

| #  | Goal  | Strategy No. | Strategy Description   | Lead Agency | Metric  | Baseline           | Q1      | Q2 | Q3 | Q4 | Annual (Data, Sum, or Average) |
|----|---|--------------|--|-------------|---|--------------------|---------|----|----|----|--------------------------------|
| 1  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.1        | Increase and preserve the number of affordable housing units that are ready to purchase or rent              | DHCD        | 1.1.1.a Number of new District assisted affordable housing units that come online ready for purchase or rental (higher is better)* *Housing Production Trust Fund allocations may vary year to year.                                | 584 (FY23)         | 8       |    |    |    |                                |
| 2  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.1        | Increase and preserve the number of affordable housing units that are ready to purchase or rent              | DHCD        | 1.1.1.b Number of inclusionary zoning units available for occupancy (higher is better)  | 365 (FY22)         | 61      |    |    |    |                                |
| 3  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.1        | Increase and preserve the number of affordable housing units that are ready to purchase or rent              | DHCD        | 1.1.1.c Number of SFRRP Projects completed (higher is better)   | 66 (FY22)          | 7       |    |    |    |                                |
| 4  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.2        | Increase number of affordable, accessible housing units ready to rent  | DCHA        | 1.1.2.a Number of DCHA owned units that meet or exceed either UFAS or ADA 2010 ADAAG Standards (higher is better)   | 529 (FY23)         | Pending |    |    |    |                                |
| 5  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.2        | Increase number of affordable, accessible housing units ready to rent  | DCHA        | 1.1.2.b Percentage of all affordable public housing units that must meet UFAS standards (higher is better)  | 5% (FY23)          | Pending |    |    |    |                                |
| 6  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.3        | Increase number of people with mental health disabilities provided a voucher or placed in the community      | DBH         | 1.1.3.a Number of people with "Severe and Persistent Mental Illness" (SPMI) provided a voucher vs. capacity (higher is better)  | 989 / 1,088 (FY23) | 1       |    |    |    |                                |
| 7  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.3        | Increase number of people with mental health disabilities provided a voucher or placed in the community      | DBH         | 1.1.3.b Number of people with "Severe and Persistent Mental Illness" (SPMI) placed in a Community Residential Facility (CRF) vs capacity (higher is better) (Includes new admissions and not administrative transfers between CRFs) | 600 / 614 (FY23)   | 18      |    |    |    |                                |
| 8  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.3        | Increase number of people with mental health disabilities provided a voucher or placed in the community      | DBH         | 1.1.3.c Number of people with "Severe and Persistent Mental Illness" (SPMI) integrated into the community from a CRF into independent living with a voucher (higher is better)  | 2 (FY23)           | 0       |    |    |    |                                |
| 9  | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.4        | Increase the number of DBH clients who maintain independent, community-based housing for 12 months or longer | DBH         | 1.1.4.a Number of DBH clients who maintain independent, community-based housing for 12 months or longer (higher is better)  | 719 (FY23)         | 700     |    |    |    |                                |
| 10 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.4        | Increase the number of DBH clients who maintain independent, community-based housing for 12 months or longer | DBH         | 1.1.4.b DBH will maintain an 80% or greater occupancy rate within its subsidized housing program (higher is better)   | 94% (FY23)         | Annual  |    |    |    |                                |
| 11 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.4        | Increase the number of DBH clients who maintain independent, community-based housing for 12 months or longer | DBH         | 1.1.4.c 80% of DBH clients in subsidized housing received services within the last 120 days from a Core Service Agency (CSA) (higher is better)   | 83% (FY23)         | 65%     |    |    |    |                                |
| 12 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5        | Increase number of people with a disability housed with a DCHA voucher                                       | DHS         | 1.1.5.a Number of persons with a disability who were housed with a DCHA voucher through a DHS program (PSH and TAH) (higher is better)  | 661 (FY23)         | 491     |    |    |    |                                |

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| 13 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5 | Increase number of people with a disability housed with a DCHA voucher   | DHS  | 1.1.5.b Number of youth with a disability who have received services (YSA)  | 297 (FY23)                                 | 334                         |  |  |  |
