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Introduction

Performance measurement is the process of developing and using meaningful, objective indicators that can be systematically tracked to assess progress made in achieving predetermined goals. Only after the development of meaningful measures and matched with regular review and use is an organization able to move to performance management.

The performance measurement process requires ongoing data collection to determine if a program is implementing activities and achieving objectives. It typically measures resources used, activities performed, and results over time. The data are used to identify the difference between what customers and stakeholders expect and what programs deliver.

The development of meaningful performance measures is a critical component of the County’s budgeting process. Departments provide performance indicators as a part of their program offers. These measures are used by program managers. The County Chair reviews the results to assist with his evaluation of program offers. The Board uses the information to aid in their budget deliberations. Budget decisions are based on how well the program contributes to the County’s priorities, or long-term strategies, and what these programs promise to deliver.

Improving the program offer performance measurement system requires a high level of on-going commitment and effort for employees at all levels in the county. Included here are detailed instructions, examples, templates, exercises, and additional resources to improve upon the performance measurement section of program offers for FY 2009.

A Brief History of Performance Measurement in Multnomah County

The concept of performance measurement is not new to Multnomah County. Its importance has ebbed and flowed for the past 30 years. Below is a brief timeline of key accomplishments in performance measurement in Multnomah County:

In 1973, the Multnomah County Office of Planning, Evaluation, and Program Development created the Program Objectives Productivity System (POPS) producing a catalog which detailed the personnel, financial, and activities for the county’s 134 programs. The system explained activities but did not explain program outcomes or link them to greater strategic goals.

The 1990’s saw substantial growth in using performance measurement in the County with Board Resolution 90-45, which
developed an implementation plan for county-wide program evaluation. From this point, performance measurement grew to include the fundamental strategies of formal program evaluation.

In 1993, Program Performance Budgeting introduced Key Results reporting. A requirement in Key Results was for each service program to have one reportable measure, preferably some form of outcome. The data were published annually in the adopted budget.

From this effort grew a more comprehensive 1996 quality initiative—termed RESULTS—which matched annual performance measurement (Key Results), formal program evaluation, and continuous process improvement teams.

The initiative linked program performance with the identification of intermediate and long-term targets know as benchmarks. While this was the County’s first comprehensive data-driven decision making system, the process failed to integrate performance measurement data into the strategic planning and formal budgeting process. This was because the performance measurement process and reporting occurred after the formal budget construction, deliberation, and adoption.

In 2000, the Auditor’s Office began its Service Efforts and Accomplishments (SEA) reporting effort. This was designed to meet anticipated Government Accounting Standards Board (GASB) reporting requirements which provided more complete information about a government’s performance beyond the traditional financial statements. The report alternates publishing years between public safety and health and human services, reporting to the public useful data including outcomes on various services that Multnomah County delivers.

In 2003, performance measurement added real-time reporting with the introduction of the Safety Priority Brief, a monthly real-time report detailing the workloads at various key decision points in the criminal justice system. The report was designed to meet a lack of timely, accurate and on-going workload data delivered in an easy to understand format. This was followed in 2005 with the Basic Needs Priority Brief. Currently, a new Internal Accountability Brief focused on county-wide organizational health is in pre-release quality assurance stages. However, these reports were never designed to specifically focus on program outcomes.
Performance Measures & the Budget Process

Each of the previous efforts listed above moved Multnomah County closer to a system of timely, integrated results-based performance measurement within a planning and budgeting process. Lessons from each of these accomplishments were incorporated into the performance measurement system of the budget process we will use for FY 2009.

The overall goals of the FY 2009 budget process are to provide the following for Multnomah County:

- Strategic direction
- Fiscal stability
- Administrative and organizational stability
- A fair and inclusive process
- A framework for focusing on major policy decisions
- A communication tool

The FY 2009 budget will focus on the County’s core mission while investing in long-term system improvements and cost-effective innovations. Departments will be expected to create internal budget processes that emphasize departmental leadership and judgment, consideration of Board policy direction, employee involvement, and measurable results.

The performance measurement process does the following:

- Integrates performance reporting during the planning stages of the department’s program offer development;
- Requires that all program offers provide a variety of meaningful performance measures;
- Provides meaningful outcome measures that show a link to the program’s stated outcomes;
- Provides performance data at mid-year, allowing for timely course correction and future planning; and

Performance measures are important for a number of reasons, but overall they relate to accountability, whether it is to the Board, manager, staff or otherwise. Programs are being purchased with the taxpayers’ money, and the county has a responsibility to show the value in achieving results. Below are several specific reasons why performance measures are important:

- **Performance measures link to marquee indicators.** Marquee indicators are those high-level community measures specifically selected to reflect movement toward citizen-identified priorities. The County’s strategy maps contain 20 measures, roughly three for each priority area. The program offer measures developed by departments should attempt to align with the marquee indicators as directly as
Performance Measures & the Budget Process

possible. For example, one of the marquee indicators for the Safety Priority is “Percentage of adults and juveniles convicted of a crime who commit additional crimes (i.e. recidivism rates).” Measures for an offender job placement program that illustrate outcomes which reduce recidivism would be considered superior to measures that simply show how many offenders got jobs.

● **Performance measures help decision-makers refine strategies and improve results.** The use of performance measurement information helps in developing budgets and in setting overall performance goals for the county government. This is done through the allocation and prioritization of resources and by informing decision makers so they can either confirm or change current policy direction to meet those goals.

● **Performance measures help build community support for County programs.** Citizens are primarily interested in results or outcomes. An implicit aspect of a results oriented budget process is “justification” which is where performance measures provide a strong empirical and factual basis for programs and services that clearly deliver strong and measurable results. Without strong performance, especially outcome measures, programs run the risk of more intense public scrutiny and losing support from citizens and communities. Clearly specified performance measures can stimulate the public to take a greater interest in and provide more encouragement for government employees to provide quality services. They also help improve civic discourse and foster trust and public understanding of specific government service.

● **Performance measures help managers deliver expected results.** Having performance measures will increase attention to a program’s results. Managers often use performance measure to help identify problem and promising areas and track results over time. Applying performance measures to all programs fosters greater understanding, responsibility and accountability on the part of program managers since they are the ones who are responsible for attaining the program’s performance targets. Without that accountability, the measures will do little to improve performance. On the other hand, measures can be a manager’s tool to keep their focus and help achieve their desired results.

