provided by Senior Services (Goal: 12 or greater)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Sep 09, 2021 17:53:12



Comment

COVID has impacted our ability to have in-person seminars. However, we have adapted and offer this instead virtually on in the parking lot. In addition we hand out health education materials to those who come through our meal line.

### Participants in Health education seminars

Number of participants in health education seminars  
(Goal: 400 or greater)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:21:16



Comment

On-site seminars were canceled starting in March due to Covid-19. Numbers are obtained by number of people picking up health information in take-home packets or attending virtual or parking lot seminars.

**Goal 4.1.14** Ongoing - Ongoing On Track

Improve active lifestyles for Seniors

Owner: Kim Shuskey

### Participants who gained knowledge from seminars

Percentage of participants who indicate on the post-seminar survey that they learned something that would influence them to adopt a healthier lifestyle (goal: 80% or greater)

Goal 4.1.13 Improve healthy lifestyles and nutrition access and programming

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:22:21



Comment

Those months without data means surveys were not collected.

Update this period: Next steps: Disruptions (if necessary):

Goal 4.1.14 > Metric

### Number of participants in local Senior Games

Number of participants in local Senior Games (Goal: 5% increase or greater from prior year = 119) EXEMPTED Metric due to COVID-19

Goal 4.1.14 Improve active lifestyles for Seniors

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:24:19



Comment

Senior Games began in April. Due to COVID, some events were conducted in-person and some were conducted "on-your-own". Our numbers were impacted this year due to COVID, but we anticipate them to rise next year.

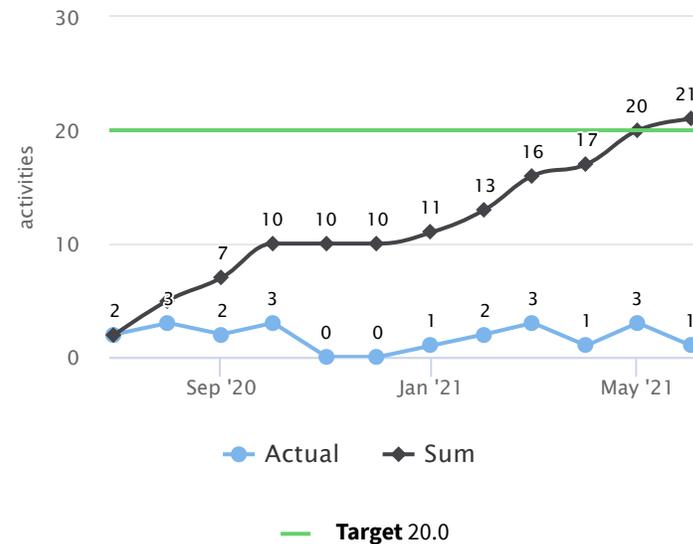
### Number of year-round Senior Games activities

Number of year-round Senior Games activities - not including local games (Goal: maintain prior year's number of 20)

Goal 4.1.14 Improve active lifestyles for Seniors

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:25:54



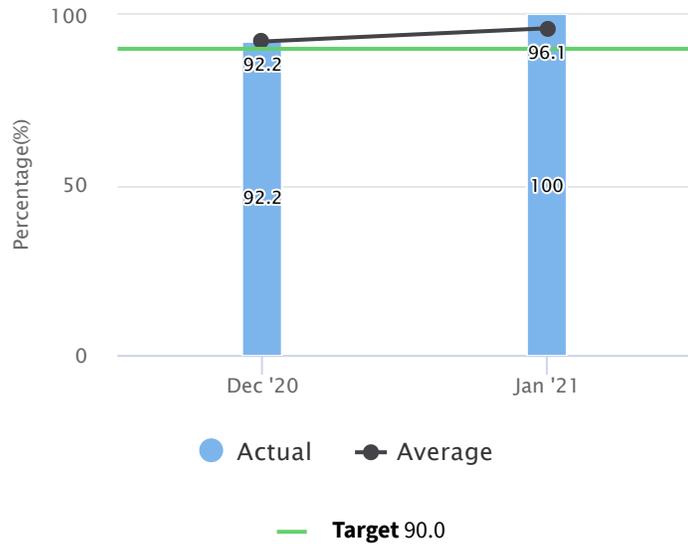
### Client satisfaction rating with Senior Center programs

Percentage of clients reporting being satisfied to very satisfied with Senior Center programming as measured on annual survey (Goal: 90% or greater)

Goal 4.1.14 Improve active lifestyles for Seniors

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:26:06



Comment

The survey is conducted annually.