| 14 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5 | Increase number of people with a disability housed with a DCHA voucher   | DHS  | 1.1.5.c Number of families with a disability who were housed with a time-limited housing subsidy (FRSP) (higher is better)                                | 2,366 (FY23)                               | 421                         |  |  |  |
| 15 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5 | Increase number of people with a disability housed with a DCHA voucher   | DHS  | 1.1.5.d Number of persons with a disability who were housed with a time-limited housing subsidy (higher is better)  | 32 (FY23)                                  | 14                          |  |  |  |
| 16 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5 | Increase number of people (adult families) with a disability and PSH voucher in "Bridge Housing" waiting to move into a unit | DHS  | 1.1.5.e Number of persons with a disability who will be housed with a PSH Voucher, placed in "Bridge Housing"   | No baseline data                           | 30                          |  |  |  |
| 17 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.5 | Increase number of people with a disability who are employed in the "work bed" program living in "Bridge Housing"            | DHS  | 1.1.5.f Number of persons with a disability who will be housed with a PSH Voucher and in the "work bed" program placed in "Bridge Housing"                | No baseline data                           | Program is no longer active |  |  |  |
| 18 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.6 | Increase number of individuals discharged from psychiatric facilities to a community placement                               | DBH  | 1.1.6.a Number of individuals discharged from St. Elizabeths with a voucher (higher is better)  | 3 (FY23)                                   | 0                           |  |  |  |
| 19 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.6 | Increase number of individuals discharged from psychiatric facilities to a community placement                               | DBH  | 1.1.6.b Number of people discharged from St. Elizabeths into community housing (higher is better)   | 152 = 167 (KPI 2.7) - 15 (KPI 2.32) (FY23) | 56                          |  |  |  |
| 20 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.6 | Increase number of individuals discharged from psychiatric facilities to a community placement                               | DBH  | 1.1.6.c Percentage of youth discharged from PRTF quarterly to community-based setting (higher is better)  | 15 (FY23)                                  | 2/5=40%                     |  |  |  |
| 21 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.7 | Increase number of individuals with mental health disabilities provided a voucher who were homeless                          | DBH  | Number of individuals with "Severe and Persistent Mental Illness" (SPMI) provided a voucher who were homeless (higher is better)                          | 14   | 0                           |  |  |  |
| 22 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.8 | Increase number of individuals transitioning out of nursing facilities into home and community-based settings                | DACL | 1.1.8.a Number of referrals from nursing facilities (higher is better)  | 250 (FY23)                                 | 158                         |  |  |  |
| 23 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.8 | Increase number of individuals transitioning out of nursing facilities into home and community-based settings                | DACL | 1.1.8.b Number of clients currently in the pipeline (meaning in the process of transitioning from a nursing facility to the community) (higher is better) | 341 (FY21) 437 (FY22) 409 (FY23)           | 633                         |  |  |  |
| 24 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.8 | Increase number of individuals transitioning out of nursing facilities into home and community-based setting                 | DACL | 1.1.8.c Number of nursing facility transition team clients transitioned from nursing facilities into the community (higher is better)                     | 118 (FY23)                                 | 31                          |  |  |  |
| 25 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.8 | Increase number of individuals transitioning out of nursing facilities into home and community-based setting                 | DACL | 1.1.8.d Number of community transition team cases closed (higher is better)   | 121 (FY23)                                 | 28                          |  |  |  |
| 26 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.8 | Increase number of individuals transitioning out of nursing facilities into home and community-based setting                 | DHCF | 1.1.8.e Number of District residents enrolled in Medicaid Assisted Living Programs (higher is better)   | 240 (FY23)                                 | Annual Measure              |  |  |  |

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| 27 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.9 | Increase re-entry services to connect returning citizens with a disability to community housing                          | DOC  | 1.1.9.a Percent reduction in the 12-month rate of return to DOC of Re-Entry program participants with a disability (annual measure) (higher is better)  | 30.30% (FY23)   | Annual Measure   |  |  |  |  |
