Mission

Collaborating with our partners, our mission is to design and deliver high quality human services and health care that improve the safety, independence and well-being of the people of Colorado.

Vision

The people of Colorado are safe, healthy and are prepared to achieve their greatest aspirations.

Values

The Colorado Department of Human Services will:

- Make decisions with, and act in the best interests of, the people we serve because Colorado's success depends on their well-being.
- Share information, seek input, and explain our actions because we value accountability and transparency.
- Manage our resources efficiently because we value responsible stewardship.
- Promote a positive work environment, and support and develop employees, because their performance is essential to Colorado's success.
- Meaningfully engage our partners and the people we serve because we must work together to achieve the best outcomes.
- Commit to continuous learning because Coloradans deserve effective solutions today and forward-looking innovation for tomorrow.

Background

In 2011, the Colorado Department of Human Services launched a statewide outreach effort to incorporate stakeholder, client, constituent, partner and employee input and ideas into its strategic plan. Individuals provided input through seven town hall meetings that were held in Lamar, Pueblo, Durango, Grand Junction, Steamboat Springs, Fort Morgan and Denver. In addition, numerous partners and stakeholders responded to invitations for written input. To gather the critical insight that only clients can provide, and recognizing that they may have a difficult time attending a meeting or sending written comment, telephone interviews were conducted with clients. In addition, CDHS employees completed an online survey and attended meetings to provide input to the plan. Drafts of the strategic plan were placed on the Department's website inviting additional comment, ideas and input throughout the process.

In 2012, to ensure continued involvement from the Department's partners and stakeholders, the Department, reaching all corners of the state, convened a series of 13 town hall meetings in Colorado Springs, Walsenburg, Granby, Cortez, Montrose, Gunnison, Salida, Leadville, Fort Collins, Greeley, Sterling, La Junta, Burlington and Denver. Employees of the Department engaged in a webinar conversation regarding the Department's strategic plan as well as provided written input in response to the Department's plans. The Department made a specific effort to involve the certified employee organization, Colorado WINS, both to participate in the webinar and to provide written input.

In 2013, the Department continued its commitment to community and staff engagement by convening town hall meetings in Silverthorne, Lamar, Burlington, Golden, Grand Junction and Pueblo. Additionally, the Department conducted three webinar-enabled staff meetings, including one held from 10:00 PM to 12:00 AM in Pueblo, specifically designed to engage staff who work during the second and third shifts in facilities that operate around the clock. As in 2012, the Department sought out the involvement of Colorado WINS to both participate in the staff meetings and webinars, and to provide written input through the use of a survey. In total, 317 partners and stakeholders attended town hall meetings, and 143 employees participated in the webinars or attended meetings. In addition, 245 partners, stakeholders and employees provided written input to the strategic plan through an online survey.

Through the town hall meetings and staff webinars, the Department continues to evolve its strategic plan, incorporating the diversity of thoughts and insight provided by its work force and the stakeholders who both deliver and receive services.

Strategic Initiatives

The Colorado Department of Human Services, by embracing the concepts of efficiency, effectiveness and elegance, is striving to become the most effective 21st Century human services system in the country. The six goals that the Department has developed and the corresponding 2014 Plans will help achieve this objective.

Goal No. 1: To improve kindergarten readiness through quality early care and learning options for all Coloradans.

With the creation and expansion of the Office of Early Childhood over the last two years, the Department has consolidated early childhood services and funding streams, and brought a new focus on supporting the parents of young children to ensure their children's success. The Office of Early Childhood was formed to have two Divisions: Early Care and Learning, and Community and Family Supports. Together, these Divisions work collaboratively to champion the needs of young children in Colorado through their work with community partners, including Nurse Family Partnership, Head Start, child care providers, Early Childhood Councils, Family Resource Centers, and the Children's Trust Fund.

In 2012 and 2013, Colorado received the Race to the Top Early Learning Challenge grant, bringing a total of \$45 million new funds to support targeted early childhood initiatives in the state.

2014 Plan:

Through the federal Race to the Top Early Learning Challenge grant, the Department will work to increase the access and participation of low-income families in high-quality child care throughout the state, including rural and frontier communities. The Department will implement Colorado's next generation Tiered Quality Rating and Improvement System embedded in child care licensing. It also will work with child care providers throughout the state by providing training and technical assistance to support them as they improve the quality of the care and education they provide.

The Department will continue to work to improve outcomes for children with developmental delays served through the Early Intervention program. An increased focus will be placed on access to mental health services for children with persistent, serious, challenging behaviors and providing supports to their parents and caregivers, resulting in retention in consistent, supportive child care settings.

The Department strives to support safe, stable, nurturing environments for all young children. Targeting the highest risk communities, the Office of Early Childhood, in collaboration with the Office of Children, Youth and Families, will implement efforts to reduce child maltreatment and increase protective factors through the newly developed Colorado Community Response Program and home visiting programs.

