

Colorado Department of Human Services



Summary Report

October - December 2013

Prepared by:

Performance Management Division

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Colorado Department of Human Services

Mission

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

Vision

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

Values

The Colorado Department of Human Services will:

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

The C-Stat Process

What is C-Stat?

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

C-Stat Meetings

Beginning on January 25, 2012, CDHS has held weekly C-Stat meetings with one meeting for each office each month. The C-Stat meetings are held in a dedicated conference room at the Department's central office in downtown Denver. The directors of each of the 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 December 31, 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 December 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.

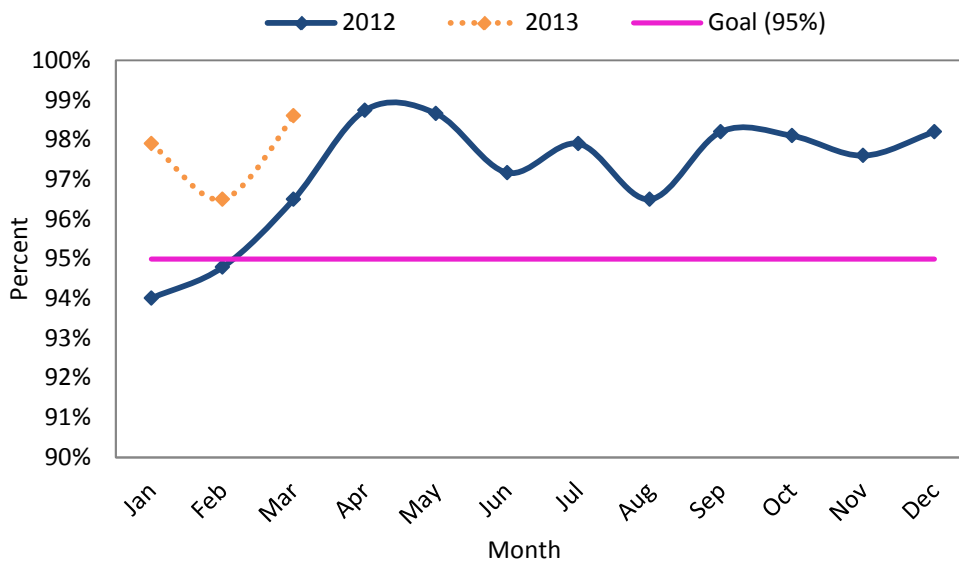
How Do I Read This Report?

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 Division (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).

Acting Director: Dr. Patrick Fox

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.

Director for Community Programs: Dr. Liza Tupa

Executive Summary

OBH began publishing monthly report cards for each of the contracted substance use providers in September 2013.

- *Timeliness of access to outpatient substance use disorder treatment:* The past four consecutive months have outperformed the rates seen during the same months in 2012;
- *Persons reducing the use of substance from admission to discharge in substance use disorder treatment:* Nearly seven consecutive months show an upward trend and the highest rates seen thus far;
- *Mental health clients engaged in services:* Low engagement rates across providers characterize this measure's most recent quarter;
- *Percent of persons with reduced mental health symptoms in mental health treatment:* Symptom severity rates continued to fluctuate throughout the quarter, which also reflect the trend seen throughout the year; and
- *Percent of persons who maintained housing while receiving mental health services:* The housing status of those served continues to fluctuate on a monthly basis.

Measures

- [Timeliness of Access to Outpatient Substance Use Disorder Treatment](#)
- [Persons Reducing the Use of Substances from Admission to Discharge](#)
- [Mental Health Clients Engaged in Services](#)
- [Percent of Persons with Reduced Mental Health Symptoms](#)
- [Percent of Persons who Maintained Housing](#)

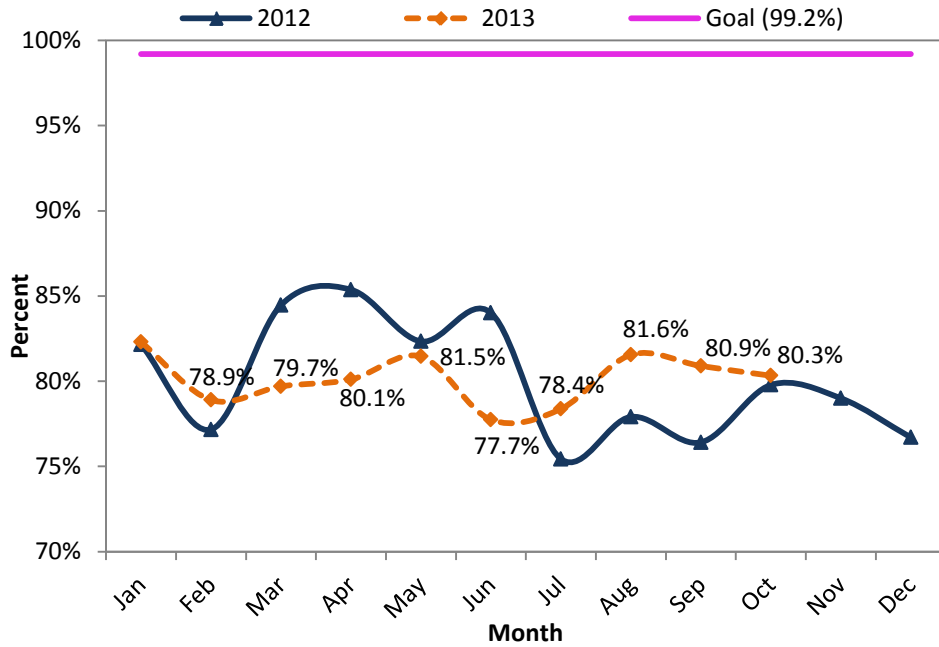
Community Behavioral Health (CBH)

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 three or fewer days from first contact
Denominator: Number of persons admitted into outpatient substance use disorder treatment; Approximate monthly denominator: 913

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

Goal: **↑99.2%**



Trend: Performance in timely substance use treatment has fluctuated throughout 2013 between 76.7% and 83%, and has not met or exceeded the highest rates seen in 2012. Rates over the past four months have been higher than those seen in the same months of 2012.

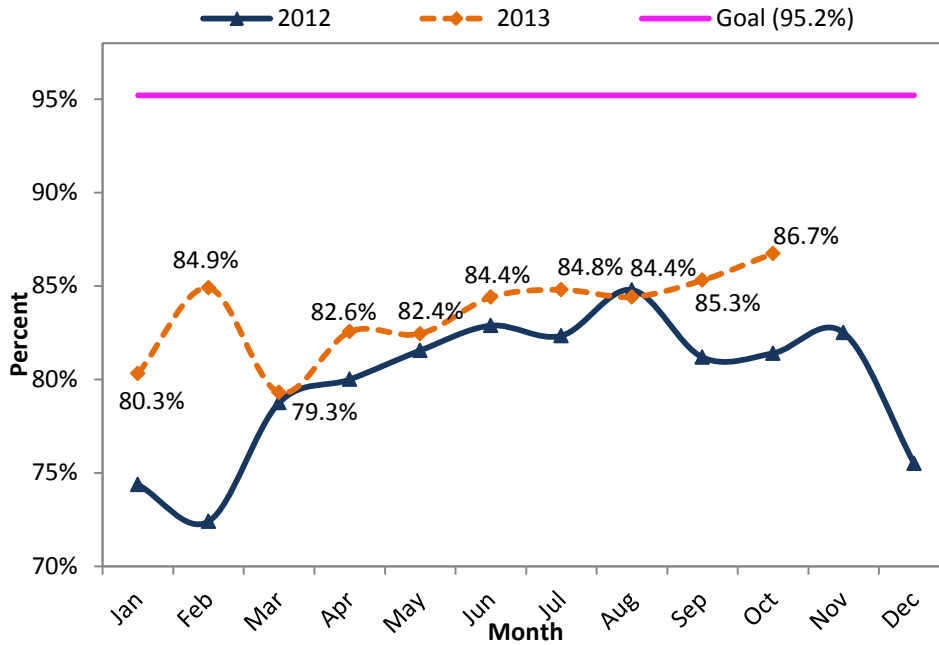
Community Behavioral Health (CBH)

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: 378

Why this matters: Reduction in 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: The reduction of substance use by individuals receiving substance use treatment has increased steadily throughout 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.

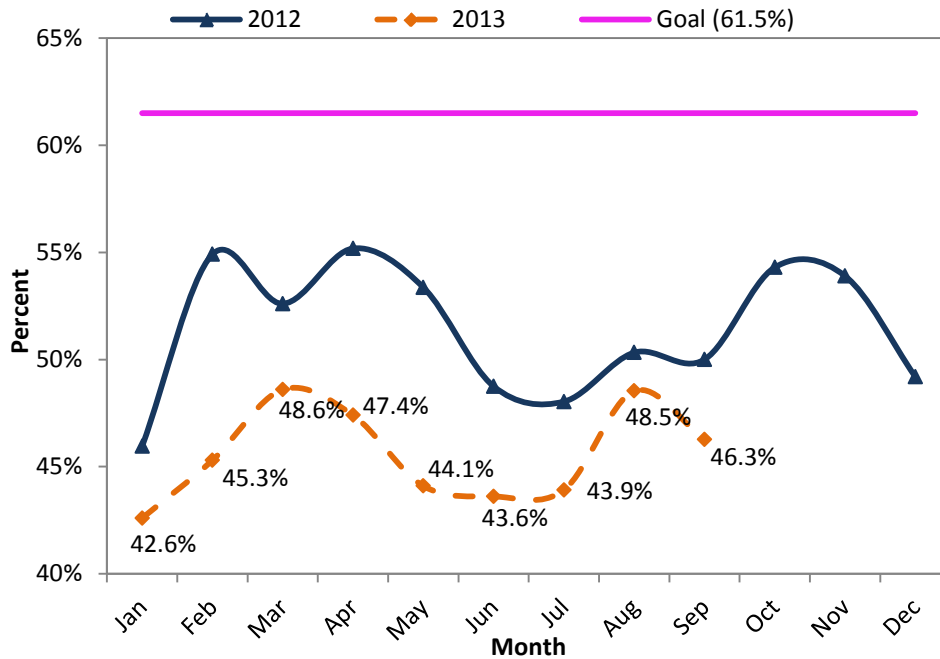
Community Behavioral Health (CBH)

Measure: **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: 937

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

Goal: **↑61.5%**



Trend: Engagement rates have been lower throughout 2013 than those seen in 2012, and continue to fluctuate between 42.6% and 48.6%.

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

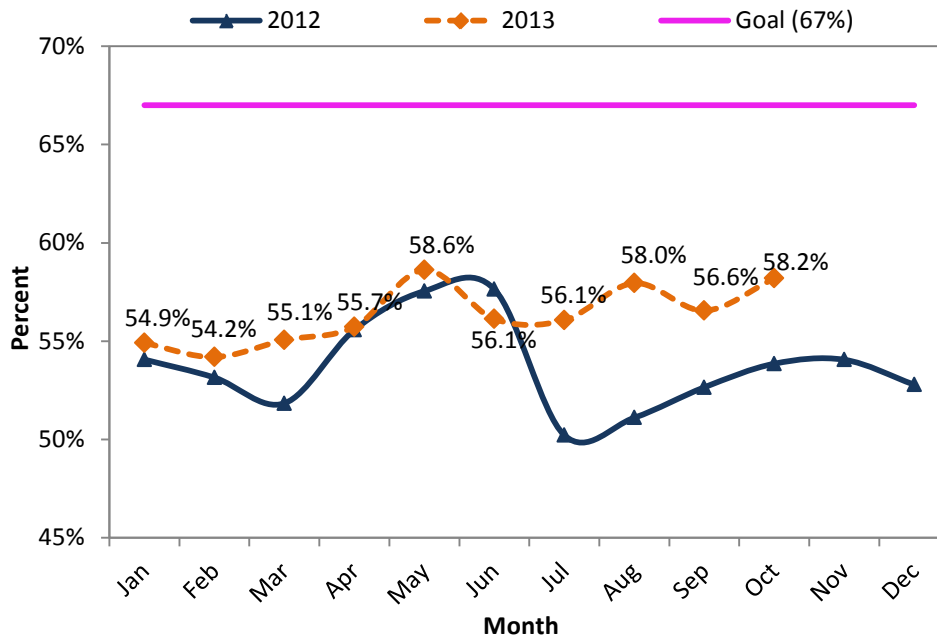
Community Behavioral Health (CBH)

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: 1501

Why this matters: Time One can be an update or admission Colorado Client Assessment Record (CCAR). 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, and 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.

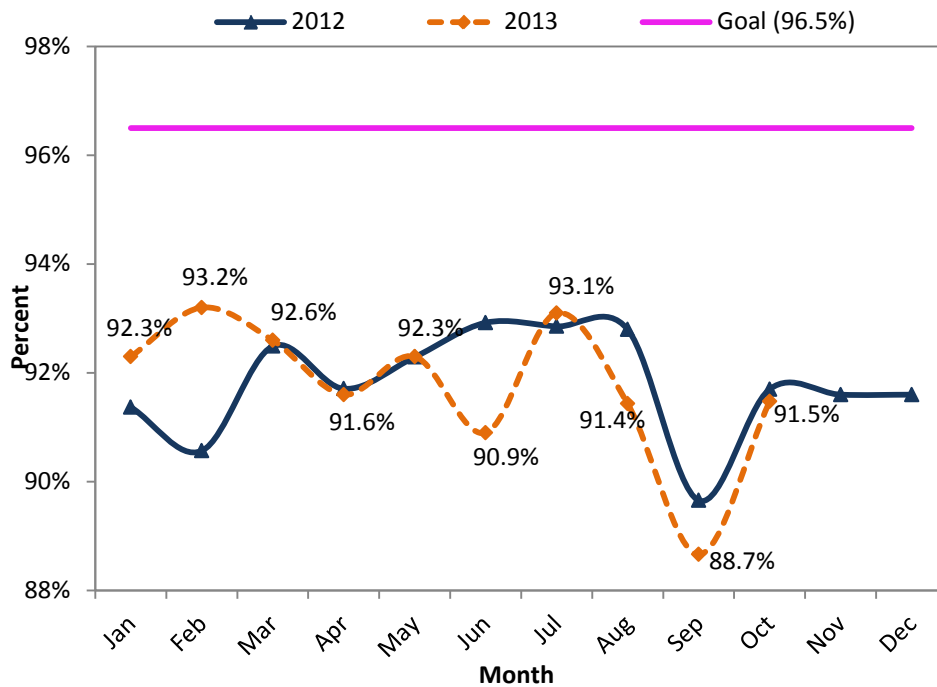
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons who maintained or improved housing
Denominator: Number of housed persons (at time one) receiving mental health services; Approximate monthly denominator: 1,836

Why this matters: Time one can be an update or admission Colorado Client Assessment Record (CCAR). People with behavioral health needs are a vulnerable population who are at higher risk for homelessness or instability of housing.

Goal: **↑96.5%**



Trend: Housing rates have fluctuated between 89.4% and 93.1% throughout 2013. After two months of downward rates, housing rates increased to 91.5% in October 2013.

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

Mental Health Institutes

Summary

Description

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

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 Clinical Services: Dr. Patrick Fox

Executive Summary:

The Mental Health Institutes at Fort Logan and Pueblo have made progress towards all of their C-Stat goals during the past quarter. While some rates display fluctuation month-to-month, the institutes are demonstrating overall progress towards established goal rates. In December 2013, both institutes agreed upon more aggressive and shared goal rates for each of measure. This past quarter also saw:

- *Rates of Seclusion:* CMHIFL saw an all-time low in rates of seclusion;
- *Percentage of patients ready to discharge but have barriers:* Both institutes saw a decrease in rates;
- *Average days on waitlist:* CMHIP continues to meet its established-goal rate of 21 days;
- *Percent of 30-day readmissions:* Both institutes show a downward trend in their respective rates; and
- *Percent of 180-day readmissions:* CMHIFL has had seven consecutive months of reduced 180-day readmissions, meeting the newly-established goal of 12.2% for the first time.

Measures:

- [Rate of Restraint Use – Fort Logan & Pueblo](#)
- [Rate of Seclusion Use – Fort Logan & Pueblo](#)
- [Average Days on Waitlist – Pueblo](#)
- [Percent of Civil Patients Ready for Discharge but Have Barriers – Fort Logan & Pueblo](#)
- [Percent of 30-day Readmissions – Fort Logan & Pueblo](#)
- [Percent of 180-day Readmissions – Fort Logan & Pueblo](#)

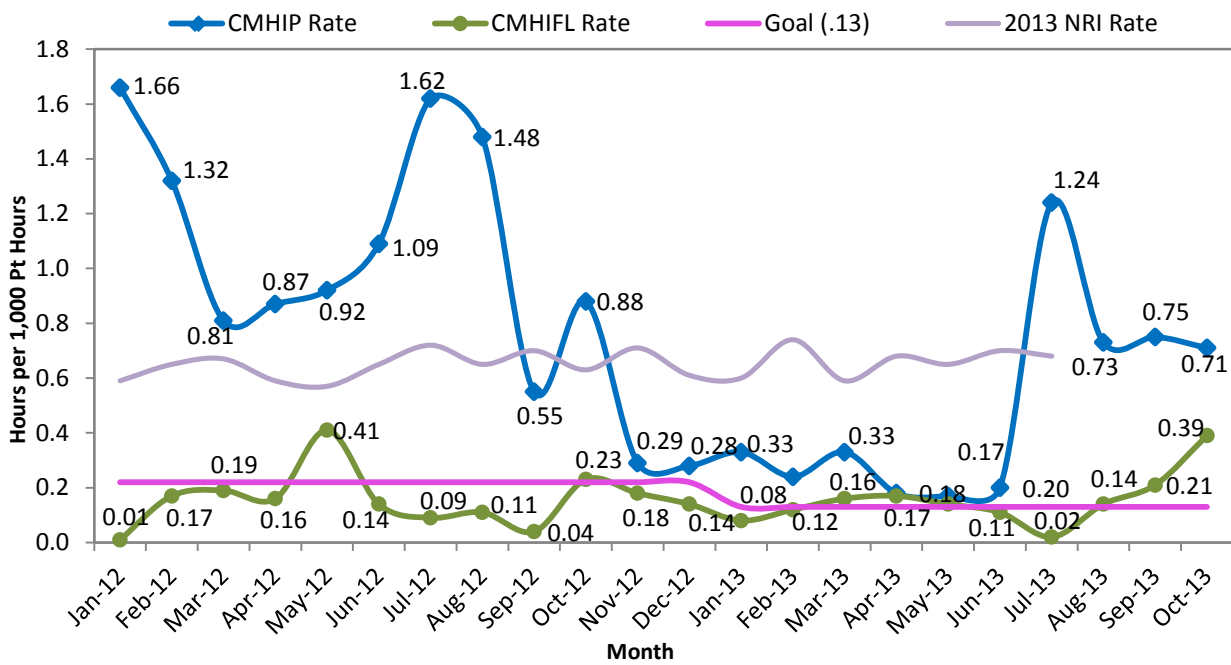
Mental Health Institutes (MHI)

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: 67,933 patient hours, Pueblo: 287,973 patient hours

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

Goal: **↓ 0.13**



Trend: Restraint use at both hospitals has been above the goal rate the past quarter. CMHIP continues to fluctuate while CMHIFL has been on a three-month upward trend.

Notes: Both institutes agreed on the .13% goal rate in December 2013.

