

Colorado Department of Human Services



Summary Report

July - September 2013

Prepared by:

Performance Management Division

Table of Contents

Colorado Department of Human Services.....	3
The C-Stat Process	4
How Do I Read This Report?	5
Office of Behavioral Health	6
Community Behavioral Health	7
Mental Health Institutes.....	13
Office of Children, Youth, and Families	20
Division of Child Welfare	21
Division of Youth Corrections	28
Domestic Violence Program	38
Office of Early Childhood.....	41
Division of Early Care and Learning	42
Division of Community and Family Support	47
Office of Economic Security.....	52
Child Support Services.....	53
Colorado Refugee Services Program	56
Colorado Works and Adult Financial	60
Food and Energy Assistance	66
Office of Long Term Care.....	744
Aging and Adult Services	755
Developmental Disabilities.....	777
Disability Determination Services	800
Division of Regional Center Operations	844
State Veterans Nursing Homes.....	922
Division of Vocational Rehabilitation	966



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 five 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, 2013. 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.



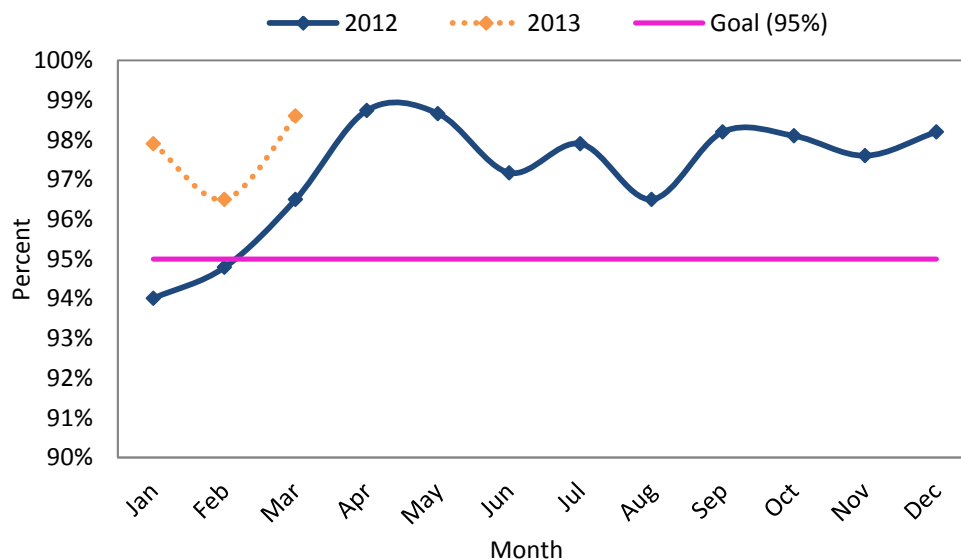
How Do I Read This Report?

The Division

Measure:	What the C-Stat measure is attempting to capture. (Federal Measure where applicable)
How it is measured:	<i>Numerator:</i> Describes what is being “counted.” <i>Denominator:</i> Describes the overall population: Average monthly denominator; average of the last three months’ denominators OR Cumulative denominator; cumulative up to the last month of the reporting period OR Average daily population; average number of people in a facility per day. These provide an indication of the size of the population.
Why this matters:	The impact on Coloradans affected.
Goal:	The level and direction 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 Community 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: Dr. Lisa Clements

Community Behavioral Health

Summary

Description

Community Behavioral Health (CBH) is dedicated to strengthening the health, resiliency, and recovery of Coloradans through quality and effective behavioral health prevention, early intervention and treatment services. CBH has established a set of values and guiding principles, which the Division utilizes to fulfill its role as the single state authority for behavioral health services. CBH 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.

Acting Director: Lori Banks

Executive Summary

- OBH examines five outcome measures - two related to substance use and three related to mental health. In September 2013, OBH began publishing monthly report cards, for each contracted substance use provider, and is currently posting those on their public facing website. At the same time, OBH began to report data, in the C-Stat meeting, by Community Mental Health Center (CMHCs), for all mental health measures, and by the six contracting entities for all substance use measures.
- *Timeliness of Access to Outpatient Substance Use Disorder Treatment:* Rates to timely treatment for individuals with substance use disorders have stayed between 77.9% - 81.4%, which reflect the range seen over the past 18 months.
- *Increased Engagement of Mental Health Clients:* Client engagement has also continued to fluctuate, and has shown lower rates throughout 2013 than those seen in 2012. During the most recent quarter, rates stayed below 48%.
- *Reduced Use of Substances:* Reduction in the use of substances is the only measure, within CBH, to show an upward trend during the past quarter, and rates in 2013 have also been higher than those seen in 2012. Rates have slowly climbed to 84.4%.
- *Reduction in Mental Health Symptom Severity:* Rates pertaining to symptom severity have been relatively stagnant since April 2013.
- *Maintained Housing:* July housing rates reflected the highest performance of 2013. Housing vouchers have been especially helpful in assisting clients in obtaining and maintaining housing.

Measures

- [Timeliness of Access to Outpatient Substance Use Disorder Treatment](#)
- [Increased Engagement of Mental Health Clients](#)
- [Reduced Use of Substances](#)
- [Reduction in Mental Health Symptom Severity](#)
- [Maintained Housing](#)

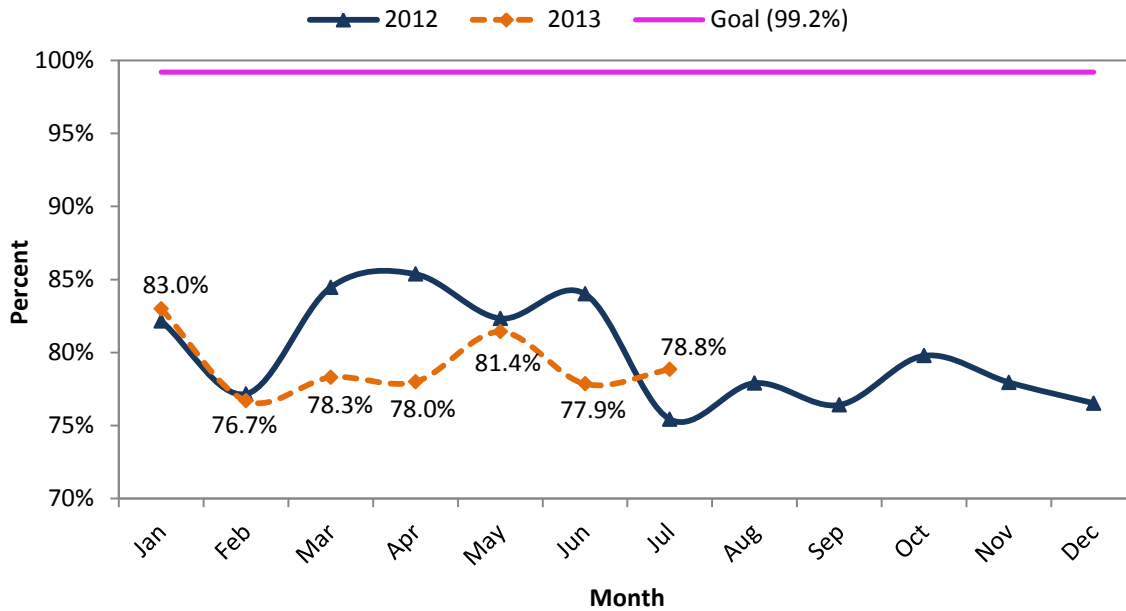
Community Behavioral Health (CBH)

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: 994

Why this matters: Timely access to substance use disorder treatment is correlated with positive health outcomes.

Goal: **↑99.2%**



Trend: Performance on this measure has fluctuated throughout 2013, between 76.7% and 83.0%, and has not met or exceeded the highest rates seen in 2012.

Community Behavioral Health (CBH)

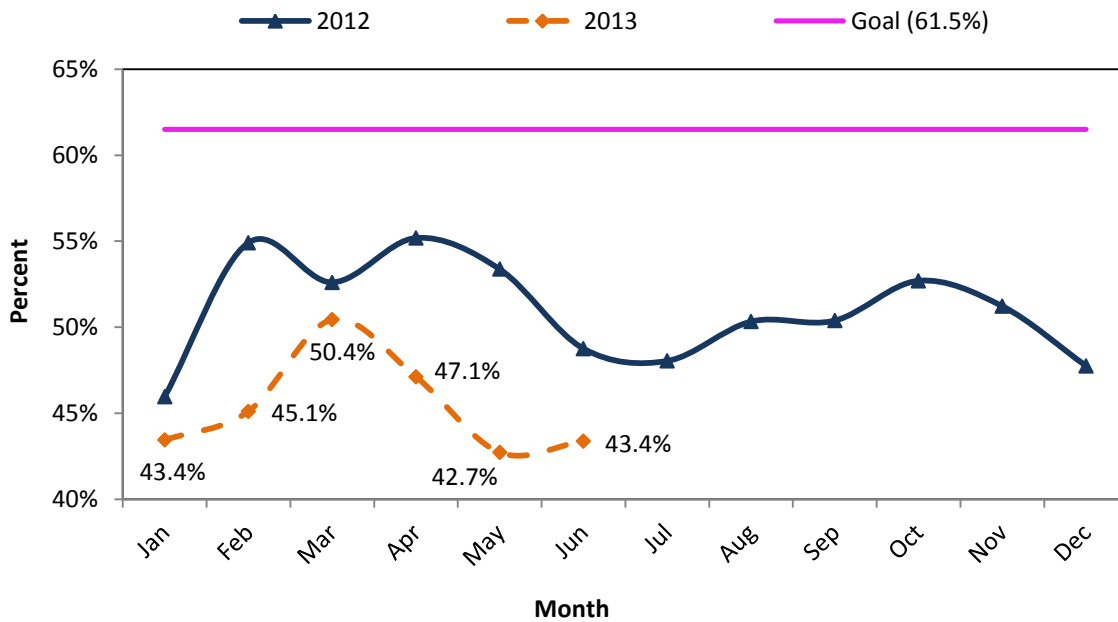
Measure: **Mental health clients engaged in services**

How it is measured: *Numerator:* Percent of clients engaged within 45 days of admission (4 or more services)

Denominator: All admissions; Approximate monthly denominator: 851

Why this matters: Engagement in services increases the likelihood that the client will be successful in treatment.

Goal: **↑61.5%**



Trend: Engagement rates have decreased since 2012, ranging between 42.7% and 50.4% for the first six months of 2013.

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

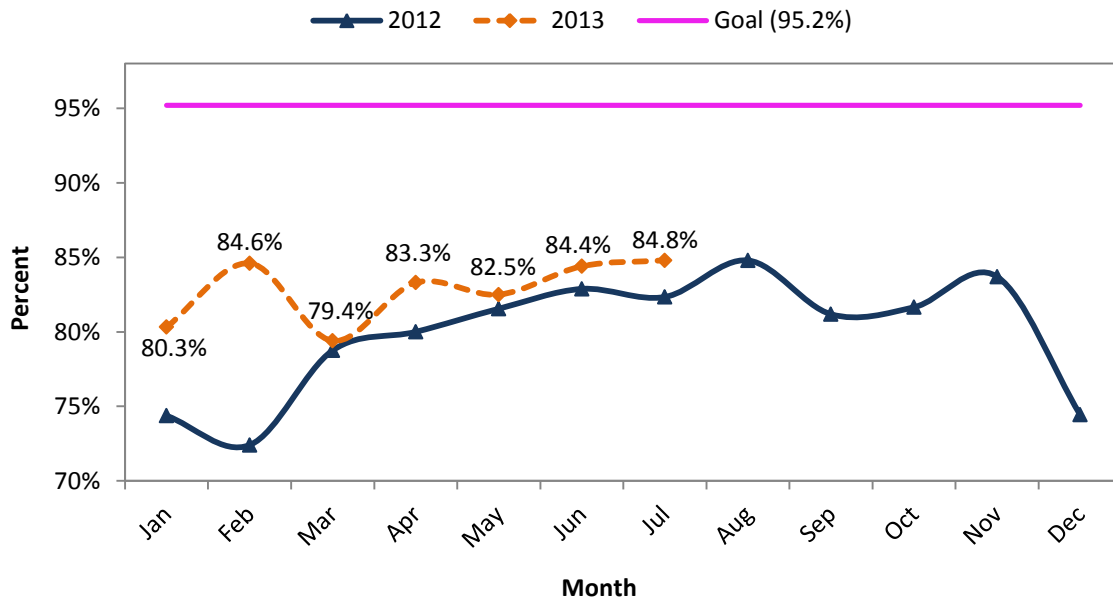
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons who reduced their use of substances at discharge
Denominator: Number of discharged persons receiving substance use disorder treatment who are using substances at admission; Approximate monthly denominator: 437

Why this matters: Reduction of substance use is a primary goal of behavioral health services leading to improved quality of life, better functioning, and increased independence.

Goal: **↑95.2%**



Trend: Performance on this measure has increased thus far in 2013. Despite the dip in March, rates have managed to stay above 80% for the year, and have shown an upward trend since May 2013.

Community Behavioral Health (CBH)

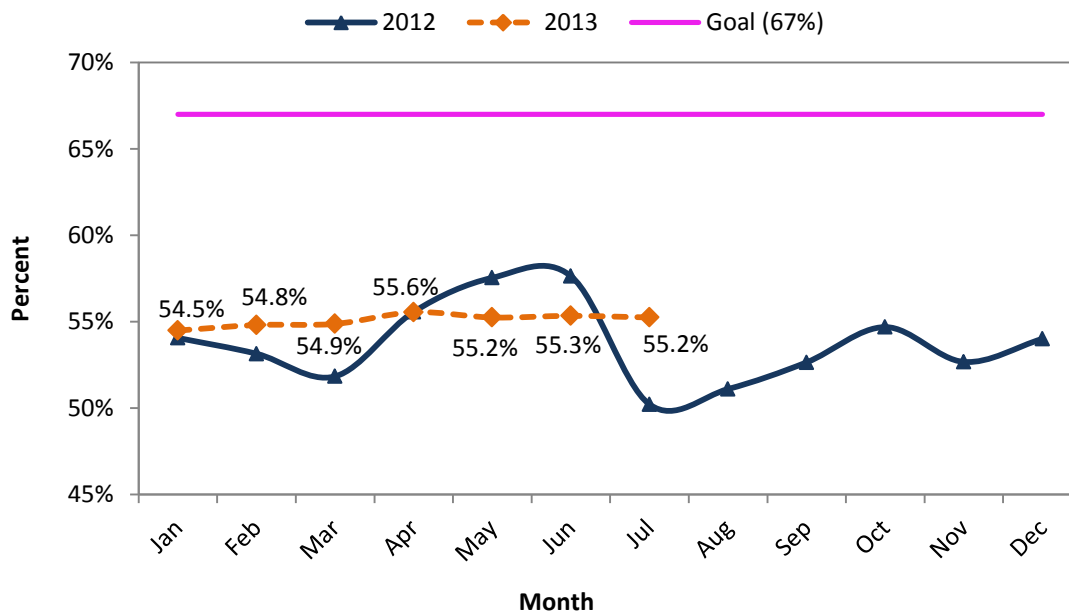
Measure: Percent of persons with reduced mental health symptoms in mental health treatment

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: 1,632

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

Why this matters: Reduction in symptom severity is a primary goal of behavioral health services leading to improved quality of life, better functioning, and increased independence.

Goal: ↑67%



Trend: Rates of symptom severity in patients discharged from mental health treatment have remained relatively stagnant throughout 2013. Performance on this measure has not yet met the established goal of 67%.

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

Community Behavioral Health (CBH)

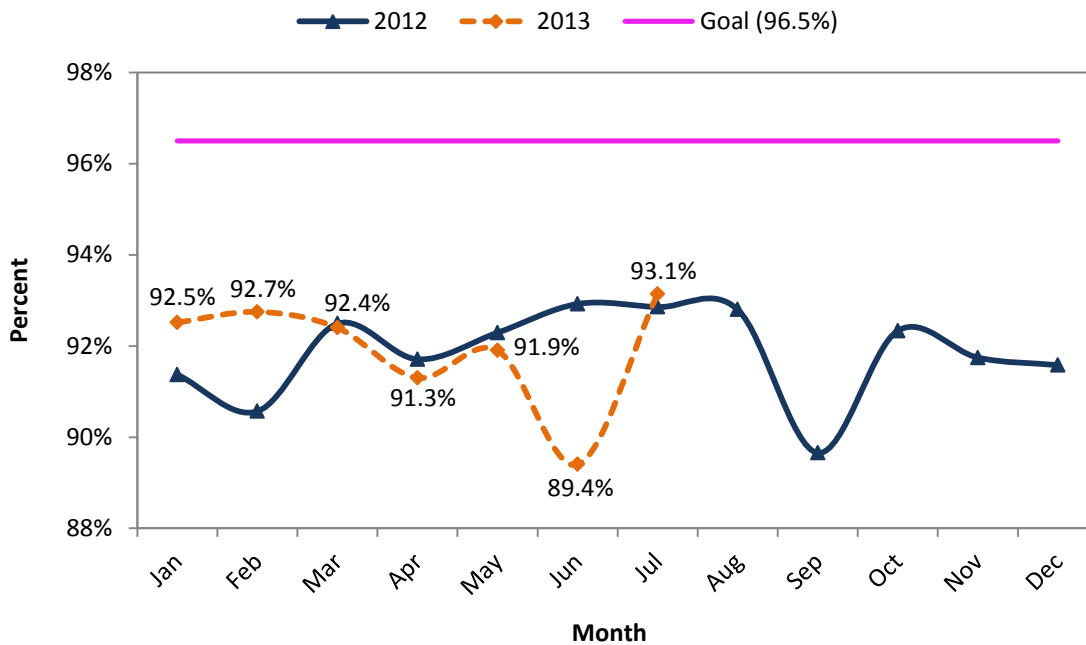
Measure: **Percent of persons who maintained housing while receiving mental health services**

How it is measured: *Numerator:* Number of persons who maintained housing
Denominator: Number of housed persons (at Time One) receiving mental health services; Approximate monthly denominator: 1,952

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

Why this matters: People with behavioral health needs are a vulnerable population who are at higher risk for societal problems, including homelessness and instability of housing.

Goal: **↑96.5%**



Trend: Housing rates have fluctuated between 89.4% and 93.1% throughout 2013. July 2013 was the highest rate ever, but was preceded by the lowest rate ever, of 89.4%, in June 2013.

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

Mental Health Institutes (MHI)

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.

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.

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

Deputy Director for Operations: Leo Jaramillo

Deputy Director for Clinical Services: Dr. Patrick Fox

Executive Summary:

- *Seclusion Use:* The Colorado Mental Health Institutes at Fort Logan and Pueblo have undergone extensive restructuring to address a number of issues around the use of seclusion. Both institutes have adopted a hands-off approach to treatment, encouraging staff to anticipate potential issues with patients prior to moments of escalation.
- *Restraint Use:* With the exception of Pueblo's rates in July 2013, both institutes have stayed below their respective goal rates for restraint measures throughout this quarter.
- *Discharge Barriers:* These continue to pose difficulties for both institutes. However, CMHIFL has decreased the overall percentage of patients with discharge barriers, since February 2013; while, CMHIP has seen an increase in the overall percentage of patients with discharge barriers, since March 2013.
- *Thirty-Day Readmission:* Rates decreased for both institutes this past quarter, and both institutes are meeting their established goal rates.
- *Readmissions within 180 Days:* Rates have fluctuated over the most recent quarter; however, CMHIFL met its goal rate the last two months of the quarter.

Measures

- [Restraint Use – Fort Logan & Pueblo](#)
- [Seclusion Use – Fort Logan & Pueblo](#)
- [Average Days on Waitlist - Pueblo](#)
- [Patients Waiting to Discharge – Fort Logan & Pueblo](#)
- [Percent of 30 Day Readmissions – Fort Logan & Pueblo](#)
- [Percent of 180 Day Readmissions – Fort Logan & Pueblo](#)

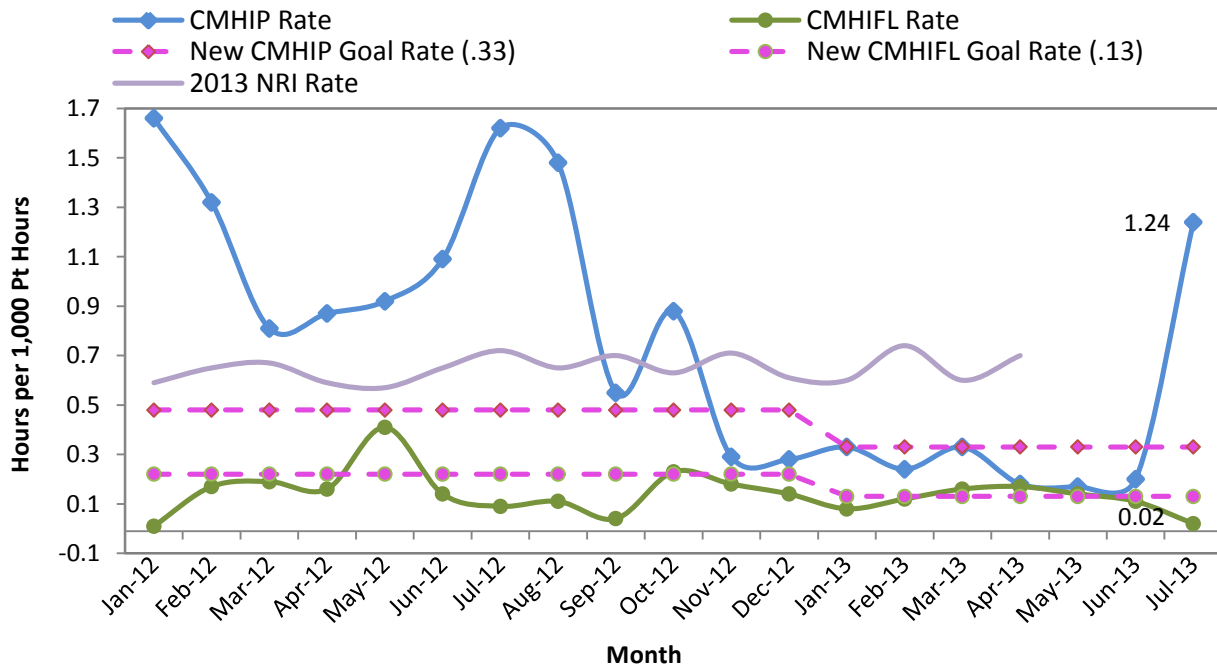
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* Number of hours of restraint
Denominator: Per 1,000 patient hours
 Approximate monthly denominator – Fort Logan: 29,729
 Approximate monthly denominator – Pueblo: 130,326

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: Fort Logan: ↓ 0.13%; the goal reflects a 15% reduction of the restraint rates recorded in 2012.
 Pueblo: ↓ 0.33%; the goal reflects a 15% reduction of restraint rates recorded in 2012.



Trend: CMHIFL has seen some of the lowest restraint rates in the current quarter, and has shown a downward trend in use of restraint since April 2013. CMHIP saw a slight increase from May to June, in 2013, and a significant increase in July 2013. With the exception of CMHIP in July 2013, both institutes have stayed below the established goal rate for the current quarter, and have significantly reduced the overall number of restraint hours since January 2012.

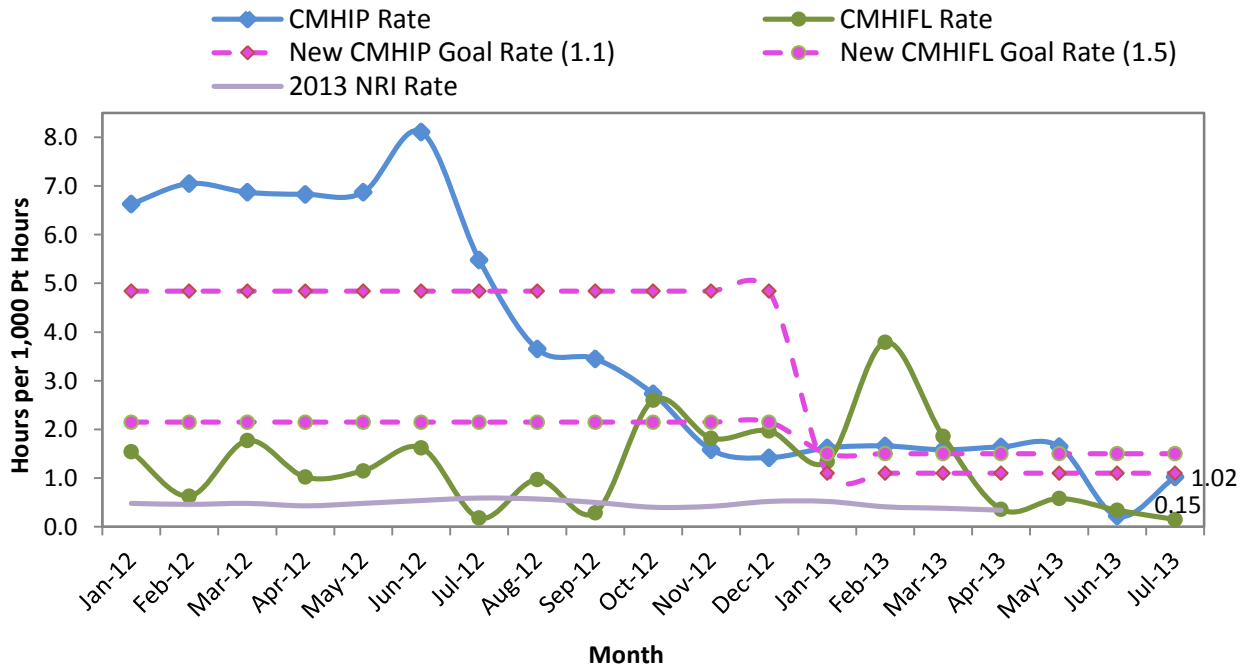
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* Number of hours of seclusion
Denominator: Per 1,000 patient hours;
 Approximate monthly denominator: 29,729
 Approximate monthly denominator: 130,326

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: Fort Logan: ↓1.5%; the goal reflects a 15% reduction of the seclusion rates recorded in 2012.
 Pueblo: ↓ 1.1%; the goal reflects a 15% reduction of the seclusion rates recorded in 2012.



Trend: CMHIFL stayed below the established goal rate throughout the last quarter, reaching its lowest rate of 0.15% in July 2013. CMHIP has also reduced seclusion rates throughout the last quarter, and reached its lowest rate in June 2013.

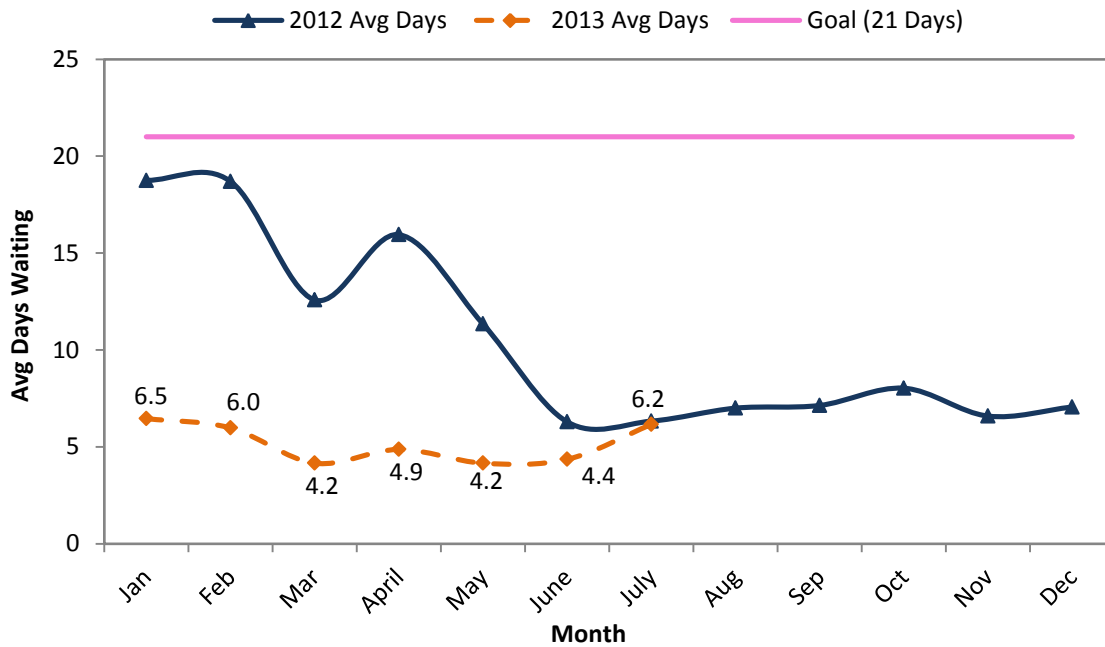
Mental Health Institutes (MHI)

Measure: **Average days on waitlist - Pueblo**

How it is measured: *Numerator:* Average number of days a patient waits for a competency exam
Denominator: None; Approximate number of days on waitlist: 8.5

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: **↓21 days**



Trend: While average waitlist times have increased over the past quarter (from 4.2 days to 6.2 days), they have stayed well below the established goal of 21 days for the past 19 months.