Goal No. 2: To expand community living options for all people with developmental disabilities.

Colorado has a rich tradition of innovation in its services to individuals with disabilities. Colorado was among a handful of states that took progressive steps many years ago to decrease the number of people housed in public institutions. Colorado encouraged the development of community resource networks and high-quality community-based services, enabling individuals to thrive in a home setting. As a result, the number of people with developmental disabilities in the state's Regional Centers, including children, declined from several thousand 40 years ago to just 300 in 2013. Community Centered Boards, created in statute to serve as the single entry point into the long-term services and supports system, are a unique and critical resource for connecting individuals with developmental disabilities to quality community care and supports.

Colorado continues to innovate in its service array for people with disabilities. Over the last two years, Colorado developed a new business model for providing long-term services and supports to individuals with intellectual and developmental disabilities. By creating the new Office of Community Living in the Department of Health Care Policy and Financing, Colorado is bringing a new focus on ensuring that community-based supports are available to allow individuals to live and thrive in their communities. In 2013, the General Assembly passed legislation moving the CDHS Division of Developmental Disabilities to be part of the Office of Community Living.

2014 Plan:

The Department remains committed to the principle that every individual deserves the right to live with the fewest possible restrictions and in the most home-like community setting possible. In that pursuit, it will continue to implement the recently designed person-centered service model used in its three Regional Centers. Through this model, more individuals will be able to live and thrive in their communities. This will be achieved by providing short-term rehabilitation services at the Regional Centers; improving reintegration into appropriate community settings when an individual has been assessed and found to be ready; and by providing Community Support Teams to assist individuals to be successful in the community.

Goal No. 3: To achieve economic security for more Coloradoans through employment.

Over the last two years, Colorado has increased access to public benefits, including food assistance and Colorado Works (Colorado's Temporary Assistance for Needy Families program), achieving unprecedented timeliness throughout the state. In close collaboration with counties, the Department has focused on business process reengineering, eliminating unnecessary face-to-face interview requirements, and other regulations that interfere with

supporting Coloradans to find employment. Through Colorado Re-Works, the Department and counties have redefined the Colorado Works program to be first and foremost about supporting individuals to prepare for, attain, and retain employment to support their families.

The Supplemental Nutrition Assistance Program (Colorado's food assistance program) has strived to improve timeliness of eligibility determination. While great strides have been made in processing new applications, emergency or expedited applications, and redetermination applications, there continue to be challenges with the accuracy of eligibility determinations in this program.

Colorado's Vocational Rehabilitation program provides supports to individuals with disabilities in their pursuit for employment. In 2013, Colorado was required to implement a waitlist for clients because it lacked sufficient funds and the financial management tools to effectively serve clients. In order to ensure that all clients are receiving the needed supports and services, and to provide financial security to the program, the Department solicited an independent financial and performance audit, and brought new leadership to bring enhanced integrity and improved outcomes to the program.

In Colorado one in six children lives in poverty. More than a quarter of Colorado's children live in a family where no adult has full-time employment. Colorado families living in poverty rely on food banks or food assistance to feed their children. This places children's physical and educational development at risk. Recently, the Colorado Department of Human Services, working with Governor Hickenlooper and lawmakers, developed an agenda to provide strong supports for adults and children living in poverty. Together, we are focusing on creating opportunities for, and addressing the needs of, vulnerable children and parents, and moving the next generation – our children – out of poverty. This two-generation approach is being employed across services and programs in the Department. Clients are not viewed in isolation but are served in the context of their whole family. For example, development has begun on a Universal Application for services and benefits, facilitating efficient "whole family" review of eligibility. In addition, the Division of Child Support Services has begun efforts to support non-custodial parents' ability to provide financially and emotionally for their children, bringing both economic security and enhanced outcomes for the family.

2014 Plan:

The Department will continue the implementation of two programs, Re-Hire Colorado and the Colorado Parent Employment Project (CO-PEP). Through counties and their partners, Re-Hire Colorado provides employment supports and transitional, subsidized employment to targeted populations, including non-custodial parents, Coloradans over age 50, and veterans. In support of the Department's assertion that all Colorado children deserve the support of both parents, it has invested in CO-PEP, a program that focuses on providing to non-custodial parents similar employment and parenting supports that are available to custodial parents.

For its Division of Vocational Rehabilitation, the Department will work to eliminating the wait list and returning to the provision of services on an as needed and approved basis. It will develop and implement a comprehensive plan to achieve financial stability and strengthen programmatic delivery to its clients. The plan will implement audit findings, leverage existing partnerships and create new ones to best serve individuals and enhance their ability to gain employment.

Goal No. 4: To ensure child safety through improved prevention, access, and permanency.