**Goal 4.1.15** Ongoing - Ongoing On Track

Senior Services - Community outputs

Owner: Kim Shuskey

Update this period: Next steps: Disruptions (if necessary): Senior Services continues to look for ways to provide innovative methods to deliver the programs and services during COVID. There is no data for visits to the fitness room as the fitness room remains closed. All other programming has continued in some fashion.

Goal 4.1.15 > Metric

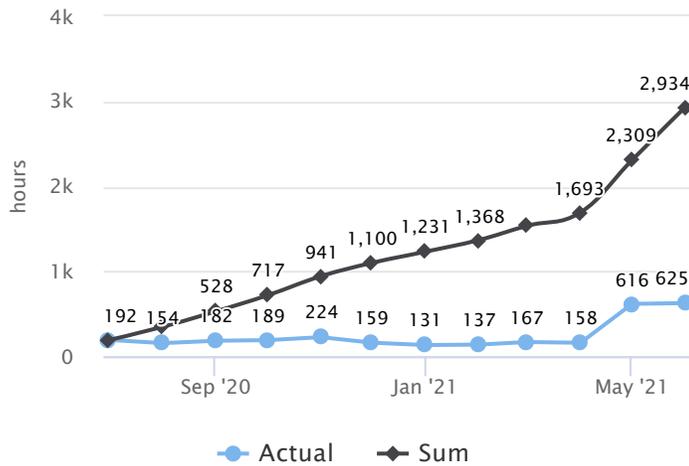
### Hours volunteered by community to Senior Services

Number of hours volunteered by community to Senior Services programming

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:28:16



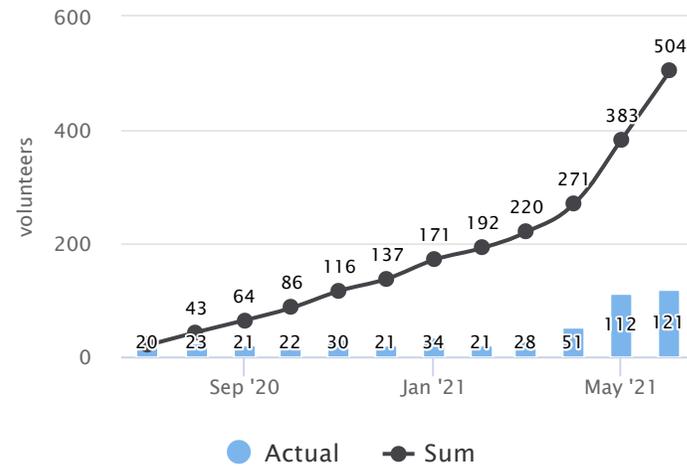
### Volunteers participating in programs supervised by Sr Services

Number of volunteers participating in programs supervised by Senior Services

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:28:51



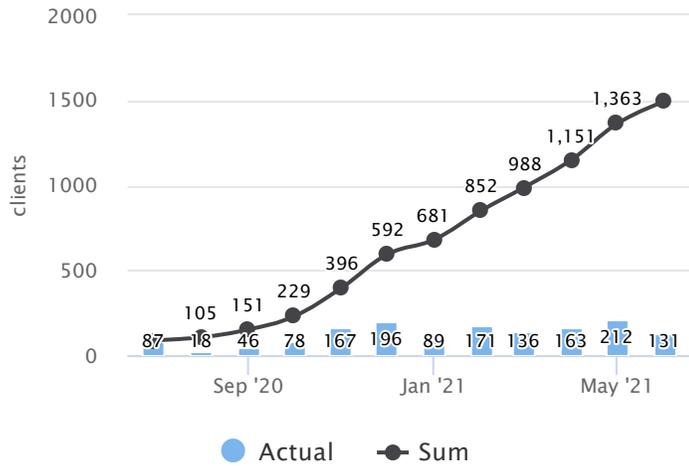
### Clients in Sr Center programming

Number of unduplicated clients for Senior Center programming that is recreational and/or social in nature