● **What gets measured gets managed; measures motivate!** The old adage that what gets measured gets managed is most important in motivating staff. Employees don’t want to feel as though their program’s performance is sub-standard and will rise to the challenge when presented with accurate performance information that shows opportunities for improvement.
Developing Performance Measures

Getting Prepared

All program offers must include a variety of performance measures. This includes administrative and support program offers, and also those programs referred to as “pass-through payments” programs. Many of the services the County purchases are actually provided by another outside agency, but there is still an interest in the results of those purchases.

Departments create their own program offers and are responsible for the accuracy of an offer’s narrative, financial and performance information. Considering the wide range of services/programs delivered by the county (e.g., elections, animal control, jails, health clinics, libraries, etc.), the type and number of measures required to be submitted with program offers have been designed to give as much flexibility to the departments as possible, while still retaining the standardization needed for thoughtful review and year-over-year comparison.

To do this, the development of each program offer’s performance measures must be coordinated with the program planning and offer submission. A program offer’s performance measures will benefit greatly when they are determined in conjunction with the program manager and staff, and the department’s analytical staff. The program’s manager and staff are important to include in the discussions about performance measures—they are the program experts. Their input and ultimate buy-in ensures that the data will be used. Analytical staff should include the department’s experienced finance and budget staff, and any knowledgably research or evaluation staff.

Logic Model

Adapted from: Mary Campbell’s ‘Driving Changes and Getting Results’
Developing Performance Measures

Developing Program Measures

Developing meaningful performance measures depends on understanding the County’s six priorities. Effective meaningful measures report what the program is trying to accomplish; where the resources come from and how they are allocated; the program’s main users, recipients, or clients; what activities are being performed; and what output and outcomes are expected. The following diagram shows a general program logic model for developing performance measures.

Measuring What Matters

It is important to measure what matters, not simply what is convenient. Jim Clemmer, a best selling author on performance management, once said: “Crude measures of the right things are better than precise measures of the wrong things.”

Thinking about what matters means considering what matters to whom. Some measures might matter to staff but not necessarily to the program’s customers, the Outcome Teams that review and rank program offers, or the Board which ultimately purchases programs. In selecting performance measures, consider the following questions:

- Who are the customers or beneficiaries (internal and external) of your program?
- What are the significant performance measures valued by these customers or beneficiaries (e.g., outcomes, timeliness, effectiveness, quality, satisfaction, etc.)?
- What performance standards would our customers, clients, Outcome Team members, Board of Commissioners, department managers, grantors, etc., like to see us achieve on these measures?
- How might management and program staff explain what the program accomplishes in numbers to someone on the street?
- How do you communicate that the program is doing better or worse than before?

The questions are about identifying who expects what results from the program/service offered and bringing their perspectives in the performance measure process.

As illustrated in the following chart, almost every program involves funders, managers and staff, service recipients, and the community in which the program operates. Their perspectives and expectations on performance should be considered when building a program’s performance measures. After identifying who matters, it’s then possible to focus on what matters to them and create measures that are meaningful. With careful thought there is likely to be agreement on what matters from the various groups’ perspectives.
Developing Performance Measures

Planning and Cooperation

Planning and cooperation are necessary for creating meaningful performance measures because a program’s description, budget determination, and service levels are highly interconnected. Expertise in each of these lies with various staff resources within the department. For example, an innovative/new program should define the goals; the delivery system and activities (managers and program staff expertise); the requested resources needed to accomplish the activities and results (budget and finance staff expertise); and the evaluation of program success (research and evaluation staff expertise).

An established program might have a reduction in, which in turn may reduce the service levels through lower volumes, longer processing times, or decreased customer satisfaction. This may ultimately lead to reengineering of the program. On the other hand, increased wait times or customer dissatisfaction may warrant increased funding needed to continue delivering services at the appropriate level. These interactions affect the variety and type of performance measures selected and their subsequent results.

Remember program offers should describe either a specific service population (elderly, youth, minorities, etc.) or a specific service being delivered (residential treatment, housing, nutrition services, etc.). Single offers that attempt to describe several service populations and various services being delivered are much more difficult to describe their result than if they were more than one offer.

Adapted from: Mary Campbell’s ‘Driving Changes and Getting Results’
Developing Performance Measures

Which Indicators Can Be Reported?

Input Indicators

Input (descriptive) indicators are designed to report the amount of resources such as financial, personnel, material, or other, that are available or have been used for a specific service or program. Financial and personnel data are the most common input measures. Since they are already reported in the revenue/expense and FTE detail sections, they should not be repeated in the Program Performance Measurement table. Departments may choose to report other program resources that are managed or consumed. The measure is helpful in illustrating the scope of work, but not the actual activities performed. The data are typically reported as numbers and not percentages.

Examples of Input Indicators

- number of client referrals
- number of fleet vehicles
- number of jail beds
- number of branch hours opened
- number of maintained centerline/ lane miles
- number of helpdesk covered PC terminals
- number of prosecution cases received
Developing Performance Measures

Output Indicators

Output (workload). This is the most common type of indicator found in most performance measurement systems and reports the number units produced or services provided by the program. It describes the activities that a program has completed, but not necessarily their results. It is common for programs to have more than one output indicator. The data are typically reported as numbers and not percentages.

Examples of Output Indicators
- number of treatment episodes delivered
- number of vehicle repairs performed
- number of client screenings provided
- number of purchase orders issued
- number of vaccinations given to children
- number of centerline/ lane miles resurfaced

Outcome Indicators

Outcome (results). This indicator is designed to report the results of the service. It can often be described as a short-term (e.g., successful treatment completion), intermediate term (e.g., success by 3 or 6 months), or long-term outcome (e.g., 1 year or more). There should be a logical connection from outputs to meaningful outcomes, with activities supporting the results in a sequential fashion. Whenever possible the outcome indicator should relate directly to one of the Priority’s Marquee Indicators. The data can be reported as either numbers, percentages (assuming percentages of the output), or rates (xxx per 1,000).

