

Colorado Department of Human Services



Summary Report

July - September 2012

Prepared by:

Performance Management Division

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Colorado Department of Human Services

Mission

Collaborating with our partners, our mission is to design and deliver high quality health and human services 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.

The C-Stat Process

What is C-Stat?

C-Stat is a performance based analysis strategy that allows the Colorado Department of Human Services (CDHS) to better focus on and improve performance outcomes that enhance peoples' lives. By identifying areas of focus, CDHS can determine what is working and what needs improvement. By measuring the impact of day-to-day efforts, CDHS will be able to make more informed, collaborative decisions to align our efforts and resources to affect positive change for the people we serve.

C-Stat Meetings

Beginning on January 25, 2012, CDHS has held weekly C-Stat meetings with one meeting for each office each month. The C-Stat meetings are held in a dedicated conference room at the Department's central office in downtown Denver. The directors of each of the four offices responsible for providing direct human services, and their respective division directors, meet monthly with the C-Stat Leadership Team, which is comprised of executive level department staff, including the Executive Director and both Deputy Executive Directors. The Executive Director facilitates the C-Stat meetings, focusing on any of the performance measures and action items.

C-Stat Report

This report reflects the measures identified by CDHS to be tracked on an ongoing basis through the C-Stat process as of September 30, 2012. C-Stat measures, however, remain fluid in nature, as progress is made and data refined. C-Stat will continue to evolve to meet the objective of measuring key performance indicators for CDHS.

Each graph reflects the data available and reviewed as of the September C-Stat meeting for each Office. Data submission dates vary by Office given that each Office's C-Stat meeting is held during a different week of the month. In addition, the timeliness of the availability of data varies by the Division and, in some instances, the program within the Division.

For more information regarding the C-Stat process or information in this report, please contact **Ki'i Powell** at **303-866-3929** or at ki'i.powell@state.co.us.

How Do I Read This Report?

The Division

Measure: **What the C-Stat measure is attempting to capture. (Federal Measure where applicable)**

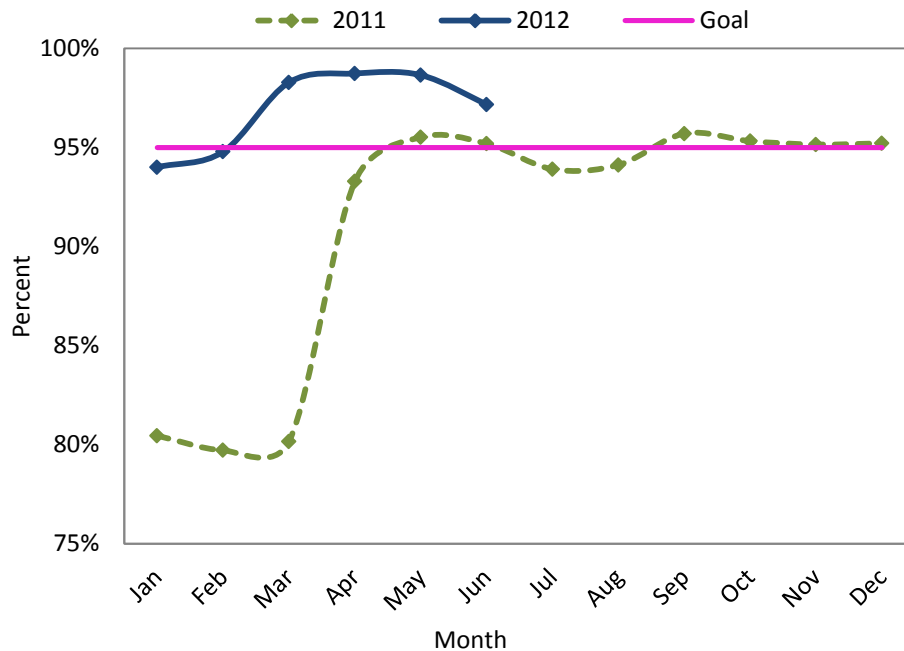
How it is measured: *Numerator:* Describes what is being “counted.”
Denominator: Describes the overall population. Approximate monthly denominator is an indication of the size of the population.

Why this matters: The impact on Coloradans affected.

Goal: The level at which the Division is aiming to drive performance.

SAMPLE GRAPH:

Graphs attempt to capture current data in addition to one year’s prior performance. This allows for both historic and seasonal comparisons. For those graphs with multiple entities (e.g., homes, centers, regions), the x-axis has been extended to capture history and seasonality over time.



Trend: A statement about the pattern the data are demonstrating.

Notes: Any additional information worth noting.

Office of Behavioral Health

Description

The Office of Behavioral Health (OBH) is responsible for policy development, service provision and coordination, program monitoring and evaluation, and administrative oversight for the public behavioral health system in Colorado. OBH consists of the Division of Behavioral Health (consisting of mental health and substance abuse community programs) and the Mental Health Institute Division (operation of two Mental Health Institutes at Fort Logan and Pueblo).

Director: Lisa Clements

Division of Behavioral Health

Summary

Description

The Division of Behavioral Health (DBH) is dedicated to strengthening the health, resiliency, and recovery of Coloradans through quality and effective behavioral health prevention, early intervention and treatment services. DBH has established a set of values and guiding principles, which the Division utilizes to fulfill its role as the single state authority for non-Medicaid behavioral health services. DBH contracts with 17 Community Mental Health Centers (CMHCs), two specialty Mental Health Clinics, and four Managed Service Organizations (MSOs) that, in turn, manage 40 Substance Use Disorder (SUD) providers.

Director: Doug Muir

Executive Summary

- Currently, DBH has identified 12 performance measures to be examined on a monthly basis. Seven measure the effectiveness of substance use disorder treatment and five measure the effectiveness of mental health treatment services.
 - DBH added measures related to *Housing and Employment*.
 - In this quarter, DBH combined the measures of “Reduction of Alcohol Use” and “Reduction of Drug Use” to one measure: *Percent of Persons Reducing the Use of Substances*.
- DBH developed goals using a statistical benchmarking approach. This approach averages the performance data across the highest performing providers serving at least 10 percent of the population.
- The Colorado Client Assessment Record (CCAR) and the Drug and Alcohol Coordinated Data System (DACODS) are the two instruments utilized to capture DBH data.

Measures

- [Increase Access to Outpatient Substance Use Disorder Treatment](#)
- [Increase Access to Outpatient Substance Use Disorder Treatment-Pregnant Women](#)
- [Reduce Use of Substances](#)
- [Reduce Mental Health Symptom Severity](#)
- Maintained Housing-[Mental Health](#), [Substance Abuse](#)
- Increased Housing-[Mental Health](#), [Substance Abuse](#)
- Maintained Employment-[Mental Health](#), [Substance Abuse](#)
- Reduce Drop-outs-[Mental Health](#), [Substance Abuse](#)

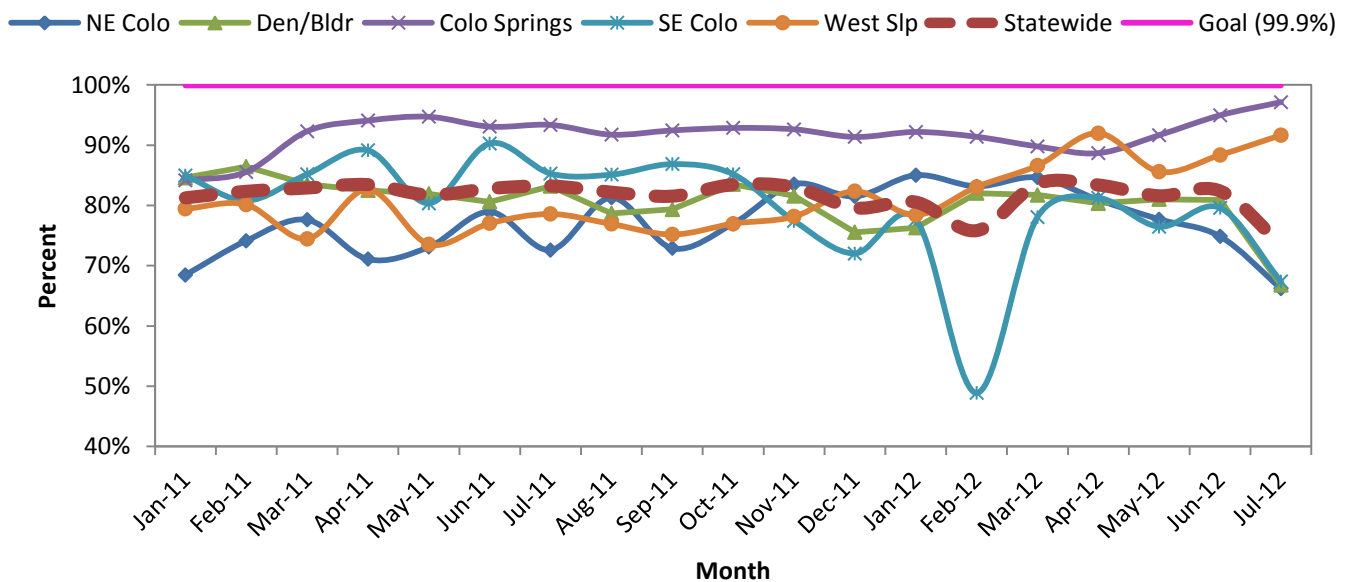
Division of Behavioral Health (DBH)

Measure: **Timeliness of access to outpatient substance use disorder treatment**

How it is measured: *Numerator:* Number of persons admitted into outpatient substance use disorder treatment in less than three days from first contact
Denominator: Number of persons admitted into outpatient substance use disorder treatment; Approximate monthly denominator: 900

Why this matters: Timely access to treatment engages clients in the recovery process sooner.

Goal: **↑99.9%**



Trend: The Colorado Springs region generally performs 10% higher than the state average. The Western Slope has improved performance to above the state average over the last six months.

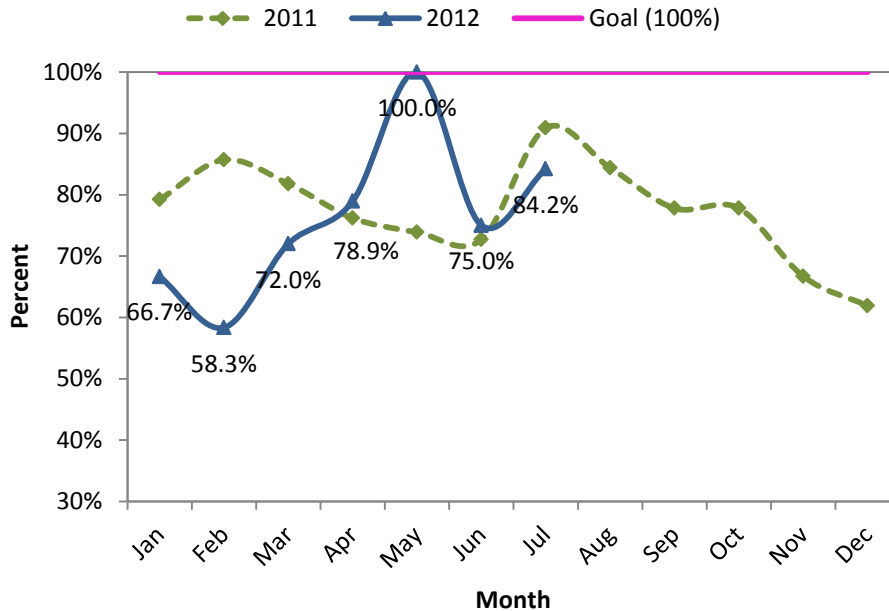
Division of Behavioral Health (DBH)

Measure: **Timeliness of access to outpatient substance use disorder treatment for pregnant women**

How it is measured: *Numerator:* Number of pregnant women admitted into outpatient substance use disorder treatment in less than three days from first contact
Denominator: Number of pregnant women admitted to outpatient substance use disorder treatment; Approximate monthly denominator: 20

Why this matters: Timely access to treatment engages clients in the recovery process sooner and can improve the health of the mother and the unborn child.

Goal: **↑100%**



Trend: The rate has remained above 70% since March 2012, but has been as low as 58.3% in February 2012.

Notes: Given that the population captured in this measure is approximately 20 people per month, data are not broken out regionally in the graph.

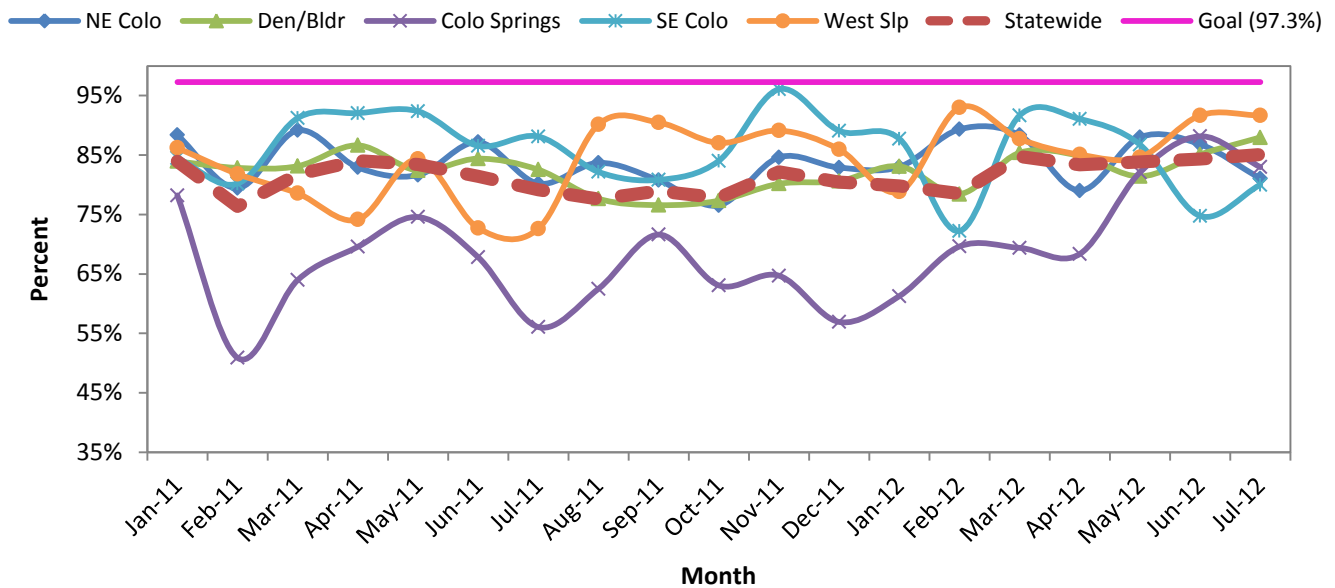
Division of Behavioral Health (DBH)

Measure: **Persons reducing the use of substances from admission to discharge in substance use disorder treatment (Modified)**

How it is measured: *Numerator:* Number of persons who reduced their use of substances from admission to discharge in substance use disorder treatment
Denominator: Number of discharged persons receiving substance use disorder treatment who are using substances at admission; Approximate monthly denominator: 520

Why this matters: People who enter substance use disorder treatment should expect to recover as a result.

Goal: **↑97.3%**



Trend: The Colorado Springs region’s performance has improved over the last six months. All of the regions have ranged between 75% and 92% in the last quarter.

Notes: This was formerly measured separately as “Reduction of Alcohol Use” and “Reduction of Drug Use”.

Division of Behavioral Health (DBH)

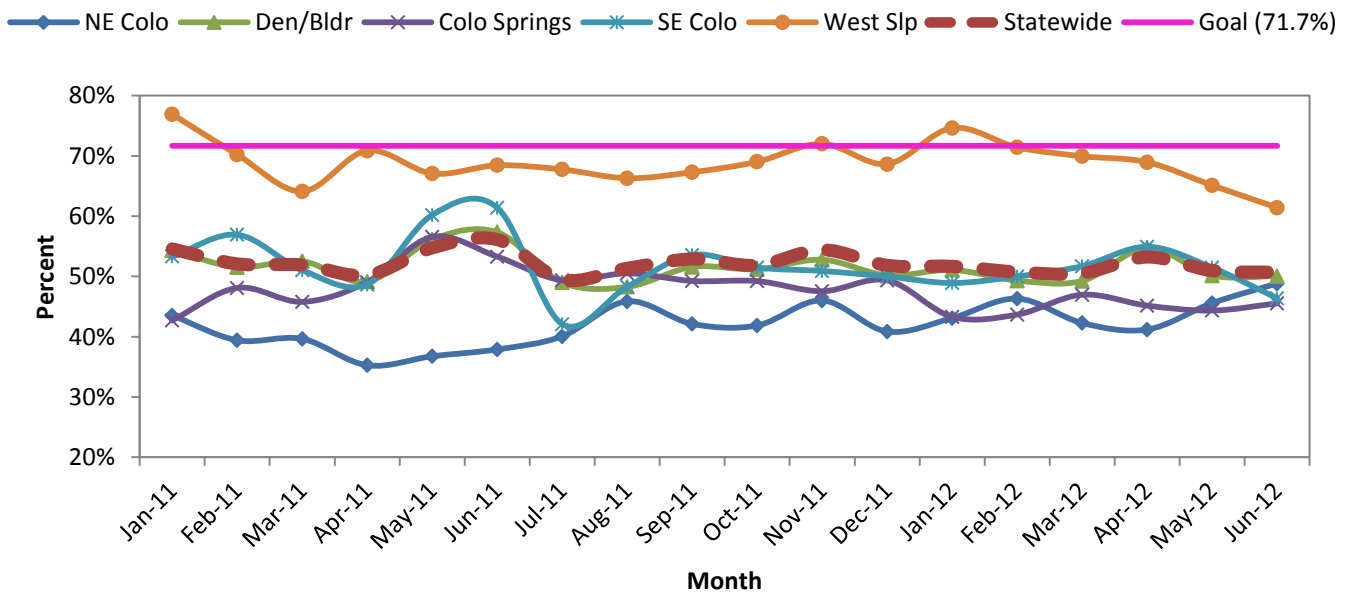
Measure: **Percent of persons with reduced mental health symptoms in mental health treatment**

How it is measured: *Numerator:* Number of persons with lesser symptom severity at follow-up
Denominator: Number of discharged persons receiving mental health treatment who report significant symptom severity at Time One; Approximate monthly denominator: 900

Time One can be an update or admission Colorado Client Assessment Record (CCAR).

Why this matters: People who enter mental health treatment should expect to improve as a result.

Goal: **↑71.7% (Modified)**



Trend: The Western Slope Region consistently performs 10% to 20% higher than the statewide average. Over the past year, the other regions have converged and range between 40% and 54%.

Notes: Data on mental health services are not available until 60 days after services are received.

The data and goal for this measure were modified since the last report as methodology was changed to include people who were without Medicaid at some point during their treatment span.

Division of Behavioral Health (DBH)

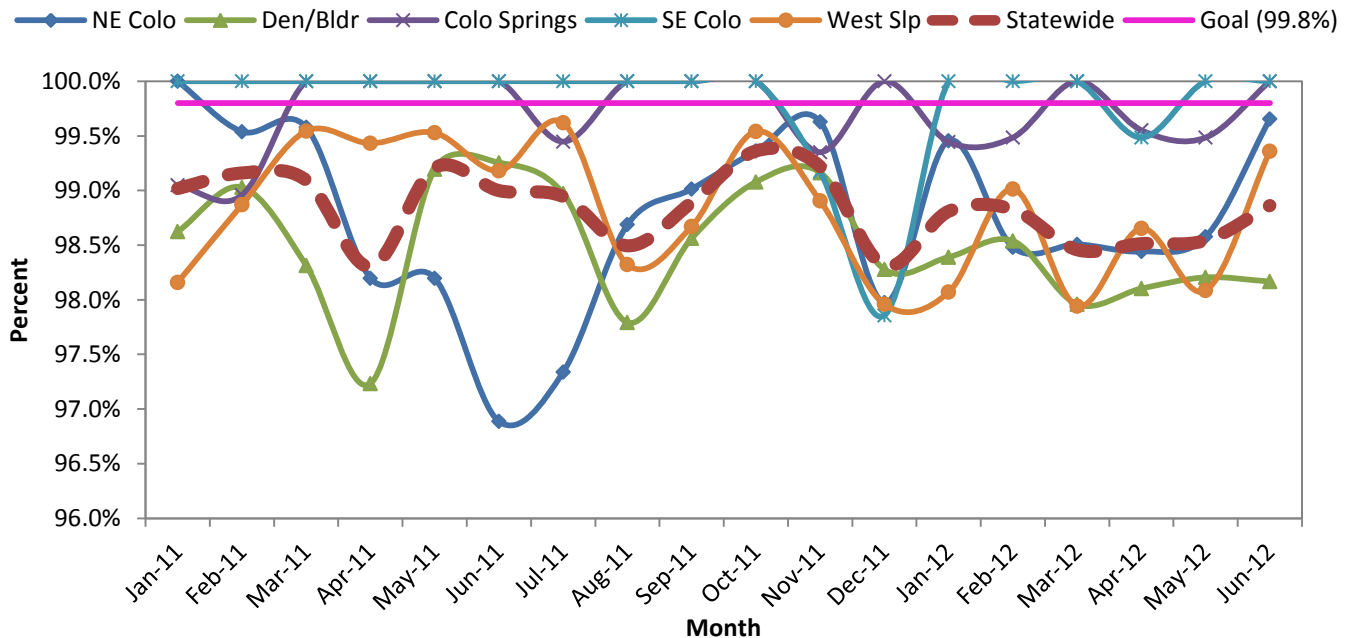
Measure: **Percent of persons who maintained housing while receiving mental health services**

How it is measured: *Numerator:* Number of persons in treatment who maintained housing
Denominator: Number of housed persons (at Time One) receiving mental health services; Approximate monthly denominator: 2000

Time One can be an update or admission Colorado Client Assessment Record (CCAR).

Why this matters: People who maintain housing are more likely to have successful mental health outcomes and be able to maintain those outcomes.

Goal: **↑99.8%**



Trend: All of the regions range from 97% to 100%. The Southeast Colorado and Colorado Springs regions are performing mostly at 100%.

Notes: Data on mental health services are not available until 60 days after services are received.

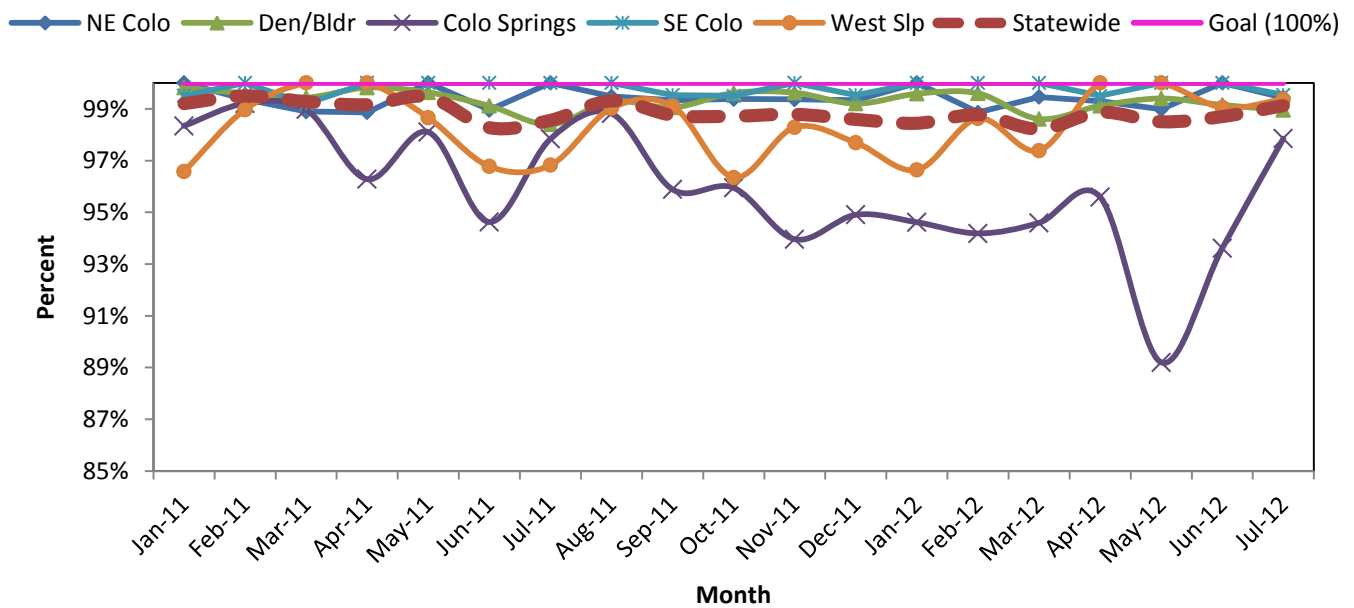
Division of Behavioral Health (DBH)

Measure: Percent of persons who maintained housing while receiving substance use disorder treatment

How it is measured: *Numerator:* Number of persons in treatment who maintained housing
Denominator: Number of housed persons at admission to substance use disorder treatment; Approximate monthly denominator: 900

Why this matters: People who maintain housing are more likely to have successful substance use outcomes and be able to maintain those outcomes.

Goal: ↑100%



Trend: All of the regions are hovering between 96% and 100% with the exception of Colorado Springs, which typically performs around 94%, but has dipped as low as 89% in May 2012.

Division of Behavioral Health (DBH)

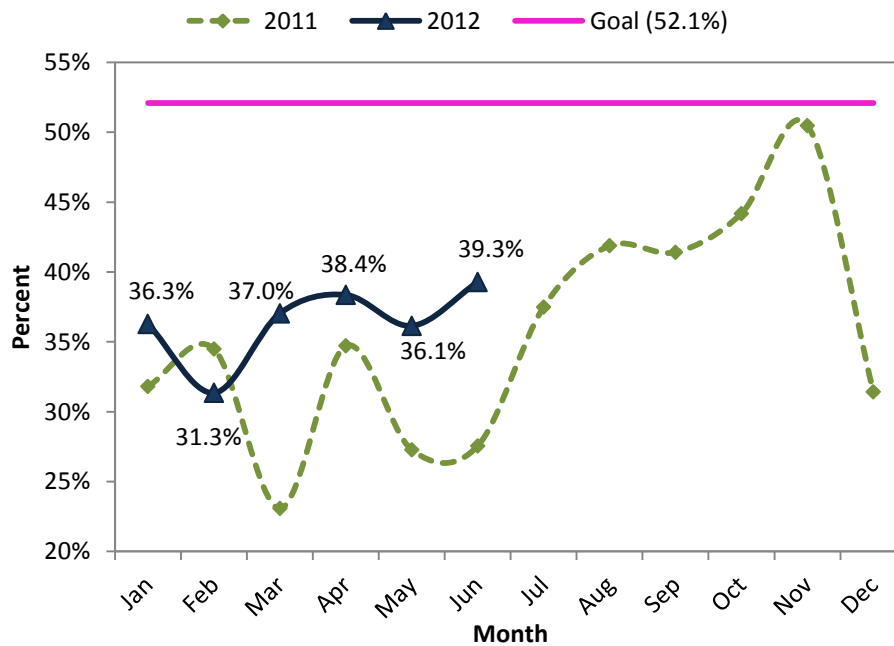
Measure: **Percent of homeless persons who moved into housing while receiving mental health services**

How it is measured: *Numerator:* Number of homeless persons in treatment who moved into housing
Denominator: Number of homeless persons (at Time One) discharged after receiving mental health services; Approximate monthly denominator: 60

Time One can be an update or admission Colorado Client Assessment Record (CCAR).

Why this matters: People who attain housing are more likely to have successful mental health outcomes and be able to maintain those outcomes.

Goal: **↑52.1%**



Trend: In 2012, the percentages have been between 31% and 39%.

Notes: Given that the population captured in this measure is approximately 60 people per month, data are not broken out regionally in the graph.

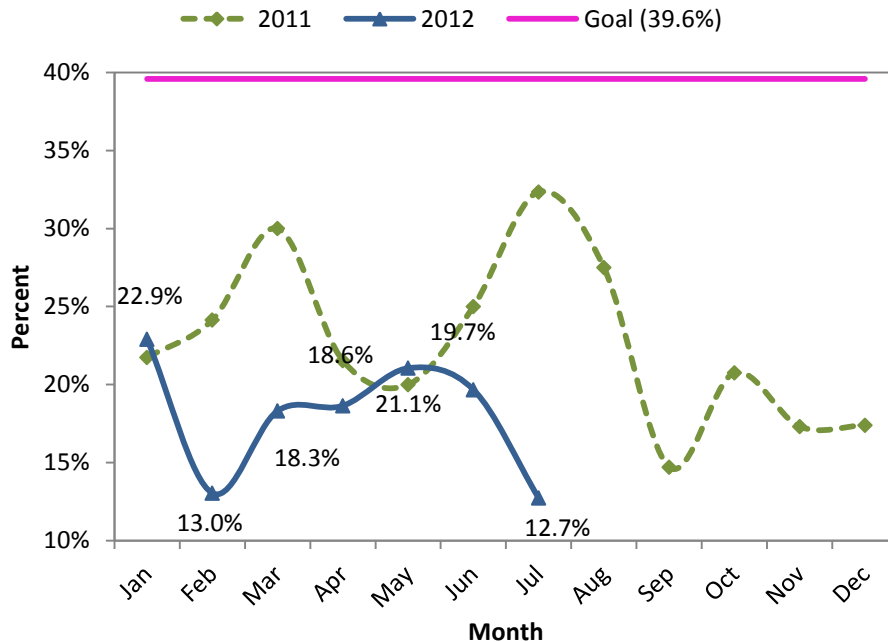
Division of Behavioral Health (DBH)

Measure: **Percent of homeless persons who moved into housing while receiving substance use disorder treatment**

How it is measured: *Numerator:* Number of homeless persons in treatment who moved into more stable housing
Denominator: Number of homeless persons (at admission) receiving substance use disorder treatment; Approximate monthly denominator: 60

Why this matters: People who attain housing are more likely to have successful substance use outcomes and be able to maintain those outcomes.

Goal: **↑39.6%**



Trend: In 2012, the percentages have ranged between 12% and 23%.

Notes: Given that the population captured in this measure is approximately 60 people per month, data are not broken out regionally in the graph.

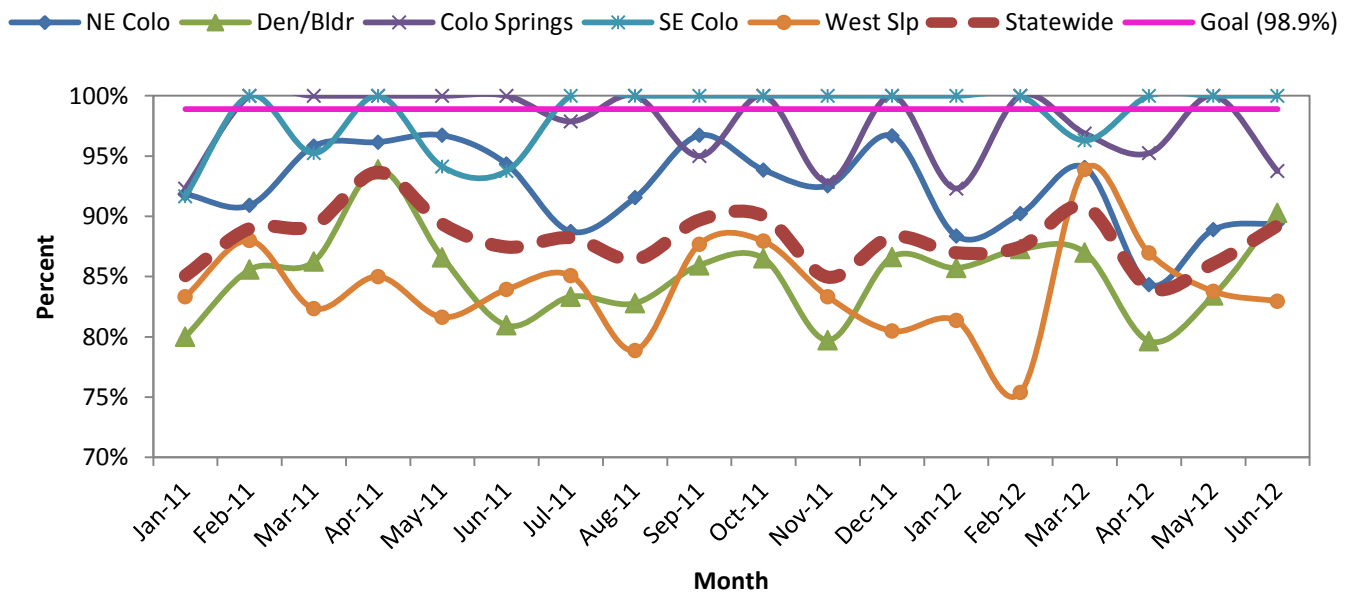
Division of Behavioral Health (DBH)

Measure: Percent of persons who maintained employment at discharge from mental health services

How it is measured: *Numerator:* Number of persons in treatment who maintained employment at discharge
Denominator: Number of discharged persons employed at admission; Approximate monthly denominator: 450

Why this matters: People who maintain employment are more likely to have successful mental health outcomes and be able to maintain those outcomes.

Goal: ↑98.9%



Trend: Most of the regions are hovering between 80% and 100%. The Southeast region was at 100% for 13 of the 18 months displayed. The Western Slope has had two months dipping below 80%.

Notes: Data on mental health services are not available until 60 days after services are received.

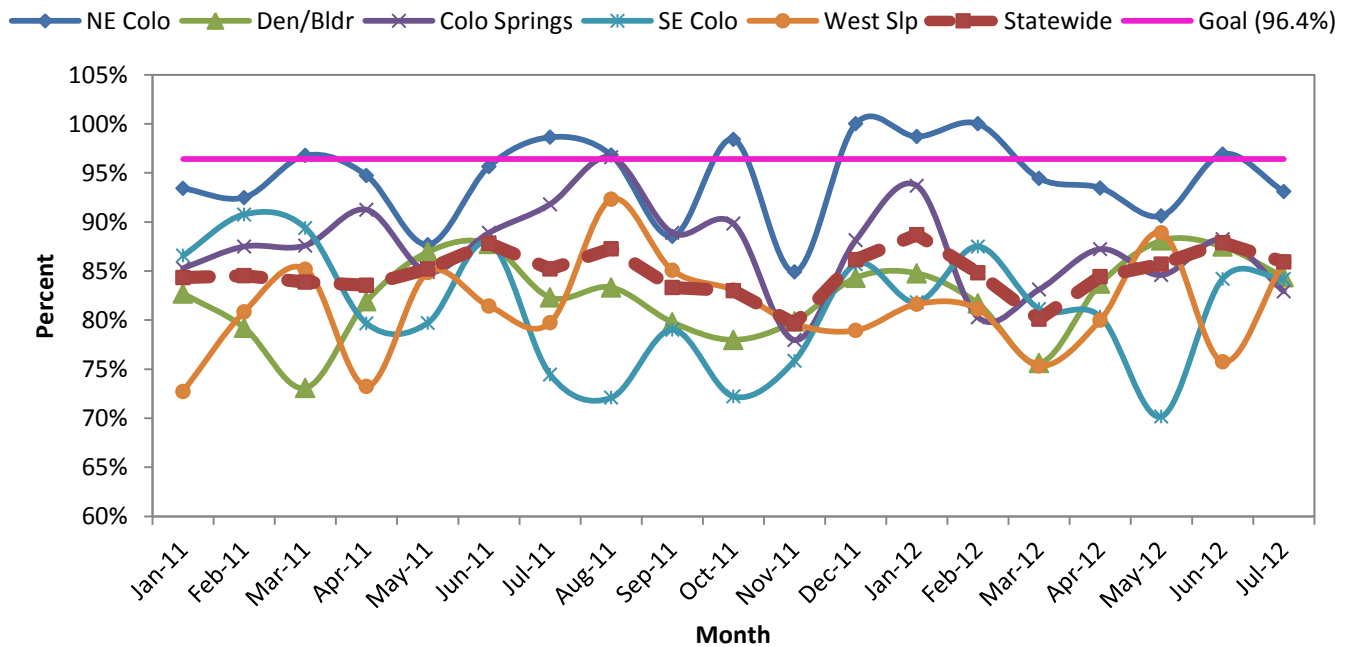
Division of Behavioral Health (DBH)

Measure: **Percent of persons who maintained employment at discharge from substance use disorder treatment**

How it is measured: *Numerator:* Number of persons in treatment who maintained employment at discharge
Denominator: Number of discharged persons employed at admission; Approximate monthly denominator: 400

Why this matters: People who maintain employment are more likely to have successful substance use outcomes and be able to maintain those outcomes.