| 28 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.9 | Increase re-entry services to connect returning citizens with a disability to community housing                          | DOC  | 1.1.9.b Percent reduction in the 12-month rate of return to DOC of RSAT program participants with a disability (annual measure) (higher is better)  | 76.30% (FY23)   | Annual Measure   |  |  |  |  |
| 29 | 1.1 Increase access to and opportunities for affordable, fully accessible, community integrated housing for people with disabilities. | 1.1.9 | Increase re-entry services to connect returning citizens with a disability to community housing                          | DOC  | 1.1.9.c Number of residents with a disability actively receiving READY Center services on bi-annual basis (higher is better)  | 1,728 at DOC, 545 returning from Federal Bureau of Prisons (BOP) (FY23) | The READY Center served 668 individuals returning from DOC and 319 from FBOP. Of these 39 had disabilities.  |  |  |  |  |
| 30 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.1 | Decrease timeframe between time person is ready for discharge from St. Elizabeths and date of placement in the community | DBH  | Average number of days between time person is ready for discharge from St. Elizabeths and date of placement in the community (lower is better)  | 12 (FY23)   | 51.63  |  |  |  |  |
| 31 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.2 | Decrease timeframe for discharge from a nursing facility   | DHCF | 1.2.2.a Average number of days between DACL referral and Long-Term Care Supports and Services (LTSS) assessment (lower is better)   | No baseline data  | This measure has not been finalized by DHCF/DACL - a consensus is yet to be determined. To address Olmstead/Brown v. DC, LTCA is currently finalizing a reporting manual that will include the proposed methodology for capturing this metric. |  |  |  |  |
| 32 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.2 | Decrease timeframe for discharge from a nursing facility   | DACL | 1.2.2.b Average days to transition (for clients who do not have housing to return to) (lower is better)   | 282.75 (FY23)   | 456  |  |  |  |  |
| 33 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.2 | Decrease timeframe for discharge from a nursing facility   | DACL | 1.2.2.c Average days to transition (for clients who have housing to return to) (lower is better)  | 282.8 (FY23)  | 294  |  |  |  |  |
| 34 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.2 | Decrease timeframe for discharge from a nursing facility   | DHCF | 1.2.2.d Number of people enrolled in the Medicaid transition code that establishes eligibility for the Elderly and persons with Physical Disabilities waiver before discharged from the nursing home (higher is better)             | 61 (FY23)   | 0 (Note we no longer use the 383 transition code)  |  |  |  |  |
| 35 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.3 | Decrease timeframe for EPD Waiver enrollment   | DHCF | Average number of days between assessment and receipt of Long-term Care Services and Supports (LTSS) in an approved Person-Centered Service Plan (PCSP) (lower is better)   | No baseline data  | This measure has not been finalized by DHCF/DACL - a consensus is yet to be determined. To address Olmstead/Brown v. DC, LTCA is currently finalizing a reporting manual that will include the proposed methodology for capturing this metric. |  |  |  |  |
| 36 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.4 | Increase DACL transition capacity  | DHCF | Number of people directly transitioned to Medicaid Home and Community-Based Services without DC Aging and Disability Resource Center transition assistance after a 90+ day stay in a nursing facility or hospital (lower is better) | 55 (FY23)   | 1  |  |  |  |  |
| 37 | 1.2 Improve transitions from institutions to community-based housing  | 1.2.5 | Increase DACL transition quality through training  | DACL | Percentage of transition unit staff who complete transition assistance training (higher is better)  | No baseline data  | 100%   |  |  |  |  |

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| 38 | 1.3 Increase inclusion and independence of people with disabilities through integrating advanced technology solutions for assistive technology and remote supports | 1.3.1 | Increase the number of Safe At Home adaptations performed   | DACL | Number of Safe at Home adaptations performed (higher is better)   | 1,027 (FY23)                                 | 126     |  |  |  |  |
| 39 | 1.3 Increase inclusion and independence of people with disabilities through integrating advanced technology solutions for assistive technology and remote supports | 1.3.2 | Increase awareness of and participation in Library by Mail services, through targeted outreach and an increase in District residents with disabilities who are active users | DCPL | Number of District residents with disabilities who use the service at least once a year   | 27 (Active as of 10/28/24); 38 as of 12/1/25 | 38      |  |  |  |  |
| 40 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.1 | Increase the number of Individual Service Plans completed before the required date  | DDS  | Percent of Individual Support Plans (ISP) that are completed (meaning in place) before the Individual Support Plan effective date (higher is better)  | 99% (FY23)                                   | 96%     |  |  |  |  |