Examples of Outcome Indicators
- Percent reduction of juvenile recidivism
- Percentage of youth living independently at discharge
- Percentage of clients that reduced drug use at discharge (initial outcome)
- Percentage of clients drug-free at one year after discharge (long-term outcome)
- Reduction in incidents of disease (rates)
- Reduction in repeat calls for service

Note. Reporting “cases closed” (e.g., case management, addiction treatment, cases prosecuted, etc.) is not a meaningful outcome. Simply terminating services/ cases does not tell the reader what was accomplished by providing the service. Defining the nature of the service termination is a meaningful outcome.
Developing Performance Measures

Efficiency

Indicators

Efficiency (productivity). Efficiency measurement is a method for examining how effectively a program is performing the activities it is doing. This is an indicator that measures the cost of resources (e.g., in dollars, FTE, employee hours, time, etc.) per unit of output (e.g., per repair, per case, etc.).

Efficiency can also be qualified as a productivity measures. For example, where "vehicles repaired per labor hour" reflects efficiency, and "percentage of vehicles repaired properly" (e.g., not returned for rework within 6 months) reflects outcomes, "unit costs (or labor-hours) per proper vehicle repair" reflects productivity. The costs (or labor-hours) of faulty vehicle repairs as well as the costs of the proper repairs are included in the numerator of such a calculation, but only good repairs are counted in the denominator—thereby encouraging both efficiency and outcome by repair personnel.

Examples of Efficiency Indicators

- Cost per tax-lot appraisal
- Reports generated per analyst FTE
- Average number of days to close a case
- Cost per jail bed day
- Labor-hours per proper vehicle repair

Quality

Indicators

Quality. This measure reflects effectiveness in meeting the expectations of customers and stakeholders. Measures of quality include reliability, accuracy, courtesy, competence, responsiveness, and completeness associated with the product or service. Customer satisfaction reflects the degree to which the customer’s expectations of a service are met or exceeded. Lack of quality can also be measured. Such examples include rework, correcting errors, or resolving complaints.

Examples of Quality Indicators

- Percent of reports that are error free
- Percentage accuracy of information entered in a data system
- Percent of customers that rank service as exceeding their expectation (customer satisfaction)
- Percent of clients waitlisted more than a month for treatment
Developing Performance Measures

Using the Logic Modeling Template

After identifying the specific priority the program will be submitted to and considering the audience and what matters to whom, the next steps lie in determining the meaningful performance measures. Effective performance measures clearly identify relevant program resources, activities, outputs and meaningful outcomes. The easiest way to determine these is through program modeling.

A three-part modeling template is available in Appendix C. Part 1 develops the program logic model, Part 2 selects the performance measures and Part 3 details each of the measures. The template should be used to record information that is crucial to understanding how the measures were developed, how they were defined, and how data were collected. This information also helps with quality assurance, data analysis, and program offer evaluation in the next fiscal year.

Additionally, a new independent quality assurance process is being piloted this year. These templates—especially a copy of Part 3 for each measure—will be key components of the independent review process.

Why and How

Be prepared! Copies of a program offer’s templates may be requested by Outcome Teams and may be used as a part of the quality assurance pilot process. Board members may also request copies of these templates. Future web-tools may allow for direct entry of this information, but until then the Budget Office Evaluation staff recommends keeping final copies on file.

Part 1 is used to determine the basic program logic model and to brainstorm the variety and number of potentially meaningful measures. Think of it as a sandbox in which to play. Each section may generate multiple measures. Some of these measures may already be collected by the department, while others may need to be developed. Here are some questions that should be considered as the template is filled out:

1. Think about how a program links to the County’s Priority: what’s the purpose and goal of the program? Where on the Priority Map might it fall? Which part of the Request for Offers (RFO) is the program addressing?
2. List the program inputs such as funding, FTE, materials (e.g., PC’s, fleet vehicles, buildings, etc.)—these are the resources needed to accomplish the program’s goals.
3. Think about how the program works and how the service is delivered; briefly list the activities that lead to a product or service being delivered.
Developing Performance Measures

4. Identify program outputs; list what was accomplished (e.g., PC’s repaired, fleet vehicles maintained, cases managed, people served).

5. Identify the various outcomes (i.e., results) of the program: both the outcomes expected immediately after the service is delivered (i.e., short-term), the intermediate and the long-term outcomes expected for the clients/ customers who received service.

6. From the inputs, outputs, and outcomes consider efficiency indicators: how much does it cost in staff or dollars? How long it takes (hours or days) to get an output or outcome? Are there any efficiency mandates that need to be addressed?

7. Identify measures of service quality: is customer satisfaction measured? List any quality levels mandated.

8. Are benchmarks or industry standards available when considering measure options?

Part I: Logic Model Development

Program offers have space to report four measures in the performance measure table. After completing Part 1, it is likely there will be more measures than needed. Some will be less meaningful, some will be expensive to collect or maintain, difficult to understand, or downright wrong given the context. Part 2 of the template—Performance Measure Selection—narrows the results of Part 1 by identifying the most meaningful performance measures to report.
Developing Performance Measures

Part II:
Performance Measure Selection

Part 2 of the template includes a list of selection criteria to apply to each of the measures identified in Part 1. The selection criteria should be used to help narrow down the multiple measures and determine the most meaningful measure to report. A properly developed set of performance measures typically satisfy the following criteria:

- **Meaningful-Valid**: The key to assessing program performance is measuring the right things with the right measure. If a measurement fails to measure what was intended, then this measurement is not valid.

- **Consistent-Reliable**: The data used to generate the measurement must be consistently accurate and reliable. It is important that the collected data actually describe what is being measured. If other departments have similar services, can the same measure be applied universally (e.g., drug treatment services)?

- **Understandable-Clear**: Think about whether or not a measure is simple enough to be understood by people who are interested in the program. Keep it simple, and ask if it would pass the ‘Aunt Edna’ test.