Goal: **↑96.4%**



Trend: Most of the regions are hovering between 70% and 90%. The Northeast region is the only region that has exceeded the goal (7 of the 19 months).

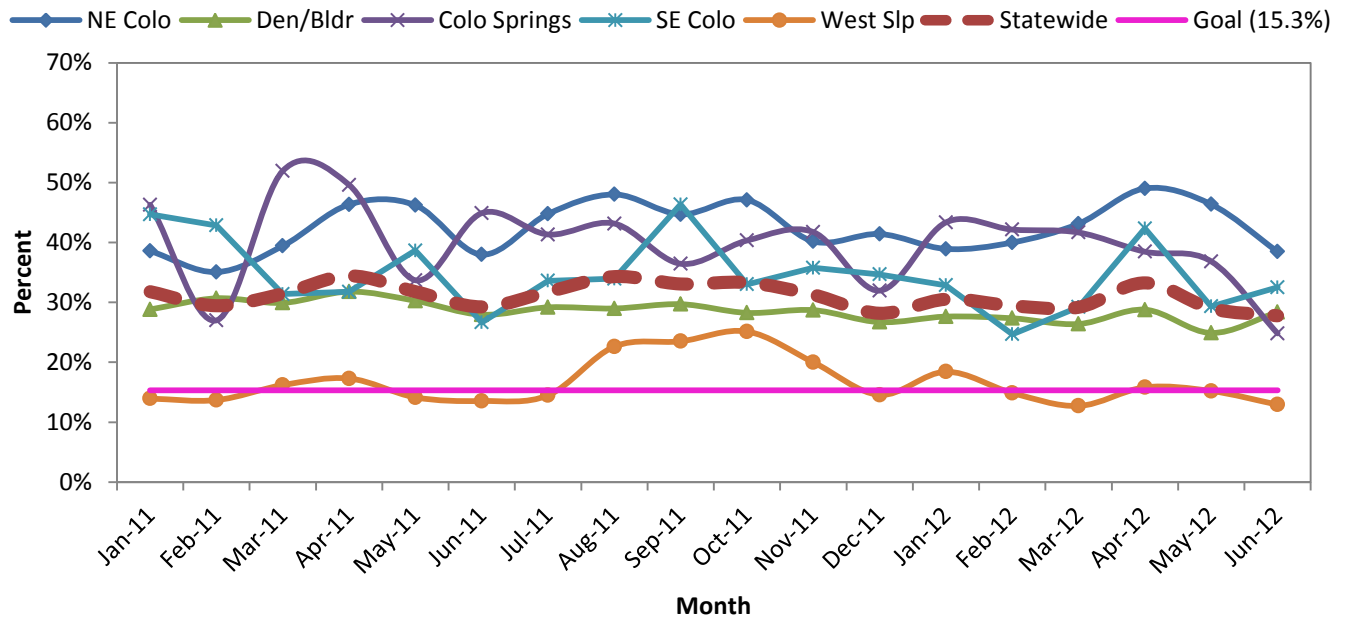
Division of Behavioral Health (DBH)

Measure: **Percent of persons who did not complete mental health treatment**

How it is measured: *Numerator:* Number of persons discharged from mental health treatment with client initiated discharge
Denominator: Number of persons discharged from mental health treatment;
 Approximate monthly denominator: 980

Why this matters: Completing treatment improves the likelihood that people will not suffer from mental health symptoms.

Goal: **↓15.3% (Modified)**



Trend: Most of the regions are hovering between 20% and 50%. The Western Slope has met the goal of 15.3% in 10 of the 19 months.

Notes: Data on mental health services are not available until 60 days after services are completed.

The data and goal for this measure were modified since the last report as methodology was changed to include people who were without Medicaid at some point during their treatment span.

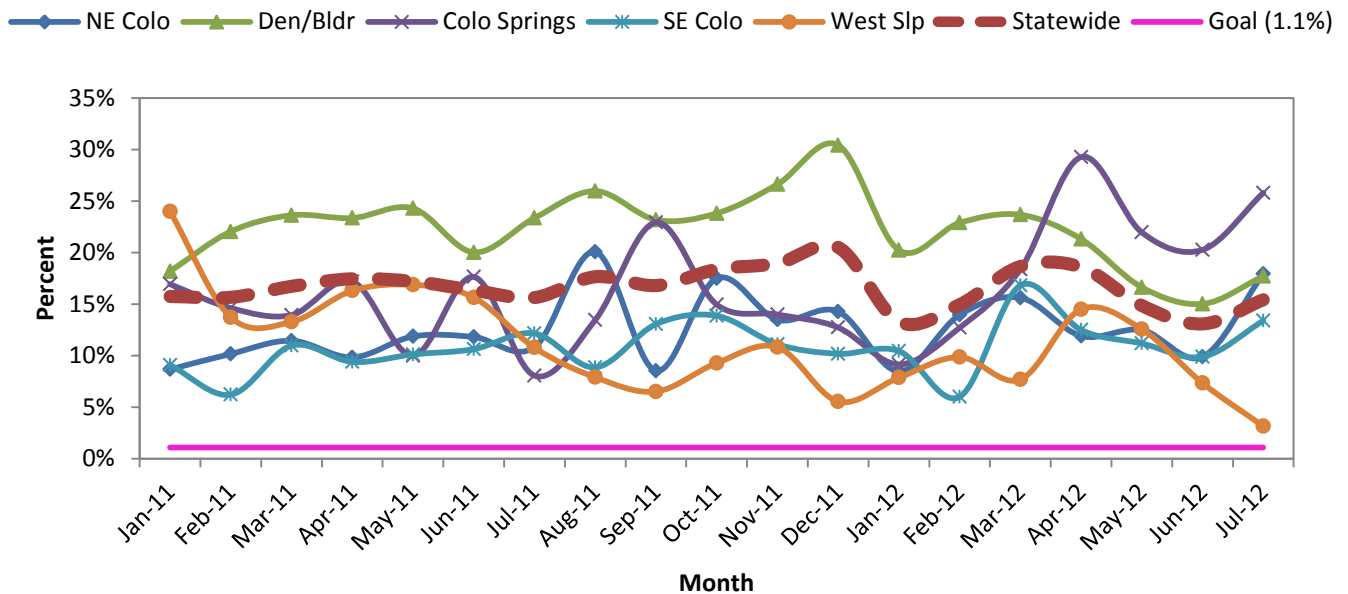
Division of Behavioral Health (DBH)

Measure: **Percent of persons who did not complete substance use disorder treatment**

How it is measured: *Numerator:* Number of persons discharged from substance use disorder treatment with client initiated discharge
Denominator: Number of persons discharged from substance use disorder treatment; Approximate monthly denominator: 1,175

Why this matters: Completing treatment improves the likelihood that people will not be impaired by substance use.

Goal: **↓1.1%**



Trend: The Denver/Boulder region’s drop-out rates have declined in this calendar year while Colorado Springs’ have risen. The Western Slope recorded the lowest drop-out rate of 3.2% in July 2012.

Mental Health Institutes

Summary

Description

The Mental Health Institute (MHI) Division operates the two state psychiatric hospitals: The Colorado Mental Health Institute at Fort Logan (CMHIFL) and the Colorado Mental Health Institute at Pueblo (CMHIP). CMHIFL and CMHIP work with the Community Mental Health Centers and mental health professionals, patients, families, and mental health advocacy groups toward the goal of preparing patients to return to their homes and communities.

CMHIFL serves adult clients in the civil mental health system. Civil clients are referred for admission by the state's Community Mental Health Centers.

CMHIP serves clients in the civil mental health system as well as forensic clients. CMHIP's Institute for Forensic Psychiatry serves adults who are found Not Guilty by Reason of Insanity or Incompetent to Proceed (defendants unable to assist in their own defense). CMHIP also provides evaluations of competency to stand trial for individuals referred for evaluation by the state's courts.

Director: Ken Cole

Executive Summary

- MHI has identified nine performance measures to be examined on a monthly basis. Both institutes are evaluating the use of *Seclusion* and *Restraint, Barriers to Discharge*, and *Readmissions*. CMHIP has one measure specific to the forensic population.
- MHI compares its performance to the National Association of State Mental Health Program Directors Research Institute (NRI) data, when available.
- CMHIP is currently reporting the *Percentage of Patients with Wait Time over 28 Days*.
 - From December 2011 through September 2012, CMHIP conducted five LEAN Rapid Improvement Events to examine and shorten the competency and restoration process. By more efficiently serving patients, CMHIP aims to increase bed availability.
 - CMHIP met their 0% goal starting in July 2012.

Measures

- Seclusion Use-[Fort Logan](#), [Pueblo](#)
- Restraint Use-[Fort Logan](#), [Pueblo](#)
- [Percentage of Patients with Wait Time over 28 Days](#)
- Patients Waiting to Discharge-[Fort Logan](#), [Pueblo](#)
- Percent of Readmissions-[Fort Logan](#), [Pueblo](#)

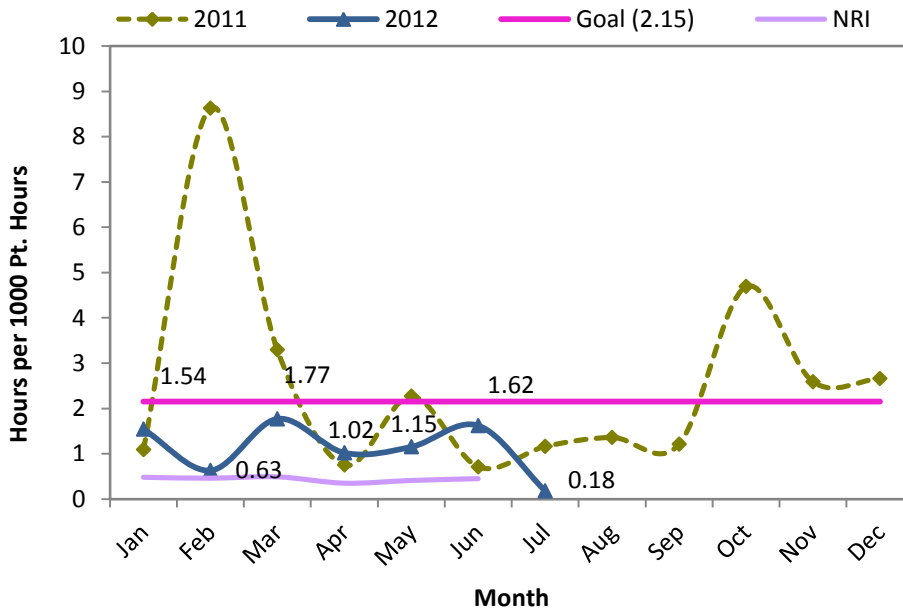
Mental Health Institutes (MHI)

Measure: **Rate of seclusion use-Fort Logan**

How it is measured: *Numerator:* Number of hours of seclusion
Denominator: Per 1,000 patient hours; Approximate monthly denominator: 66,000 Patient Hours

Why this matters: The use of seclusion creates significant risks for all individuals involved. The risks include serious injury or death, re-traumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Secluding a patient is viewed by the Institutes as a treatment failure.

Goal: **↓2.15**; The goal reflects a 15% reduction of the seclusion rates recorded in 2011.



Trend: Ft. Logan has met the goal for the first seven months of 2012. The rate of seclusion was lower than the NRI rate for the first time in July 2012.

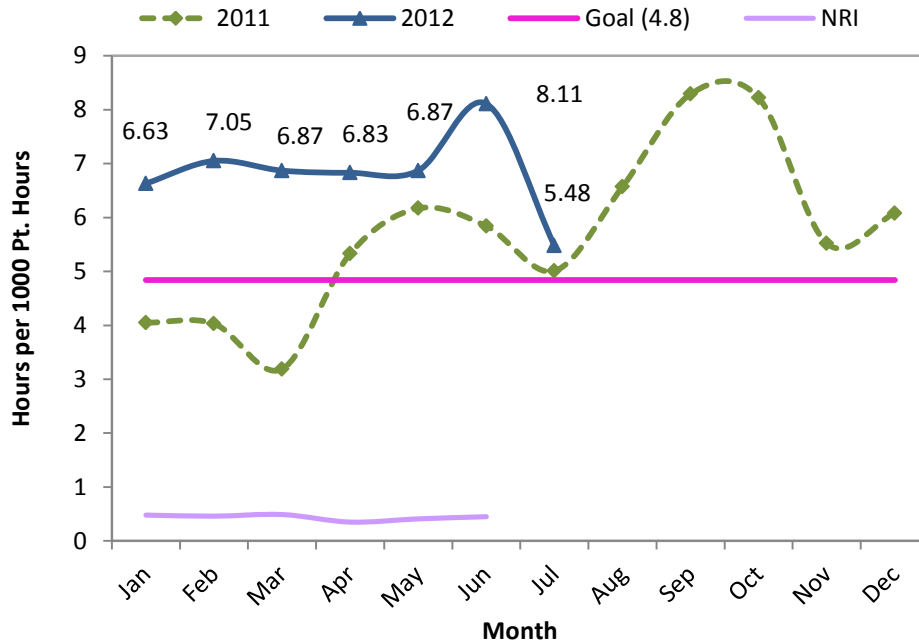
Mental Health Institutes (MHI)

Measure: **Rate of seclusion use-Pueblo**

How it is measured: *Numerator:* Number of hours of seclusion
Denominator: Per 1,000 patient hours; Approximate monthly denominator: 288,000 Patient Hours

Why this matters: The use of seclusion creates significant risks for all individuals involved. The risks include serious injury or death, re-traumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Secluding a patient is viewed by the Institutes as a treatment failure.

Goal: **↓4.80**; The goal reflects a 15% reduction of the seclusion rates recorded in 2011.



Trend: Rates in calendar year 2012 have been higher than last year's average rate (5.68), but decreased in July 2012.

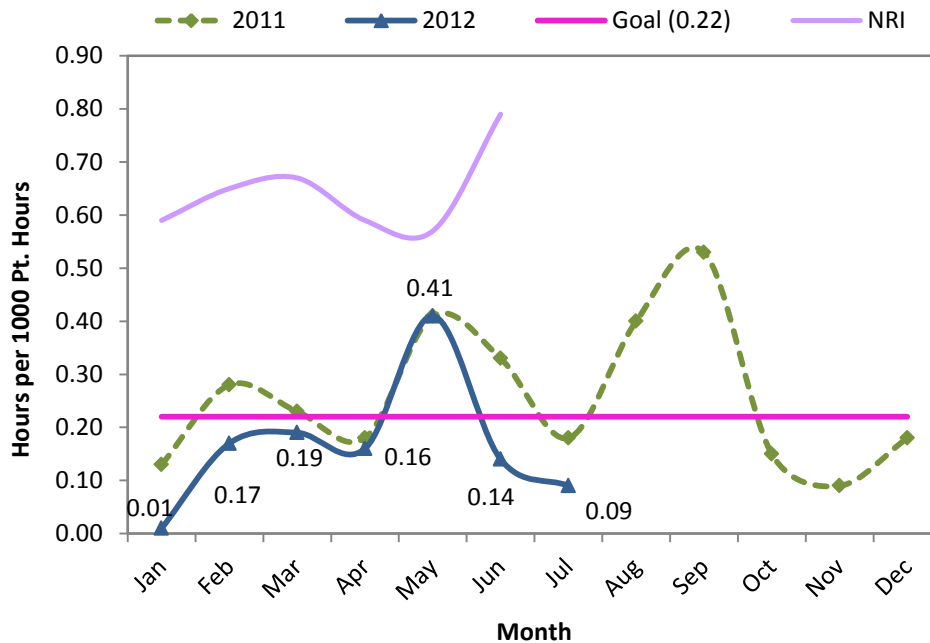
Mental Health Institutes (MHI)

Measure: **Rate of restraint use-Fort Logan**

How it is measured: *Numerator:* Number of hours of restraint
Denominator: Per 1,000 patient hours; Approximate monthly denominator: 66,000 Patient Hours

Why this matters: The use of restraint creates significant risks for all individuals involved. The risks include serious injury or death, re-traumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Restraining a patient is viewed by the Institutes as a treatment failure.

Goal: **↓0.22**; The goal reflects a 15% reduction of the restraint rates recorded in 2011.



Trend: Rates have remained below the goal rate for the first seven months of the 2012 calendar year, and well below the national rate.

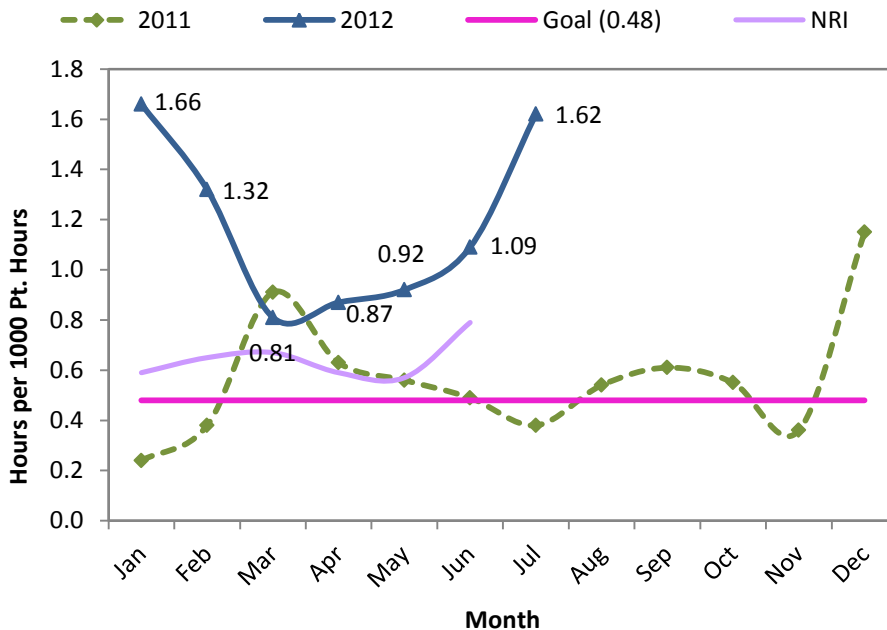
Mental Health Institutes (MHI)

Measure: **Rate of restraint use-Pueblo**

How it is measured: *Numerator:* Number of hours of restraint
Denominator: Per 1,000 patient hours; Approximate monthly denominator: 288,000 Patient Hours

Why this matters: The use of restraint creates significant risks for all individuals involved. The risks include serious injury or death, re-traumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Restraining a patient is viewed by the Institutes as a treatment failure.

Goal: **↓0.48**; The goal reflects a 15% reduction of the restraint rates recorded in 2011.



Trend: The rate has been increasing since March 2012. CMHIP has not met the intended goal this calendar year.

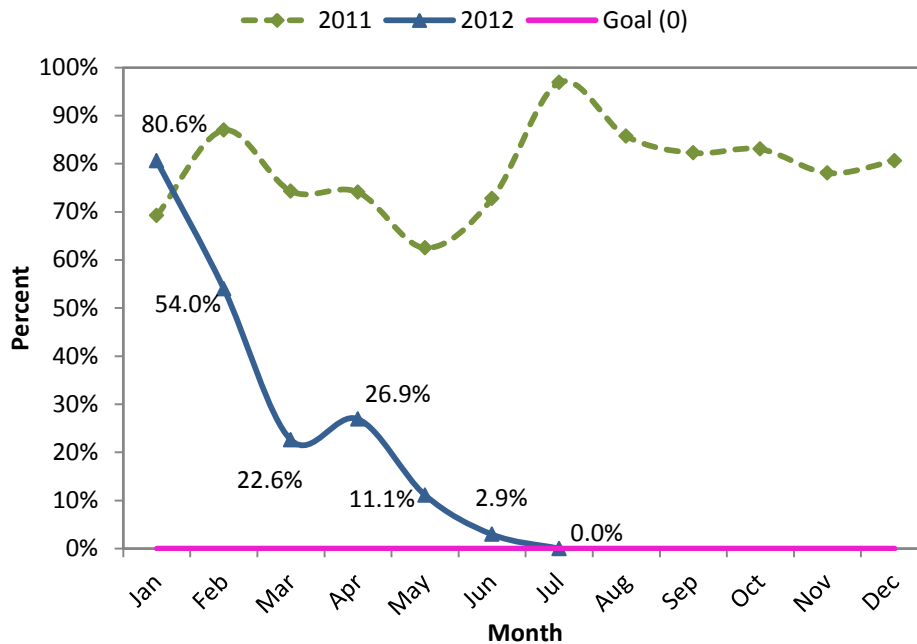
Mental Health Institutes (MHI)

Measure: **Percentage of patients with competency exam wait times over 28 Days-Pueblo**

How it is measured: *Numerator:* Number of all incompetent to proceed and competency exam patients who waited in jail over 28 days for admission
Denominator: Number of people who ended their wait in the month; Approximate monthly denominator: 35

Why this matters: 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.

Goal: **↓0%**



Trend: Declining since January 2012. Down to 0% in July 2012.

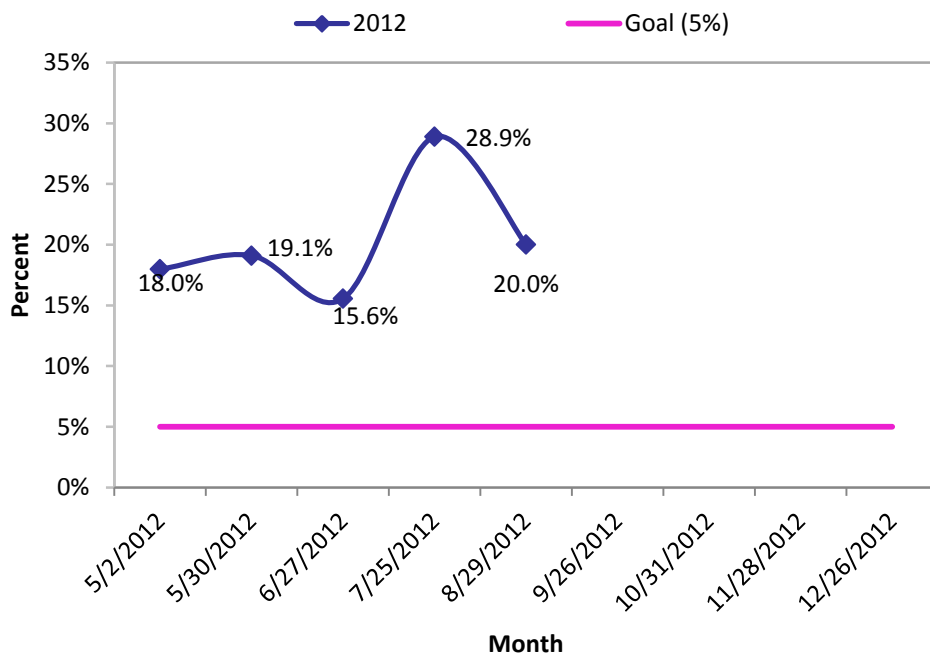
Mental Health Institutes (MHI)

Measure: **Percent of civil patients ready to discharge but have barriers-Fort Logan**

How it is measured: *Numerator:* Number of civil patients medically ready for discharge but have barriers
Denominator: Current number of civil patients; Approximate monthly denominator: 90

Why this matters: Individuals should be served in the least restrictive and most appropriate setting available to meet their needs, including in the community.

Goal: **↓5%**



Trend: The percent of patients ready, but unable, to be discharged hovers around 20%.

Notes: This measure was added in May 2012 hence no data are available prior to then.

Data represents a point in time.

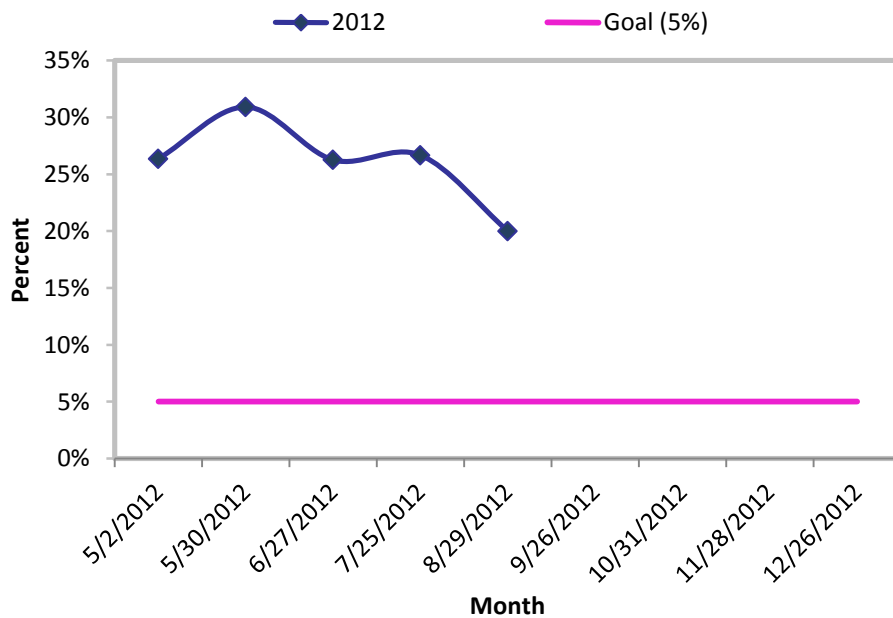
Mental Health Institutes (MHI)

Measure: **Percent of civil patients ready to discharge but have barriers-Pueblo**

How it is measured: *Numerator:* Number of civil patients medically ready for discharge but have barriers
Denominator: Current number of civil patients; Approximate monthly denominator: 110

Why this matters: Individuals should be served in the least restrictive and most appropriate setting available to meet their needs, including in the community.

Goal: **↓5%**



Trend: The rate has ranged from 20% to 30%.

Notes: This measure was added in May 2012 hence no Data are available prior to then.

Data represents a point in time.

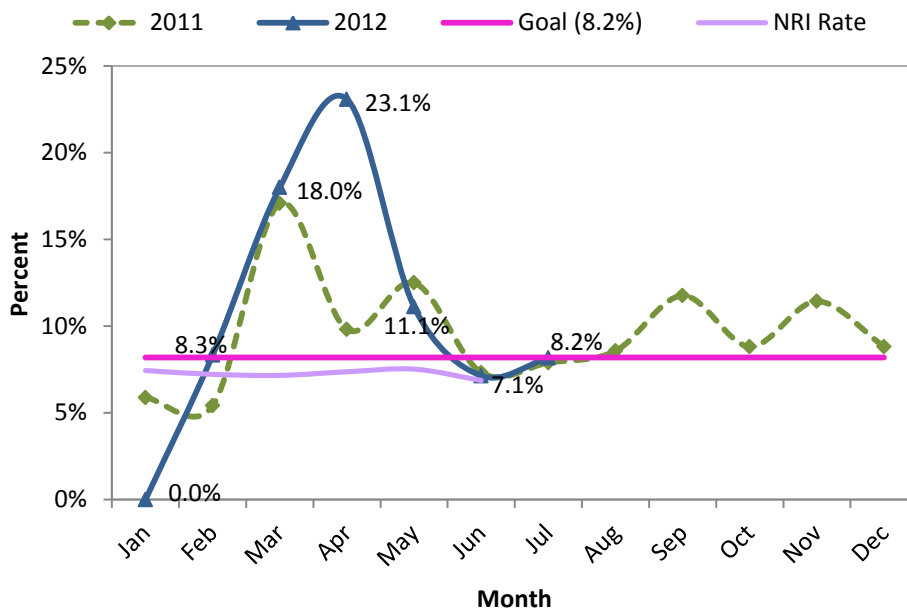
Mental Health Institutes (MHI)

Measure: **Percent of readmissions-Fort Logan**

How it is measured: *Numerator:* Number of patients readmitted within 30 days of discharge
Denominator: All patients discharged; Approximate monthly denominator: 38

Why this matters: A rapid readmission may reflect a failure of continuity of care between the hospital and the community provider, resulting in a patient suffering decompensation and subsequent need for hospitalization.

Goal: ↓8.2%; The goal reflects a 15% reduction of the readmission percent recorded in 2011.



Trend: Variable performance from 0% to 23%. Since April, rates have been declining.

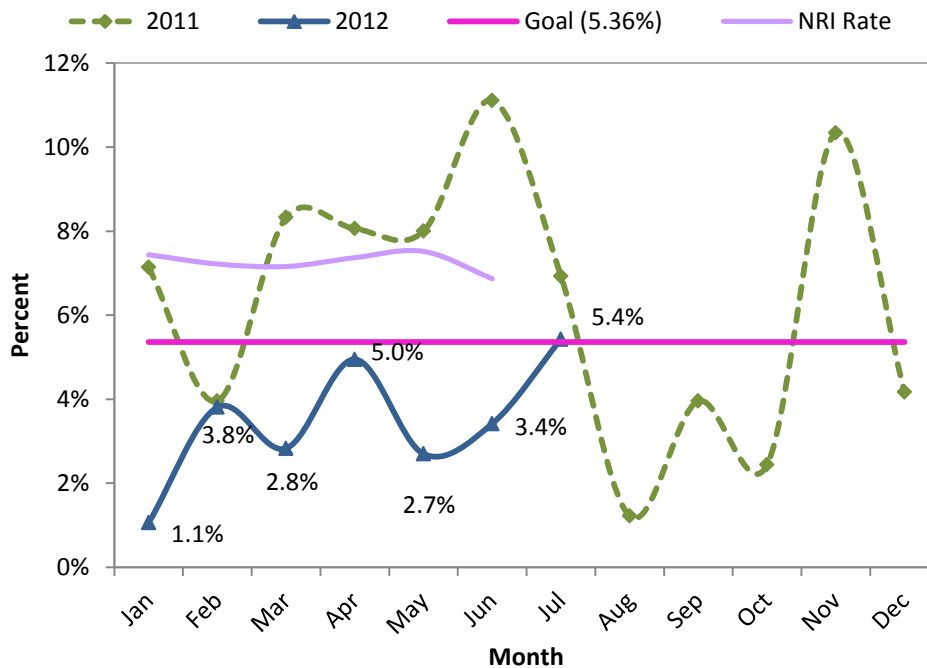
Mental Health Institutes (MHI)

Measure: **Percent of readmissions-Pueblo**

How it is measured: *Numerator:* Number of patients readmitted within 30 days of discharge
Denominator: All patients discharged; Approximate monthly denominator: 108

Why this matters: A rapid readmission may reflect a failure of continuity of care between the hospital and the community provider, resulting in a patient suffering decompensation and subsequent need for hospitalization.

Goal: ↓5.36%; The goal reflects a 15% reduction of the readmission percent recorded in 2011.



Trend: Great variance in readmissions from 1% to 11% over the past 19 months. In 2012, performance has met the goal for all but one month (July 2012).

Office of Children, Youth, and Families

Description

The Office of Children, Youth, and Families (OCYF) focuses on ensuring the safety and well-being of Colorado children and their families through the services provided by the Division of Child Care (DCC), the Division of Child Welfare (DCW), the Division of Youth Corrections (DYC), and the Domestic Violence Program (DVP). OCYF assists families who are in need of safe and affordable child care protects children at risk of abuse and/or neglect, provides structure and guidance for youth who have violated the law, and provides resources to families experiencing domestic violence.

Director: Julie Krow

Division of Child Care

Summary

Description

The Division of Child Care (DCC) is the State's lead agency in planning and implementing public child care policy. DCC is responsible for the licensing and monitoring of child care facilities, managing the Colorado Child Care Assistance Program (CCCAP) for eligible families, administering child care grants and quality initiatives, and serving as the lead in implementing federal child care programs. The overall goal of DCC is to promote quality, accessible and affordable child care services for Colorado families.

Acting Director: David Collins

Executive Summary

- *Accurate Child Care Reimbursement.* The Colorado Child Care Assistance Program (CCCAP) provides child care assistance to low-income families that are working, searching for employment or are in training, and families enrolled in the Colorado Works Program and need child care services to support their efforts toward self-sufficiency. Targeted improvement strategies by DCC at the county level have resulted in a substantial reduction in the percentage of total manual reimbursements, going from 22.7% in January 2012 to 11.2% in July 2012, in addition to considerably reducing the percentage of manual non-subsidized (sub) reimbursement going from 8.2% to 1.1% in the same months.
- *Timely Supervisory Inspections.* The Colorado Division of Child Care inspects child care homes and awards the license. They also are mandated to inspect homes on an ongoing basis. There are many different types of supervisory inspections. While all child care centers holding a permanent license are subject to routine inspection, other types of inspections are conducted in response to violations, complaints, or to confirm compliance after a violation was identified in a previous inspection. Typically, child care centers that have had complaints or have been found to be out of compliance with licensing are inspected more frequently.

Measures

- [Accurate Child Care Reimbursement](#)
- [Quality Rated Child Care Centers](#)
- [Timely Supervisory Inspections](#)

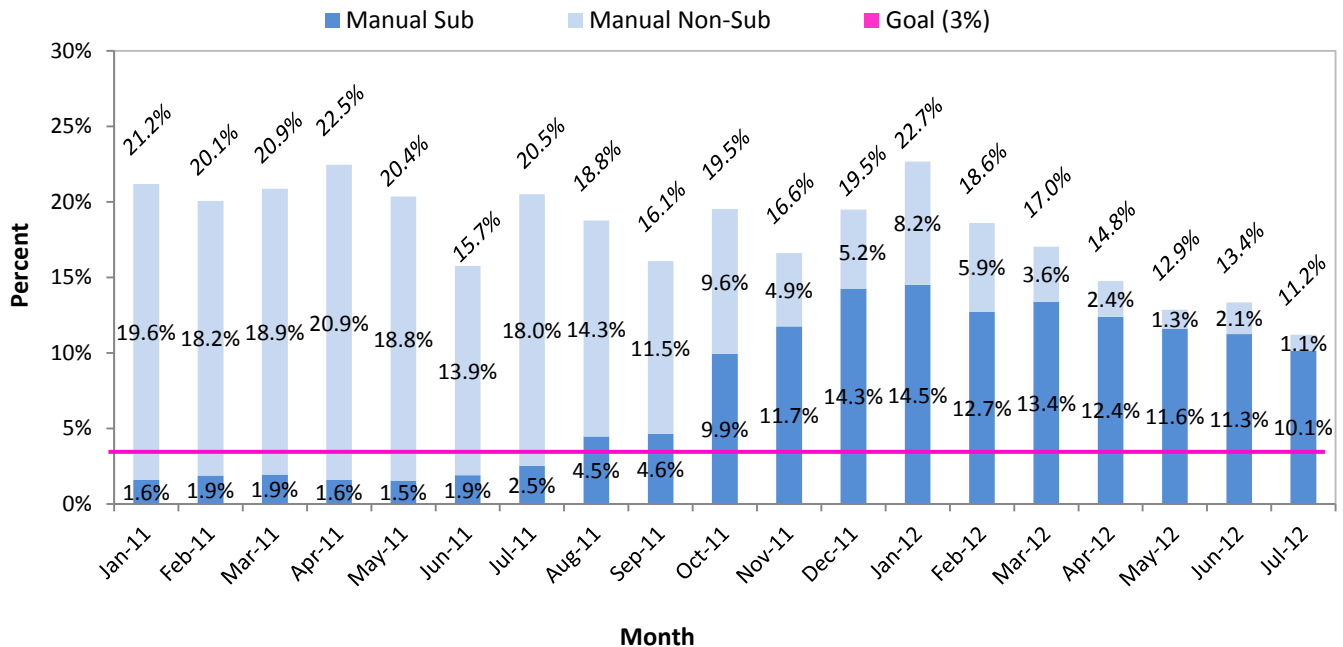
Division of Child Care (DCC)

Measure: **Accurate child care reimbursement**

How it is measured: *Numerator:* Amount, in dollars, of Colorado Child Care Assistance Program (CCCAP) manual subsidized (sub) and manual non-sub payments made to providers
Denominator: Total amount of all CCCAP payments (payment of service, manual sub, and manual non-sub), in dollars, paid to provider; Approximate monthly denominator: \$5,205,140

Why this matters: Manual reimbursement of child care expense increases the likelihood of payment errors, the opportunity for fraud by clients/providers, the ability to misreport federal agency on cost per child and utilization of program, and increases the potential that a county receives less in allocation due to under-reporting of utilization.