| 41 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.2 | Increase the number of Level Of Need assessments completed before Individual Service Plan meetings  | DDS  | Percent of People with a Level of Need (LON) assessment completed before the individual Support Plan meeting date (higher is better)  | 95% (FY23)                                   | 99%     |  |  |  |  |
| 42 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.3 | Decrease the number of days to complete an initial Individual Service Plan  | DDS  | Median Number of Calendar Days from eligibility decision to completing the Initial Individual Support Plan (lower is better)  | 59 (FY23)                                    | 48 Days |  |  |  |  |
| 43 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.4 | Increase the percentage of healthcare management plans that meet published standards  | DDS  | Percentage of Healthcare Management Plans that meet published standards (higher is better)  | 95.2% (FY23)                                 | 98%     |  |  |  |  |
| 44 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.5 | Increase access to community-based mental health for youth  | DBH  | 2.1.5.a Number of ChAMPS calls to Anchor Mental Health (higher is better)   | 1,321 (FY23)                                 | 318     |  |  |  |  |
| 45 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.5 | Increase access to community-based mental health for youth  | DBH  | 2.1.5.b Number of mobile crisis deployment for children and youth   | 307 (FY23)                                   | 54      |  |  |  |  |
| 46 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.5 | Increase access to community-based mental health for youth  | DBH  | 2.1.5.c Percentage of children seen in the community within 7 days of a psychiatric discharge (higher is better)  | 47% (FY23)                                   | 28%     |  |  |  |  |
| 47 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.6 | Increase DC Medicaid LTCSS (Long Term Services and Supports) provider capacity  | DHCF | 2.1.6.a Number of beneficiaries enrolled in the Medicaid Adult Day Health Program (ADHP) (higher is better)   | 648 (FY23)                                   | 156     |  |  |  |  |
| 48 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.6 | Increase DC Medicaid Long Term Services and Supports provider capacity  | DACL | 2.1.6.b Number of clients receiving nutrition assistance (to include both congregate meal participants and home delivered meal participants) (higher is better)   | 4,084 (FY23)                                 | 4323    |  |  |  |  |
| 49 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.                                   | 2.1.7 | Increase quality of Long Term Services and Supports services  | DHCF | 2.1.7.a Percentage of Medicaid Elderly and persons with Physical Disabilities Home and Community-Based Services Waiver program participants who have service plans that address personal goals (higher is better) | 91% (FY23)                                   | 91%     |  |  |  |  |

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| 50 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.7 | Increase quality of Long Term Services and Supports services  | DHCF      | 2.1.7.b Percentage of Medicaid Elderly and persons with Physical Disabilities Home and Community-Based Services Waiver program participants who have service plans that address health & safety risks (higher is better)  | 92.75% (FY23)                      | 93%   |  |  |  |  |
| 51 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.7 | Increase quality of Long Term Services and Supports services  | DHCF      | 2.1.7.c Percentage of Medicaid Elderly and Persons with Physical Disabilities Home and Community-Based Waiver complaints investigated within 7 days of receipt of complaint (higher is better)  | 94.25% (FY23)                      | 96%   |  |  |  |  |
| 52 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.7 | Increase quality of Long Term Services and Supports services  | DHCF      | 2.1.7.d Percentage of Medicaid Elderly and persons with Physical Disabilities Home and Community-Based Services Waiver program beneficiaries' critical incidents, where follow-up to resolve contributing factors in the incident is implemented in 30 days (higher is better)            | 79.5% (FY23)                       | 83%   |  |  |  |  |
| 53 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.7 | Increase quality of Long Term Services and Supports services  | DBH       | 2.1.7.e Percentage of providers complying with full fidelity reviews for evidence-based practice models, including community-based intervention services (higher is better)   | 88% (FY23)                         | Annual  |  |  |  |  |
| 54 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.8 | Expand the review of annual training for facility staff related to managing mental health and substance use disorder needs. | DC Health | 2.1.8.a Number of inspections of nursing facility and assisted living residences regarding training of staff on positive behavior intervention, crisis management, and other relevant mental health and substance use disorder needs based on the resident population (higher is better). | No baseline data                   | Nursing Facility inspections 1;<br>Assisted Living Residences inspections 3 |  |  |  |  |
| 55 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.8 | Expand capacity to manage mental health and substance use disorder needs  | DDS       | 2.1.8.b Number of Developmental Disabilities Administration staff who attend at least one training in Positive Behavior Supports  | No baseline data                   | 4   |  |  |  |  |