- **Perverse Incentives**: Might the measure lead to behaviors that reduce quality or outcomes just so the “numbers look good”?
Developing Performance Measures

Making Changes to Established Measures

Following all the steps in the above sections should allow for the selection of consistent, reliable and meaningful program offers measures so that performance can be evaluated over time. However, even the best efforts to develop meaningful measures may not always result in good measures. Changes to established program performance measures typically occur for one of three reasons: 1) to fix an error in the performance measure definition or reported value, 2) to replace a poor measure with a better one, or 3) to stop reporting an established measure. Minor adjustments (e.g., spelling) that do not effect the measure do not need to be reported. Regardless of the reason, established programs are responsible to report the change and results for consistency, transparency and accountability.

There are several steps that need to be completed when making changes to established performance measures.

1. Identify and document the reason for the change. For example, was the logic model incomplete? Was the performance measure poorly documented last year in Part 3 Performance Measure Detail? Were the data impossible to retrieve? Were incorrect calculations of the values entered into the program offer last year? Was this a new better measure than what was existing?
2. Update the logic model so that future changes and mistakes are avoided; clarify definitions, calculations, and other areas that may lead to future mistake. Document these so that next year’s efforts have the proper documentation.
3. In the web-tool’s section entitled Performance Measures enter the program offer’s updated measure or changed values into the appropriate space in the table (see Data Entry and Submittal through Web Tool).
4. In the web-tool check the Measure Changed box.
5. Report the change
   a. If the change was a replacement of a poor measure with a better one, the replaced measure and its results must still be reported in the Significant Program Changes section (page 2 of the program offer) to allow for consistency, transparency and accountability (for this year only).
   b. If the change was to correct and error either in the definition clarity or any reported value a brief explanation should be given in the Significant Program Changes section (page 2 of the program offer) for this year only.
   c. If the program offer no longer reports an established measure, its results must still be reported in the Significant Program Changes section (page 2 of the program offer) for this year only.

These steps are necessary to ensure consistency, transparency and accountability in the program offer and the measures that are submitted for purchase.
Once the performance measures have been determined and the template has been filled out, the data can be entered into a program offer via the web-tool. The FY 2008 budget web tool will include a Performance Measures section for each program offer. The section standardizes the performance measure data entry into a table. This should make the data entry relatively easy, as well as simplifying future data retrieval. The web-tool has a two part section specifically for performance measures: 1) the quantitative table and 2) the qualitative explanatory section.

The quantitative table has space for four measures reporting the following data: the measure type, the measure definition, and cells for data for each year of performance and its numerical representations (i.e., number or percentage). Two of the measures are pre-determined as an output measure and an outcome measure. To offer the greatest amount of flexibility for the department, there are two additional slots.

Each measure includes cells for data entry. These cells have been relabeled this year to reduce confusion, however, this doesn’t change the value of the cell or what it represents. Cells are now labeled. They are ordered in a way to present historical results, most recent targets and performance estimates, and the program offer’s target if the program is purchased. The cells allow the reader to easily make a variety of comparisons, including whether the program is meeting its specified targets. In addition, the data will be collected and trended over time.
The FY 2007 Actual Result cells reflect the result of the last full fiscal year of service. In some cases, this data may not be available and may be left blank (e.g., innovative/ new program, reconstructed program, a new measure, or a revised measure). Nearly every established program should have historical data available for each measure.

The FY 2008 Purchased cell reflects the target service level for which the program is currently engaged. For example, if in last year’s offer the program’s target was to serve 250 clients, then the value in the FY 2008 Purchased should read 250. If your offer is an existing program, these values should be the same as last year’s program offer target (i.e., Next Year Offer). Most measures should include these data, although there will be some cases (e.g., new programs or new measures) where this data may not be available and can be left blank.

The FY 2008 Current Year Estimate cell gives an annualized estimate based on the most recent program data. In most cases, programs will have 6 months of current fiscal year data, which should be adjusted for the full year. This adjustment is based upon program staff observations and expertise, and the current year-to-date totals. These assumptions should be documented. This allows for comparison of current performance to the current year target. Additionally, this figure allows departments an opportunity to perform a mid-year review or course correction based on data.

The FY 2009 Target cell reflects the service level result the department is proposing for the upcoming fiscal year should the program be purchased. This service level might differ from the previous year’s service level, depending on service model or funding changes. For example, if a program’s costs increase while revenue remained unchanged, the expected service level may decline unless increases in efficiency are found. Every program offer must include data for this indicator. This field must not be blank.

**New!**
Entering Changes to Established Measures

If real changes (e.g., other than simple spelling errors) were made to existing measures or if previously existing measures are no longer to be reported in the future, the program offer must check the Measure Changed box. Program offers that are reconstructed will most likely have changes to their performance measures. Regardless the previous results must still be reported in the Significant Program Changes section (page 2 of the program offer) to allow for consistency, transparency and accountability for this year only.
Qualitative Explanatory Section

A qualitative explanatory section sits below the table and allows limited space to explain any issues with data anomalies, missing data, clarifications or changes to definitions, or other pertinent data-related issues. For example, if the program’s current year estimate is off target by more than 5% of what the program offer was originally supposed to deliver, a brief explanation should follow.

This section is not intended to be used to further define or qualify the performance measures. If the definition in the table is not clear to the reader, consider rewriting the definition.

It may also be beneficial to note whether a formal program evaluation, performance audit, independent assessment, or other quality assurance process has ever occurred for this program, and briefly the results.

Scaled Offers

Special attention should be given to scaled offers. Each scalable offer’s performance measures should report only those services that the scaled offer supports if purchased. For example, if the primary offer is for 10 residential beds, then the performance measure must reflect only those 10 beds. If the next scaled offer is for an additional 10 residential beds, then additional performance measures must reflect only those additional 10 beds, not the combined 20 beds.

If the scalable offer merely increases capacity like in the example above, the performance measure definitions should be the same as the base offer (e.g., drug treatment days, successful drug treatment completion rates, etc.). In cases where capacity is increased, especially in cases where a reduced caseload is part of the result, efficiency measures should be considered.

If the scalable offer adds a new service or features (e.g., 10 post-treatment alcohol and drug-free supported housing slots) the measures can differ for the base offer.