In 2012, the Governor introduced his child welfare plan, "Keeping Kids Safe and Families Healthy," in support of the commitment that children living anywhere in the state should be entitled to the same level of protection from abuse and neglect. The plan modernized and expanded training; enhanced performance management; aligned funding with outcome priorities; implemented best child welfare practices throughout the state; and increased transparency of the system to the public.

Building on those efforts, in 2013 the Governor directed an expansion of the plan, bringing new funding for prevention and early intervention;, planning for a statewide public awareness campaign and child abuse and neglect hotline; implementation of the Title IV-E Waiver; mobile technology for caseworkers in the field; and increased transparency and public engagement. The Department is in the process of implementing the Governor's plan through the establishment of new steering committees that will serve as advisory bodies for their respective components of the plan; selection of the inaugural group of sites to participate in new prevention programs; launch of a mobile technology pilot program in 27 counties; research and identification of potential solutions for the statewide child abuse and neglect hotline; development of new curricula and training related to enhanced child protection practices; and implementation of family engagement, permanency roundtables, and kinship support interventions in the Title IV-E Waiver counties.

2014 Plan:

The Department, in partnership with counties, will continue to implement the Governor's 2012 and 2013 child welfare plans including launching more SafeCare Colorado sites across the state and, in collaboration with the Office of Early Childhood, expanding prevention efforts through Nurse Family Partnership and the Colorado Community Response Program. In addition, the Department, working with its county partners, will select vendors who will build the statewide child abuse and neglect hotline and corresponding public awareness campaign; thoroughly review policy and rules guiding front-end child welfare practice and recommendations for necessary changes; conduct mandatory reporter training; expand Title IV-E Waiver implementation to more counties; add two new Waiver interventions related to trauma-informed assessment and treatment of children in open child welfare cases; initiate a statewide rollout of the mobile technology project; and increase transparency through the development of a publicfacing website displaying statewide and county-specific child welfare data.

In addition to implementation of the Governor's plan, the Department will work with its county partners to reduce the use of congregate care settings for youth in child welfare. Research consistently indicates that youth are best supported in family and family-like settings, and the Department will develop strategies and incentives to promote these types of care environments for all Colorado youth.

Goal No. 5: To achieve a statewide crisis response system and expanded community supports in mental health and substance abuse.

Over the last two years, the Department has made great strides in improving services at the Colorado Mental Health Institute at Pueblo. Achievements include regaining full accreditation from the Joint Commission, a nationally recognized health care accreditation organization; nearly eliminating the use of seclusion and restraints; eliminating the waitlist for competency evaluations; implementing a redesign of clinical services; reducing barriers to discharge; and practicing trauma informed care.

Since 2011, the state has worked to improve behavioral health services which are fragmented and inadequately supported. In 2012, the Governor announced his behavioral health plan, "Strengthening Colorado's Mental Health System: A Plan to Safeguard All Coloradans," investing nearly \$30 million to provide comprehensive, statewide behavioral health services to all Coloradans.

2014 Plan:

The Department will continue its efforts to strengthen Colorado's behavioral health/mental health system to serve all Coloradans, including those in rural and frontier communities.

The Department will establish a single, statewide mental health crisis system that will include a 24/7 crisis hotline and walk-in crisis stabilization services for urgent mental health care needs. As well, it will develop a 22-bed jail-based restoration program in the Denver area, serving forensic patients with court orders for restoration to competency to stand trial. Additionally, the Department will increase community capacity through the development of residential facilities for short-term transition from mental health hospitals to the community, as well as by providing housing subsidies for individuals with serious mental illness.

Goal No. 6: To prepare Colorado to meet the needs of more seniors who choose to live and thrive in their homes and communities.

With new funding and legislation, Colorado is now in line with other states requiring mandatory reporting of suspected elder abuse and exploitation. The Department has worked closely with counties to improve training for both county workers and mandatory reporters, as well as to reduce the caseloads of caseworkers in Adult Protective Services, thereby enhancing the lives of seniors in Colorado. In addition, the Department is developing a data and case management system to better monitor and ensure the safety and well-being of Colorado seniors.

2014 Plan:

The Department recognizes that the changing demographics in Colorado will create an expanded need for services to our aging population. Over the next 30 years, the segment of the state's population over age 60 is projected to increase by 118%, more than double the rate of the state's population growth as a whole. Two out of every three older Americans have multiple chronic medical conditions, and treatment for this population accounts for 66% of the country's health care budget. In addition to implementing mandatory reporting, the Department will lead a statewide effort in developing strategies to best support Coloradans to live safely in their homes and be vibrant members of the community.

Goals, Strategies and Performance Measures

The Department has made a pledge to everyone who has taken the time and commitment to be a part of this strategic plan, that this plan is a living document for which the Department will be held accountable, and will use regularly to serve as a guiding document as it continues to deliver services throughout the year. The Goals and Strategies that follow support the Department's mission, vision and values.