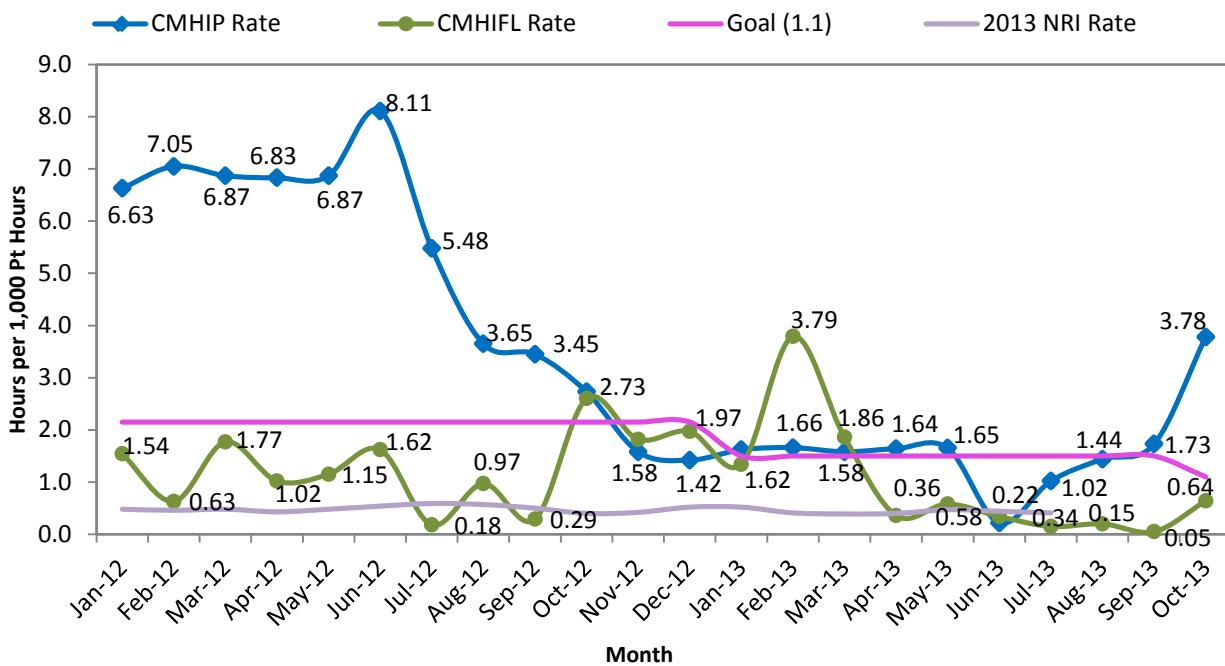
Mental Health Institutes (MHI)

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 – Fort Logan: 67,933 patient hours, Pueblo: 287,973 patient hours

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

Goal: **↓1.1**



Trend: CMHIFL has stayed below the goal rate the entire quarter while CMHIP’s seclusion rate has been increasing the past four months.

Notes: Both institutes agreed on the 1.1 goal rate in December 2013.

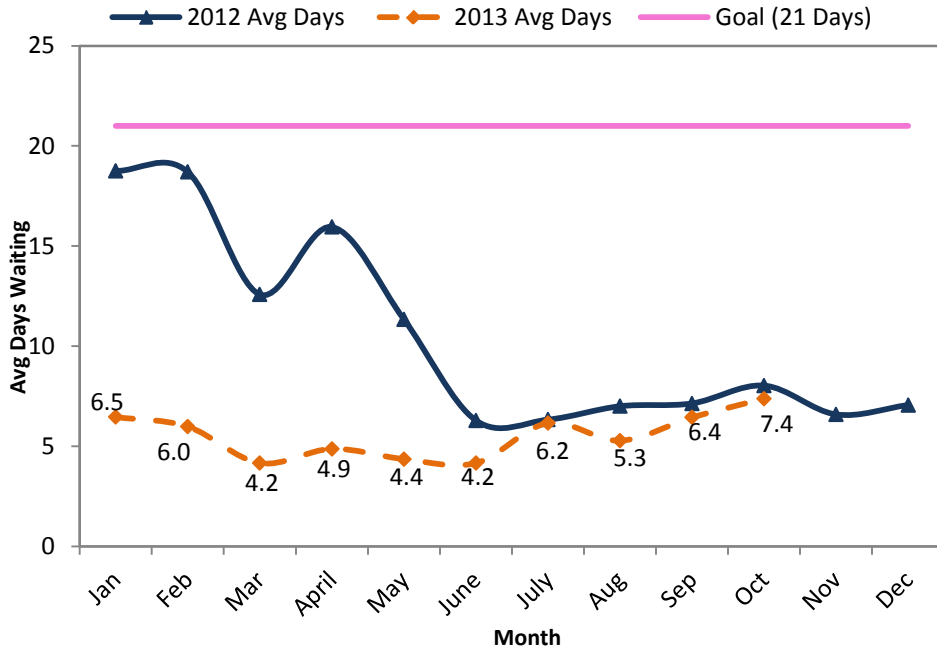
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* The average number of days a patient waits for a competency exam
Denominator: None; Approximate number of days on waitlist: 6.4

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 waitlist times have increased over the past quarter (from 5.3 days to 7.4 days), they have stayed well below the established goal of 21 days for the past 19 months.

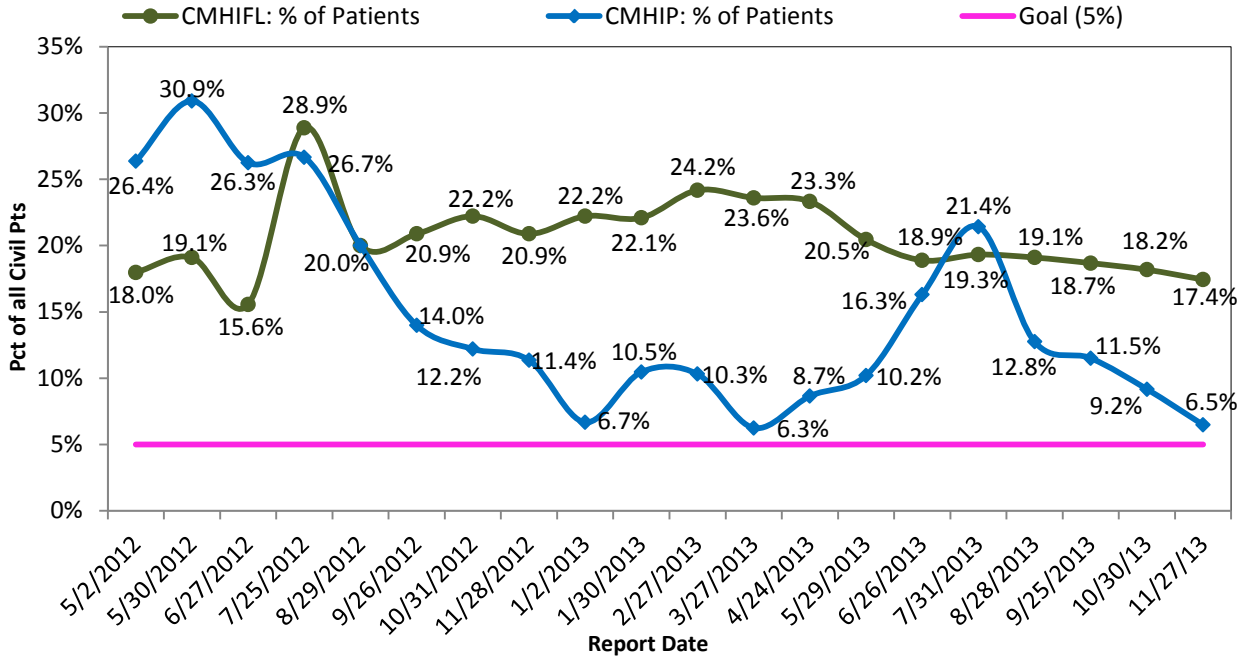
Notes: This measure was moved to the OBH Dashboard in December 2013.

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, Pueblo: 108

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 managed to decrease the overall percentage of patients with discharge barriers since July. CMHIFL’s average number of patients ready to discharge but have barriers (for this past quarter) is 17. Pueblo has been on a downward trend since July, and averaged 12 patients who are ready to discharge but have barriers.

Notes: This measure was added in May 2012 to the regular C-Stat slide deck. The goal of 5% was agreed upon for both institutes in November 2013.

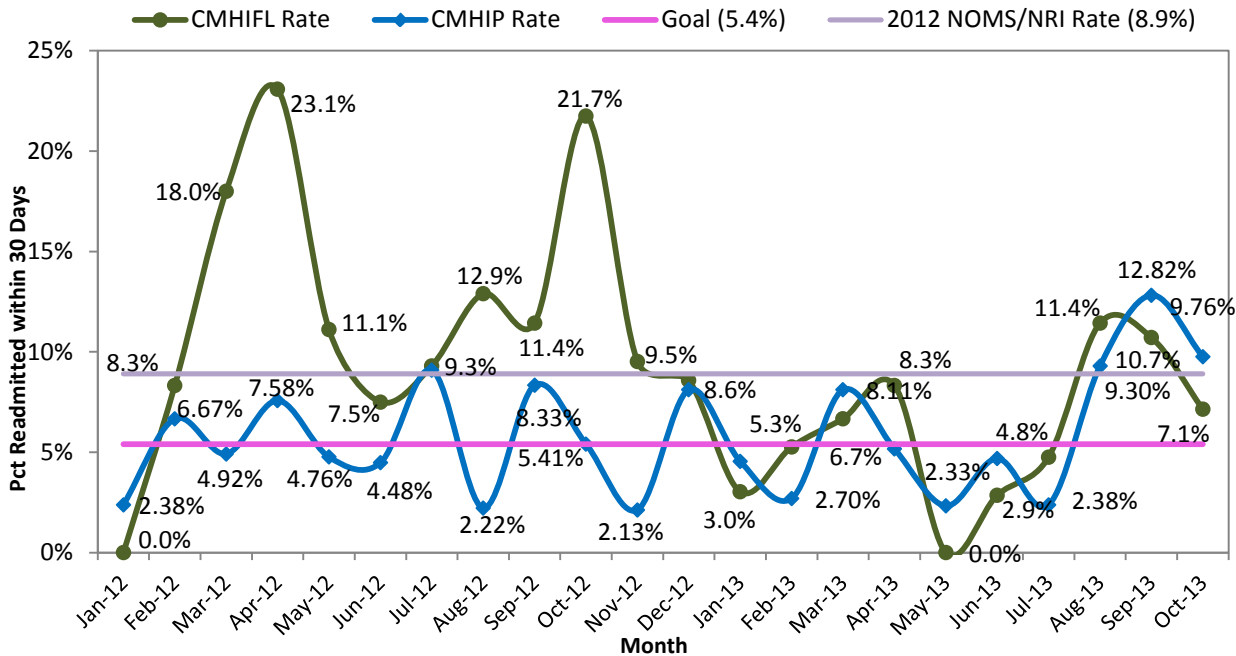
Mental Health Institutes (MHI)

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: 26, Pueblo: 40.6

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

Goal: **↓ 5.4%**



Trend: Thirty-day readmission rates have fluctuated over the past quarter. CMHIFL shows a downward trend the past two months while CMHIP shows a one-month downward trend. Both institutes had previously exceeded the established C-Stat goal rate and agreed to lower the rate to 5.4%.

Notes: Both institutes agreed on the reduced goal rate of 5.4% in December 2013.

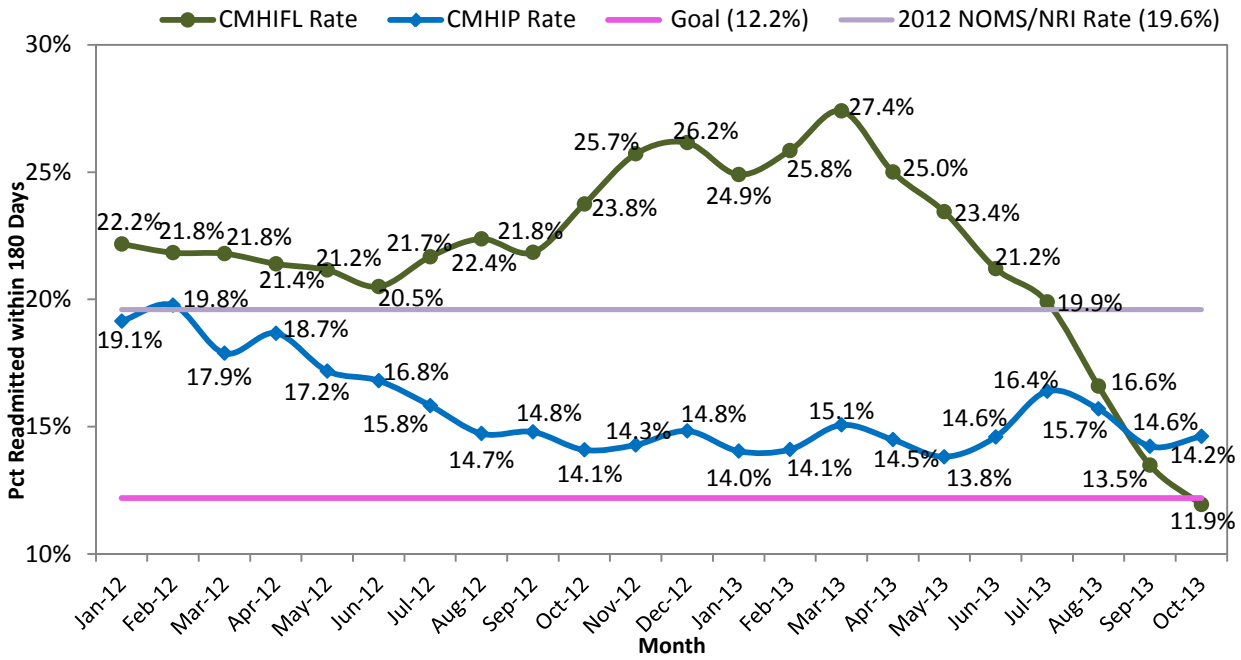
Mental Health Institutes (MHI)

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: 212, Pueblo: 252.6

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

Goal: **↓12.2%**



Trend: Fort Logan has seven consecutive months of a downward trend, and met the established goal rate in October 2013 (which reflects a reduced goal rate for both institutes). CMHIP’s rates have fluctuated over the past quarter, landing between 14.2% and 15.7%.

Notes: Both institutes agreed upon the reduced goal rate of 12.2% in December 2013.

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 the parent.

Director: Robert Werthwein

Executive Summary

- The following measures were added to Child Welfare's monthly reporting in the last quarter: (1) Maintain Children Safely in Their Home, (2) Child Welfare Walkaways, (3) Caseworker Contact with Parents, (4) Congregate Care.
- *Timeliness of Response to Initial Abuse/Neglect Investigations*: Efforts to enhance performance include a weekly email update to counties regarding performance by the Office Director.
 - Further analysis of the data has demonstrated that response to initial abuse/neglect investigations is significantly less timely during weekends and 3-day holiday weekends.
- *Timeliness of Assessment Closure*: The goal for this measure has not been met; however, Family Assessment Response (FAR) data has shown improvement.
 - Beginning this quarter, improvements in data collection efforts has allowed counties participating in FAR to be assessed separate from all other counties.
- *Safety Assessment Forms Completed Accurately*: Neither Family Assessment Response nor Traditional Assessment have achieved the 95% goal.
 - a. In depth analysis demonstrated that both assessment tracks are similar in their rates of accuracy; indicating that neither track is more or less accurate in their completion of Safety Assessment Forms.
- *Caseworker Contact with Parent*: This measure has moved from quarterly reporting to monthly reporting, starting with November 2013 data. The goal for both In-Home and Out-of-Home Care has been met for the first time in November 2013.

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](#)
- [Maintain Children Safely in Their Home](#)
- [Child Welfare Walkaways](#)
- [Caseworker Contact with Parents \(PIP Item #20\)](#)
- [Children in Congregate Care](#)

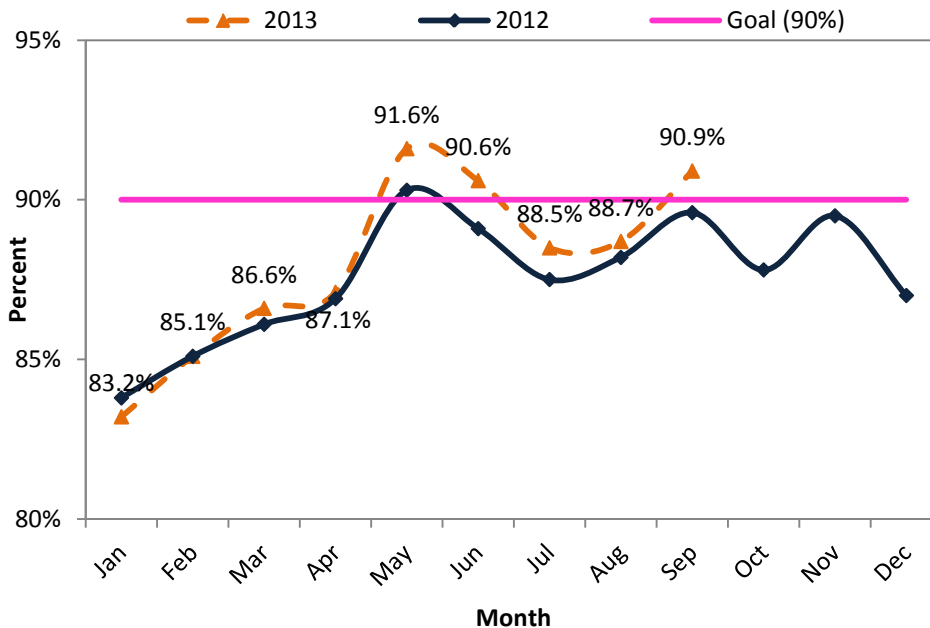
Division of Child Welfare (DCW)

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 target month (both High Risk and Differential Response); 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 one of the previous three months.

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

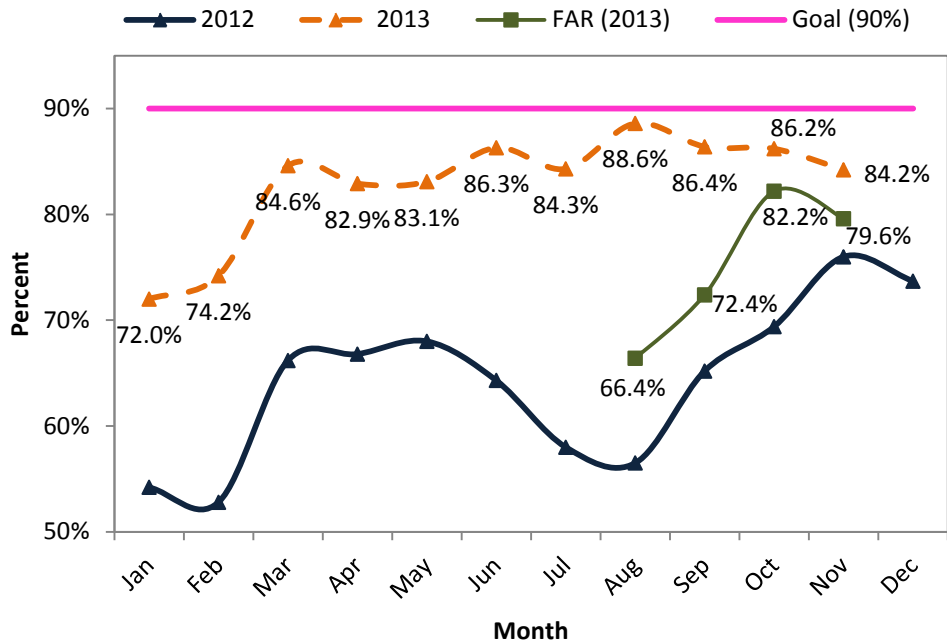
Division of Child Welfare (DCW)

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 child protection assessments closed in a specific month;
 Average monthly denominator: High Risk: 1,809; Family Assessment Response (FAR): 368

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. Additionally, FAR data has shown improvement.