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:29:39



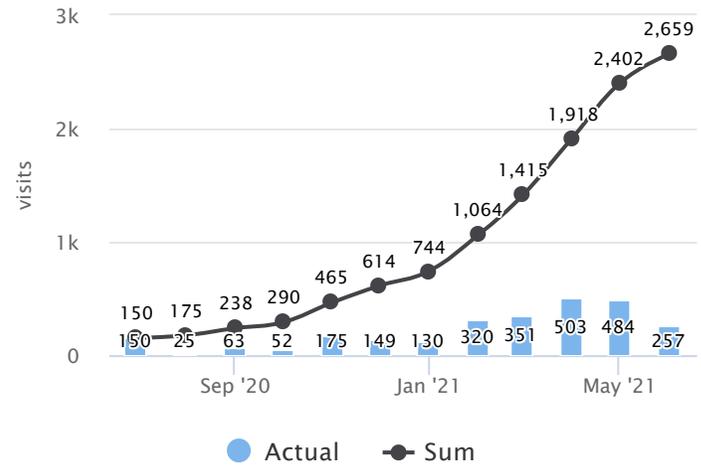
### Sr Center visits for recreation and social events

Number of visits to Senior Services for Senior Center programming that is recreational and/or social in nature

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:30:27



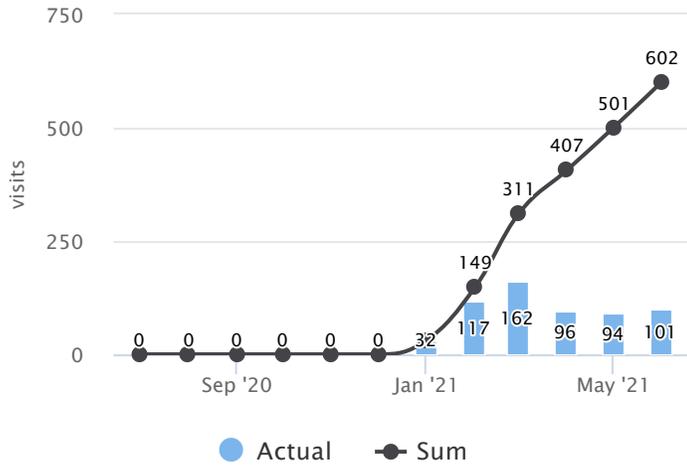
### Fitness class visits

Number of visits to Senior Services for organized fitness classes

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:32:02



#### Comment

No on-site organized fitness classes have been available due to COVID. Beginning in January we were able to begin offering some of our classes virtually.

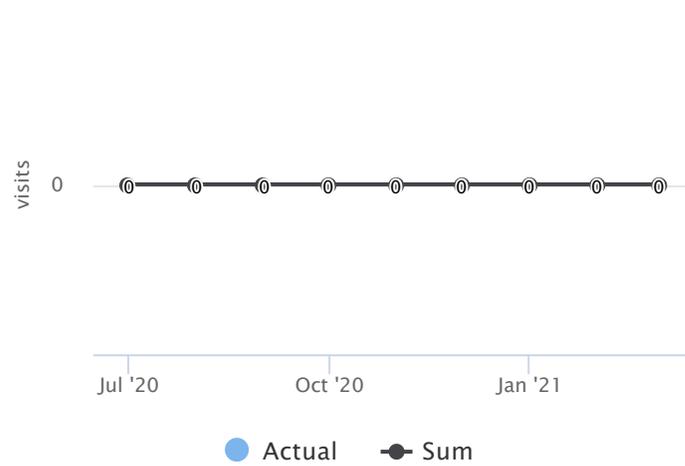
### Fitness room visits

Number of visits to Senior Services for fitness room

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:32:22



#### Comment

The fitness room has been closed due to COVID.