| 56 | 2.1 Provide high-quality direct services and supports leading to the full inclusion of people with disabilities in the District.    | 2.1.8 | Expand capacity to manage mental health and substance use disorder needs  | DDS       | 2.1.8.c Percentage of people receiving psychotropic medications who had quarterly medication reviews. (higher is better)  | 92% (FY23)                         | 95%   |  |  |  |  |
| 57 | 3.1 Improve classroom inclusion and employment opportunities for students with disabilities.  | 3.1.1 | Improve classroom inclusion of students with disabilities   | DCPS      | Percentage of students with a disability who learn in a separate, segregated learning environment (lower is better)   | 9% (FY19)                          | 4.21%   |  |  |  |  |
| 58 | 3.2 Improve and enhance seamless transitions for students with disabilities into post-secondary education, training, and employment | 3.2.1 | Improve employment opportunities for transition-age youth with disabilities   | DCPS      | 3.2.1.a Percentage of students with disabilities who earned a diploma (higher is better)  | 72.61% (FY21)<br>74.93% (FY22)     | N/A   |  |  |  |  |
| 59 | 3.2 Improve and enhance seamless transitions for students with disabilities into post-secondary education, training, and employment | 3.2.1 | Improve employment opportunities for transition-age youth with disabilities   | DDS       | 3.2.1.b Number of transition-age youth with a disability who receive at least one pre-employment transition service each school year, and how many potentially eligible students. (higher is better)  | 3,775 out of 4,616 (82%)<br>(FY24) | 655/2,749<br>(24%)  |  |  |  |  |
| 60 | 3.2 Improve and enhance seamless transitions for students with disabilities into post-secondary education, training, and employment | 3.2.1 | Improve employment opportunities for transition-age youth with disabilities   | DDS       | 3.2.1.c Number of transition-age youth who receive DC RSA career exploration service (higher is better)   | No baseline data                   | 468   |  |  |  |  |

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| 61 | 3.3 Review and realign (if necessary) structures across the workforce development system to better support people with disabilities  | 3.3.1 | Increase IEP compliance through transition planning that complies with legal requirements, while centering around the unique strengths, needs, and aspirations of each student. | OSSE    | Percentage of Individualized Education Plans (IEP) reviewed that comply with secondary transition requirements (higher is better)                            | 65% (FY22) 58% (FY23)                                  | Annual percentage | Annual percentage | Annual percentage | Annual percentage |  |
| 62 | 3.3 Review and realign (if necessary) structures across the workforce development system to better support people with disabilities  | 3.3.2 | Increase DC RSA staff compliance with existing regulations, policies, and procedures  | DDS     | Percent of indicators that demonstrate compliance with vocational rehabilitation regulations and policies (based on monthly case reviews) (higher is better) | 90% (FY25)   | 91%               |                   |                   |                   |  |
| 63 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4.3 | Increase job stability for people with disabilities who receive DC RSA and DDA services   | DDS     | 3.4.3.a Average hourly wage of DC RSA and DDA clients employed more than 90 days (higher is better)  | \$19.81 (FY23)   | \$19.43           |                   |                   |                   |  |
| 64 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4.3 | Increase job stability for people with disabilities who receive DC RSA and DDA services   | DOES    | 3.4.3.b Employment rate 2nd Qtr. after exit from an American Job Center for individuals with a disability (higher is better)                                 | 39% (FY23)   | 37.7%             |                   |                   |                   |  |
| 65 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4.3 | Increase job stability for people with disabilities who receive DC RSA and DDA services   | DOES    | 3.4.3.c Employment rate 4th Qtr. after exit from an American Job Center for individuals with a Disability (higher is better)                                 | 44% (FY23)   | 39.1%             |                   |                   |                   |  |
| 66 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4.3 | Increase job stability for people with disabilities who receive DC RSA and DDA services   | DOES    | 3.4.3.d Median or average wages 2nd Qtr. after exit from an American Job Center for individuals with a disability (higher is better)                         | \$5,965 (FY23)   | \$4,434           |                   |                   |                   |  |
| 67 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4.3 | Increase job stability for people with disabilities who receive DC RSA and DDA services   | DDS     | 3.4.3.e Number of people supported by DDA competitively employed (higher is better)  | 311 (FY21) 347 (FY22) 420 (FY23) 424 (FY24) 325 (FY25) | Annual            |                   |                   |                   |  |
| 68 | 3.4 Increase hiring, retention, and promotion of people with disabilities  | 3.4   | Improve employment rate for returning citizens with disabilities  | DOES    | The number of formerly incarcerated individuals with disabilities who receive services from DOES. (higher is better)   | 140  | 53                |                   |                   |                   |  |