Goal: **↓3% combined, with manual non-sub payments being as minimal as possible**



Trend: Total manual reimbursements have gone from 22.7% in January 2012 to 11.2% in July 2012. In addition, manual non-sub reimbursements have gone from 8.2% to 1.1% in the same months.

Division of Child Care (DCC)

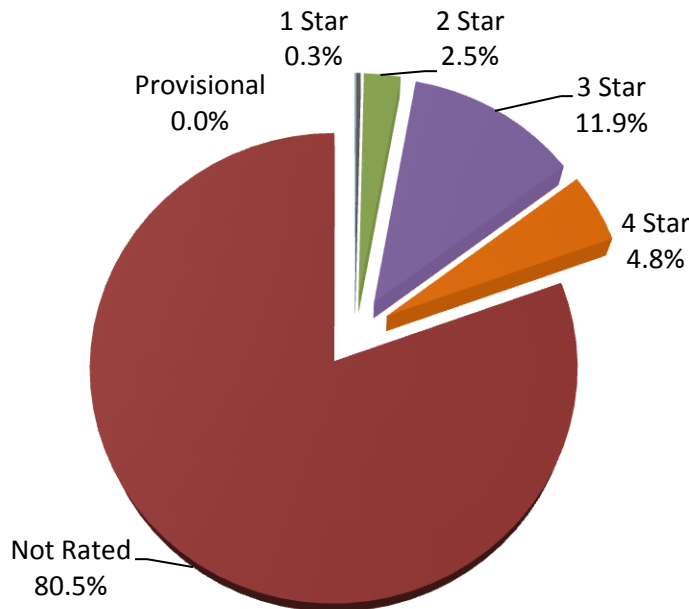
Measure: **Quality rated child care centers**

How it is measured: *Numerator:* Total number of child care centers with at least one quality rated classroom

Denominator: Total number of licensed child care centers and preschools;
Approximate monthly denominator: 2,128

Why this matters: Research has consistently supported positive outcomes associated with high quality early childhood experiences including, but not limited to, reduced racial, ethnic and socio-economic achievement gaps, reduced special education costs, increased high school graduation rates, reduced crime rates over time, with a very significant impact on public spending, increased employment, income and tax contribution levels, decreased public health care, welfare and child care expenses, and reduced grade repetition.

Goal: **↑**To be determined



Trend: As of July 2012, 19% (413) of the total 2,128 licensed child care centers and preschools in Colorado have a quality rating.

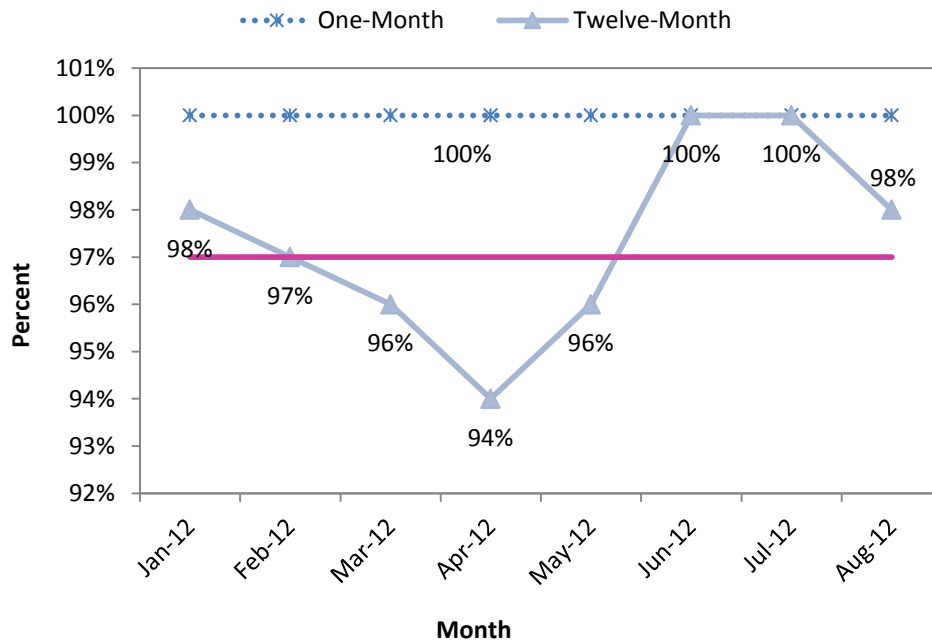
Division of Child Care (DCC)

Measure: **Timely child care center supervisory inspections**

How it is measured: *Numerator:* Total number of child care center one-month OR 12-month supervisory licensing inspections completed by the date the inspection is due in a specified month
Denominator: Total number of child care facilities on a one-month OR 12-month inspection cycle; Approximate monthly denominators: One-month inspections: 11, 12-month inspections: 57

Why this matters: Child care licensing exists to ensure the health and safety of children in care and to establish minimum standards for operation of child care facilities.

Goal: **↑97% (12-month inspections); 100% (One-month inspections)**



Trend: One-month supervisory inspections have been consistently timely 100% of the time, while twelve-month supervisory inspections have fluctuated between 94% and 100%.

Note: Reporting methodology was modified in January 2012, hence data are only available since that time.

Division of Child Welfare

Summary

Description

The Division of Child Welfare (DCW) provides supervision to counties who deliver Child Welfare services. Services provided through the counties are intended to protect children from harm and to assist families in caring for and protecting their children. Taken together, these programs comprise the main thrust of Colorado's effort to meet the needs of children who must be placed, or are at risk of placement, outside of their homes for reasons of protection or community safety.

Director: Lloyd Malone

Executive Summary

- Child Welfare has 12 measures across three outcome categories: safety, reducing time in care, and permanency and placement stability.
 - *Timeliness of Assessment Closure.* The goal for this measure was increased from 85% to 90% since the last report. Between May 2nd and September 12th, the total number of assessments open greater than 60 days went from 1,127 to 711 (36.9% percent reduction). As of Sep 12th, assessments open over 60 days constitute 20% of all open assessments. DCW is actively working to eliminate barriers to timely assessment closure including, better mechanisms for accountability, eliminating pre-existing backlog, and identifying county policy that conflicts with timely closures.
 - *Legally Freed Children.* DCW identified 43 youth turning 18 in SFY13 and has contacted the counties of those identified youth to discuss permanency plans and offer support, if needed. DCW has contacted counties who have had consistent success in placing youth, prior to emancipating from the system, to discuss strategies contributing to success with the intent of sharing those practices with other counties.
- Title IV-E agencies responsible for the placement, care or supervision of children is federally required to collect and submit data to the Adoption and Foster Care Analysis and Reporting System (AFCARS). As such, both Child Welfare and the Division of Youth Corrections (DYC) data are displayed, when appropriate.
- Data are also presented for differential response (DR) counties, where applicable.

Measures

Safety:

- [Timeliness of Response to Initial Abuse/Neglect Investigations](#)
- [Safety Assessment Forms Completed Accurately](#)
 - [Timeliness of Assessment Closure](#)
 - [Absence of Maltreatment Recurrence](#)
 - [Absence of Institutional Abuse or Neglect](#)
 - [Children Remain Home Safely throughout the Duration of the Case](#)

Reduce Time in Care:

- [Reunifications Occurring within 12 Months](#)
- [Median Length of Stay \(in months\) to Adoption](#)
- [Children in Out of Home Care for More than 24 and 36 Months](#)

Permanency and Placement Stability:

- [Children in Care for More than 24 Months with no More than 2 Placements](#)
- [Legally Freed Children Discharged to a Permanent Home Prior to their 18th Birthday](#)
- [Children Who do not Re-enter Care within 12 Months of Discharge](#)



Division of Child Welfare (DCW)

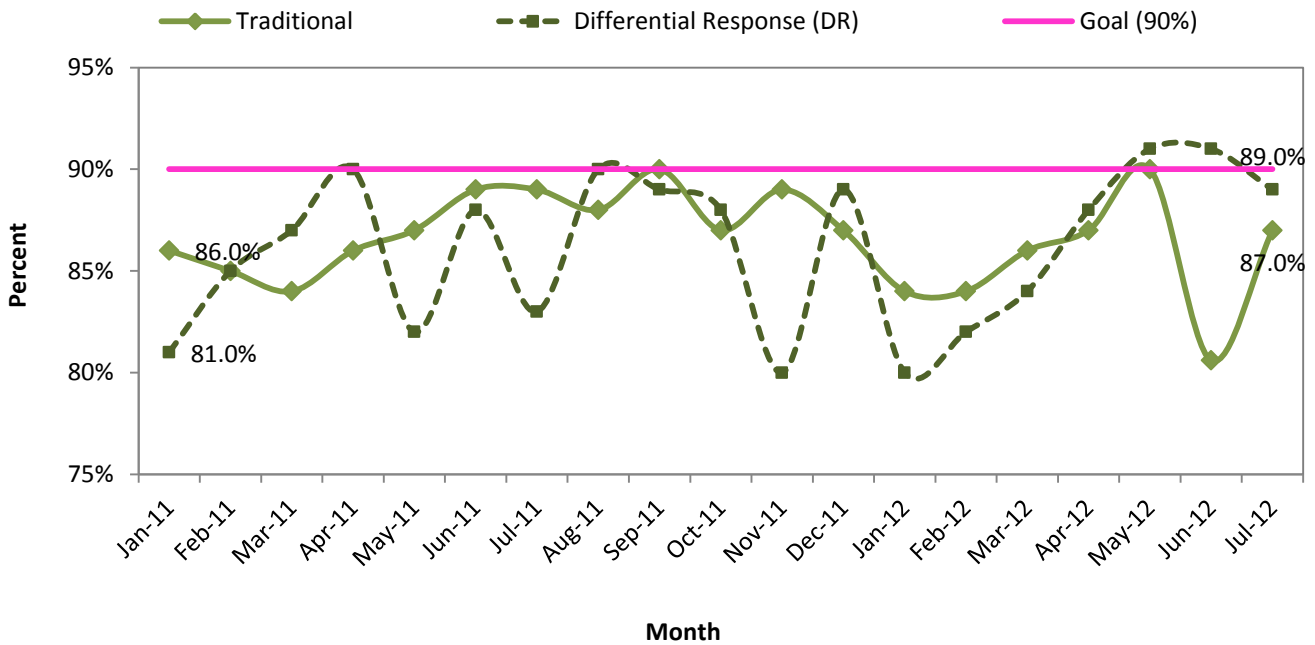
Measure: **Timeliness of response to initial abuse/neglect investigations**

How it is measured: *Numerator:* Number of investigations where initial contact was made within time requirements set in rule

Denominator: Total number of closed investigations; Approximate monthly denominators: Traditional: 3,571, Differential Response (DR): 319

Why this matters: A timely response to child protection inquiries increases the safety of children.

Goal: **↑90%**



Trend: Performance improved for traditional cases, while performance for DR cases declined slightly. Goal of 90% is often unmet.

Division of Child Welfare (DCW)

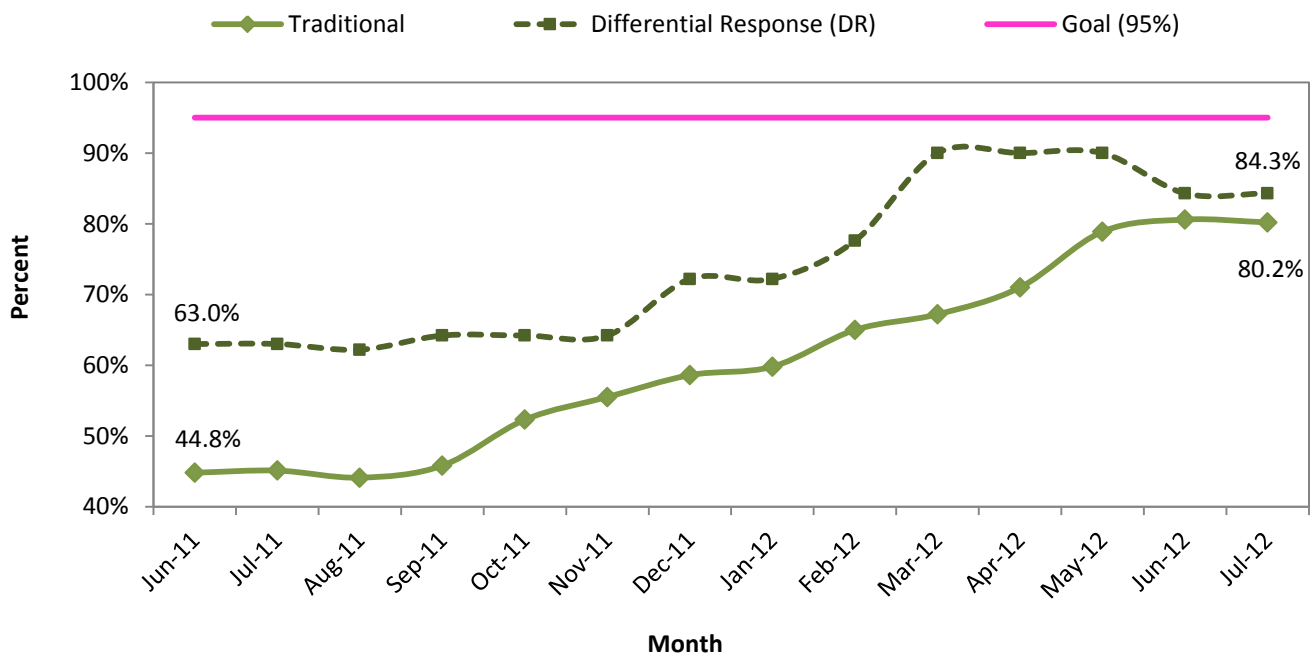
Measure: **Safety assessment forms completed accurately**

How it is measured: *Numerator:* Number of safety assessment forms completed accurately in accordance with state rule

Denominator: Total number of safety assessment forms completed; Approximate monthly denominators: Traditional: 816, Differential Response (DR): 55

Why this matters: Accurate completion of safety assessments increases the likelihood that the right decisions are being made in relation to a child’s safety.

Goal: **↑95%**



Trend: Traditional assessment accuracy has plateaued after several months of consistent improvement. For DR counties, performance declined slightly in recent months.

Notes: Data only available beginning in June 2011.

Data represents a statistically valid sample. In addition, each data point represents a rolling six-month timespan. Thus, every month new counties will come into the data, while some will drop out. Additionally, the Ten Large Counties are included in every data point, because they are reviewed at least once every six months, whereas, small and midsize counties are reviewed annually. Further, DR counties are not reviewed every month and, therefore, the performance will not change monthly.

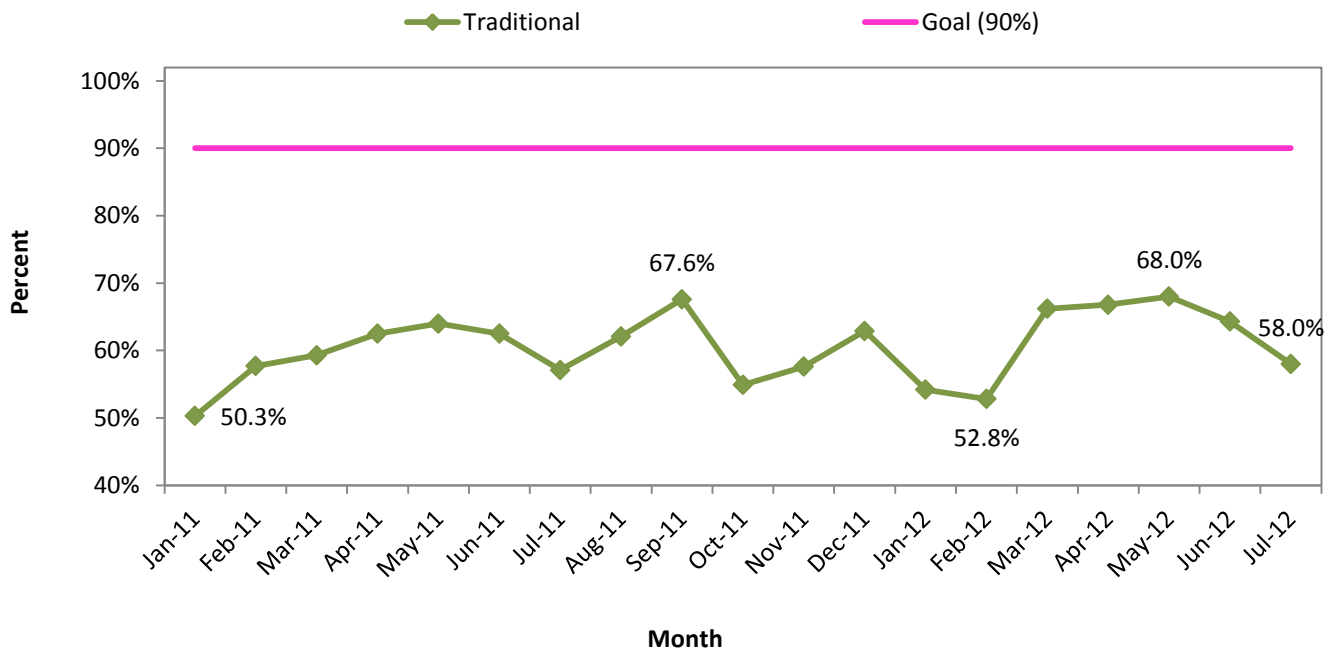
Division of Child Welfare (DCW)

Measure: **Timeliness of assessment closure**

How it is measured: *Numerator:* Number of assessments closed within 60 days of referral
Denominator: Total number of completed assessments; Approximate monthly denominator: Traditional: 2,359

Why this matters: Timely completion of assessments indicates 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.

Goal: **↑90% (Updated)**



Trend: Traditional assessment performance has declined 10% over the previous two months.

Notes: The decline in timeliness of assessment closure over the past two months coincides with concerted efforts by counties to clear their backlog of assessments that are open over 60 days.

This measure has been modified from earlier versions of the report by removing the data related to Differential Response.

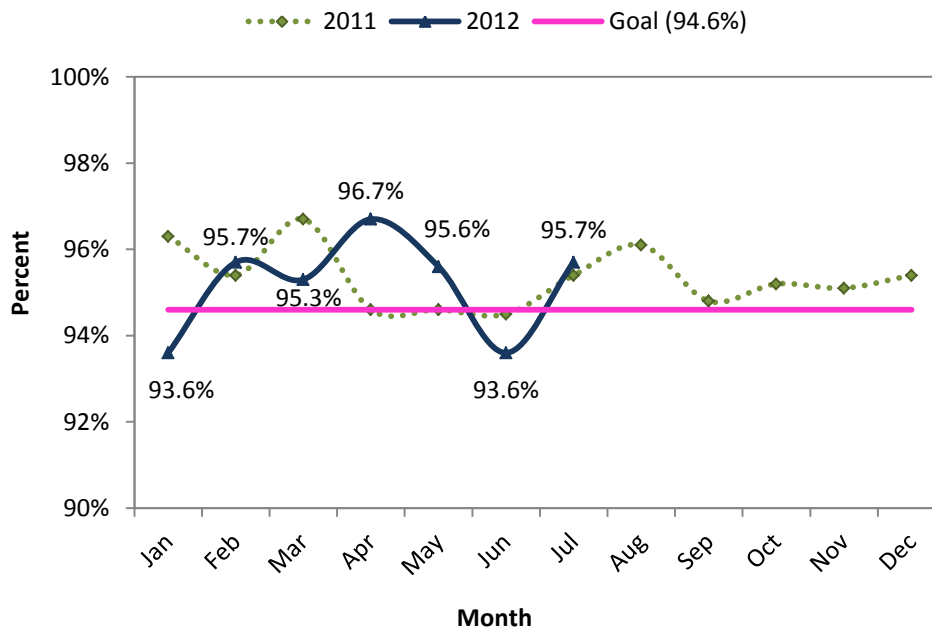
Division of Child Welfare (DCW)

Measure: **Absence of maltreatment recurrence (Federal Measure)**

How it is measured: *Numerator:* Number of children with founded abuse or neglect who do not experience subsequent founded abuse/neglect within 6 months
Denominator: Total number of children with founded abuse or neglect;
Approximate monthly denominator: 882

Why this matters: Children served in the child welfare system should not suffer recurrence of maltreatment.

Goal: **↑94.6% (Federal Goal)**



Trend: Performance declined for two consecutive months beginning in May of 2012, falling below the 94.6% goal in June 2012 for the first time in four months. Performance was again above the goal in July 2012.

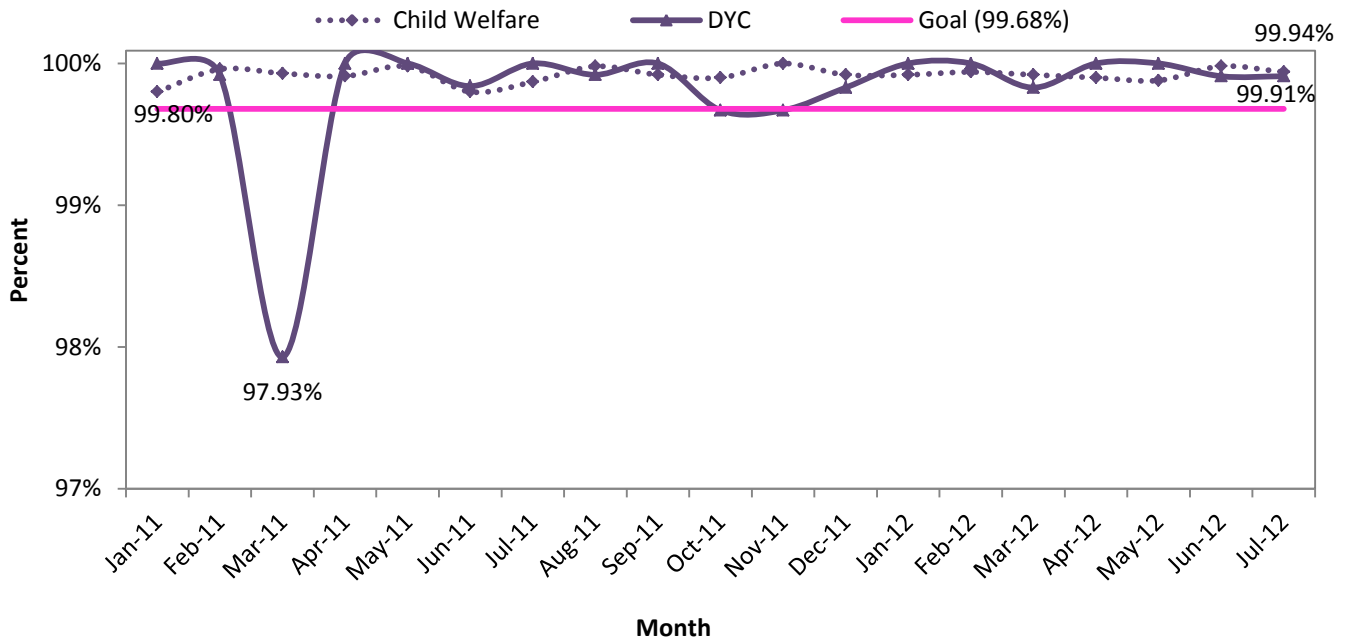
Division of Child Welfare (DCW)

Measure: **Absence of institutional abuse or neglect (Federal Measure)**

How it is measured: *Numerator:* All children who were not the subject of substantiated maltreatment by a foster parent or facility staff member during the specified month
Denominator: All children in out of home care for the specified month;
 Approximate monthly denominators: DCW: 5,122, Division of Youth Corrections (DYC): 1,173

Why this matters: No child placed into an out of home care setting should suffer maltreatment by their entrusted caretakers.

Goal: **↑99.68% (Federal Goal)**



Trend: Performance for both Child Welfare and DYC has exceeded the goal for the past eight months. DYC has dipped below the goal line on three occasions over the past year and a half.

Division of Child Welfare (DCW)

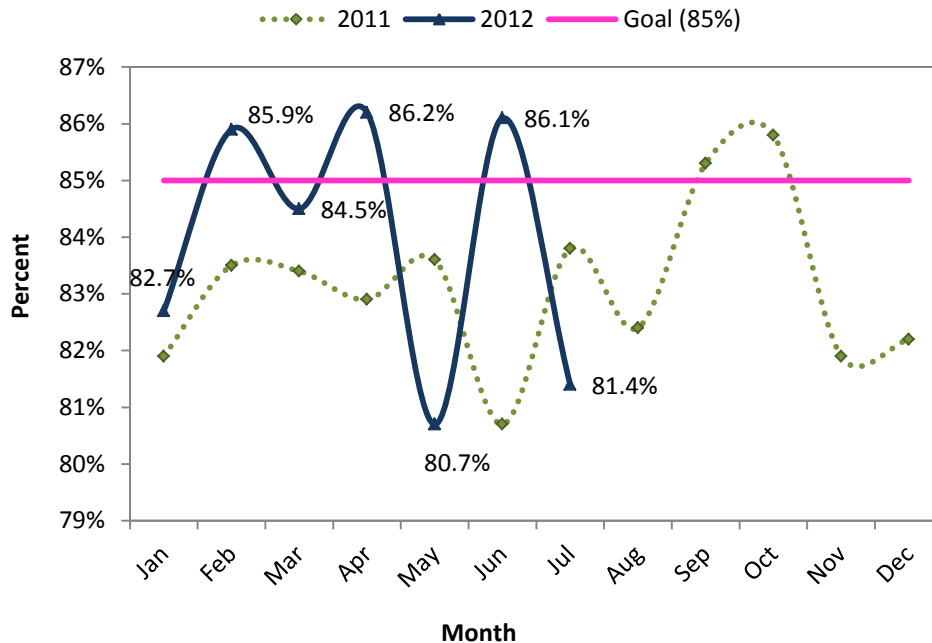
Measure: **Children remain home safely throughout the duration of the case**

How it is measured: *Numerator:* Number of children who were not initially placed in out of home care and who did not have an out of home care placement during their case involvement

Denominator: Total number of children who were not initially placed in out of home care; Approximate monthly denominator: 582

Why this matters: Colorado is responsible for putting the right services in place to keep children safely within their own homes, when possible.

Goal: **↑85%**



Trend: 2012 performance fluctuates between 80% and 86% and exceeds the 85% goal about half of the time.

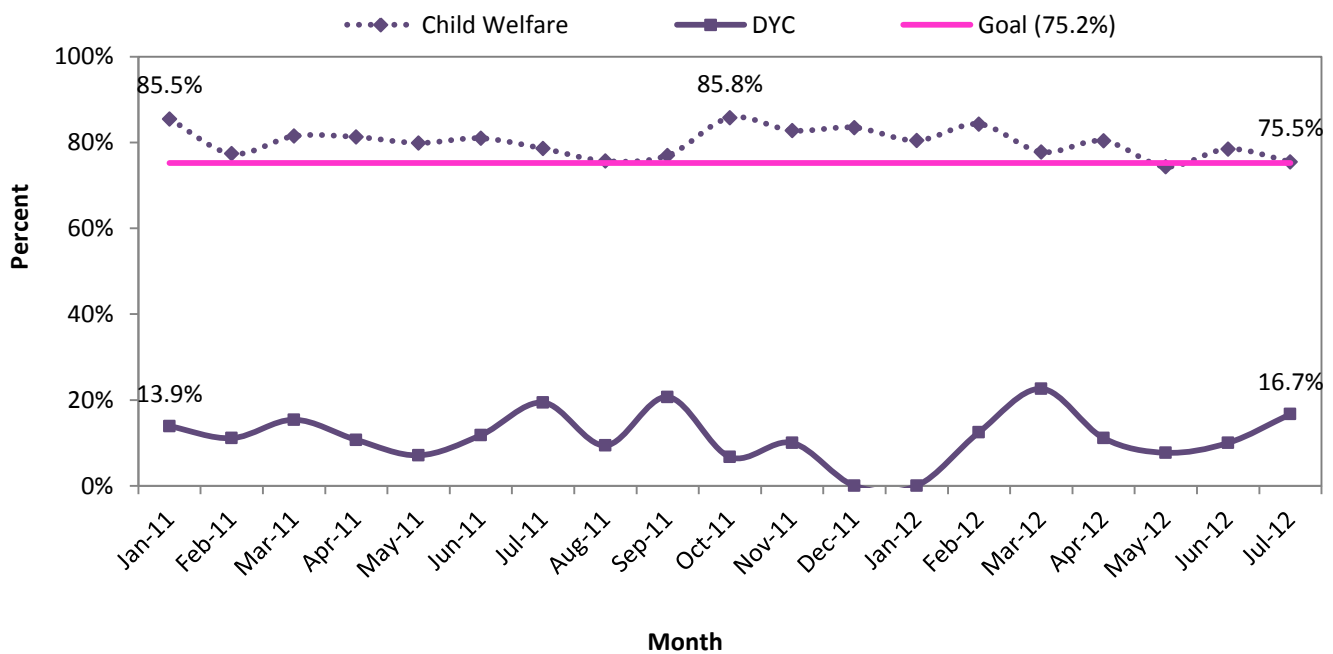
Division of Child Welfare (DCW)

Measure: **Reunifications occurring within 12 months (Federal Measure)**

How it is measured: *Numerator:* Number of reunifications occurring within 12 months of the date of removal
Denominator: Total number of children reunified in specified month; Approximate monthly denominators: Child Welfare: 218, Division of Youth Corrections (DYC): 26

Why this matters: Where reunification is the goal, a child should be reunified as quickly and as safely as possible to lessen the disruption and trauma out of home placement can cause.

Goal: **↑75.2% (Federal Goal)**



Trend: Child Welfare performance typically hovers around 80%; whereas DYC’s performance, largely influenced by the length of sentence, hovers between 10% and 20%.

Notes: Reunification is defined as reunifying with one’s family as well as going to live with other relatives after having been in out of home care.

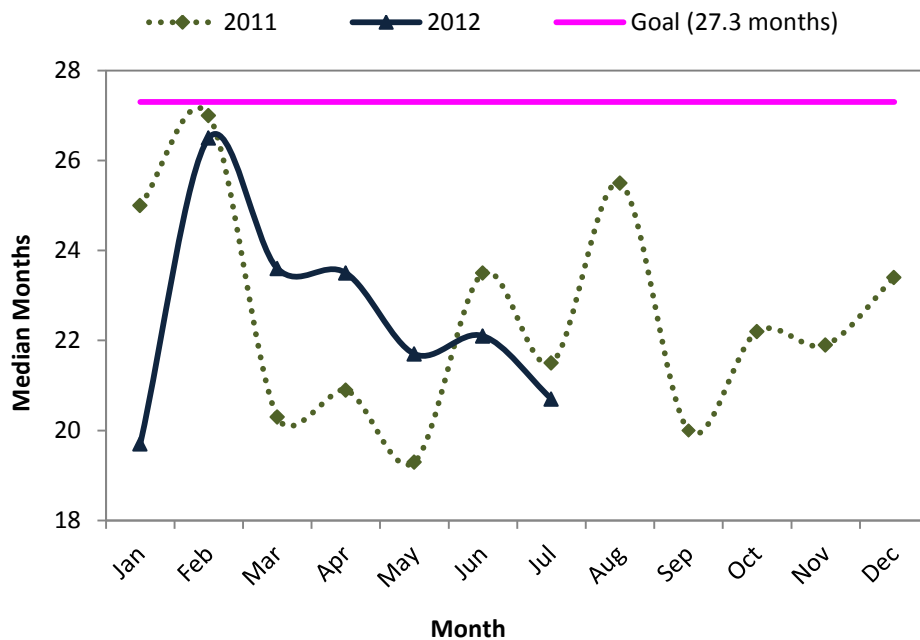
Division of Child Welfare (DCW)

Measure: **Median length of stay (in months) to finalized adoption (Federal Measure)**

How it is measured: Median length of stay in care (in months) for children discharged from foster care to a finalized adoption during the specified month; Approximate monthly denominator: 68

Why this matters: Where adoption is the goal, a child should be adopted as quickly and as safely as possible to lessen the disruption and trauma out of home care can cause.

Goal: **↓27.3 months (Federal Goal)**



Trend: Performance improved since February 2012 and continues to exceed the goal by more than six months.

Division of Child Welfare (DCW)

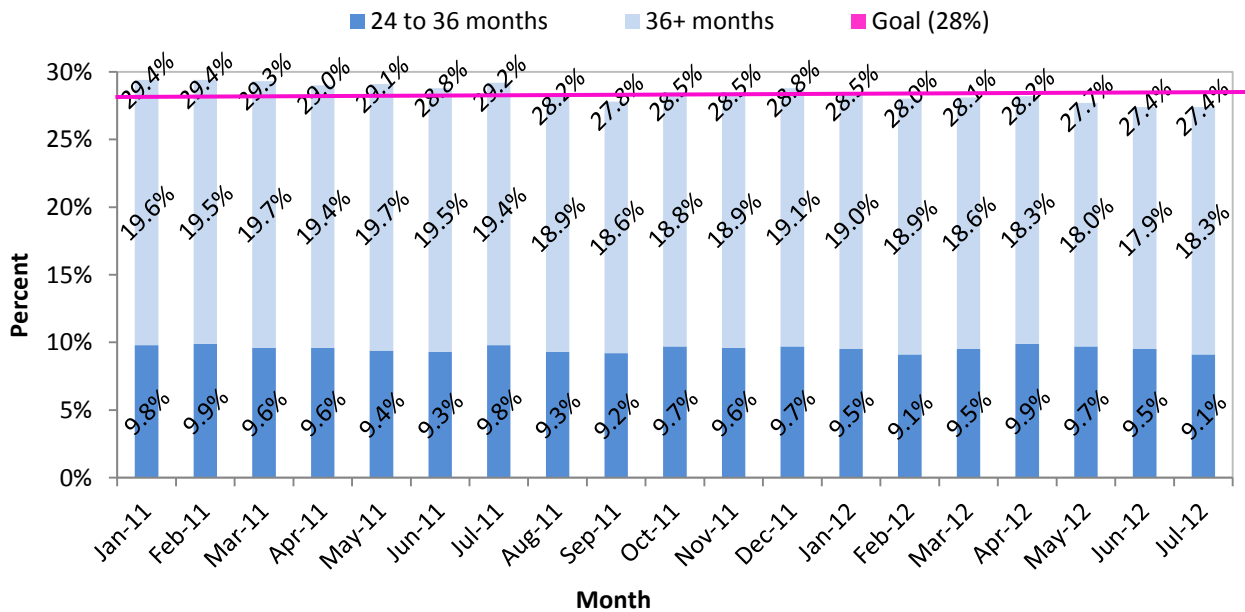
Measure: **Children in out of home care for more than 24 months (Federal Measure)**

How it is measured: *Numerator:* Number of children who have been in care 24+ on last day of specified month

Denominator: Total number of children in out of home care on last day of specified month; Approximate monthly denominator: 4,693

Why this matters: Children deserve a permanent home as quickly and as safely as possible to lessen the disruption and trauma out of home care can cause.