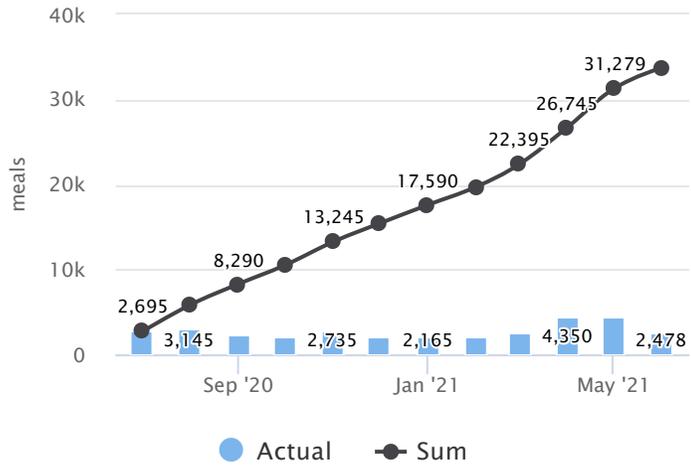
## Homebound meals served

Number of homebound meals served

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:33:42



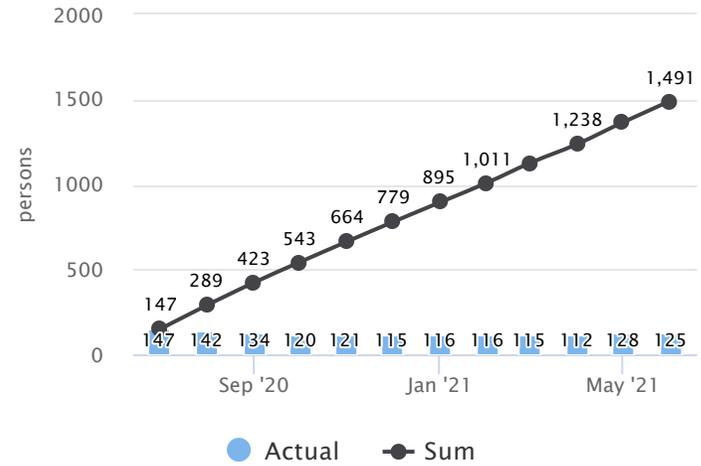
## Persons served by homebound meals

Number of unduplicated persons served by homebound meals

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:34:42



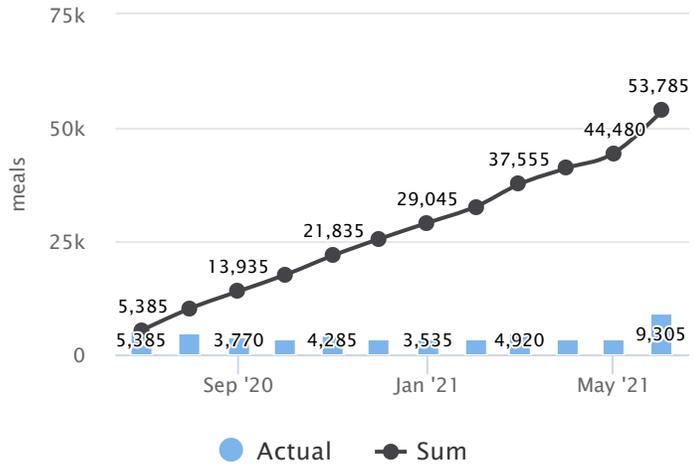
## Congregate meals served

Number of congregate meals served

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:35:26



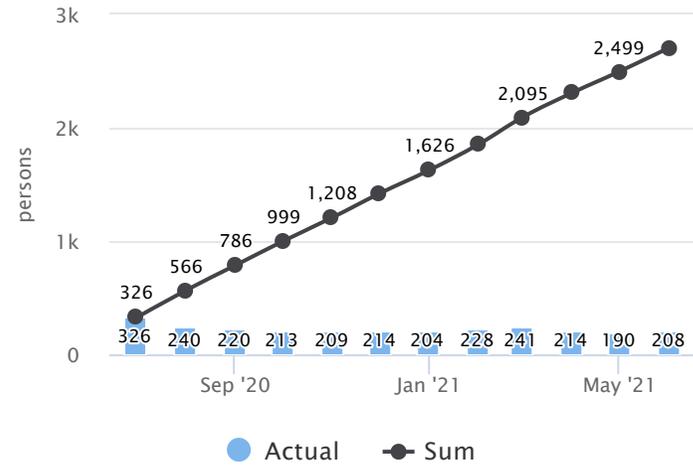
## Persons served by congregate meals

Number of unduplicated persons served by congregate meals