The Department manages performance of its programs through C-Stat, in which measures are identified for each program and reviewed in real time each month. C-Stat measures are reported publicly on a quarterly basis on the Department's website.

Goal No. 1: To improve kindergarten readiness through quality early care and learning options for all Coloradans.

Office of Early Childhood Division of Early Care and Learning Access to Quality Child Care for Low Income Children

Strategy: Research has consistently supported positive outcomes associated with high quality early childhood experiences. To ensure all Colorado children have access to high quality child care, the Department will implement Colorado's next generation Tiered Quality Rating and Improvement System (TQRIS). The new TQRIS will expand the rating system to all licensed facilities as well as provide incentives and support for early childhood providers to advance in levels of quality through the Department's Race to the Top Early Learning Challenge grant. The new QRIS will begin rating Child Care Centers in Phase I (FY13-14), and Family Child Care Homes in Phase II (FY14-15), and will target its support efforts on facilities that serve a substantial number of CCCAP children.

Performance Measure: The percent of all children under five years old utilizing CCCAP that are in a top rated (top two tiers) facility. This measure will be calculated by dividing the number of children, who utilized CCCAP care in a facility rated in the top two tiers, by the total number of children who utilized CCCAP at least once in a given month.

In Colorado, approximately 1,700 facilities (both homes and centers) serve CCCAP children and roughly 450 facilities (both homes and centers) have a current rating at any given point in time. Further, of the 450 rated facilities, about 141 *centers* currently serve CCCAP children. Of these, 70.3% are rated in the top two tiers of the four-star QualistarTM rating system (accounting for 68.4% of the CCCAP children in a rated center). With the implementation of Race to the Top, all 1,700 licensed facilities serving children receiving the CCCAP assistance will have a quality rating.

	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:					26%	26%	26%
Actual:				7.8%*			

* These are July 2013 data only, and represent the percent of children *of all ages* who utilized CCCAP in a *center* (homes are not included in these data) rated in the top two tiers.

Performance Evaluation: As a new measure, the Department does not have historical data from which to extract long term trends. However, July 2013 data suggests that rated facilities serving CCCAP children generally have a lower rating than rated facilities that do not serve CCCAP children. These data further suggest that a small portion of CCCAP children are currently being served in facilities rated in the top two tiers (in July 2013, 7.8% of all CCCAP children utilizing CCCAP care were served in a center rated in the top two tiers).

NEW MEASURE NO PREVIOUS DATA

Office of Early Childhood Division of Community and Family Supports Early Intervention Services

Strategy: Early Intervention Services provide infants and toddlers from birth through age two, and their families, with services and supports to enhance child development in the areas of cognition;, speech; communication; physical development; motor development; vision; hearing; social and emotional development; self-help skills; parent-child interaction; and early identification, screening and assessment services. Infants and toddlers that progress early in life have a greater likelihood of long-term success.

Performance Measure: The percentage of infants and toddlers with growth in skills will be measured by dividing the number of participants with a substantial increase in their rate of growth at exit from early intervention services, by the total number of participants exiting. (Note: In July 2011, the Division of Developmental Disabilities began using a new instrument for measuring progress of Early Intervention participants.) The children assessed for this measure were deemed to be below age-appropriate functioning at initial assessment. The overall performance represents the percentage of children who increased their skill sets to meet or exceed age-appropriate standards.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13*	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				85%	85%	85%	85%
Actual:		68.7%	65.6%	81%			

Performance Evaluation: Throughout the duration of SFY 2012-13, the Division saw child growth in the use of knowledge and skills staying well above the established goal of 69% each month. In September 2013 a new goal of 85% was set.



Goal No. 2: To expand community living options for all people with developmental disabilities.

Office of Long-Term Care Regional Centers Length of Time to Transition – Short-term Treatment and Stabilization

Strategy: The Regional Centers are administered by the Division of Regional Center Operations (DRCO) and serve persons with developmental disabilities who have the most intensive needs. Reducing the length of stay from the time the resident is assessed and found to be ready to transition to a community setting, to the time the resident actually transitions, places individuals on a path toward enhanced independence more quickly.

Performance Measure: For those residents who have transitioned/discharged back to the community, and were served through the Short-Term Treatment and Stabilization Model, performance will be measured by dividing the total number of days that passed from the time the resident was found to be ready to transition/discharge to the time they actually did transition/discharge, by the number of residents that transitioned/discharged.