Goal: **↓28% (Federal Goal)**



Trend: Performance on this measure remains stable and has been slightly below the 28% goal for the past three months.

Note: Data are broken into those in care for 24 through 36 months and those in care for more than 36 months. The total percent of children in care for more than 24 months for that month is represented at the top of the bar.

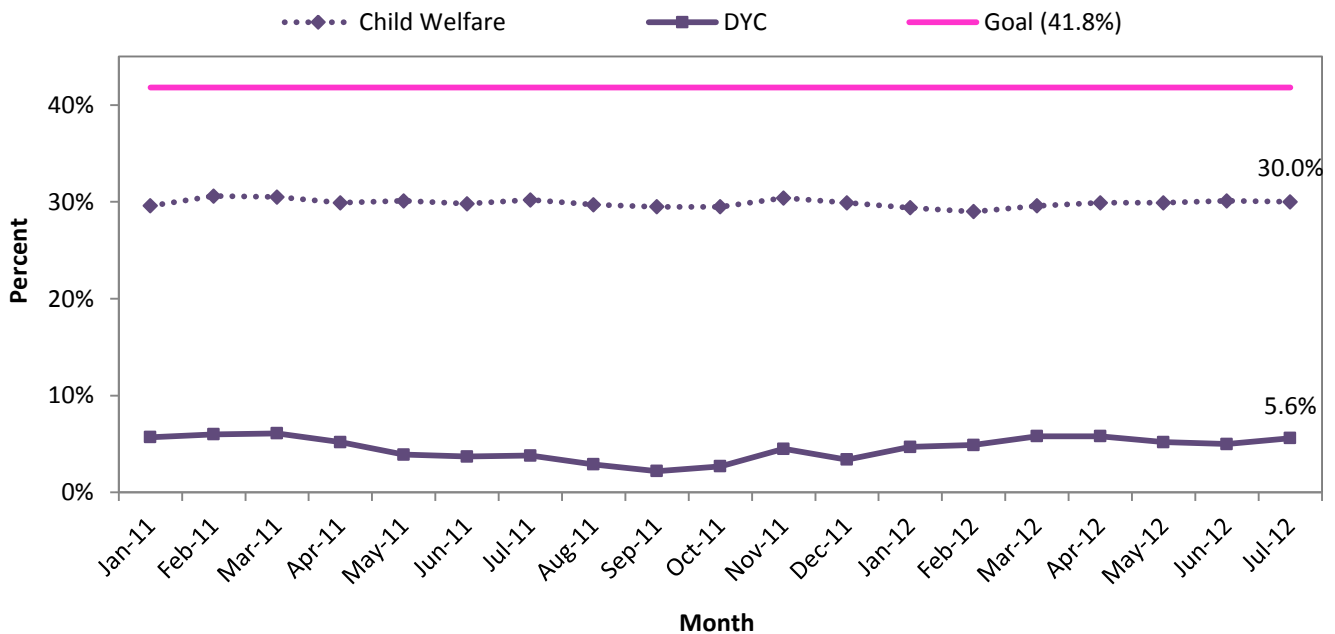
Division of Child Welfare (DCW)

Measure: **Children in care for more than 24 months with no more than 2 placements (Federal Measure)**

How it is measured: *Numerator:* Number of children in out of home care for 24+ months with no more than two placements
Denominator: Number of children in out of home care for 24+ months; Approximate monthly denominators: Child Welfare: 1,408, Division of Youth Corrections (DYC): 252

Why this matters: Children in foster care have better outcomes given a more stable environment.

Goal: **↑41.8% (Federal Goal)**



Trend: Performance remains stable for both Child Welfare and DYC and continues to fall considerably below the 41.8% goal.

Division of Child Welfare (DCW)

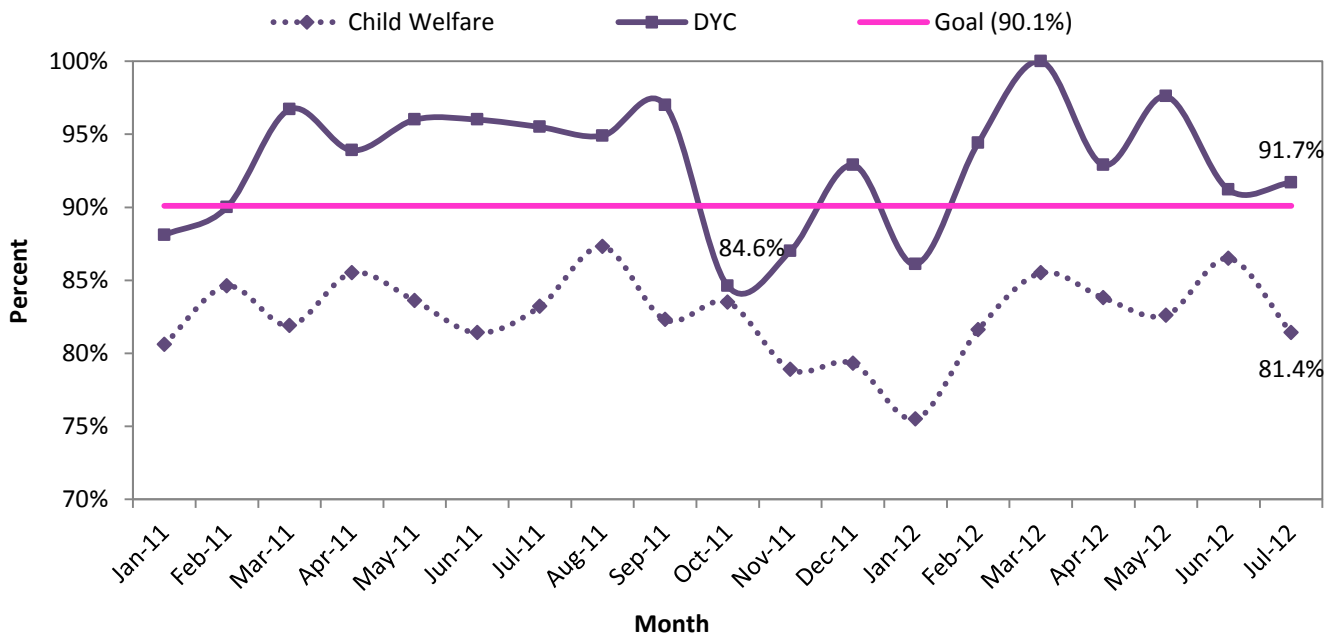
Measure: **Children who do not re-enter care within 12 months of discharge (Federal Measure)**

How it is measured: *Numerator:* Number of children reunified during date range who do not re-enter out of home care within 12 months

Denominator: Total number of children whose out of home case involvement ended;
 Approximate monthly denominators: Child Welfare: 281, Division of Youth Corrections (DYC): 36

Why this matters: Children should remain safe and not re-enter out of home care once placed in a permanent home.

Goal: **↑90.1% (Federal Goal)**



Trend: Performance for both Child Welfare and DYC fluctuates. DYC continues to exceed the 90.1% goal, while it remains unmet for Child Welfare.

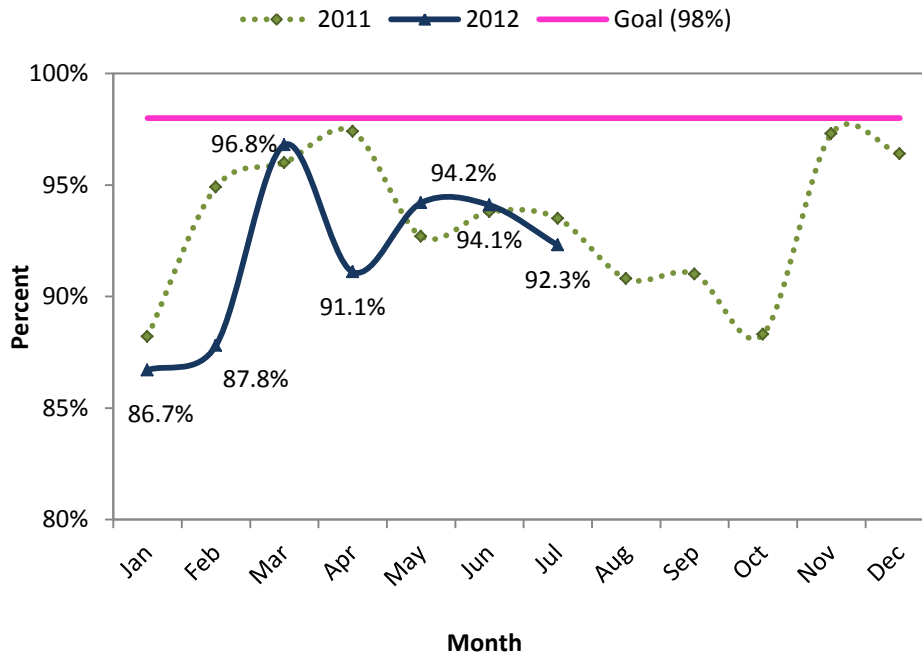
Division of Child Welfare (DCW)

Measure: **Legally freed children discharged to a permanent home prior to their 18th birthday (Federal Measure)**

How it is measured: *Numerator:* Number of children who were legally free for adoption at the time of discharge who discharged to a permanent home prior to their 18th birthday
Denominator: Number of children who were legally free for adoption at the time of discharge; Approximate monthly denominator: 77

Why this matters: All children deserve a permanent family. If a child ages out of the child welfare system, that is considered a failure as they did not achieve permanency.

Goal: **↑98% (Federal Goal)**



Trend: Performance declined slightly in recent months. Goal remains unmet for the past year and a half.

Division of Youth Corrections

Summary

Description

The Division of Youth Corrections (DYC) provides juvenile detention, commitment and parole services to protect, restore, and improve public safety. DYC provides supervision for juvenile offenders, promotes offender accountability to victims and communities, and builds the skills and competencies of youth to become responsible citizens.

Director: John Gomez

Executive Summary

- DYC identified eight measures to monitor performance across four outcome categories: appropriate and timely placement, youth safety, youth progression, and recidivism.
- Reporting methodology for several measures were modified during the quarter reflected in this report.
 - The *Decrease in Dynamic Risk Factor Score* and the *Increase in Dynamic Protective Factor Score* measures were broken out by domain.
 - *Timeliness of Assessment Completion to Placement*: Previously, DYC reported this measure as the average number of days from assessment completion to first placement. The new methodology reports the percentage of youth who were placed within 40 days of commitment. The goal for this measure has been set at 95%.
 - *Youth Enrolled in an Educational Program at Discharge*: DYC expanded the definition for youth enrollment and/or employment and modified the Trails database accordingly. As a result, the title of this measure will be “Youth with a Full Time Program at Discharge” in future reports.
- Two new measures were added:
 - *Residential Escapes: Percent of Residential ADP*
 - *Rate of Youth Injuries (per 100 Youth) by Injury Source Category*
- The SB94 measures have been removed from the report and are monitored outside of the C-stat meetings.

Measures

Appropriate and Timely Placement:

- [Timeliness of Assessment Completion to Placement](#)

Youth Safety:

- [Residential Escapes](#)
- [Rate of Youth Injuries](#)

Youth Progression:

- [Decrease in Dynamic Risk Factor Score](#)
- [Increase in Dynamic Protective Factor Score](#)
- [Youth Enrolled in School or Employed at Discharge](#)

Recidivism:

- [Committed Youth in Residential Placements Who Do Not Acquire New Charges](#)
- [Committed Youth on Parole Who Do Not Acquire New Charges](#)

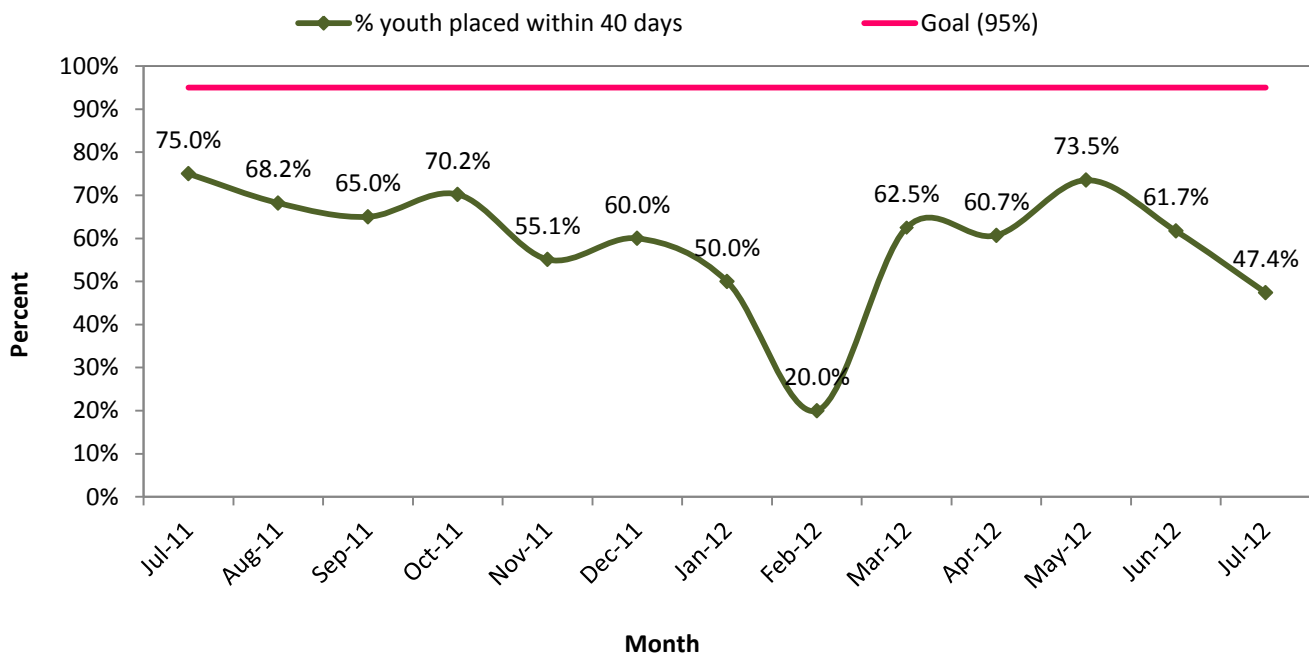
Division of Youth Corrections (DYC)

Measure: **Timeliness of assessment completion to placement (Modified)**

How it is measured: *Numerator:* Number of youth placed within 40 days of commitment
Denominator: Number of youth placed in initial placement in specified month;
 Approximate monthly denominator: 41

Why this matters: Once placed in a facility, following the assessment process, youth can begin to receive the program support and treatment needed to successfully reintegrate into the community.

Goal: **↓95% (Updated)**



Trend: Performance in the last 12 months fluctuates between 20% and 73%. The 95% goal has not yet been met.

Notes: Data only available beginning in July 2011. The methodology for reporting this measure was modified during the quarter reflected in this report. In the previous report, DYC reported this measure as the average number of days from assessment completion to first placement. The new methodology reports the percentage of youth who were placed within 40 days of commitment.

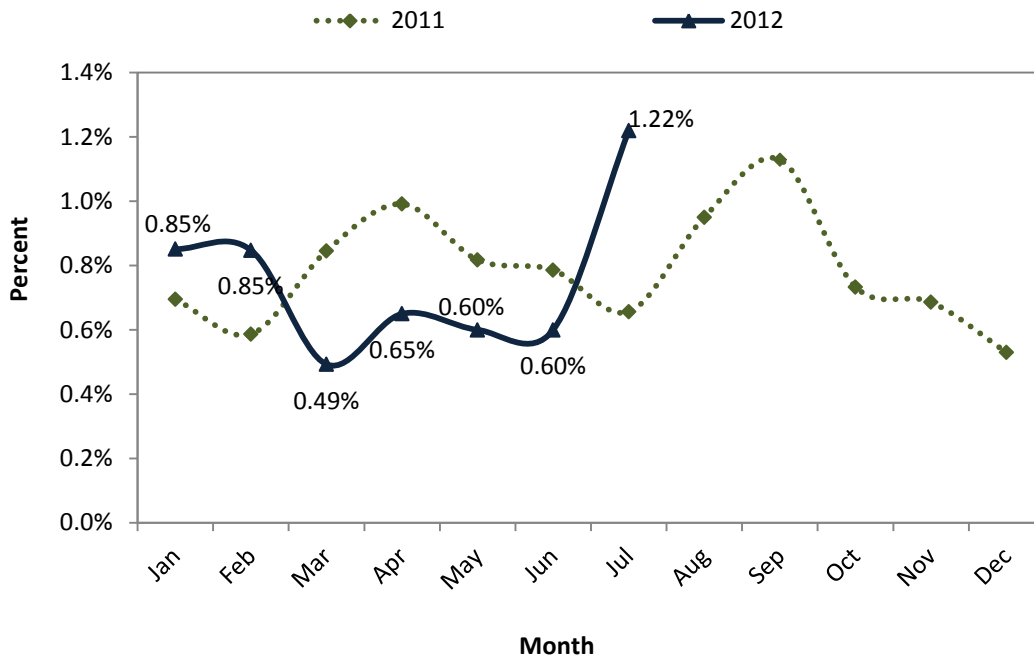
Division of Youth Corrections (DYC)

Measure: **Residential escapes: Percent of residential average daily population**

How it is measured: *Numerator:* Number of unique escapes from residential commitment facilities (both state secure and contract) in the specified month
Denominator: Average daily population (ADP) for state secure and contract residential commitment facilities in the specified month; Approximate monthly denominator: 952

Why this matters: Facilities caring for youth should be equipped to prevent walkaways through their engagement of youth as well as escapes through the security of their facility to ensure youth rehabilitation and community safety

Goal: **↓ To be determined**



Trend: In the month of July, 1.22% of all youth in the Division of Youth Corrections were on escape. A goal has not yet been established.

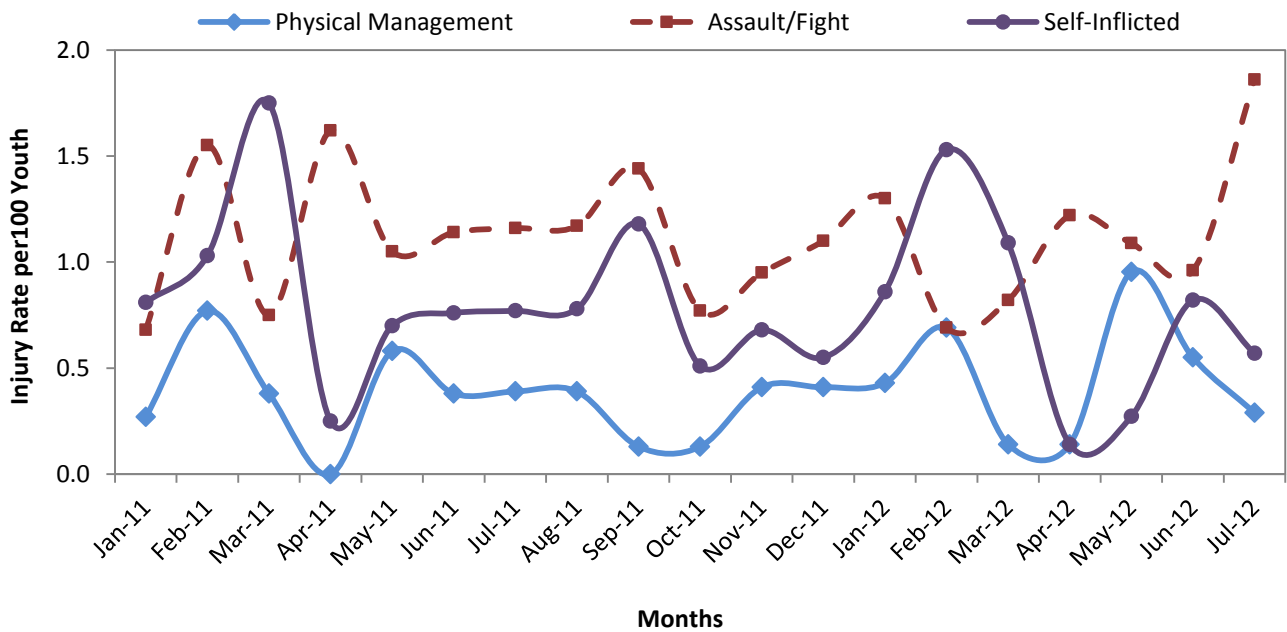
Division of Youth Corrections (DYC)

Measure: **Rate of youth injuries (per 100 youth) by injury source category**

How it is measured: *Numerator:* Total number of youth injuries by injury source category within all DYC secure residential facilities
Denominator: Average daily population (ADP) for state secure residential commitment facilities in the specified month; Approximate monthly denominator: 735

Why this matters: Youth in the State’s care should be maintained in a safe environment.

Goal: **↓ To be determined**



Trend: The rate of physical management and self-inflicted injuries has declined between June and July 2012. The rate of assault/fights increased in the last month. A goal has not yet been established.

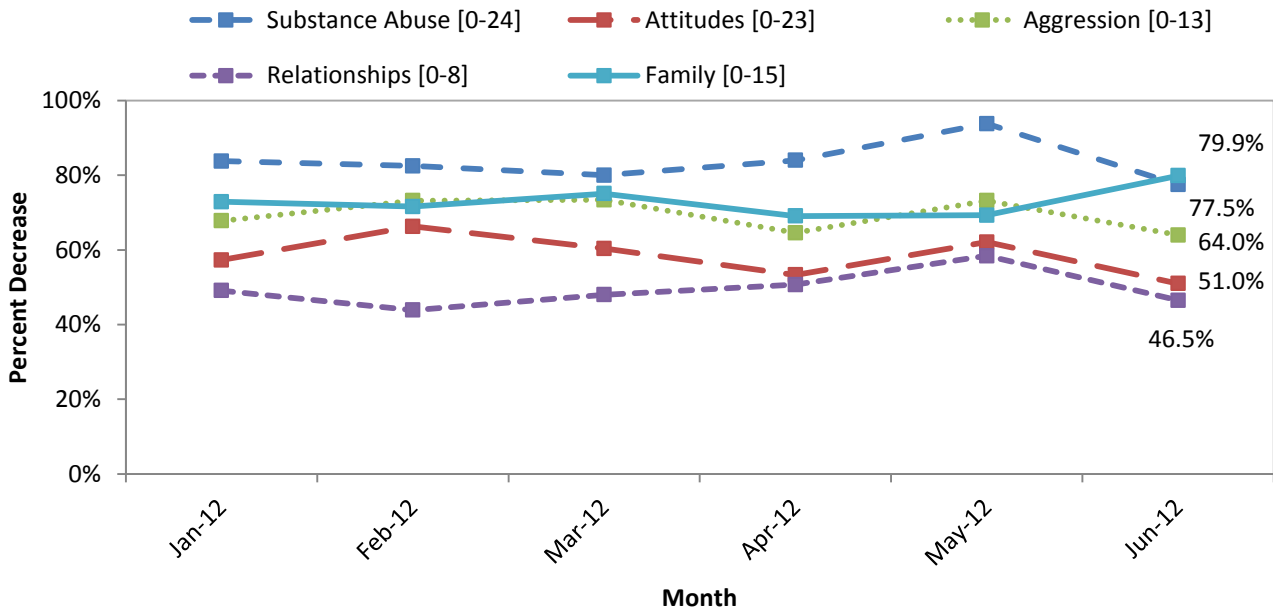
Division of Youth Corrections (DYC)

Measure: **Decrease in dynamic risk factor score**

How it is measured: *Numerator:* Average percent decrease for the specified domain of the Colorado Juvenile Risk Assessment (CJRA), from assessment to discharge for specified domain
Denominator: Number of committed youth discharged in a specified month with two valid Colorado Juvenile Risk Assessments; Approximate monthly denominator: 28

Why this matters: Interventions should result in a decrease in risk factors, providing a better likelihood that the youth served will not commit further offenses once they return to the community.

Goal: **↑To be determined**



Trend: Decrease in risk factors fluctuates between 44% and 94% across domains, with the least change demonstrated in the relationships domain and the most change demonstrated in the substance abuse domain.

Notes: Data only available beginning in January 2012. This measure continues to evolve, as DYC explores alternative ways to measure youth progress.

DYC allows the date of the discharge CJRA to be within 90 days of the actual discharge date, allowing for late data entry or other extenuating circumstances. This 90 day window creates an additional lag for the data reported for these measures.

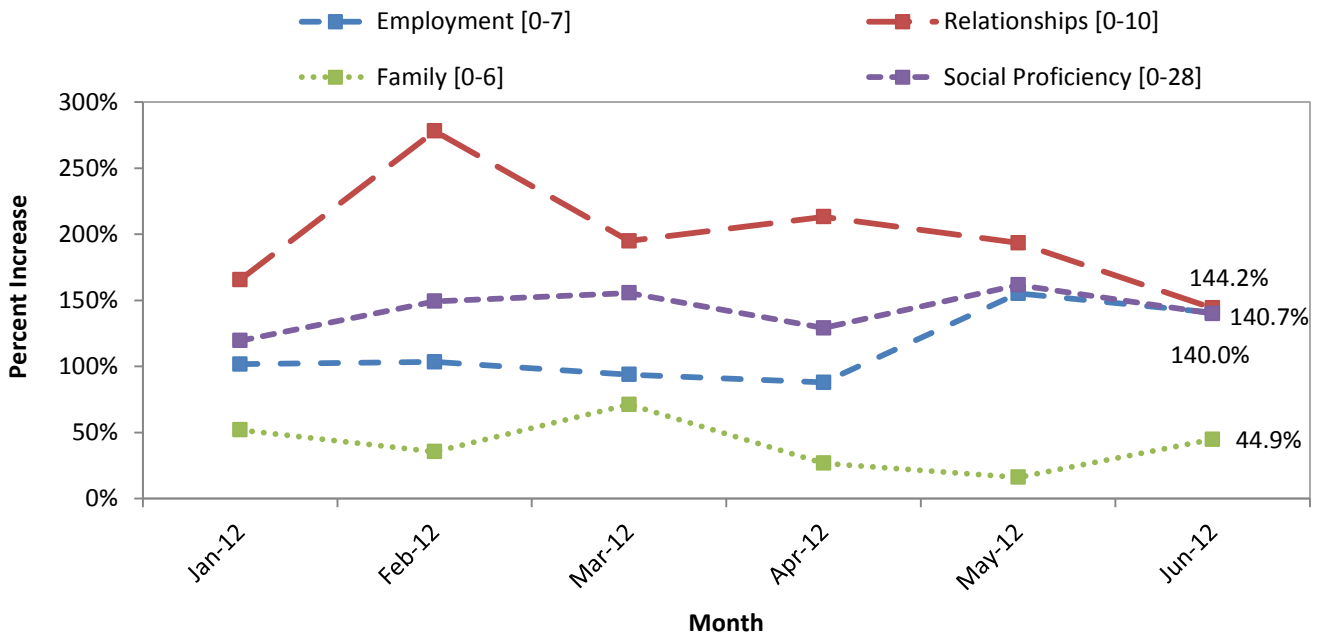
Division of Youth Corrections (DYC)

Measure: **Increase in dynamic protective factor score**

How it is measured: *Numerator:* Average percent increase for the specified domain of the Colorado Juvenile Risk Assessments (CJRA) from assessment to discharge for the specified domain
Denominator: Number of committed youth discharged in a specified month with two valid Colorado Juvenile Risk Assessments; Approximate monthly denominator: 38

Why this matters: An increase in protective factors provides a better likelihood that the youth served will not commit further offenses once they return to the community.

Goal: **↑ To be determined**



Trend: Increase in protective factors fluctuates between 16% and 278% across domains, with the least change demonstrated in the family domain and the most change demonstrated in the relationships domain.

Notes: Data only available beginning in January 2012. This measure continues to evolve, as DYC explores alternative ways to measure youth progress.

DYC allows the date of the discharge CJRA to be within 90 days of the actual discharge date, allowing for late data entry or other extenuating circumstances. This 90 day window creates an additional lag for the data reported for these measures.

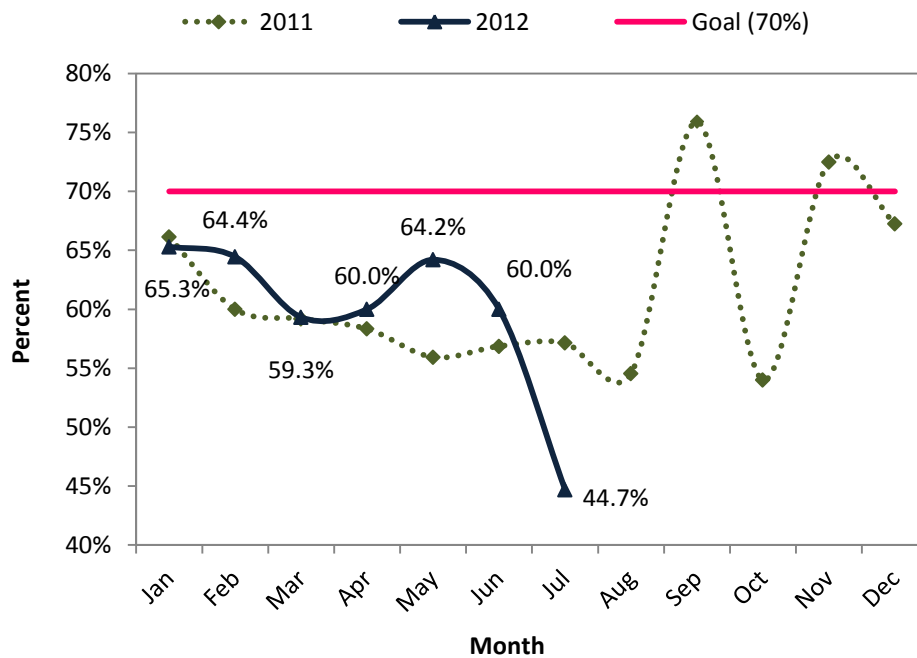
Division of Youth Corrections (DYC)

Measure: **Youth enrolled in an educational program or employed at discharge (Modified)**

How it is measured: *Numerator:* Number of committed youth who are enrolled in an educational program and/or employed at discharge
Denominator: Number of committed youth discharged in a specified month;
 Approximate monthly denominator: 47

Why this matters: Youth who are enrolled in educational programs or are employed have a greater likelihood of success once they return to the community.

Goal: **↑70%**



Trend: Performance remained relatively stable for the first part of 2012, hovering between 59% and 65%, and declined in July 2012. However this is likely a result of DYC expanding the definitions of ‘full time program’ in the Trails database. Expanding the definition is expected to improve the data accuracy and reliability for this measure.

Notes: DYC expanded the definition for youth enrollment and/or employment and modified the Trails database accordingly in June 2012.

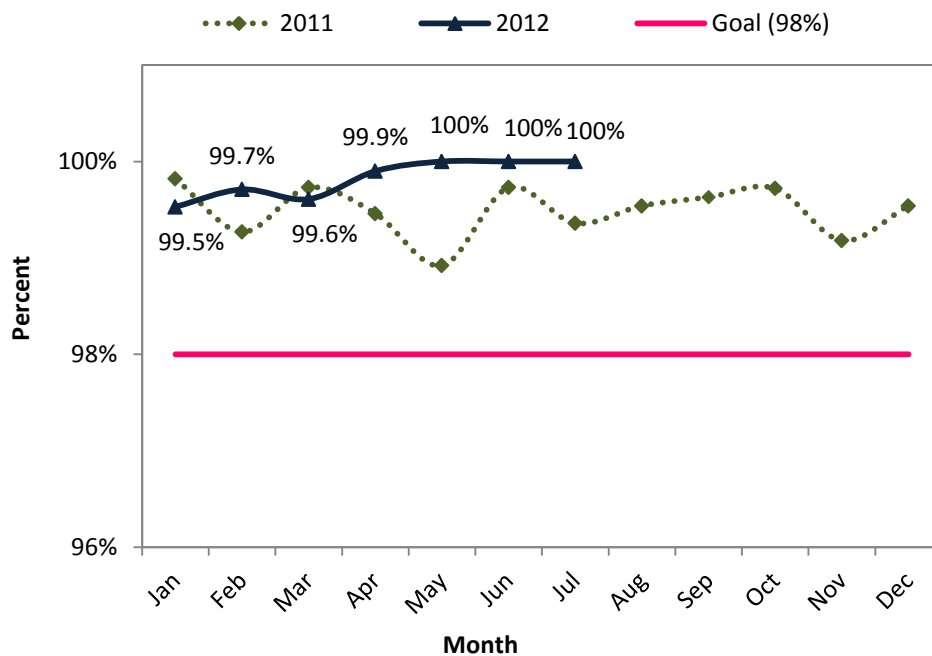
Division of Youth Corrections (DYC)

Measure: **Committed youth who did not receive any new charges in residential placement**

How it is measured: *Numerator:* Number of committed youth in residential placement who did not receive any new charges in a specified month
Denominator: Number of total committed youth in residential placement in a specified month; Approximate monthly denominator: 1,047

Why this matters: Comprehensive, residential services that effectively target criminogenic risk and needs should reduce recidivism of youth.

Goal: **↑98%**



Trend: 2012 performance remains steady and continues to exceed the 98% goal.

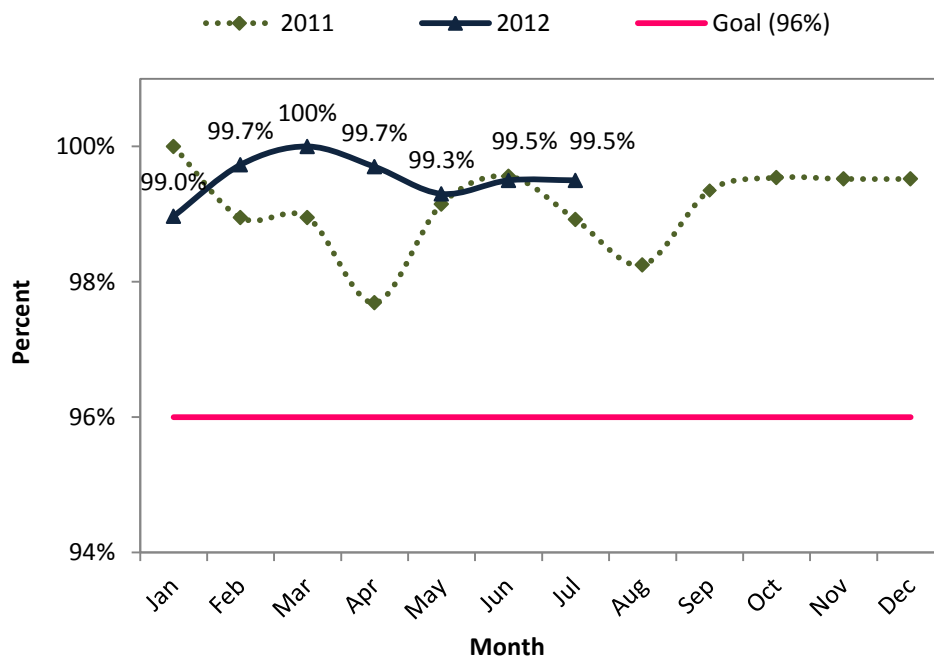
Division of Youth Corrections (DYC)

Measure: **Committed youth on parole who do not acquire new charges**

How it is measured: *Numerator:* Number of committed youth on parole who did not receive any new charges in a specified month
Denominator: Number of total committed youth on parole in a specified month;
 Approximate monthly denominator: 416

Why this matters: Comprehensive, non-residential parole services that effectively target criminogenic risk and needs should reduce recidivism of youth.

