ATTACHMENT B - PROGRAMME PERFORMANCE INDICATORS 2016-17

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Outcome 1: Income Support, Rehabilitation and	Outcome 1
Compensation	
Programme 1.1 Veterans' Income Support and Allowances	Programme1.1
Measurement (Averages)	Measurement (Percentiles – Interim, 50 th Percentile)
Timeliness: Mean time for processing and review (32 and 14	The number of days within which 50% of claims will be
days)	finalised.
	(new claims 30 days, reviews 10 days)
Price: Cost per income support beneficiary (\$232)	Price: n/a
Quality: Critical error rate of income support processing (<	Quality: Correctness rate of > 95%
5%)	
Programme 1.2 Veterans' Disability Support	Programme 1.2
Timeliness: Mean number of days to process claims (75	The number of days within which 50% of claims will be
days)	finalised.
	100 days
Price: Average cost per disability pensioner (\$401)	Price: n/a
Quality: Critical errors (< 5%)	Quality: Correctness rate of > 95%
Programme 1.3 Assistance to Defence Widow/ers and	Programme 1.3
Dependants	
Timeliness: Mean number of processing and review days (75	The number of days within which 50% of claims will be
days)	finalised. 30 days

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Price: Cost per pensioner/beneficiary (\$144)	Price: n/a
Quality: Critical errors (< 5%)	Quality: Correctness rate of > 95%
Programme 1.4 Assistance and Other Compensation for Veterans and Dependants	Programme 1.4
Timeliness: Mean time to process funeral benefits and	Timeliness: The number of days within which claims will be
defence home loans (10 and 18 days)	finalised, 50% - Funeral Benefits (10 days), and DHLS – (18 days)
Price: n/a	Price: n/a
Quality: Critical errors (< 5%)	Quality: Correctness rate of > 95%
Programme 1.5 Veterans Children Education Scheme	Programme 1.5
Timeliness: n/a	Timeliness: The number of days within which 50% of claims will be finalised (28 days)
Price: n/a	Price: n/a
Quality: Critical errors (< 5%)	Quality: Correctness rate of > 95%
	(Client Satisfaction) Percentage of responses to the annual Education Schemes Satisfaction Survey indicating clients were satisfied with the support available (75%)
	(Achieving the Schemes' Outcomes) Percentage of the
	Education Schemes' clients progressing through each level
	of their education or career training (85%)
Programme 1.6 MRCA and SRCA Payments – Income Support and Compensation	Programme 1.6

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Timeliness: Mean number of days to determine MRCA and	Number of days within which 50% of claims will be finalised.
SRCA liability claims (120 days each)	100 days
Mean time to finalise new MRCA and SRCA incapacity	Number of days within which 50% of claims will be finalised.
claims. (Currently not reported)	50 days
Mean time to finalise MRCA and SRCA permanent	Number of days within which 50% of claims will be finalised.
impairment claims. (Currently not reported)	100 days
Price: n/a	Price: n/a
Quality: Critical errors under MRCA and SRCA (< 5% each)	Quality: Correctness rate of > 95%
MRCA/SRCA Rehabilitation	
Also pertinent to Programme 2.6	Timeliness: The number of days from referral receipt within
	which 90% of clients were assessed for rehabilitation (30
	days)
	Quality/Quantity: 90% of new incapacity payees who have
	undergone a rehabilitation assessment within one month of
	the incapacity payment determination
	Quality/Quantity: 90% of clients where rehabilitation goals
	were met or exceeded
Programme 1.7 Adjustment to MRCA Liability provision –	Programme 1.7
Income Support and Compensation	
Does not have KPIs	Should not have PPIs

Proposed Programme Performance Indicators
Outcome 2
Programme 2.1
Ensure arrangements are in place for the access to and delivery of quality general and specialist medical and dental services for DVA Health Card holders. Target 99% - report on % and/or x in 10,000. Number of entitled beneficiaries accessing services versus the number who have registered a complaint in relation to un-met
access and/or quality. Maintain a schedule of general and specialist medical and dental services to meet the health care needs of DVA Health Card holders and maintain consistency with trends in the delivery of health care services. Target 99% - Number of listed services accessed versus the number of approved unlisted services.