Notes: Six counties currently utilize the Family Assessment Response (Arapahoe, Boulder, Fremont, Garfield, Jefferson, and Larimer). Important to note that those counties conduct both types of assessments, traditional assessment and Family Assessment Response.

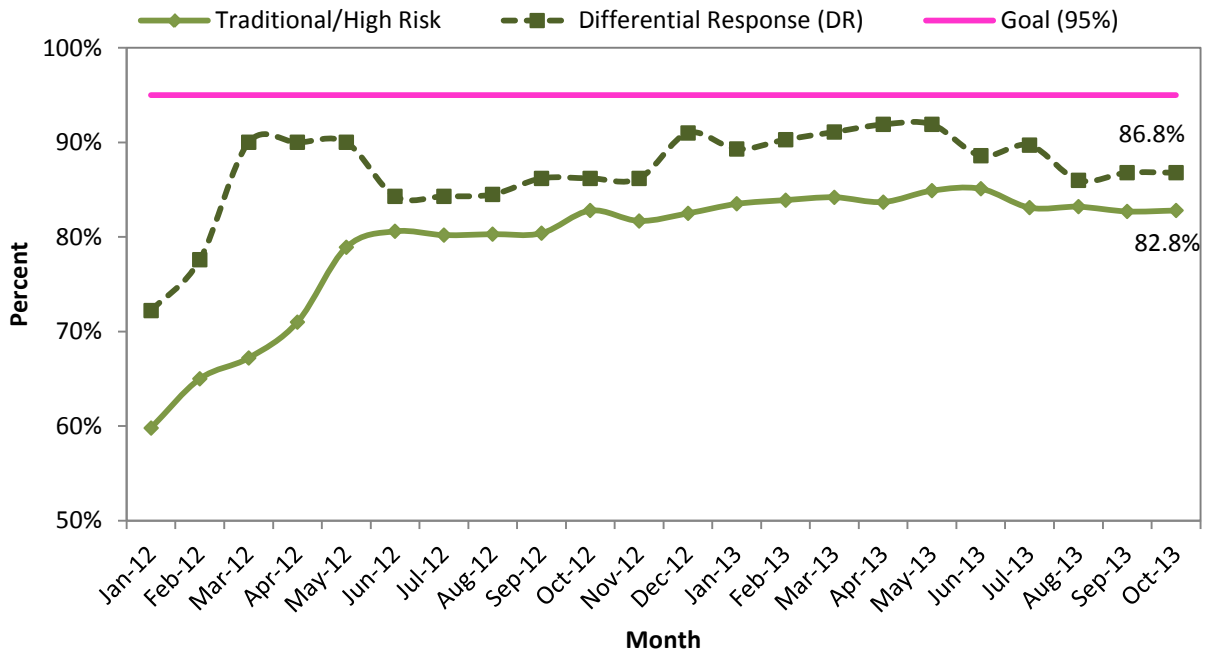
Division of Child Welfare (DCW)

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 and reviewed by ARD; Average monthly denominator(s): High Risk: 897; Family Assessment Response (FAR): 109

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

Goal: **↑ 95%**



Trend: Performance for Family Assessment Response (FAR) declined slightly over the last three months. Similarly, High Risk has declined and plateaued over the last three months. The 95% goal was not achieved.

Notes: FAR data includes the six counties that currently utilize the Family Assessment Response (Arapahoe, Boulder, Fremont, Garfield, Jefferson, and Larimer). Important to note that DR counties are not exclusively DR.

Division of Child Welfare (DCW)

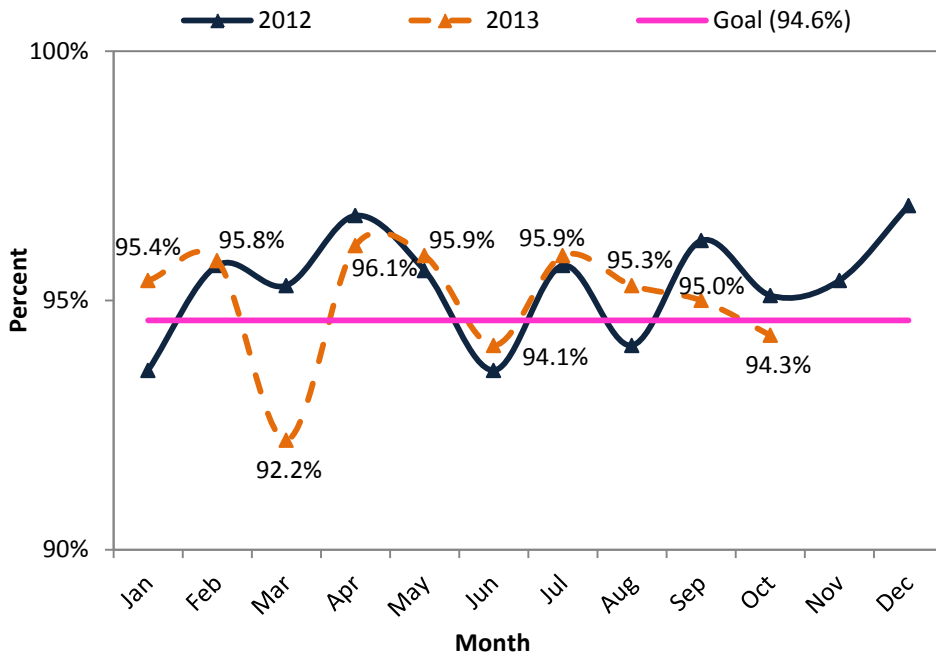
Measure: **Absence of maltreatment recurrence (Federal Measure)**

How it is measured: *Numerator:* Of the denominator cohort, number of children without a recurrence of a substantiated abuse/neglect report within six months prior to reporting month

Denominator: Total number of substantiated incidences of abuse and/or neglect in the month occurring six months prior to the reporting month; Average monthly denominator: 833

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 performance continuously declined in the last three months dropping below the 94.6% goal in October 2013.

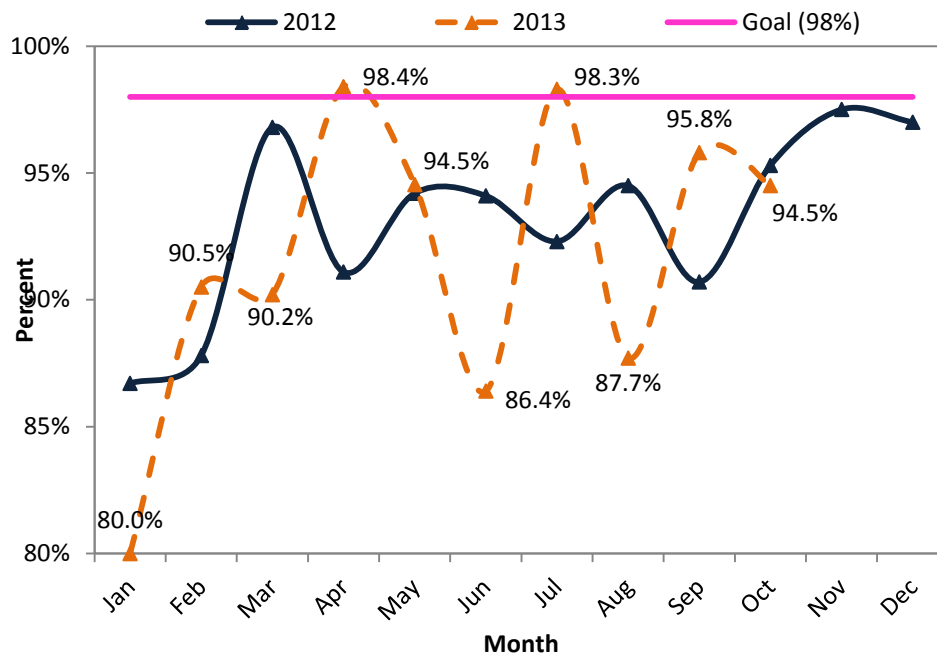
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Number of children who were legally free for adoption at the time of discharge who discharged to a permanent home prior to their 18th birthday
Denominator: Number of children who were legally free for adoption at the time of discharge; Average monthly denominator: 56

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 has varied continuously throughout 2013. The 98% goal was not achieved in this quarter.

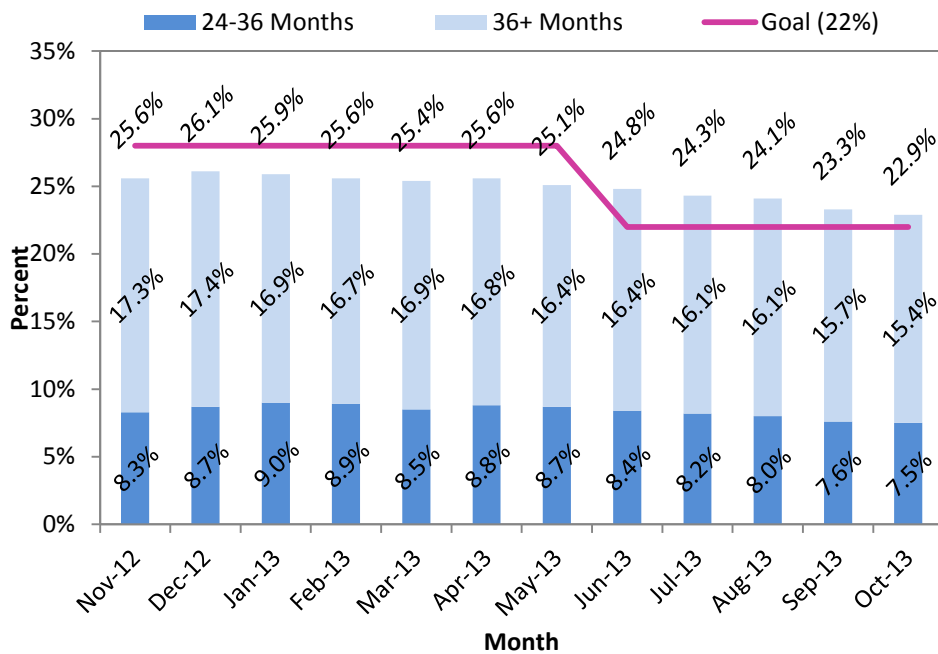
Division of Child Welfare (DCW)

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 Out-of-Home care for greater than 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: 4,581

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

Goal: **↓ 22%**



Trend: Performance exceeded the 28% goal for 14 consecutive months, resulting in the goal modification in August 2013 (June data). Performance continues to improve, however, the new goal of 22% has yet to be achieved.

Notes: The goal for this measure was decreased to 22% in August 2013 (June data) after it was achieved for 14 consecutive months.

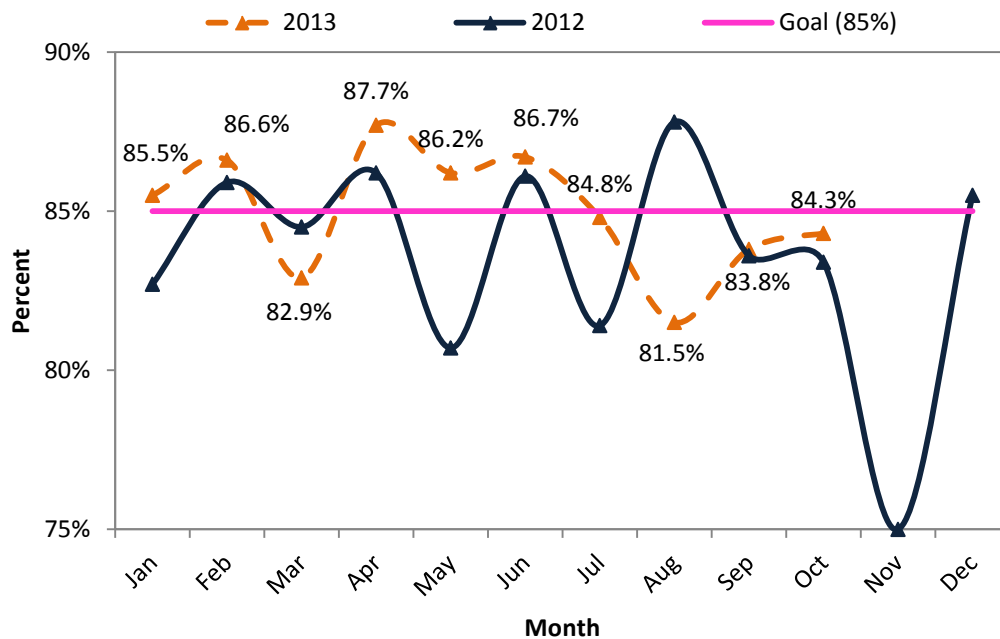
Division of Child Welfare (DCW)

Measure: **Maintain children safely in their home**

How it is measured: *Numerator:* Children who were not initially (first 30 days) in OOH and did not enter OOH placement during case involvement.
Denominator: Total number of children who were not in OOH placement during case involvement; Average monthly denominator: 501

Why this matters: Children deserve to remain home, when their home is a safe environment, to lessen the disruption and trauma Out-of-Home care can cause.

Goal: **↑ 85%**



Trend: Performance dropped below the 85% goal for all three months this quarter.

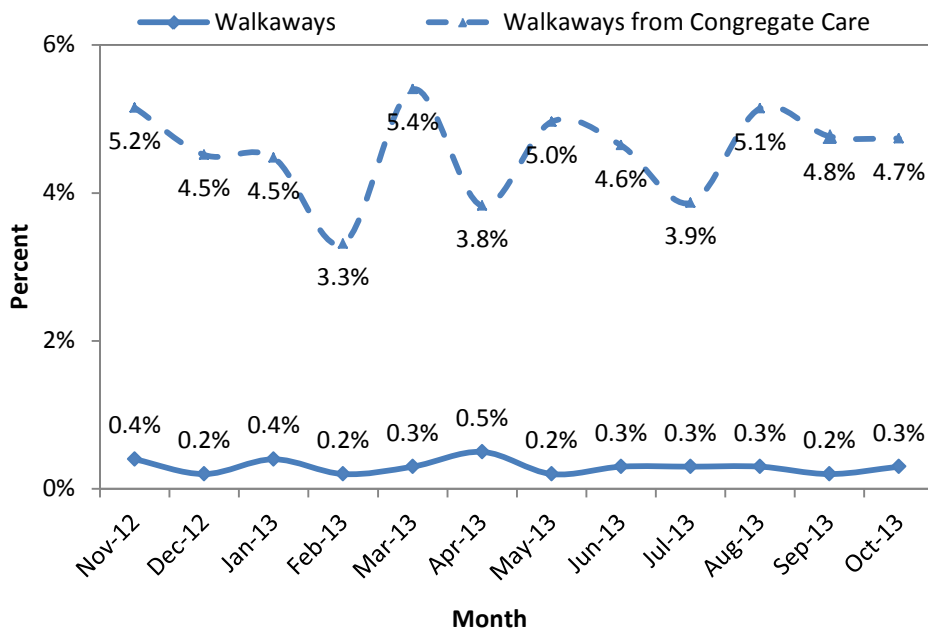
Division of Child Welfare (DCW)

Measure: **Child welfare walkaways**

How it is measured: Walkaways: *Numerator:* Average daily population of youth with a walkaway service authorization
Denominator: Average daily population of youth with an out of home placement; Average monthly denominator: 4,182
 Walkaways from Congregate Care: *Numerator:* Average daily population of youth in congregate care with a walkaway service authorization
Denominator: Average daily population of youth in Congregate Care with an Out-of-Home placement; Average monthly denominator: 969

Why this matters: Minimizing walkaways is necessary to ensure the safety of children.

Goal: **↓ TBD**



Trend: Performance for walkaways was consistently around 0.2%-0.3% for this quarter; similarly, walkaways from Congregate Care fluctuated very little throughout this quarter (4.7% - 5.1%). A goal is yet to be determined for this measure.

Notes: Newly introduced to C-Stat, DCW is still working to establish a meaningful goal for this measure. Additionally, the data in this measure is a cumulative frequency; meaning those who walkaway in September and are still on walkaway status in October are counted in October's data.

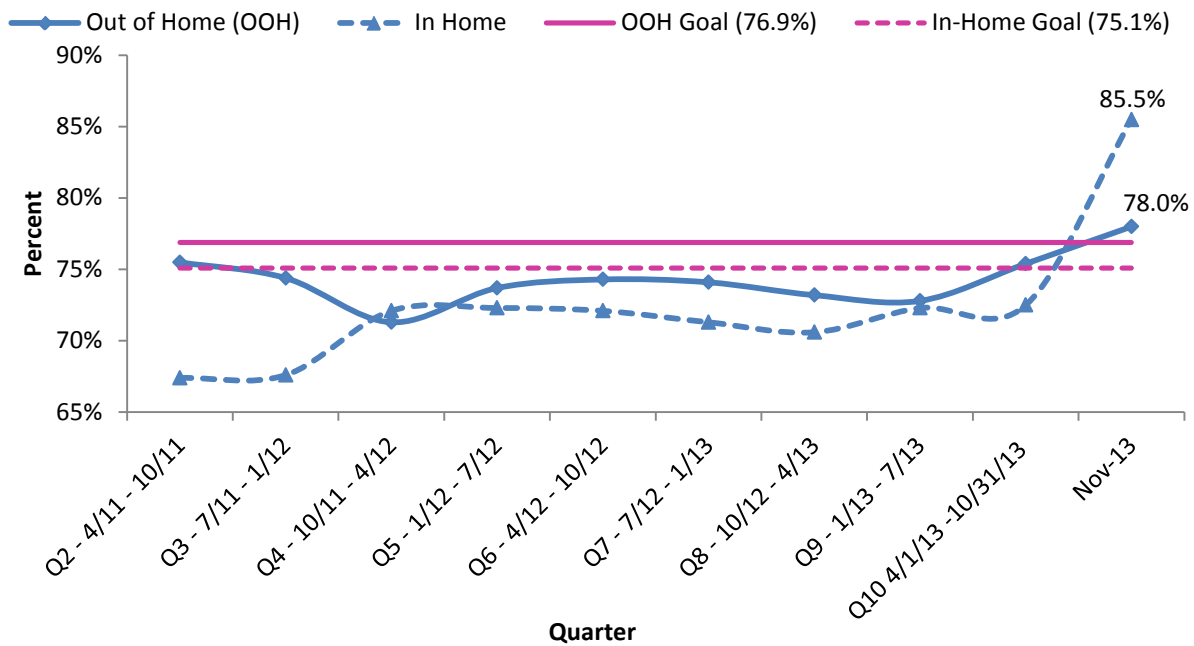
Division of Child Welfare (DCW)

Measure: **Caseworker contact with parents**

How it is measured: In-Home: *Numerator:* Number of children in In-Home care where requirements for monthly contact with the caregiver(s) were met, and/or the quality of contact met Volume 7 requirements
Denominator: Total number of children in In-Home care reviewed within a given month; Average monthly denominator: 1,946
 Out-of-Home (OOH): *Numerator:* Number of children in Out-of-Home care or DYC community placement where requirements for monthly contact with the mother and/or father were met, and/or the quality of contact met Volume 7 requirements
Denominator: Total number of children in Out-of-Home care or DYC community placement reviewed within a given month; Average monthly denominator: 6,285

Why this matters: It is critical that caseworkers contact parents and caretakers, as it supports the caseworker's efforts to engage the families and to work toward achieving positive outcomes for the children served through the child welfare system. The contacts also help inform decisions related to safety, permanency and well-being.

Goal: **↑ 76.9% (OOH), 75.1% (In-Home)**



Trend: Performance for both In-Home and OOH exceeded the goal for the first time in November 2013.

Notes: This measure moved to monthly reporting in November, 2013.