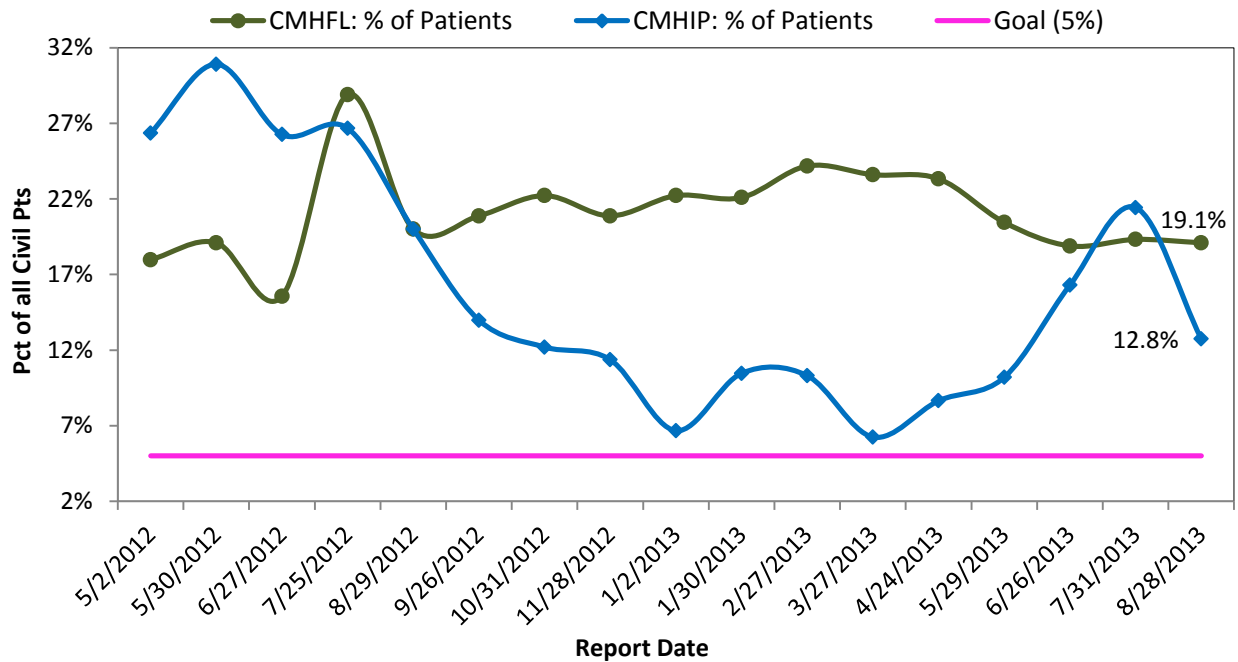
Mental Health Institutes (MHI)

Measure: **Percent of civil patients ready to discharge but have barriers – Fort Logan & 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 – Fort Logan: 89
 Approximate monthly denominator – Pueblo: 97

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

Goal: **↓5%**



Trend: CMHIFL has decreased the overall percentage of patients with discharge barriers, since February. CMHIP, however, has seen an increase in rates since March 2013, yet decreased rates to 12.8% the last month of the quarter.

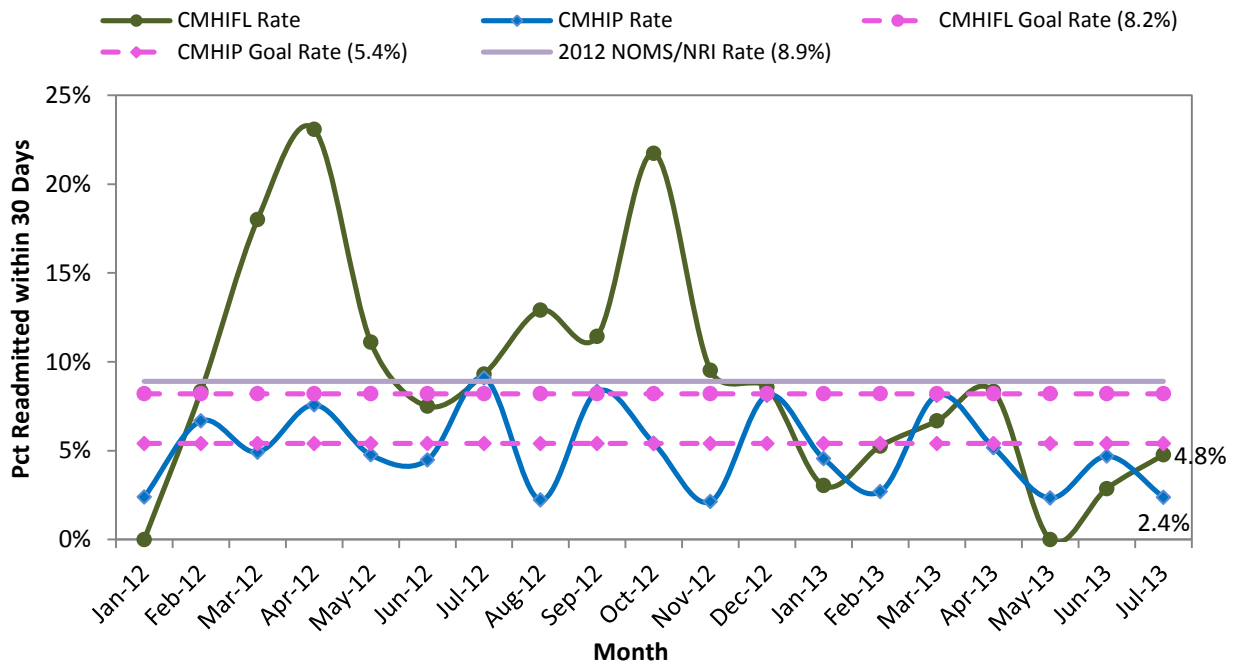
Mental Health Institutes (MHI)

Measure: **Percent of 30-day readmissions – Fort Logan & Pueblo**

How it is measured: *Numerator:* Number of patients readmitted within 30 days of discharge
Denominator: All patients discharged;
 Approximate monthly denominator – Fort Logan: 15
 Approximate monthly denominator – Pueblo: 29

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

Goal: Fort Logan: ↓ 8.2%
 Pueblo: ↓ 5.4%



Trend: Thirty-day readmission rates have fluctuated over time, but both institutes stayed below their respective goal rates for the duration of the past quarter.

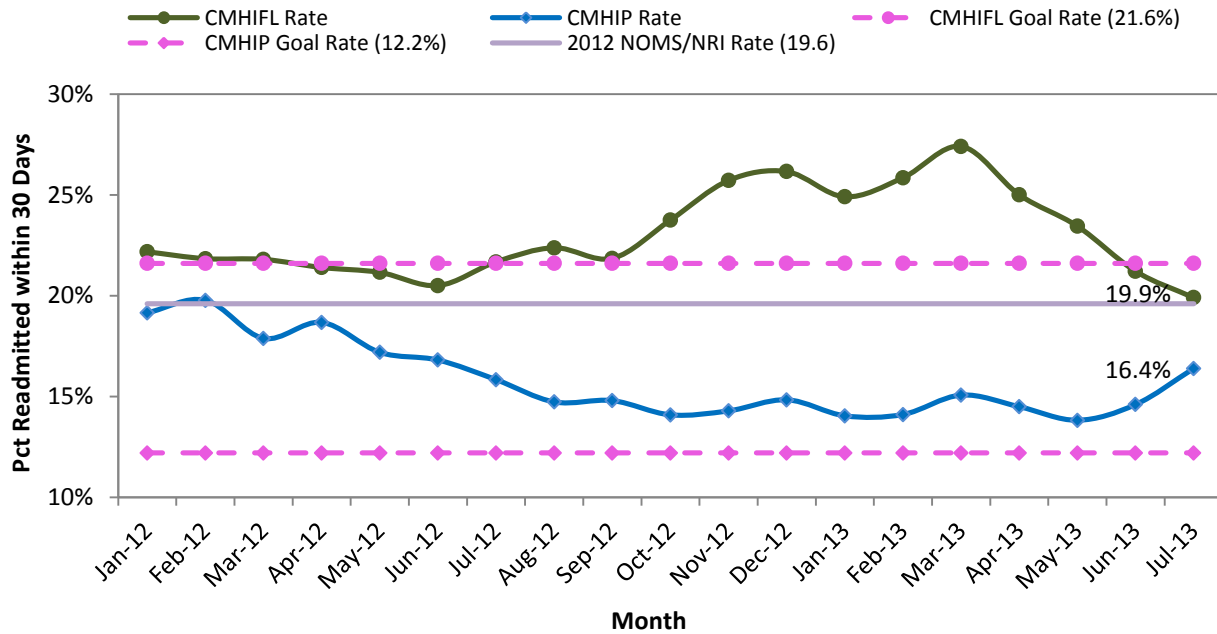
Mental Health Institutes (MHI)

Measure: **Percent of 180-day readmissions – Fort Logan & Pueblo**

How it is measured: *Numerator:* Number of patients readmitted within 180 days of discharge
Denominator: All patients discharged;
 Approximate monthly denominator – Fort Logan: 204
 Approximate monthly denominator – Pueblo: 243

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

Goal: Fort Logan: ↓ 21.6%
 Pueblo: ↓ 12.2%



Trend: CMHIFL was able to meet its established goal rate for 180-day readmissions for the last two months of this quarter. CMHIP has not yet been able to meet its established goal rate, and has continued to fluctuate throughout the last quarter and year.

Office of Children, Youth, and Families

Description

Within the Colorado Department of Human Services, the Office of Children, Youth and Families (OCYF) is responsible for policy development, service provision, and coordination of efforts to improve the lives of Colorado citizens by supporting quality and effective services. These services are provided to those that seek and need assistance from the Child Welfare Division, the Division of Youth Corrections and the Domestic Violence Program. These supports are facilitated through partnerships with families, providers and local communities to ensure that children and families have safe, healthy and stable environments; and, that protection and public safety are paramount in addressing the needs of juvenile offenders.

Director: Julie Krow

Division of Child Welfare

Summary

Description

The Division of Child Welfare (DCW) provides supervision to counties that 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, along with ensuring permanency for those children placed in out of home care. 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 beyond the control of parent.

Director: Robert Werthwein

Executive Summary

- *Timeliness of Assessment Closure:* While the 90% goal remains unmet, there has been considerable improvement in performance when compared to the previous year (i.e., 56.5% to 88.6%).
 - In-depth analysis revealed a steady reduction in the average number of days an assessment is kept open from 65 days to 48 days over the last four quarters. In addition, there has been a decrease in the percent of assessments open over 70 days.
- *Legally Freed Children Discharged to Permanency:* DCW is focusing on specialized populations including children with developmental disabilities, children who have Other Planned Permanent Living Arrangement (OPPLA) as a permanency goal, and children with mental health concerns.
 - DCW continues to work in collaboration with the Division for Developmental Disabilities (DDD) to explore system and policy barriers to permanency for children with developmental disabilities. Some of the identified barriers include 1) ensuring adoption does not impact priority access to the adult developmental disabilities system, 2) establishing a foster home as an adult DDD host home, and 3) termination of parental rights.
 - A policy change effective 7/1/2014 will allow children with developmental disabilities to retain rights and priority access to the adult developmental disabilities system.
- *Children in Out of Home Care for Greater than 24 Months:* The goal for this measure was decreased to 22% in August 2013 after the original goal (28%) was achieved for 14 consecutive months.

Measures

- [Timeliness of Response to Initial Abuse/Neglect Investigations](#)
- [Timeliness of Assessment Closure](#)
- [Safety Assessment Forms Completed Accurately](#)
- [Absence of Maltreatment Recurrence](#)
- [Legally Freed Children Discharged to Permanency](#)
- [Children in Out of Home Care for Greater than 24 Months](#)

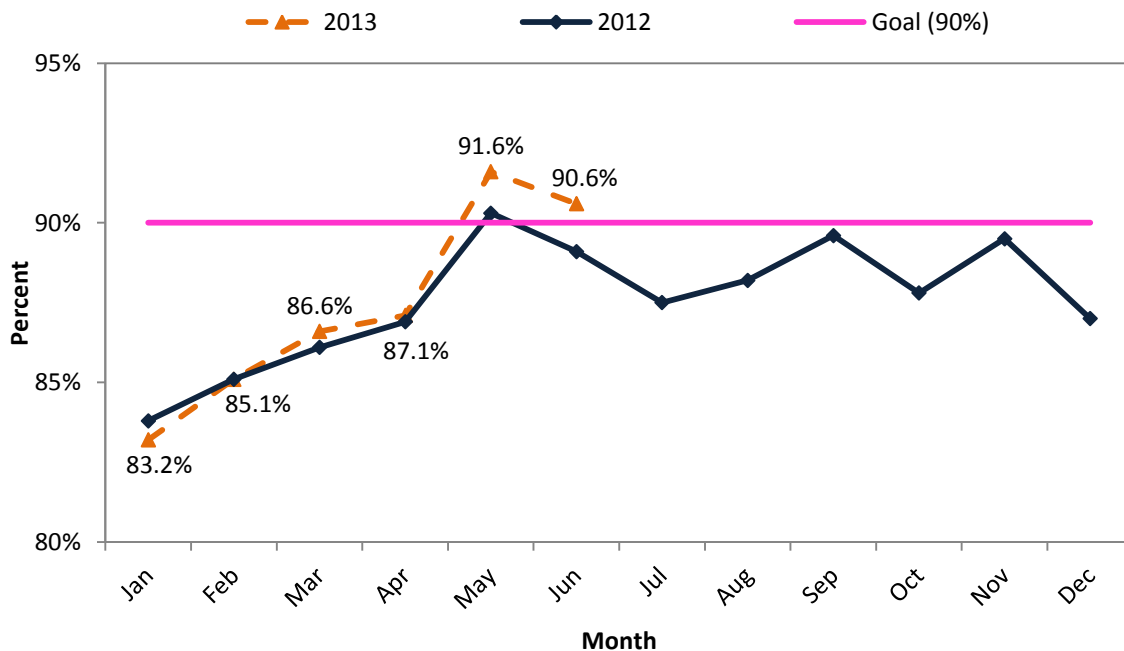
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Number of initial child protection investigations where the assigned caseworker made initial contact with the family within time requirements set in rule (Volume 7)
Denominator: Total number of initial child protection investigations closed in the month (excluding Differential Response cases); Average monthly denominator: 4,031

Why this matters: Timely response to initial abuse/neglect investigations improves child safety and reduces the potential for further abuse.

Goal: **↑ 90%**



Trend: Performance exceeded the 90% goal in two of the previous three months. In June 2013, seven of the Ten Large counties exceeded the 90% goal.

Notes: This includes referrals assigned immediate, 3 calendar day and 5 business day response times.

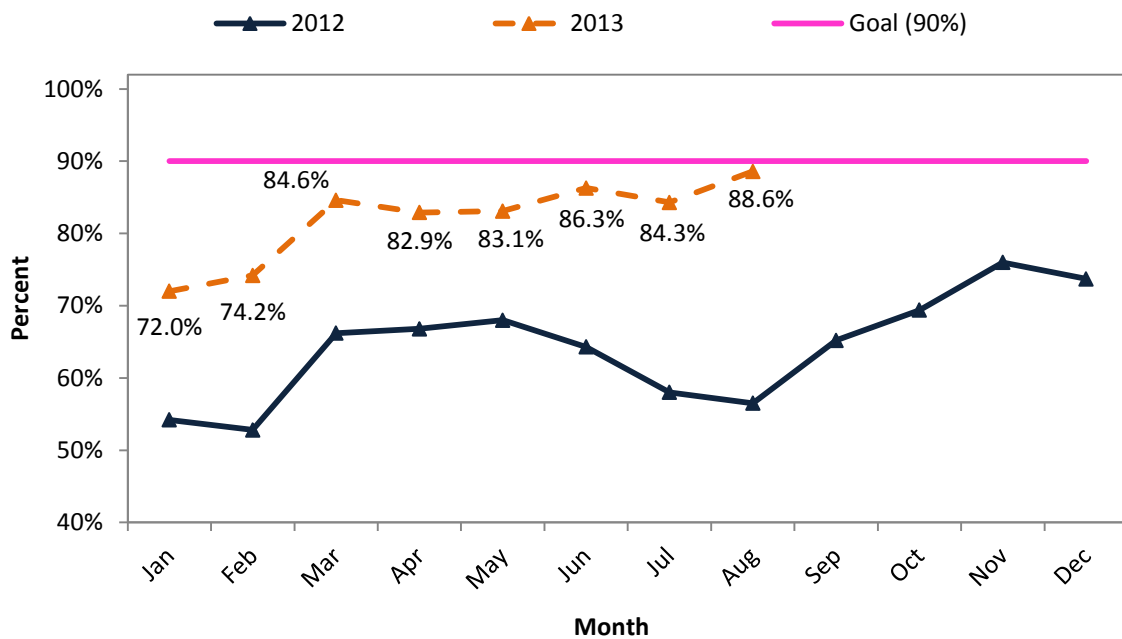
Division of Child Welfare (DCW)

Measure: **Timeliness of assessment closure**

How it is measured: *Numerator:* Number of child protection assessments closed within 60 days of referral
Denominator: Total number of closed assessments; Average monthly denominator: Traditional: 2,029

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%**



Trend: Performance has improved considerably, when compared to the previous year, despite not achieving the 90% goal.

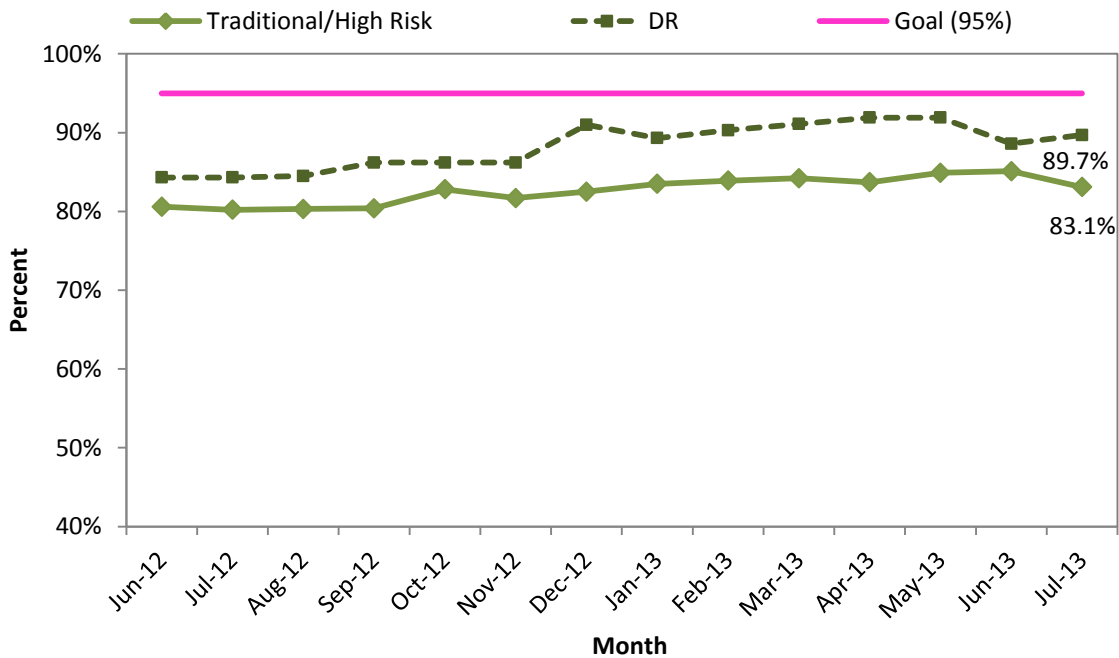
Division of Child Welfare (DCW)

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 accurately;
 Average monthly denominator: Traditional: 1,012; Differential Response: 120

Why this matters: Completing safety assessments accurately improves the likelihood of making accurate and appropriate decisions regarding child safety.

Goal: **↑ 95%**



Trend: Performance improved for Differential Response (DR), but declined slightly for traditional/high-risk assessments in the last month. The 95% goal has not been achieved.

Notes: DR data only includes the five counties currently participating in the Differential Response evaluation pilot project. DR will be expanded to nine (9) additional counties as of 7/1/2013. All counties will be required to minimally participate in two elements of DR (RED Teams & Enhanced Screening) by July 2014. It is also important to note that counties do not practice DR exclusively. DR is one track for responding to a child welfare referral, while traditional/high-risk is another track for responding to a child welfare referral.

Division of Child Welfare (DCW)

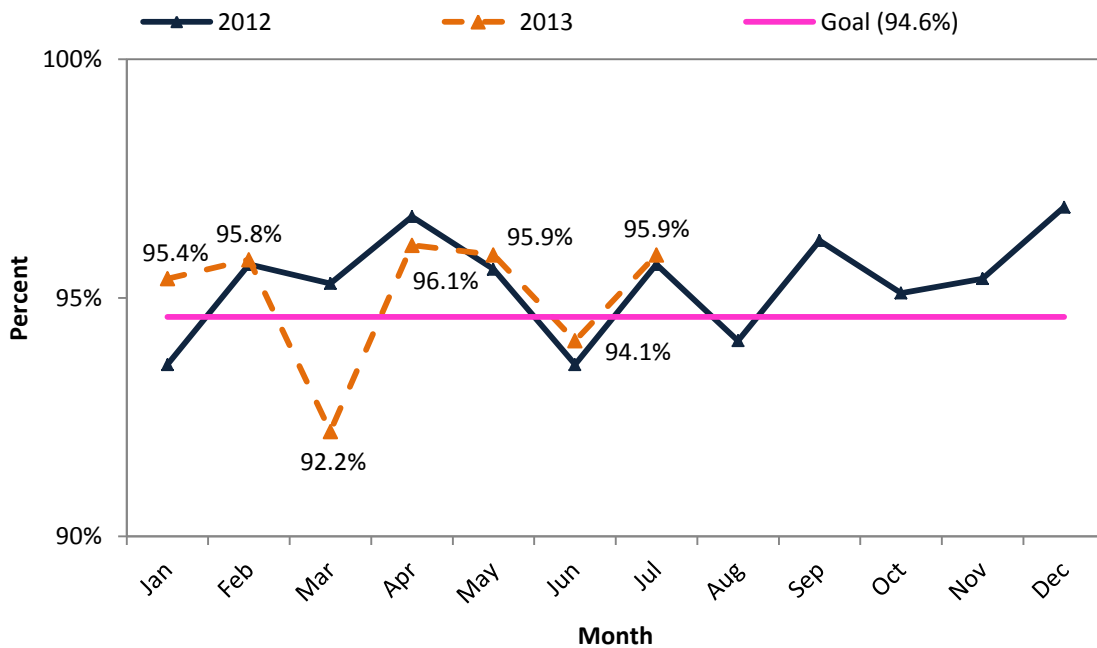
Measure: **Absence of maltreatment recurrence (Federal Measure)**

How it is measured: *Numerator:* Number of referrals with an initial founded incident of abuse and/or neglect occurring in the month six months prior to the reporting month that have a subsequent abuse and/or neglect referral in the six months following the initial founded incident

Denominator: Total number of referrals with a founded incident of abuse and/or neglect in the month occurring six months prior to the reporting month; Average monthly denominator: 795

Why this matters: Children deserve to be safe from subsequent intra-familial abuse and/or neglect upon reunification with family.

Goal: **↑ 94.6%**



Trend: DCW exceeded the 94.6% goal in two of the three most recent months.

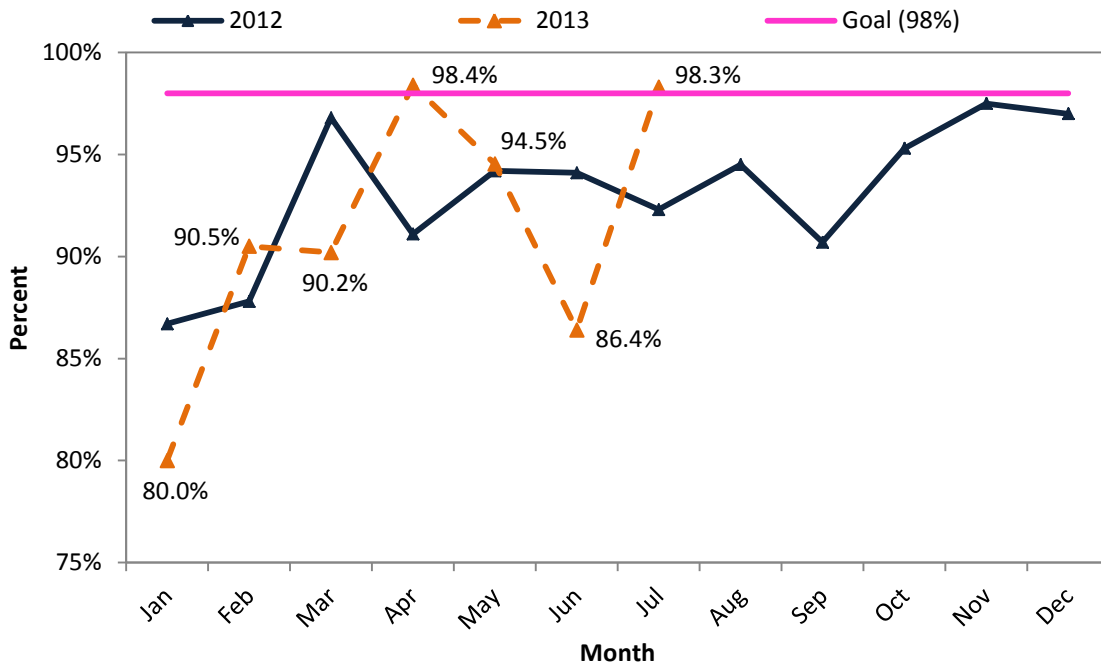
Division of Child Welfare (DCW)

Measure: **Legally freed children discharged to permanency (Federal Measure)**

How it is measured: *Numerator:* Number of children who had parental rights terminated (and are therefore legally free for adoption) that achieve permanency (by reunification, adoption, or legal permanency) prior to discharging from the child welfare system
Denominator: Number of children who were legally free for adoption at the time of discharge; Average monthly denominator: 58

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%**



Trend: Performance declined for two of three months in the most recent quarter; however, the 98% goal was achieved in July 2013 for the second time this calendar year.