Entering the Performance Measures in the Web Tool

Below are the steps to fill out the web-tool:
1. Login to the web-tool and select the appropriate program offer.
2. To enter a new measure simply select the measurement type with the drop down box.
3. Enter the performance measure definition. This should be a simple and clear definition—technical language, acronyms and jargon should be avoided, but include them on Part 3 of the template. Symbols like $, %, or # are perfectly acceptable.
   a. If the measure is the same as last year, simply copy and paste the definition.
Developing Performance Measures

4. Enter the data into each cell (FY 2006 Actual Result, the FY 2007 Purchased amount, the FY 2007 Current Estimate, and the FY 2008 Target).
   a. Existing programs should take the last year’s purchase Target value and shift that value into the FY 2007 Purchased cell.
5. Select the percentage check-box ☑ if the data in the cells should be reported as percentages. You may also report values with a single decimal place.
6. Repeat the steps for the additional measures.
7. If any existing measures are changed or dropped, select the Measure Changed box ☑.
8. Enter any clarifying information into qualitative explanatory section.

Checklist Questions

The cycle of performance measurement development is not over after the initial web tool submission. The Chair’s Office will review the submitted program offer in detail, including their measures. The Chair’s Office and the Budget Office will review each program’s performance measures using following checklist of questions.

1. Does the program offer have measures related to the primary function of the program?
2. Are the measures related to the marquee indicators?
3. Does the program have true meaningful outcome measures?
4. Have established measures changed or been removed? If so, are the current results reported in the explanatory section, and have the significant changes box been selected?
5. Can the average reader understand what the program accomplishes numerically?
6. Are data missing in the table? If so, are reasons noted in the explanatory section?
7. Did the program meet or exceed its targets? If not, are reasons noted in the explanatory section?
Multstat

MultStat: Performance Management & Reporting

It is one thing to simply collect and report data, it’s another thing altogether to utilize that data to make decisions. This is the difference between performance measurement and performance management. Historically, Multnomah County, like many other jurisdictions, has fallen short of having an integrated process that utilizes the collected data in a pro-active way county-wide.

There is a strong perception that while data are collected and reported, they are not regularly used to manage programs or make operational changes. Additionally, there is little perception that decision makers at the highest level are using performance data. Staff suggested finding ways to integrate the measures in an on-going fashion, instead of just during budget development.

In response to these concerns the new administration has shown great interest in the development of an on-going performance reporting system. Performance management is the natural evolution of the budgeting process. Multnomah County’s new system is called MultStat.

Basic Process Principles

The goals of the MultStat process are to increase accountability and to expedite problem solving in order to improve the performance of government agencies and their service outcomes. MultStat is a structured continuous management process for ongoing review of government agencies’ performance indicators measuring use of available resources and delivery of services to the public, with a specific focus upon immediate results. The process is based on the four basic process principles of Compstat/ Citistat models:

1. Provide timely, accurate and relevant data,
2. Analyze data and develop effective solutions that respond to emerging issues,
3. Deploy resources quickly to address issues, and
4. Relentless follow-up and assessment.

The process for performance management is currently in development stages for some departments; others have begun monthly reporting. When reviewing, adjusting or developing measures for the program offers this year, program managers should keep in mind that these measures will be reported and reviewed by the new administration on a regular and on-going basis.

Multstat Web Site

Additional information will be provided as MultStat development continues. You can find more information on the Multstat page, here: http://www.co.multnomah.or.us/budgeteval
Performance Measurement Challenges

Performance Measure Challenges

Some limits exist to what types of information performance measures can actually capture. Typically these are limits one sees in cases where direct measurement is difficult or costly. Often however, measurement difficulties are due to unclear program results. Clarifying the program results will go a long way towards developing meaningful measures. Below are several common responses when applying performance measures.

- **You can’t measure what I do.** Areas previously thought to be “unmeasurable” such as prevention, education programs and even international relations have been shown to be measurable if someone is motivated and creative enough to pursue an innovative approach. Since so many jurisdictions have initiated performance measurement systems in recent years more information than ever exists for staff to reference (see Appendices for additional resources). In some cases even information may be limited to proxy measures or successive milestone measurement rather than traditional outcomes.

In some cases, the outcome of a program may not be realized for many years. In some cases, this can be addressed by identifying meaningful output-oriented milestones that will lead to achieving the long-term outcome goal. To address this issue, a program should define the specific initial and intermediate outcomes to accomplish the long-term outcome goal. These steps are likely to be output-oriented, prerequisite accomplishments on the path toward the outcome goal. It is important that these steps are meaningful to the program, measurable, and linked to the outcome goal.

- **The measures aren’t fair because I don’t have total control over the outcome or the impact.** It is the rare program that has total control over the outcome, but if programs can’t demonstrate any impact on the result, then why should the program be funded?

Often programs from various departments all contribute to achieving the same goal. The contribution of any one program may be relatively small or large. One approach to this situation is to develop broad, yet measurable, outcomes shared by a collection of programs, while also having program-specific performance goals.

- **It will invite unfair comparisons.** Comparison is going to happen whether programs invite it or not. But the program offer doesn’t stand only on it’s performance results. Clearly articulating the program’s target audience and services can help temper attempts at apples-to-oranges comparisons. Consider working with other programs of similar design to use the same measures.
Additionally, taking the initiative in selecting comparable organizations can help your program by proactively comparing performance, determining how well you are doing, and seeking ideas on how you can improve your performance.

- **Performance data will be used against the program.** Demonstrating transparency and accountability, even when the news is not so good, inspires trust, gives the program performance data street credibility, and shows that the departments understand their programs and the difficulty of providing social services. If programs are open about the need to improve, most people will give a program the benefit of the doubt as long as programs demonstrate improvement plans. Cynical manipulation of measures, for example selecting overly easy targets or ignoring relevant data, will likewise cause the Outcome Teams and other reviews to question motives and credibility and will lead to mistrust.

- **We don’t have the data/we can’t get the data.** Considering the investment the County has made in information technology, it is hard to believe that performance data are not available. Every manager of a program should be intimately familiar with their programs measures and performance. If a program is important enough to fund, staff should be able to find some way to collect data on its effectiveness. It can be as simple as a desktop spreadsheet using information collected from a hard-copy log. What is important is that critical indicators of success are identified and measured consistently and conscientiously.

- **We don’t have the staff resources to collect the data.** The reality is that administrative positions will not likely be added for performance measurement. Program managers should realize however that dedicating a small percent of their time to collecting data on thoughtful measures, and using the data to manage for results, will generally save more time than would be spent correcting problems down the road. Every manager of a program should be intimately familiar with their programs measures and performance.