Division of Child Welfare (DCW)

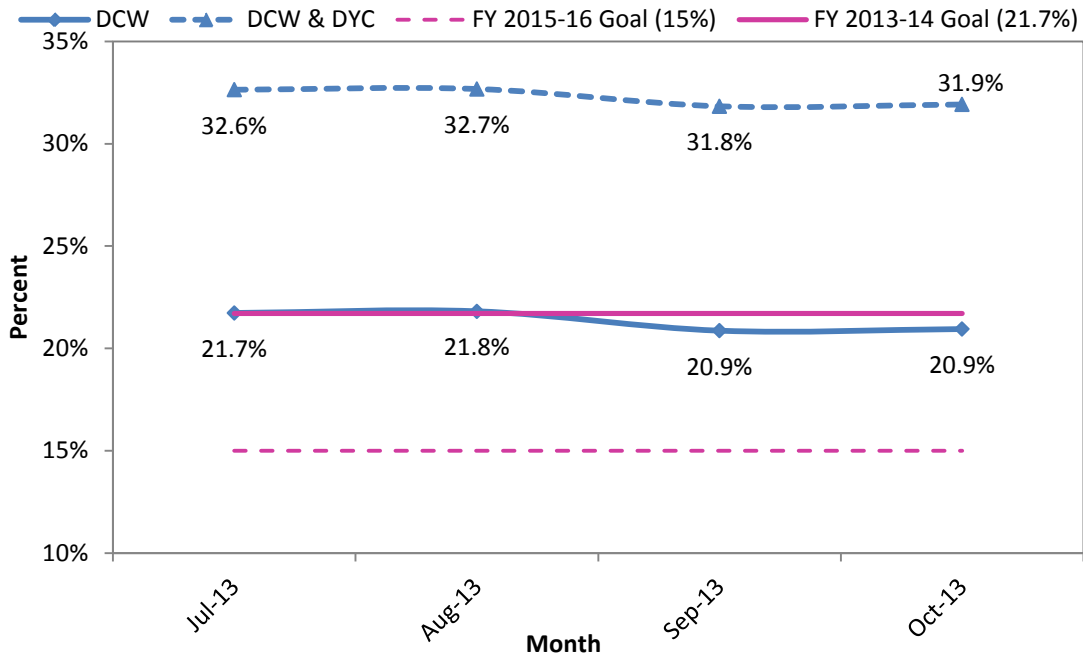
Measure: **Children in congregate care**

How it is measured: *Numerator:* Walkaways: Number of children placed in congregate care (residential or group).

Denominator: Number of children placed in OOH care (all types); Average monthly denominator: DCW, 1,123; DCW & Division of Youth Corrections (DYC), 1,970

Why this matters: All children deserve to achieve permanency in a home to lessen the disruption and trauma Out-of-Home care can cause. Reducing congregate care use works towards these efforts.

Goal: **↓ 15% (FY 2015-16 Goal); 21.7% (2013-14 Goal)**



Trend: Performance for DCW has met the FY 2013-2014 goal for both September and October of 2013.

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

- *Eligible Youth Who Have a GED or High School Diploma by Discharge:* DYC is preparing for the new GED policy and procedure, effective January 2014, which is expected to increase the difficulty of passing the exam. Preparations include, working with the Office of Information Technology to ensure that State-operated Facilities have the computers and software needed to provide practice exams.
 - DYC has successfully achieved the goal of 90% of eligible youth who have a GED or high school diploma by discharge for every month within this quarter.
- *Committed to Detained Youth Who Escape or Walk Away from Residential Placement:* In-depth analysis revealed that walkaways primarily occur while the youth is on pass in the community.
- *Timely Initial Placement for Committed Youth:*

Measures

- [Youth Enrolled in a Full/Part-Time Program at Discharge](#)
- [Eligible Youth who Have a GED or High School Diploma at Discharge](#)
- [Committed or Detained Youth who Escape or Walk Away from Residential Placement](#)
- [Fights and/or Assaults in NYC State-Operated Residential Facilities](#)
- [Youth Injuries in NYC State Secure Facilities](#)
- [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](#)

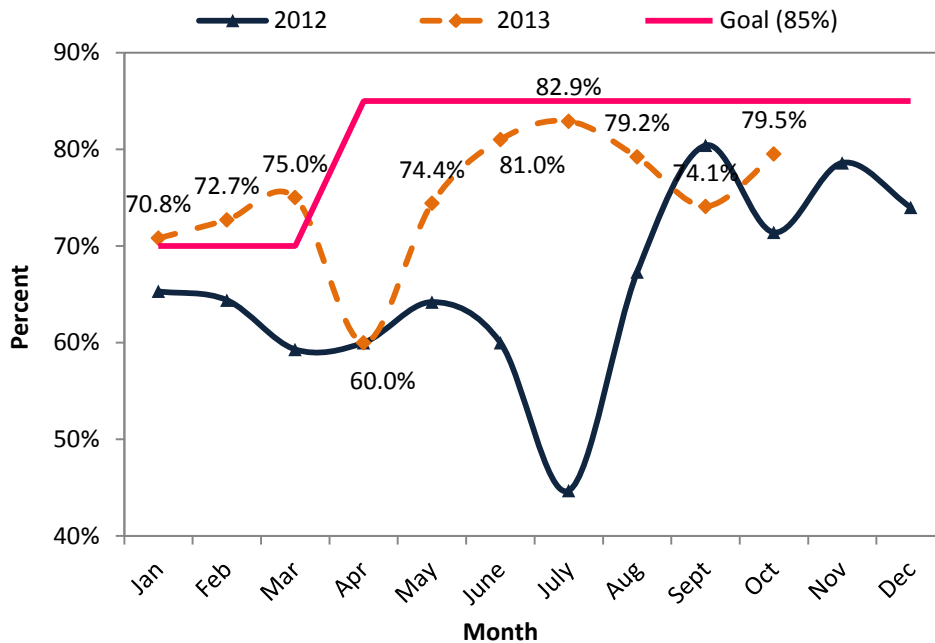
Division of Youth Corrections (DYC)

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 forms or pro-social community engagement)
Denominator: Total number of eligible clients who discharge in a specific month;
 Average monthly denominator: 36

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 varied this quarter, though overall it declined from the peak performance seen last quarter. The 85% goal was not achieved.

Notes: Eligible youth are defined as youth who discharge from parole.

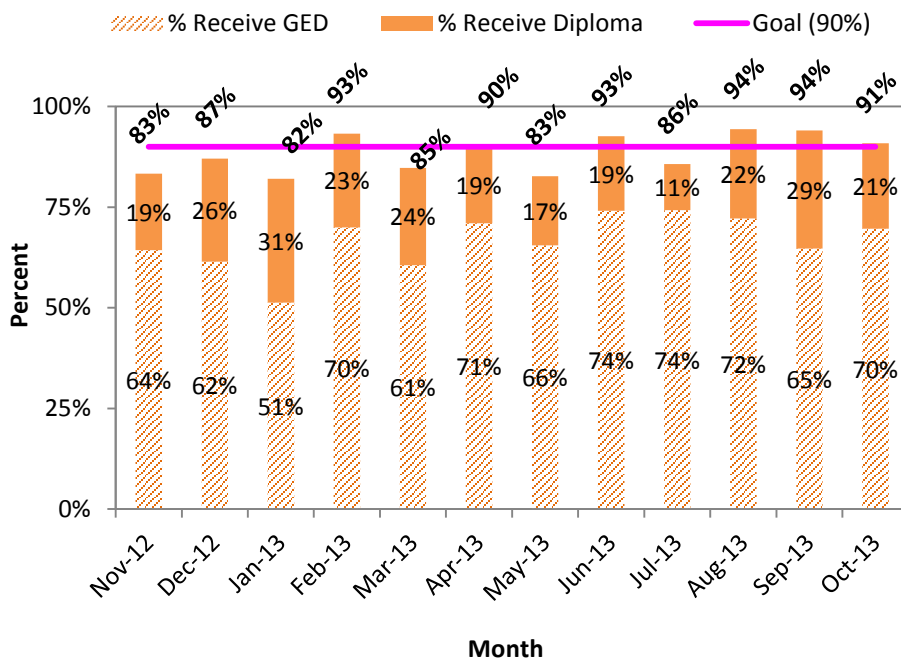
Division of Youth Corrections (DYC)

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: Total number of eligible DYC clients discharged in a specific month;
 Average monthly denominator: 29

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

Goal: **↑ 90%**



Trend: The goal was met in all three months.

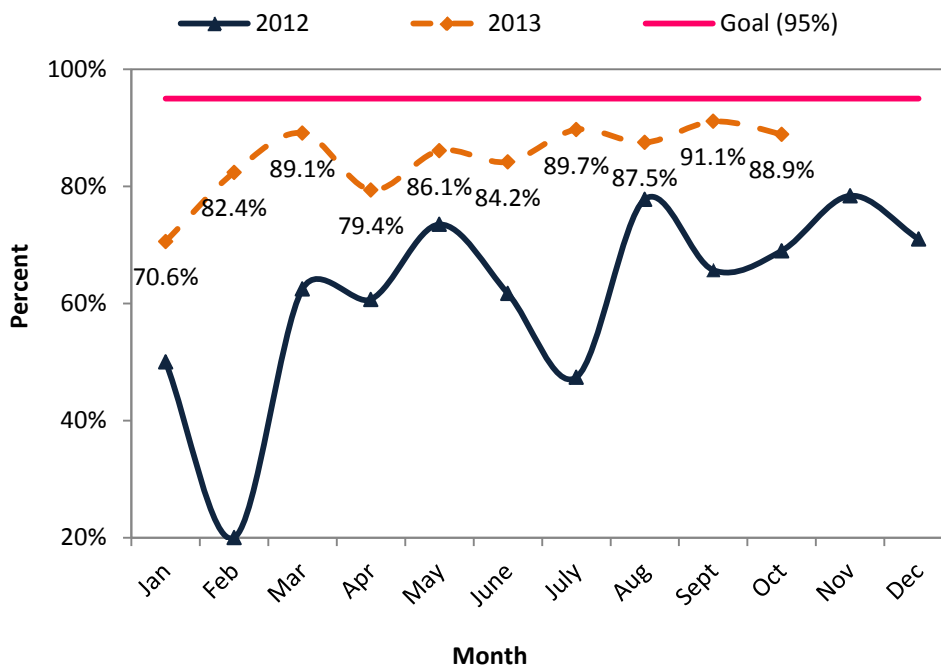
Division of Youth Corrections (DYC)

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 most timely manner possible.

Goal: **↑ 95%**



Trend: The most recent quarter reflects the best performance to date for this measure. The 95% goal was not achieved; however there has been a considerable reduction in the number of days it takes to place a youth in excess of 40 days.

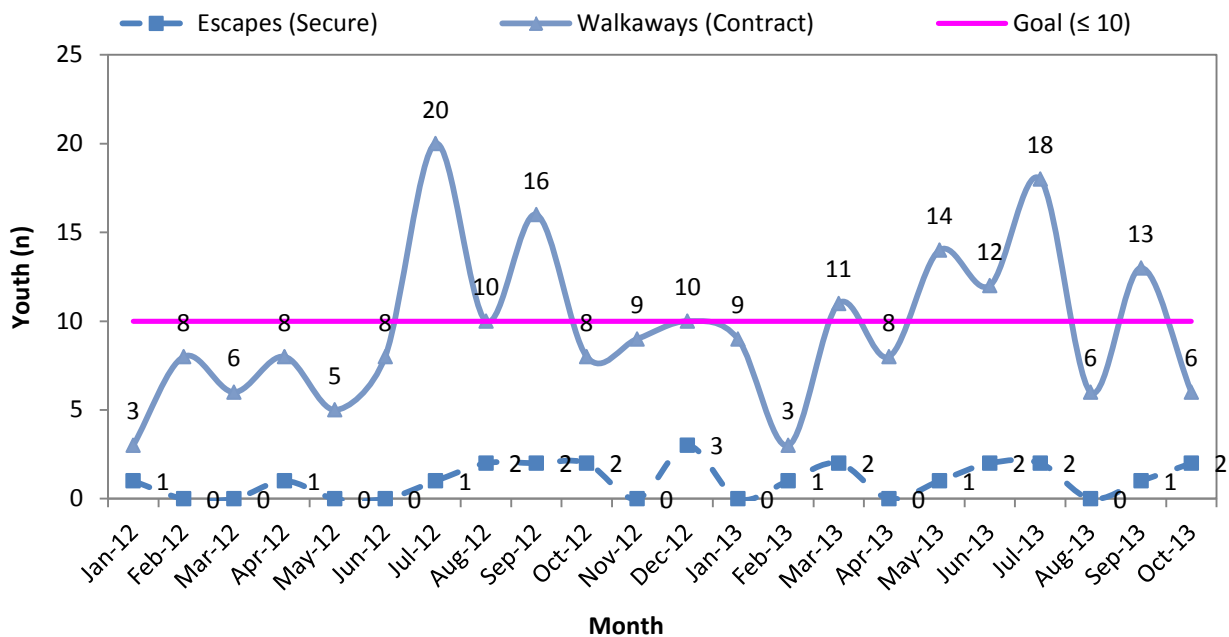
Division of Youth Corrections (DYC)

Measure: Committed or detained youth who escape or walk away from residential placement

How it is measured: Number of escapes occurring while committed youth are in state-operated residential placement (escape) or in contract staff-supervised or community placement (walkaway); Average daily population: 1,103

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

Goal: ↓ ≤10 unique incidents



Trend: Overall performance improved in the most recent quarter; however, the goal was only met in two of the three months. Performance for state secure facilities (escapes) remains relatively stable.

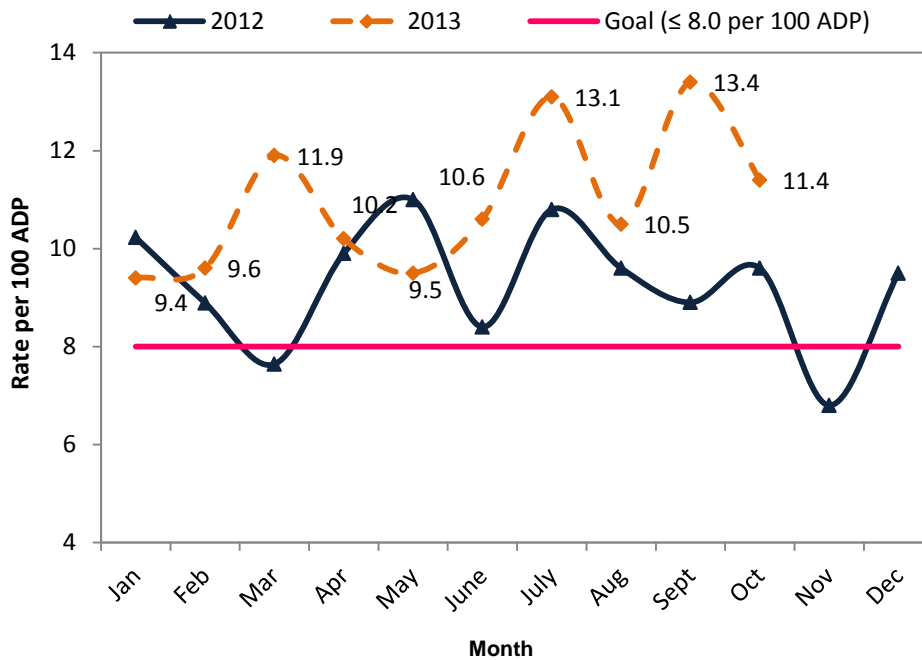
Division of Youth Corrections (DYC)

Measure: **Fights and/or assaults in DYC state-operated residential facilities**

How it is measured: *Numerator:* Fights and assaults occurring in DYC state-operated residential facilities
Denominator: Monthly secure average daily population (ADP; state-operated detention, assessment and state secure commitment); Average daily population: 624.1

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 was not achieved.

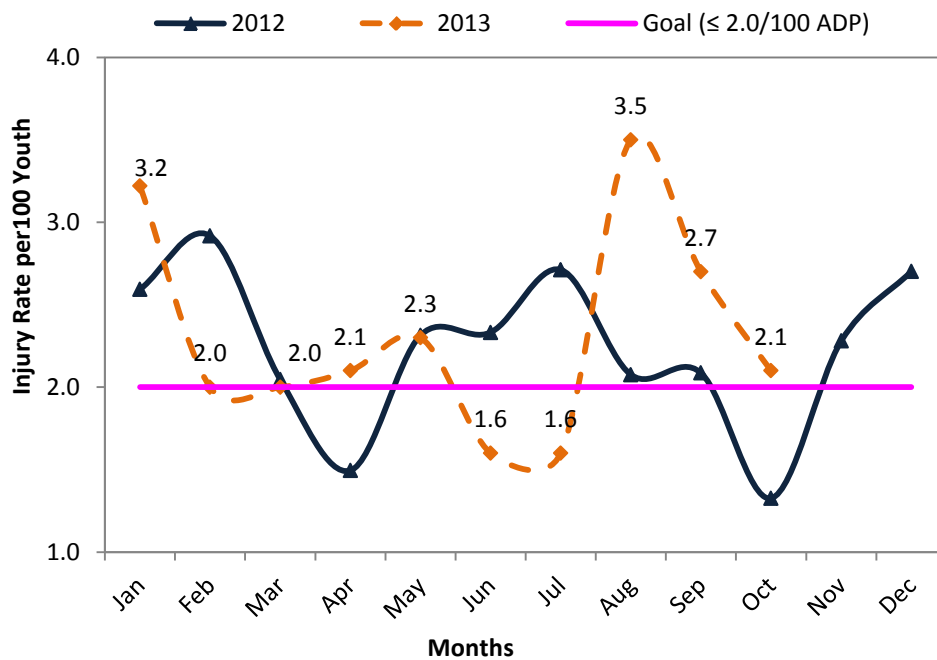
Division of Youth Corrections (DYC)

Measure: **Youth injuries in DYC state secure facilities**

How it is measured: *Numerator:* Number of youth injuries in DYC state secure facilities
Denominator: Monthly secure average daily population (ADP; state-operated detention, assessment, and state secure commitment); Average daily population: 624.1

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 declined in the most recent quarter; the goal of fewer than 2.0 youth injuries per ADP was not achieved in the three months within this quarter.

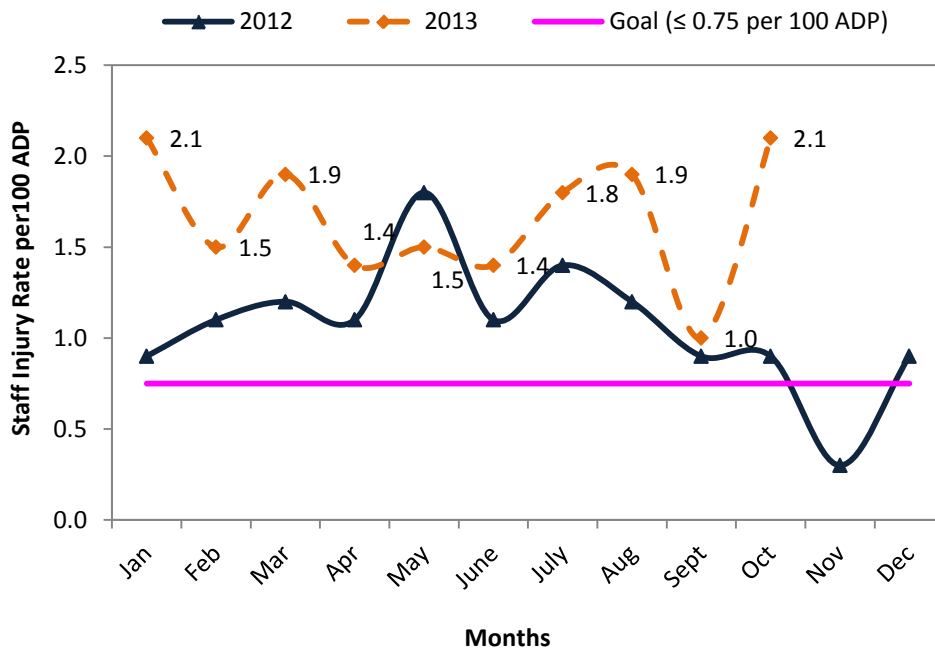
Division of Youth Corrections (DYC)

Measure: **Staff injuries on the job as a direct result of youth contact**

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: Monthly secure average daily population (ADP; state operated detention, assessment and state secure commitment); Average daily population: 624.1

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 less than 0.75 per 100 ADP has not been achieved (and has not been achieved since November 2012).