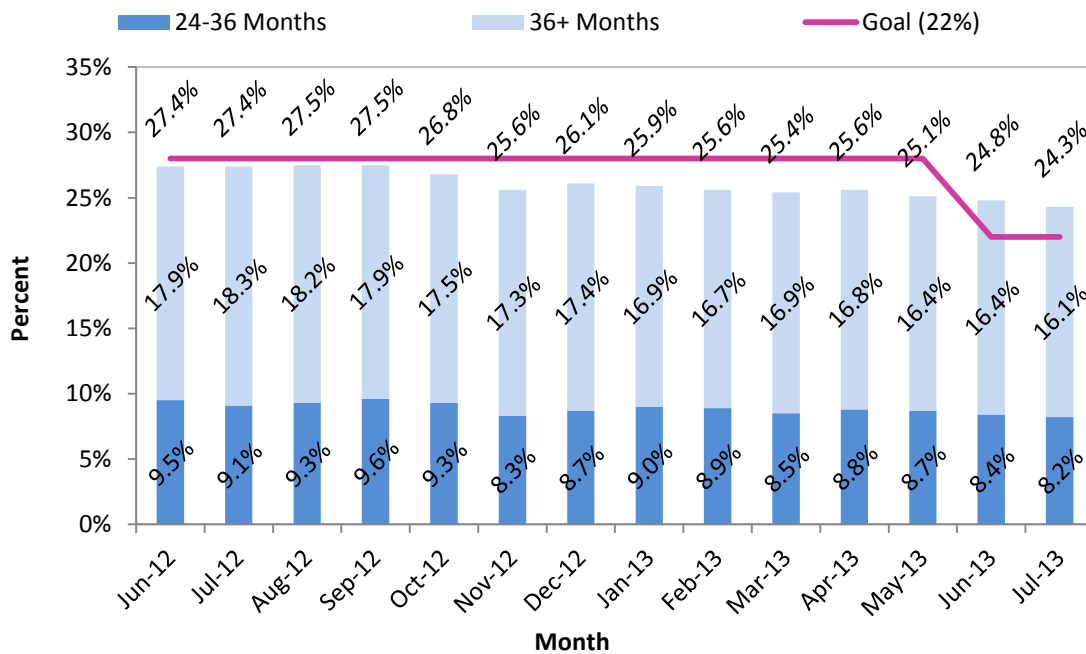
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Number of children who have been in care 24+ months on last day of specified month
Denominator: Total number of children in out of home care on last day of specified month; Average monthly denominator: 4,551

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

Goal: **↓ 22%**



Trend: Performance exceeded the 28% goal for 14 consecutive months resulting in the modification of the goal in August 2013.

Notes: The goal for this measure was decreased to 22% in August 2013 after the original goal (28%) was achieved for 14 consecutive months.

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

- *Youth Enrolled in a Full/Part Time Program at Discharge:* After exceeding the 70% goal for seven consecutive months, DYC increased the goal to 85% in May 2013. Performance continued to improve in the most recent quarter and is approaching the new goal. Reasons that youth may discharge without a full or part time program can include deportation or discharge to the Colorado Department of Corrections (DOC).
- *Timely Initial Placement:* Although the 90% goal for this measure has not yet been achieved, there has been a considerable reduction in the mean and median number of days to first placement. In July 2013, the mean was 33 days and the median was 34 days. In the same month last year, both the mean and median were 40 days. DYC has initiated a project specifically aimed at identifying and overcoming inefficiencies and barriers to meeting the 40-day placement time line.
- *Family Engagement Measures – Client Contact with Families and Client Manager Contact with Families:* DYC has demonstrated relatively steady improvement in performance for both family engagement measures over the past 10 months. This increase is attributed to a number of factors ranging from enhanced staff effort and focus to engaging families as well as to overcoming technical data system (Trails) difficulties in documentation efforts.
 - A comprehensive Trails quality assurance analysis discovered “Trails errors” to be a primary explanation for inadvertent exclusion of a large number of youth who had actually experienced family contact and were previously not credited.
 - In September 2013, DYC began working in collaboration with contract providers to explore viable options for tracking and assembling family engagement data by contract provider, since the current measure only includes youth in state-operated facilities.

Measures

- [Youth Enrolled in a Full/Part Time Program at Discharge](#)
- [Eligible Youth who Have a GED or High School Diploma at Discharge](#)
- [Number of Youth who Escape or Walkaway from Residential Care](#)
- [State-Operated Facility Fights/Assault Rate](#)
- [Youth Injuries in State-Operated Facilities](#)
- [Rate of Staff Injuries on the Job as a Direct Result of Youth Contact](#)
- [Timely Initial Placement for Committed Youth](#)
- [Family Engagement: Residential Client Contact with Families](#)
- [Family Engagement: Client Manager Contact with Families](#)

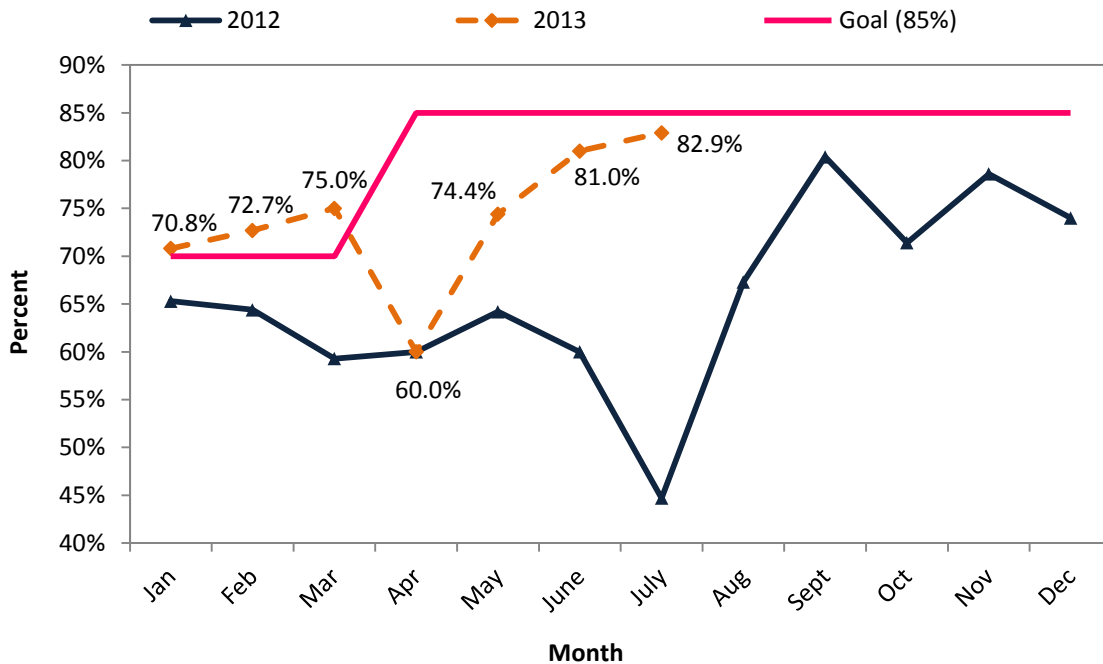
Division of Youth Corrections (DYC)

Measure: **Youth enrolled in a full/part time program at discharge**

How it is measured: *Numerator:* Number of clients enrolled in a full or part time program upon discharge from DYC (education, employment, or other form of pro-social community engagement)
Denominator: Total number of clients who discharge in a specific month; Average monthly denominator: 42

Why this matters: Ensuring youth have productive activities connecting them to the community upon discharge reduces the likelihood of recidivism and improves overall outcomes.

Goal: **↑ 85%**



Trend: Performance improved for the third consecutive month and is approaching the 85% goal.

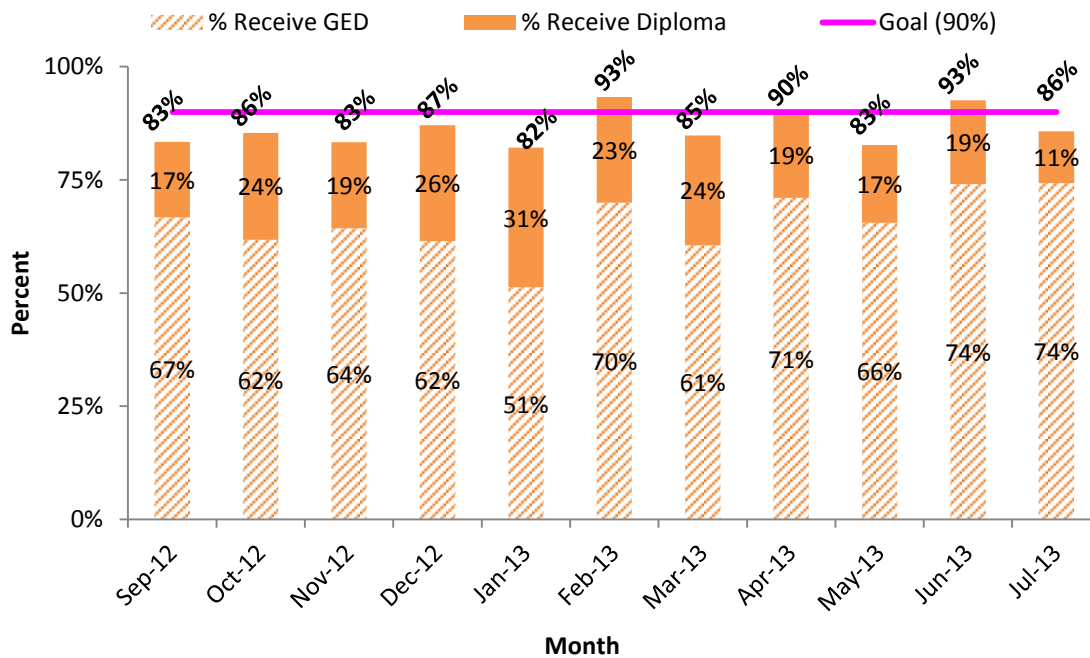
Division of Youth Corrections (DYC)

Measure: **Eligible youth who have a GED or high school diploma at discharge**

How it is measured: *Numerator:* Number of eligible youth who receive a GED or high school diploma by discharge
Denominator: Number of eligible DYC youth who discharge; Average monthly denominator: 30

Why this matters: Educational success reduces the likelihood of recidivism and improves overall outcomes.

Goal: **↑ 90%**



Trend: DYC met the goal in one of three months in the most recent quarter.

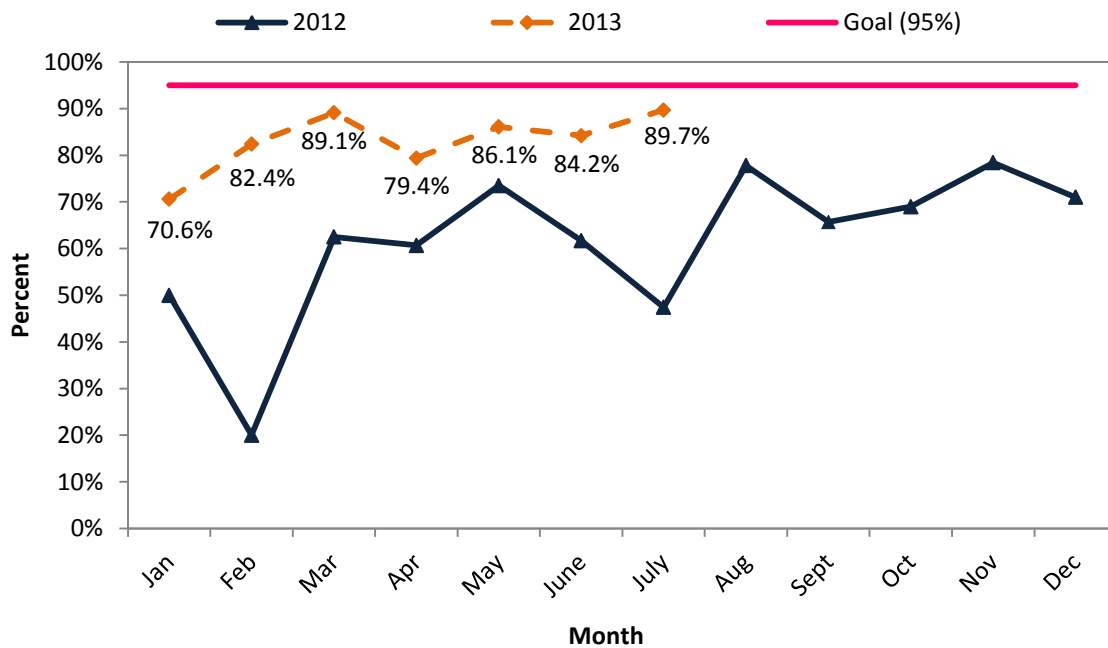
Division of Youth Corrections (DYC)

Measure: **Timely initial placement for committed youth**

How it is measured: *Numerator:* Number of newly committed youth who are placed in their initial placement within 40 days of their commitment date
Denominator: Total number of newly committed youth placed in their initial placement in specified month; Average monthly denominator: 38

Why this matters: All youth should receive individualized treatment services in the timeliest manner possible.

Goal: **↑ 95%**



Trend: The most recent quarter reflects the best performance to date for this measure. However, the 95% goal has not been achieved.

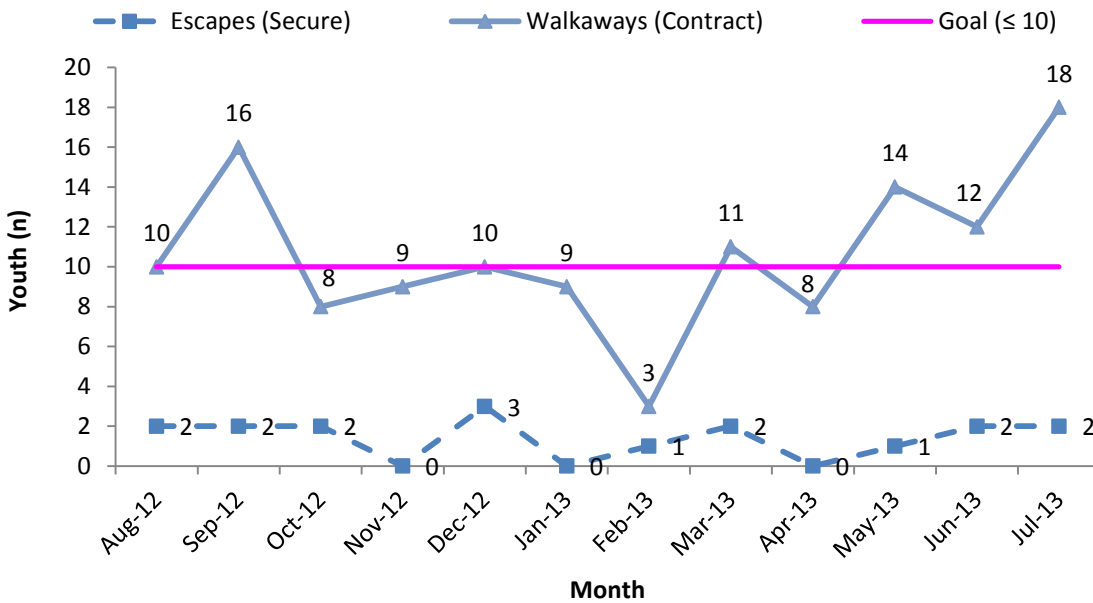
Division of Youth Corrections (DYC)

Measure: **Committed or detained youth who escape or walkaway from residential placement**

How it is measured: Number of escapes/walkaways occurring while committed youth are in state-operated residential placement (escape) or in contract staff-supervised/community placement (walkaway); Average daily population: 1,124

Why this matters: Minimizing escapes and/or walkaways from residential placement is necessary to ensure public safety.

Goal: **↓ ≤10**



Trend: Overall performance declined, in the most recent quarter, for walkaways. Performance for state-secure facilities (escapes) remains relatively stable.

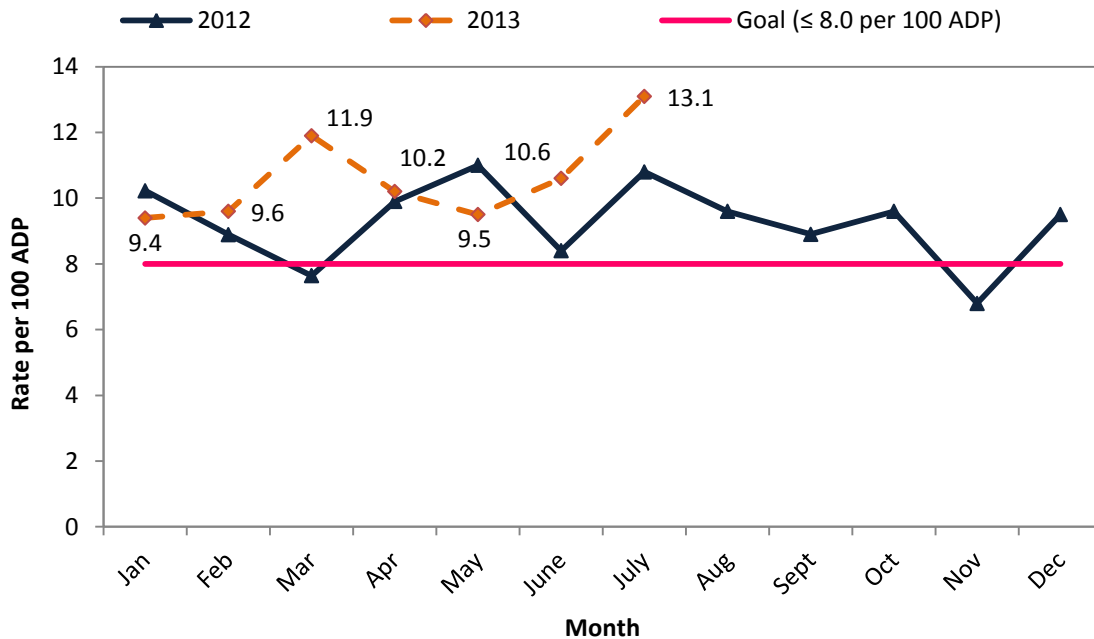
Division of Youth Corrections (DYC)

Measure: Fights and/or assaults in DYC state-operated residential facilities (assessment, detention and commitment)

How it is measured: *Numerator:* Fights and assaults occurring in DYC state-operated residential facilities
Denominator: Average daily population (ADP) of state-operated residential facilities (detention, assessment and commitment); Average daily population: 637

Why this matters: All youth in the custody of the Division of Youth Corrections should reside in a safe environment free from fear of harm.

Goal: ↓ ≤ 8.0/100 ADP



Trend: Performance declined in the most recent quarter. The goal of fewer than 8.0 fights and assaults, per ADP, has not been achieved in 2013.

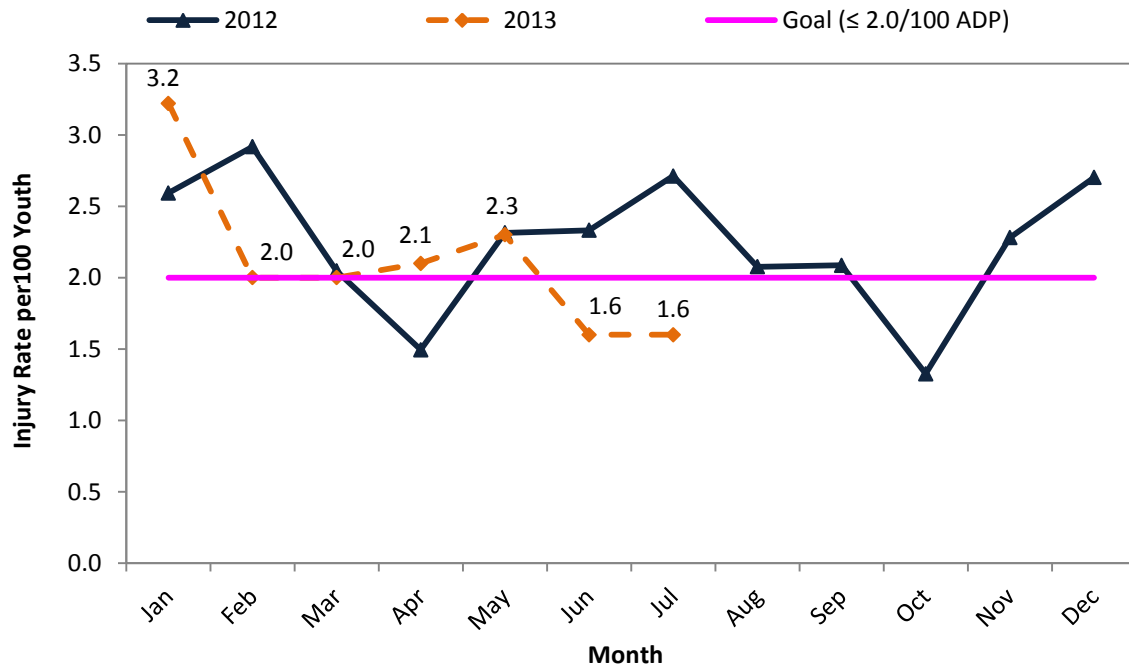
Division of Youth Corrections (DYC)

Measure: **Youth injuries in state-operated residential facilities (detention and commitment)**

How it is measured: *Numerator:* Number of youth injuries in DYC state secure facilities
Denominator: Average daily population (ADP) of state-operated residential facilities (detention, assessment and commitment); Average daily population: 637

Why this matters: All youth in the custody of the Division of Youth Corrections should reside in a safe environment free from fear of harm.

Goal: **↓ ≤ 2.0/100ADP**



Trend: Performance improved in the most recent quarter. The goal of fewer than 2.0 youth injuries, per ADP, was achieved for two of the three months.

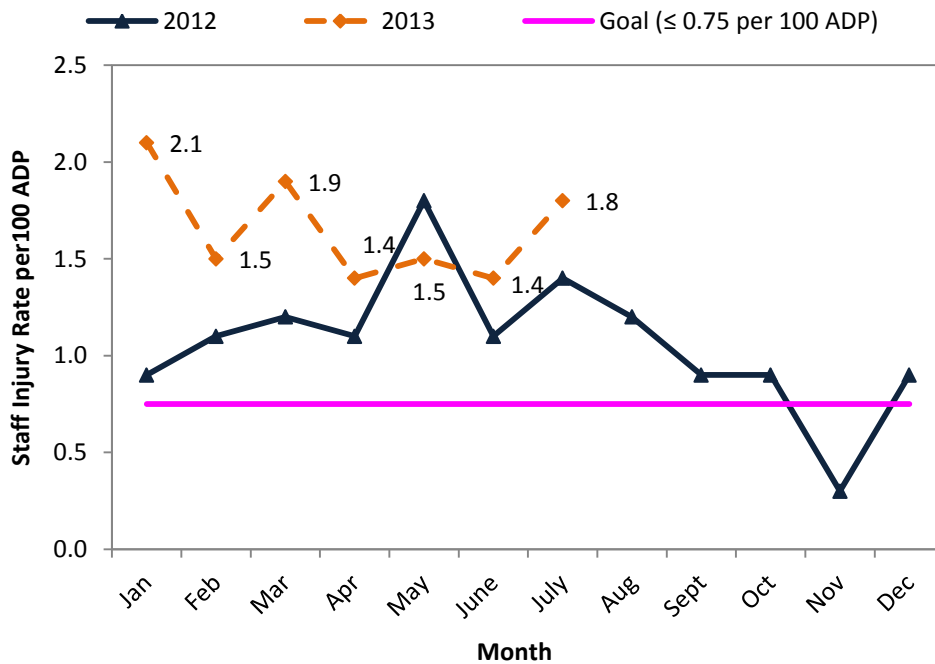
Division of Youth Corrections (DYC)

Measure: **Staff injuries directly resulting from youth contact while on the job**

How it is measured: *Numerator:* Number of staff injuries on the job in state-secure residential facilities as a direct result of youth contact
Denominator: Average daily population (ADP) of state-operated residential facilities (detention, assessment and commitment); Average daily population: 637

Why this matters: State facilities should be a safe environment for staff to work.

Goal: **↓ ≤ 0.75/100 ADP**



Trend: Performance declined over the most recent quarter. The goal of fewer than 0.75 staff injuries, per 100 ADP, has not been achieved since November 2012.

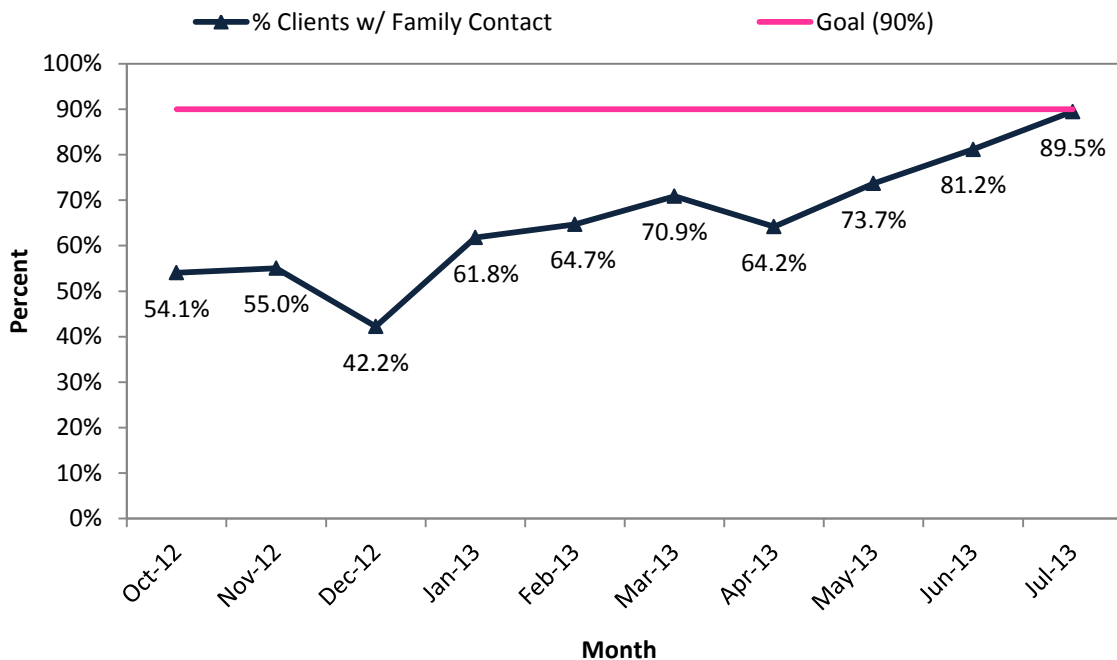
Division of Youth Corrections (DYC)

Measure: **Family engagement: residential client contact with families**

How it is measured: *Numerator:* Number of clients in residential state-operated facilities with at least one monthly family contact (phone or face-to-face)
Denominator: Number of committed clients in residential state-operated facilities;
Average monthly denominator: 470

Why this matters: Maintaining family connections in residential facilities is a future indicator of a successful transition back to the community.

Goal: **↑ 90%**



Trend: Performance improved for each of the three months in the most recent quarter, with DYC 0.5% away from achieving the 90% goal.

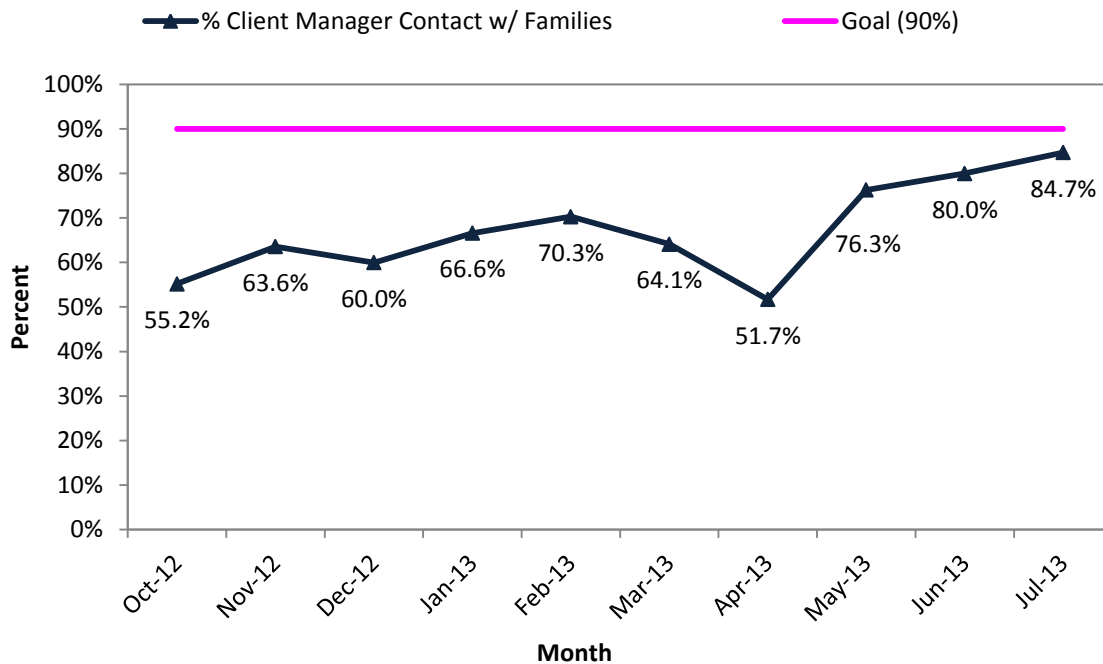
Division of Youth Corrections (DYC)

Measure: **Family engagement: committed clients (residential and parole) with client managers who made at least one monthly contact with the youth's family**

How it is measured: *Numerator:* Number of clients whose client manager contacted family by phone, video, or face-to-face one or more times during specified month
Denominator: Number of committed clients (residential and parole); Average monthly denominator: 1,180

Why this matters: Client manager contact with families reduces the likelihood of recidivism and improves overall outcomes.