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:37:10



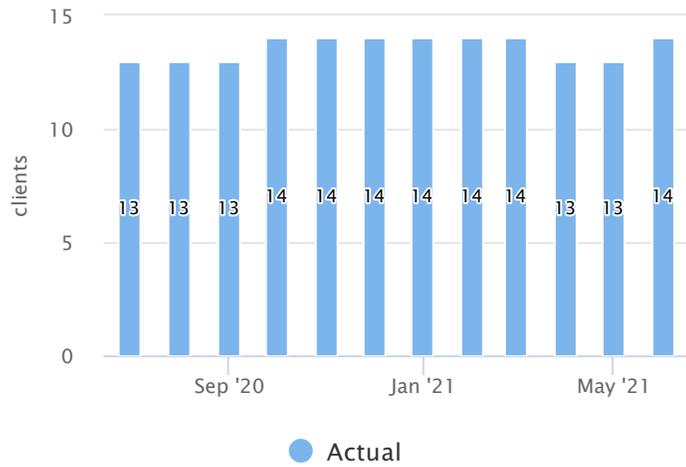
### Persons served by Special Assistance In-Home

Number of clients served by Special Assistance in Home Program

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:37:59



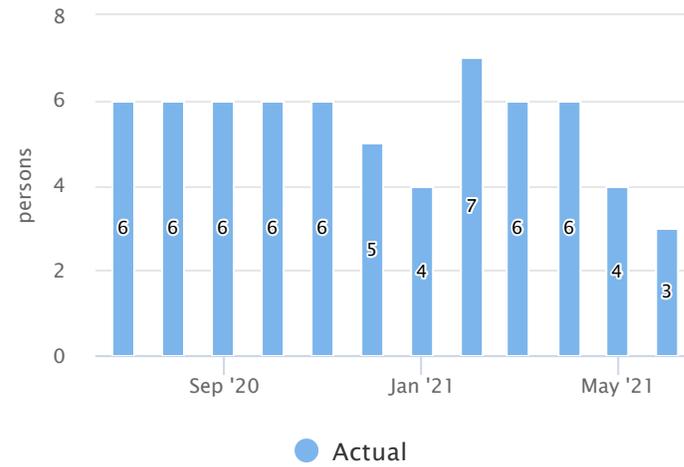
### Persons served by Social Services Block Grant In-Home Aide

Number of clients served by Social Services Block Grant In Home Aide Program

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:38:34



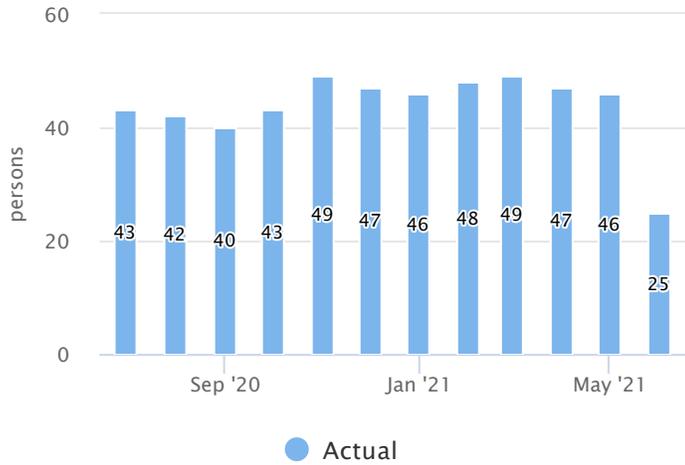
**Persons served by Home Care Community Block Grant In-Home Aide**