- **How do I measure prevention.** Programs with a deterrence or prevention focus can be difficult to measure for a variety of reasons. Most importantly, deterrence measurement requires consideration of what would happen in the absence of the program. Also, it is often difficult to isolate the impact of the individual program on behavior that may be affected by multiple other factors. If performance measures reflect a continuum from lower-level outputs to higher-level outcome measures related to the overall goal, it is important for deterrence programs to choose measures that are far enough along the continuum that they tie to the Priority and Marquee Indicators as well as to the
Performance Measurement Challenges

program’s activity. This will help ensure that the measures are both meaningful and genuinely affected by the program.

- Programs where failure is not an option. For programs where failure to prevent a negative outcome would be catastrophic such as programs to prevent terrorism or a pandemic disease outbreak, traditional outcome measurement might lead to an “all-or-nothing” goal. As long as the negative outcome is prevented, the program might be considered successful, regardless of the costs incurred in prevention or any close calls experienced. In these cases, proxy measures can be used to determine how well the deterrence process is functioning. These proxy measures should be closely tied to the outcome, and the program should be able to demonstrate how the proxies tie to the eventual outcome. Because of the risk, multiple proxy measures should be used. Failure in any one of the safeguards would be indicative of the risk of an overall failure.

- Isn’t this just Key Results? Interviews with multiple county staff and reviews of independent analyses of performance measurement in Multnomah County determined several reasons why Key Results fell into disuse. The current system and process have been specifically designed avoid these pitfalls.

1. The Key Results data were never integrated in the strategic planning and budget process; data came after the fact, too late for department planning and budgeting.
2. Trainings and continuous education did not continue after the initial investment into Key Results.
3. There were no administrative champions for Key Results.
4. Key Results typically consisted of a single measure which did not provide enough information to effectively describe a program’s performance.
5. Key Results definitions were not clear enough or relevant enough to staff or the public.
6. Management, staff and the Board didn’t always see the value of Key Results.
7. There was no leverage with the Key Results Measures; if the measure was bad, or if the data were missing it had no impact upon whether the program was funded.
8. Outcome measures were stressed but most Key Results were output measures.
9. Management and staff didn’t develop or use measures that were useful program performance indicators.
10. There were few quality assurance steps integrated into the development or reporting of Key Results.
Performance Measurement Challenges

Quality, Training & Resources

The Budget Office Evaluation staff are available to provide performance measurement training, assistance in measure development, and as a source of historical measurement and best practice knowledge. Some departments do not have formal evaluation units or specialized staff. In these cases, the Budget Office Evaluation staff will provide additional measurement development assistance. Regardless, every program offer must provide performance data.

Budget Office Evaluation staff are available so that department staff can receive individualized attention via phone, email, or in person.

Special Thanks

This revised manual was developed based on a multitude of performance measurement source information. The information was adapted specifically for the Multnomah County’s Priority-Based Budgeting process. Budget Office Evaluation staff would be remiss if we did not specifically acknowledge the following sources: We can’t measure what we do: Measuring what matters in the public sector by Mary Campbell; Fairfax County manages for results by Fairfax County Performance Measurement Team; Performance Measurement Challenges and Strategies by the White House Office of Management and Budget; and Not a Tool Kit by the Institute of Governance Ottawa Canada. Other sources that were used are listed in the Appendices.

Additional thanks are extended to the many past and present county employees that offered for feedback and input into this initiative and manual.
APPENDIX A: Glossary

Accuracy: the degree of conformity with a standard value (the "truth"). Accuracy relates to the quality of a result, and is distinguished from precision, which relates to the quality of the operation by which the result is obtained. The smaller the difference between the measurement and the standard value the greater the accuracy.

Baseline Data: Initial collection of data to establish a basis for future comparison, evaluation and target setting.

Benchmark: A standard or point of reference used in measuring and/or judging quality or value.

Best Practice: Superior performance with an activity, regardless of industry, leadership, management, or operational approaches; methods that lead to exceptional performance. Synonyms include best-known-methods (BKM) or evidence-based practices.

Compstat/ Citistat (aka STATS): A management and accountability tool that follows four basic process principles: 1) provide timely, accurate and relevant data; 2) analyze data and develop effective solutions that respond to emerging issues; 3) deploy resources quickly to address issues; and 4) relentless follow-up and assessment.

Continuous Improvement: on-going, incremental and measurable steps taken to enhance service delivery by improving efficiency and/or effectiveness.

Course Correction (Corrective Action): Action taken to rectify conditions adverse to quality and, where necessary, to preclude repetition.

Customer: The person or group that established the requirements of a process and receives or uses the outputs of that process, or the person or entity directly served by the organization.

Customer satisfaction: Reflects the degree to which a recipient’s experience with a desired service meets or exceeds their expectation. For purposes of priority-based budgeting, customer satisfaction measures should be primarily considered quality measures.

Data: Information or a set of facts presented in descriptive form.

Data Collection System: A broadly defined term indicating that a set of equipment, log books, data sheets, and personnel used to record and store the information required to generate the performance measurement of a process.

Design Team: A review body that includes representatives from each elected officials’ office, the Budget Office, and department representation that recommend internal and external budget decision-making process steps, and a communication plan for the Board.

Efficiency: A process characteristic indicating the degree to which the process produces the required output at minimum cost.
APPENDIX A: Glossary

Efficiency measure: An output or outcome relative to a unit of time, money or other input.

Factor: Also called a causal factor is an important contributor to a result; provides one cause-effect link to a result within a results map.

Feedback Loop: A systematic series of steps for maintaining conformance to quality goals by feeding back performance data for evaluation and corrective action. This is the basic mechanism for quality control.

Frequency: One of the components of a performance measurement that indicates how often the measurement is made.

GASB: Governmental Accounting Standards Board (GASB) establishes and improves standards of state and local governmental accounting and external financial reporting.

Goal: Broad statement describing desired outcomes, but more specific than an agency’s mission; they support the mission and identify specific strategies or opportunities for an agency to accomplish in order to achieve its mission.