Goal: ↑ 90%



Trend: Performance improved for each of the three months in the most recent quarter, although the 90% has not been achieved.

Domestic Violence Program

Summary

Description

The Domestic Violence Program (DVP) serves as the state governmental authority on domestic violence issues. DVP provides leadership, guidance, and awareness, within government agencies, as well as ensures 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

- The Family Violence Prevention and Services Program administers the Family Violence Prevention and Services Act (FVPSA), the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.
- Beginning with the first quarter of Federal Fiscal Year (FFY) 2014, the Domestic Violence Program will be collecting monthly data from programs in addition to quarterly data.

Measures

- [Enhanced Safety Strategies](#)
- [Increased Knowledge of Community Resources](#)

Domestic Violence Program (DVP)

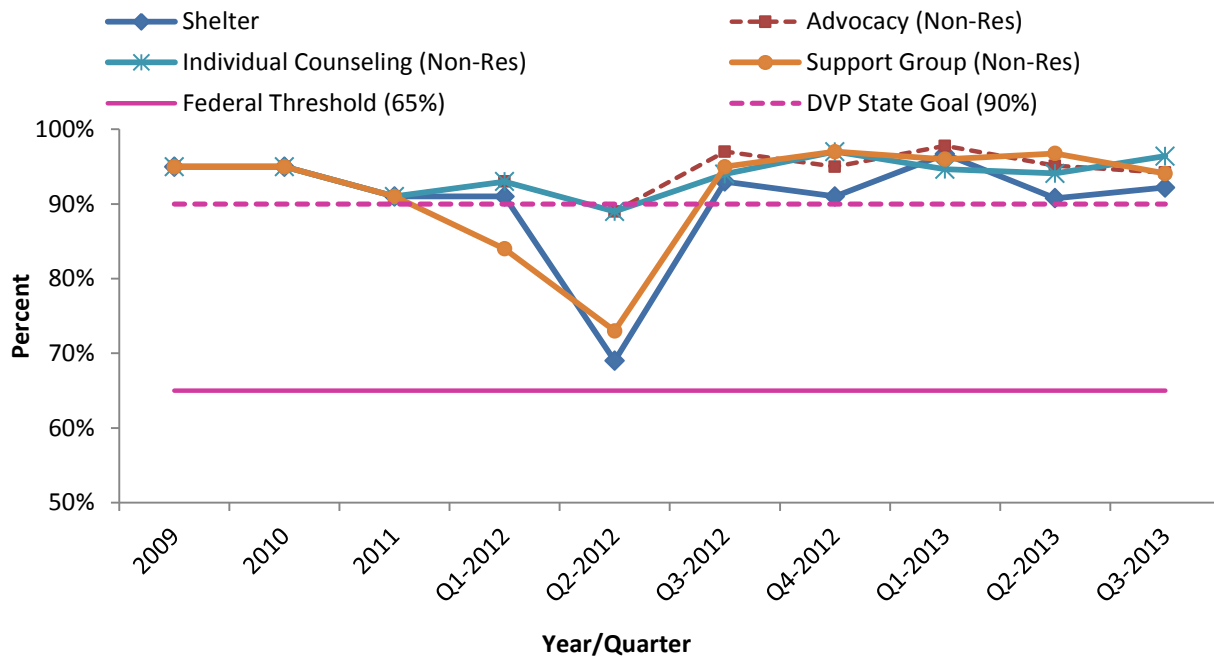
Measure: **Enhanced safety strategies (Federal Measure)**

How it is measured: *Numerator:* Number of clients who indicated having achieved the specified outcome because of the service received

Denominator: Number of surveys returned by clients receiving services;
 Quarterly denominator: Surveys completed in FFY 2013 Q3 (April – June 2013) -
 Shelter: 319; Advocacy: 785; Counseling: 411; Support Group: 459

Why this matters: Services provided through the Domestic Violence Program are intended to enhance safety, and increase community resource knowledge and hope about the future.

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for shelter and counseling services improved slightly, while performance for advocacy and support group services declined. All service categories achieved the 90% goal.

Notes: Data is reported on a quarterly basis. Surveys distributed for non-residential services are not mutually exclusive.

Domestic Violence Program (DVP)

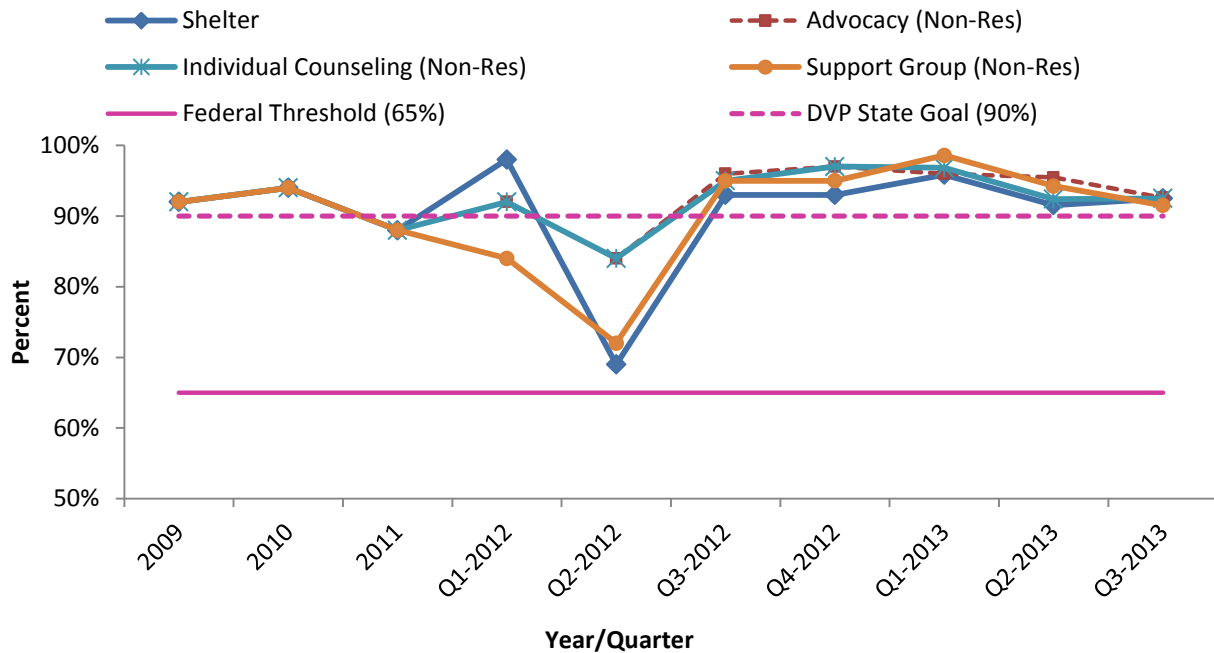
Measure: **Increased knowledge of community resources (Federal Measure)**

How it is measured: *Numerator:* Number of clients who indicated having achieved the specified outcome because of the service received

Denominator: Number of surveys returned by clients receiving services;
 Quarterly denominator: Surveys completed in FFY 2013 Q3 (April – June 2013) -
 Shelter: 319; Advocacy: 785; Counseling: 411; Support Group: 459

Why this matters: Services provided through the Domestic Violence Program are intended to increase knowledge of community resources.

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for shelter and counseling services improved slightly, while performance for advocacy and support group services declined. All service categories achieved the 90% goal.

Notes: Data is reported on a quarterly basis. Surveys distributed for non-residential services are not mutually exclusive.

Office of Early Childhood

Description

The Office of Early Childhood (OEC) was created in June 2012 to consolidate and better administer early childhood programs in Colorado. This consolidation of programs and services supports parents by strengthening collaboration and coordination between the state-level early childhood system and local delivery systems.

The Office of Early Childhood has brought together multiple programs which formerly existed in other offices within CDHS, and programs formerly housed within the Colorado Department of Public Health and Environment (CDPHE), to create the Division of Early Care and Learning and the Division of Community and Family Supports. These programs include:

- Child Care Licensing
- Child Care Quality Initiatives
- Children’s Trust Fund
- Colorado Child Care Assistance Program (CCCAP)
- Early Childhood Councils
- Early Childhood Mental Health Services
- Early Intervention Colorado Program (Part C/Early Intervention)
- Family Resource Centers
- Home Visiting Programs
- Promoting Safe and Stable Families

The move maximizes available resources without incurring additional expenses. Additionally, the OEC continues to work with many partners, including parents, schools, child care providers, Community Center Boards (CCBs), early intervention service providers, businesses, community organizations and other stakeholders to provide high-quality, early childhood programs and effective prevention strategies.

Director: Mary Anne Snyder

Division of Early Care and Learning

Summary

Description

The Division of Early Care and Learning (ECL) is the State's lead agency in planning and implementing public child care policy. The Division of Early Care and Learning is responsible for the licensing and monitoring of child care facilities; managing the 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 the Division of Early Care and Learning is to promote quality, accessible and affordable child care services for Colorado families.

Director: David Collins

Executive Summary

- *Accurate Child Care Reimbursement:* Targeted improvement strategies have resulted in a reduction in the percentage of total manual reimbursements, continuing from January 2012 through July 2013. Rates fell to an all-time low of 2.3% in May 2013.
 - In June 2013, rates spiked to 16.5% as a result of incentive payments manually paid to providers in Weld and El Paso counties.
- *Timely Supervisory Inspections:* Both one and twelve-month supervisory inspections saw fluctuations over the past quarter. OEC revised its definitions of "late" and "timely" in August 2013 and updated data to reflect the new definitions from May 2013 – August 2013.
 - The number of child care centers requiring one-month inspections is very small and a decline in performance should be interpreted with caution.
- *Serious Complaint Visits Completed On Time:* Timeliness of serious complaint visits fluctuated between 81.3% and 87.5% in 2013. The average performance rate is currently 84.6%.

Measures

- [Accurate Child Care Reimbursement](#)
- [Quality Rated Child Care Programs](#)
- [Timely Supervisory Inspections](#)
- [Timely Serious Complaint Visits](#)

Division of Early Care and Learning (ECL)

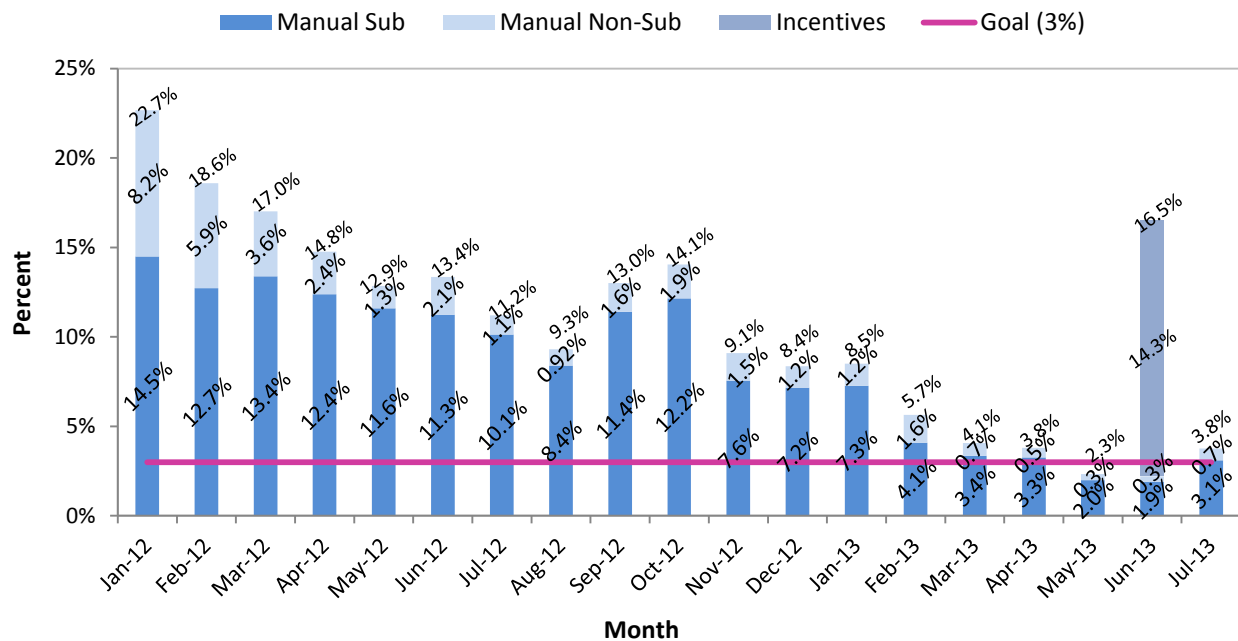
Measure: **Accurate child care reimbursement**

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 providers; Average monthly denominator: \$5,230,947

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

Goal: **↓ 3%**



Trend: Targeted improvement strategies have resulted in a reduction in the percentage of total manual reimbursements, continuing from January 2012 through July 2013. Rates fell to an all-time low of 2.3% in May 2013, and ended the most recent quarter at 3.8%. In June 2013, rates spiked to 16.5% as a result of incentive payments manually paid to providers in Weld and El Paso counties.

Division of Early Care and Learning (ECL)

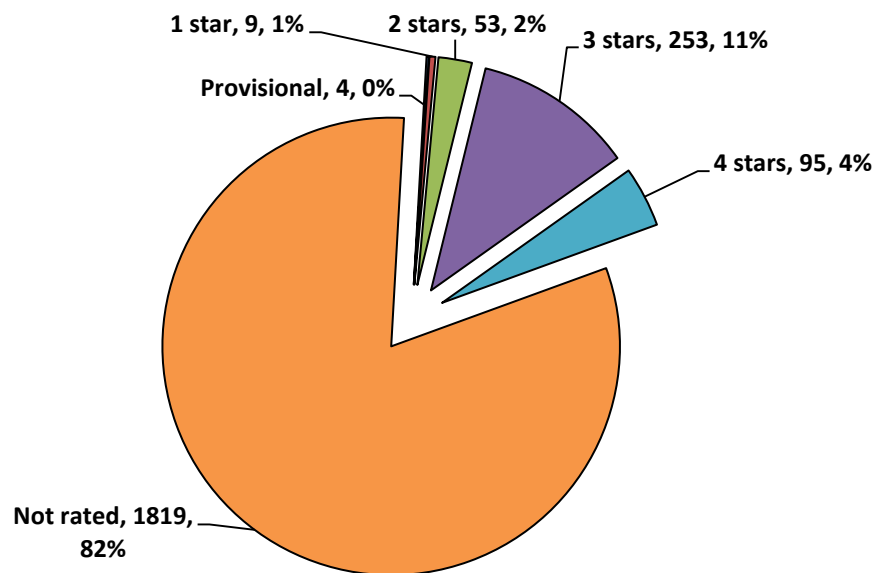
Measure: **Quality rated child care programs**

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

Denominator: Total number of licensed child care programs and preschools;
Average monthly denominator: 2,056

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: **↑ N/A**



Trend: Currently, 18% of child care programs have a quality rating. This number stays relatively stagnant, with minimal variance, as a result of quality ratings being valid for 2-3 years. Among rated programs, 15% have three or four-star ratings.

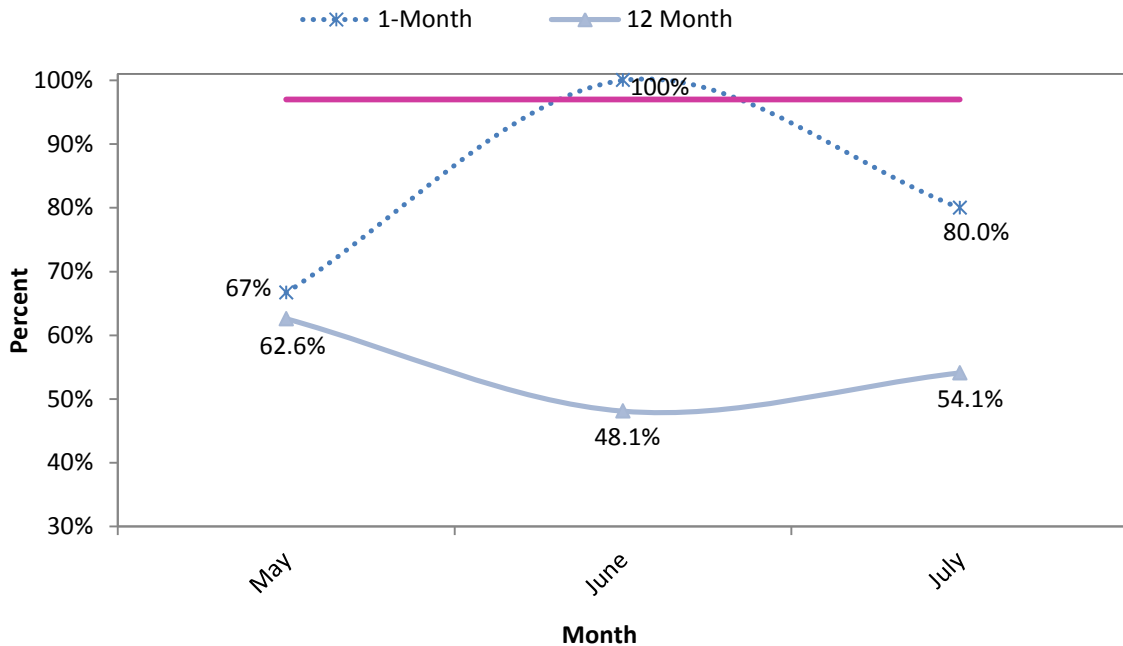
Division of Early Care and Learning (ECL)

Measure: **Timely 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 centers on a one-month OR 12-month inspection cycle; Average monthly denominator: One-month: 6; 12-month: 60

Why this matters: Child care licensing ensures the health and safety of children in care and establishes minimum standards for child care center operation. All centers are inspected regularly; however, child care centers that have had complaints or have been found to be out of compliance with licensing are inspected more frequently.

Goal: **↑ 97%**



Trend: Both one and twelve-month supervisory inspections saw fluctuations over the past quarter. Timely one-month inspections decreased to 64% in May 2013, and ended the quarter at 80% in July 2013. Twelve-month inspections finished the quarter at 54%.

Notes: The definitions of “late” and “timely” were updated by OEC in August 2013. This led to a change in methodology; therefore, data are only reported since May 2013.

Division of Early Care and Learning (ECL)

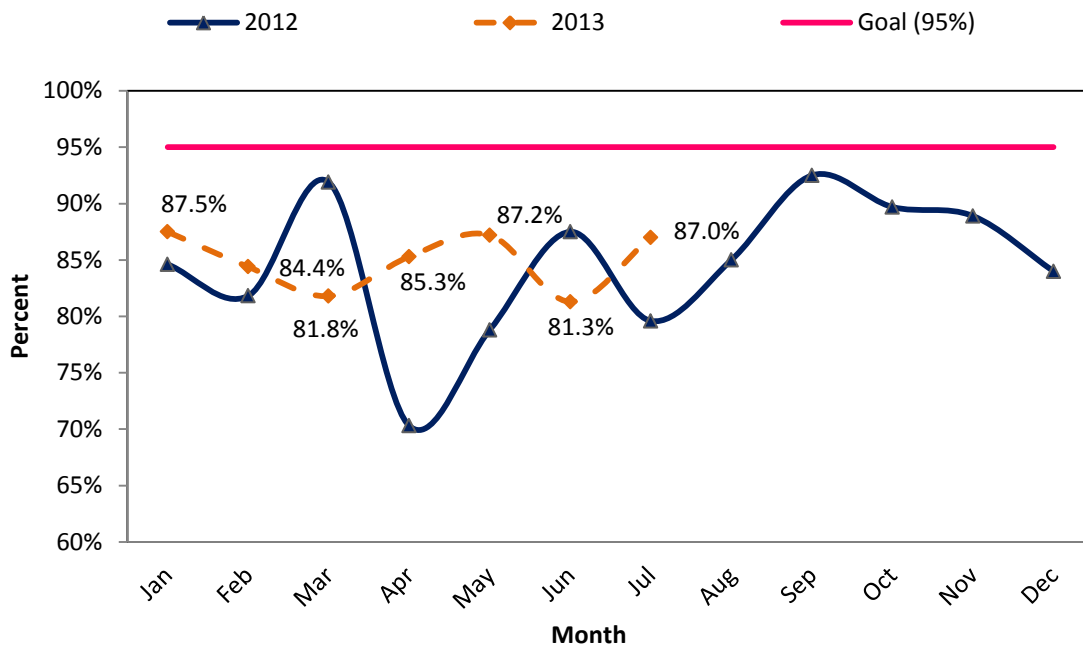
Measure: **Timely serious complaint visits**

How it is measured: *Numerator:* The number of complaint visits (severity level 1-3) completed on time

Denominator: Total number of complaint visits (severity level 1-3); Average monthly denominator: 36

Why this matters: Child care licensing ensures the health and safety of children in care. When claims of abuse or neglect occur, investigations must take place to determine whether the safety and well-being of a child in care is jeopardized. Depending on the severity of a claim, a time frame is established in order to help prioritize and organize investigations.

Goal: **↑ 95%**



Trend: Timeliness of serious complaint visits has not yet reached the goal of 95%, continuing to fluctuate between 81.3% and 87.5% in 2013. The average performance rate is currently 84.6%.

Notes: This measure evaluates serious complaint visits screened as a level 1, 2 or 3 in terms of severity. OEC began reporting on this measure in August 2013.

Division of Community and Family Support

Summary

Description

The Division of Community and Family Support (CFS) encompasses Early Childhood Councils, Early Intervention, Promoting Safe and Stable Families, the Children’s Trust Fund, Family Resource Centers, Home Visiting Programs, and Early Childhood Mental Health Services. These programs and services benefit families in need by strengthening collaboration and coordination between the state-level early childhood system and local delivery systems. The Division of Community and Family Support works with many partners, including parents, schools, child care providers, early intervention services and programs, businesses, community organizations, and other stakeholders to provide high quality, early childhood programs and effective prevention strategies to mitigate challenges faced by families that affect school readiness and academic success.

Director: Tammi Graham

Executive Summary

- Within the area of Early Intervention, CFS collects data on *Infants and Toddlers who Receive Timely Service, Increased Growth in the Acquisition and Use of Knowledge and Skill, Increased Growth in Social Emotional Skills, and Increased Growth in Appropriate Behaviors to Meet Needs*.
 - *Infants and Toddlers who Receive Timely Service* demonstrated a decrease in performance in June 2013.
 - Two of the four early intervention outcomes, *Increased Growth in Social Emotional Skills* and *Increased Growth in Appropriate Behaviors to Meet Needs*, were added as of July 2013. Historical data were gathered, such that data are reported from January 2013 through June 2013 for each of these measures.
- As of September 2013, OEC is reporting Early Intervention data by Community Centered Board (CCB).

Measures

- [Timely Service-Infants and Toddlers](#)
- [Increased Growth \(Knowledge & Skills\) – Infants and Toddlers](#)
- [Increased Growth \(Social Emotional\) – Infants and Toddlers](#)
- [Increased Growth \(Appropriate Behaviors\) – Infants and Toddlers](#)

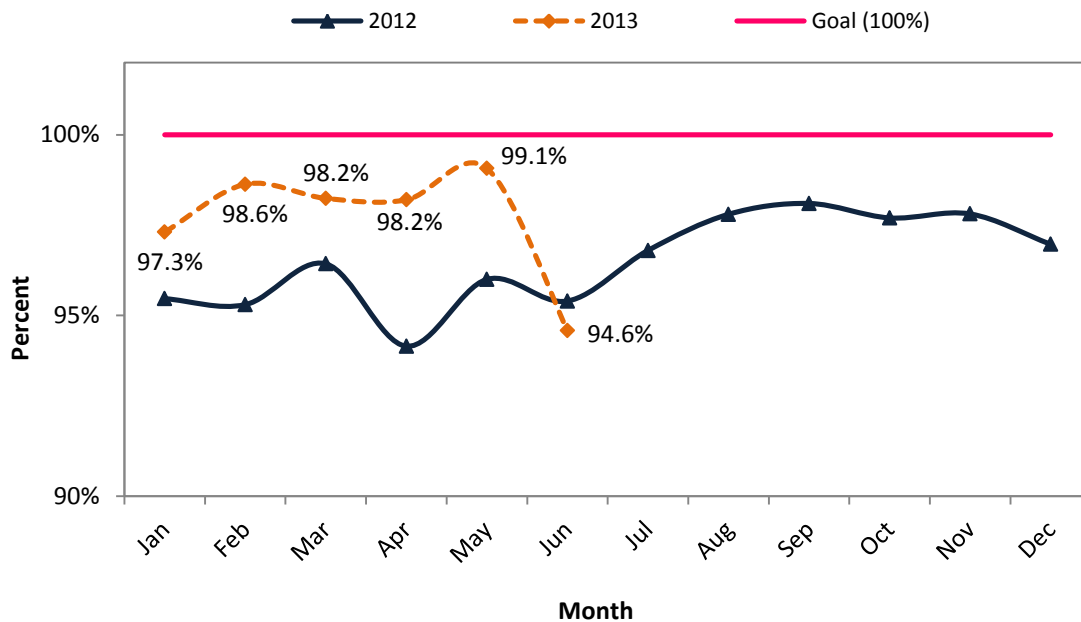
Division of Community and Family Support (CFS)

Measure: **Percent of children receiving timely early intervention (EI) 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;
 Average monthly denominator: 791

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: Performance ranges between 94.6% and 99.1% in 2013. Performance has continued to see improvement over 2012 rates, until June 2013 when performance slipped to 94.6%.

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

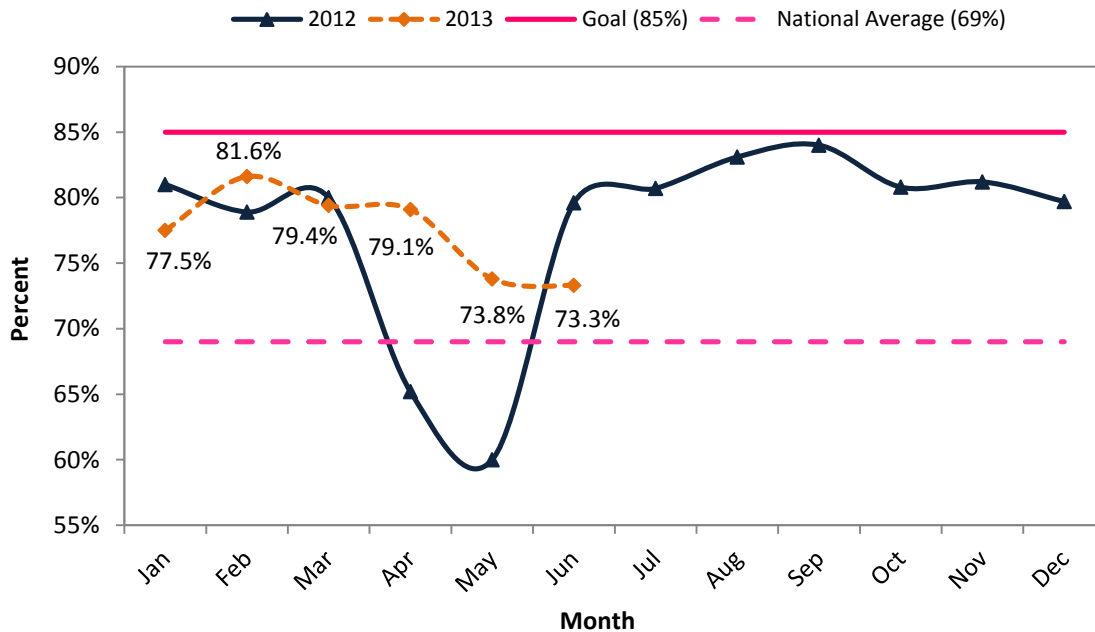
Division of Community and Family Support (CFS)

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, in knowledge and skills, at exit from early intervention (EI) services
Denominator: Number of participants who exited EI services and were not functioning at age level at entry; Average monthly denominator: 102

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

Goal: ↑69%



Trend: While performance on this measure has stayed above the national average of 69% since June 2012, it has yet to meet the Colorado goal of 85% (established in August 2013 by OEC).

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) EI services. The numerator encompasses 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.