	FY 2009-10	FY 2010-11	FY2011-12*	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			60	60	60	60	60
Actual:			76	92			

*April – Jun 2012

Performance Evaluation: During SFY 2012-13, a total of 14 residents transitioned from the Regional Centers to a private community provider. For those 14 residents, time to transition ranged from two days to 344 days. DRCO has developed a Community Transition Tracking Log to track barriers to transition. Using the information gathered, DRCO has the ability to more purposefully address the identified barriers in order to improve performance on this measure. In addition, DRCO has made changes to its internal processes, as well as begun to examine external processes involving the Division of Developmental Disabilities and Community Centered Boards, related to transitioning from a Regional Center to a private community provider, in order to decrease the length of time to transition.



Office of Long-Term Care Division of Vocational Rehabilitation Successful Employment

Strategy: The Division of Vocational Rehabilitation (DVR) provides assistance to individuals with disabilities who have barriers to employment. Attainment of successful employment increases a person's likelihood of long-term economic security.

Performance Measure: This is a federal performance goal. Successful employment is measured as the total cumulative number of successful employment outcomes through the current month; the goal is met by exceeding the prior year's performance by one or more successful employment outcomes than the previous year.

	FY 2009-	FY 2010-	FY 2011-	FY 2012-	FY 2013-14	FY 2014-15	FY 2016-17
	10	11	12	13			
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			2,400	2,497	2,958	2,959	2,960
Actual:		2,349	2,496	2,957			

Note: Performance is based on the federal fiscal year and runs from October 1 through September 30 each year.

Performance Evaluation: The Division of Vocational Rehabilitation has had continued success in this performance indicator, increasing the volume of successful outcomes year over year. In May 2013, the Division instituted a full Order of Selection waiting list.



Office of Long-Term Care State Veterans Nursing Homes Residents Without Falls

Strategy: Colorado's State Veterans Nursing Homes serve honorably discharged veterans, veterans' spouses/widows, and "Gold-Star" parents (parents whose children died while serving in the Armed Forces). Nursing home residents have the right to receive safe, high-quality care, evidenced by a low number of resident falls.

Performance Measure: In the United States, falls among nursing home residents occur frequently and repeatedly, and can result in disability, functional decline and reduced quality of life. Performance is measured monthly by dividing the number of residents without falls by the total number of nursing home residents. The annual performance is the average of the 12 months. The benchmark of 88% is greater than the national average.

	FY 2009-10	FY 2010-11*	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			88%	88%	88%	88%	88%
Actual:		80%	81%	79%			

Performance Evaluation: The state operates four Veterans Nursing Homes and measures performance in this area at each home. For each home, performance is often below the goal and national average. The State Veterans Nursing Homes have explored existing and needed fall mitigation strategies, as well as best practices to address falls due to cognitive impairment, and continues to examine effective interventions to address this measure at each home. Several interventions have been deployed with the intent of reducing the incidence of falls, including re-examining staffing patterns, filling vacant positions, increasing staff education regarding falls prevention tactics, and resident and family member education regarding falls safety.



Office of Long-Term Care Disability Determination Services Accuracy of Initial Eligibility Decisions

Strategy: The Division of Disability Determination Services (DDS) makes disability decisions for Social Security. Accurate processing of initial eligibility decisions increases the accessibility of financial assistance to vulnerable populations and ensures that only those who are eligible receive the benefit.

Performance Measure: Accurate eligibility decisions will be measured by dividing the total number of accurate initial eligibility decisions by the number of initial eligibility decisions sampled by the Social Security Administration-Data Quality Branch.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			97%	97%	97%	97%	97%
Actual:			97.9%	95.1%*			

Note. Performance is based on the federal fiscal year and runs from October 1 through September 30 each year.

Performance Evaluation: DDS has shown variable performance over the past year ranging from 93.1% to 98.2%. Data has demonstrated that the majority of DDS errors have been related to documentation accuracy as compared to decisional accuracy. DDS has supplemented its current internal quality assurance processes with the following actions: 1) requesting federal assistance for case reviews to determine appropriate training actions and possible trends, 2) reallocating quality assurance resources to the audit function, 3) increasing internal sampling rates, 4) increasing sampling and supervisory reviews for examiners with internal or external quality ratings below standard, and 5) increasing professional relations and quality assurance outreach to attorney/non-attorney providers of Medical Evidence of Record to provide more complete, accurate medical records.



Goal No. 3: Goal No. 3: To achieve economic security for more Coloradoans through employment.

Office of Economic Security Child Support Services Division Collection of Current Child Support

Strategy: Maximizing the collection of current child support owed increases the overall economic stability of the family, and has a direct impact on the well-being of children in Colorado.

Performance Measure: All current child support owed in the state of Colorado through the month comprises the denominator; the numerator is the total dollars collected and applied to current support obligations through that same month. This is a federal performance measure, and is tracked cumulatively month-to-month throughout the federal fiscal year. Federal incentive dollars are available for strong performance on this measure.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:	63.0%	63.9%	64.3%	64.3%	64.5%	65%	66%
Actual:	62.9%	63.3%	62.8%	62.7%*			

*Performance as of June 2013.