Number of clients served by Home Care Community Block Grant In Home Aide Program

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:39:18



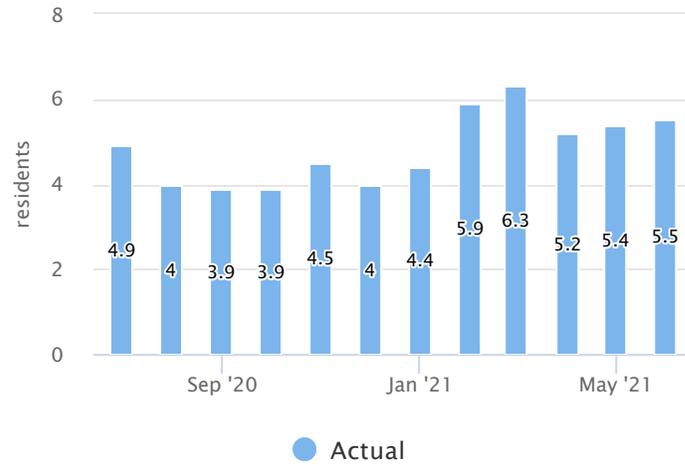
**Davie County residents -age 55 and older- served by Senior Services**

Percentage of Davie County residents 55 and older served by Senior Services

Goal 4.1.15 Senior Services - Community outputs

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:40:43



Comment

Year To Date percentage of 55 and older residents served is 16.6%.

**Goal 4.1.16** Ongoing - Ongoing On Track

Promote Citizenship - Senior Services

Owner: Kim Shuskey

Update provided by Kim Shuskey on Jul 09, 2021 19:42:44

Update this period: Next steps: Disruptions (if necessary): Senior Services met this goal.

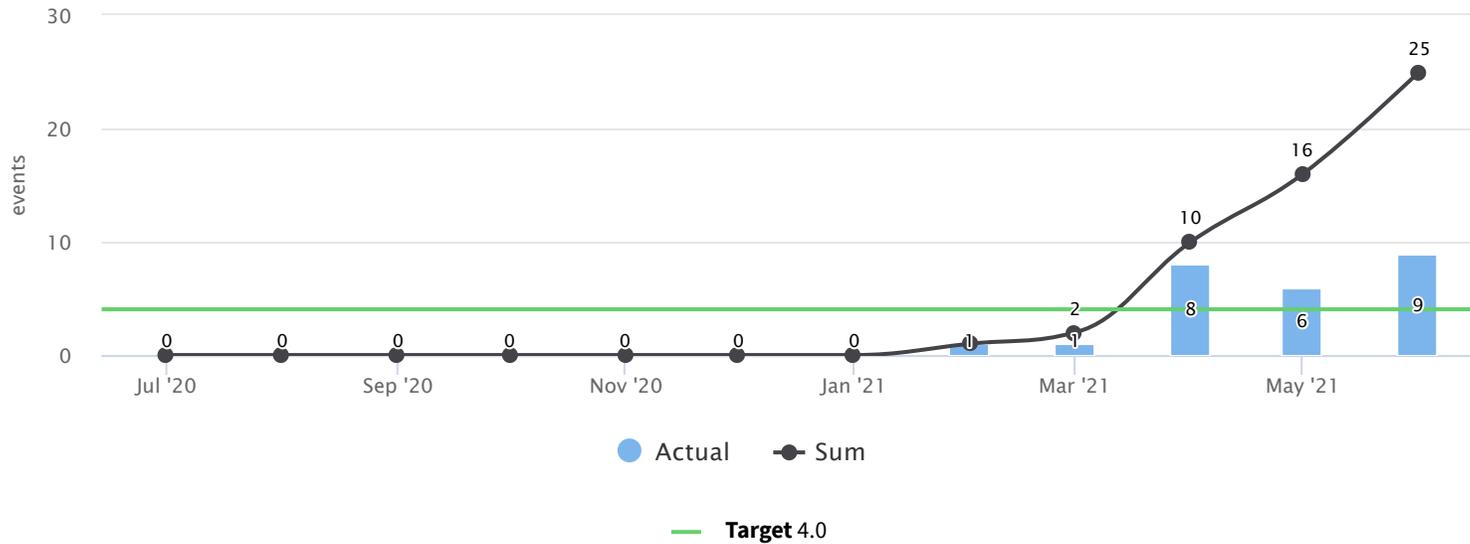
### Volunteer events for high school and Early college students