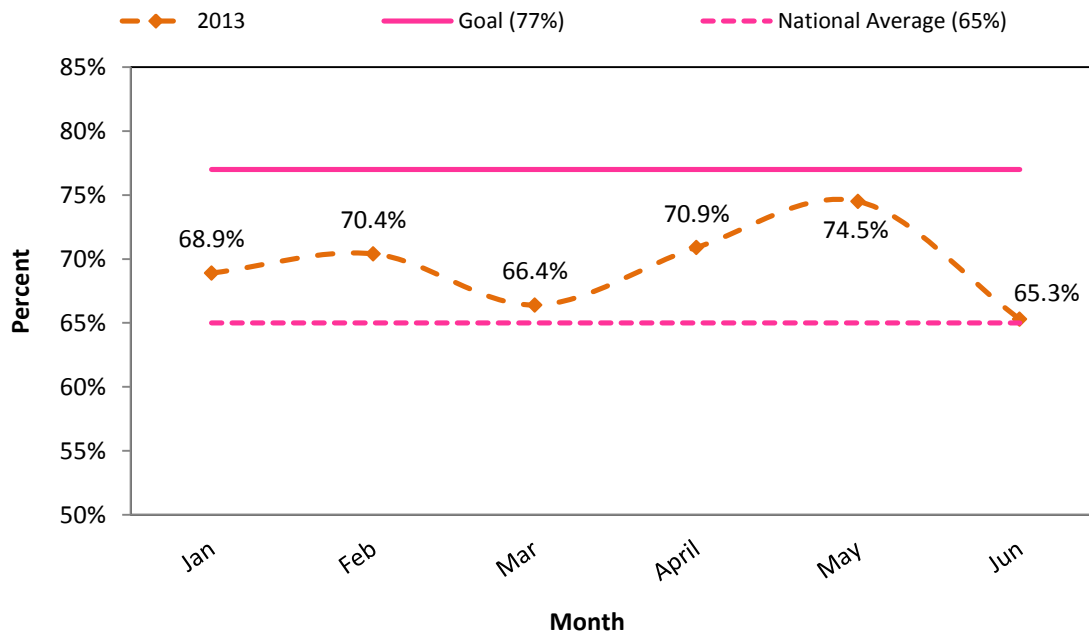
Division of Community and Family Support (DCFS)

Measure: **Percent of infants and toddlers with growth in social emotional skills (Federal Measure)**

How it is measured: *Numerator:* Number of participants with a substantial increase in their rate of growth, in social emotional skills, at exit from early intervention (EI) services
Denominator: Number of participants who exited EI services and were not functioning at age level at entry; Average monthly denominator: 166

Why this matters: Infants and toddlers who progress early in life have a greater likelihood of long-term success. Appropriate social emotional skills are also linked to decreased school suspensions and expulsions.

Goal: **↑77%**



Trend: Performance on this measure has stayed above the national average of 65% since January 2013, but has yet to reach the Colorado goal of 77% (established in August 2013 by OEC). Performance over the past five months averages at 69.4%.

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) EI services. The numerator encompasses 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.

Division of Community and Family Support (DCFS)

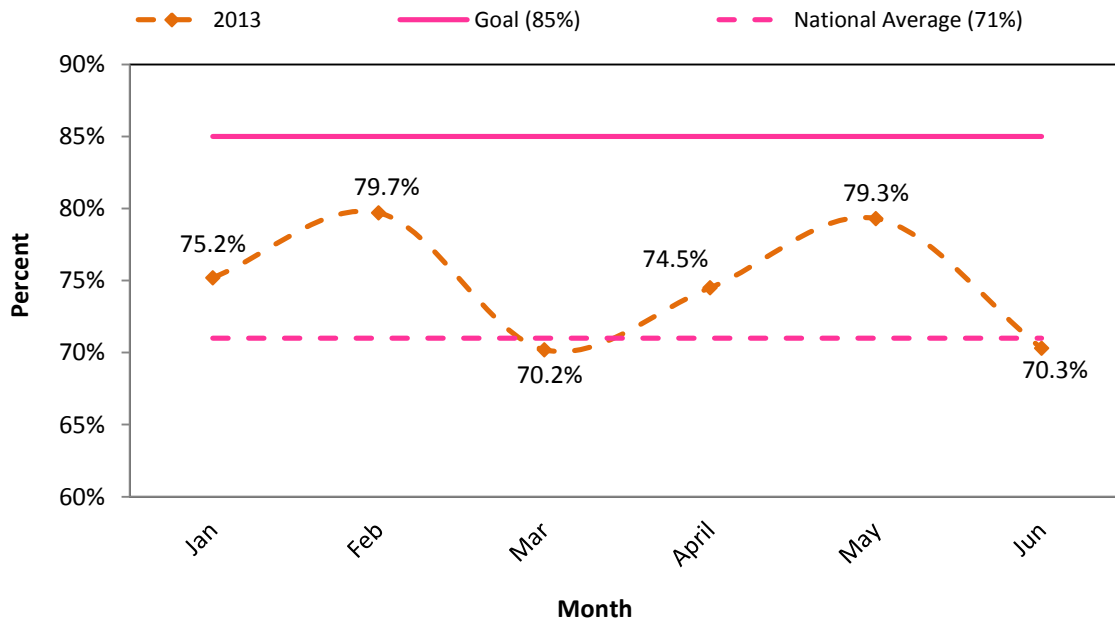
Measure: **Percent of infants and toddlers with growth in appropriate behaviors to meet needs (Federal Measure)**

How it is measured: *Numerator:* Number of participants with a substantial increase in their rate of growth, in appropriate behaviors to meet needs, at exit from early intervention (EI) services

Denominator: Number of participants who exited EI services and were not functioning at age level at entry; Average monthly denominator: 143

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

Goal: **↑85%**



Trend: Performance on this measure has stayed above the national average of 71% since January 2013, with the exception of June 2013. Performance has yet to reach the Colorado goal of 85% (established in August 2013 by OEC). Performance over the past five months averages at 75.6%

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) EI services. The numerator encompasses 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.

Office of Economic Security

Description

The Office of Economic Security (OES) houses programs that provide financial, employment, energy and nutritional supports to Coloradans. OES consists of the divisions of Child Support Services, Colorado Refugee Services, Colorado Works (Temporary Assistance for Needy Families) and Adult Financial Services, and Food and Energy Assistance, which includes Food Assistance (federally known as the Supplemental Nutritional Assistance Program or SNAP), the Low-Income Energy Assistance Program (federally known as LIHEAP) and Food Distribution Programs.

Director: Julie Kerksick

Child Support Services Summary

Description

The Division of Child Support Services (CSS) 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, establishing child support obligations. Child Support Services enforces the payment of those obligations through the collection of current support and/or arrears payments. Services are provided at the county level to Colorado families.

Director: Paulette St. James

Executive Summary

- The Division of Child Support Services has identified two key performance measures to be tracked through the C-Stat process:
 - *Child Support Collected*, which mirrors the Federal performance standards that are tied to incentive payments for states.
 - *Arrears Payments*, which is a modified version of the Federal arrears measure. While the Administration of Children and Families monitors payments towards arrears on a cumulative annual basis, the C-Stat performance measure looks at distinct monthly outcomes in this area.
- Child Support Services has begun to work more closely with the Ten Large counties on targeted performance improvement for both C-Stat measures. In addition to breaking out data at the county level for C-Stat meetings, they have conducted several county site-visits in which the C-Stat data, along with practice, is discussed. Child Support Services has created performance improvement plans for all Ten Large counties.

Measures

- [Child Support Collected](#)
- [Arrears Payments](#)

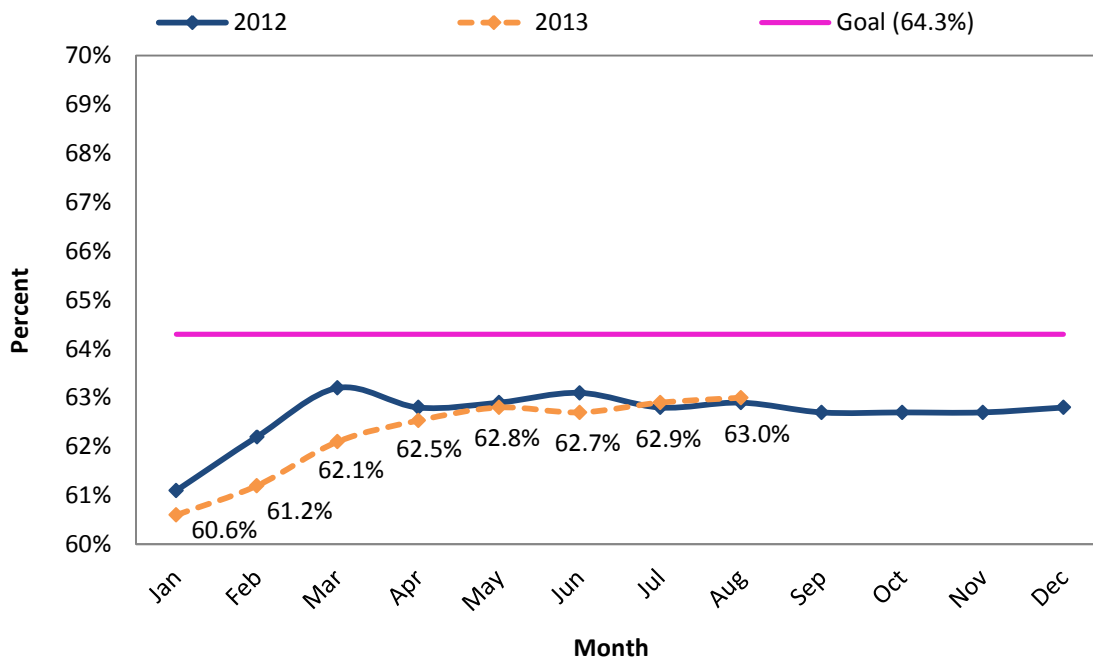
Child Support Services (CSS)

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

How it is measured: *Numerator:* Cumulative current support dollars collected
Denominator: Cumulative current support dollars owed; Cumulative denominator for monthly support owed through August 2013: \$253.27 million

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

Goal: **↑64.3% (State Goal)**



Trend: Steady upward performance from June 2013 onward.

Notes: Prior years' performance variations were largely the result of a system glitch manifested in months with a business day in the fifth week and the subsequent month. Corrections to a payroll error (May 2013) should result in a smoothing of performance over time.

Child Support Services (CSS)

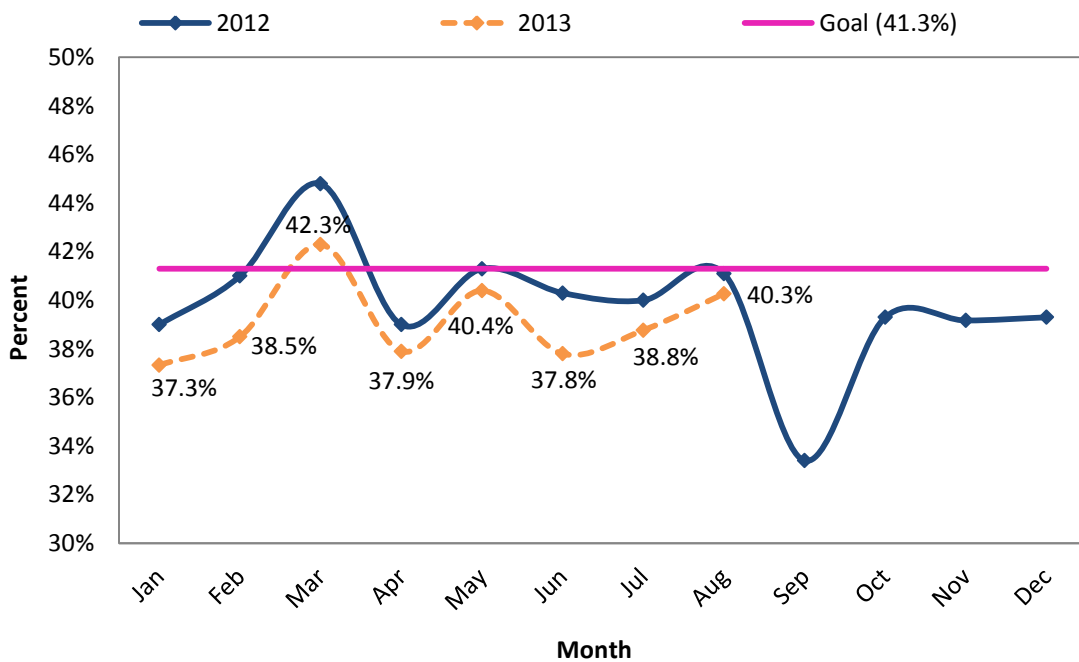
Measure: **Arrears payments**

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; Average monthly denominator: 113,186

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

Goal: **↑ 41.3%**



Trend: Notable variability in 2012. Thus far, data in 2013 demonstrating a similar pattern as 2012.

Notes: Prior years' performance had notable peaks and dips that were largely the result of a system glitch manifested in months with a business day in the fifth week and the subsequent month. Corrections to a payroll error should result in noticeably less variability month-to-month after May 2013. March will always be a peak month, due to tax refund intercepts.

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

- Per Federal requirements, 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 to track in C-Stat.
- At the inception of C-Stat, contractors reported data manually to CRSP on contract-mandated outcomes, on a trimester basis, and CRSP aggregated these totals for annual Federal reporting. Beginning in October 2012, changes to vendor contracts enabled CRSP to begin collecting data on a monthly basis. In November 2012, CRSP began to break out all measures at the contractor (or Volunteer Agency) level.
- In July 2013, CRSP reported the highest entered employment rate ever recorded for the program, at 71.8%.

Measures

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

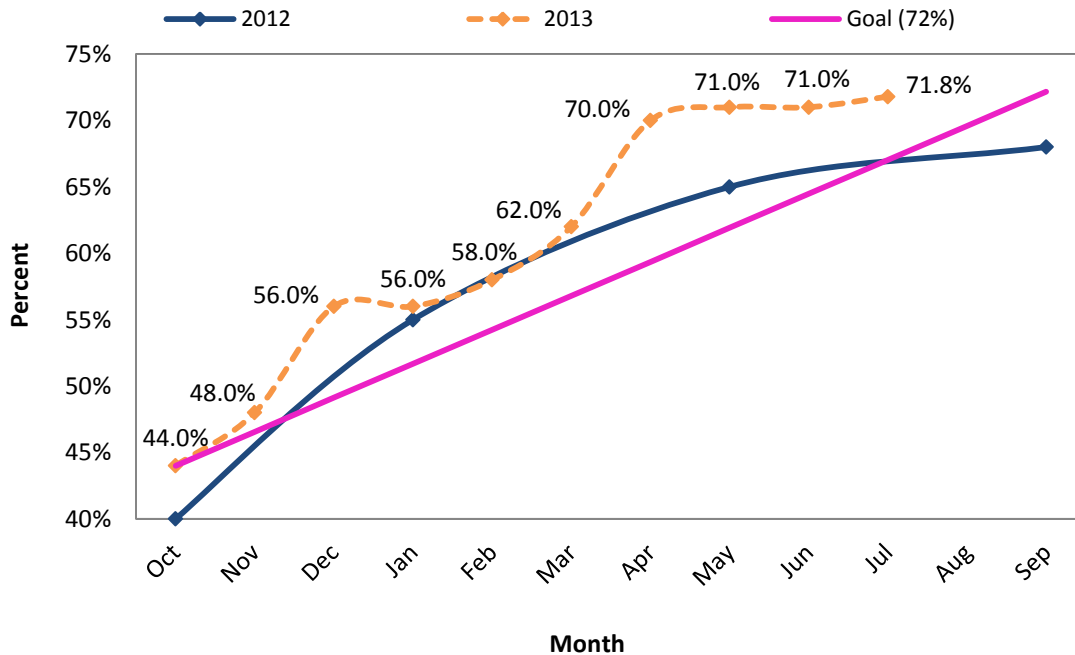
Colorado Refugee Services Program (CSRP)

Measure: **Entered employment (Federal Measure)**

How it is measured: *Numerator:* Cumulative number of refugees newly entering employment during the month
Denominator: Cumulative number of persons receiving employability services through the month; Cumulative denominator: 1,200

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

Goal: **↑ 72% (Annual State Goal)**



Trend: In 2013, data points are now presented cumulatively to more accurately display the relationship to the goal. Performance shows an increasing percentage of refugees entering employment from October 2012 through July 2013. July represents the highest entered employment rate CRSP has ever reached.

Note: Data in 2012 was reported on a trimester basis and was not reported cumulatively. Data runs in arrears.

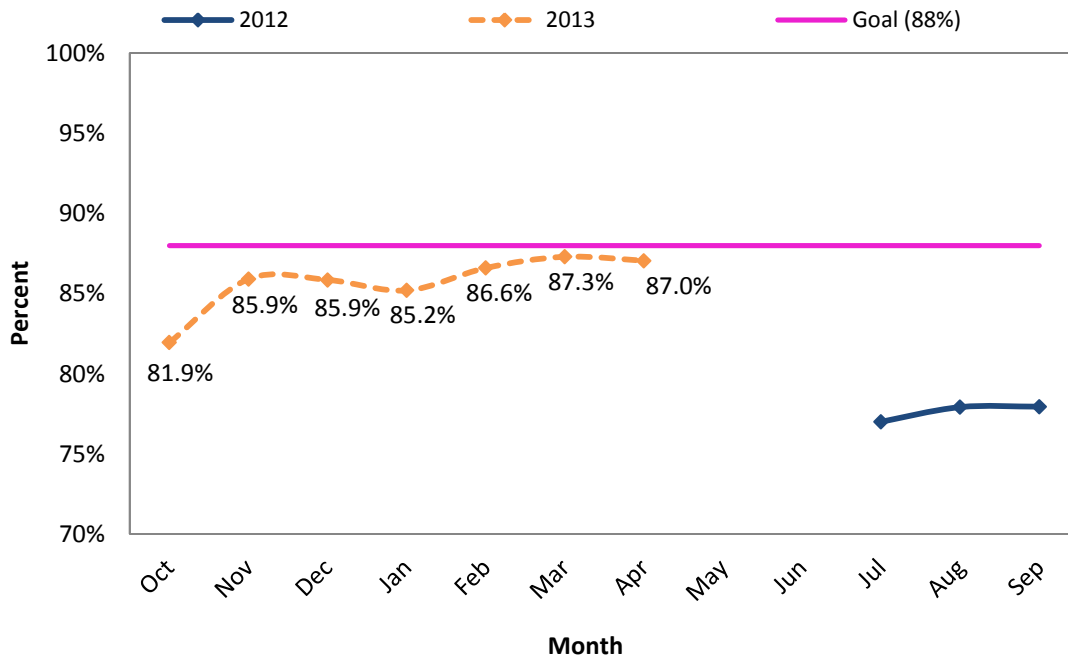
Colorado Refugee Services Program (CSRP)

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

How it is measured: *Numerator:* Cumulative number of individuals who have retained employment for 90 days after initial employment placement
Denominator: Cumulative number of individuals who have entered employment;
 Cumulative monthly denominator: 610

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

Goal: **↑88% (State Goal)**



Trend: Significant performance improvement in FFY2013 over previous year. Hovering slightly below goal.

Note: Data runs in arrears. Ninety days must be completed by the participant before retention is reported to the Volunteer Agency, who in turn reports to CRSP. Data are available monthly as of July 2012.

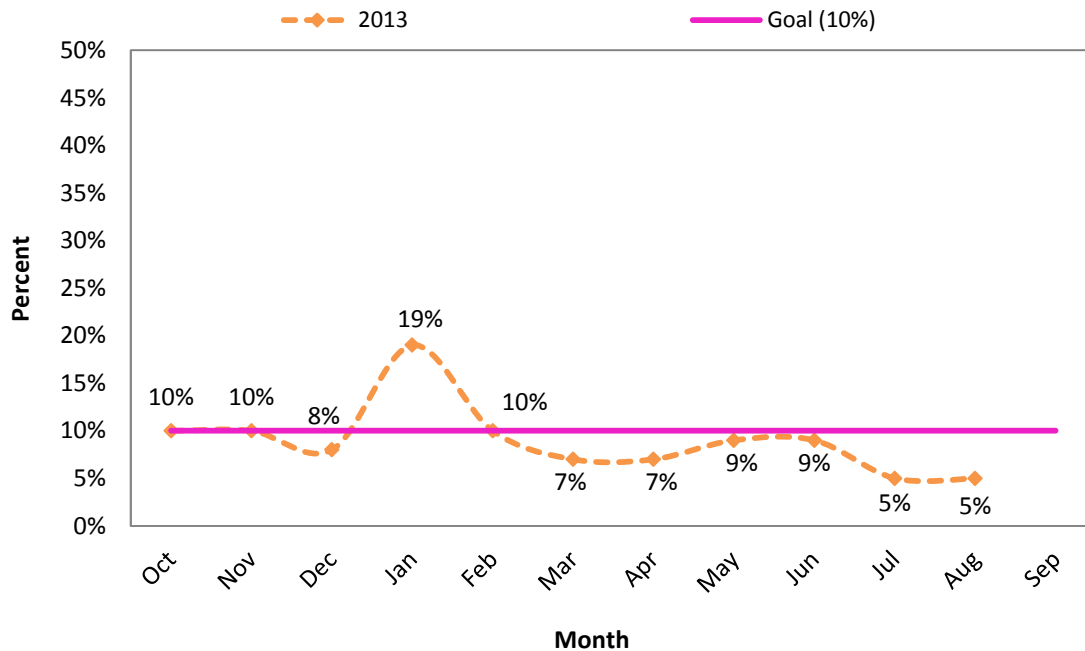
Colorado Refugee Services Program (CSRP)

Measure: **Language progression**

How it is measured: *Numerator:* Number of students advancing one level of English proficiency in a month
Denominator: Total number of students enrolled in ESL class on the first day of the month; Average monthly denominator: 286

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

Goal: **↑10%**



Trend: Performance fluctuates around the 10% goal, with the exception of January 2013, July 2013 and August 2013.

Note: Data runs in arrears. The decline in summer performance is attributed to a reduced class schedule (only two weeks of classes, as opposed to four, were offered during this time).

Colorado Works and Adult Financial Summary

Description

The Division of Colorado Works and Adult Financial houses the state's cash assistance programs for families and older adults. The Adult Financial programs encompass several types of assistance, which exist to provide financial support 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. Colorado Works is federally known as 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 that might necessitate ongoing cash benefits. Clients who are job ready are required to participate in work activities in order to receive ongoing cash assistance payments. Colorado Works and Adult Financial programs are administered at a local level, through county human services offices across the state.

Director: Levetta Love

Executive Summary

- The Adult Financial programs were moved from the Office of Long Term Care to the Office of Economic Security on July 1, 2013.
 - Adult Financial collects data on *Timely Applications* and *Timely Redeterminations*. The program has devoted significant efforts to reducing application backlog as a key strategy to improve the timeliness of applications, and has seen an overall reduction in volume since initiating the distribution of weekly backlog reports to the counties. In July 2013, backlog had been reduced to such a small level that the program no longer reports this data in C-Stat; however, the program continues to monitor it internally.
 - In August 2013, the Division exceeded the goal for *Timely Applications* for the first time, at 95.9%.
- 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 goals. In February 2013, Colorado Works attained 12 consecutive months of meeting 95% for *Timely New Applications*. Having met the goal for *Timely New Applications*, Colorado Works has revised this measure to look at the percentage of *New Applications Processed in 7 Days or Less*. This measure is associated with the Work Support Strategies grant that Colorado is currently participating in with the Ford Foundation and Urban Institute. The grant sets a goal of 90% of applications being processed in 7 days or less by 2015.
 - In regards to *Timely Redeterminations Applications*, data over the past year have demonstrated significant improvement. This measure continues to be tracked monthly as the goal has yet to be met.
 - While Colorado Works has identified employment as a leading outcome of the program to enhance economic security and self-sufficiency, data capabilities have hampered progress for reporting in this area. Colorado Works is currently working to develop a mechanism for

capturing meaningful employment data, in addition to realigning service delivery to prioritize employment as a program outcome.

Measures

- [Timely New Adult Financial Applications](#)
- [Timely Adult Financial Redetermination Applications](#)
- [New Colorado Works Applications Processing in 7 Days or Less](#)
- [Timely Colorado Works Redetermination Applications](#)

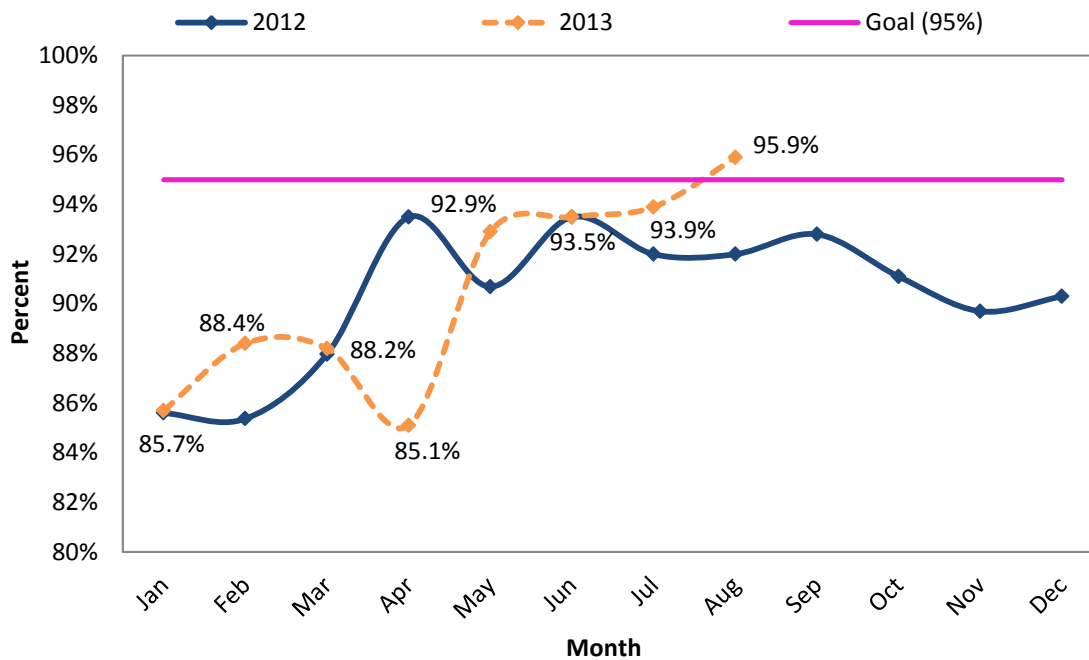
Adult Financial

Measure: **Timely new adult financial applications**

How it is measured: *Numerator:* Number of timely processed new benefit applications
Denominator: Number of processed new benefit applications; Average monthly denominator: 2,678

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

Goal: **↑95%**



Trend: Timeliness was at the highest rate ever in the most recent month, with performance at 95.9%.

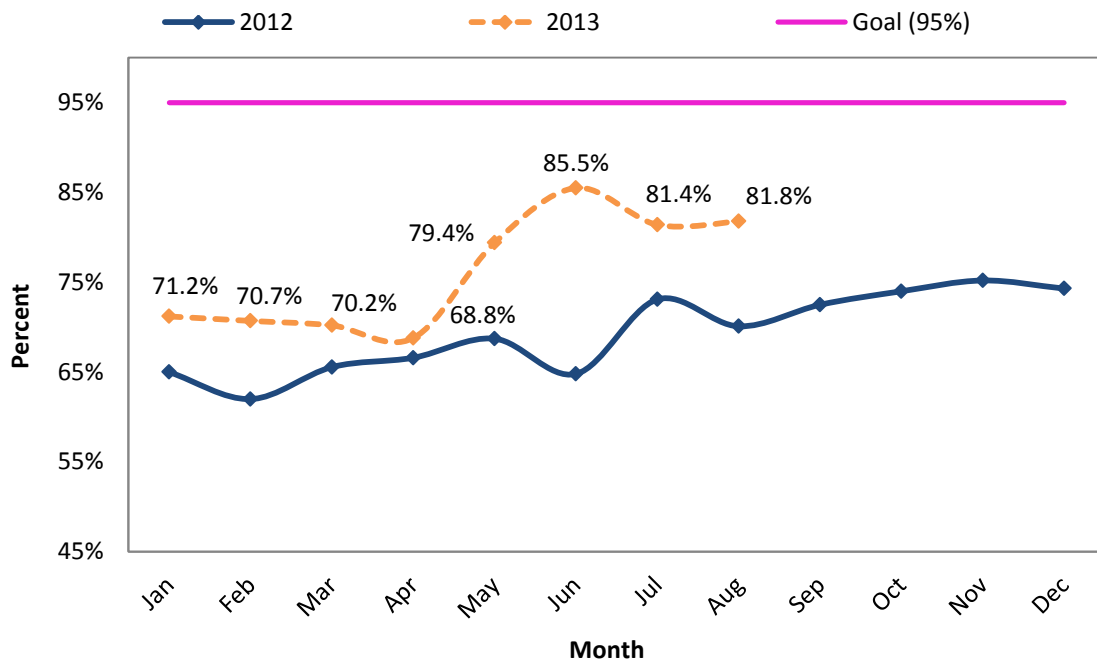
Adult Financial

Measure: **Timely adult financial redetermination applications**

How it is measured: *Numerator:* Number of timely processed redetermination applications
Denominator: Number of processed redetermination applications; Average monthly denominator: 1,592

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

Goal: **↑95%**



Trend: Timeliness has increased noticeably during the spring and summer months. Peaked in June 2013.