Performance Evaluation: Statewide, current child support collections vary fairly little from month to month, or county to county. Overall collections have decreased from 2011 to 2012, and remain flat during 2013. This is owed, in part, to a denominator that has outpaced the growth in the numerator; while collections have increased, the amount of child support owed in the state has increased even more. Currently, the Division is working with county human service departments on individual improvement plans.



Office of Economic Security Food and Energy Assistance Division Timely Processing of Expedited Food Assistance Applications

Strategy: Timely processing of expedited food assistance applications ensures that eligible Coloradans have access, as soon as possible, to needed financial assistance for food, ultimately, reducing the likelihood of Coloradans going hungry.

Performance Measure: Expedited food assistance applications are to be processed within seven days. The monthly percentage of applications processed timely will be calculated by dividing the number of applications processed within seven days by the total number of expedited applications received. The annual measure will equal the average of the 12 months in the state fiscal year.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			95%	95%	95%	95%	95%
Actual:	70.4%	79.2%	85.4%	91.03%			

Performance Evaluation: Food Assistance programs across the state have demonstrated steady, consistent progress over the state fiscal year. In the spring of 2013, CDHS requested and received funding for Business Process Reengineering efforts that are currently under way. It is the expectation that these efforts will standardize business process efficiencies across the 10 large counties, providing the necessary impetus to meet and sustain this processing goal.



Office of Economic Security Food and Energy Assistance Division Timely Processing of Food Assistance Recertifications

Strategy: Timely processing of recertification of food assistance cases ensures that eligible Coloradans continue to have access to needed financial assistance for food, ultimately, reducing the likelihood of Coloradans going hungry.

Performance Measure: Recertification of food assistance cases are to be processed by the end of the month when received timely from the household, or within 30 days if received after the deadline. The monthly percentage of cases with a timely decision of continued eligibility is calculated by dividing the total number of cases submitting recertification applications by the total number of cases recertified. The annual measure will equal the average of the 12 months in the state fiscal year.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			95%	95%	95%	95%	95%
Actual:	47.6%	55.1%	74.2%	88.76%			

Performance Evaluation: Food Assistance programs across the state have demonstrated relatively steady progress over the state fiscal year. In the spring of 2013, CDHS requested and received funding for Business Process Reengineering efforts that are currently under way. It is the expectation that these efforts will standardize business process efficiencies across the 10 large counties, providing the necessary impetus to meet and sustain the processing goal.



Office of Economic Security Food and Energy Assistance Division Food Assistance Case and Procedural Error Rate

Strategy: Accurately processing applications for food assistance ensures that Coloradans receive the level of benefits for which they are eligible.

Performance Measure: A case or procedural error can occur when an application for food assistance is denied or existing benefits are terminated. This performance measure is determining the extent to which the denial or termination was done for the correct reason at the correct time, and that the client was properly notified of the action. A deficit in any or all of those categories will result in a case being found in error. The sample size of cases reviewed is determined by the U.S. Department of Agriculture. The goal is to have a negative error rate less than the national average. The national average changes from year to year. A substantial change to the methodology of this measure took place in Federal Fiscal Year 2012, greatly impacting the error rate. Prior to this change in methodology, the measure was known as the "negative action error rate."

	FFY 2009-10	FFY 2010-11	FFY 2011-12	FFY 2012-13*	FFY 2013-14	FY 2014-15	FY2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				21%	21%	21%	21%
Actual:		6.2%	68.7%	58.6%			

*October 2012 – March 2013

Performance Evaluation: Food Assistance originally identified the high error rate as being caused in large part by the Colorado Benefits Management System errors (system and noticing), and began correcting these issues though multiple system builds during the state fiscal year. However, the impact to the error rate was less than anticipated and made it clear that at least half of the errors were attributable to human error at the worker level. Program staff have begun a series of trainings at the county level to begin to address this effect.



Office of Economic Security Employment & Benefits Division Employment Entry

Strategy: Connecting Colorado Works participants with employment dramatically increases the likelihood of long-term economic security.

Performance Measure: The numerator is the total number of adults who gained employment and were participating in a work activity during the month. The denominator is the total number of adults participating in workforce activities during the same month, excepting individuals who are not job ready.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:					10%	25%	35%
Actual:				1,916*			

*This is a new performance measure. Data represents aggregated distinct monthly employment outcomes from March – September 2013. Corresponding historical data for the denominator is unavailable, but will be collected going forward to represent performance as a percentage in accordance with the goal.

Performance Evaluation: In order to establish a baseline for the program's capacity to connect participants with employment, Colorado Works implemented a substantial system change in March 2013 to enable tracking of employment entry as a program outcome, and anticipates further refinement of system logic in June 2014 to enhance data integrity. The Division has been providing ongoing technical assistance to county staff on the appropriate data entry in, and use of, the workforce development system track. In addition, the Department is incorporating an optional employment outcome into the Memorandum of Understanding with county agencies, and has worked to simplify program requirements and remove administrative burdens to allow for additional capacity at the county level to focus on employment outcomes.