Goal: **↑96%**



Trend: 2012 performance remains steady and continues to exceed the 96% goal.

Domestic Violence Program

Summary

Description

The Domestic Violence Program (DVP) serves as the state governmental authority on domestic violence issues by providing leadership, guidance, and awareness within government agencies, as well as ensuring grant funded programs administered by the DVP deliver optimal services to victims, ultimately promoting a Colorado free of domestic violence. DVP strives to ensure that services to victims of domestic violence and their children are readily available throughout Colorado's diverse communities. Services include shelter, advocacy, support groups, and/or counseling. DVP currently funds 44 domestic violence crisis centers across the State. All DVP-funded crisis centers provide confidential services 24 hours a day, seven days a week via crisis lines.

Director: Ruth Glenn

Executive Summary

- DVP analyzes data collected by the domestic violence crisis centers on two federal outcome measurements to evaluate the impact of the services provided on the lives of victims. Victims are asked to identify if the services they received *Enhanced Safety Strategies* and/or *Increased Knowledge of Available Community Resources*.
- Third Quarter Update and Methodology Changes
 - The 2011 national average and goal was increased from 85% to 91%.
 - Data for supportive services/advocacy and individual counseling was combined prior to the 3rd Quarter 2012. This Data are now being reported separately per Family Violence Prevention and Services Act requirement.

Measures

- [Enhanced Safety Strategies](#)
- [Increased Knowledge](#)

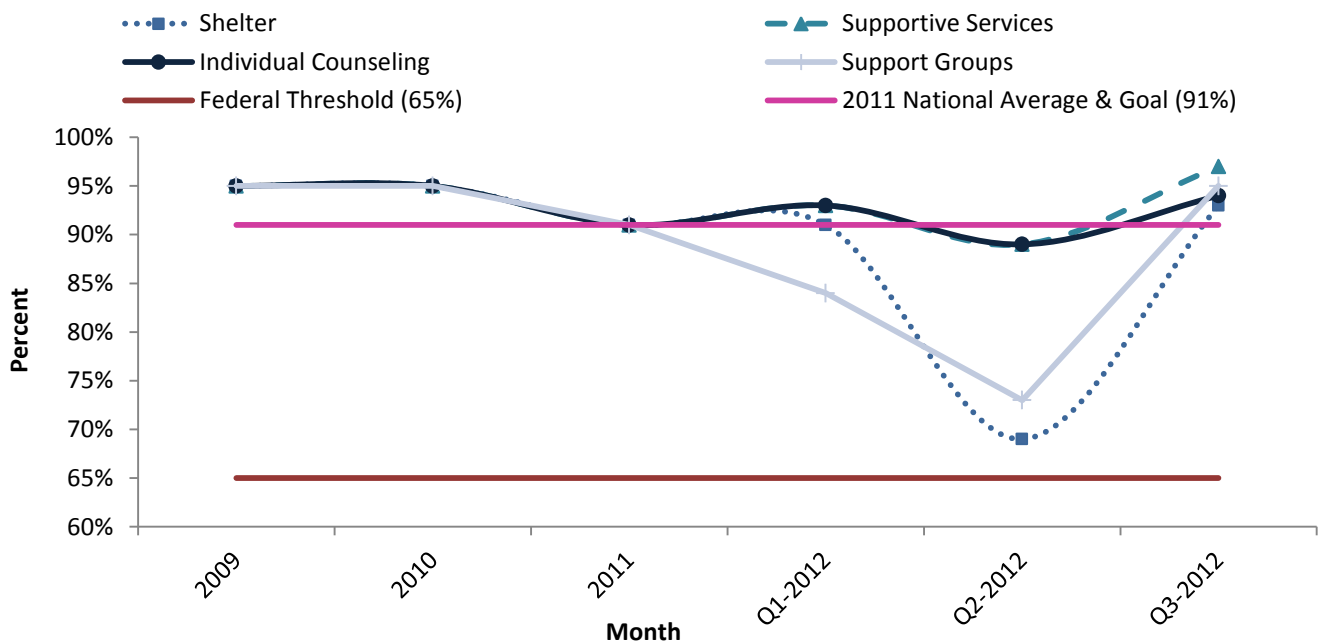
Domestic Violence Program (DVP)

Measure: **Percent of respondents indicating enhanced safety strategies (Federal Measure)**

How it is measured: *Numerator:* Number of respondents answering question positively on survey
Denominator: Number of surveys returned; Approximate quarterly denominator: 2,095.

Why this matters: Enhancing safety strategies can increase the safety and well-being of domestic violence victims over time. These DVP measures are also intended to demonstrate whether clients are benefitting from services.

Goal: **↑91% (Updated)**



Trend: After a brief decline, performance improved in the third quarter of 2012.

Notes: Upon investigation of second quarter data, DVP determined that data from one metro program had a substantial effect on the overall average for the second quarter. DVP is currently working with that particular program to overcome identified challenges.

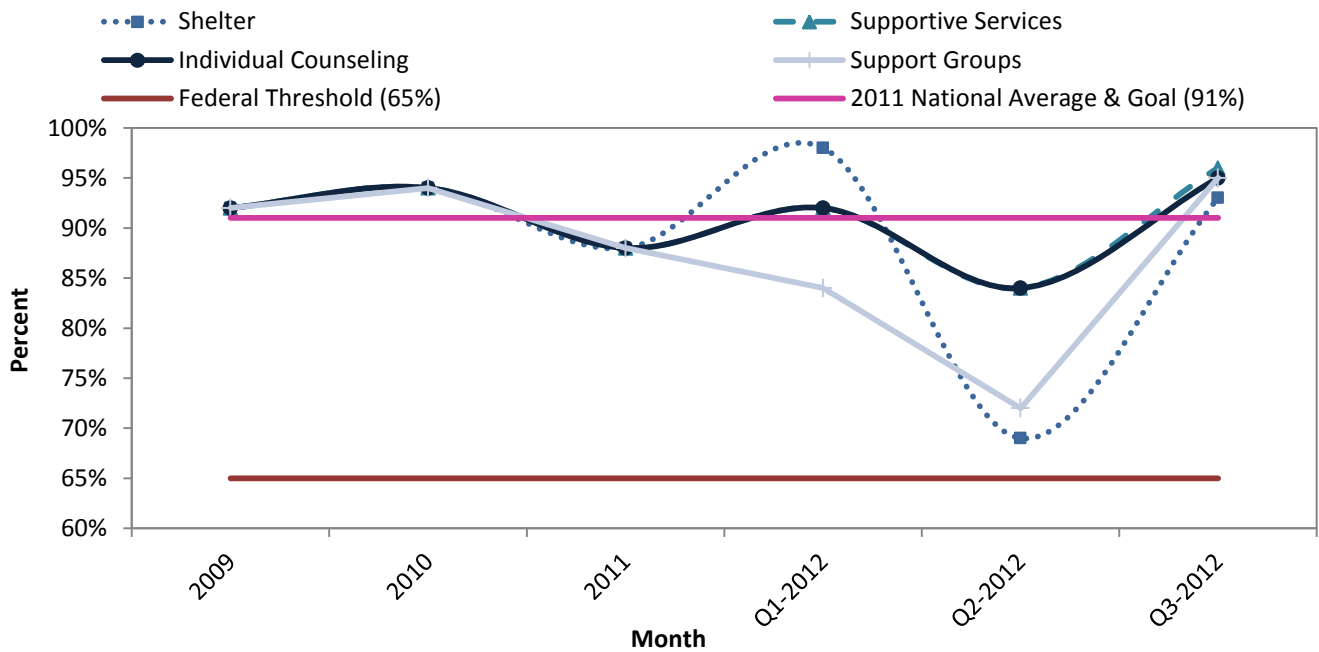
Domestic Violence Program (DVP)

Measure: **Percent of respondents indicating increased knowledge (Federal Measure)**

How it is measured: *Numerator:* Number of respondents answering question positively on survey
Denominator: Number of surveys returned; Approximate quarterly denominator: 2,095.

Why this matters: Increased knowledge can increase the safety and well-being of domestic violence victims over time. These DVP measures are also intended to demonstrate whether clients are benefitting from services.

Goal: **↑91% (Updated)**



Trend: After a brief decline, performance improved in the third quarter of 2012.

Notes: Upon investigation of second quarter data, DVP determined that data from one metro program had a substantial effect on the overall average for the second quarter. DVP is currently working with that particular program to overcome identified challenges.

Office of Economic Security

Description

The Office of Economic Security (OES) houses programs that provide economic, employment and nutritional supports to Coloradans. OES consists of the divisions of Child Support Enforcement, Colorado Refugee Services, Colorado Works (Temporary Assistance for Needy Families), Food Assistance (Supplemental Nutrition Assistance Program), Food Distribution, Energy Assistance (Low-Income Home Energy Assistance Program), and Vocational Rehabilitation.

Director: Julie Kerksick

Child Support Enforcement Summary

Description

The Division of Child Support Enforcement (CSE) exists to ensure that all children in single parent households receive financial and medical support from both parents. This is accomplished by locating non-custodial parents, establishing paternity and, when required, child support obligations, and enforcing those obligations through the collection of current support payments as well as arrears. The Division works through county offices to provide these services to Colorado families.

Director: Paulette St. James

Executive Summary

- The Division of Child Support Enforcement has identified four key performance measures to be tracked through the C-Stat process.
- The measures of *Paternity Establishment for Out of Wedlock Births*, *Established Child Support Orders*, and *Child Support Collected* are all federal performance outcomes. The Division has created an alternative to the federal arrears payment measure, which looks at the percentage of families that received an arrears payment in the month, of all those families where a payment was owed. A goal is yet to be determined.

Measures

- [Paternity Established out of Wedlock](#)
- [Established Child Support Orders](#)
- [Child Support Collected](#)
- [Arrears Payments \(Families Paid\)](#)

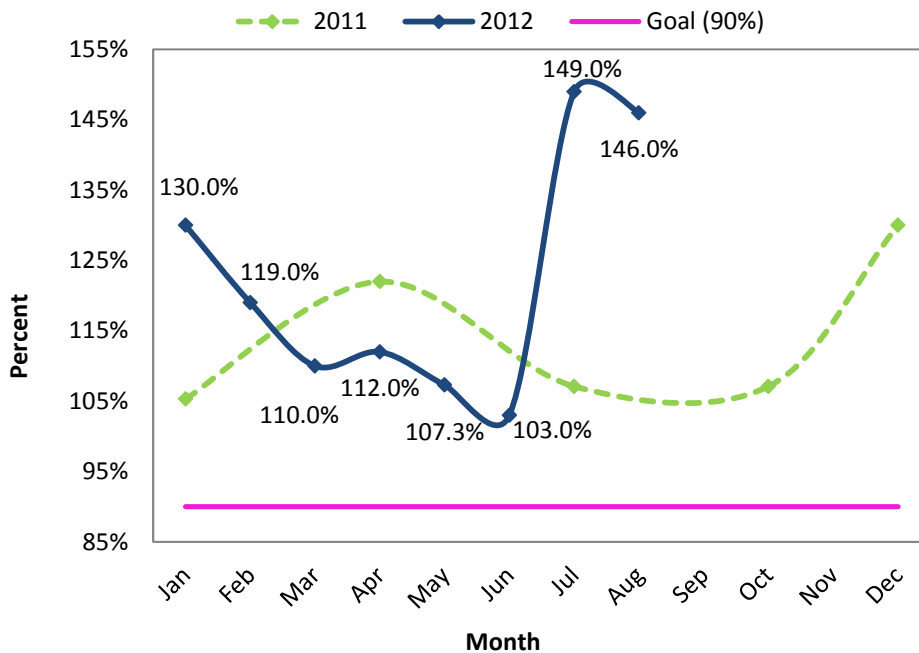
Child Support Enforcement (CSE)

Measure: **Paternity established out of wedlock births (Federal Measure)**

How it is measured: *Numerator:* Monthly number of children born out of wedlock with paternity established
Denominator: Number of children born out of wedlock in the same month of the prior year; Approximate monthly denominator: 941

Why this matters: Establishing paternity increases the likelihood that a child will have financial and medical support from both parents.

Goal: **↑90% (Federal Goal)**



Trend: Performance consistently exceeds goal. The spike is attributed to a low monthly denominator.

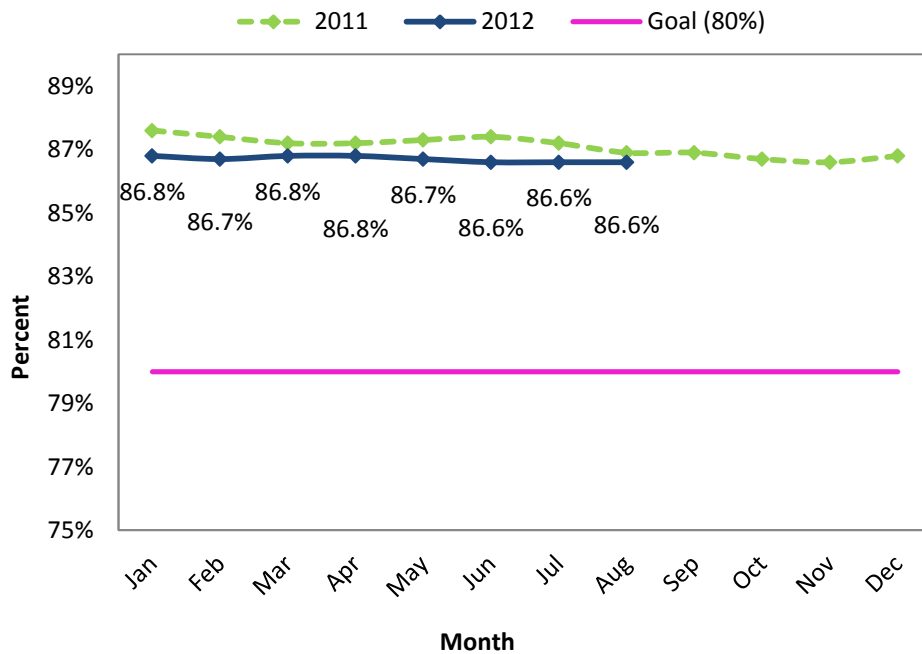
Child Support Enforcement (CSE)

Measure: **Established child support orders (Federal Measure)**

How it is measured: *Numerator:* Cumulative number of cases with a child support order
Denominator: Number of total cases; Cumulative denominator through August 2012: 151,766

Why this matters: Establishing child support orders increases the likelihood a child will have financial and medical support from a non-custodial parent.

Goal: **↑80% (Federal Goal)**



Trend: Performance consistently exceeds goal.

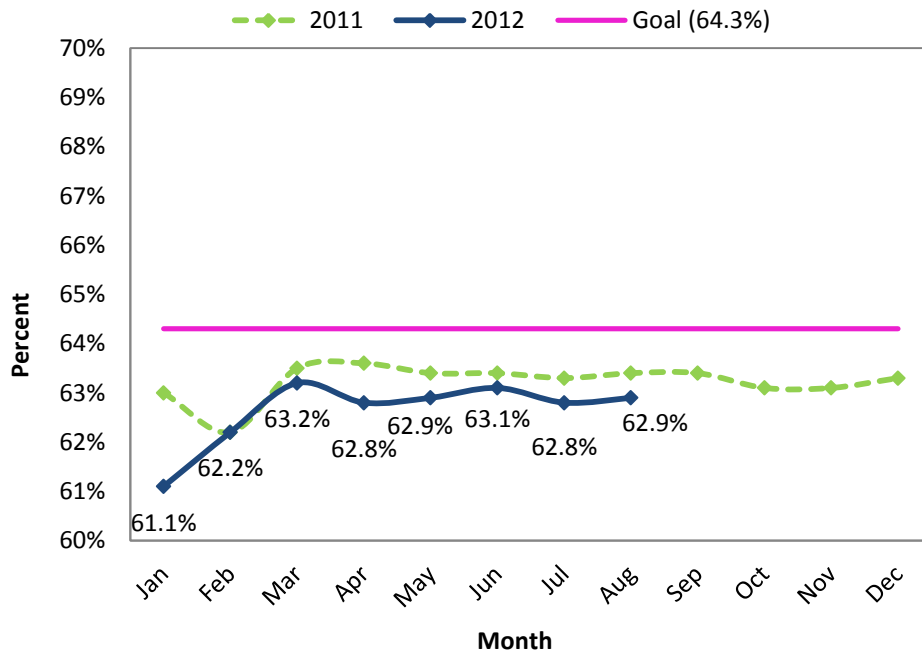
Child Support Enforcement (CSE)

Measure: **Percent of child support collected (Federal Measure)**

How it is measured: *Numerator:* Cumulative current support dollars collected
Denominator: Current support dollars owed; Cumulative denominator through August 2012: \$246.9m

Why this matters: Collecting child support increases the economic security of a child.

Goal: **↑64.3% (Federal Goal)**



Trend: Very little variability in this measure; consistently just below goal.

Child Support Enforcement (CSE)

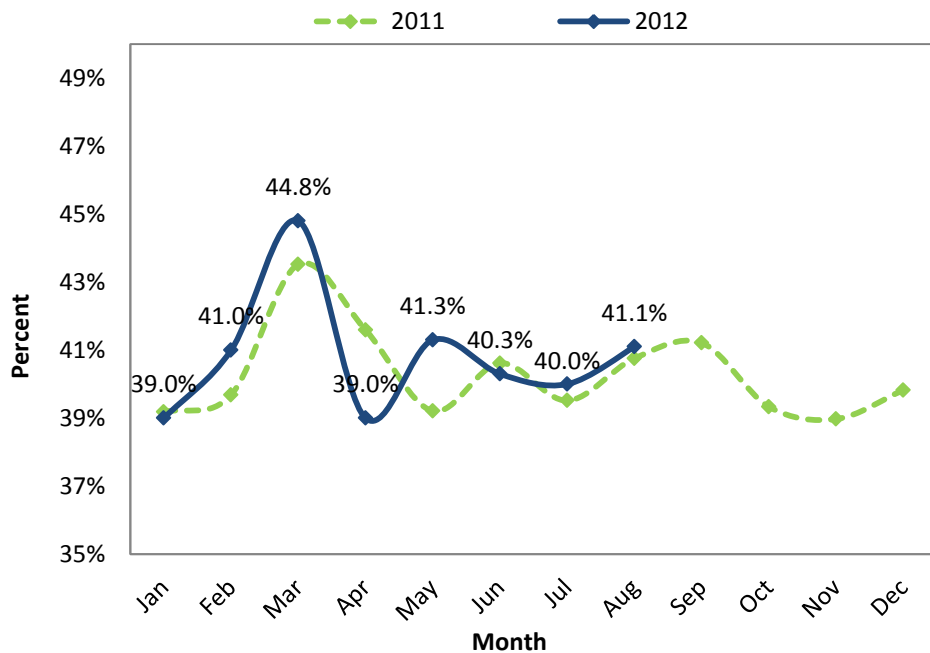
Measure: **Arrears payments (families paid)**

How it is measured: *Numerator:* Cases where an arrears balance was owed, and at least some portion of that obligation was paid, in the month

Denominator: Total number of cases with arrears owed in the month;
Approximate monthly denominator: 107,946

Why this matters: Collecting arrears payments increases the economic security of families.

Goal: **↑ To be determined**



Trend: Performance hovers around 40%.

Colorado Refugee Services Program

Summary

Description

The Division of Refugee Services (known as the Colorado Refugee Services Program or CRSP) exists to ensure effective resettlement of officially designated refugees and to promote refugee self-sufficiency. This is accomplished, primarily, through the provision of Refugee Cash Assistance (RCA), Refugee Medical Assistance (RMA), case management services for the refugee population receiving RCA, RMA or Temporary Assistance for Needy Families (TANF, known in Colorado as the Colorado Works program), and employability services (training and education) to help refugees enter meaningful employment. CRSP works through local volunteer agencies, and supports an array of activities that include resettlement, education, employment, health, legal/citizenship, financial and housing services.

Director: Paul Stein

Executive Summary

- CRSP provides funding to contractors and sub-contractors to implement a variety of self-sufficiency services that promote integration, particularly around *Employability Services*. Access to and participation in meaningful employment is a key component to refugee resettlement and integration.
- Per federal standards, CRSP continues to measure those who have *Entered Employment*, as well as those who have demonstrated *Employment Retention at 90 Days*. In addition to these measures, the Division has identified *Language Progression* as a meaningful outcome measure, and provided the first data point on this measure in the September 2012 C-Stat meeting.
- At the inception of C-Stat, contractors reported data manually on contract-mandated outcomes, on a trimester basis, and CRSP aggregated these totals for annual federal reporting. CRSP has worked to provide monthly data, where possible. Currently, while a numerator is available monthly for those who have entered employment, a corresponding denominator is not available. A new reporting system is expected to be rolled out in later 2012, making monthly reporting across all measures possible.

Measures

- [Entered Employment](#)
- [Employment Retention 90 Days](#)
- [Language Progression](#)

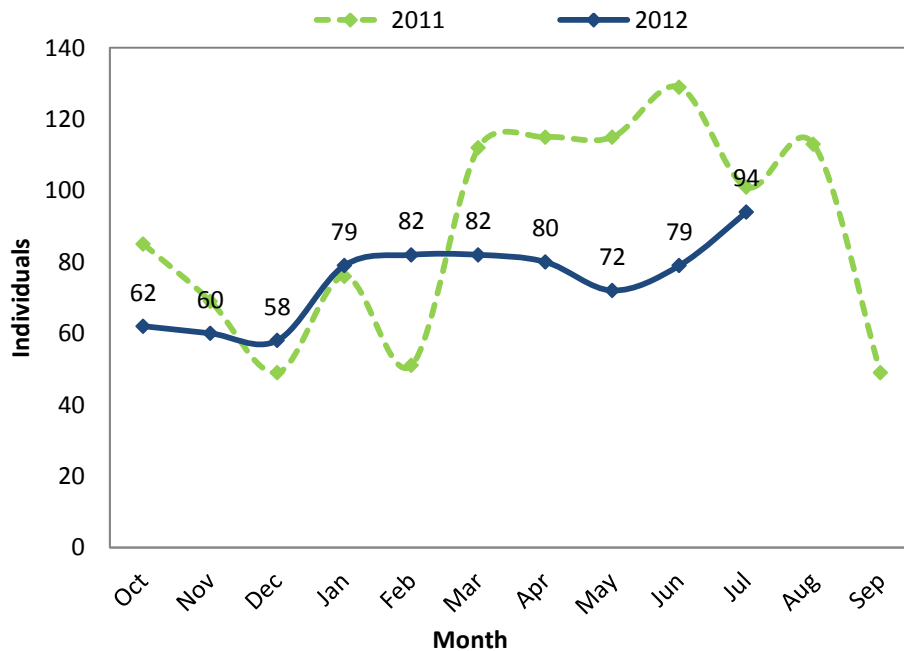
Colorado Refugee Services Program (CSRP)

Measure: **Entered employment**

How it is measured: *Numerator:* Total number of persons newly entering employment during the month; *Approximate monthly denominator:* Not available
Denominator: Number of persons receiving employability services (not available)

Why this matters: The right services at the right time leading to employment increase a person’s likelihood of long-term economic security.

Goal: **↑ To be determined**



Trend: Increase in raw totals during spring and summer months.

Notes: CRSP is currently unable to provide a corresponding monthly denominator for this measure, but anticipates having such data near the end of 2012.

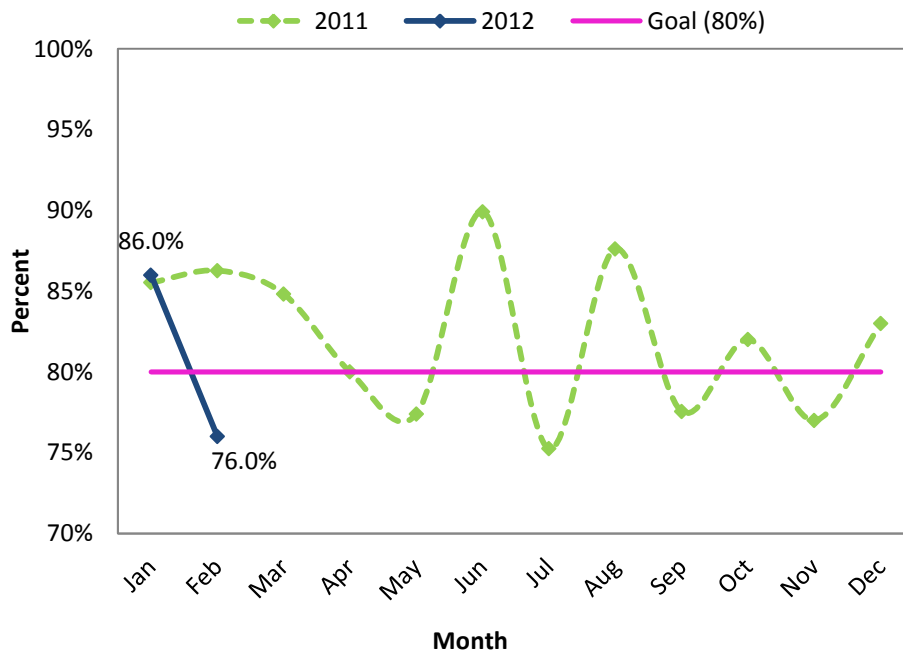
Colorado Refugee Services Program (CSRP)

Measure: **90-day employment retention (Federal Measure)**

How it is measured: *Numerator:* Number of individuals who have retained employment for 90 days after initial employment placement
Denominator: Number of individuals who have entered employment; Approximate monthly denominator: 85

Why this matters: Maintaining employment increases a person's likelihood of long-term economic security.

Goal: **↑80%**



Trend: Performance is hovering between 75% and 85%.

Note: Data runs in arrears; 90 days must be completed, and then reported to the Volunteer Agency who in turn reports to CRSP.

Data are not available until after each trimester ends and it is reported to CRSP by the Volunteer Agencies for each month within the trimester per their contracts. Hence data has not been updated since February 2012.

Colorado Refugee Services Program (CSRP)

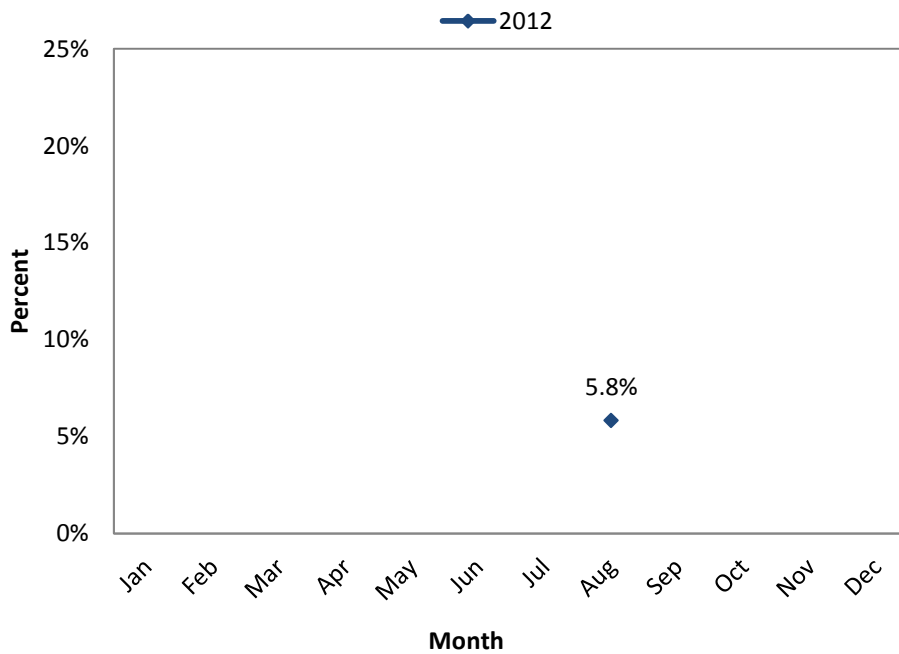
Measure: **Language progression (New)**

How it is measured: *Numerator:* Number of students advancing one level of English proficiency in a month

Denominator: Total number of students on the first day of the month;
Approximate monthly denominator: 233

Why this matters: Acquiring English language skills increases a refugee's likelihood of long-term economic security.

Goal: **↑To be determined**



Trend: Only one data point as of August 2012. Goal has yet to be determined.

Colorado Works

Summary

Description

The Division of Colorado Works is the state's cash assistance program for families, federally called Temporary Assistance for Needy Families (TANF). Colorado Works exists to provide cash financial assistance, employment and supportive services, and case management to eligible low-income families with minor children in the home. Cash assistance is provided either through recurring cash benefit payments to eligible families, for no more than 60 combined months, or through lump-sum diversion payments intended to offset deeper economic instability necessitating on-going cash benefits. Clients who are job-ready are required to participate in work activities in order to receive ongoing cash assistance payments. Colorado Works is administered through county human service offices across the state.

Director: Levetta Love

Executive Summary

- Colorado Works is currently under a court settlement in which the program must attain and sustain 95% *Timely New Applications* and *Timely Redetermination Applications* processing goal. Data over the past year have demonstrated significant improvement for both of these measures.
- Colorado Works has identified employment as a leading outcome of the program to enhance economic security and self-sufficiency. For adults, Colorado Works has chosen to measure *Percent Employed*, for those on the active caseload, as an alternative to the federal Work Participation Rate measure, which looks at a combination of activities, including employment, on an annual basis. However, data integrity has become an issue surrounding currently methodology on this measure. The Division is revisiting appropriate criteria; no data have been supplied since June 2012.

Measures

- [Timely New Applications](#)
- [Timely Redetermination Applications](#)
- [Percent Employed](#)

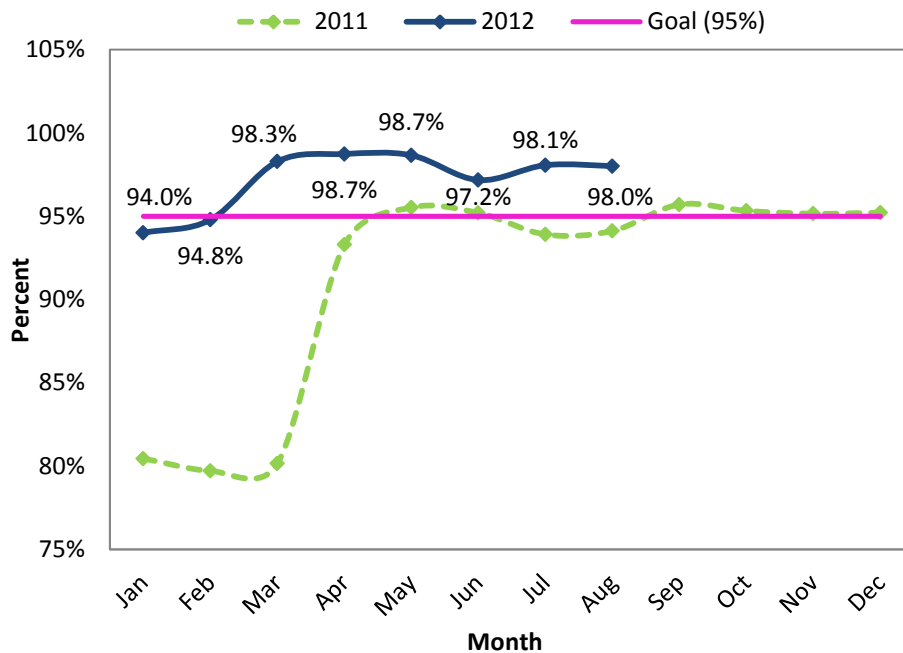
Colorado Works

Measure: **Timeliness of new applications**

How it is measured: *Numerator:* Number of new applications processed timely
Denominator: Total number of new applications; Approximate monthly denominator: 2,915

Why this matters: Timely processing of new applications ensures eligible Coloradans have access, as soon as possible, to needed cash assistance, case management, and employment services that can increase their economic security.

Goal: **↑95%**



Trend: Upward spike in April 2011; steady attainment of goal since March 2012.

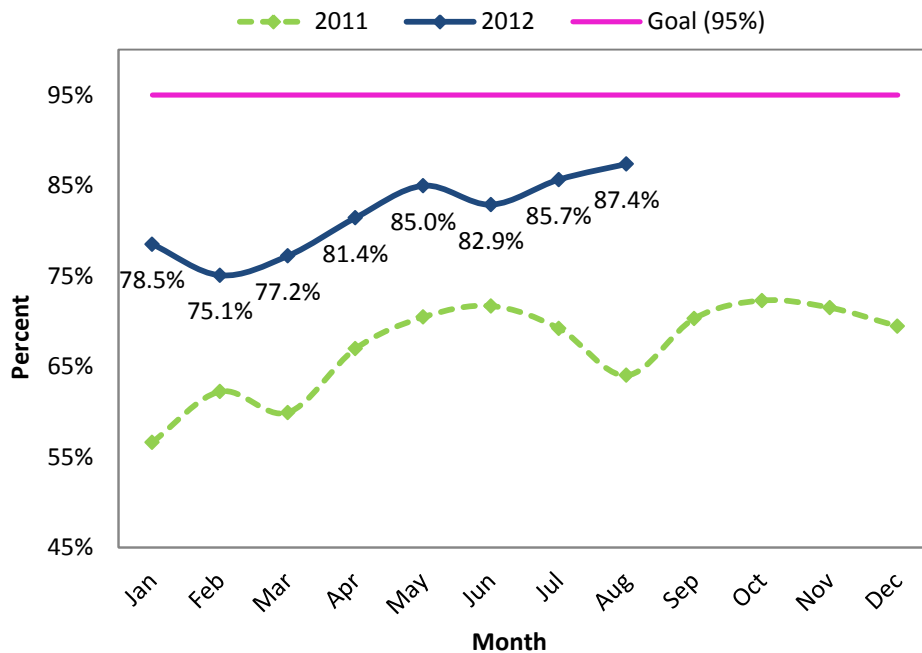
Colorado Works

Measure: **Timeliness of redetermination (RRR) applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely
Denominator: Number of redetermination applications; Approximate monthly denominator: 1,243

Why this matters: Timely processing of redetermination applications ensures eligible Coloradans have continued access to needed cash assistance, case management, and employment services that can increase their economic security.

Goal: **↑95%**



Trend: Steady increase since February 2012.

Colorado Works

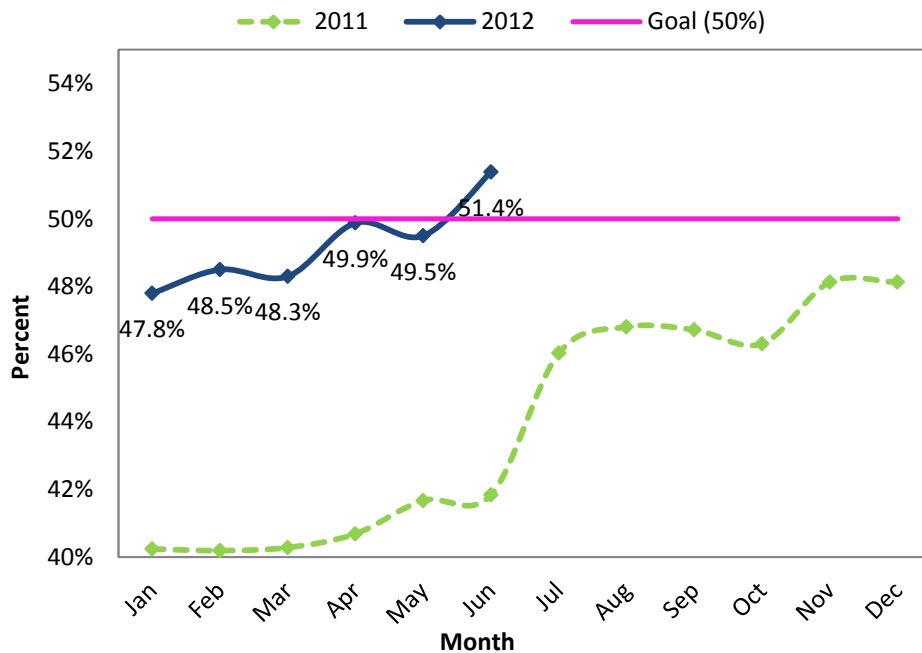
Measure: **Percent of persons employed**

How it is measured: *Numerator:* Number of adults with open employment record on caseload in report month

Denominator: Total number of adults on caseload in report month; Approximate monthly denominator: 26,031

Why this matters: Participation in employment increases a person’s likelihood of long-term economic security.