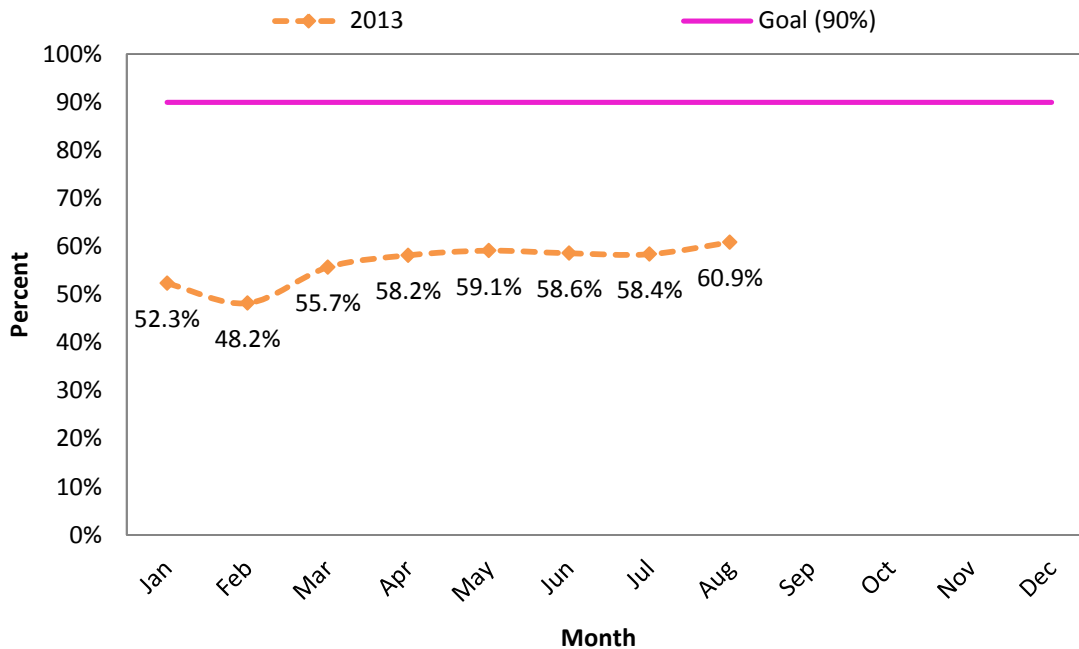
Colorado Works

Measure: **New Colorado Works applications processed in 7 days or less**

How it is measured: *Numerator:* Number of new applications processed in 7 days or less
Denominator: Total number of new applications; Average monthly denominator: 2,696

Why this matters: Quick 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: **↑90%**



Trend: Steady upward progression since February 2013.

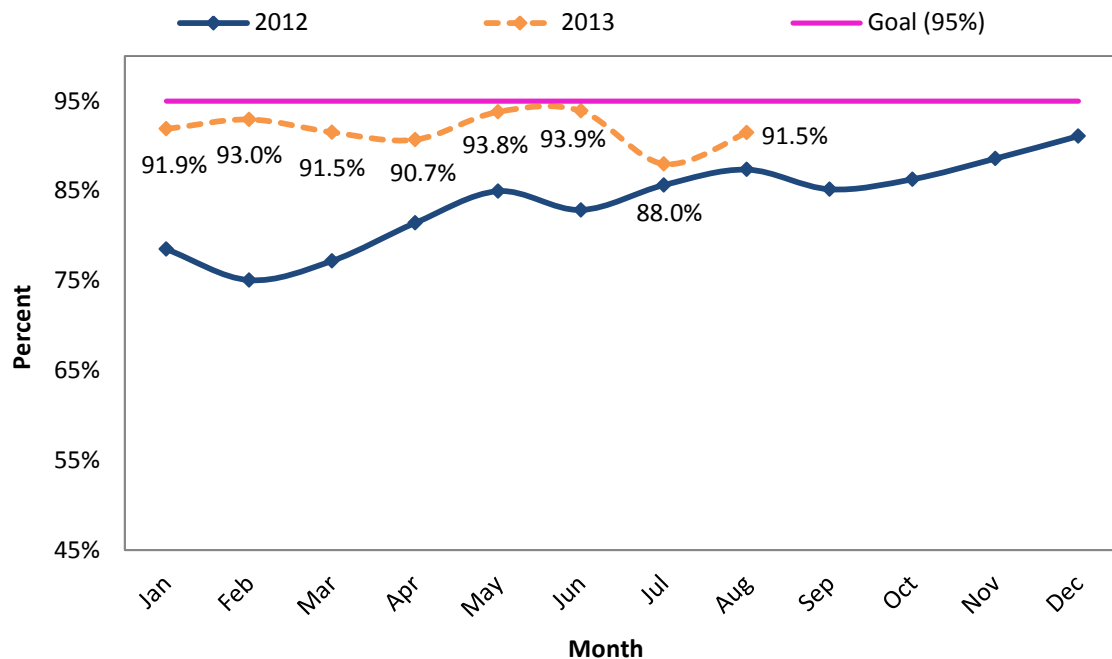
Colorado Works

Measure: **Timeliness of Colorado Works redetermination applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely
Denominator: Number of redetermination applications; Average monthly denominator: 633

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: Consistently performing just under the goal of 95%, with a notable dip in July 2013.

Food and Energy Assistance

Summary

Description

The Division of Food and Energy Assistance houses the Food Assistance, Energy Assistance and Food Distribution Programs.

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 human services offices, providing monthly food benefits to eligible Coloradans.

Director: Sue McGinn

Executive Summary

- Food Assistance is currently under a court settlement in which the program must attain and sustain 95% in timely processing, within federal guidelines, for *Timely New Applications*, *Timely Expedited Applications* and *Timely Redetermination Applications* for 12 consecutive months. Having met the goal for *Timely New Applications*, Food Assistance has revised this measure to look at the percentage of *New Applications Processed in 7 Days or Less*. This measure is associated with the Work Support Strategies grant that Colorado is currently participating in with the Ford Foundation and Urban Institute. The grant sets a goal of 90% of applications processed in 7 days or less by 2015.
- In regards to Expedited and Redetermination applications, data over the past year have demonstrated significant improvement. These measures continue to be tracked monthly as the goals have yet to be met.
- The Federal government holds State Food Assistance programs accountable for *Case and Procedural Error Rate* and *Error Rate of Payment*. The measurement of the error rate falls under the purview of the Supplemental Nutrition Assistance Program Quality Assurance Division. This Division is housed in the Office of Performance and Strategic Outcomes.

Measures

- [New Applications Processed in 7 Days or Less](#)
- [Timely Expedited Applications](#)
- [Timely Redetermination Applications](#)
- [Case and Procedural Error Rate](#)
- [Error Rate Payment](#)

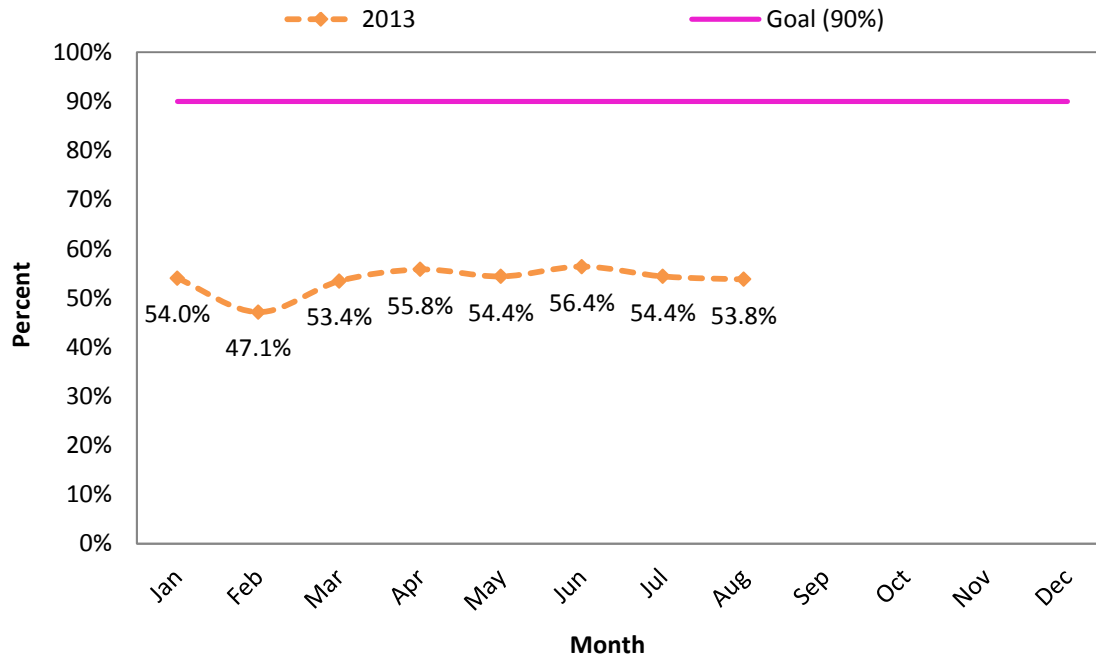
Food Assistance (FA)

Measure: **New applications processed in 7 days or less**

How it is measured: *Numerator:* Number of new applications processed in seven days or less
Denominator: Total number of new applications; Average monthly denominator: 11,757

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: **↑90%**



Trend: Hovering in the low- to mid-50s.

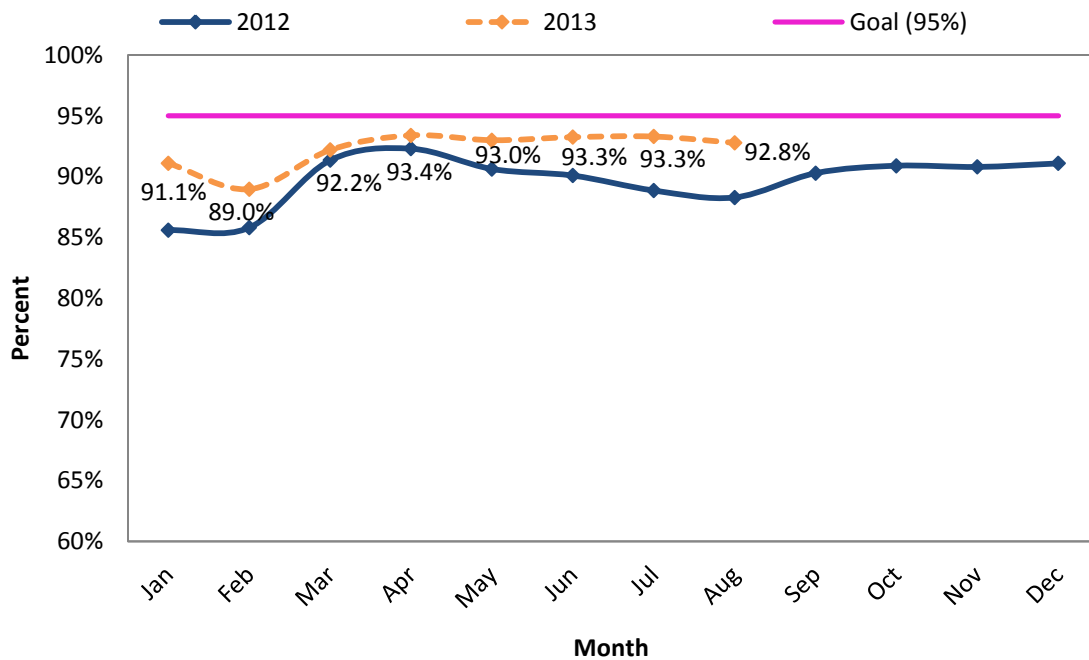
Food Assistance (FA)

Measure: **Timeliness of expedited applications**

How it is measured: *Numerator:* Number of expedited applications processed timely
Denominator: Total number of expedited applications; Average monthly denominator: 9,661

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: Consistently performing in the low-90s. Has yet to reach the 95% goal.

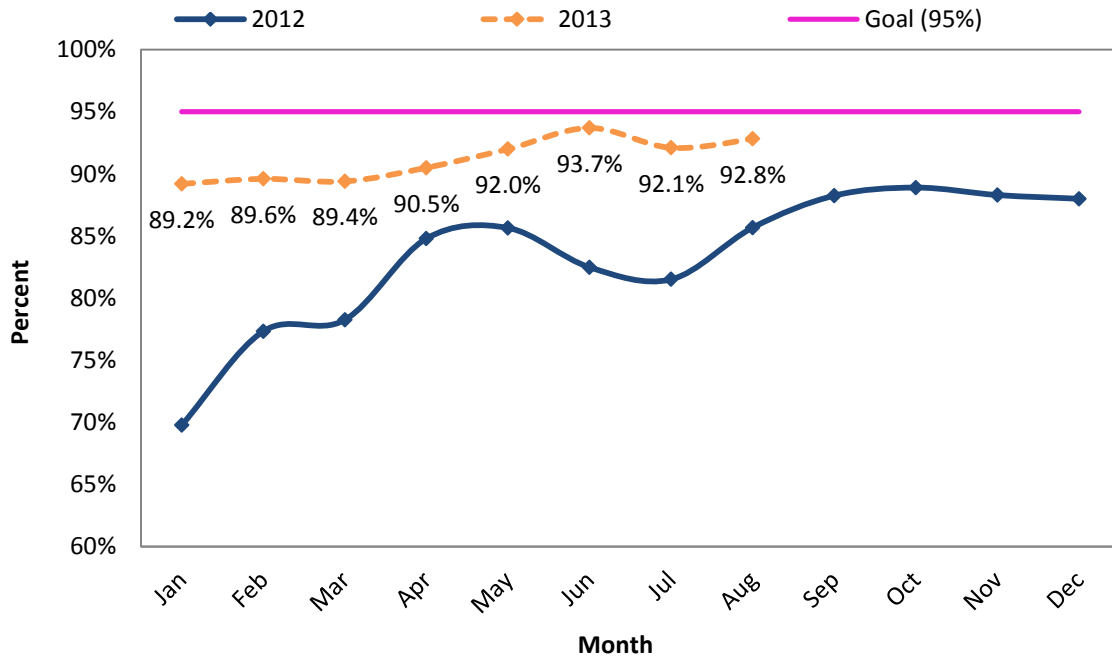
Food Assistance (FA)

Measure: **Timeliness of redetermination applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely
Denominator: Total number of redetermination applications; Average monthly denominator: 21,538

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: Steady progress towards goal of 95% over last 12 months. Slight dip in July 2013.

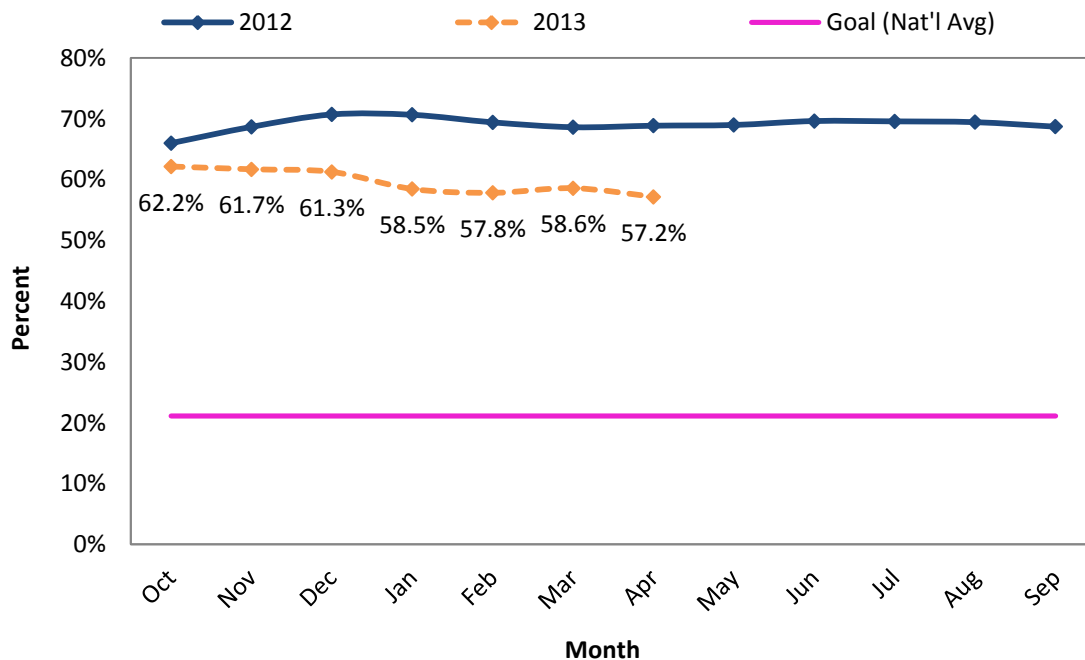
Food Assistance (FA)

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

How it is measured: *Numerator:* Cumulative number of incorrect negative actions sampled
Denominator: Cumulative total number of negative actions sampled; Cumulative denominator: 460

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

Goal: **↓ Below national average (Federal Goal)**



Trend: Performance has been well above the national average since October 2012, trending steadily downward. Slight increase in performance in March 2013 sample.

Notes: A case or procedural error can occur anytime an adverse action is taken against a participant (e.g. benefits are terminated or denied). 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 goal for this measure changes every year and is based on the national performance average.

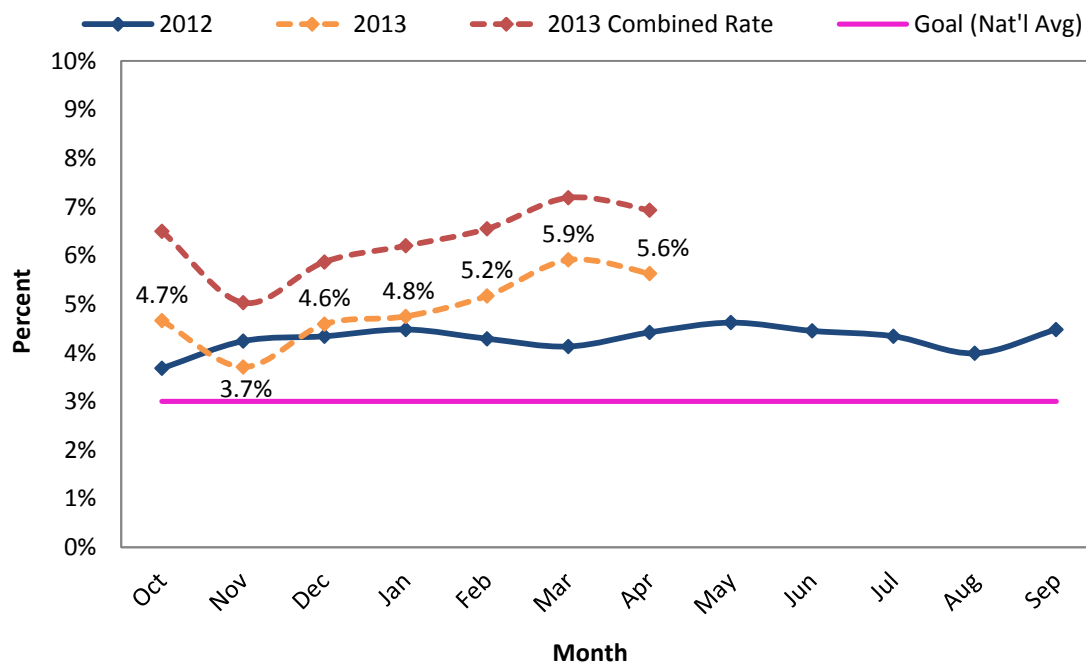
Food Assistance (FA)

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

How it is measured: *Numerator:* Cumulative total dollar amount of unauthorized benefits in the sample
Denominator: Cumulative total authorized benefits in the sample; Cumulative denominator: \$178,748

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

Goal: **↓**Below national average



Trend: Consistently above the goal of 3% and, generally, trending upward in the current FFY.

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 lines for 2012 & 2013). SNAP QA also tracks errors at any dollar threshold, called the “Combined Error Rate” (see red line).

Food Assistance Program: Low-Income Energy Assistance Program

Summary

Description

Energy Assistance (known as the Low-Income Energy Assistance Program or LEAP) exists to provide financial assistance with heating bills to eligible low-income households. LEAP is a means-tested financial assistance program, administered at the local level through county human services 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 months.

Director: Sue McGinn

Program Manager: Aggie Berens

Executive Summary

- LEAP monitors the average number of days it takes to process applications, measuring the *Timeliness of Regular Applications* and the *Timeliness of Emergency Applications* against respective processing benchmarks on a distinct monthly basis.
- Beginning this season, LEAP is reporting performance data for the Ten Large counties and the Balance of State counties in the C-Stat meeting.
- LEAP is a seasonal program. No applications are accepted before October or after April. Because of this, there is no new data for *Timeliness of Emergency Applications* for the most recent quarter. To see the seasonal performance on that measure, please view the April-June 2013 Summary Report.

Measures

- [Timely Regular Applications](#)

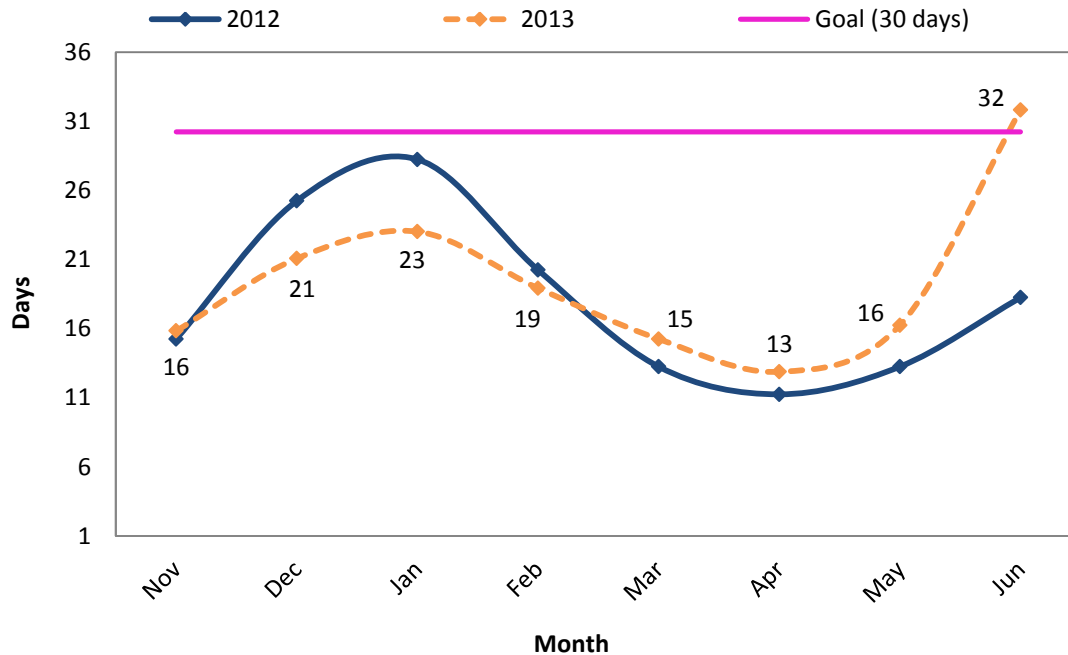
Food Assistance Program: Low-Income Energy Assistance Program (LEAP)

Measure: **Timeliness of regular applications**

How it is measured: *Numerator:* Number of days to process regular applications
Denominator: Total number of regular applications; Average quarterly denominator: 252

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: Similar pattern to 2012, with demonstrated improvement over the prior year in the first half of the season, and a slightly poorer average in the second half. Still well below the goal of 30 days, with the exception of a spike in June 2013.

Note: Average days to process typically decrease during warmer months, as fewer applications are submitted. In the months of May and June, any regular application that is submitted will be denied, as the season is closed. The increase in average processing time during these months is owed, in part, to a diminished sense of urgency to process denials, as well as short-staffing, as LEAP staff are typically temporary, and most are gone by the warmer months of the season.

Office of Long Term Care

Description

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

Director: Viki Manley

Aging and Adult Services

Summary

Description

The Division of Aging and Adult Services (AAS) programs provide assistance in two general areas. First, programs exist to provide support to seniors 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. Second, 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

- In July 2013, the financial assistance program area of AAS was moved to the Division of Colorado Works in the Office of Economic Security (OES). Therefore, the AAS measures related to this program area have been moved to the OES section of this report.
- One performance measure, within the program area of protection and advocacy, continues to be examined on a monthly basis. AAS collects data on *Timely Adult Protection Inquiries*. This program is delivered, locally, at the county level.
 - AAS has determined that the main issue related to untimely APS inquiries is untimely data entry. AAS continues to distribute a biweekly report to counties that alerts them to any inquiries that have the potential for being considered late, in the hopes of prompting counties to enter data prior to the time at which AAS runs its monthly performance reports. In addition, AAS examines all untimely responses, in detail, to determine the validity of the reasons for a late response and any trends associated with the untimely responses.

Measures

- [Timely Adult Protection Inquiries](#)

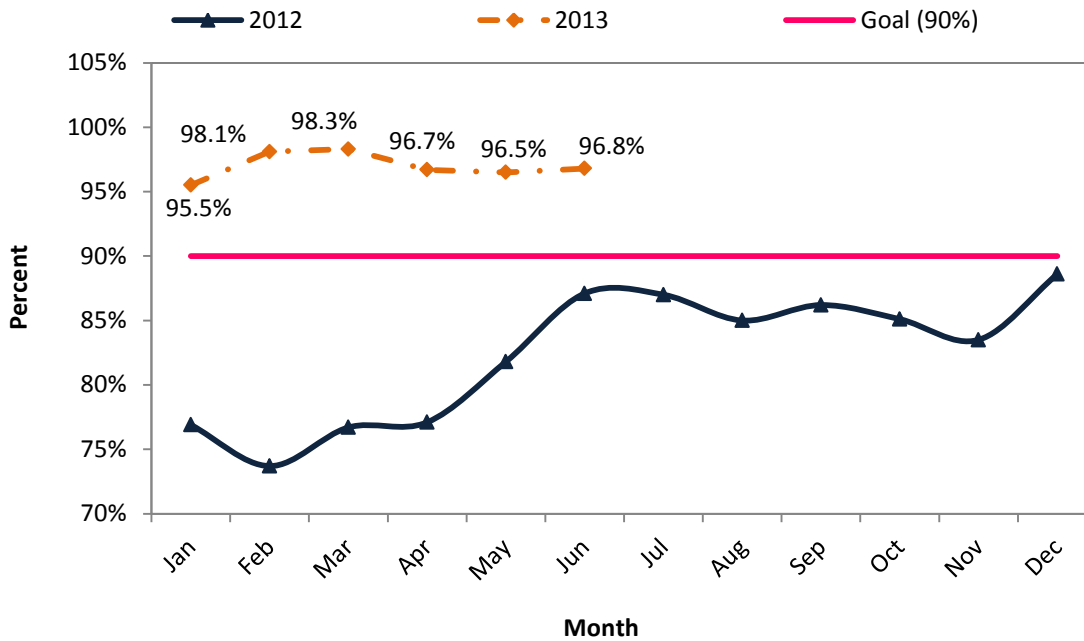
Aging and Adult Services (AAS)

Measure: **Timely adult protection inquiries**

How it is measured: *Numerator:* Number of timely responses
Denominator: Number of responses; Average monthly denominator: 571

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

Goal: **↑90%**



Trend: Performance on this measure continues to be well above the goal.