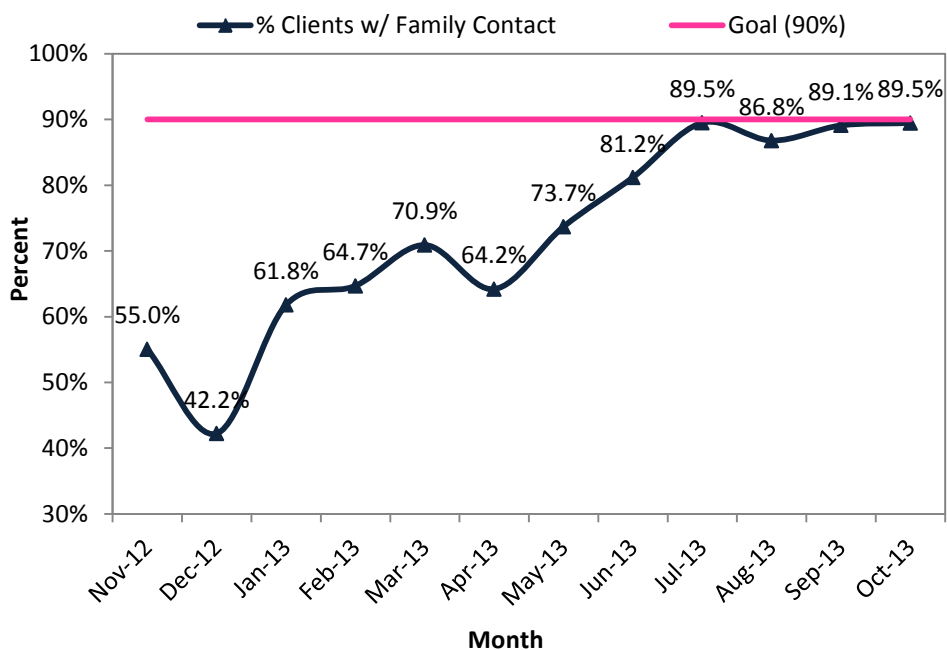
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Number of committed youth in state-operated facilities who have at least one face-to-face or phone contact with their families during a given month
Denominator: Number committed clients in state-secure residential facilities; Average monthly denominator: 434

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 throughout the quarter, consistently performing near the goal; however, the 90% goal was not achieved this quarter.

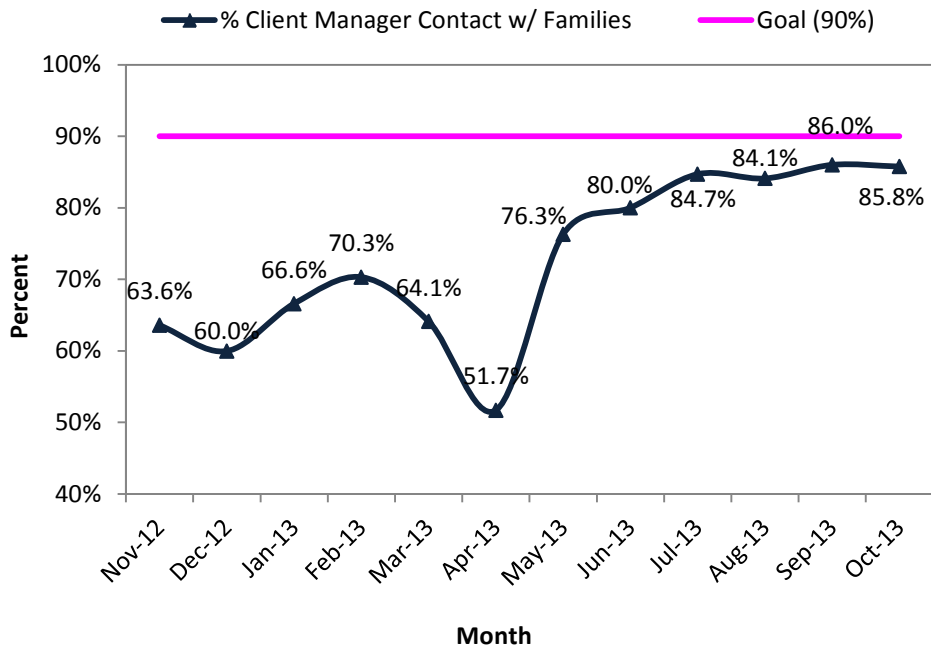
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Number of clients in residential placement or parole whose client manager contacted the client's family through face-to-face meeting, phone, video conference, email, or text message, one or more times during specified month
Denominator: Total number of committed clients, residential and parole; Average monthly denominator: 1,168

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

Goal: **↑ 90%**



Trend: Performance improved throughout the most recent quarter, although the 90% goal was not 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 ensuring grant funded programs administered by the DVP deliver optimal services to victims, ultimately promoting a Colorado free of domestic violence. DVP strives to ensure that services to victims of domestic violence and their children are readily available throughout Colorado's diverse communities. Services include shelter, advocacy, support groups, and/or counseling. DVP currently funds 44 domestic violence crisis centers across the State. All DVP-funded crisis centers provide confidential services 24 hours a day, seven days a week via crisis lines.

Director: Ruth Glenn

Executive Summary

- Family Violence Prevention and Services Act (FVPSA) is 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.

Measures

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

Domestic Violence Program (DVP)

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

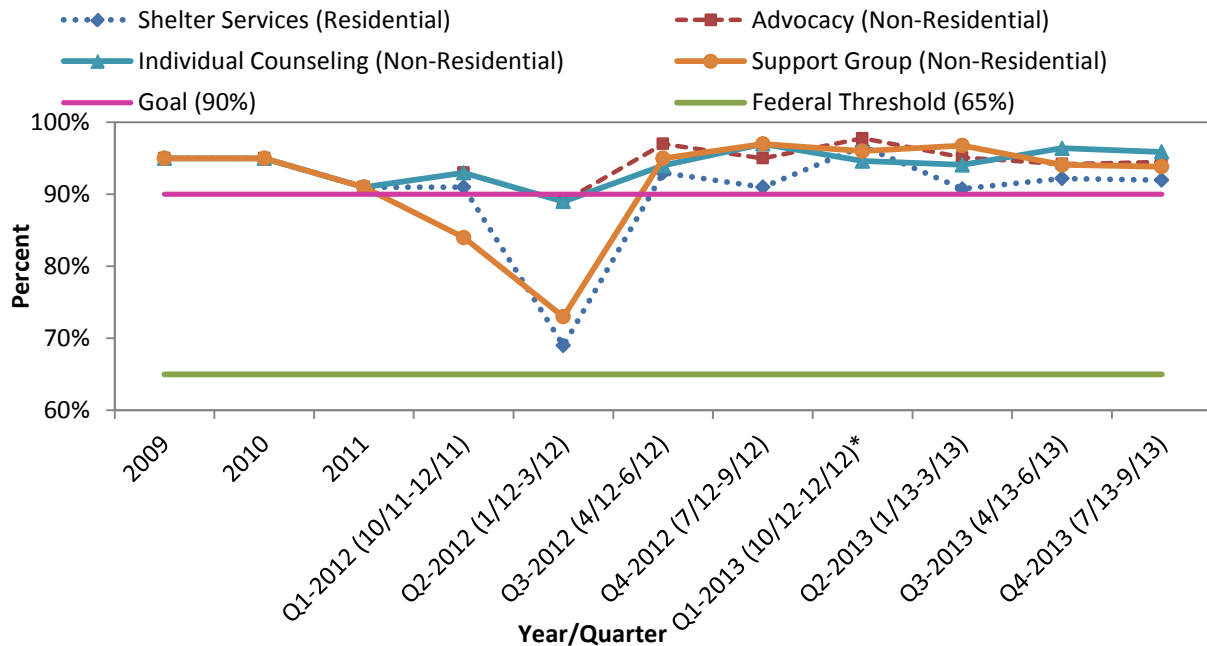
How it is measured: *Numerator:* Quarterly number of clients who indicated having achieved the specified outcome because of the service received

Denominator: The number of surveys returned by clients receiving services

Quarterly Denominator: Surveys completed in FFY 2013 Q4 (July – September 2013): Shelter: 362; Advocacy: 891; Counseling: 487; Support Group: 440

Why this matters: Services provided through the Domestic Violence Program are intended to enhance safety strategies.

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for shelter services, individual counseling, and support groups decreased slightly, while performance for advocacy slightly improved. All service categories remain above the 90% goal.

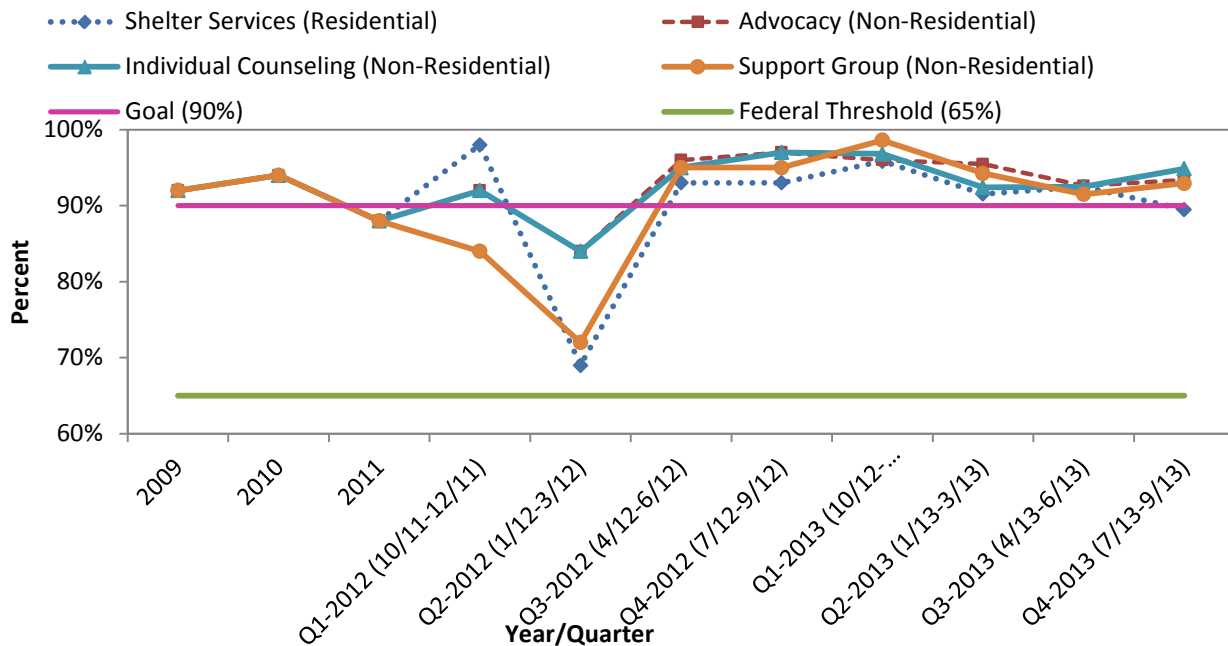
Domestic Violence Program (DVP)

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

How it is measured: *Numerator:* Quarterly number of clients who indicated having achieved the specified outcome because of the service received
Denominator: The number of surveys returned by clients receiving services.
 Quarterly Denominator: Surveys completed in FFY 2013 Q4 (July - September 2013): Shelter: 362; Advocacy: 891; Counseling: 487; Support Group: 440

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 services declined, dropping just below the 90% goal, while performance for advocacy, individual counseling, and support group all improved, maintaining performance above the 90% goal.

Office of Early Childhood

Description

Created in June 2012, the Office of Early Childhood (OEC) provides access to collaborative, coordinated, quality early childhood programs and supports to children, families and early care professionals in an effort to best prepare Coloradans for future success. Colorado families who seek and need assistance are provided services, supports, and resources from one or more of the various programs in the Division of Early Care and Learning (ECL) and the Division of Community and Family Support (CFS).

The creation of the Office of Early Childhood (OEC) maximizes available resources without incurring additional expenses. Additionally, the OEC continues to work with many partners, including parents, schools, child care, 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

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. ECL is responsible for the licensing and monitoring of child care facilities, managing the Colorado child care assistance program (CCCAP) for eligible families, administering child care grants and quality initiatives, and serving as the lead in implementing federal child care programs. The overall goal of 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:* The department has recently engaged licensing staff in verifying attendance in subsidized childcare. The additional staff provide another layer of enforcement to ensure accuracy and accountability for the use of federal funds. This will help detect and reduce the incidence of CCCAP fraud.
- *Top Tier Quality Rated Child Care Utilization for CCCAP Children Younger than Five:* This new measure (effective December 2013) is intended to measure whether access to quality child care for children under five years old has increased for Colorado's highest risk/highest need children and families, a primary objective of the Race to the Top – Early Learning Challenge Grant.
- *Timely Supervisory Inspections (1-month and 12-month):* Prior to May 2013, a 30-day grace period was granted for supervisory child care facility licensing inspections. Under the previous definition, a supervisory visit was late only if the inspection occurred more than 30 days after the assigned inspection period. The new definition is more stringent and defines a late inspection as occurring on any date after the assigned inspection date. This means that supervisory inspections are due on or before the timeframe that corresponds with the corresponding risk code.
- *Timely Response to Serious Child Care Center Complaints (Severity 1-3):* To ensure the most immediate response to any child care complaint, ECL reviewed and revised existing policies and procedures for handling after-hours complaint calls (i.e. evening and weekends). The reviews resulted in the implementation of a new process to record and track all after-hours calls (effective Oct. 15, 2013). This increased timeliness of response.

Measures

- [Accurate Child Care Reimbursement](#)
- [Top Tier Quality Rated Child Care Utilization for CCCAP Children Younger than Five](#)
- [Timely Supervisory Inspections \(1-month and 12-month\)](#)
- [Timely Response to Serious Child Care Center Complaints \(Severity 1-3\)](#)

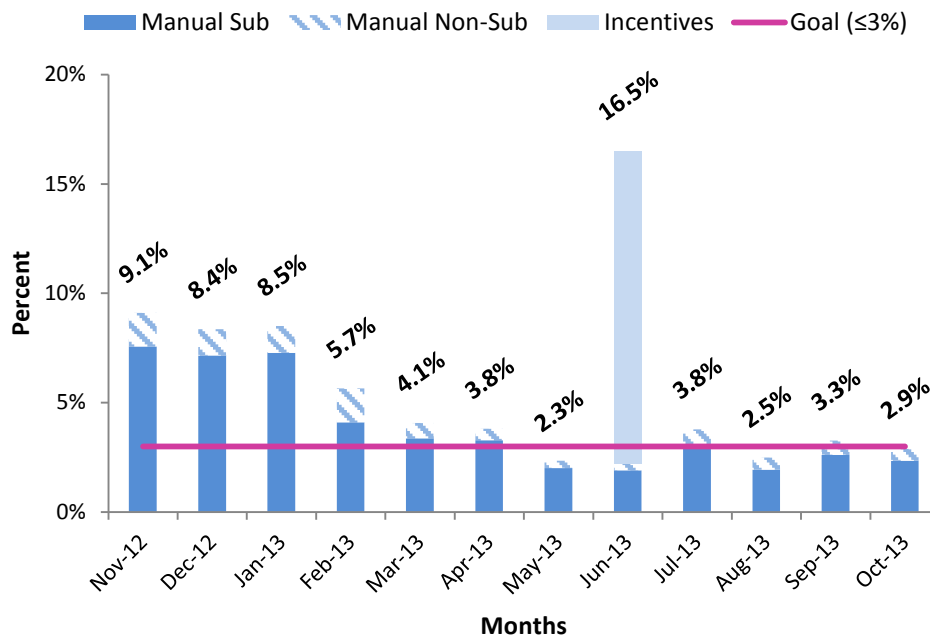
Early Care and Learning (ECL)

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; average monthly numerator: \$170,674
Denominator: Amount, in dollars, of all CCCAP payments (payment of service, manual sub, and manual non-sub) paid to providers; average monthly denominator: \$6,029,886

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

Goal: **↓ 3%**



Trend: Performance has stabilized in recent months after considerable improvement; October data show a slight improvement in performance from the previous month and the 3% goal was achieved for the third time in the past 12 months.

Notes: Manual claims are claims for reimbursement of child care not occurring via the electronic Point of Service (POS) System.

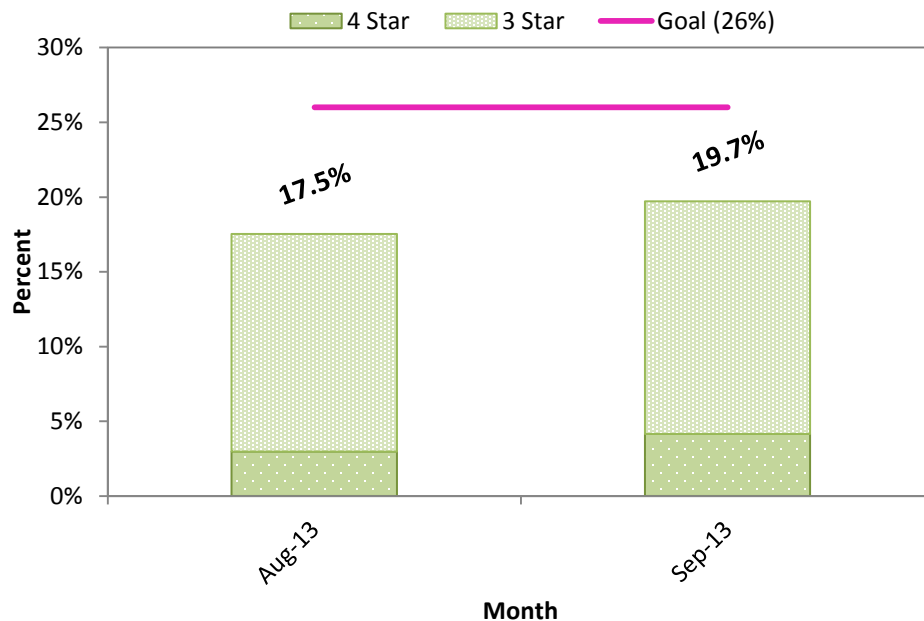
Early Care and Learning (ECL)

Measure: **Children in the Colorado Child Care Assistance Program (CCCAP), under the age five, in top tier quality rated facilities**

How it is measured: *Numerator:* Total number of children, under five years old, who utilized CCCAP at a child care center with a current quality rating in the top two tiers (3-Star or 4-Star) at least once during the given month; average monthly numerator: 1,840
Denominator: Total number of children, under five years old, who utilized CCCAP at a child care center at least once in the given month; average monthly denominator: 9,573

Why this matters: Research supports positive outcomes associated with high quality early childhood experiences including: reduced racial, ethnic and socio-economic achievement gaps, reduced special education costs, increased high school graduation rates, reduced grade repetition, reduced crime rates over time, increased employment, increased income and tax contribution levels, and decreased expenses associated with public health care, welfare and child care expenses.