Goal: **↑50%**



Trend: Steady progress towards goal over the course of the last 12 months, exceeding goal in June 2012.

Notes: This measure looks at the percentage of all adults on the caseload, during the month that had an open employment record, regardless of earnings.

Colorado Works has faced data integrity issues surrounding this measure, and is currently revisiting an appropriate methodology to address those concerns. No new data have been available since June 2012.

Low-Income Energy Assistance Program

Summary

Description

The Division of Energy Assistance (known as the Low-Income Energy Assistance Program or LEAP) exists to provide financial assistance with heating bills to low-income households. LEAP is a means-tested financial assistance program, administered through county offices, and provides lump-sum payments directly to utility vendors on behalf of eligible households to assist with their home heating costs during the winter season.

Acting Director: Paul Stein

Executive Summary

- LEAP provides transactional benefits to households in need of help with energy costs. The successful processing of *Timely Regular Applications* and *Timely Emergency Applications* are key indicators of program performance. LEAP, due to the nature of the program, experiences significant seasonal fluctuation, resulting in very high volume during colder months and relatively low volume during warmer months (the program does not reimburse cooling costs). This variability has resulted in a predictable trend in application processing.
- At the inception of C-Stat, LEAP was examining data by reviewing the average days to process cases, on a cumulative basis, throughout the season. Through C-Stat, LEAP was able to alter their data reporting to a monthly average number of days.
- In addition to processing, LEAP has determined that the percent of *Eligible Households Receiving Assistance* from the program is a key performance outcome. Due to funding changes, coupled with increased demand, LEAP lowered the eligibility criteria for household participation for the 2011-12 season, from 185% of the Federal Poverty Limit to 150%. LEAP has set a goal of reaching 30% of those households for the 2011-2012 season.
- LEAP is a seasonal program; no applications are accepted after April, and new data are not expected after June until November 2012.

Measures

- [Timely Regular Applications](#)
- [Timely Emergency Applications](#)
- [Eligible Households Receiving Assistance](#)

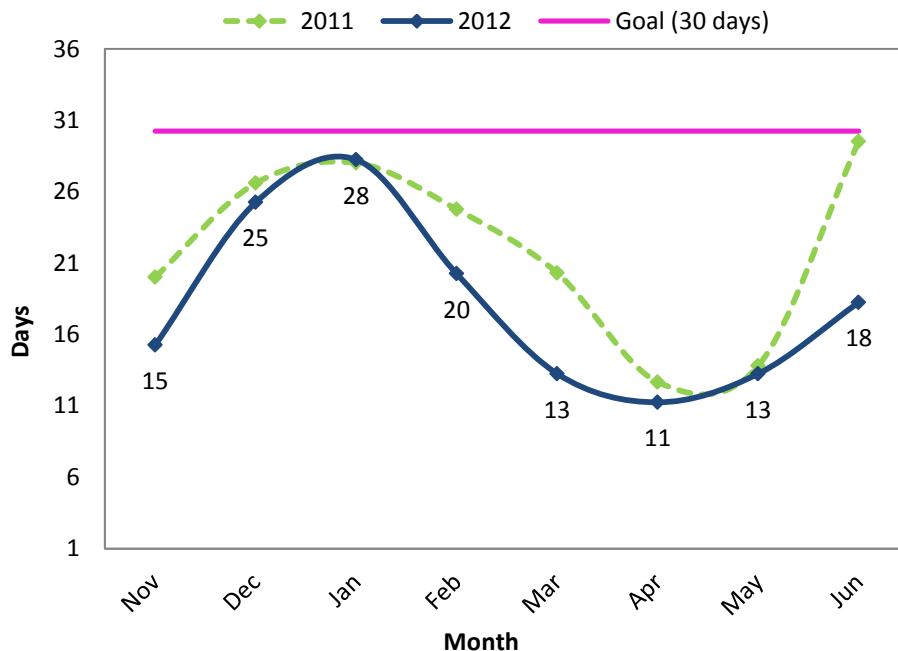
Low-Income Energy Assistance Program (LEAP)

Measure: **Timeliness of regular applications**

How it is measured: *Numerator:* Number of days to process regular applications
Denominator: Total number of regular applications; Approximate monthly denominator: Varies significantly, due to seasonality, from 25,000 in December to 4,000 in April.

Why this matters: Timely processing of regular energy assistance applications ensures eligible Coloradans have access, as soon as possible, to needed financial assistance for heating, ultimately increasing the likelihood of Coloradans living safely.

Goal: **↓30 Days**



Trend: Improvement in timely processing over previous season and well inside goal over the course of the last season. There is a spike in timely processing after April (i.e., when the season is closed) as all cases result in denial, removing the urgency to process as quickly.

Notes: Average days to process decreases during the warmer months, as the season comes to a close and fewer applications are submitted.

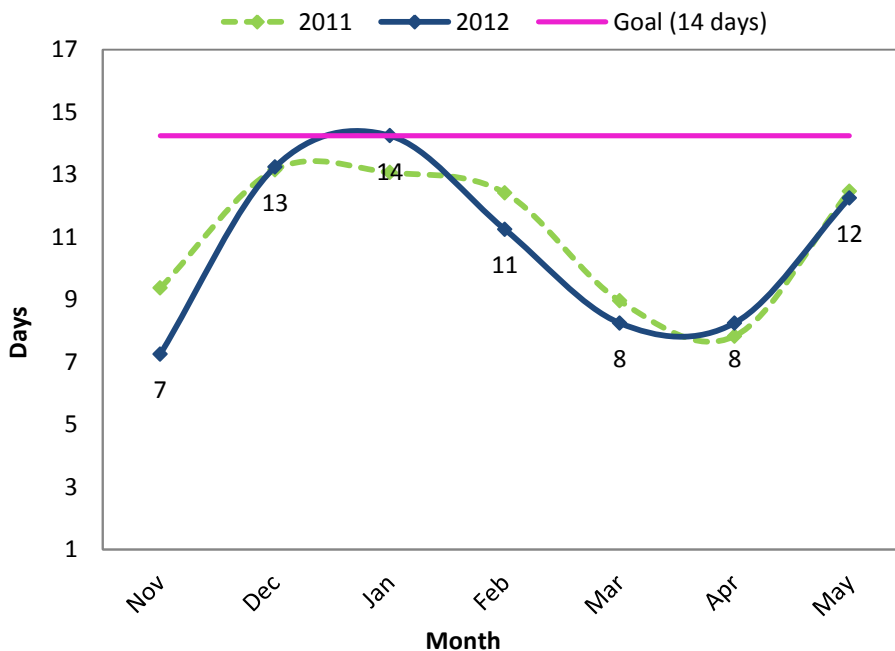
Low-Income Energy Assistance Program (LEAP)

Measure: **Timeliness of emergency applications**

How it is measured: *Numerator:* Number of days to process emergency applications
Denominator: Total number of emergency applications; Approximate monthly denominator: Varies significantly, due to seasonality, from 5,000 in December to 1,000 in April.

Why this matters: Timely processing of energy assistance emergency applications ensures eligible Coloradans have access, as soon as possible, to financial assistance for heating in order to avoid a crisis resulting from loss of utilities, ultimately, increasing the likelihood of Coloradans living safely.

Goal: **↓14 Days**



Trend: Inside or at goal over the course of the last season. There is a spike in timely processing after April (i.e., when the season is closed) as all cases result in denial, removing the urgency to process as quickly.

Notes: Average days to process decreases during the warmer months, as the season comes to a close and fewer applications are submitted.

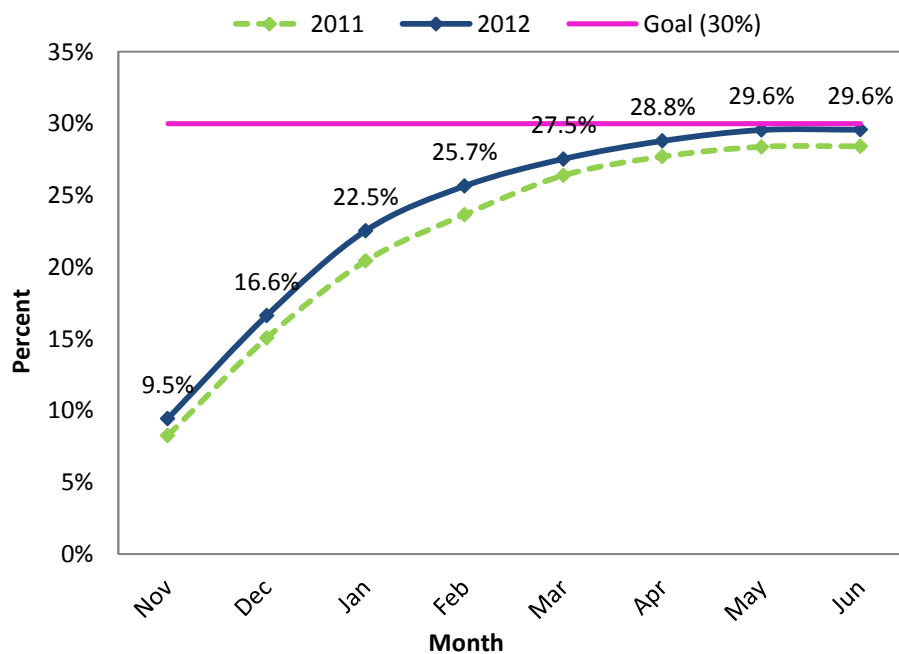
Low-Income Energy Assistance Program (LEAP)

Measure: **Eligible households receiving assistance**

How it is measured: *Numerator:* Number of eligible households receiving assistance
Denominator: Total number of eligible households in 2010*; 440,217

Why this matters: Reaching eligible households with LEAP benefits increases statewide economic security.

Goal: **↑30%**



Trend: The 2012 performance is consistently above the 2011 performance. Very close to goal line as of June 2012.

Note: *Data obtained from the 2010 American Community Survey.

Food Assistance

Summary

Description

The Division of Food Assistance is Colorado's nutritional safety net program, federally referred to as the Supplemental Nutrition Assistance Program (SNAP), and formerly known as Food Stamps. Food Assistance exists to administer non-cash food benefits to eligible low-income households to purchase the food needed for a nutritionally adequate diet. In addition to benefits, Food Assistance administers the Employment First program, helping able-bodied adults without dependent children engage in activities that will improve their employability. Food Assistance is a means-tested assistance program, administered through county offices, providing monthly food benefits to eligible Coloradans.

Executive Summary

- Food Assistance is currently under a court settlement in which the program must attain and sustain 95% *Timely New Applications*, *Timely Expedited Applications* and *Timely Redetermination Applications* processing goals. Data over the past year has demonstrated significant improvement for all of these measures.
- During the C-Stat process, Food Assistance identified *Backlog of New Applications* and *Backlog of Redetermination Applications* as areas in need of improvement and began to compile data around these measures. This has progressed to focusing on the largest backlog volume, by county, on an ongoing basis.
- The federal government holds State Food Assistance programs accountable for *Error Rate of Negative Actions* and *Error Rate of Payment*. These measures fall under the purview of the Food Assistance Quality Assurance Division; this is housed in the Office of Performance and Strategic Outcomes.

Measures

- [Timely New Applications](#)
- [Timely Expedited Applications](#)
- [Timely Redetermination Applications](#)
- [Backlog of New Applications](#)
- [Backlog of Redetermination Applications](#)
- [Error Rate Negative Actions](#)
- [Error Rate Payment](#)

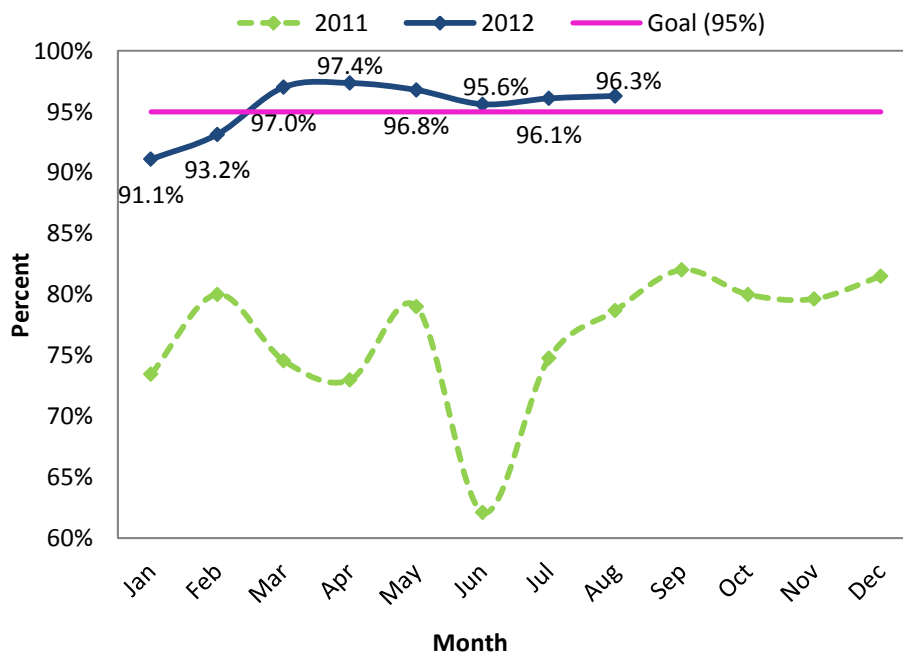
Food Assistance (FA)

Measure: **Timeliness of new applications**

How it is measured: *Numerator:* Number of new applications processed timely
Denominator: Total number of new applications; Approximate monthly denominator: 12,281

Why this matters: Timely processing of new 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.

Goal: **↑95%**



Trend: Exceeded goal for past seven consecutive months.

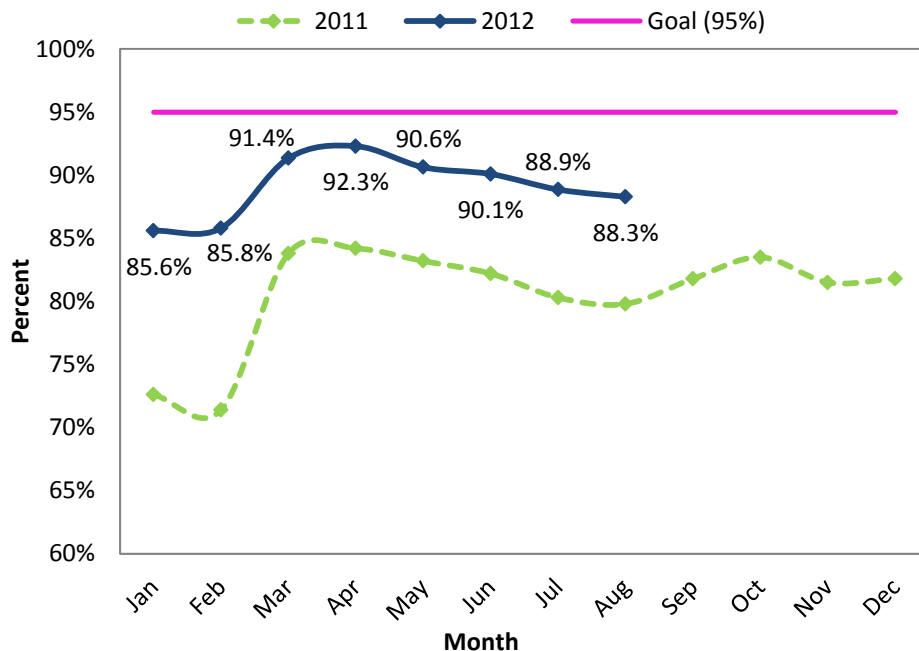
Food Assistance (FA)

Measure: **Timeliness of expedited applications**

How it is measured: *Numerator:* Number of expedited applications processed timely
Denominator: Total number of expedited applications; Approximate monthly denominator: 9,916

Why this matters: Timely processing of expedited food assistance applications ensures eligible Coloradans, in emergency situations, have access, as soon as possible, to needed financial assistance for food, ultimately, reducing the likelihood of Coloradans going hungry.

Goal: **↑95%**



Trend: Decline in performance for four consecutive months.

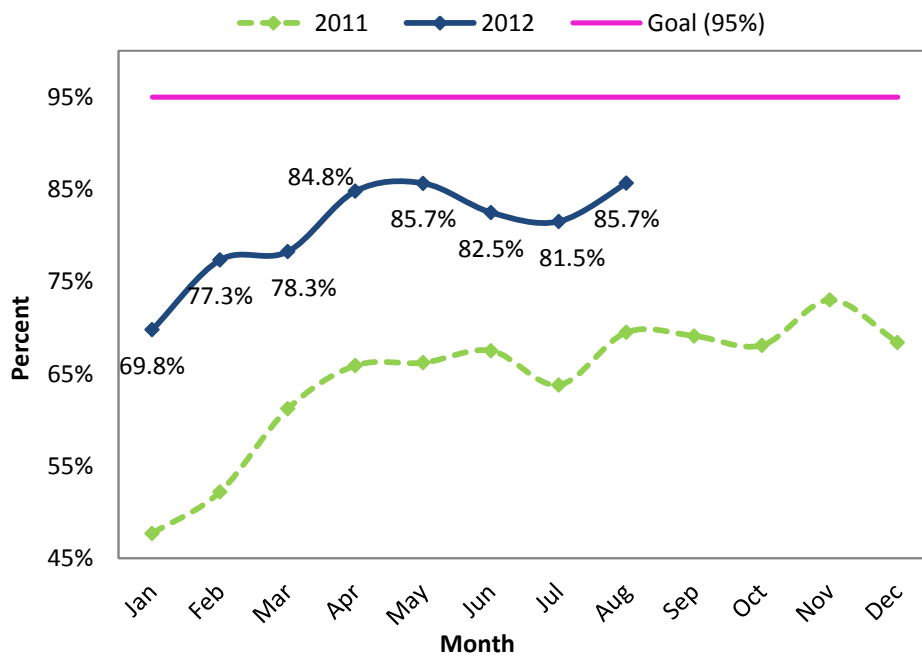
Food Assistance (FA)

Measure: **Timeliness of redetermination applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely
Denominator: Total number of redetermination applications; Approximate monthly denominator: 25,300

Why this matters: Timely processing of redetermination food assistance applications ensures eligible Coloradans have continued access to needed financial assistance for food, ultimately, reducing the likelihood of Coloradans going hungry.

Goal: **↑95%**



Trend: The 2012 performance is significantly better than 2011. Overall, trend is remarkably similar to 2011, and consistent progression has yet to be maintained.

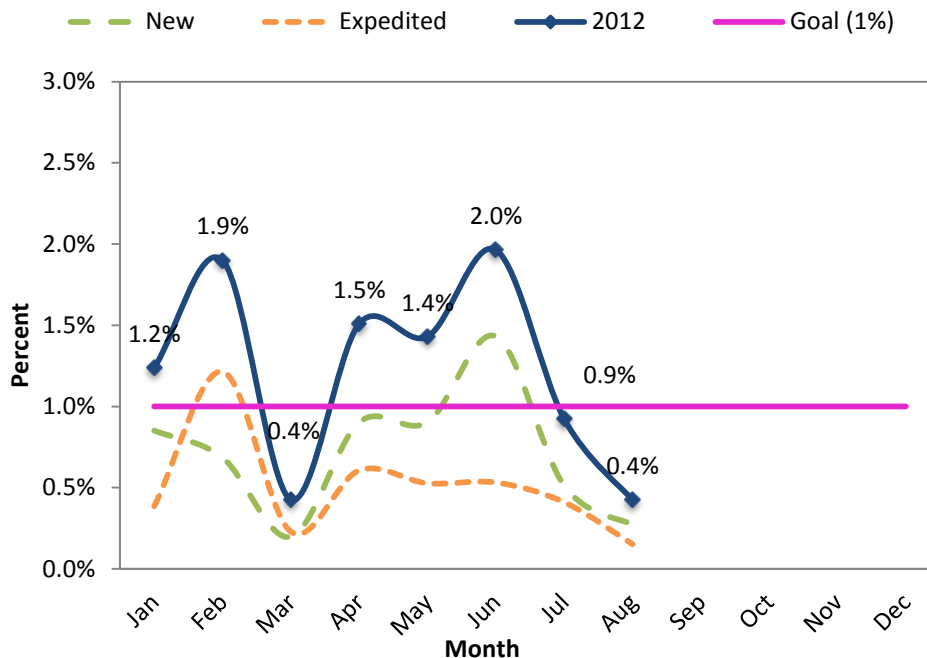
Food Assistance (FA)

Measure: **Backlog of new applications**

How it is measured: Numerator: Number of new or expedited applications that have exceeded processing timeframes by the last business day of the month
Denominator: Total number of new or expedited applications received in the month; Approximate monthly denominator: 23,709

Why this matters: Backlog is an indicator of untimely applications. Monitoring and reducing backlog increases the likelihood that applications will be processed timely and that Coloradans will not go hungry.

Goal: **↓1% of current new or expedited application volume for the month**



Trend: Reached goal in March, July and August 2012.

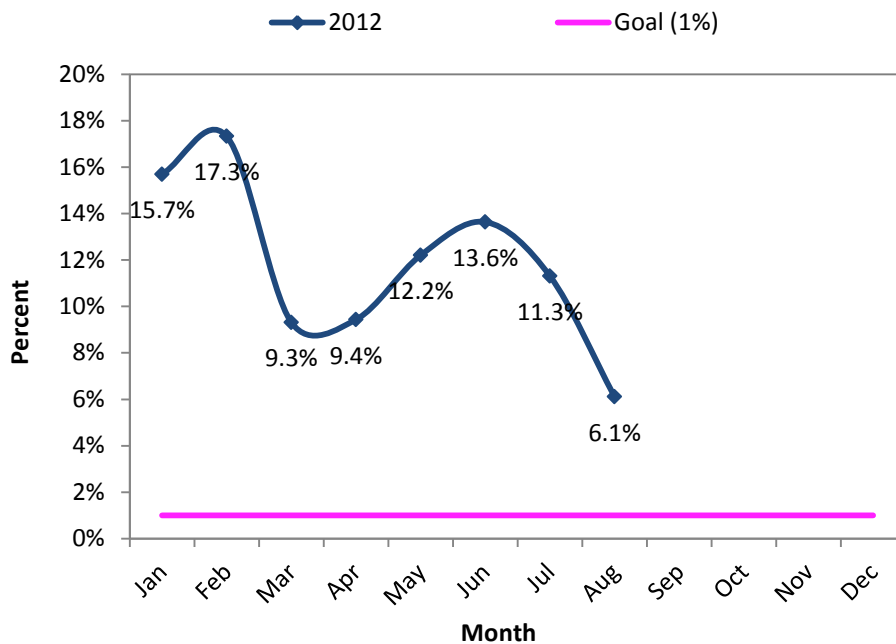
Food Assistance (FA)

Measure: **Backlog of redetermination applications**

How it is measured: *Numerator:* Number of redetermination applications that have exceeded processing timeframes by the last business day of the month
Denominator: Total number of redetermination applications received in the month; Approximate monthly denominator: 22,425

Why this matters: Backlog is an indicator of untimely applications. Monitoring and reducing backlog increases the likelihood that applications will be processed timely and that Coloradans will not go hungry.

Goal: ↓1% of current redetermination application volume for the month



Trend: Notable decline in March 2012 followed by a bubble, and then a decrease in July and August 2012. Has yet to reach the goal.

Notes: Backlog has been defined as any cases that are overdue as of the first of the month.

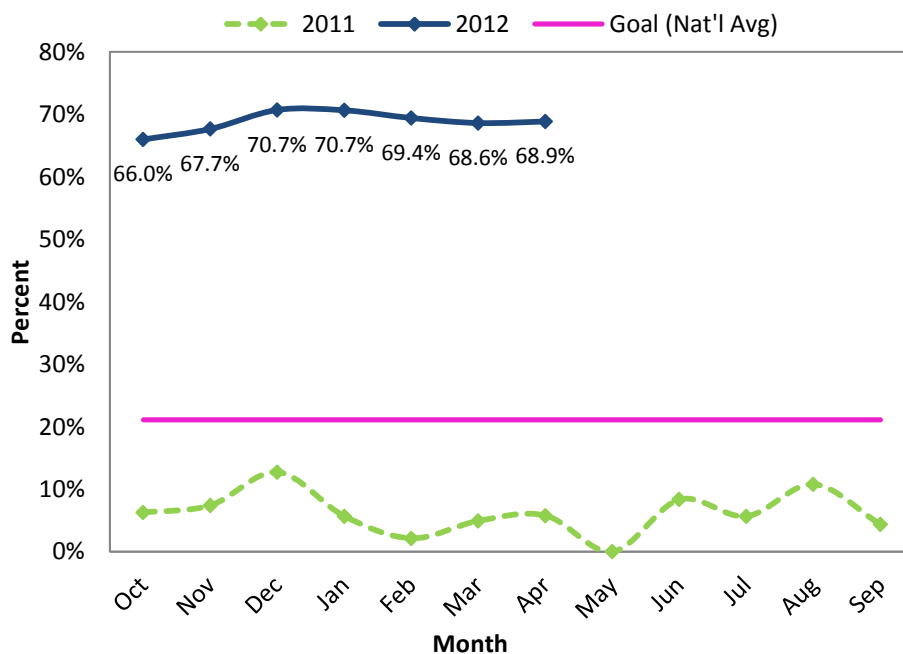
Food Assistance (FA)

Measure: **Accuracy of negative actions on a case (Federal Measure)**

How it is measured: *Numerator:* Number of incorrect negative actions sampled
Denominator: Total number of negative actions sampled; Approximate monthly denominator: 34

Why this matters: Processing applications accurately ensures that Coloradans receive the level of benefits for which they are eligible.

Goal: **↓**Below national average



Trend: Well above the national average since October 2011.

Notes: A negative action is any adverse action against a participant. Data runs in arrears, as the sample must be taken from completed months, and staff has 115 days to complete necessary review elements before reporting a final decision.

The United States Department of Agriculture (USDA) changed their criteria for this measure at the start of Federal Fiscal Year 2012, drastically increasing the number of errors and how they are counted against the states. This makes it challenging to compare against prior years' performance.

The goal for this measure changes every year and is based on the national performance average.

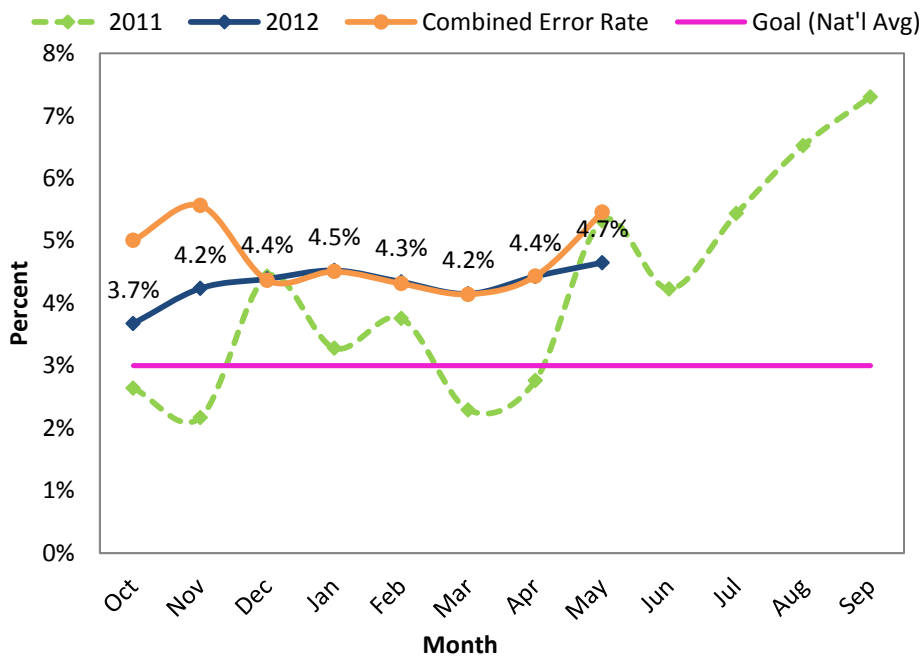
Food Assistance (FA)

Measure: **Error rate of payment (Federal Measure)**

How it is measured: *Numerator:* The dollar amount of unauthorized benefits in the sample
Denominator: Total authorized benefits in the sample; Approximate monthly denominator: \$24,000

Why this matters: Processing applications accurately ensures Coloradans have access to resources that increase their economic security.

Goal: **↓ Below national average**



Trend: Notable increase in second half of 2011 through the present sample.

Notes: Final data lag a quarter after the sample is pulled for review due to the time it takes for the selected sample to be completed.

The goal for this measure changes every year and is based on the national performance average.

For federal purposes, payment errors over \$50 are the only ones counted in the calculation (see dark blue line). In FFY11, this threshold was set at \$25 (see dotted green line). SNAP QA also tracks errors at any dollar threshold, called the “Combined Error Rate” (see orange line). This is captured for the first time in this report.

Food Distribution Program

Summary

Description

The Division of Food Distribution (known as the Food Distribution Program or FDP) exists to strengthen the nutritional safety net through the administration of the state's commodity food distribution programs. This includes overseeing the distribution of commodity foodstuffs through school and household programs intended to help supplement the diets of eligible, needy populations.

School programs include the Department of Defense Fresh Program, the Child and Adult Care Food Program (CACFP), and the National School Lunch (NSLP) and Summer Food Service Programs (SFSP), where commodity food is distributed to schools to help provide meals for eligible low-income students.

Household programs include The Emergency Food Assistance Program (TEFAP) and the Commodity Supplemental Food Program (CSFP), where food is provided to eligible individuals through local food pantries or used to make hot meals served at soup kitchens.

FDP works through school districts and financial authorities, as well as with partner agencies, to administer foodstuffs to Coloradans in need.

Acting Director: Todd Jorgenson

Executive Summary

- FDP developed three measures including *Caseload Capacity*, *Entitlement Spending*, and the *National School Lunch Program Food Expiration*.
- In October 2011, a USDA audit found expired NSLP food stock in one of FDP's warehouses and FDP was at risk of being fined. As part of a negotiated agreement with the USDA, FDP has incorporated the tracking of expired NSLP foodstuffs as a C-Stat measure.

Measures

- [Caseload Capacity](#)
- [Entitlement Spending](#)
- [NSLP Food Expiration](#)

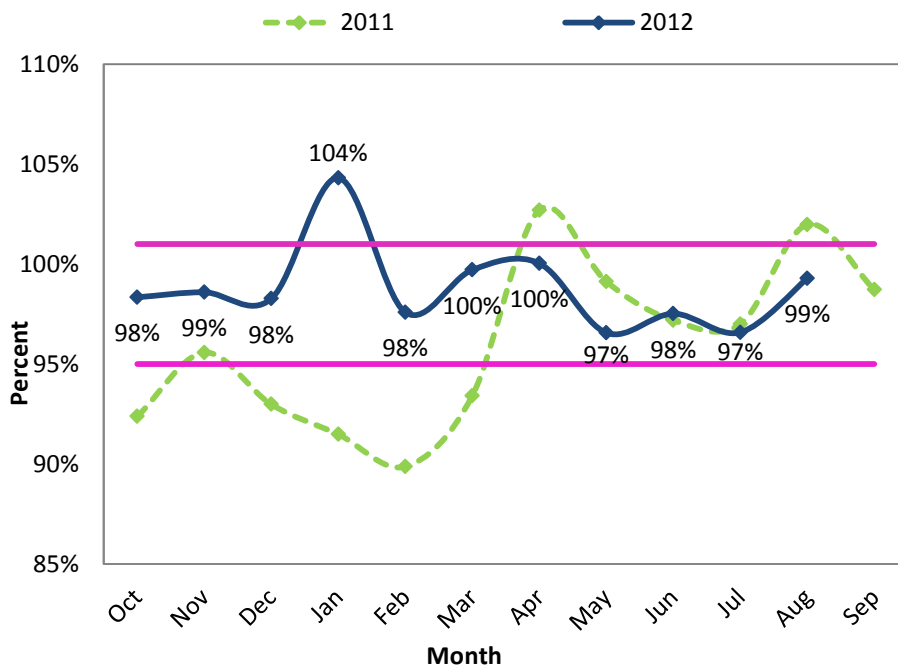
Food Distribution Program (FDP)

Measure: **Caseload capacity**

How it is measured: *Numerator:* Number of total cases served in a month
Denominator: Total number of cases per month to meet Federal Fiscal Year (FFY) 2012 goal; Monthly denominator: 18,403

Why this matters: Maintaining the caseload capacity ensures eligible Coloradans have access to food commodities and decreases their likelihood of going hungry.

Goal: **↔** Maintain between 95% (17,310) and 101% (18,403)



Trend: Held above 95% throughout the current FFY.

Food Distribution Program (FDP)

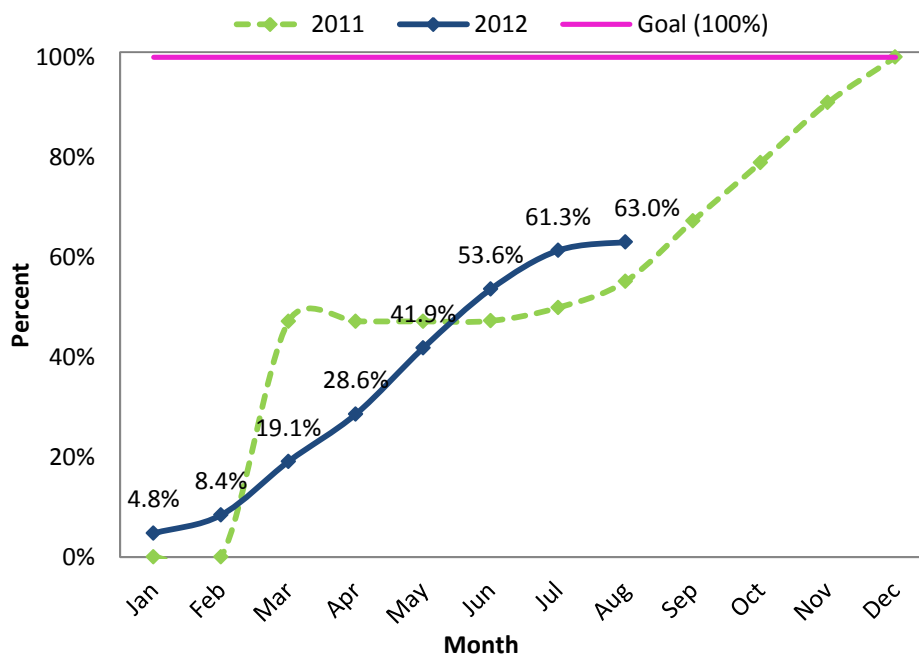
Measure: **Maximize entitlement spending**

How it is measured: *Numerator:* Cumulative amount of entitlement spent

Denominator: Total entitlement for Federal Fiscal Year (FFY) 2012; \$3.4 Million

Why this matters: Maximizing entitlement spending ensures eligible Coloradans have access to food commodities and decreases their likelihood of going hungry.

Goal: **↑100%**



Trend: Entitlement spending has grown over the Federal Fiscal Year.