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

Developmental Disabilities

Summary

Description

The Division for Developmental Disabilities (DDD) administers services for both children with developmental disabilities (birth through age 17) and adults with developmental disabilities (age 18 and older). There are two programs to 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 and 2) Family Support Services, which assist with costs beyond those typically experienced by other families. There are also two programs to 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. 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.

Director: Barb Ramsey

Executive Summary

- DDD has identified two performance measures in the area of adult programming to be examined on a monthly basis related to supported employment (SE): *Participants Receiving Supported Employment in 1) Group and Individualized Settings* and 2) *Individualized Settings*, solely.
 - For both measures, data are examined by CCB to determine which CCBs are in need of individualized, technical assistance and/or training in this area, and which CCBs are peak performers.
 - DDD efforts to improve performance on the above measures include:
 - Discussion of C-Stat measures at the monthly CCB Executive Directors meetings, the quarterly CCB Case Management Directors meetings and the Employment Work Group meetings.
 - Distribution of a monthly, communication brief which includes all DDD C-Stat performance measures with a focus on the individualized SE measure.
 - Webinars hosted by the State Employment Leadership Network (SELN), in collaboration with DDD, the Colorado Developmental Disabilities Council and the Division of Vocational Rehabilitation (DVR), with a focus on the above measures.
 - Regional Employment Roundtables hosted by DDD and DVR focused on individualized employment.
 - Meetings with individual, Program Approved Service Agencies (PASAs) to provide technical assistance in the area of SE.

Measures

- [Participants Receiving Supported Employment-Group and Individualized Settings](#)
- [Participants Receiving Supported Employment-Individualized Settings](#)



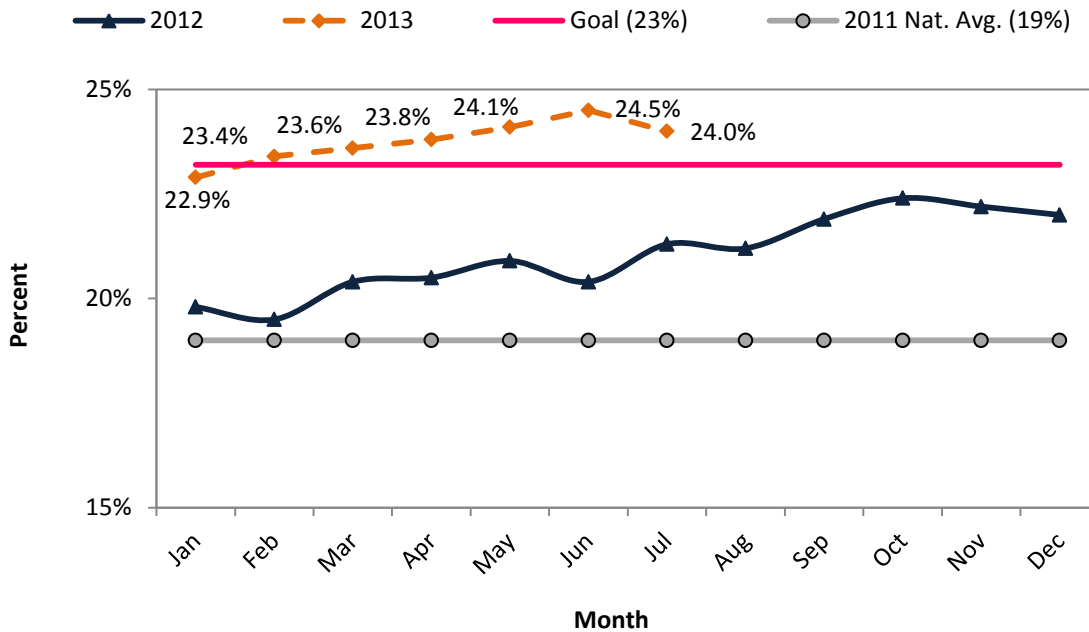
Developmental Disabilities Division (DDD)

Measure: Participants receiving supported employment in group and individualized settings

How it is measured: *Numerator:* Number of clients for whom a supported employment claim (group & individual) 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; Average monthly denominator: 6,311

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

Goal: ↑23%



Trend: Performance continues to remain above the goal.

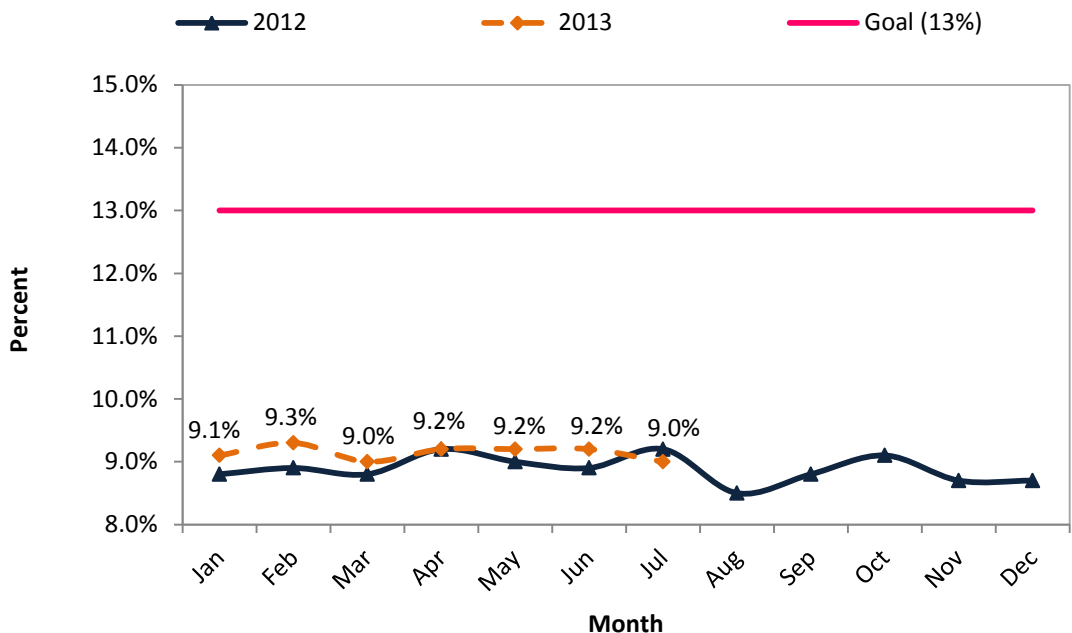
Developmental Disabilities Division (DDD)

Measure: **Participants receiving supported employment in individualized settings**

How it is measured: *Numerator:* Number of clients for whom a supported employment claim (individual) 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; Average monthly denominator: 6,311

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

Goal: **↑13%**



Trend: In the most recent quarter, performance has been stable between 9.0% and 9.2%.

Disability Determination Services

Summary

Description

The Division of Disability Determination Services (DDS) makes disability decisions for Social Security. 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

- DDS has identified three performance measures to be examined on a monthly basis.
- DDS collects data on *Mean Number of Days to Process Initial Eligibility Decisions*, *Examiner Processing Time* and *Percentage of Accurate Initial Eligibility Decisions*.
 - DDS has been involved in the implementation of several process improvement projects, coordinated through their Disability Adjudication with Speed and Humanity (DASH) initiative, in an effort to reduce *Examiner Processing Time* and *Mean Number of Days to Process Initial Eligibility Decisions*. In addition to the above, during the quarter represented in this report, DDS has experienced a decline in incoming case receipts and began to receive assistance from in-state Federal examiners (SSA Regional Office), as well.
 - With regard to *Percentage of Accurate Initial Eligibility Decisions*, DDS currently utilizes the following internal, quality assurance (QA) processes: 1) in-line reviews, which are randomly conducted by disability examiner supervisors and case consultants and 2) end-of-line reviews, a semi-random sampling process with a relatively fixed number of monthly reviews per QA analyst. Additionally, DDS is developing a statistically-based sampling strategy, for implementation of testing in late September 2013. Key elements will include: 1) two tiers of sampling – sampling against Federal return profiles, with the profiles constructed monthly by QA analysts and random sampling across all case types, 2) statistically-based sampling at both in-line and end-of-line reviews and 3) more structured collection, analysis and dispersal of inspection results.

Measures

- [Mean Number of Days to Process Initial Eligibility Decisions](#)
- [Examiner Processing Time](#)
- [Percentage of Accurate Initial Eligibility Decisions](#)



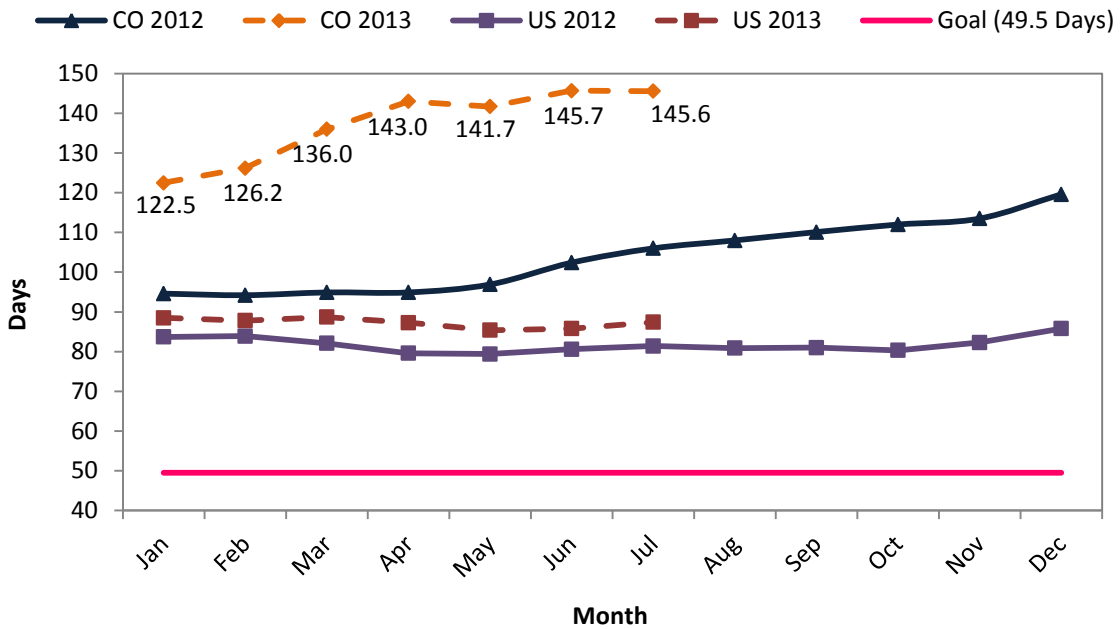
Disability Determination Services (DDS)

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

How it is measured: *Numerator:* Number of days to process initial eligibility decisions
Denominator: Number of initial applications processed; Average monthly denominator: 3,057

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: The mean number of days to process initial eligibility decisions grew steadily from May 2012 to April 2013. In the most recent quarter, however, performance has appeared to plateau around 145 days.

Notes: This measure utilizes data from the 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.

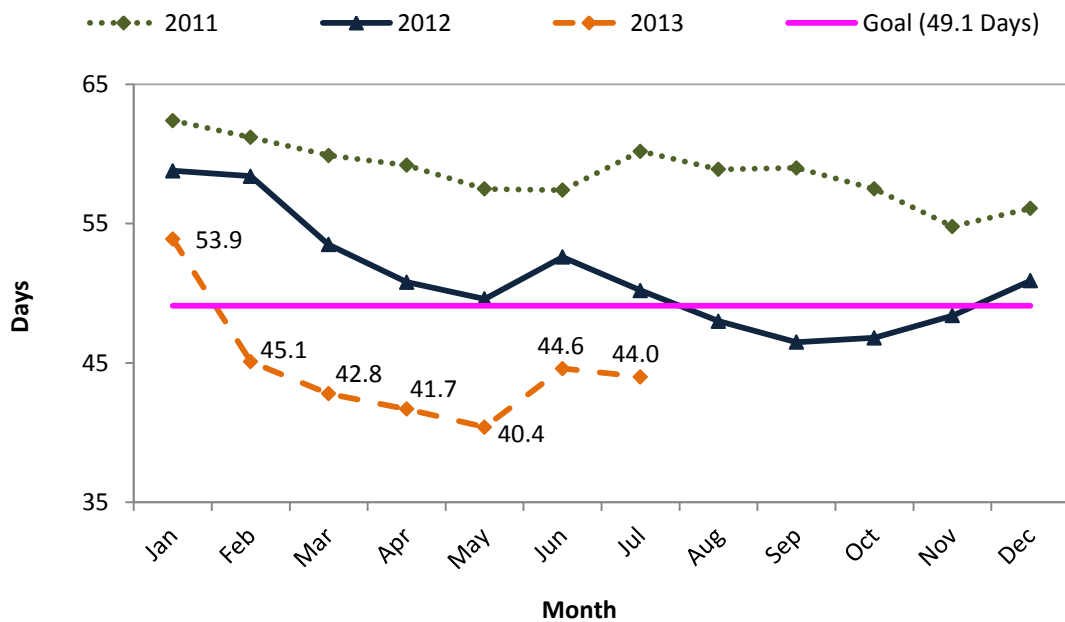
Disability Determination Services (DDS)

Measure: **Examiner processing time**

How it is measured: *Numerator:* Number of days (from assign date to clearance date) to close disability claims
Denominator: Number of disability claims closed; Average monthly denominator: 3,145

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

Goal: **↓49.1 days**



Trend: Performance continues to remain below the goal.

Notes: This measure utilizes data from both the SSDI program and the SSI program .

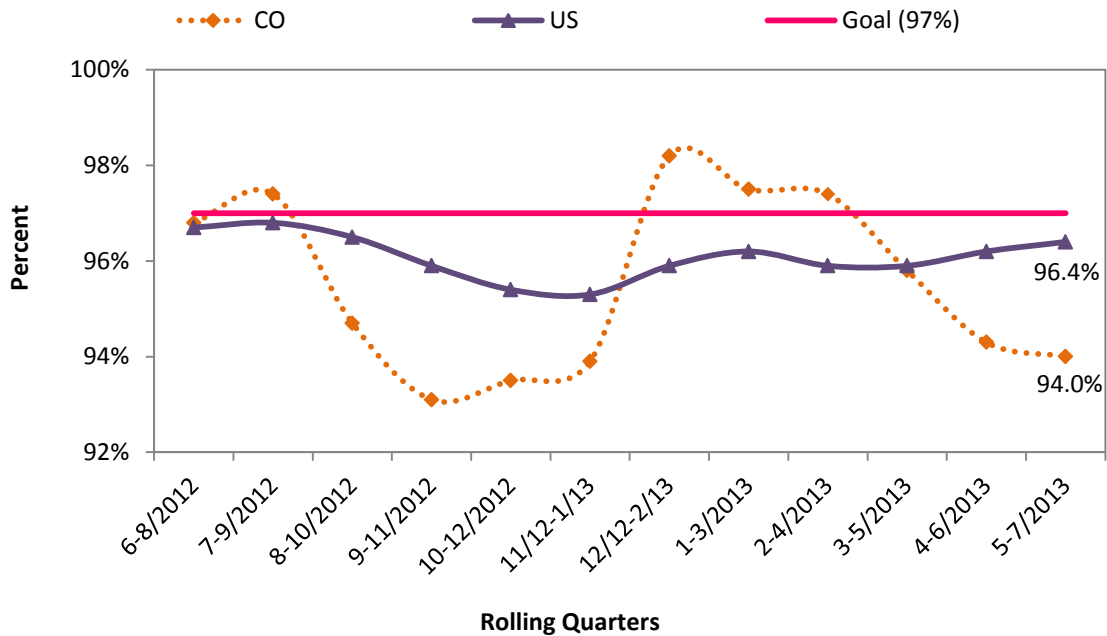
Disability Determination Services (DDS)

Measure: **Percentage 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; Average quarterly denominator: 143

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: Accuracy of decisions has seen a decline in the most recent quarter, with performance below the goal and national rate.

Notes: This measure includes data from both the SSDI and SSI programs.

Performance data are displayed utilizing a rolling, three month average given that only a small sample, approximately 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 Center Operations

Summary

Description

The Division of 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

- DRCO has identified seven 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 is also displayed by Regional Center.
- For both the Short-Term Treatment and Stabilization model and the Intensive Treatment model, DRCO collects data on *Length of Time to Become Ready for Transition/Discharge* and *Length of Time to Transition/Discharge*.
- For the Long-Term Habilitation service model, DRCO collects data on *Length of Time to Transition/Discharge*.
- The performance measure of *Regional Center Transitions by Process Step* is collected cumulatively for all treatment/service models and all Regional Centers.
- The performance measure of *Decreased Use of Physical Interventions* is collected cumulatively for all treatment/service models and is displayed by Regional Center.
 - During the quarter represented in this report, a Physical Intervention (PI) Technical Assistance Team traveled to GJRC to provide support toward improving their performance on this measure. A meeting was held with the Director of GJRC to review the team's findings and recommendations, which included a trend analysis of physical interventions over a 7-month period, and to discuss the best ways in which to move forward toward reducing the number of physical interventions at GJRC. The Director of GJRC has been tasked with providing a response to the specific trends & concerns identified in a formal plan of correction.

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](#), [Long-Term](#)
- [Regional Center Transitions by Process Step](#)



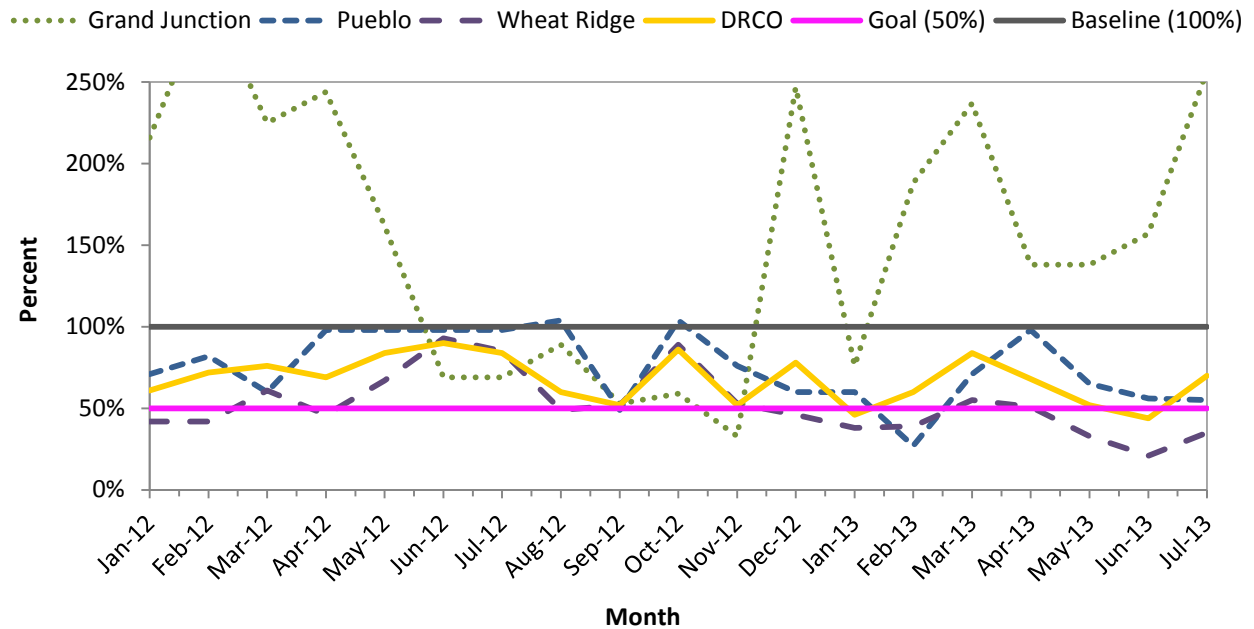
Division of Regional Center Operations (DRCO)

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**



Trend: In the most recent quarter, overall DRCO performance has varied between 44% and 70%.

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

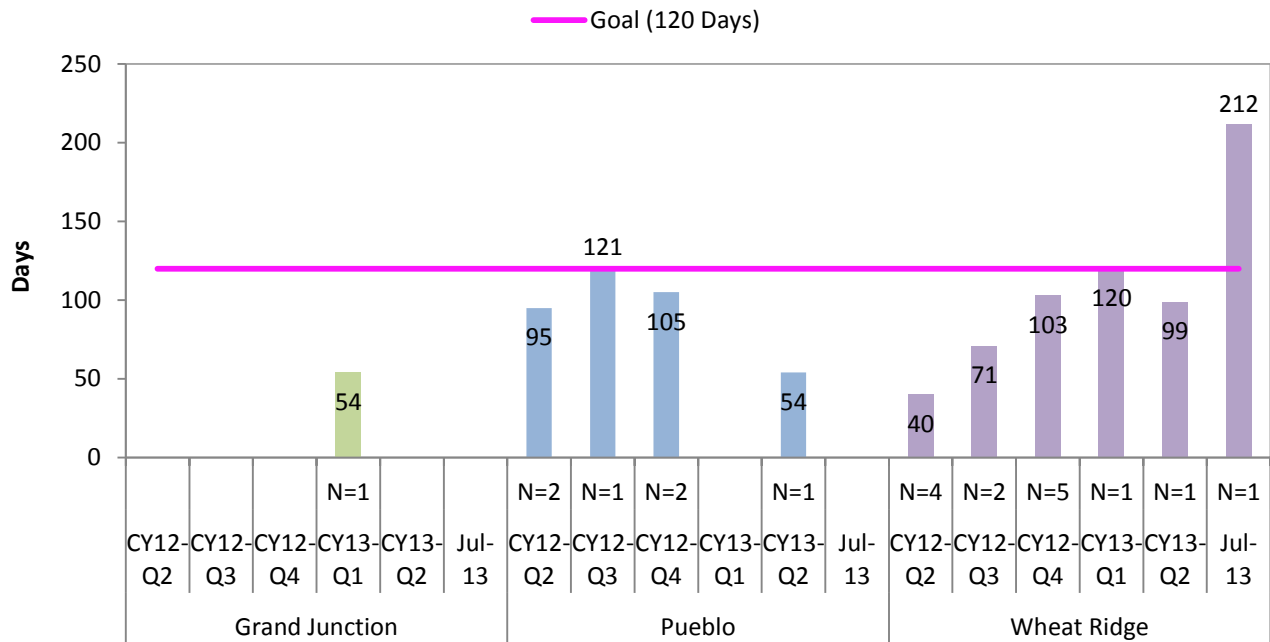
Division of Regional Center Operations (DRCO)

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

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 keeps individuals from lingering in care and more quickly enhances their well-being.

Goal: **↓120 Days**



Trend: Three individuals became ready for transition/discharge in the most recent quarter. Performance on this measure is often below the goal.

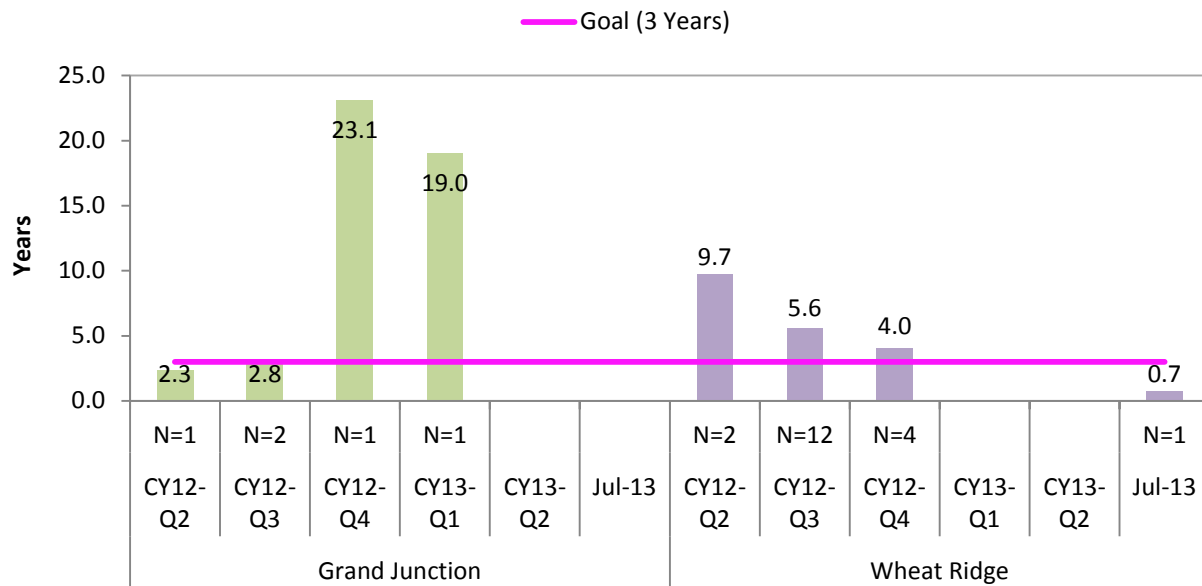
Division of Regional Center Operations (DRCO)

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

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 keeps individuals from lingering in care and more quickly enhances their well-being.

Goal: **↓3 Years**



Trend: One individual became ready for transition/discharge in the most recent quarter. While performance on this measure is often above the goal, it is, however, trending in a positive direction.

Notes: PRC does not offer the Intensive Treatment model.

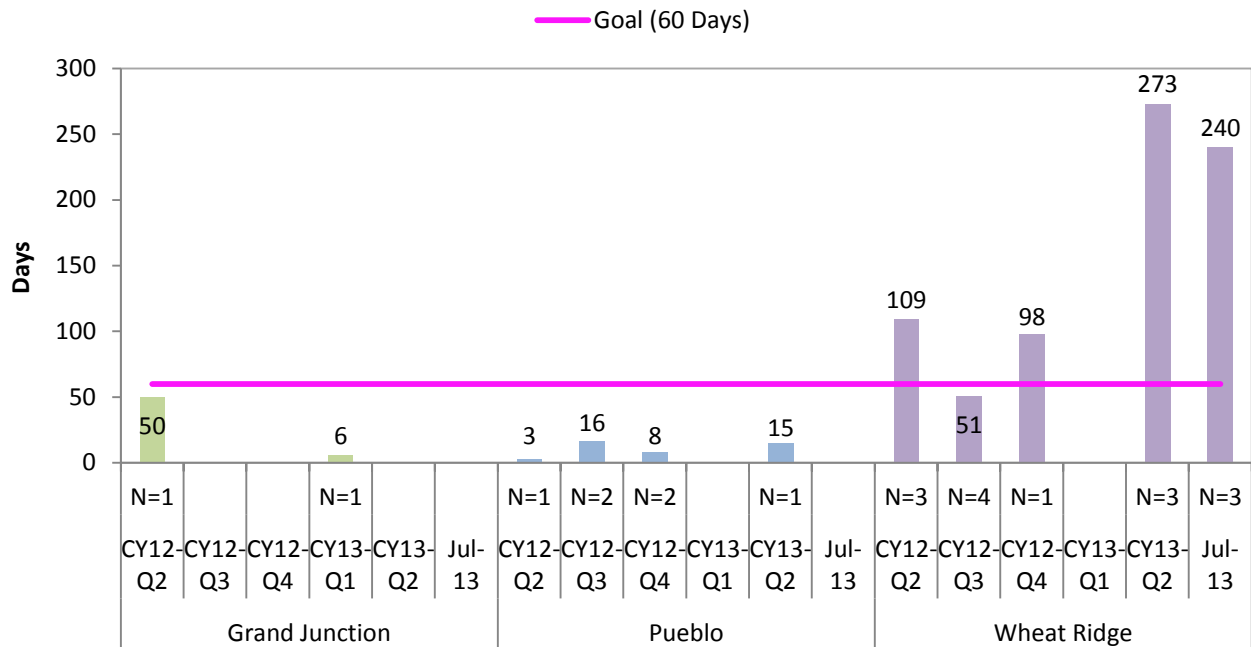
Division of Regional Center Operations (DRCO)

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

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: In the most recent quarter, seven individuals transitioned from the DRCO with length of time to transition/discharge well above the goal.