Goal: **↑ 26%**



Trend: Nearly 20% of children in the Colorado Child Care Assistance Program (CCCAP), under the age five, received child care in a center with the highest quality rating (3 or 4-Star). The 26% goal was not achieved.

Notes: New measure effective December 2013. Full quality rating range is Provisional to 4-Star.

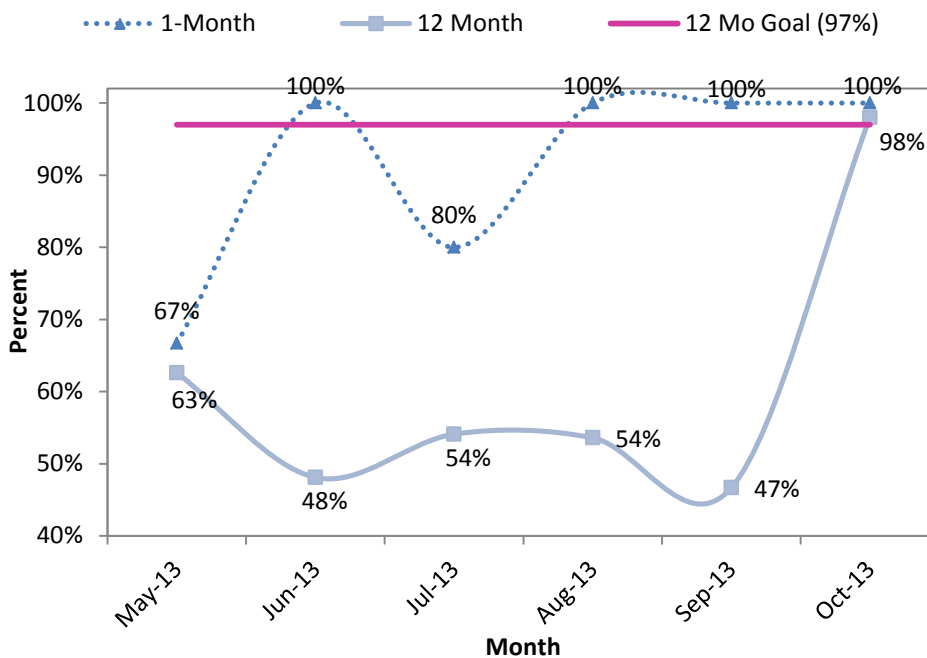
Early Care and Learning (ECL)

Measure: **Timely supervisory inspections (1-month and 12-month)**

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; Quarterly average denominator(s): one-month: 16; 12-month: 165

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: Performance for 12-month inspections went from 47% to 98% in December 2013 (October data), marking the first month the data reflect the new definition of timely (effective May 2013).

Notes: October 2013 data marks the first month where the data reflect the new, more stringent, definition of timely. [See Executive Summary for further details.](#)

Early Care and Learning (ECL)

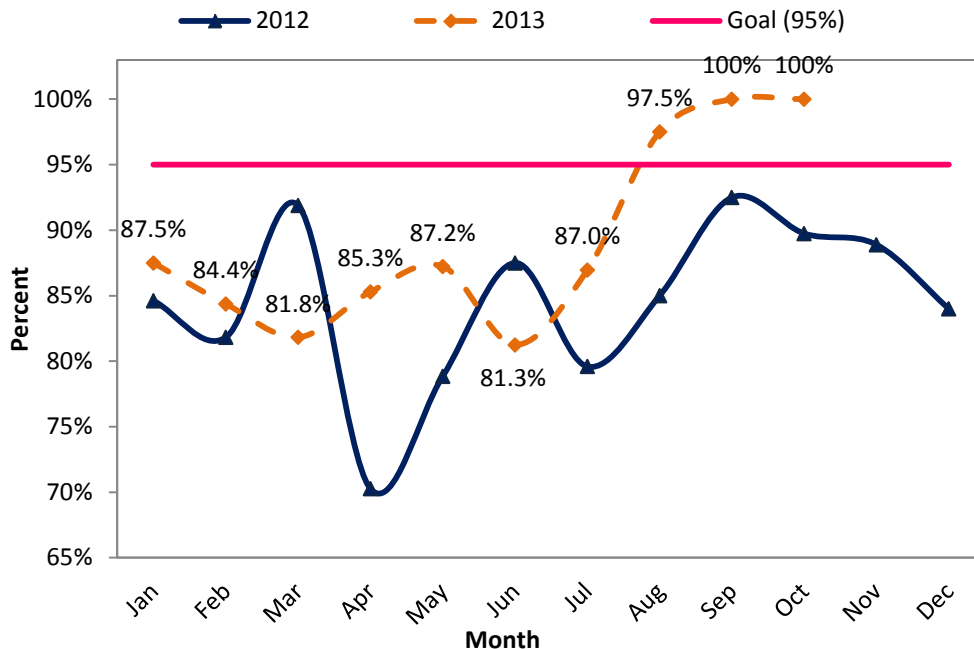
Measure: **Timely response to serious child care center complaints (Severity 1-3)**

How it is measured: *Numerator:* Number of serious child care center complaints (levels 1-3) completed within the required corresponding timeframes; average monthly numerator: 36

Denominator: Total number of serious child care center complaint visits required in a given month (levels 1-3); average monthly denominator: 37

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.

Goal: **↑ 95%**



Trend: Performance improved considerably starting in July 2013, and maintained at 100% for two of the last three months. ECL exceeded the 95% goal for the past three consecutive months.

Notes: Data only includes complaints categorized as severity levels 1-3; the full range is 0-5, with zero being the most serious and five being the least. County Child Protection staff is responsible for responding to Severity 0 complaints (imminent and specific danger).

Community and Family Support

Summary

Description

The Division of Community and Family Support (CFS) is made up of at least twelve distinct programs, several of which CDHS inherited in July 2013 from the Colorado Department of Public Health and Environment (CDPHE). All CFS programs share objectives in alignment with at least one of two shared themes: 1) Reduced Child Abuse through Family Supports and 2) Increased Number of Children Ready for Kindergarten. These programs and services benefit families in need by strengthening collaboration and coordination between the state-level early childhood system and local delivery systems. CFS 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

- Currently, only one CFS program, Early Intervention, reports performance in C-Stat. However, the development of additional C-Stat measures is currently underway.
- *Timely Services for Infants and Toddlers Eligible for Early Intervention*: A December 2013 analysis revealed that 97.9% of clients state-wide received services within 28 days of parental consent (or did not receive their services within this time frame due to family exception - see definition below). Further, 65.5% of services were initiated within 21 days of parental consent, and 45.1% were within 14 days.
- *Increased Functioning for Children Receiving Early Intervention services*: An analysis completed by the CFS data staff in November 2013 concluded that the nature of the child's disability impacts each Early Intervention outcome differently. For example, having a cognitive delay did not significantly impact any of the three measured outcomes, while having a communication delay significantly impacted all three measured outcomes. It is important to note that the analysis did not provide any indication of why one category of delay would or would not influence improved outcomes; it merely indicates that there is a difference.

Measures

- [Timely Services for Infants and Toddlers Eligible for Early Intervention](#)
- [Early Intervention Participants who Substantially Increase Social-Emotional Functioning](#)
- [Early Intervention Participants who Substantially Increased their use of Knowledge and Skills](#)
- [Early Intervention Participants who Substantially Increase their use of Appropriate Behaviors to Meet their Needs](#)

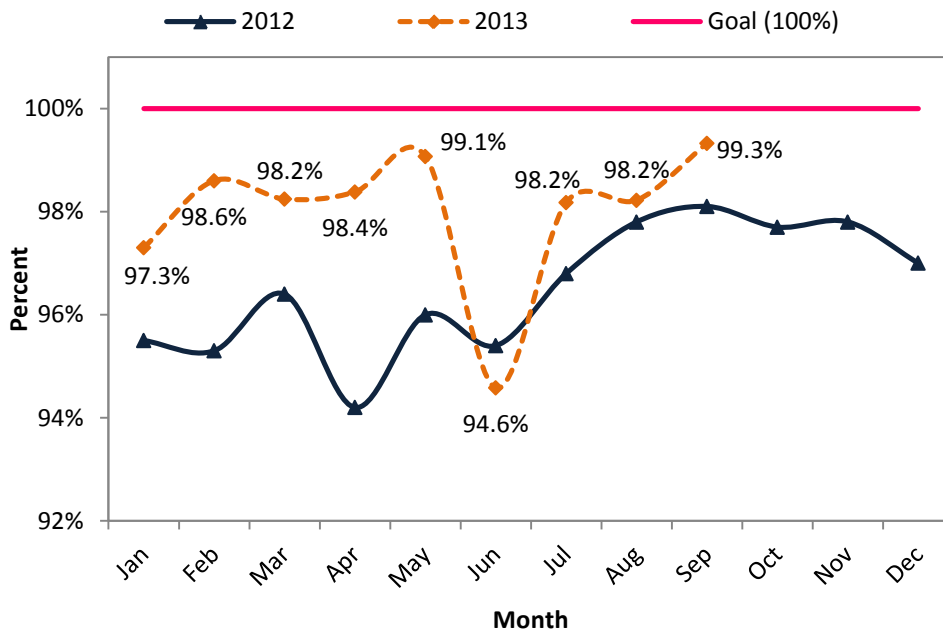
Community and Family Support (CFS)

Measure: **Timely services for infants and toddlers eligible for Early Intervention (EI) (Federal Measure)**

How it is measured: *Numerator:* Number of infants and toddlers (age birth through age two) eligible for Early Intervention who receive services within 28 days of parental consent
Denominator: Number of infants and toddlers receiving a new service;
 Average monthly denominator: 889

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 remains in the high 90s despite a considerable dip in June 2013. The 100% goal continues to go unmet.

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

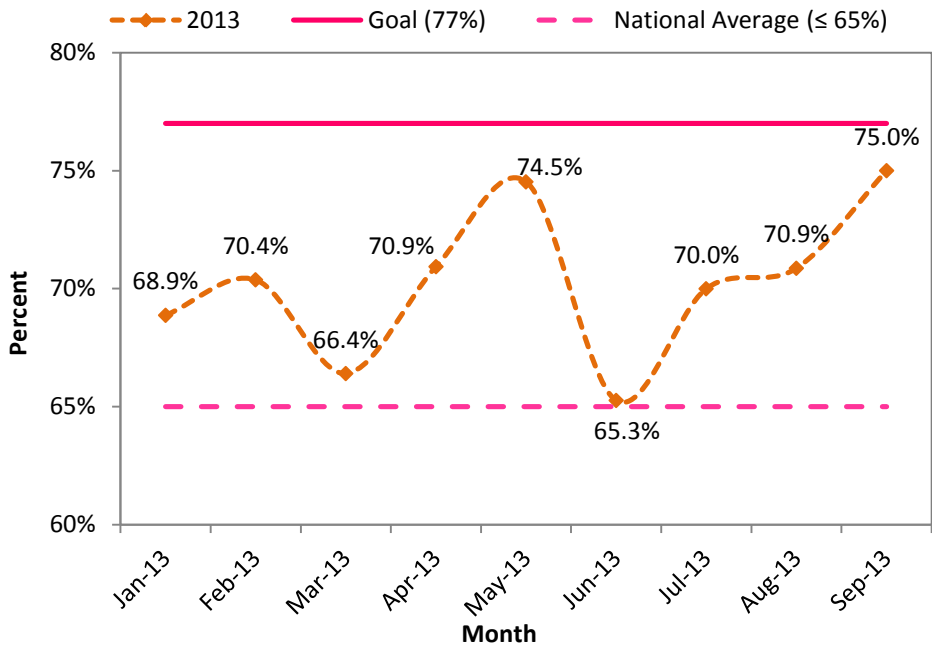
Community and Family Support (CFS)

Measure: **Early Intervention participants who substantially increase social-emotional functioning (Federal Measure)**

How it is measured: *Numerator:* Number of early intervention participants who demonstrate a substantial increase in social emotional functioning from entry to exit.
Denominator: Number of early intervention participants exiting the EI program in a given month who did not demonstrate age-appropriate social-emotional functioning at entry; Approximate monthly denominator: 110

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 improved for the fourth consecutive month, exceeding the 65% national average. The 77% goal remains unmet.

Notes: Positive Social Emotional Skills means that for his or her age, a child is able to: a) build and maintain relationships with children and adults, b) begin to control his or her emotions, c) understand and follow rules, and d) communicate wants and needs effectively.

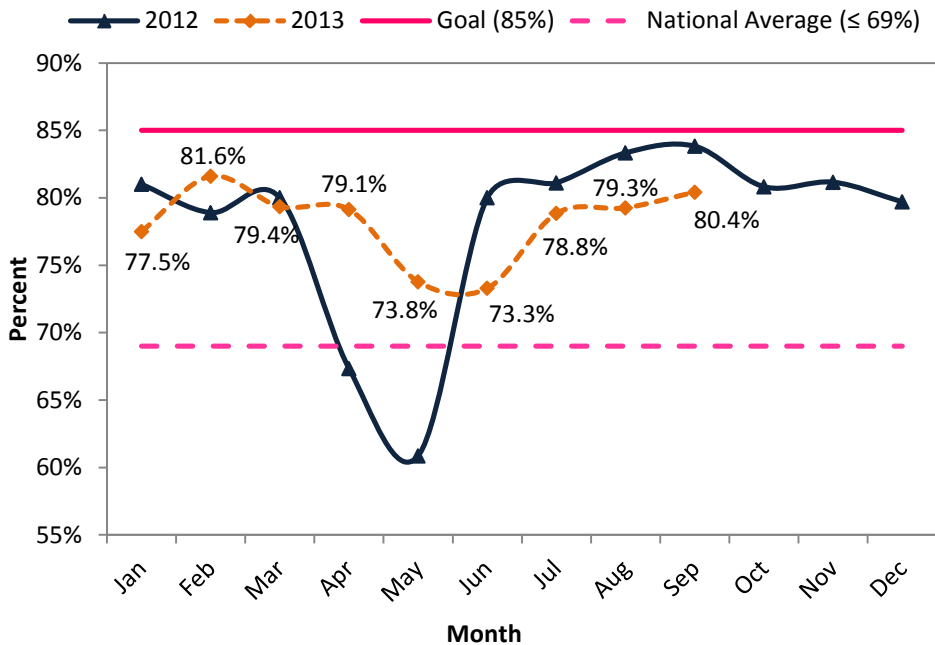
Community and Family Support (CFS)

Measure: **Early Intervention participants who substantially increased their use of knowledge and skills (Federal Measure)**

How it is measured: *Numerator:* Number of early intervention participants who demonstrate a substantial increase in the use of knowledge and skills from entry to exit.
Denominator: Number of early intervention participants exiting the EI program in a given month, who did not demonstrate age-appropriate use of knowledge and skills at entry; Average monthly denominator: 162

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

Goal: **↑85%**



Trend: Performance improved slightly and exceeds the 69% national average; it does, however, remain below what was achieved in the previous calendar year. The 85% goal was not achieved.

Notes: Acquisition and Use of Knowledge and Skills means that for his or her age, a child is able to: a) engage in thinking, reasoning, remembering and problem solving; b) show an eagerness for learning; c) explore his or her environment and engage in daily learning opportunities; d) show imagination and creativity in play; and e) understand and communicate thoughts and ideas.

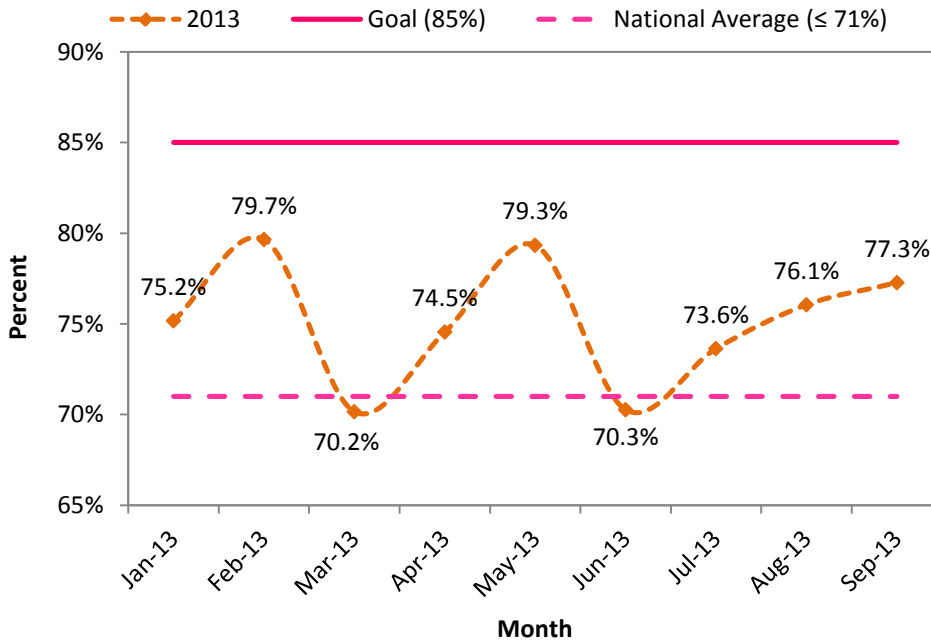
Community and Family Support (CFS)

Measure: **Early Intervention participants who substantially increased their use of appropriate behaviors to meet their needs (Federal Measure)**

How it is measured: *Numerator:* Number of early intervention participants who demonstrate a substantial increase in the use of appropriate behaviors to meet their needs from entry to exit.
Denominator: Number of early intervention participants exiting the EI program in a given month, who did not demonstrate age-appropriate use of appropriate behaviors to meet their needs at entry; Average monthly denominator: 121

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

Goal: **↑85%**



Trend: Performance improved over the past three months, exceeding the 71% national average; the 85% goal remains unmet.

Notes: Use of Appropriate Behaviors to Meet Their Needs means that for his or her age, a child is able to: a) build and maintain relationships with children and adults; b) begin to control his or her emotions; c) understand and follow rules; and d) communicate wants and needs effectively.

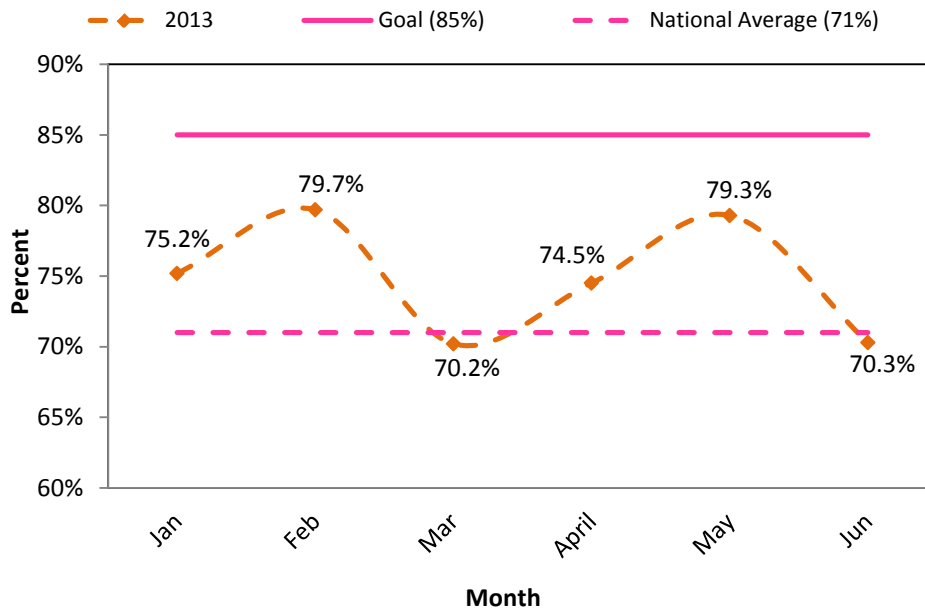
Division of Community and Family Support (DCFS)

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 captures only those children who make enough progress 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 four divisions; Child Support Services (CSS), the Colorado Refugee Services (CRSP), Employment and Benefits Division (EBD) (Colorado Works/Temporary Assistance for Needy Families (TANF) and Adult Financial Services), and Food and Energy Assistance (Food Assistance/Supplemental Nutritional Assistance Program (SNAP), the Low-Income Energy Assistance Program (LEAP), 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 continues to track two key performance measures through the C-Stat process. One of these measures, *Child Support Collected*, mirrors the Federal performance standards that are tied to incentive payments for states. The second measure, *Arrears Payments*, 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 rolled out an initiative to improve support collected and arrears payments known as Flash Card. It is an update to the Child Support Enforcement Tools (CSE Tools) program many county child support agencies use to track and work cases. Flash Card shows workers, supervisors, managers, and state administrators the number of cases associated with four components:
 - 1) Obligor with verified employer and no income withholding orders (IWO): These are individuals who owe support currently or in arrears that have a known employer, but have not had a withholding order issued.
 - 2) Obligor with active IWO and less than a full payment: Individuals who made less than the mandated payment in the last month or longer.
 - 3) Cases with an early intervention alert: Cases where the obligor has recently missed a payment or made less than a full payment.
 - 4) Out of state obligors with no IWO and no active interstate action: Individuals who live outside of Colorado, with a child support case for a minor within Colorado, who have not had an action created with the obligors' state of residence.
- The division has also initiated a regular conference call with counties to discuss and address issues with Flash Card.