In October 2013, the Division created a new staff section devoted entirely to employment and vocational training, and will work with counties to improve employment outcomes.



Office of Economic Security Adult Financial Program Timely Processing of Applications

Strategy: Processing Old Age Pension and Aid to Needy Disabled benefit applications efficiently ensures eligible Coloradans have access to needed resources that increase their economic security.

Performance Measure: Old Age Pension and Aid to Needy Disabled applications are to be processed within 45 days and 60 days, respectively. The monthly percentage of applications processed timely will be calculated by dividing the number of applications processed within stipulated time frames during the month by the total number of applications processed. The annual measure will equal the average of the 12 months in the state fiscal year.

	FY 2009-10	FY 2010-11*	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:			95%	95%	95%	95%	95%
Actual:		86.6%	89.6%	90.14%			

Performance Evaluation: To better align with Colorado Works and Food Assistance, two other programs deploying strategies with counties to improve timely, accurate determination, the Department moved the Adult Financial function to the Office of Economic Security from Long-Term Care. The Office has focused on the 10 large counties, where more than 80% of the caseload resides, learning from those counties that are high performers and sharing techniques proven to be effective with those counties that are falling short of the goal. While performance declined during the first part of State Fiscal Year 2012-13, since April 2013, performance has been restored to 93.5% of applications being processed timely.



Goal No. 4: To ensure child safety through improved prevention, access, and permanency.

Office of Children, Youth and Families Division of Child Welfare Timeliness of Assessment Closures

Strategy: Reports of child abuse and neglect are assigned for investigation/assessment. Timely completion of assessments indicates that child safety issues are identified and mitigated quickly; that the child welfare system is not unnecessarily lingering in a family's life;, and that information regarding the assessment in the child welfare data system is up-to-date.

Performance Measure: The percent of assessments that are closed timely is calculated by dividing the number of assessments closed within 60 days of referral by the total number of completed assessments. (Differential Response cases have not been included in the performance measure in prior years' actual performance.)

	FY 2009-10	FY 2010-11*	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:					90%	92%	95%
Actual:		59.4%	61.2%	74%			

Performance Evaluation: Performance has steadily improved over the last 18 months, with the highest performance in June 2013 at 86.3%. Child Welfare has actively worked with counties to enhance performance by identifying effective practices such as enhanced supervision and eliminating back log.



Office of Children, Youth and Families Division of Child Welfare Youth in Congregate Care Settings

Performance Measure: The percent of children and youth (ages 0 to 21) in a congregate care setting is calculated by dividing the number of children who experienced any congregate care placement (clients served during the reporting period) by the total number of children served in out of home care.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY2013-14	FY 2014-15	FY 2015-16
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:					21.7%	18.4%	15%
Actual:	22.3%	22.3%	23.3%	23.0%			

Performance Evaluation: Over the last four years Colorado has reduced the number of children in congregate care from 1,578 to 1,164. However, the percentage of youth in out of home placements who reside in congregate care has risen from 22.3% in FY2010 to 23.0% in FY2013. Colorado remains one of the highest users of congregate care settings when calculated from annual data files submitted to the Federal Administration for Children and Families. The Department will monitor these measures in C-Stat on a monthly basis digging into specific data indicators as needed to identify areas in need of improvement including initial placement in congregate care at the time of removal and new entries and exits to congregate care each month.

Office of Children, Youth and Families Division of Youth Corrections Youth Enrolled in Education Programs or Employed

Strategy: The mission of the Division of Youth Corrections is to protect, restore and improve public safety through a continuum of services and programs that effectively supervise juvenile offenders; promote offender accountability to victims and communities; and build skills and competencies of youth to become responsible citizens. Youth committed to the Division of Youth Corrections who are enrolled in educational programs or are employed have a greater likelihood of success once they return to the community.

Performance Measure: The number of youth who, at discharge, are enrolled in an education program or are employed, divided by the total number of youth who are discharged.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				70%	85%	85%	85%
Actual:		59.6%	62.9%	70%*			

Performance Evaluation: DYC has conducted exception analyses to determine reasons for youth not being enrolled in an educational program or employed at discharge. In SFY 2013 performance improved over the previous year. The Department set a higher goal for performance beginning in April 2013.



Office of Children, Youth and Families Division of Youth Corrections Recidivism of Youth Committed to Residential Placements

Strategy: Comprehensive residential services for youth committed to the Division of Youth Corrections that effectively target risk of repeated criminal activity should result in a reduction in youth reoffending, and as a result being re-committed to Youth Corrections.