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Programme 2.2 Veterans' Hospital Services	Programme 2.2
Ensure that arrangements are in place for the access to and	Ensure arrangements are in place for the access to and
delivery of private and public hospital services under the	delivery of quality private and public hospital services for
VEA and related legislation.	DVA Health Card holders.
Unit cost: \$58	Target 99% - Number of entitled beneficiaries accessing
	services versus the number who have registered a
	complaint in relation to un-met access and/or quality.
Programme 2.3 Veterans' Pharmaceutical Benefits	Programme 2.3
Ensure arrangements are in place for the access to and	Ensure arrangements are in place for the access to and
delivery of pharmacy services under the VEA and related	delivery of quality pharmaceutical services for DVA Health
legislation.	Card holders.
Unit cost: \$8	Target 99% - Number of entitled beneficiaries accessing
	services versus the number who have registered a
	complaint in relation to un-met access and/or quality.
Maintain a comprehensive Repatriation Pharmaceutical	No change
Benefits Schedule that meets the health care needs of	
entitled beneficiaries and maintains consistency with trends	
in the delivery of health care services.	
Unit cost: \$8	Target 99% - Number of listed services accessed versus the
	number of approved unlisted services.

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Programme 2.4 Veterans' Community Care and Support	Programme 2.4
Provision of clinical nursing and home care services to	Ensure arrangements are in place for the access to and
eligible veterans and war widows/ers according to their	delivery of quality community care services for DVA Health
assessed need.	Card holders.
Unit cost: \$136	Target 99% - Number of beneficiaries accessing services
	versus the number who have registered a complaint in
	relation to access and/or quality.
Programme 2.5 Veterans' Counselling and Other Health Services	Programme 2.5 Other Health Services
New Indicator – Access to Services (Macro level)	New Indicator – Access to Services (Macro level)
	Ensure arrangements are in place for the access to and
	delivery of quality mental and allied health services for DVA
	Health Card holders.
	Target 99% - Number of beneficiaries accessing services
	versus the number who have registered a complaint in
	relation to access and/or quality.
	Maintain a schedule of services to meet the health care
	needs of DVA Health Card holders and maintain consistency
	with trends in the delivery of health care services.
	Target 99% - Number of listed services accessed versus the
	number of approved unlisted services.

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Existing Micro Level Indicators to be moved to the Dashboard	RAP removed entirely from performance framework.
Veterans Counselling/Allied Health	
Veteran Counselling within two weeks: 65%	Move micro level reporting to Dashboard
Level of satisfaction: High	
Travel (Remains)	
Target percentage of claims for reimbursement processed within the Service Charter timeframe (28 days) 100%	No change
Degree of complaints about arranged travel relative to the quality of bookings. 0.05%	No change
VVCS	
	VVCS access remains the same (65%)
	VVCS satisfaction set at 85%
Veterans Vocational Rehabilitation Service	
	50% of clients with successful Return To Work
Programme 2.6 MRCA	Programme 2.6
Quality: Error rates SRCA rehab assessments: < 5%	Medical Services move to 2.1-2.3 (Note: subject to
	discussion between Divisions in respect to distinguishing health costs across Acts and appropriations).
Quality: Error rates SRCA accounts: < 5%	

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Quality: Error rates MRCA rehab assessments: < 5%	Other services move to 2.4 (To be confirmed)
Quality: Error rates MRCA accounts paid incorrectly: < 5%	
SRCA/MRCA remains	SRCA/MRCA indicators remain as they were.
Programme 2.7	Programme 2.7
Does not have KPIs	Should not have PPIs
Outcome 3: Commemorations and War Graves	
Programme 3.1 War Graves and Commemorations	Programme 3.1
Maintenance of war cemeteries, memorials and graves is	Maintenance is undertaken in accordance with CWGC
undertaken in accordance with Commonwealth War Graves	published standards. Performance is measured through
Commission (CWGC) published standards. Performance is	periodic inspections.
measured through CWGC inspections and veteran and	
community feedback.	
Domestic commemorative events.	
High level of community and veteran satisfaction with	Events are delivered safely, on schedule, within budget and
commemorative events.	compliant with Disability Discrimination Act. Government is
	satisfied with quality. There are four events scheduled for
	this programme in 2015/16.

Existing Key Performance Indicators (KPIs)	Proposed Programme Performance Indicators
Programme 3.2 Gallipoli-related Activities	Programme 3.2
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Deliver commemorative and associated activities at	Events are delivered safely, on schedule, within budget and
Gallipoli.	compliant with Disability Discrimination Act. Government is
	satisfied with quality. There is one event scheduled for this
	programme in 2015/16.