Measures

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

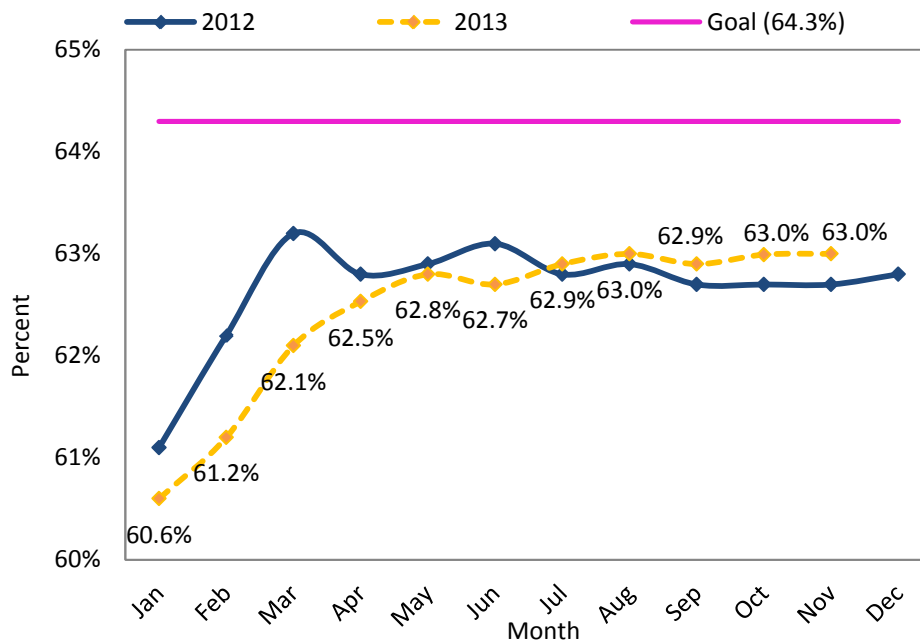
Child Support Services (CSS)

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 November 2013: \$348.7 million

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

Goal: **↑64.3% (State Goal)**



Trend: The measure has continued to perform above 2012 performance, though improvement has flattened. Both the numerator and denominator are growing at essentially the same rate.

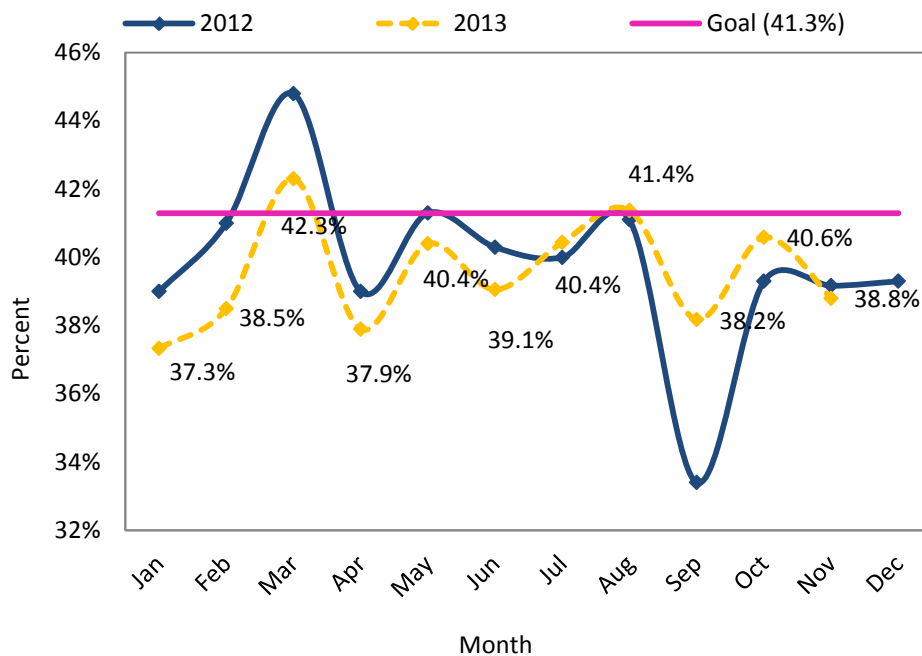
Child Support Services (CSS)

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: 110,235

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

Goal: **↑ 41.3%**



Trend: Improvement over 2012 performance was achieved in four of the past five months with a dip in November 2013.

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 measured *Language Progression* in C-Stat. This will be the last quarter Language Progression will be reported.
- *Entered Employment*: CRSP met the Federal Fiscal Year 2013 goal of 72% in September. This goal has been increased to 75%.
- *Refugee Employment 90-Day Retention*: CRSP also met the goal of 88% in July 2013 (the measure is reported in arrears). The goal for this measure has been increased to 90%.

Measures

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

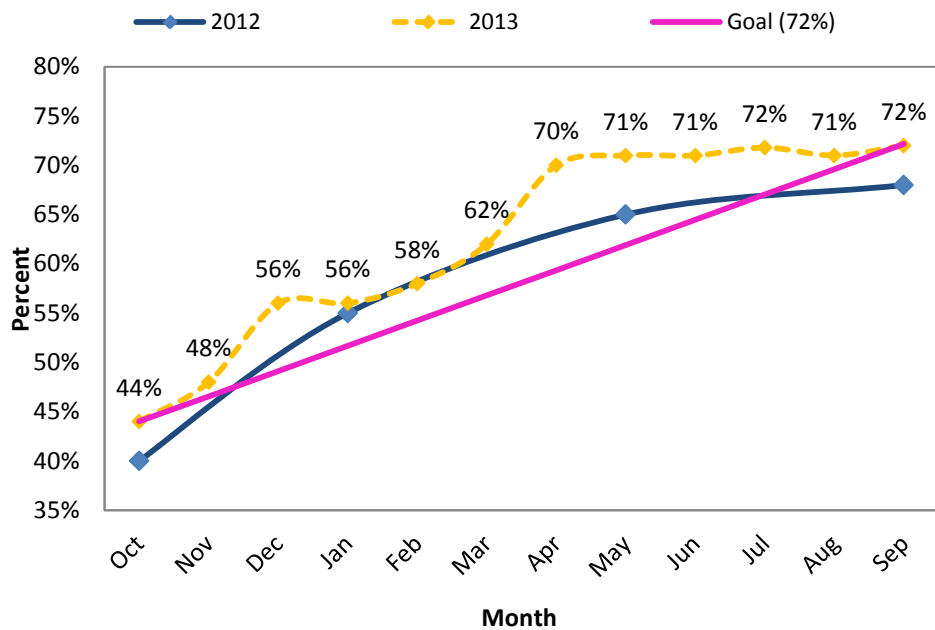
Colorado Refugee Services Program (CSRP)

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: 1,486

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

Goal: **↑ 72% (Annual State Goal)**



Trend: This measure performed at or above the FFY2012 level throughout FFY2013

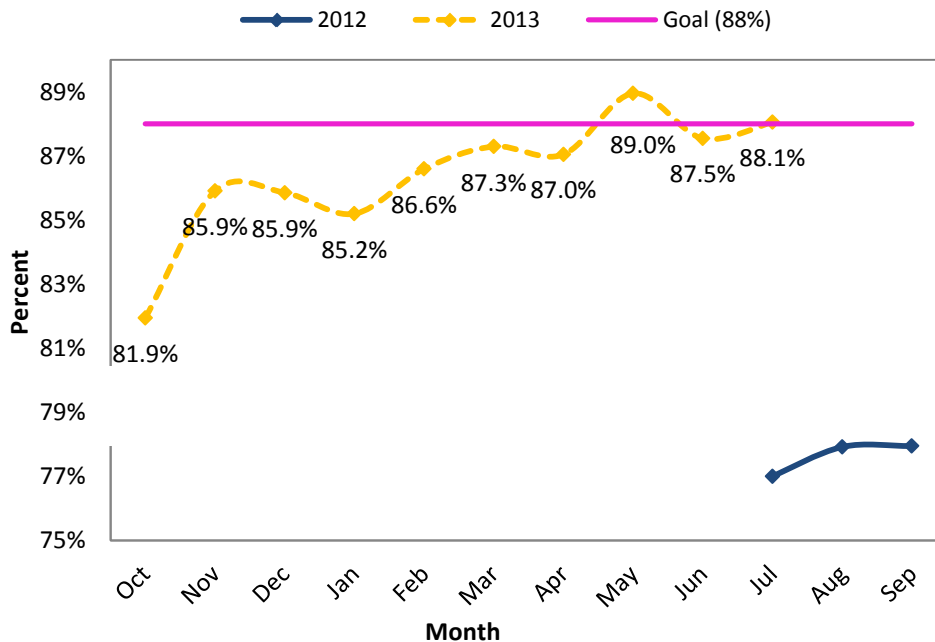
Colorado Refugee Services Program (CSRP)

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: 871

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

Goal: **↑88% (State Goal)**



Trend: There is significant performance improvement in FFY2013 over previous year with continued upward trajectory.

Note: Data runs in arrears; 90 days must be completed by the participant before retention is reported to the Volunteer Agency, who in turn reports to CRSP.

Colorado Refugee Services Program (CSRP)

Measure: **Language progression**

How it is measured:

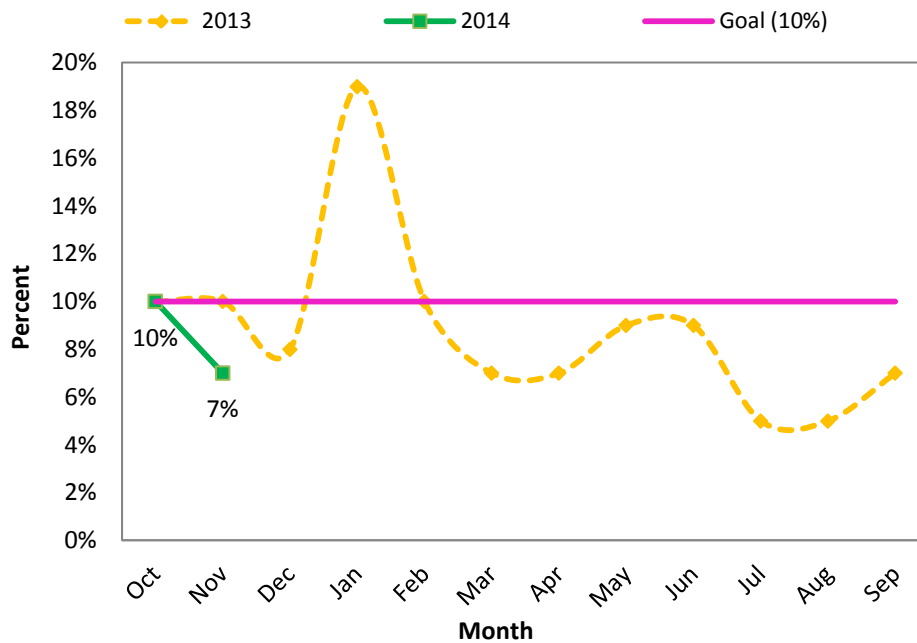
Numerator: Number of students advancing one level of English proficiency in a month

Denominator: Total number of students enrolled in ESL class on the first day of the month; Average monthly denominator: 228

Why this matters:

Acquiring English language skills increases a refugee's likelihood of meaningful employment, and long-term economic security.

Goal: **↑10%**



Trend: The performance of this measure is below FFY2013.

Employment and Benefits Division

Summary

Description

The Employment and Benefits Division 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 on-going cash benefits. Clients who are job-ready are required to participate in work activities in order to receive ongoing cash assistance payments. Colorado Works and Adult Financial programs are administered at a local level, through county human service offices across the state.

Director: Levetta Love

Executive Summary

- *New Colorado Works Applications Processed in 7 Days or Less and Timely Colorado Works Redetermination Applications:* Colorado Works is currently under a court settlement in which the program must attain and sustain 95% timely new applications and redetermination applications processing goals. The 95% timeliness goal for new applications has been exceeded for nearly two years. The current measure *New Applications Processed in 7 Days or Less* 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.
 - Colorado Works and Food Assistance programs are undergoing a Business Process Reengineering process (BPR) facilitated by a contractor, the Change and Innovation Agency (CIA), intended to improve processes and customer service by increasing the speed and accuracy of applications and redeterminations.
- *Timely Adult Financial New Applications:* The Division continues to exceed the goal since surpassing it in August 2013.
- *Timely Adult Financial Redeterminations Applications:* Adult financial redetermination applications has seen a significant (10 percentage point) drop in performance while Colorado Works RRRs has continued to remain within a few percentage points of reaching the goal.

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](#)

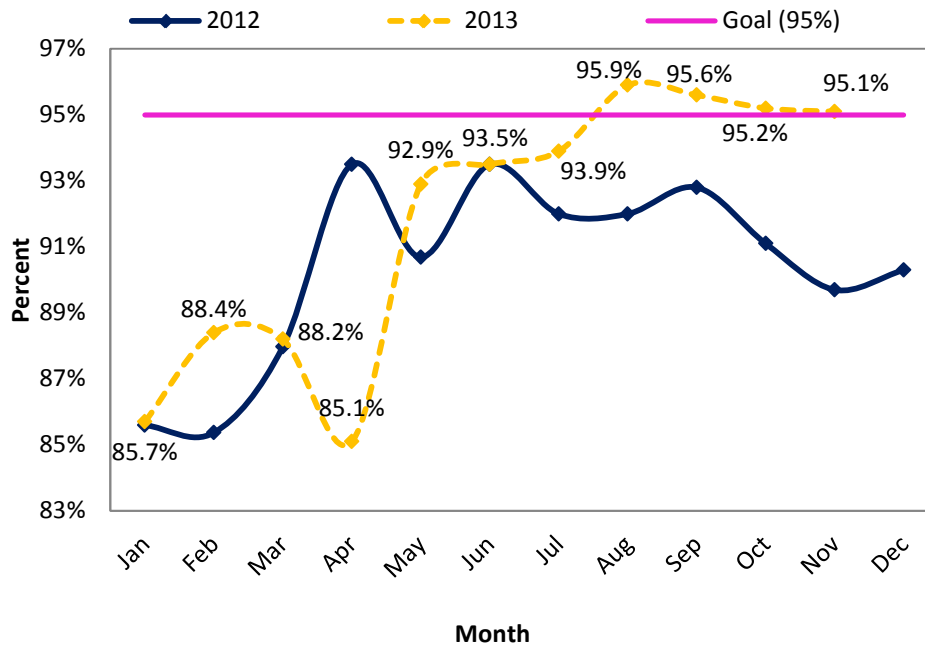
Employment and Benefits Division

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: 2,465

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

Goal: **↑95%**



Trend: There is a small decline over the quarter, though the performance has remained above the goal for the entire quarter. The measure continues to outperform 2012 rates.

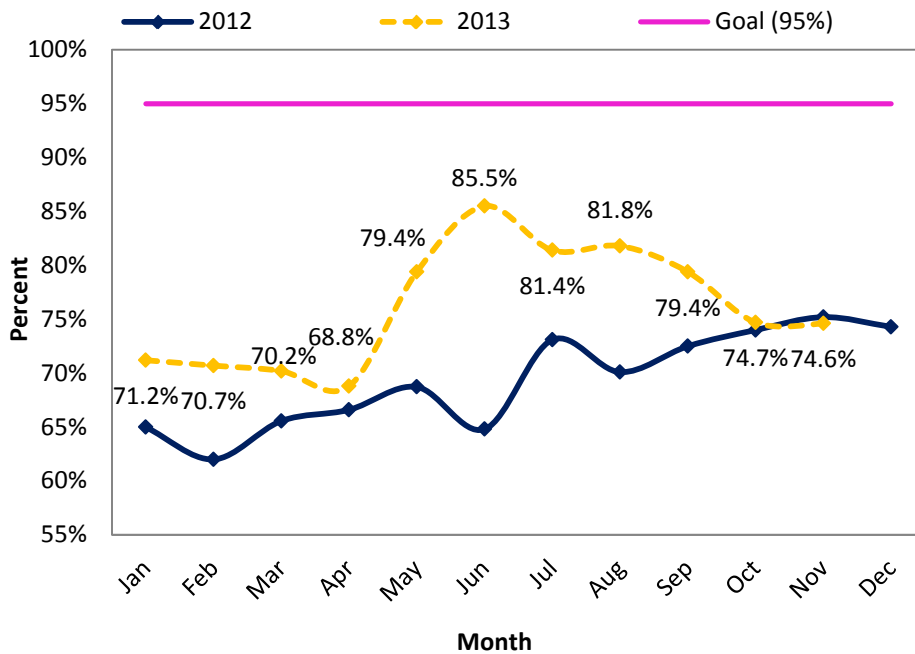
Employment and Benefits Division

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: 1,284

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

Goal: **↑95%**



Trend: After two quarters of performance far outpacing 2012, a sustained decline began in July 2013, dipping performance to below 2012 levels for two straight months in this quarter.

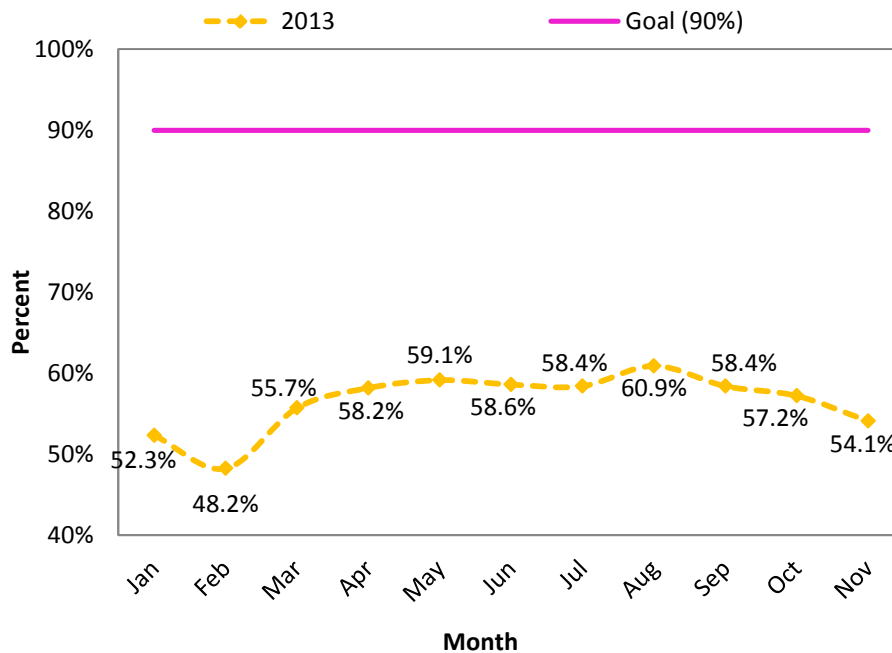
Employment and Benefits Division

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: 2,800

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: A trend downward has been in place each month this quarter.