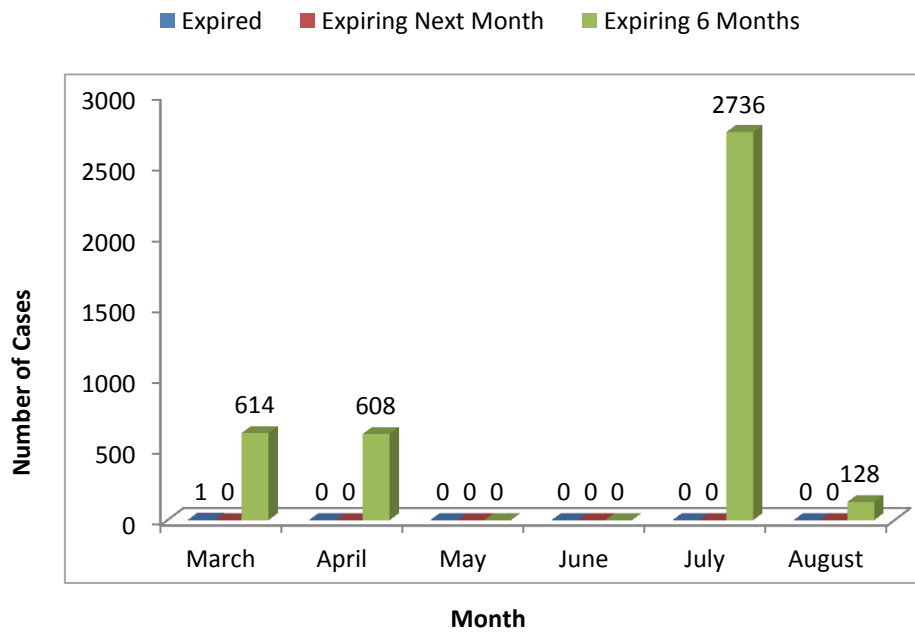
Food Distribution Program (FDP)

Measure: **Expiration of National School Lunch Program (NSLP) food**

How it is measured: Total cases of NSLP food that expired during the month

Why this matters: Coloradans deserve fresh, healthy food.

Goal: ↓0



Trend: One case of expired food in March 2012.

Division of Vocational Rehabilitation

Summary

Description

The Division of Vocational Rehabilitation (DVR) exists to provide assistance to individuals whose disabilities have resulted in a barrier to employment. DVR provides assistance through an array of rehabilitation services that includes evaluation and diagnosis, physical and mental restoration, rehabilitation technology, training, education and employment services, as well as placement and post-employment supportive services. DVR is a state-run program that helps disabled Coloradans participate in meaningful work throughout Colorado.

Director: Nancy Smith

Executive Summary

- The Division initially presented federal performance standards and outcomes, and elected to continue to track the attainment of the federal standard for *Successful Employment Outcomes* through C-Stat, but has refined the methodology for viewing this measure and established a new goal. Federal performance standards require one additional successful employment outcome over the previous year. DVR has elected to set the goal at a two percent increase over the previous year.
- DVR has identified a high *Consumer Attrition Rate*, for participants who have been determined eligible, as a measure in the spring of 2012. DVR has established the goal of decreasing this measure by two percent over the previous year.
- As several other Office of Economic Security programs have established measures that track how quickly customers are being determined eligible for services, DVR has begun to look at preliminary data around *Timeliness of Eligibility Determination*; however, the Division currently lacks the capacity to view complete, real-time data on this measure.
- In July 2012, DVR supplied *Competitive Employment Wages* as a meaningful outcome measure for participants.

Measures

- [Successful Employment Outcomes](#)
- [Consumer Attrition Rate](#)
- [Timeliness of Eligibility Determination](#)
- [Competitive Employment Outcomes](#)

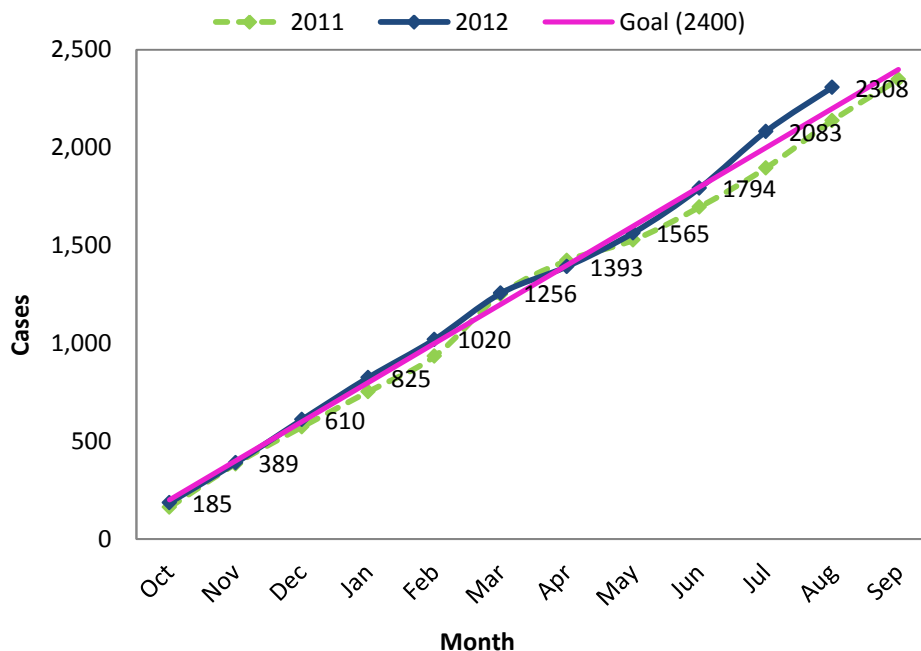
Division of Vocational Rehabilitation (DVR)

Measure: **Successful employment outcomes**

How it is measured: *Numerator:* Total number of successful employment outcomes during the month
Denominator: Total cases needed in Federal Fiscal Year (FFY) 2012 to reach 102% of FFY11; Monthly Denominator: 203

Why this matters: Successful employment is a measure of the DVR’s effectiveness and can increase a person’s likelihood of economic security.

Goal: **↑102% of 2011 baseline**



Trend: Steady progress along trajectory necessary to meet the goal.

Notes: Goal represents an aggregate increase in the total number of successful outcomes from the previous year.

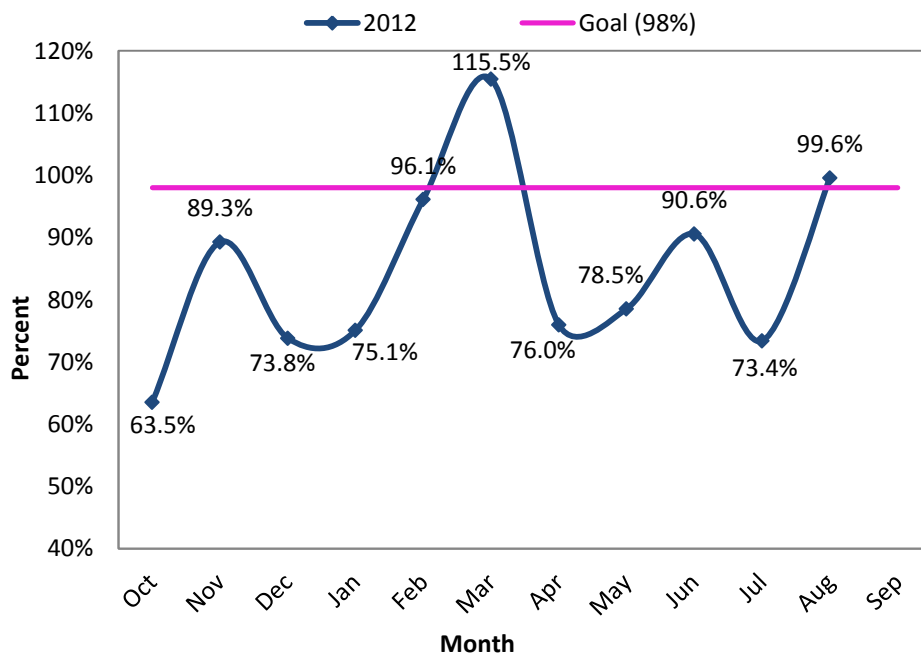
Division of Vocational Rehabilitation (DVR)

Measure: **Consumer attrition**

How it is measured: *Numerator:* Total number of cases closed prior to plan implementation
Denominator: Average number of closed cases needed in Federal Fiscal Year (FFY) 2012 to reach 98% of FFY11; Monthly denominator: 233

Why this matters: Ensuring eligible participants are retained in the vocational rehabilitation program and provided with an individualized employment plan greatly increases their likelihood of long-term economic security.

Goal: **↓98% of 2011 baseline**



Trend: Wide variation in consumer attrition. Performance mostly in the 70% range.

Notes: Once DVR participants are deemed eligible for services, DVR has 120 days to develop an individualized employment plan. This measure tracks those individuals who leave before an individualized employment plan is established.

Division of Vocational Rehabilitation (DVR)

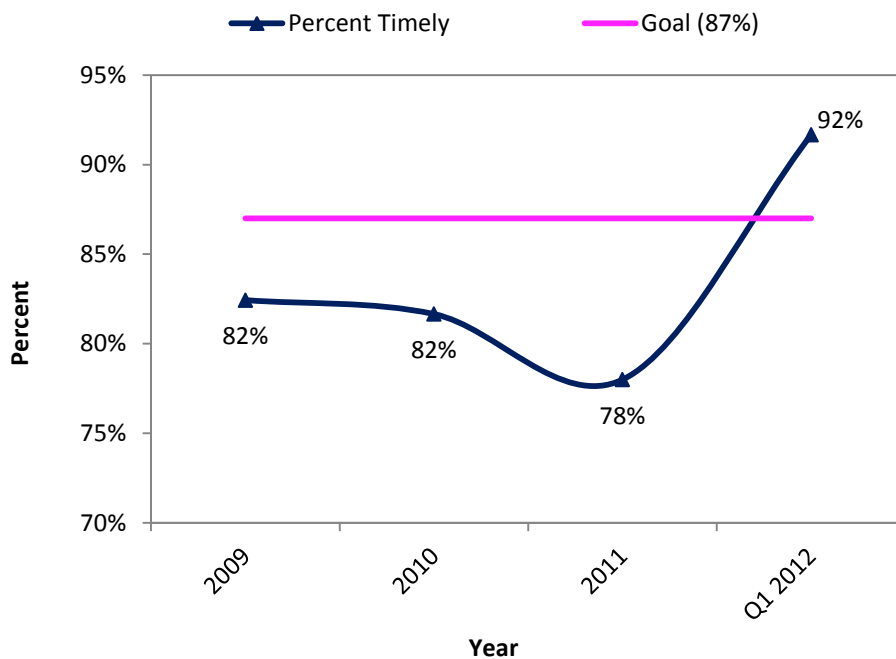
Measure: **Timeliness of eligibility determination**

How it is measured: *Numerator:* Number of sampled applications with eligibility determined and/or with documentation in 60 days or less (Approximately seven percent sampled annually)

Denominator: Total number of sampled applications; 165 through Quarter One 2012

Why this matters: Processing applications efficiently ensures eligible, disabled Coloradans have prompt access to employment resources that will increase their likelihood of achieving economic self-sufficiency, as quickly as possible.

Goal: **↑87%**



Trend: Timeliness increased significantly in Quarter One 2012. No updated data available since last report.

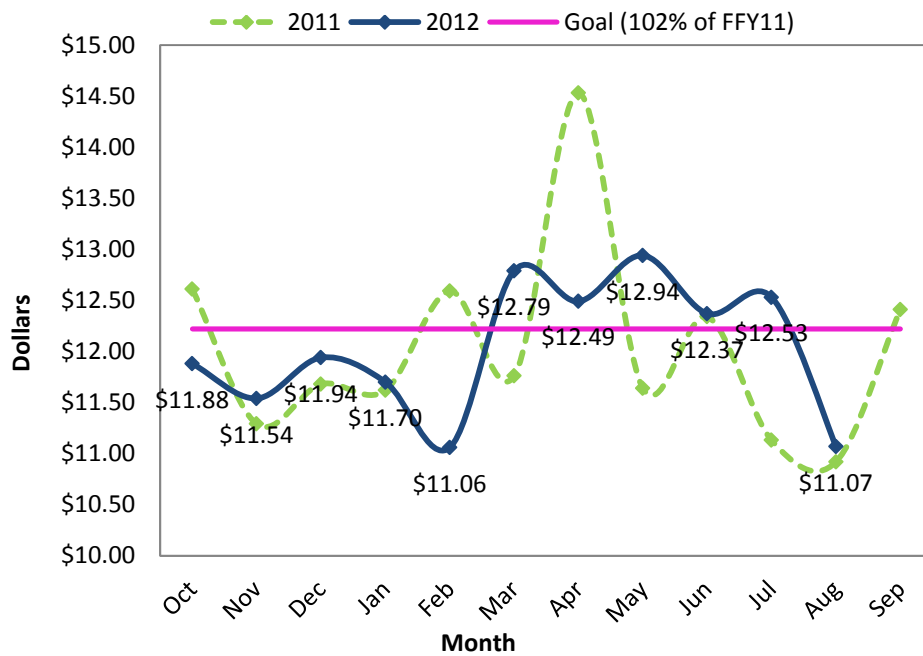
Division of Vocational Rehabilitation (DVR)

Measure: **Competitive employment wages**

How it is measured: Cumulative average hourly wage for competitively employed participants through the current month

Why this matters: Employing individuals at a competitive wage enhances their likelihood of economic security and wage progression over time.

Goal: **↑102% of FFY 2011 baseline**



Trend: Hovering around goal line during current FFY.

Office of Long Term Care

Description

The Office of Long Term Care (OLTC) houses programs that provide economic supports for aging and disabled populations, residential and therapeutic services for developmentally disabled populations, operates nursing homes for veterans, and protective services for adults. OLTC consists of Aging and Adult Services, Developmental Disabilities, Disability Determination Services, Division of Regional Center Operations, and State Veterans Nursing Homes.

Director: Joscelyn Gay

Aging and Adult Services

Summary

Description

The Division of Aging and Adult Services' (AAS) programs provide assistance in three general areas. First, programs exist to provide financial assistance for low-income or disabled adults and includes the following programs: Aid to the Needy Disabled (AND) and Aid to the Blind (AB), Old Age Pension (OAP), Home Care Allowance (HCA), Adult Foster Care (AFC), Burial Assistance, and Repatriation. Second, programs exist to provide support and include a variety of services designed to help seniors remain safely in their homes, such as nutrition programs, caregiver programs, money management programs, senior community service employment programs (SCSEP), legal assistance, as well as supportive services. Lastly, programs exist to provide protection and advocacy for at-risk adults through the Adult Protective Services and Long Term Care Ombudsman programs.

Acting Director: Todd Coffey

Executive Summary

- AAS has identified three performance measures (within two of the three program areas outlined above) to be examined on a monthly basis.
- Within the program area of protection and advocacy, AAS collects data on *Timely Adult Protection Inquiries*. This program is delivered, locally, at the county level.
 - Through analysis in C-Stat data, integrity was identified as an issue contributing to untimely adult protection inquiries. AAS conducted several trainings with the counties in June and July 2012, regarding the adult protection data system related to the Date of Contact and Report Closure Reasons fields. In addition, a desk aid was developed to assist caseworkers in choosing the correct closure reason and applying the correct Date of Contact and Effective End Date in the data system.
- Within the program area of financial assistance, AAS collects data on *Timely Applications* and *Timely Redeterminations*. This program is delivered, locally, at the county level.
 - In September 2012, the performance goals for these two measures were increased from 90% to 95%.
 - AAS continues to collaborate with two Divisions within the Office of Economic Security (OES), the Division of Colorado Works and the Division of Food Assistance, in order to examine how strategies for improvement that have been successfully implemented in OES might be transferred to the application process for financial assistance in AAS.

Measures

- [Timely Adult Protection Inquiries](#)
- [Timely New Applications](#)
- [Timely Redetermination Applications](#)

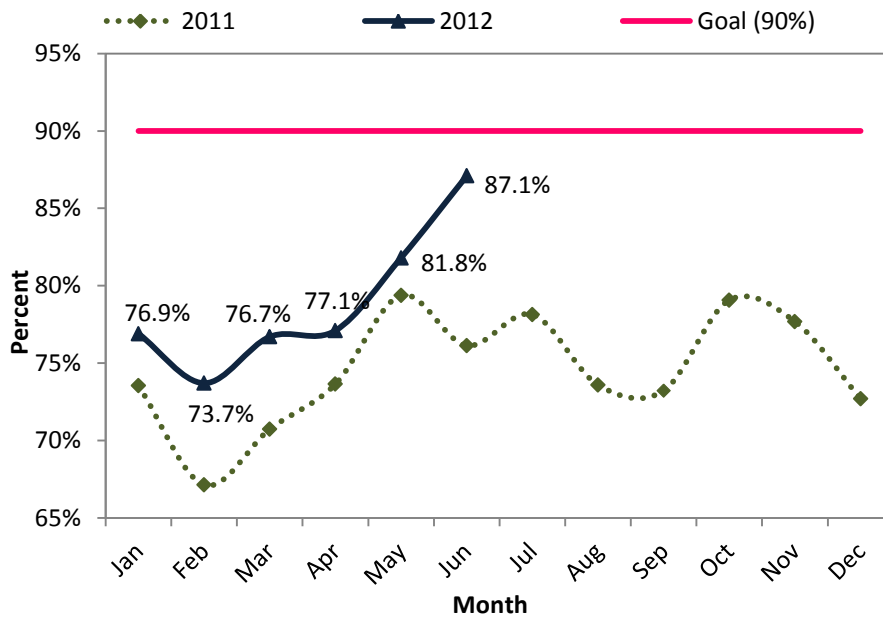
Aging and Adult Services (AAS)

Measure: **Timely adult protection inquiries**

How it is measured: *Numerator:* Number of timely responses
Denominator: Number of responses; Approximate monthly denominator: 543

Why this matters: Timely response to adult protection inquiries increases the safety of vulnerable adults.

Goal: **↑90%**



Trend: Timeliness has steadily increased since February 2012. Close to meeting 90% goal.

Notes: Data are only available 60 days after the protection response.

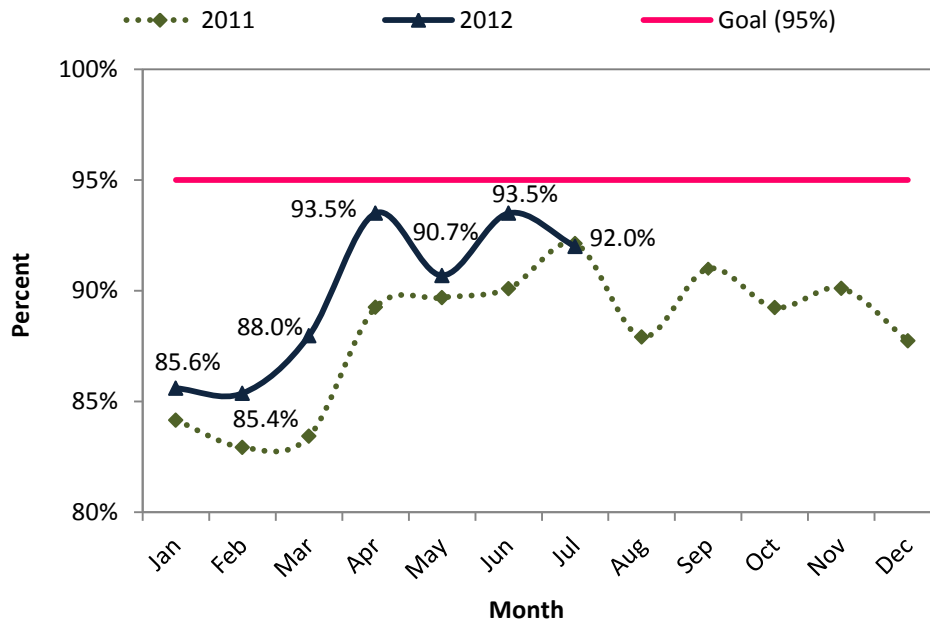
Aging and Adult Services (AAS)

Measure: **Timely new benefit applications**

How it is measured: *Numerator:* Number of timely processed new benefit applications
Denominator: Number of processed new benefit applications; Approximate monthly denominator: 2,377

Why this matters: Processing adult benefit applications efficiently ensures eligible Coloradans have needed access to resources that increase their economic security.

Goal: **↑95%**



Trend: Starting in February 2012, performance steadily increased from 85% to 94%. Since May 2012, performance has varied from 91% to 94%.

Note: Goal was changed to 95% beginning in September 2012.

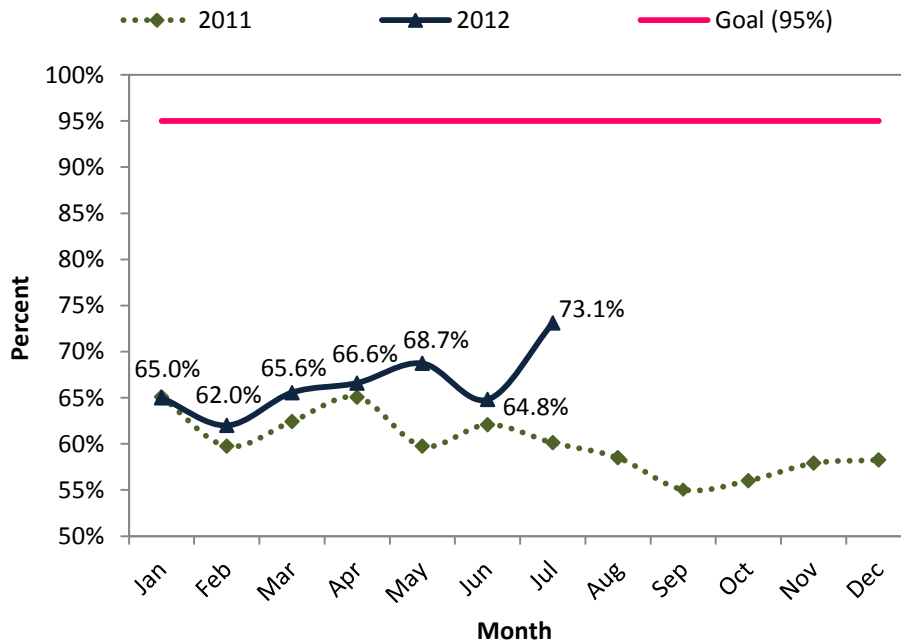
Aging and Adult Services (AAS)

Measure: **Timely redetermination applications**

How it is measured: *Numerator:* Number of timely processed redetermination applications
Denominator: Number of processed redetermination applications; Approximate monthly denominator: 1,475

Why this matters: Processing adult benefit applications efficiently ensures eligible Coloradans have continued access to resources that increase their economic security.

Goal: **↑95%**



Trend: Performance hovering around 65% from January to June 2012. Performance significantly increased in July 2012 to 73%.

Note: Goal was changed to 95% beginning in September 2012.

Developmental Disabilities

Summary

Description

The Division for Developmental Disabilities (DDD) administers services for both children with developmental disabilities (birth through age 17) and for adults with developmental disabilities (age 18 and older). Three programs assist children and families: 1) Children's Extensive Support Services, which provides enhanced in-home supports for children considered to be most in need due to the child's disability, 2) Early Intervention Services, which provide therapies and developmental intervention to infants and toddlers, and 3) Family Support Services, which assist with costs beyond those typically experienced by other families. Two programs assist adults: 1) Home and Community Based Services-Developmental Disabilities, which are aimed at adults who require residential and other supports to live safely (including access to 24-hour supervision) and who do not have other sources for meeting those needs, and 2) Home and Community Based Services-Supported Living Services, which supplement already available supports for adults who either live semi-independently with limited supports or who, if they need extensive support, are getting that support from other sources, such as their family.

Acting Director: Barb Ramsey

Executive Summary

- Currently, DDD has identified three performance measures. In the area of adult programming, DDD collects data on *Participants Receiving Supported Employment*. In the area of child programming, DDD collects data on *Infants and Toddlers who Receive Timely Service* and *Increased Growth in the Acquisition and Use of Knowledge and Skills*.
- Community Centered Boards (CCBs), nonprofit organizations, are contracted with by DDD to manage resources at the local level, determine eligibility for community-based services and provide case management services. CCBs are designated by the State and may either provide services directly or purchase services.
- With regard to the performance measure of *Infants and Toddlers who Receive Timely Service*, through analysis DDD identified the need for modifications to the data system utilized by the CCBs as to why a service was late.

Measures

- [Participants Receiving Supported Employment](#)
- [Timely Service-Infants and Toddlers](#)
- [Increased Growth-Infants and Toddlers](#)

Division for Developmental Disabilities (DDD)

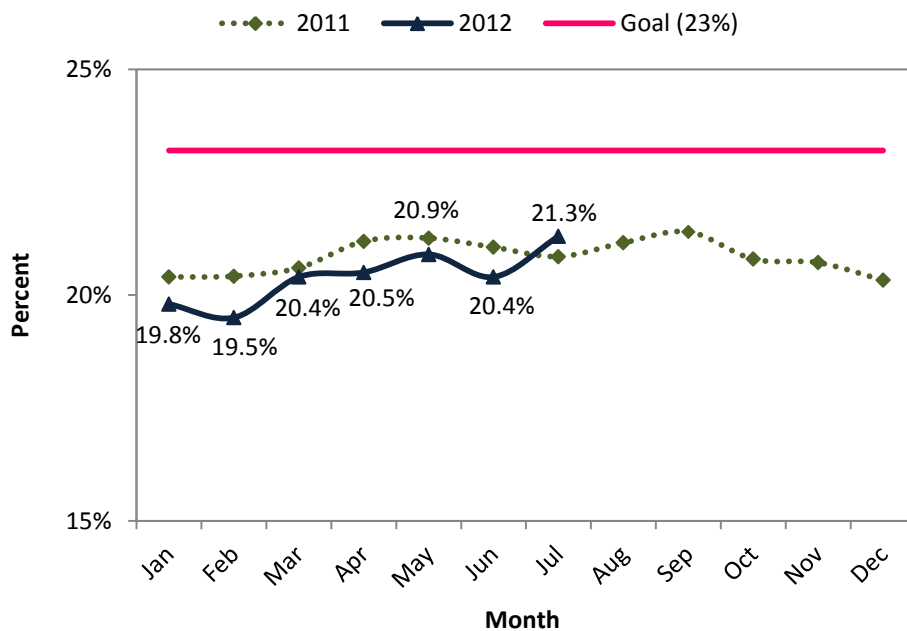
Measure: **Participants receiving supported employment**

How it is measured: *Numerator:* Number of clients for whom a supported employment claim was paid in a month, based on billing claims data

Denominator: Number of clients for whom a day services claim was paid in a month, based on billing claims data; Approximate monthly denominator: 6,110

Why this matters: People with developmental disabilities gain greater independence and increase their daily living skills when employed.

Goal: **↑23%**



Trend: Little variation. Has not met 23% goal.

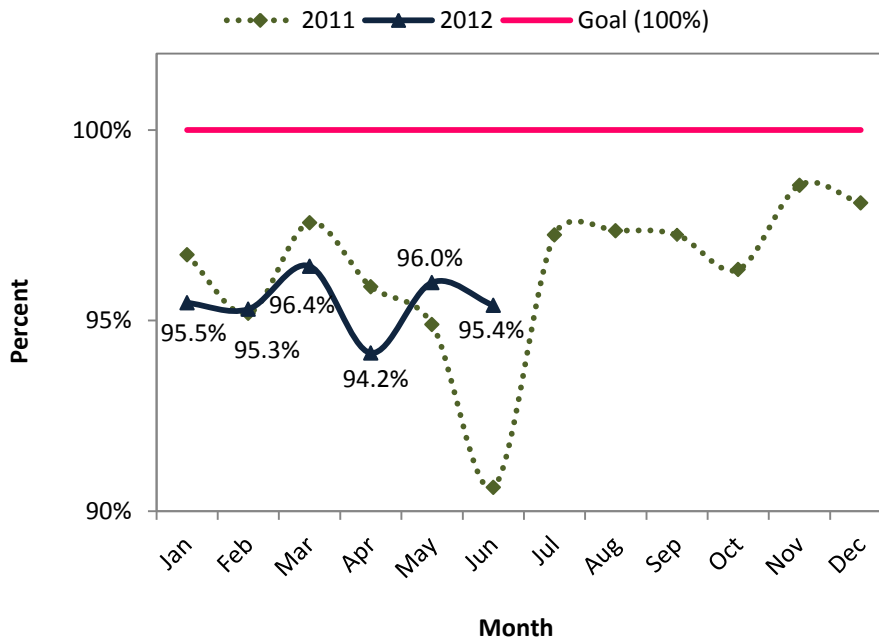
Division for Developmental Disabilities (DDD)

Measure: **Percent of children receiving timely early intervention services (Federal Measure)**

How it is measured: *Numerator:* Number of infants and toddlers receiving timely (within 28 days of parent consent) new service
Denominator: Number of infants and toddlers receiving a new service;
 Approximate monthly denominator: 896

Why this matters: Receiving timely early intervention services puts a child on a path toward enhanced well-being, as soon as possible.

Goal: **↑100%**



Trend: Ranges from 94% to 96% in 2012. Has not met 100% goal.

Notes: Data are not available until 60 days after services are initiated.

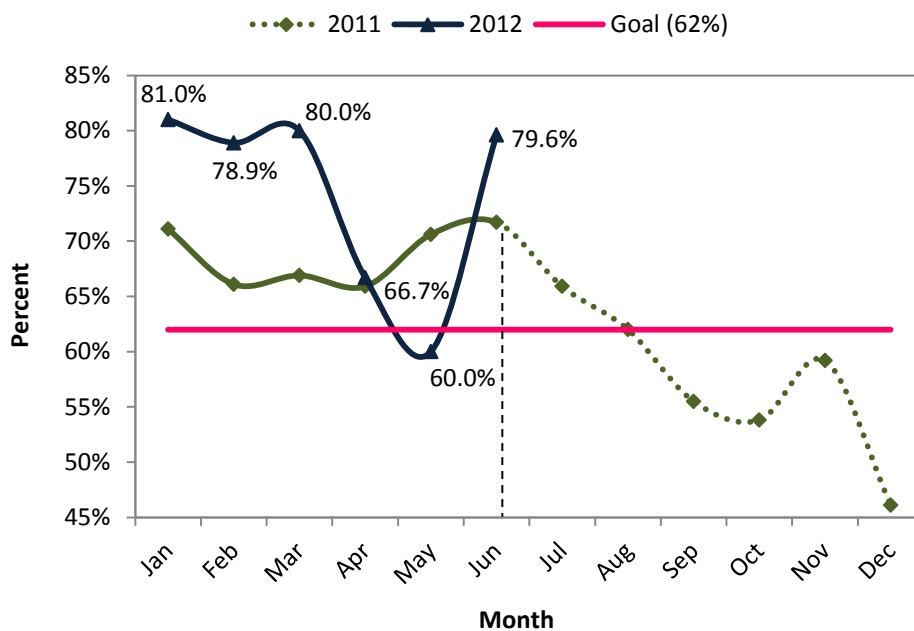
Division for Developmental Disabilities (DDD)

Measure: Percent of infants and toddlers with growth in knowledge and skills (Federal Measure)

How it is measured: *Numerator:* Number of participants with a substantial increase in their rate of growth at exit from early intervention services (EIS)
Denominator: Number of participants who exited EIS and were not functioning at age level at entry; Approximate monthly denominator: 41

Why this matters: Infants and toddlers that progress early in life have a greater likelihood of long-term success.

Goal: ↑62% (Federal Goal)



Trend: Significant increase in performance on this measure from May 2012 to Jun. 2012. Currently, performance is above the goal at 79.6%.

Notes: Data are not available until 60 days after services are completed. This is a longitudinal measure in which ratings are collected at entry to (within 16 weeks of referral) and at exit from (within 90 days prior to exit) EIS. Performance reflects only those children who make progress enough to move closer to the functioning of same-aged peers. It does not include children who made progress, but not enough to move closer to same-aged peer development.

From January to June 2011, increased growth was measured utilizing the same tool at entry and exit. In July 2011, policy changes allowed for the utilization of a different tool at exit than at entry. In January 2012, data reporting was modified to represent only those children assessed utilizing the same tool at entry and exit. Therefore, performance represents a subset of the entire population given that some children are still assessed at entry and exit using two different tools.

Disability Determination Services

Summary

Description

The Division of Disability Determination Services (DDS) makes disability decisions for the federal Social Security Administration (SSA). DDS staff gathers medical information from the sources listed by clients and any new sources discovered in that process. DDS staff evaluates that evidence against [Social Security Disability criteria](#). Applicants must have a medically determinable physical or mental impairment that is expected to result in death, or which will last for at least 12 consecutive months, and which prevents them from performing the work related activities of their previous jobs or any other jobs which they might be able to perform, based on their age, education, and work experience.

Social Security has two disability programs, Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI). The definition of medical disability is the same under both programs. However, [SSDI](#) pays disability benefits to the applicant and certain members of the applicant's family, if the applicant is "insured" meaning that the applicant worked long enough and paid Social Security taxes. SSI pays disability benefits based on financial need.

Director: Vicki Johnson

Executive Summary

- Currently, DDS has identified two performance measures to be examined on a monthly basis.
- DDS collects data on *Mean Number of Days to Process Initial Eligibility Decisions* and *Percentage of Accurate Initial Eligibility Decisions*.
 - DDS has been involved in the discussion and implementation of several process improvement projects. Initially, these projects were related to the facility relocation of the DDS office (which occurred in June 2012) and were aimed at improving efficiency in the work process, information technology, safety and security and green initiatives. More recently, DDS has identified three areas in which to examine the possibility of implementing process improvements. These areas include 1) process time, 2) productivity and 3) staff retention.

Measures

- [Mean Number of Days to Process Initial Eligibility Decisions](#)
- [Accuracy of Initial Eligibility Decisions](#)

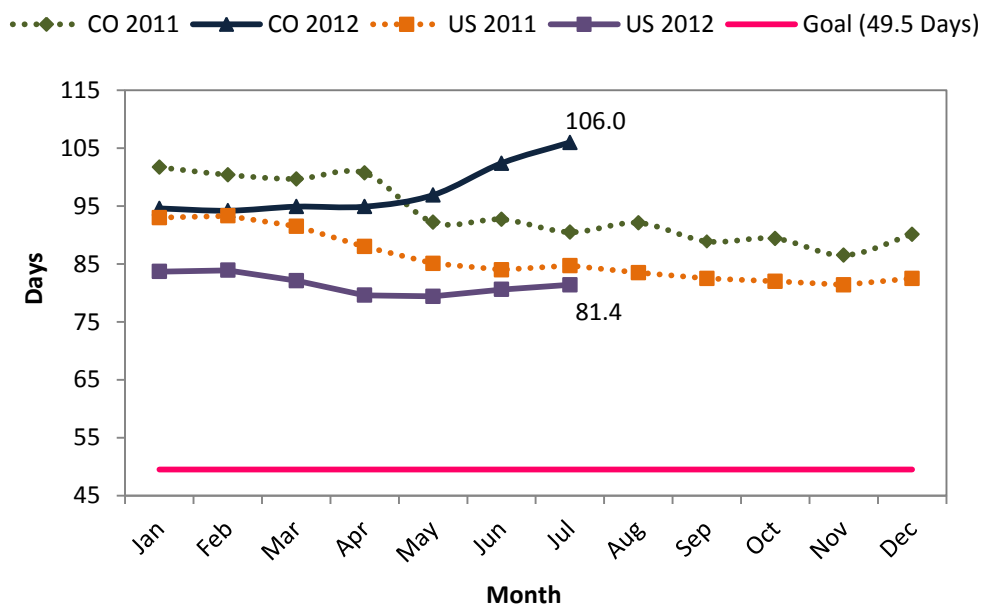
Disability Determination Services (DDS)

Measure: **Mean number of days to process an initial eligibility decision (Federal Measure)**

How it is measured: *Numerator:* Number of days to process initial eligibility decisions
Denominator: Number of initial applications processed; Approximate monthly denominator: 3,000

Why this matters: Determining medical eligibility in a timely manner ensures disabled Coloradans have access to needed resources that increase their economic security.