Number of times High School and/or Early College students volunteer at Senior Services (Goal: 4 by June 30, 2021)

Goal 4.1.16 Promote Citizenship - Senior Services

Owner: Justin White and Kim Shuskey

Last Update: Jul 09, 2021 19:42:23



Comment

COVID has impacted our ability to allow students to volunteer at Senior Services. However those opportunities are now opening up.

**Goal 4.1.17** Ongoing - Ongoing Some Disruption

Increase and improve services for Veterans

Owner: Kim Shuskey

Update provided by Kim Shuskey on Jul 09, 2021 19:54:23

Update this period: Next steps: Disruptions (if necessary): There have been disruptions due to Covid-19 but overall, Veteran Services met all goals that were within her power to meet.

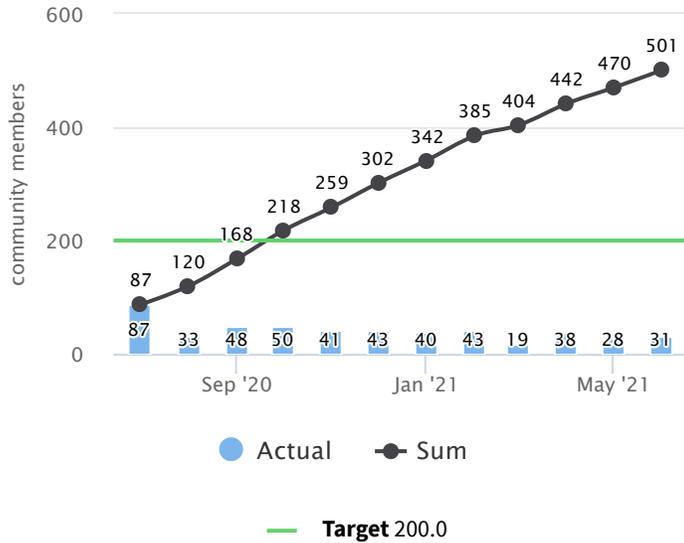
### Community members served by Veterans Service Officer

Number of different (unduplicated) community members served by veteran service officer (goal: 200 or more people by June 30, 2021)

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:44:22



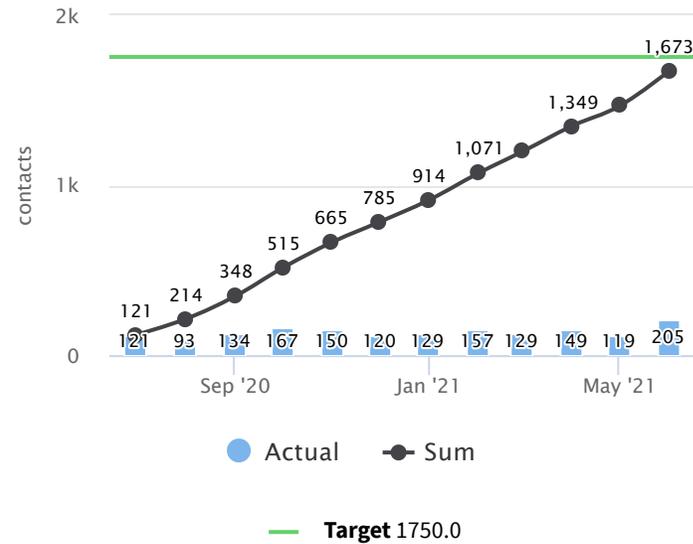
### Personal contacts with Veterans Service officer

Number of personal contacts by public with veteran services officer (Goal: 1,750 or more by June 30, 2021) EXEMPTED Metric due to COVID-19

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:46:49



Comment

COVID and the fact that in-person counseling was not available for many months impacted the number of veterans who reached out for assistance.

