
CRP Quality Project: Scorecard Q&A

The following document summarizes questions received from OOD staff, Contractors and Community Rehabilitation Programs (CRP) about the draft CRP Scorecard, and the associated definitions and process documents OOD has proposed. It does not include the multitude of positive feedback received about these draft documents.

1. Why does the Scorecard include the “People We Serve” section?

One of the primary purposes of the Scorecard is to promote consumer choice. OOD is providing as much information as possible to aid in informed choice decisions.

2. Have current VR participants been “polled” or “surveyed” to help identify what they want to see in a Scorecard? And how did other states handle this?

Consumer Advisory Committee members represented the interests of individuals served by the VR program and helped develop the criteria important to them when choosing a provider. Scorecards from other states were reviewed in depth with the work group, which also contributed to the development of the scorecard.

3. Since the Scorecard does not have total numbers of individuals served vs. placed, won’t the percentages be misleading?

This is addressed in the *Definitions* document that can be found on the OOD website.

4. How does the Scorecard work if I am a provider who does not provide job development services for OOD?

The demographic information and service offerings will be applicable to all providers. In addition, the Scorecard also provides information specific to job development for providers who offer those services.

5. What additional information will OOD need from providers?

The Scorecard will be populated from AWARE data and will require no additional data collection from providers.

6. Under “Types of Jobs” the categories seem limited, how were the categories selected?

The categories are reflective of the top five jobs for that particular provider (“Other” is also captured). OOD consistently captures types of jobs through the Standard Occupational Classifications (SOC) that are described more thoroughly in the Scorecard *Definitions* document. The “Other” category is to capture those categories not found in the initial five items.

7. Why are only 12 VR services listed in the Types of Service section?

This table actually accommodates up to 35 VR services that a vendor could actually provide in accordance with the VR fee schedule. If a service is not provided, it will not show up in this section of the Scorecard.

8. How does the Scorecard determine average time to placement?

The average time to placement is determined by the successful rehabs by RSA definition of 90+ days, which is captured from authorization issue date to service end date in the billing (reflected in calendar days) and is described more thoroughly in the Scorecard *Definitions* document.

9. Are benefits being tracked? And if so, how?

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Further training and clarification is needed prior to adding the benefits section into a future version of the Scorecard.

10. What is intended by including wages, hours, and benefits of consumers based on receipt of benefits? Is there a risk of creating the stereotype that individuals who receive these entitlements are expected to obtain employment with less wages, hours, benefits compared to those who do not receive benefits?

That risk has been discussed by both the workgroup, project sponsors, and the provider community and is felt to have value as to why people with benefits often choose to work part time rather than full time, despite providers having very limited control over such choices.

11. Why not list minimum and maximum hours and wage in addition to average?

The average aligns with OOD reporting standard for RSA.

12. How will unsuccessful referrals be reflected in the Scorecard?

The scorecard currently shows the percentage of successful outcomes, which is calculated by dividing the number of successful outcomes into the total number of outcomes (successful and unsuccessful), not including post-employment closures.

The statistic will not be the 'rehab rate' as defined by the RSA, but rather utilizes data for the percentage of all consumers served that obtain successful outcomes. The statistic is better described as a 'Placement Rate' since it will describe the percentage of all consumers who received job development/placement service that obtain a successful outcome.

Successful rehabilitations v. unsuccessful closures will be used to determine the outcome (placement data) utilized in this version of the Scorecard.

13. Will the Scorecard recognize barriers an individual may have that impact employment success?

As these are not required data elements in AWARE, they cannot be utilized fairly for all providers. We do recognize that multiple factors play into results such as economic status, transportation, medical issues, etc. but this is not the intent of the Scorecard overall.

14. Will the Scorecard reflect specialized populations served (e.g. individuals with felonies, veterans, senior citizens)?

Data for such specialized populations is not available to universally reflect this since these are not required data elements in AWARE.

15. How will the Scorecard reflect consumers who cannot meet with providers in a timely manner?

We understand that there are several reasons that may prolong engagement with a consumer. This is something all providers must accommodate and affects providers in a reasonably consistent manner.

16. Will providers have access to all other provider Scorecards or just their own?

The agency-wide and provider-specific Scorecards will be viewable on the public website which promotes informed choice through comparison. Data from which the Scorecard is generated would only be viewable by the provider themselves.

17. Will consumers have access to the Scorecards?

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Scorecards will be on a publicly accessible domain with different viewing levels based on sign-in privileges.

18. Will the information being challenged be posted and available for viewing in the Provider Management System?

There will be a pre-review process for providers to ensure the quality of the information provided. The vetting process of the Scorecard is intended for technical assistance purposes so the provider can compare their systematic data with that of the AWARE system which is OOD's official consumer record.

19. Who is responsible for explaining the "Service Results" section of the Scorecard?

The counselor, contract coordinator, and/or provider who will interact with the consumer would have this discussion.

20. Can there be some sort of acknowledgement that the agency offers other services as listed on the fee schedule addendum?

Such information would be garnered from the Provider Acknowledgements and Fee Schedules rather than from the Scorecard.

21. Will the Scorecard be used for OOD Job Developers?

OOD job developers will be evaluated consistent with the providers.

22. Will there be updated versions of the Scorecard in the future?

There will be additional items added and information developed over time.

23. Are CARF accredited providers exempt from the Scorecard?

All providers will have a scorecard regardless of their accreditation.

24. How often will the Scorecard be updated?

Twice a year, although this will be evaluated at a later time.

25. How will the quality of service be reflected in the Scorecard for agencies that typically do a smaller amount of business with OOD?

Quality of service provision will be addressed through CRP monitoring activities; that is a separate milestone for this project.

26. NOTE: Input received about satisfaction surveys will be addressed as that milestone moves forward. Results of surveys will have a placeholder on the Scorecard.