



Performance Scorecard

Strategic Goals	Key Performance Measures (page references)	FY 2006 Recap		FY 2007 Recap					Measure Type
		Targets	Results	Targets	Results	Target Achieved?		Improved From FY 2006? Yes/No/Same	
						Yes	No		
Strategic Goal #1 RESTORATION AND IMPROVED QUALITY OF LIFE FOR DISABLED VETERANS	National accuracy rate for compensation core rating work (pp. 121, 204)	87%	88%	89%	88%*		No	Same	Outcome
	Compensation and pension rating-related actions — average days to process (pp. 119, 204)	185	177	160	183		No	No	Efficiency
	Rating-related compensation actions — average days pending (pp. 120, 204)	150	130	127	135		No	No	Output
	Vocational rehabilitation and employment rehabilitation rate (pp. 124, 206)	69%	73%	73%	73%	Yes		Same	Outcome
	Average days to process Dependency and Indemnity Compensation actions (pp. 127, 206)	120	136	125	132		No	Yes	Efficiency
Strategic Goal #2 SMOOTH TRANSITION TO CIVILIAN LIFE	Average days to complete education claims								
	- Original claims (pp. 134, 206)	27	40	35	32.4	Yes		Yes	Efficiency
	- Supplemental claims (pp. 134, 206)	13	40	15	13.2	Yes		Yes	Efficiency
Strategic Goal #3 HONORING, SERVING, AND MEMORIALIZING VETERANS	Percent of patients rating VA health care service as very good or excellent: - Inpatient - Outpatient (pp. 140, 208)	74% 73%	78% 78%	78% 78%	77%* 77%*		No No	No No	Outcome Outcome
	Percent of primary care appointments scheduled within 30 days of desired date (pp. 139, 208)	96%	96%	96%	97.2%*(a)	Yes		Yes	Outcome
	Percent of specialty care appointments scheduled within 30 days of desired date (pp. 139, 208)	93%	94%	95%	95%*(a)	Yes		Yes	Outcome
	Clinical Practice Guidelines Index II (pp. 138, 210)	77%	83%	84%	83%*		No	Same	Outcome
	Prevention Index III (pp. 138, 210)	88%	88%	88%	87%*		No	No	Outcome



Performance Scorecard

Strategic Goals	Key Performance Measures (page references)	FY 2006 Recap		FY 2007 Recap					Measure Type
		Targets	Results	Targets	Results	Target Achieved?		Improved From FY 2006? Yes/No/Same	
						Yes	No		
Strategic Goal #3 (continued) HONORING, SERVING, AND MEMORIALIZING VETERANS	Annual percent increase of non-institutional, long-term care average daily census (using 2006 as the baseline) (pp. 141, 212)	Baseline (43,325)		26.3%	6.5%*		No	N/A	Output
	Non-rating pension actions — average days to process (pp. 145, 212)	66	92	96	104		No	No	Efficiency
	National accuracy rate for pension authorization work (pp. 146, 214)	88%	88%	89%	91%*	Yes		Yes	Outcome
	Average number of days to process Traumatic Injury Protection Insurance disbursements (pp. 149, 214)	N/A	3.8	5	3.0	Yes		Yes	Efficiency
	Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence (pp. 153, 214)	81.6%	80.2%	83.8%	83.4%		No	Yes	Outcome
	Percent of respondents who rate the quality of service provided by the national cemeteries as excellent (pp.153, 216)	96%	94%	97%	94%		No	Same	Outcome
	Percent of graves in national cemeteries marked within 60 days of interment (pp. 157, 216)	90%	95%	90%	94%	Yes		No	Efficiency
	Foreclosure avoidance through servicing (FATS) ratio (pp. 161, 216)	47.0%	54.0%	51.0%	57.0%	Yes		Yes	Outcome
Strategic Goal #4 CONTRIBUTING TO THE NATION'S WELL-BEING	Progress towards development of one new treatment for post-traumatic stress disorder (5 milestones over 4 years) (pp. 167, 218)	60%	47%	67%	67%*	Yes		Yes	Outcome
	Percent of respondents who rate national cemetery appearance as excellent (pp. 176, 218)	99%	97%	99%	97%		No	Same	Outcome

* Indicates partial or estimated actual data.

(a) Office of Inspector General (OIG) reports dated July 2005 and September 2007 found reported outpatient waiting times to be unreliable because of data integrity concerns associated with VHA's scheduling system. The Under Secretary for Health non-concurred with this one OIG finding in the September 2007 report due to disagreements with the OIG's methodology. VHA has obtained the services of an expert consultant to perform a thorough analysis and assessment of its scheduling and wait times reporting system.