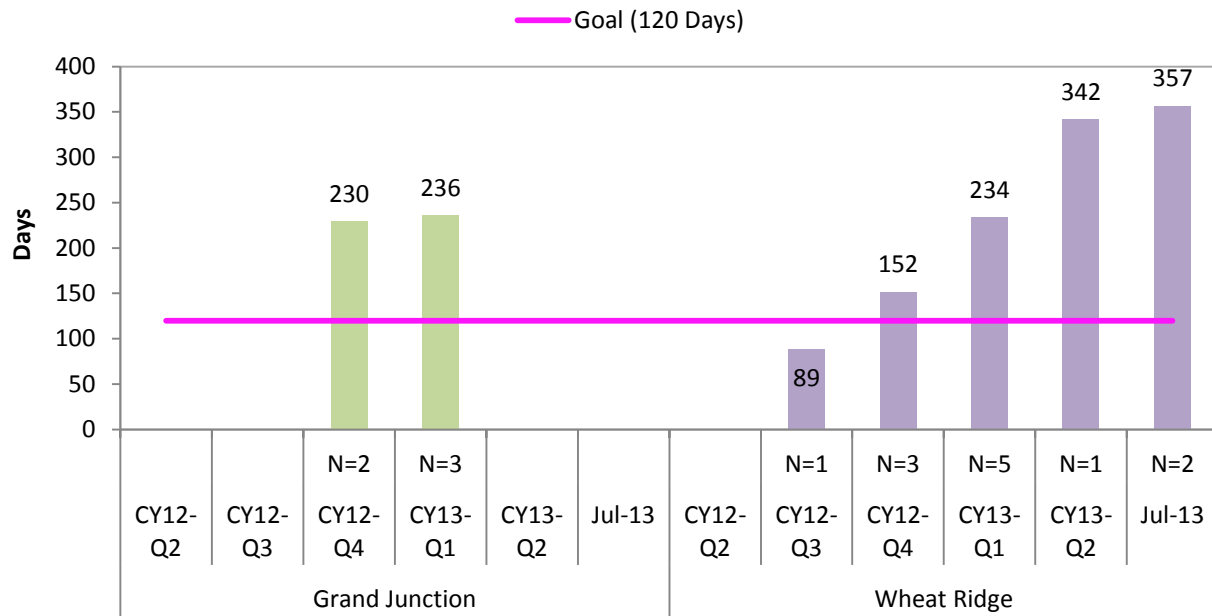
Division of Regional Center Operations (DRCO)

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

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**



Trend: Three individuals transitioned from the DRCO in the most recent quarter. Performance on this measure is often above the goal and is trending in a negative direction.

Notes: PRC does not offer the Intensive Treatment model.

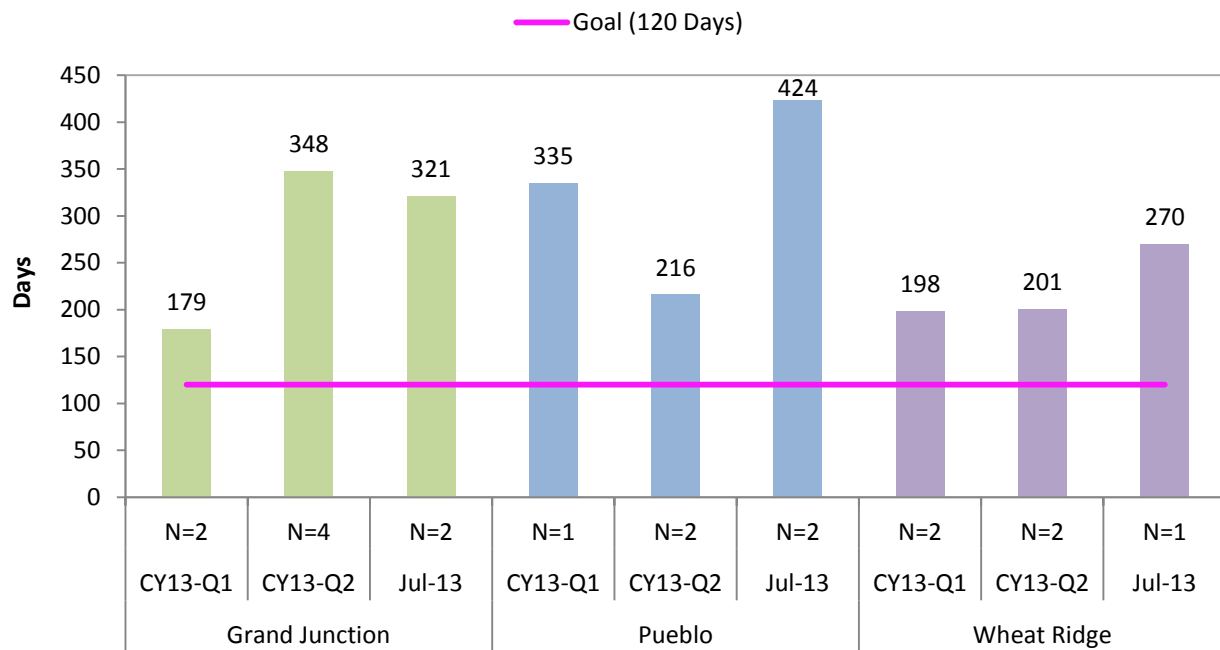
Division of Regional Center Operations (DRCO)

Measure: **Length of time to transition/discharge-Long-term model**

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**



Trend: In the most recent quarter, eleven individuals transitioned, from the DRCO, with lengths of time to transition/discharge well above the goal.

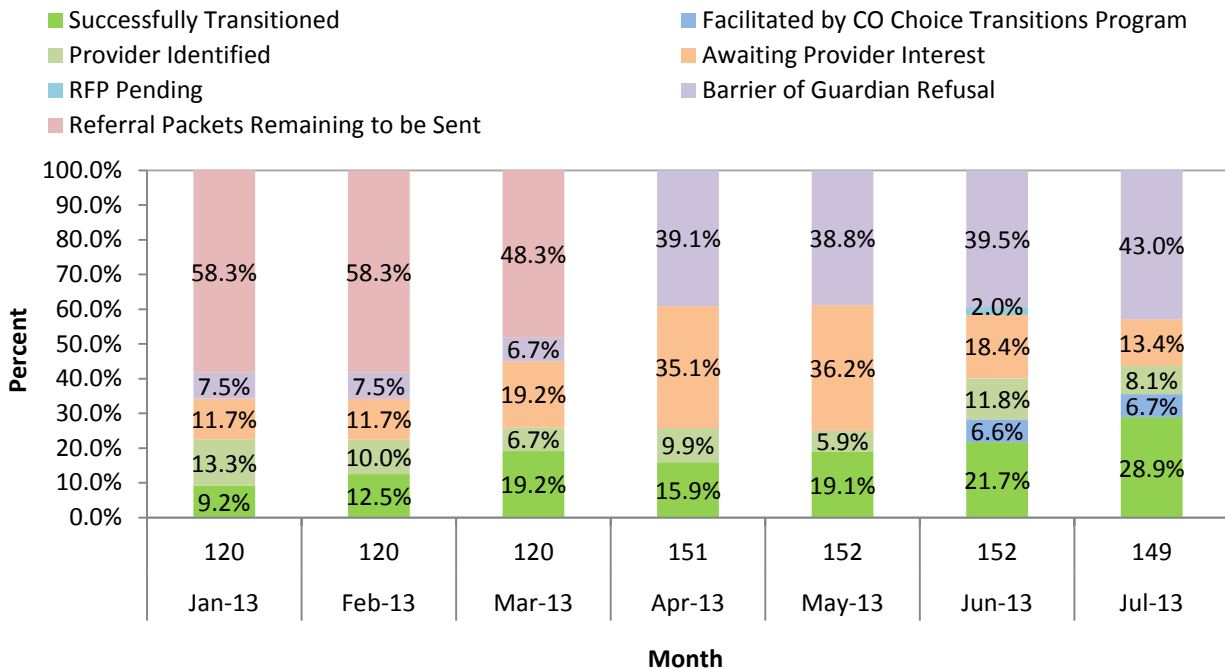
Division of Regional Center Operations (DRCO)

Measure: **Regional center transitions by process step**

How it is measured: *Numerator:* Number of individuals by transition process step (referral packets remaining to be sent; barrier of guardian refusal; RFP pending; awaiting provider interest; provider identified; facilitated by CO Choice Transitions Program; successfully transitioned)
Denominator: Number of individuals who are ready for transition/discharge from the Regional Centers; See graph for monthly denominators

Why this matters: Successfully transitioning individuals to a private provider ensures these individuals are on a path toward enhanced independence.

Goal: **↑100% Successfully Transitioned**



Trend: The percent of individuals who have been successfully transitioned from the DRCO has increased steadily in the most recent quarter.

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.

Acting Director: Shannon Onken

Executive Summary

- Currently, SVNH has identified three performance measures to be examined on a monthly basis. In August 2013, *Percent of Residents without Acquired Pressure Ulcers by Home* was moved to the OLTC Dashboard.
- SVNH collects data on *Percent of Residents without Anti-Psychotic Medication by Home*, *Percent of Residents without Falls by Home*, and *Percent of Residents without Unplanned Weight Loss/Gain by Home*.
 - In July 2013, the performance goal for *Percent of Residents without Anti-Psychotic Medication by Home* was increased from 85% to 95%. In addition, for the quarter represented in this report, SVNH has continued to examine their data on this measure in alternative ways. More specifically, SVNH continues to assess the Number of Residents on Anti-Psychotic Medications by Home and by Diagnosis, with a specific aim of reducing the use of anti-psychotic medications for residents with a diagnosis of dementia.

Measures

- [Percent of Residents without Anti-Psychotic Medication](#)
- [Percent of Residents without Falls](#)
- [Percent of Residents without Unplanned Weight Loss or Gain](#)



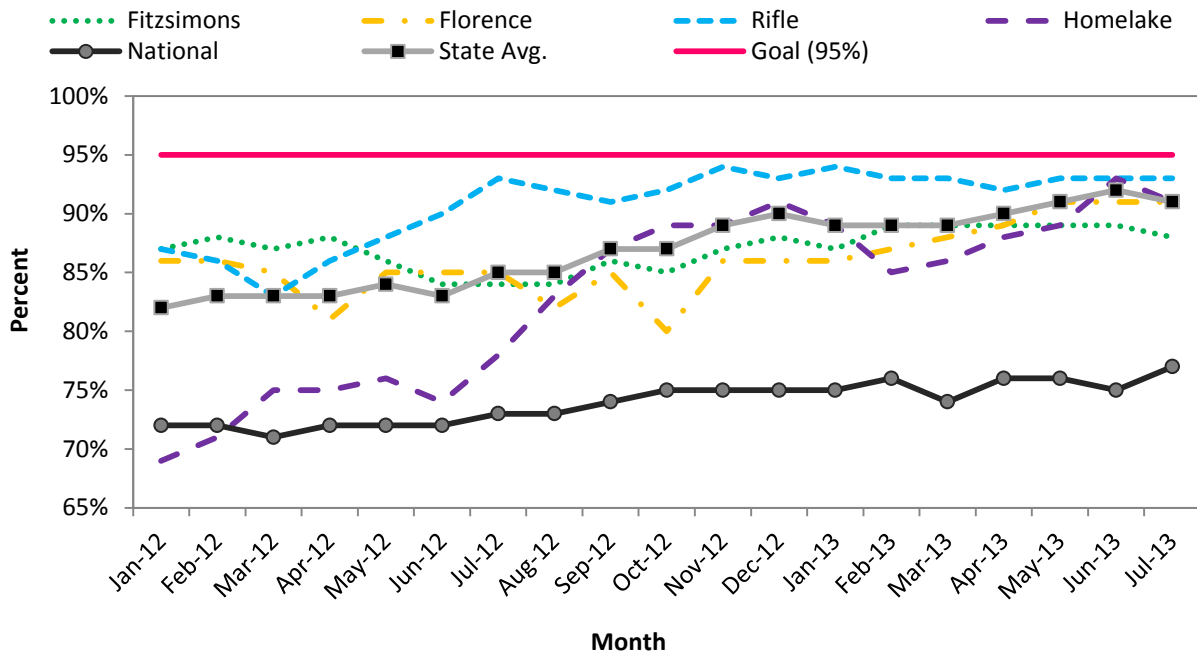
State Veterans Nursing Homes (SVNH)

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); Average monthly denominator: Fitzsimons: 171, Florence: 94, Rifle: 69, Homelake: 57

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

Goal: **↑95%**



Trend: In the most recent quarter, overall SVNH performance on this measure has been stable between 91% and 92%.

Note: Goal was changed to 95% beginning in July 2013.

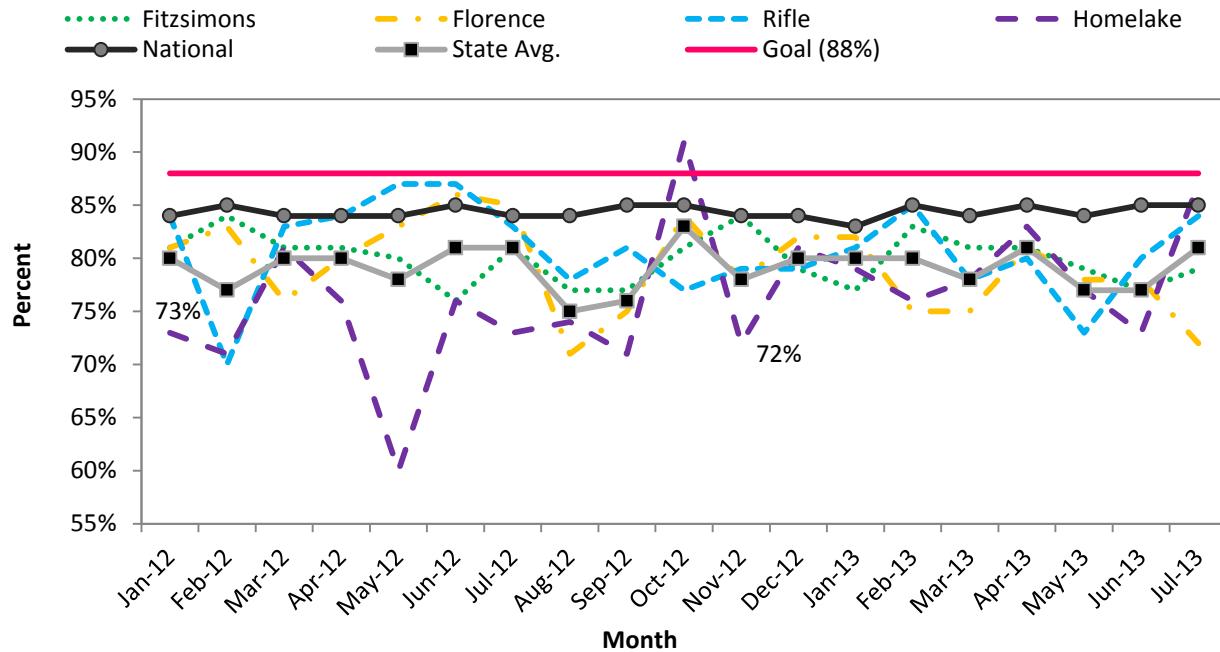
State Veterans Nursing Homes (SVNH)

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); Average monthly denominator: Fitzsimons: 171, Florence: 94, Rifle: 69, Homelake: 57

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: Overall performance on this measure fluctuated between 72% and 86% in the last nine months. Fitzsimons has demonstrated the most consistent performance across that time span.

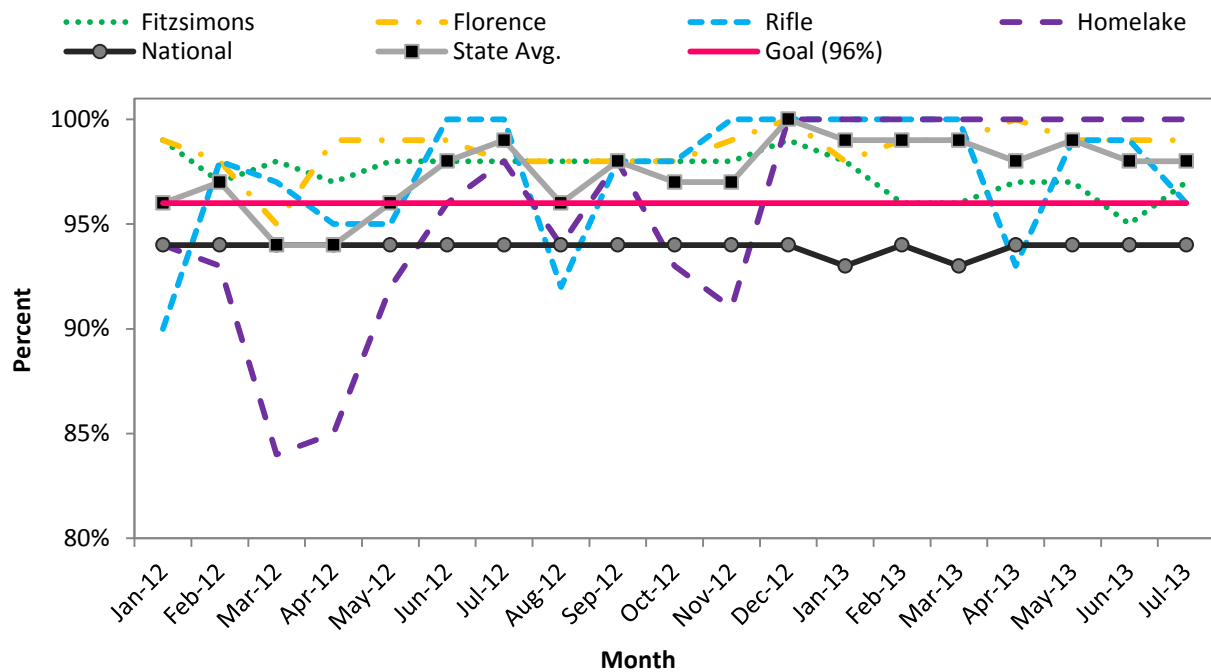
State Veterans Nursing Homes (SVNH)

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); Average monthly denominator: Fitzsimons: 171, Florence: 94 Rifle: 69, Homelake: 57

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 and quality care.

Goal: **↑96%**



Trend: Overall performance on this measure remained stable and above the goal line for the last seven months across the homes, with the exception of Rifle in April 2013 and Fitzsimmons in June 2013.

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.

Acting Director: Todd Jorgensen

Executive Summary

- Currently, DVR has identified three performance measures to be examined on a monthly basis.
- DVR collects data on *Case Closure by Type*, *Timeliness of Eligibility Determination*, and *Competitive Employment Outcomes*.
- With regard to the performance measure *Case Closure by Type*, the vocational rehabilitation program allows for four distinct points in the program from which a case can be closed under typical circumstances: 1) before eligibility has been determined, 2) before a plan has been established, 3) during the service phase, and 4) after employment has been successfully established. However, DVR continues implementation of a full waiting list, or Order of Selection (OOS), that began in May 2013. As a result, the population of customers who had been determined eligible but had yet to begin service has dropped to zero. Additionally, the creation of the waiting list introduced a new cohort to the measure, those who formally withdraw from the list before beginning program participation. These changes in the *Case Closure by Type* population continue to alter the proportionality of the measure.
- With regard to the performance measure *Timeliness of Eligibility Determination*, DVR has been engaging staff in enhanced use of the electronic case management system. This includes utilizing the existing capacity of the system to appropriately identify applications in extended status, as federal regulations allow for an application to extend undetermined beyond 60 days for unusual and unforeseen circumstances, and/or to establish appropriateness of fit via trial work before being found eligible for the program. Breaking out the data at this finer level of detail has enabled DVR to determine the percentage of applications that have gone undetermined for more than 60 days with and without an extension. Policy requires that all applications that take longer than 60 days have a formal extension in place. This new level of detail enables DVR to see how thoroughly that policy is being applied.

Measures

- [Case Closure by Type](#)
- [Timeliness of Eligibility Determination](#)
- [Competitive Employment Wages](#)



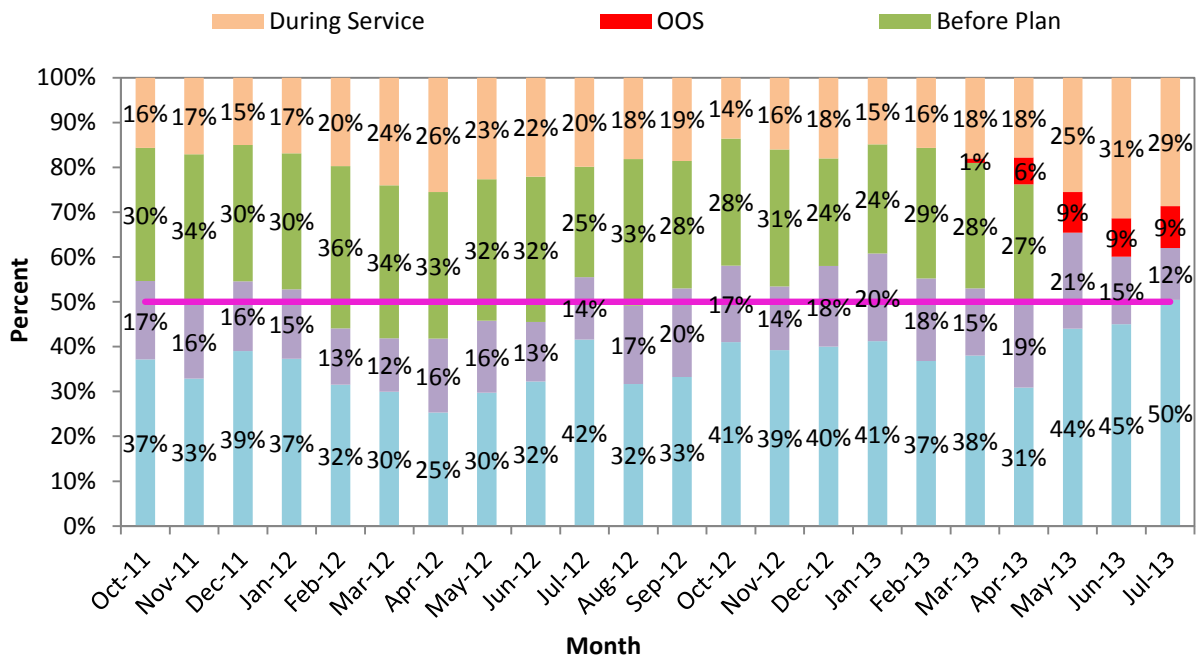
Division of Vocational Rehabilitation (DVR)

Measure: **Case closure by type**

How it is measured: *Numerator:* Number of cases by closure status type (successful employment; during service but without successful employment; before beginning employment plan; before eligibility was determined; from waitlist
Denominator: Total number of case closures during the month; Average monthly denominator: 555

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

Goal: **↑Successful closures at 50%**



Trend: In July 2013, DVR met the goal for the first time in 22 months of measurement.



Division of Vocational Rehabilitation (DVR)

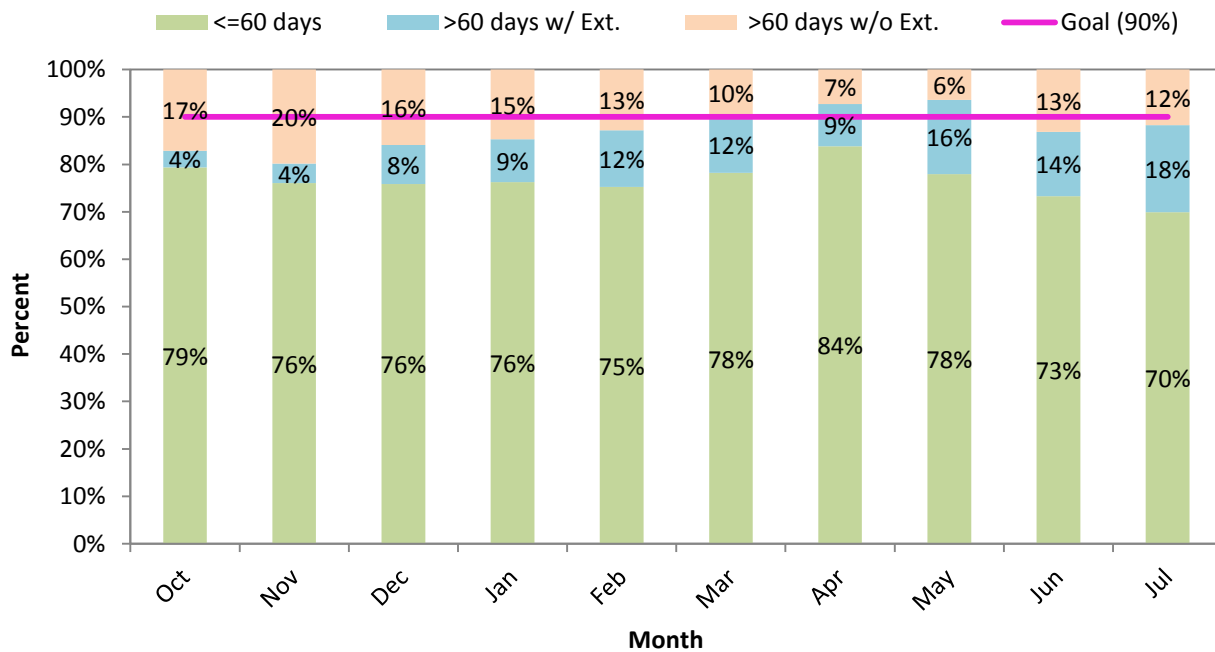
Measure: **Timeliness of eligibility determination**

How it is measured: *Numerator:* Number of individuals in application status less than or more than 60 days (60 days is federally defined processing time for applications without formal extension)

Denominator: Total number of individuals in application status as of the first of the month; Average monthly denominator: 447

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

Goal: **↑90%**



Trend: Percent of cases taking <60 days declined over the most recent quarter. In addition, the percent of cases taking >60 days, with an extension letter, has varied between 14% and 18% over the most recent quarter.

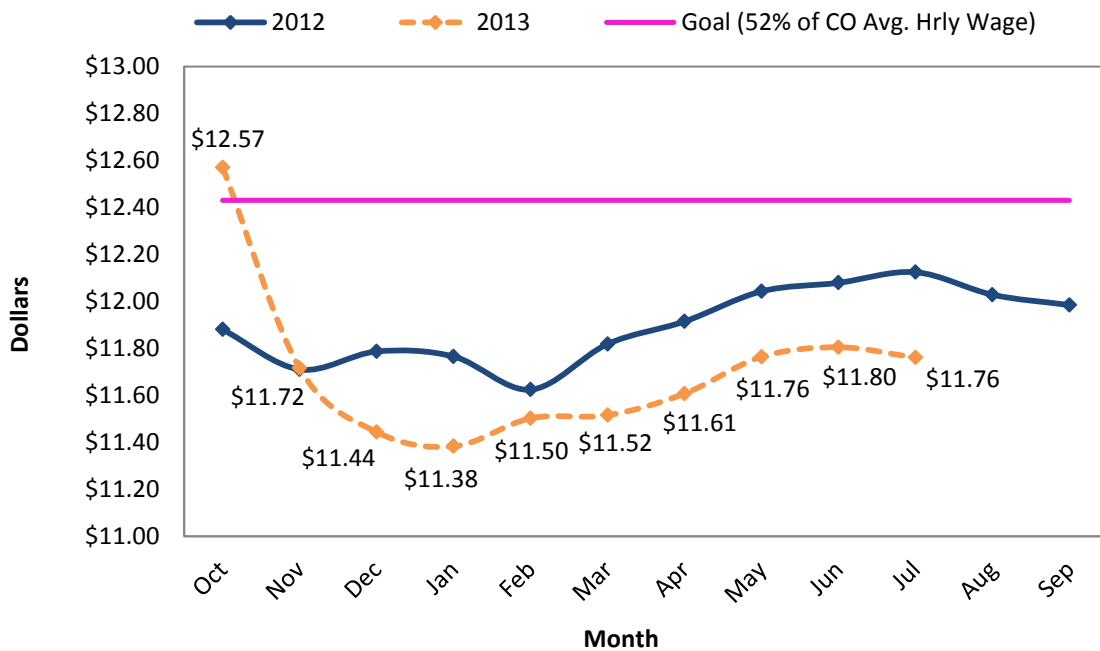
Division of Vocational Rehabilitation (DVR)

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: **↑52% of CO Average Hourly Wage (updated quarterly)**



Trend: With the exception of October 2013, trending similarly to previous FFY.