Goal: **↓49.5 Days (Federal Goal)**



Trend: Mean number of days has shown an increase since April 2012 and is currently at its highest point, at 106.0 days.

Notes: This measure utilizes data from the Social Security Disability Insurance (SSDI) program only. Similar data are available for the SSI program; however, the means for each program are, typically, within a few days of each other and run parallel to one another. Therefore, because SSDI has more cases processed, DDS chose that program on which to report data.

In July 2012, national data were added to the graph for this performance measure.

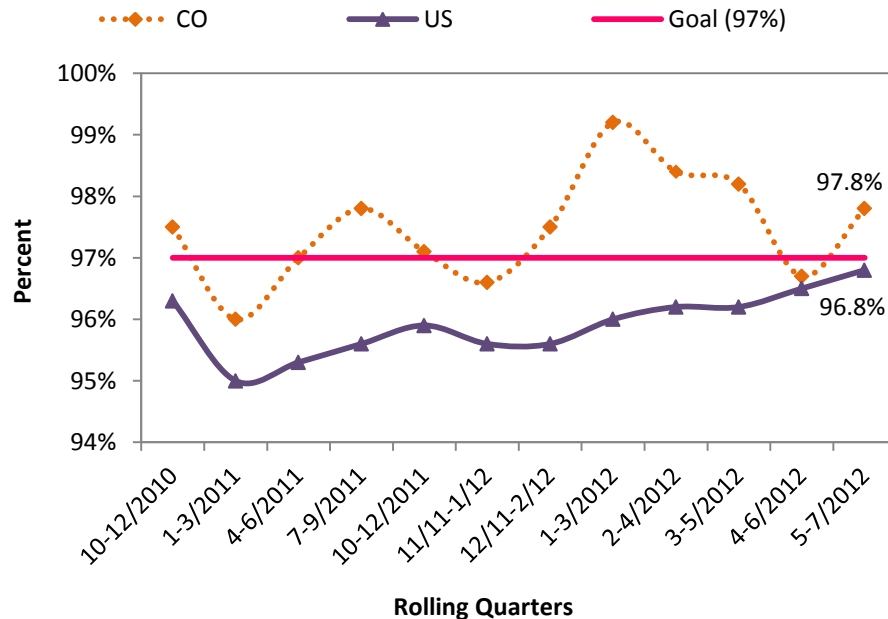
Disability Determination Services (DDS)

Measure: **Percent of accurate initial eligibility decisions (Federal Measure)**

How it is measured: *Numerator:* Number of accurate initial eligibility decisions (i.e., no documentation or decisional errors were found)
Denominator: Number of initial eligibility decisions sampled by Social Security Administration-Disability Quality Branch; Approximate quarterly denominator: 150

Why this matters: Accurate processing of initial eligibility decisions increases the accessibility of financial assistance to vulnerable populations and ensures that only those that are eligible receive the benefit.

Goal: **↑97% (Federal Goal)**



Trend: DDS has exceeded the national rate consistently over the past several rolling quarters and is above the 97% goal in the current rolling quarter.

Notes: This measure includes data from both the Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) programs.

Performance data are displayed utilizing a rolling, three month average given that a sample of only 50 cases is drawn to examine accuracy each month. In this way, data are available more timely (i.e., monthly instead of quarterly) and each data point represents a meaningful sample size (i.e., 150 cases).

Division of Regional Centers Operations

Summary

Description

The Division for Regional Center Operations (DRCO) serves persons with developmental disabilities who have the most intensive needs. The DRCO coordinates service delivery between three State-owned and operated regional centers: Grand Junction Regional Center (GJRC), Pueblo Regional Center (PRC), and Wheat Ridge Regional Center (WRRRC), that provide a number of services including 24-hour supervision, residential, day programming, habilitation, medical, training and behavioral intervention, and short term emergency/crisis support to the community system.

Director: Richard Ratliff

Executive Summary

- Currently, DRCO has identified four performance measures, within three treatment/service models, to be examined on a monthly basis. These treatment models include Short-Term Treatment and Stabilization, Intensive Treatment, and Long-Term Habilitation. Each Regional Center implements at least two, in many cases all three, of these treatment/service models. Where applicable, Data are also displayed by Regional Center.
- The performance measure of *Decreased Use of Physical Interventions* is collected cumulatively for all treatment/service models and is displayed by Regional Center.
- Within the treatment model of Short-Term Treatment and Stabilization, DRCO collects data on *Length of Time to Become Ready for Transition/Discharge* (formerly, “Mean Length of Stay from Admission to Time Ready to Transition”), *Length of Time to Transition/Discharge* (formerly, “Mean Length of Stay from Time Ready to Transition to Present or Transition”), and *Percent of Residents with No Relapse 90 Days Post-Transition/Discharge*.
- Within the treatment model of Intensive Treatment, DRCO collects data on *Length of Time to Become Ready for Transition/Discharge* (formerly, “Mean Length of Stay from Admission to Time Ready to Transition”), and *Length of Time to Transition/Discharge* (formerly, “Mean Length of Stay from Time Ready to Transition to Present or Transition”).

Measures

- [Decreased Use of Physical Interventions](#)
- Length of Time to Become Ready for Transition/Discharge-[Short-Term](#), [Intensive](#)
- Length of Time to Transition/Discharge-[Short-Term](#), [Intensive](#)
- [Percent of Residents with No Relapse 90 Days Post-Transition/Discharge-Short Term](#)

Division of Regional Centers Operations (DRCO)

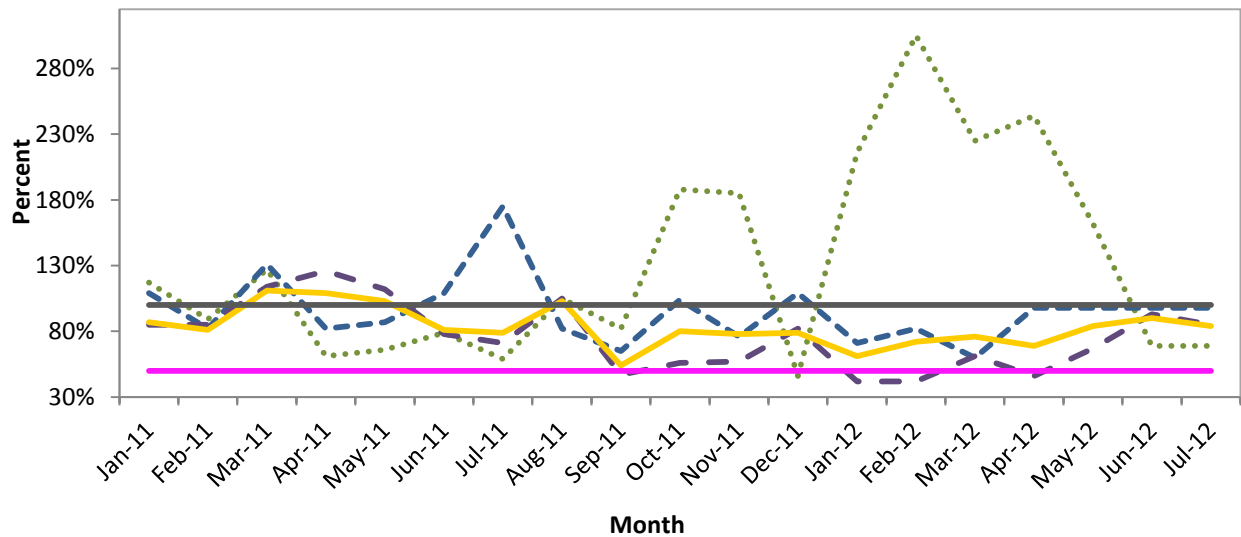
Measure: **Decreased use of physical interventions**

How it is measured: *Numerator:* Number of physical interventions (Current)
Denominator: Number of physical interventions (Baseline); Approximate monthly denominator: Grand Junction: 30, Pueblo: 18, Wheat Ridge: 153, DRCO: 201

Why this matters: Reducing the use of physical interventions decreases the likelihood of trauma and creates a safer environment overall.

Goal: **↓50% of baseline**

..... Grand Junction - - - Pueblo - - - Wheat Ridge — DRCO — Current Goal (50%) — Baseline (100%)



Trend: DRCO, as a whole, has been consistently below baseline (i.e., 100%) since September 2011.

Notes: The baseline of number of physical interventions was calculated using data collected from January 2011 to June 2011.

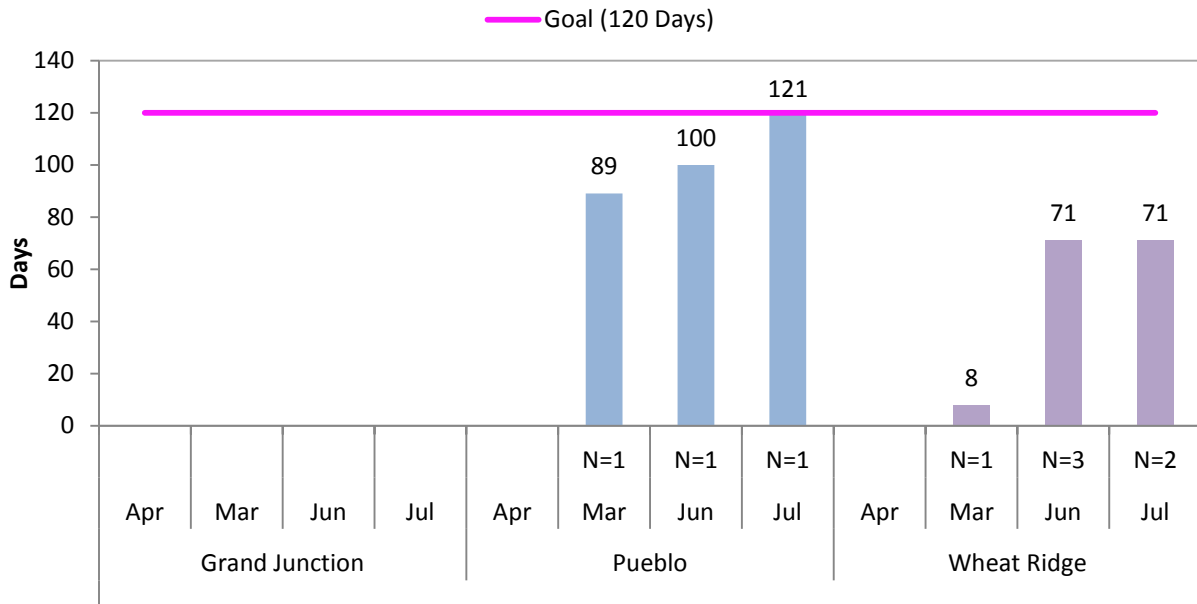
Division of Regional Centers Operations (DRCO)

Measure: **Length of time to become ready for transition/discharge-Short-term model (Modified)**

How it is measured: *Numerator:* Number of days from DRCO admission to time ready for transition/discharge
Denominator: Number of individuals who became ready in the month; See graph for monthly denominators

Why this matters: Reducing the length of time to become ready for transition/discharge puts individuals on a path toward enhanced independence more quickly.

Goal: **↓120 Days**



Trend: At this time, GJRC has no individuals in this model. Additionally, no individuals became ready at PRC and WRRC in the month of April 2012. Primarily, for those who became ready, the process, across Centers, from May 2012 to July 2012 took less than 120 days, with the exception of PRC in Jul. 2012 at 121 days.

Note: Given the new reporting methodology created in April, data are not available prior to that month.

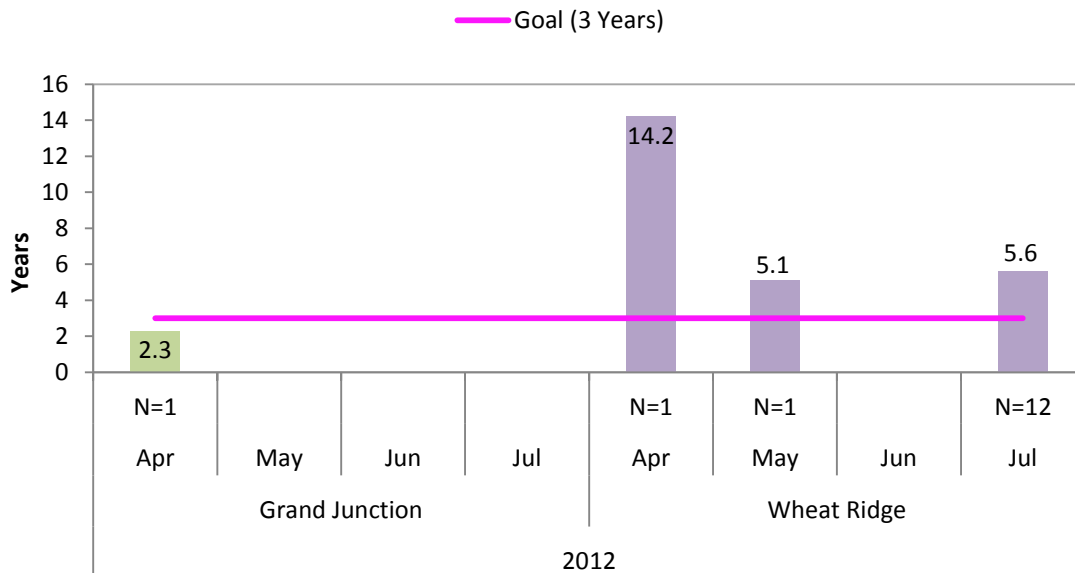
Division of Regional Centers Operations (DRCO)

Measure: **Length of time to become ready for transition/discharge-Intensive model (Modified)**

How it is measured: *Numerator:* Number of years from DRCO admission to time ready for transition/discharge
Denominator: Number of individuals who became ready in the month; See graph for monthly denominators

Why this matters: Reducing the length of time to become ready for transition/discharge puts individuals on a path toward enhanced independence more quickly.

Goal: **↓3 Years**



Trend: PRC does not offer this treatment model. In addition, no individuals became ready at GJRC in the months of May, June and July 2012 and in June for WRRRC. For those who became ready, the process, across Centers, from April 2012 to July 2012 took more than 3 years.

Note: Given the new reporting methodology created in April, data are not available prior to that month.

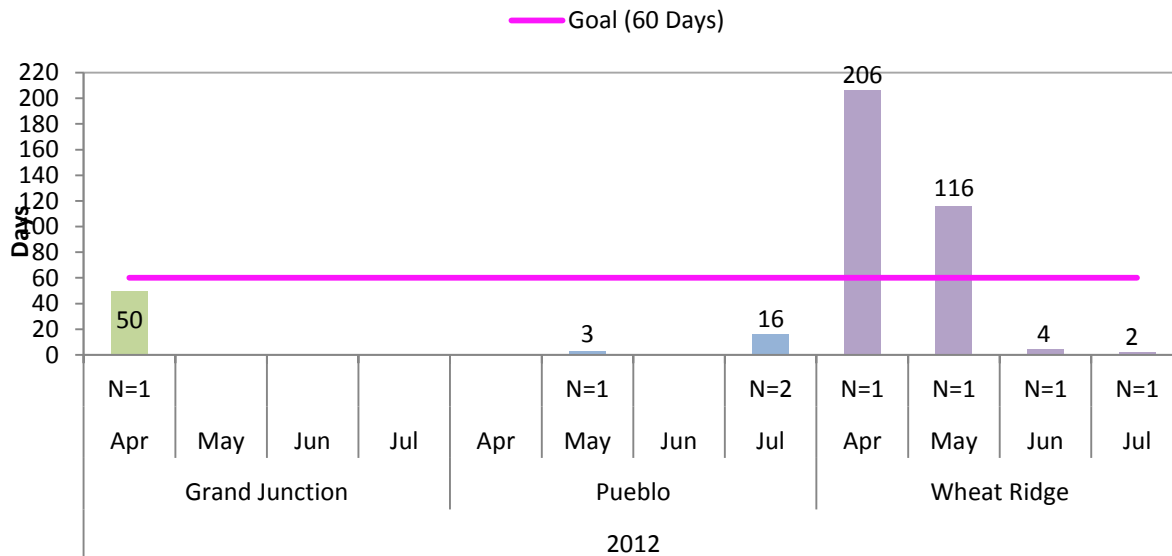
Division of Regional Centers Operations (DRCO)

Measure: **Length of time to transition/discharge-Short-term model (Modified)**

How it is measured: *Numerator:* Number of days from time ready for transition/discharge to transition/discharge to a private provider
Denominator: Number of individuals who transitioned in the month; See graph for monthly denominators

Why this matters: Reducing the length of time to transition/discharge puts individuals on a path toward enhanced independence more quickly.

Goal: **↓60 Days**



Trend: GJRC had one individual transition to a community provider in April 2012, and has had no other individuals in this model since that time. The overall trend, for the past 4 months, is a decrease in length of time to transition/discharge.

Note: Given the new reporting methodology created in April, data are not available prior to that month.

Division of Regional Centers Operations (DRCO)

Measure: **Length of time to transition/discharge-Intensive model (Modified)**

How it is measured: *Numerator:* Number of days from time ready for transition/discharge to transition/discharge to a private provider
Denominator: Number of individuals who transitioned in the month; See graph for monthly denominators

Why this matters: Reducing the length of time to transition/discharge puts individuals on a path toward enhanced independence more quickly.

Goal: ↓120 Days

No data available.

Trend: No individuals have discharged from this model in the past four months.

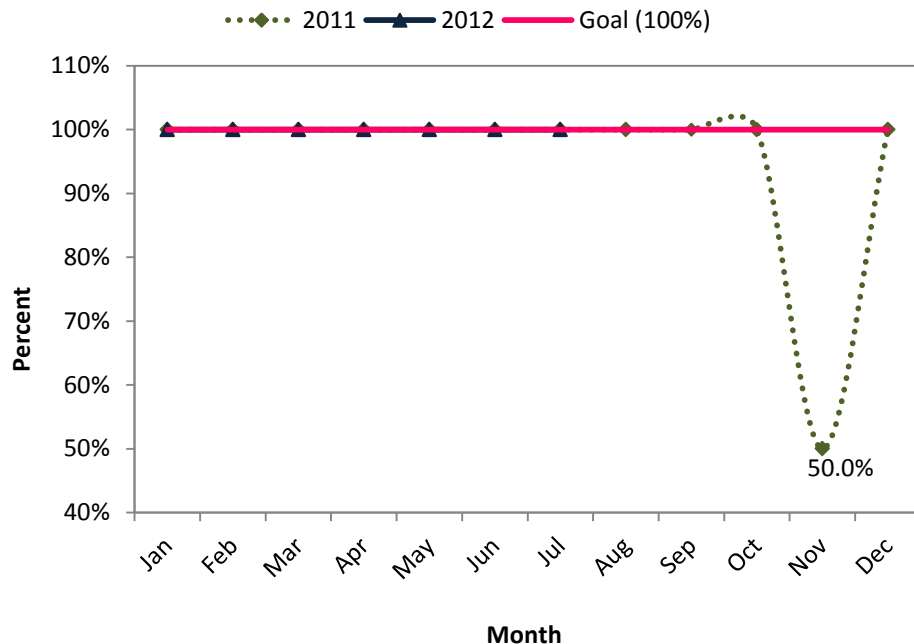
Division of Regional Centers Operations (DRCO)

Measure: Percent of residents with no relapse 90 days post-transition/discharge-Short-term model

How it is measured: *Numerator:* Number of residents with relapse 90 days after transition/discharge
Denominator: Number of residents transitioned/discharged post-90 days;
 Approximate monthly denominator range: Zero to two

Why this matters: A relapse within 90 days may reflect a failure of continuity of care between the Regional Center and the private provider, resulting in patient suffering and subsequent need for residential care.

Goal: ↑100%



Trend: Over the past 18 months, 13 residents have transitioned, with only one relapse within 90 days in November 2011.

State Veterans Nursing Homes

Summary

Description

Colorado operates four State Veterans Nursing Homes (SVNH): Fitzsimons SVNH in Aurora, Bruce McCandless SVNH in Florence, Homelake SVNH in Monte Vista, and Rifle SVNH in Rifle. There is also a SVNH located in Walsenburg, Colorado. This nursing home is operated by the Huerfano County hospital district. Data are not reported for this nursing home given that it is not state-owned or operated. Colorado's SVNHS serve honorably discharged veterans, veterans' spouses/widows and "Gold-Star" parents, any of whose children died while serving in the Armed Forces. The Colorado SVNHS offer the following services:

- Long-term care to include skilled nursing care, speech, physical and occupational therapy, and memory care services to include specialized care and/or secure units for individuals with dementia,
- Social activities, and assistance with bathing, dressing and other daily activities,
- Short-term rehabilitation care in which individuals seeking to return home following a qualifying hospital stay can work to regain skills and improve physical strength, endurance and aerobic capacity through Medicare-certified rehabilitation services,
- Domiciliary cottages which offer assisted living-like services in cottages,
- Short-term "respite" care, which provides a helpful option when homecare providers are unavailable and end-of-life/hospice care which includes comfort-oriented services.

Director: Viki Manley

Executive Summary

- Currently, SVNH has identified four performance measures to be examined on a monthly basis.
- SVNH collects data on *Percent of Residents without Anti-Psychotic Medication by Home*, *Percent of Residents without Falls by Home*, *Percent of Residents without Acquired Pressure Ulcers by Home* and *Percent of Residents without Unplanned Weight Loss/Gain by Home*.
 - SVNH has implemented a plan for sharing best practices between Homes as some Homes perform higher on certain measures than do other Homes. These trainings are held in meeting and/or webinar format depending on logistics.
 - For the quarter represented in this report, SVNH has focused data exploration on the performance outcome of *Percent of Residents without Falls by Home*. In doing so, several targeted interventions have been implemented in order to improve performance on this measure. These interventions include re-examining staffing patterns, filling vacant staffing positions and hiring additional staff, increasing staff education regarding falls prevention and resident and family member education regarding falls safety, and training nursing staff on falls management.

Measures

[Residents without Anti-Psychotic Medication](#)

[Residents without Falls](#)

[Residents without Acquired Pressure Ulcers](#)

[Residents without Unplanned Weight Loss or Gain](#)



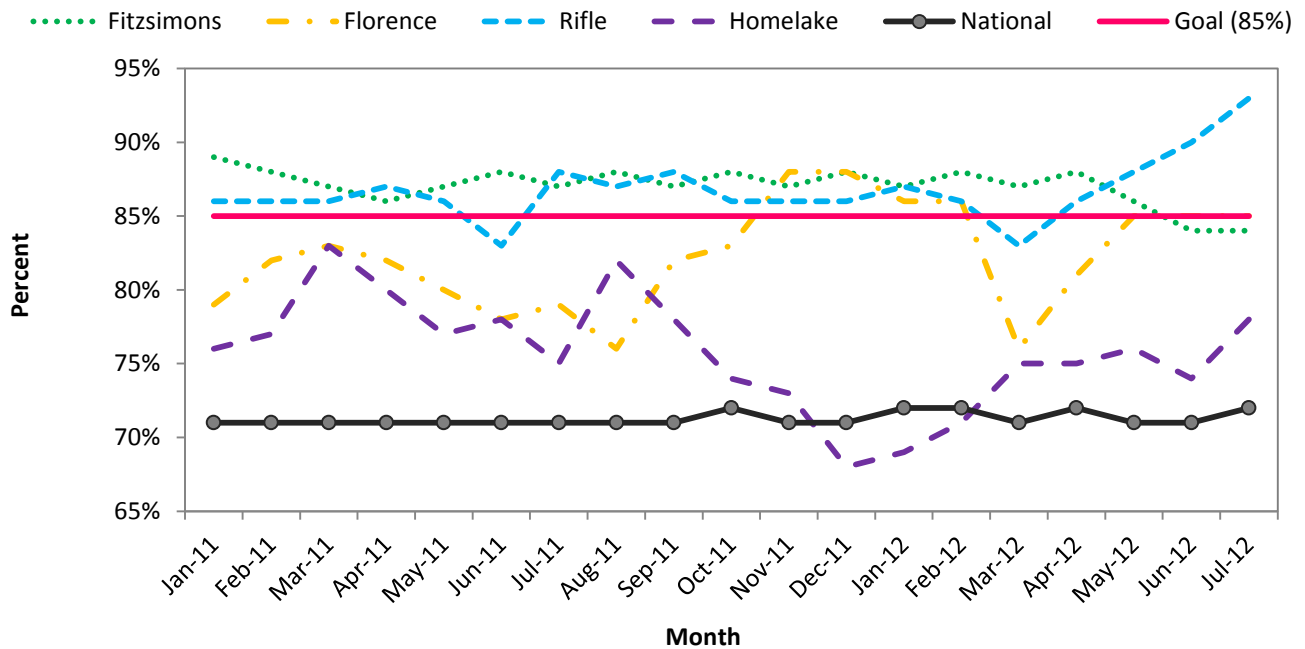
State Veterans Nursing Homes (SVNH)

Measure: **Percent of residents without anti-psychotic medication**

How it is measured: *Numerator:* Number of residents without anti-psychotic medication
Denominator: Number of residents on a given day (census); Approximate monthly denominator: Fitzsimons: 168, Florence: 86, Rifle: 62, Homelake: 50

Why this matters: Increasing the number of residents without anti-psychotic medications demonstrates that nursing homes are providing appropriate, safe, quality care.

Goal: **↑85%**



Trend: Fitzsimons and Rifle typically exceed the goal. Homelake often has the lowest performance.

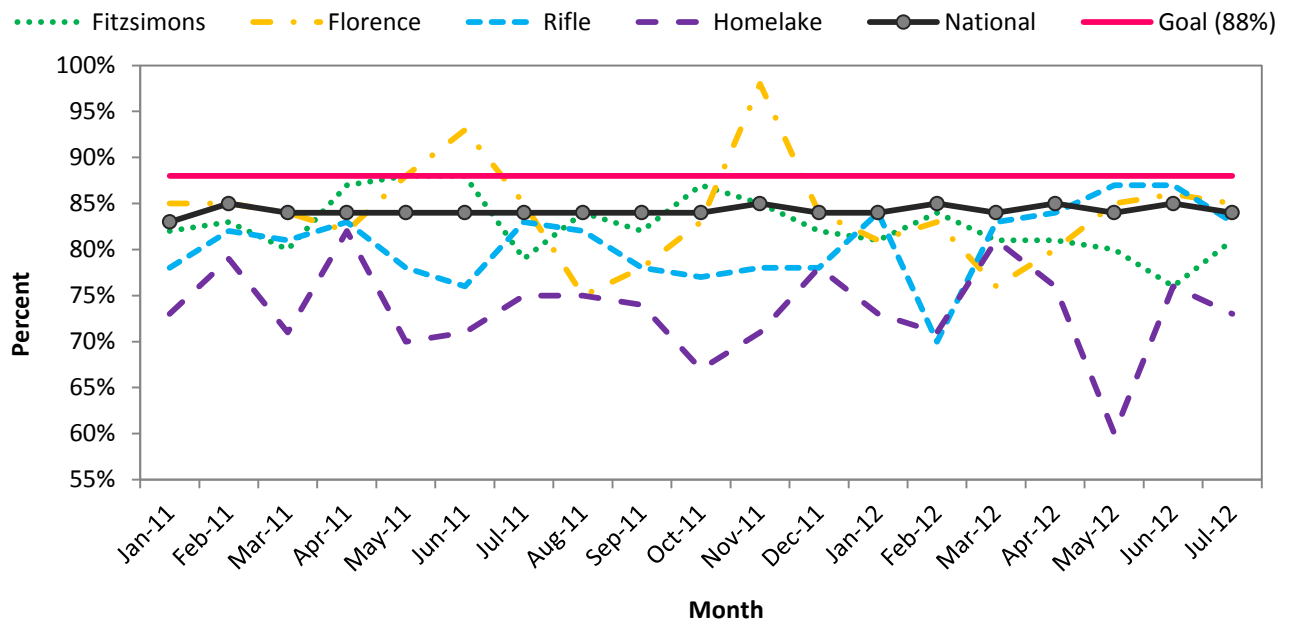
State Veterans Nursing Homes (SVNH)

Measure: **Percent of residents without falls**

How it is measured: *Numerator:* Number of residents without falls
Denominator: Number of residents on a given day (census); Approximate monthly denominator: Fitzsimons: 168, Florence: 86, Rifle: 62, Homelake: 50

Why this matters: Nursing home residents have the right to receive safe, high-quality care, evidenced by a low number of resident falls.

Goal: **↑88%**



Trend: Florence has demonstrated the highest performance on this measure at 98% in November 2011. Homelake often has the lowest performance on this measure with the lowest point at 60% in May 2012. Goal is often unmet.

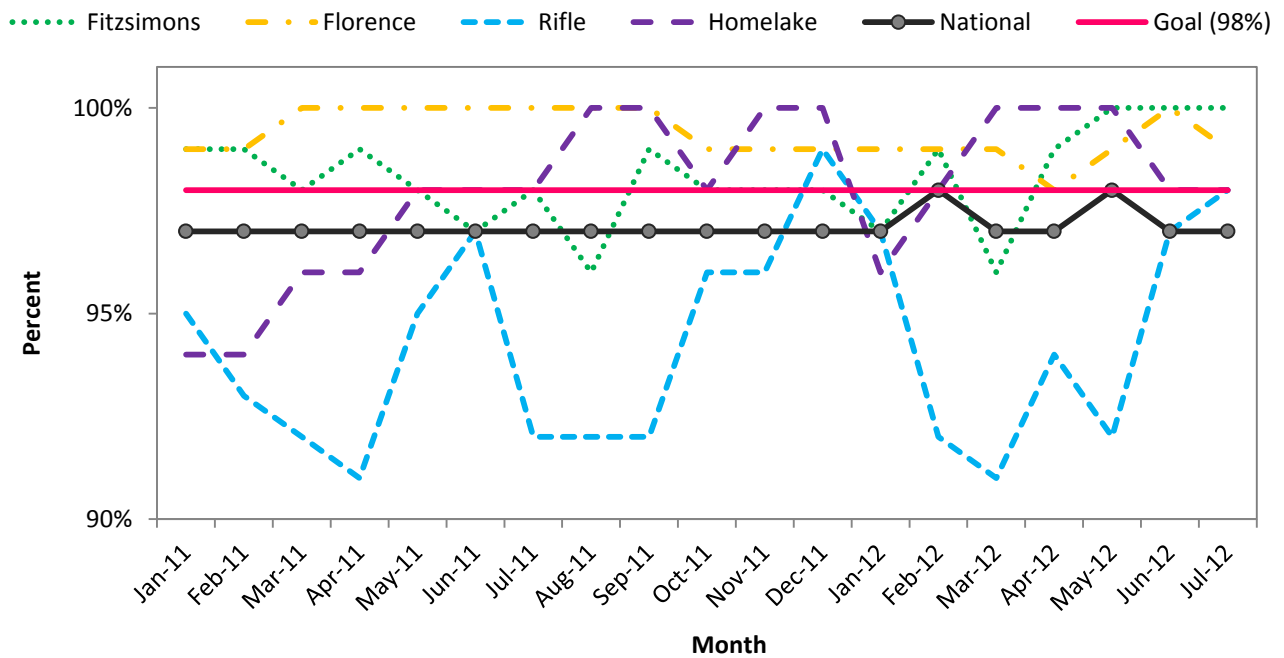
State Veterans Nursing Homes (SVNH)

Measure: **Percent of residents without acquired pressure ulcers**

How it is measured: *Numerator:* Number of residents without acquired pressure ulcers
Denominator: Number of residents on a given day (census); Approximate monthly denominator: Fitzsimons: 168, Florence: 86, Rifle: 62, Homelake: 50

Why this matters: The prevention of acquired pressure ulcers is vital to the well-being of residents, as pressure ulcers may cause painful complications, prolonging illness and lengths of stay.

Goal: **↑98%**



Trend: Florence often has the highest performance on this measure at 98-100%; Fitzsimons has made improvement on this measure since March 2012 currently performing at 100%.

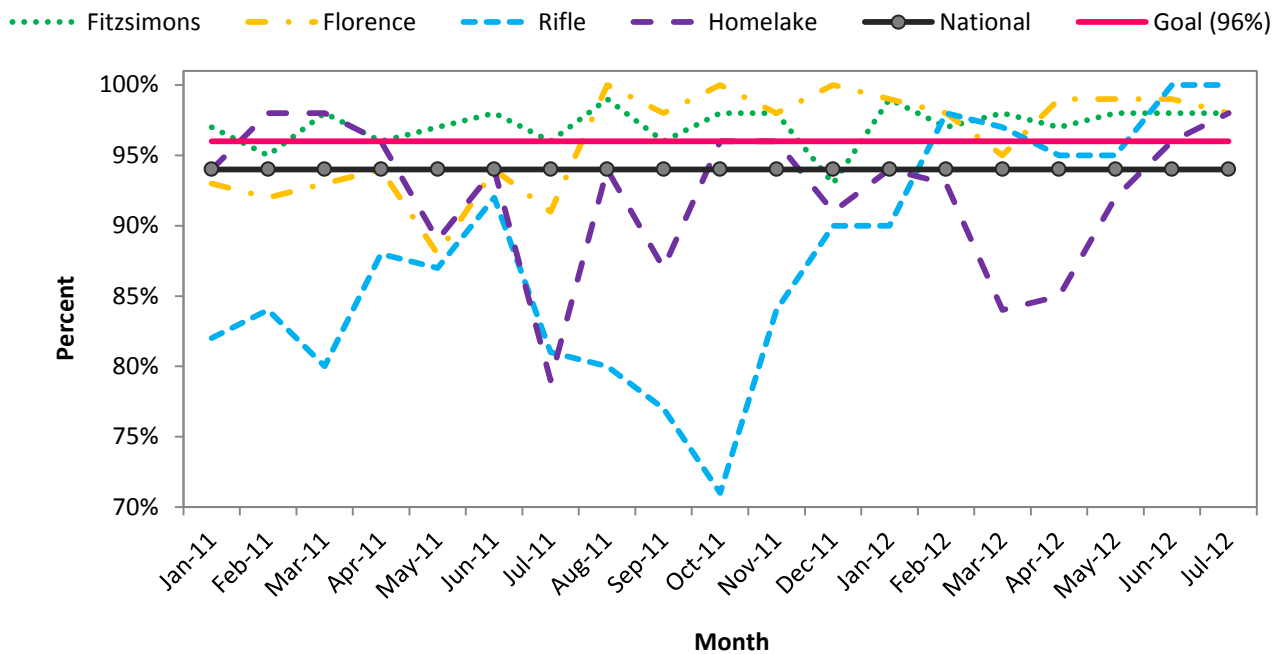
State Veterans Nursing Homes (SVNH)

Measure: **Percent of residents without unplanned weight loss or weight gain**

How it is measured: *Numerator:* Number of residents without unplanned weight loss or weight gain
Denominator: Number of residents on a given day (census); Approximate monthly denominator: Fitzsimons: 168, Florence: 86, Rifle: 62, Homelake: 50

Why this matters: The maintenance of a person’s appropriate weight is important to the health and well-being of nursing home residents and is evidence of safe, appropriate, quality care.

Goal: **↑96%**



Trend: Rifle and Homelake have improved their performance on this measure over the last 3 months. Fitzsimons and Florence have shown steady performance on this measure. All four homes met this goal for the first time in July 2012.