High-level outcome: A measurable indicator of societal well-being—marquee indicators are a select number of high-level outcomes. Agencies and departments can define additional high-level outcomes pertinent to their organizational mission.

Indicator (measure/metric): A quantifiable unit that provides information regarding the volume, financial performance, service quality, or results of a service which allows an observer to know whether performance is in line, ahead of, or behind expectations.

Initial outcome: A measure of desired result that represents a contribution to achieving a high-level outcome target examined shortly after service delivery.

Input: A measure of financial and non-financial (e.g., time, staff, etc.) resources. For the purposes of performance measures, staff and dollars should not be reported as inputs (these are covered elsewhere in the program offer).

Intermediate outcome: A measure of a desired result that represents a contribution to achieving a high-level outcome target.

Key Results: A single specific performance measures for each program from the 1996 RESULTS initiative.

Logic Model: A process presenting the relationship between inputs, activities, outputs and outcomes to describes the sequence of events for bringing about change.

Meaningful Measures: Performance indicators that directly, accurately and reliably assess a program’s attributes, which can be readily understood.
APPENDIX A: Glossary

Marquee Indicator: One of a select group high-level community or social indicators related to a specific Priority area.

Mission: A short, comprehensive description of why an organization exists. It succinctly identifies what an organization does (or should do), and for who it does it.

Outcome: A measure of a desired result. In many cases, outcomes measure the result or impact of an output or set of outputs, and can be examined initially after service delivery or at longer intervals.

Outcome Teams: A group of various experts that staff one of the six county priority areas who are responsible for developing requests for offers, requesting program offers, reviewing their content, and ranking how much contribution each offer has in it intended results. The goal of this work is to create better program offers from which the Board will purchase.

Output: A measure of amount or frequency of products or services delivered.

Performance Management: The use of performance measurement information to help set performance goals; allocate and prioritize resources; inform managers to either confirm or change current policy or program direction to meet those goals; and report on the success of meeting those goals.

Performance Measurement: A process of assessing progress towards achieving predetermined goals, including information on the efficiency with which resources are transformed into goods and services (outputs); the quality of those outputs, i.e. how well they are delivered to customers and the extent to which customers are satisfied (service quality); and the qualitative results of a program activity compared to its intended purpose (outcome).

Plan, Do, Measure Cycle: A continuous process of steps for maintaining conformance to planning goals by feeding back performance data for evaluation and corrective action after activities have occurred.

Priority (budget priority): Represent six categories of citizen directed county government services, that include Basic Living Needs, Safety, Accountability, Education, Thriving Economy, and Vibrant Communities.

Priority Briefs: Monthly performance summaries that report workload data for the Safety and Basic Needs Priority areas.

Process: Any activity or group of activities that takes an input, adds value to it, and provides an output to a customer. The logical organization of people, resources, and procedures into work activities designed to produce a specified end result (work product).

Productivity: A measure of the value added by the outcome/result divided by the value of the labor and capital consumed.
APPENDIX A: Glossary

Program Modeling: Systematic process to identify a service’s resources, activities and service population, output, and results. See Logic Model.

Quality: The degree to which a product or service meets the customer requirements and expectations. Customer satisfaction is a specific measure of quality.

Quality Assurance: A process for the systematic monitoring and evaluation of the various aspects of data, measures, or results to ensure that standards are being met.

Reengineering: A process of rethinking and redesigning work processes to achieve noticeable improvements in service delivery responsive to customer needs and/or achieve significant reductions in cost.

Request for Offers: A process where Outcome Teams ask departments to submit program offers which are designed to respond to specific strategies outlined by the Outcome Team.

Results Map: Different from a strategy map, the results map shows only the results to be achieved and the main factors that influence those results.

Service Efforts and Accomplishments: A performance measure reporting mechanism for state and local governments that provides both financial and non-financial performance data necessary for assessing accountability and in making informed decisions.

Strategy: A set of actions chosen by an organization to achieve a result. A strategy is based on an understanding of (or assumptions about) the cause – effect connection between specific actions and specific results.

Strategy Maps (Priority Maps): A visual representation of the pathway to the result. Using words or images, it helps viewers understand the cause-effect connection between actions or factors and the result.

Strategic Planning: A continuous and systematic process whereby an organization makes decisions about its future, develops the necessary procedures and operations to achieve that future, and determines how success is to be measured.

SWOT Analysis: Strength, weakness, opportunity, and threat analysis. An organization’s self-assessment of its strengths and weaknesses (internal factors) as well as opportunities and threats (external factors).

Target: A program offer’s state level of output and result.

Template: A document tool with a preset format used as a starting point for the development of the program logic-model and performance measurement selection.

Verification (validation): The determination than an improvement action has been implemented as designed.
APPENDIX A: Glossary

Vision: A description of what and where an organization wants to be in the future.

Web-tool: An internet-based program offer input template for use with the Multnomah County Priority-Based Budgeting Process.
APPENDIX B: Additional Resources

The following lists additional resources, many of which were used in the development of this manual. This symbol ☐ denotes material in the Budget Office Evaluation library available for check-out. Recommended source materials are denoted with this symbol ☑.


APPENDIX B: Additional Resources


A manual for performance measurement Fairfax County (measures up 8th Ed.)/ by the Performance Measurement Team of the Department of Management and Budget. Fairfax County, Va. 2005.


APPENDIX B: Additional Resources


Performance budgeting in municipal governments / by Janet M. Kelly and William C. Rivenbark. Last accessed 11/07/05
http://web.pdx.edu/~stipakb/download/PerfMeasures/PerfBudgetingInMunicGovt.doc


APPENDIX B: Additional Resources


APPENDIX B: Additional Resources


Program performance measurement resource guide / prepared by The Innovation Groups Inc. -- Tampa, Fla.: Innovation Groups, Nov 1990.


Service efforts and accomplishments reporting: an overview / Harry P. Hatry et al.; Governmental Accounting Standards Board -- Norwalk, Conn.: Govt. Accounting Standards Board, 1990.


APPENDIX B: Additional Resources

We can’t measure what we do: Measuring what matters in the public sector / by Mary Campbell. From Driving Changes and Getting Results—Bellevue, Wa.: Washington Governor’s Office, 2005.