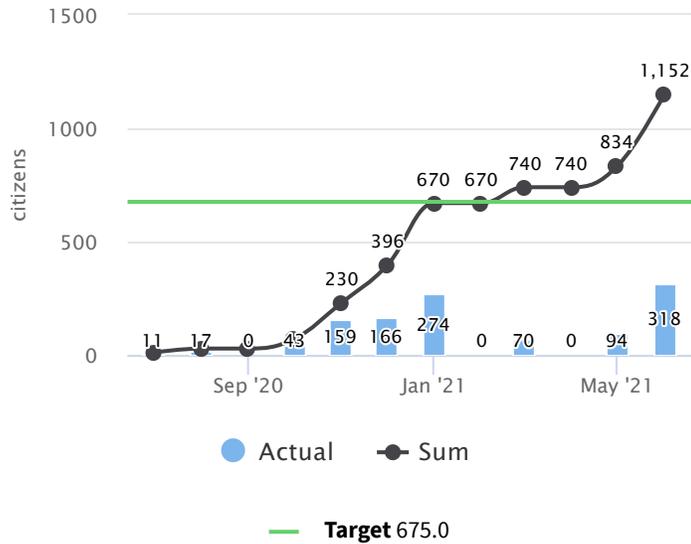
### Citizens attending outreach events

Number of citizens attending community outreach events such as monthly coffees, talks to civic groups, visits to a table at health fairs, etc. (Goal: 675 or more by June 30, 2021)

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:47:49



Comment

COVID-19 has impacted outreach events and we have had to alter the methods of reaching people, such as virtual events and handing out information in Senior Services meal packets.

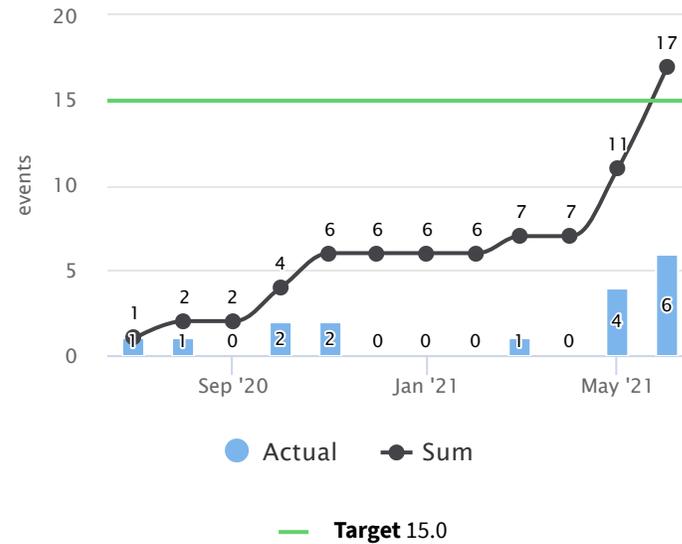
### Number of outreach events

Number of outreach events attended by representative of Veterans Services Office (Goal: 15 or more events by June 30, 2021)

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:49:06



Comment

COVID-19 has impacted the outreach events we are able to do.

### Applications submitted for health and healthcare benefits

Number of applications submitted for health and healthcare benefits (Goal: 25 or more by June 30, 2021)

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:51:34



Comment

Not all veterans qualify for healthcare benefits. The Veterans Services Officer discusses these benefits with most veterans that she sees.

### Percent of applications submitted for financial benefits

Percent of applications submitted for financial benefits (Goal: meet 100% of need)

Goal 4.1.17 Increase and improve services for Veterans

Owner: Meagan Tomlin, Justin White, and Kim Shuskey

Last Update: Jul 09, 2021 19:52:13