| 69 | 3.5 Increase number of people with intellectual and developmental disabilities (I/DD) and mental health disabilities (Severe Mental Illness (SMI) or Serious emotional disturbance (SED)) who obtain and maintain employment through better coordination of supported employment services with the Developmental Disabilities Administration (DDA) and Department of Behavioral Health (DBH) | 3.5.1 | Increase percentage of people with mental health disabilities who remain employed for 90+ days  | DBH     | Number of enrolled individuals who receive and successfully complete Evidence-Based Supported Employment.  | 131 (FY23) out of 247 participants – 53%               | 25                |                   |                   |                   |  |
| 70 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.   | 4.1.1 | Connect newly constructed and renovated buildings to the Public-Right-Of-Way with accessible entrances  | OP/DDOT | Number of building sites assessed by OP/DDOT for accessibility of path of travel (higher is better)  | 74 (FY23)  | 39                |                   |                   |                   |  |
| 71 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.   | 4.1.2 | Address barriers to sidewalks   | DDOT    | 4.1.2.a Number of miles of sidewalk gaps (streets with no sidewalks at all)  | 52.34 miles (FY25)                                     | Pending           |                   |                   |                   |  |
| 72 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.   | 4.1.2 | Address barriers to sidewalks   | DDOT    | 4.1.2.b Number of miles of sidewalk repaired   | 33 miles (FY21) 69 miles (FY23)                        | 3                 |                   |                   |                   |  |
| 73 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.   | 4.1.2 | Address barriers to sidewalks   | DDOT    | 4.1.2.c Number of curb ramps remediated  | 1,054 (FY21)   | Pending           |                   |                   |                   |  |
| 74 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.   | 4.1.2 | Address barriers to sidewalks   | DDOT    | 4.1.2.d Number of Audible Pedestrian Signals (APS) at intersections in the District installed  | 169 (FY21)   | Pending           |                   |                   |                   |  |

|    |   |       |  |      |   |                                |                   |  |  |  |  |
|----|---|-------|--|------|---|--------------------------------|-------------------|--|--|--|--|
| 75 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.                          | 4.1.2 | Address barriers to sidewalks  | DDOT | 4.1.2.e Median number of days to address dockless vehicle parking complaints reported via 311                   | 2 days (FY24)                  | .04days (63 mins) |  |  |  |  |
| 76 | 4.1 Improve access to the Public Right Of Way (PROW) for people with disabilities.                          | 4.1.3 | Improve transit stop safety and accessibility for people with disabilities                         | DDOT | Number of bus stops made fully accessible   | 93 (FY22) 78 (FY23)            | Pending           |  |  |  |  |
| 77 | 4.2 Make significant improvements to transportation services provided to students with disabilities.        | 4.2.1 | Improve buses arrival times at school to be within 20 minutes of scheduled morning drop off time.  | OSSE | Percentage of buses arriving at school within 20 minutes of scheduled morning drop-off time. (higher is better) | No baseline data               | 94%               |  |  |  |  |
| 78 | 4.3 Make significant improvements to the daily transportation services offered to adults with disabilities. | 4.3.1 | Increase access to TransportDC services  | DFHV | 4.3.1.a Number of rides provided by TransportDC (higher is better)  | 288,898 (FY23) 101,000 (FY24)* | 25,713            |  |  |  |  |
| 79 | 4.3 Make significant improvements to the daily transportation services offered to adults with disabilities. | 4.3.1 | Increase access to TransportDC services  | DFHV | 4.3.1.b Number of events attended for outreach by DFHV staff  | 4 (FY24)                       | 1                 |  |  |  |  |
| 80 | 4.3 Make significant improvements to the daily transportation services offered to adults with disabilities. | 4.3.2 | Increase access to taxicab services through the right mix of incentives                            | DFHV | 4.3.2.a Average wait time for a wheelchair-accessible taxicab within the Transport DC Program (lower is better) | 22 minutes (FY23)              | 14                |  |  |  |  |
| 81 | 4.3 Make significant improvements to the daily transportation services offered to adults with disabilities. | 4.3.2 | Increase access to taxicab services through the right mix of incentives                            | DFHV | 4.3.2.b Increase number of wheelchair-accessible taxicab drivers after 6pm (higher is better)                   | 3 (FY24) From the WAV Pilot    | 0                 |  |  |  |  |
| 82 | 4.3 Make significant improvements to the daily transportation services offered to adults with disabilities. | 4.3.3 | Reduce commute times for people with disabilities by expanding and enforcing bus lane restrictions | DDOT | Number of tickets issued for bus lane infractions (lower is better for fewer infractions)                       | 48,009 (FY23)                  | Pending           |  |  |  |  |