APPENDIX C: Online Resources

(Resources adapted from Mark Abrahams of the Abrahams Group)

**Resources**

Alfred P. Sloan Foundation, Performance Assessment of Municipal Governments Program  


GFOA Recommended Practice on Measuring the Costs of Government Services  

GFOA Best Practices in Public Budgeting  
http://www.gfoa.org/services/nacslb

ICMA Center for Performance Management  
http://www.icma.org/main/topic.asp?tpid=18&hsid=1&t=0

Portland Multnomah Progress Board  
http://www.portlandonline.com/auditor/?c=27347

**Cities**

City of Albuquerque Progress Report  
http://www.cabq.gov/progress/index.html

City of Ankeny, IA, Service Efforts and Accomplishments Report  
http://www.ci.ankeny.ia.us

City of Austin, Scorecard  
http://www.ci.austin.tx.us/budget/

City of Baltimore, MD.  
http://www.ci.baltimore.md.us/news/citistat/reports.html

City of Bellevue, WA  

City of Charlotte’s Citizen’s Annual Report  
http://www.charmeck.org/Departments/City+Manager/Annual+Report/Home.htm

City of Des Moines, Performance Measurement System  
http://www.ci.des-moines.ia.us/performance.htm

City of Kansas City (MO), City Auditors Report  
http://www.kcmo.org/auditor/annualreports/06annualreport.pdf

City of Lynnwood WA, Accountability Report  
APPENDIX C: Online Resources

City of Palo Alto CA, Service Efforts and Accomplishments Report
http://www.city.palo-alto.ca.us/auditor/ServiceEffortsandAccomplishments.html

City of Philadelphia, Mayor’s Report on City Services

City of Phoenix, City Manager’s Executive Report
http://www.ci.phoenix.az.us/MGRREPT/index.html

City of Portland (OR), Service Efforts and Accomplishments Report
http://www.portlandonline.com/shared/cfm/image.cfm?id=33651

City of San Diego, Service Efforts and Accomplishments Report

City of San Jose, City Service Area Performance Report

City of Seattle, Performance Perspectives

City of Winston Salem, Citizen Efficiency Review Committee Reports
http://www.ci.winston-salem.nc.us/ooe/frpt.htm

**Counties**

Clark County, 2003 Annual Performance Report
http://www.co.clark.nv.us/Public_communications/Performance_Report_2003/index_2003.htm

King County, WA Department of Natural Resources and Parks:

Maricopa County AZ, Performance Report

Prince William County (VA) Service Efforts and Accomplishments Report

County of San Mateo, CA, Indicators for a Sustainable San Mateo County
http://www.sustainablesanmateo.org/

**States**

Arizona, Managing for Results http://www.ospb.state.az.us/handbook.htm

APPENDIX C: Online Resources

Illinois Public Accountability Reporting  
http://www.ioc.state.il.us/Office/PAP/reports.cfm

Illinois, Performance Audits  http://www.state.il.us/auditor/special.htm

Iowa, Managing for Results http://www.resultsiowa.org/

Maine Marks  http://www.mainemarks.org/indicators/indi_main.htm


New Mexico Department of Transportation, Strategic Plan and Performance Report  

Oklahoma Health Care Authority, Strategic Plan and Performance Report  
http://www.okhca.org/reports/PDFlib стратегический_план_2006.pdf

Oregon Benchmarks  http://egov.oregon.gov/DAS/OPB/obm.shtm

Oregon Commission on Children and Families, Outcomes and Accountability  

Oregon Department of Human Services, Annual Performance Report  

Rhode Island, Performance Measures  http://www.budget.state.ri.us/measures.htm

Texas School Performance Review  
http://www.window.state.tx.us/tspr/

Utah, Summary of Goals and Key Performance Measures  

Virginia Review of Performance Measures  
http://www.apa.state.va.us/data/download/reports/audit_local/PerfMeas02.pdf

Washington Department of Transportation, Measures, Markers, and Mileposts  
http://www.wsdot.wa.gov/accountability/graynotebook.pdf
APPENDIX D: Templates

PART 1: LOGIC MODEL DEVELOPMENT

PRIMARY PROGRAM GOALS (WHAT WILL IT ACCOMPLISH)?

STRATEGIES/ RFO’S ADDRESSED?

LIST INPUTS (PROGRAM RESOURCES)

LIST ACTIVITIES (SERVICES)

LIST OUTPUTS (WORK DONE)

LIST OUTCOMES (SHORT-TERM, INTERMEDIATE, LONG-TERM)

LIST QUALITY (SATISFACTION)

LIST EFFICIENCY (PRODUCTIVITY)
PART 2: PERFORMANCE MEASURE SELECTION

**Marquee Indicator Link**
<identify the indicator>

**Primary Program Goals (What will it accomplish)?**

**Strategies/RFO’s addressed?**

**Selection Criteria:**
- Meaningful-Valid
- Constant- Reliable
- Understandable-Clear
- Perverse Incentives
- Timely/ Monthly Reporting
- Comprehensive
- Not Redundant
- Cost to Collect Data
- Focused on Controllable Facets of Performance

**Checklist Questions:**
- Does the program offer have measures related to the primary function of the program?
- Are the measures related to the marquee indicators?
- Does the program have true outcome measures?
- Can the average reader understand what the program accomplishes numerically?
- Are data missing in the table? If so, is it referenced in the explanatory section.
- Did existing measures change?
- Did the program meet or exceed its targets? If not, is it referenced in the explanatory section?
## APPENDIX D: Templates

### PART 3: PERFORMANCE MEASURE DETAIL

After choosing the performance measures in Part 2, use this template to document the detail behind your performance measure. This will allow for the recreation of accurate, reliable and consistent measures in the future. Every measure used reported in a program offer must have this level of detail.

**Technical Definition:**

**Definition as it appears in Program Offer:**

**Why Use This Measure?** (What does this measure provide?)

**Unit of Measure:** (How should the result of measurement be expressed?) (Percentage, minutes, dollars, children served, rates?)

**Data Source and Calculation Method:** (Formula or process for calculating measure)

**Current Year Estimates:** (How are current year estimates calculated?)

**Contact Person:** (Individual responsible for data/extension)  **Date:**