Performance Measure: The number of committed youth in residential placements who do not receive any new charges in a specified month divided by the total number of all committed youth in residential placement.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:		98%	98%	98%	98%	98%	98%
Actual:		99.5%	99.6%	99.9%			

Performance Evaluation: The recidivism rate has remained above 98% goal line for the last three state fiscal years.



Goal No. 5: To achieve a statewide crisis response system and expanded community supports in mental health and substance abuse.

Office of Behavioral Health Division of Mental Health Institutes Length of Time to Receive a Competency Examination

Strategy: The Colorado Mental Health Institute at Pueblo (CMHIP) provides evaluations of competency to stand trial for individuals referred for evaluation by the state's courts. Individuals in county jails with a serious mental illness, requiring an evaluation of their competency to stand trial, should be provided treatment as quickly as possible.

Performance Measure: The percentage of patients in need of a competency exam whose wait time is more than 28 days. Performance is measured by dividing the number of all patients each month who waited more than 28 days to be admitted to CMHIP for a competency exam by the total number of patients admitted to CMHIP for a competency exam. The annual measure is the average of all 12 months in the fiscal year.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				0%	0%	0%	0%
Actual:		73.3%	58.7%	0%			

Performance Evaluation: A total of five LEAN Rapid Improvement Events focusing on admission, evaluation, and discharge processes were held to reduce competency evaluation and restoration length of stay. As a result, the Department has dropped from nearly 97% of all individuals waiting longer than 28 days to be admitted for a competency exam in July 2011, to not one single patient waiting more than 28 days for competency evaluations since July 2012.



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Office of Behavioral Health Division of Behavioral Health Reduction in Mental Health Symptom Severity

Strategy: The Office of Behavioral Health is primarily responsible for public mental health services delivered by community mental health agencies. People who enter mental health treatment should expect to improve as a result of treatment services provided.

Performance Measure: The percent of persons with reduced mental health symptoms in mental health treatment as measured by the number of persons with lesser symptom severity at follow-up, divided by the number of discharged persons receiving mental health treatment with significantly severe symptoms at admission.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				67%	67%	67%	67%
Actual:		53.3%	52.6%	53.6%			

Performance Evaluation: The Office of Behavioral Health saw a slight increase in patients reporting a reduction in symptom severity during SFY 2012-13, but still fell well below the established goal rate of 67%. OBH has proposed a plan for SFY 2013-14 which will publish monthly and quarterly reports to community providers outlining their successes and areas for improvement. These reports will be shared collectively, meaning providers will be able to review the rates of other providers and discuss various barriers and techniques among each other and with OBH staff.



Office of Behavioral Health Division of Behavioral Health Timely Discharge of Civil Patients in Mental Health Institutes

Strategy: Civil patients in the state's mental health institutes should be served in the least restrictive setting available to meet their needs, including in the community.

Performance Measure: The percentage of all civil patients in the two mental health institutes – Colorado Mental Health Institute at Pueblo, and Colorado Mental Health Institute at Fort Logan – who are ready for discharge but have experienced barriers.

	FY 2009-10	FY 2010-11	FY2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:				5%	5%	10%	5%
Actual:				22.7%	18.2%		

Performance Evaluation: The Department began measuring performance in this area in May 2012, and has begun to develop strategies to reduce the barriers. While neither of the institutes was able to reach the 5% established goal, the Institute at Pueblo appeared to have more success. The two institutes combined averaged 18.2%, with Fort Logan's rate for SFY 2012-13 at 24.3%. and Pueblo's at 12.6%. Both institutes experienced a reduction in barriers towards the end of the year, and leadership within OBH report that internal processes have shifted to prioritize a reduction in barriers. Social workers and clinical teams have worked more closely than in the past to anticipate patient-specific issues that may arise throughout the discharge process. Additional social workers will be joining the team in SFY 2013-14, as well as peer-specialists who can assist in navigating barriers facing patients.



Office of Long-Term Care Aging and Adult Services Timely Response to Adult Protection Inquiries

Strategy: Timely response to adult protection inquiries increases the safety of vulnerable adults.

Performance Measure: Responses to adult protection inquiries received at the county level are required to occur within defined time intervals, depending on the urgency of the reported concern. Performance is measured by dividing the number of responses made timely by the total number of responses.

	FY 2009-10	FY 2010-11*	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2016-17
	Actual	Actual	Actual	Actual	Request	Request	Request
Benchmark:		90%	90%	90%	90%	90%	90%
Actual:		73%	77%	91%			

*January – June 2011

Performance Evaluation: Counties have responded to individualized technical assistance and/or training by improving performance, significantly, to a high of 98.3% in March 2013. Aging and Adult Services (AAS) reorganized staffing resources in order to take a more targeted approach to providing onsite support to counties. AAS distributes a monthly report to counties that alerts them to any inquiries that have the potential for being considered late when the timeliness report is run for that month.