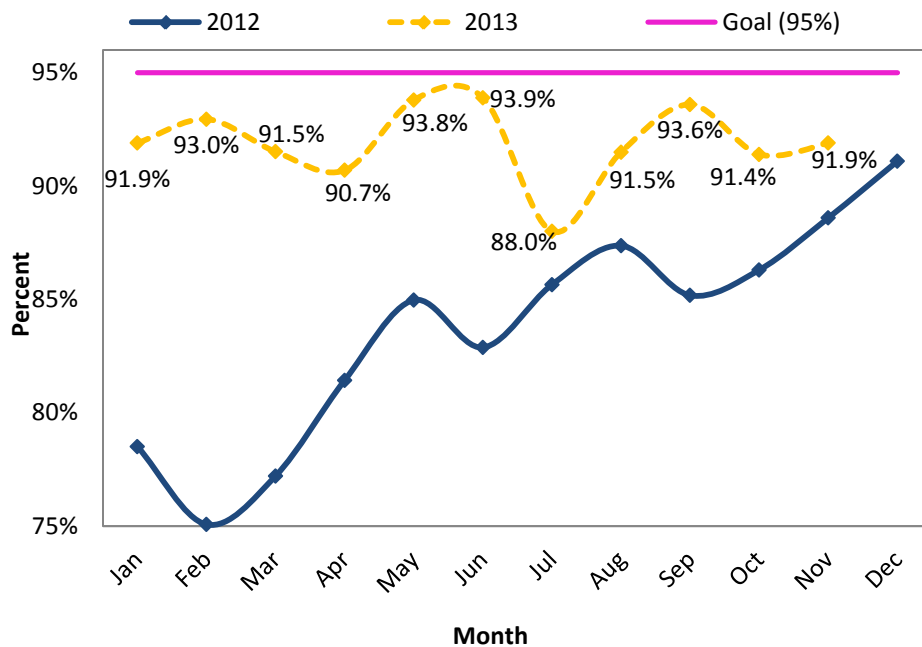
Employment and Benefits Division

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

How it is measured: *Numerator:* Number of redetermination applications processed timely
Denominator: Number of redetermination applications; Average monthly denominator: 681

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: Performance is consistently under the goal of 95%. Performance has stayed within a 5% range since the beginning of the year and has been within 4% of the goal in 9 of 11 months so far this year.

Food and Energy Assistance

Summary

Description

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

Director: Sue McGinn

Executive Summary

- *New Applications Processed in 7 Days or Less, Timely Expedited Applications, and Timely Redetermination Applications:* Food Assistance is also currently under a court settlement in which the program must attain and sustain 95% in timely processing for timely new applications, timely expedited applications and timely redetermination applications for 12 consecutive months. The timely new applications goal was met (and is continuously tracked by the Division) so the percentage of *New Applications Processed in 7 Days or Less* is tracked and presented as the C-Stat measure. 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.
 - Colorado Works and Food Assistance programs are undergoing a Business Process Reengineering process (BPR) facilitated by a contractor, the Change and Innovation Agency (CIA), intended to improve processes and customer service by increasing the speed and accuracy of applications and redeterminations.
- *Expedited and Redetermination* applications saw significant declines in performance this quarter. In both measures the declines are associated with the late summer floods, the Affordable Care Act (ACA) roll out, and the annual Cost of Living Adjustment (COLA) creating increased workloads and subsequent backlogs of a large number of cases. This has the potential to create a ripple effect across a number of measures for some time to come.
- *Payment Error Rate:* If the State of Colorado's error rate for all 64 counties is above the national average, then the State may be sanctioned by the United States Department of Agriculture Food and Nutrition Services. The sanction will depend on the number of percentage points above the national average and misspent dollars. The error rate remains high but below the 6% threshold.

Measures

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

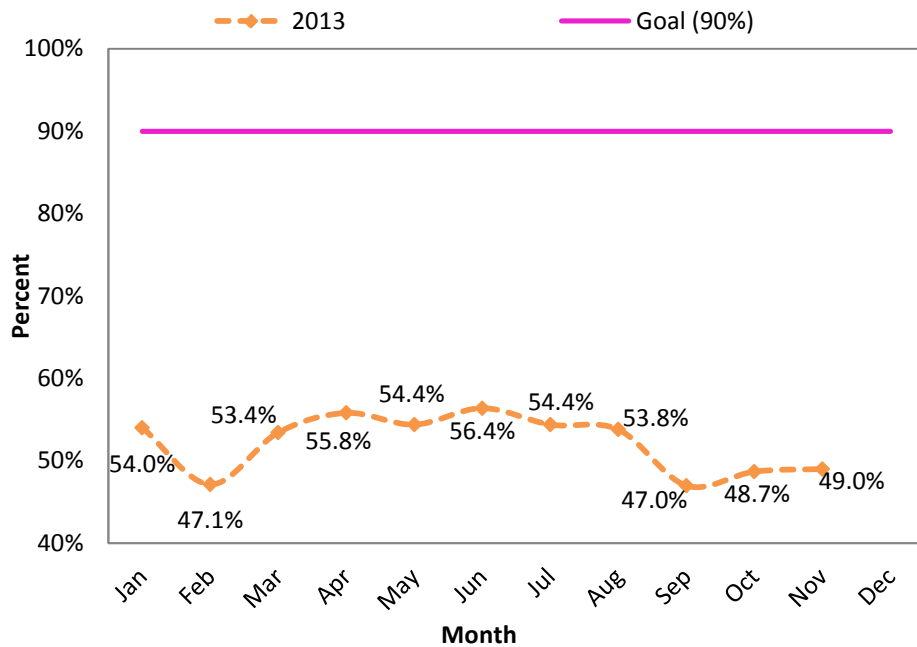
Food Assistance (FA)

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: 12,684

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: Performance over this quarter was lower than the previous quarter.

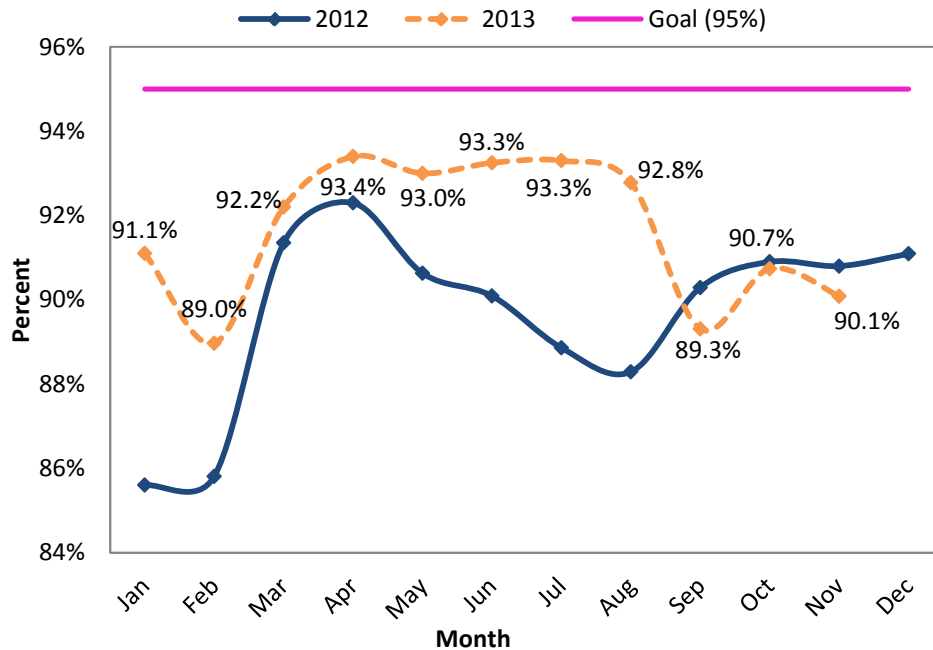
Food Assistance (FA)

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: 9,497

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: Performance demonstrated a relatively large drop in September which remained for the rest of the quarter. This is down from the strong performance seen in the last two quarters.

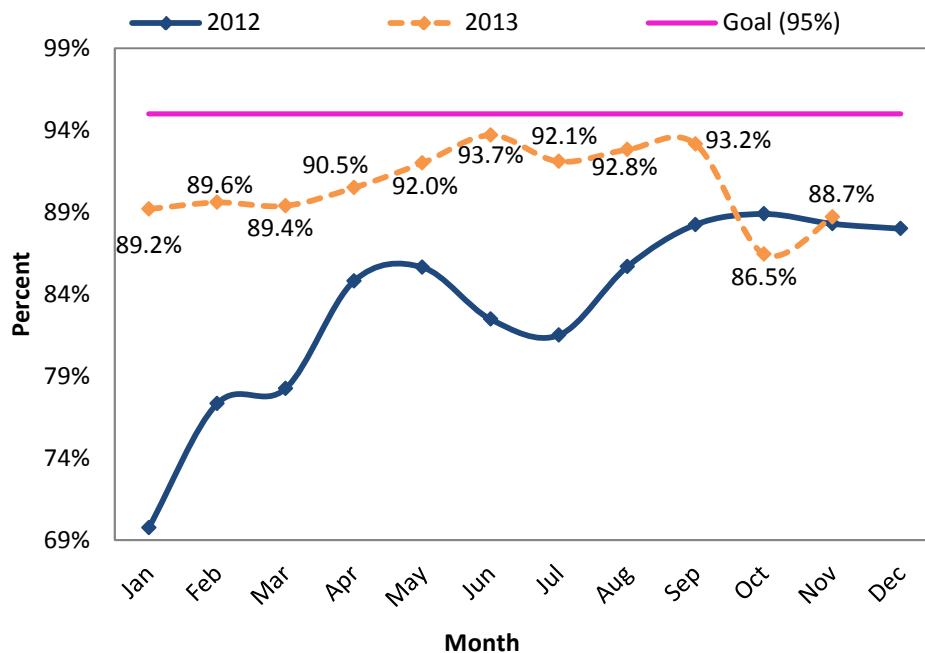
Food Assistance (FA)

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: 18,589

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: Rates started the quarter with an upward trend, but fell nearly seven percentage points, with a slight recovery in November.

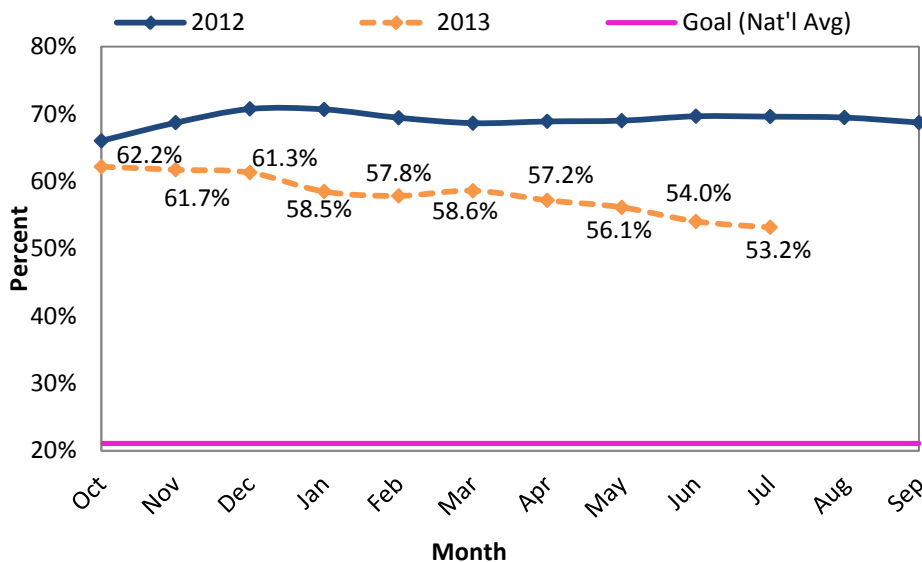
Food Assistance (FA)

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: 651

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: Rates have been above the national average since October 2012, but trending steadily downward. Performance has shown a drop of 10 percentage points since the beginning of FFY2013.

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. System changes put into place in October 2013 should result in a steady, continual decline in the error rate, though it is not expected to bring Colorado down to the national average without additional changes and targeted training efforts.

Food Assistance (FA)

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

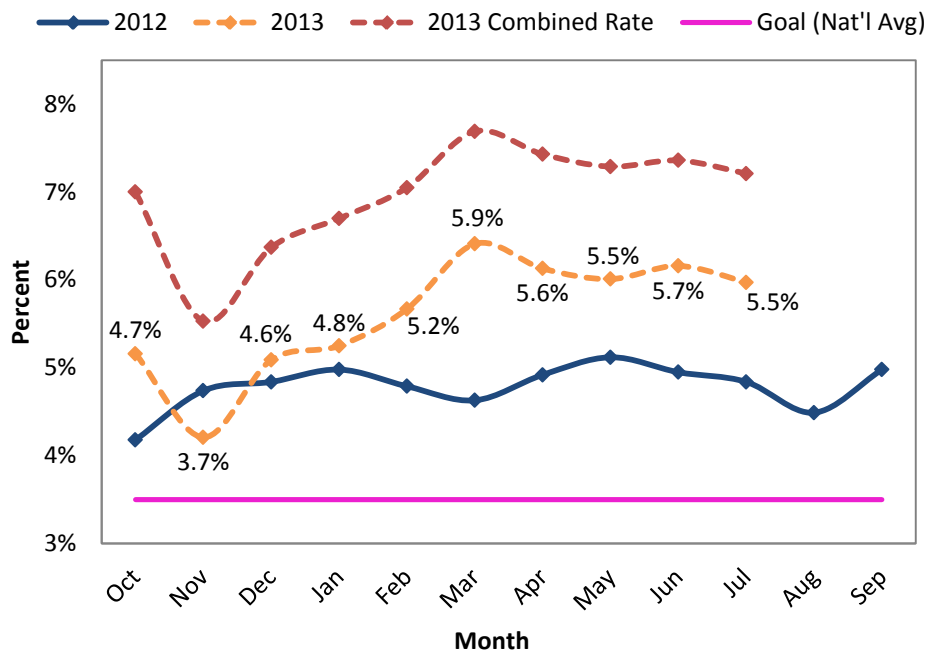
How it is measured: *Numerator:* The cumulative total dollar amount of unauthorized benefits in the sample

Denominator: Cumulative total authorized benefits in the sample; Cumulative denominator: \$247,022

Note: 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).

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

Goal: **↓ Below national average**



Trend: Rates remained flat for the quarter, ending at 5.5%.

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 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. LEAP is a seasonal program; no applications are accepted before October or after April.

Director: Sue McGinn

Program Manager: Aggie Berens

Executive Summary

- *Timeliness of Regular Applications* and the *Timeliness of Emergency Applications* : LEAP monitors the average number of days it takes to process both regular and emergency applications.
 - Beginning this season, LEAP began reporting performance data for the ten largest and balance of state counties in the C-Stat meeting.
 - The Division has a goal this season of mitigating the large spike in untimely applications seen at the end of the season. There is an understanding that much of the lag in May and June is due to reassignment of staff or termination of temporary contractors and to counties delaying denials of cases.

Measures

- [Timely Regular Applications](#)
- [Timely Expedited Applications](#)

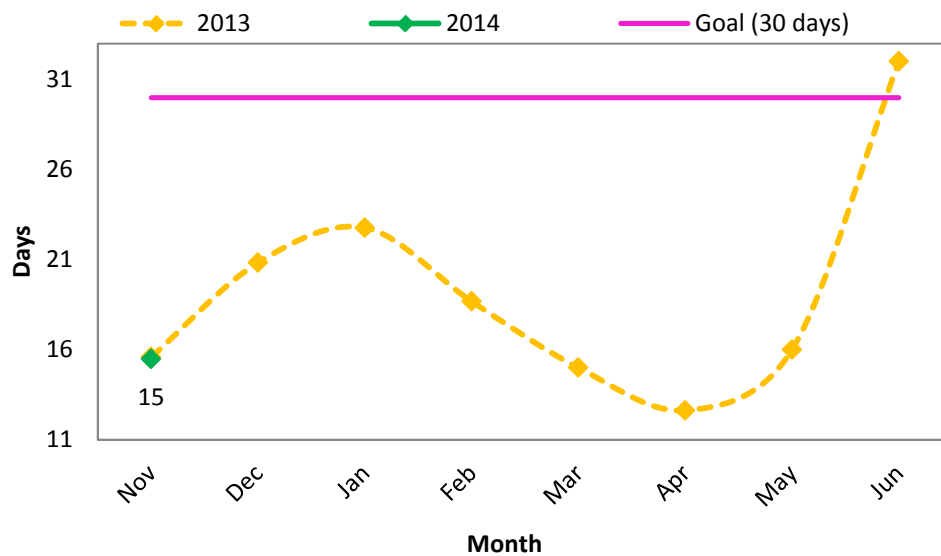
Food Assistance Program: Low-Income Energy Assistance Program (LEAP)

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: 18,565

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: Starting the 2014 season at the same level of performance seen last year.

Note: Leap Season begins in November, meaning only one month is available to report in this quarter.

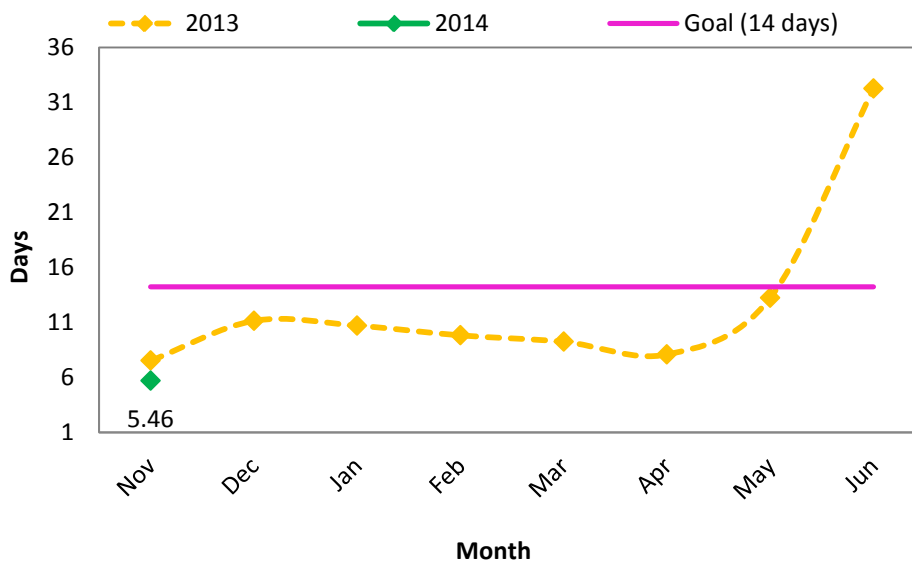
Food Assistance Program: Low-Income Energy Assistance Program (LEAP)

Measure: **Timeliness of expedited applications**

How it is measured: *Numerator:* Number of days to process expedited applications
Denominator: Total number of expedited applications; Average quarterly denominator: 3,263

Why this matters: Timely processing of expedited 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: ↓14 Days



Trend: Starting the 2014 season with a slightly lower average than last year.

Note: Leap Season begins in November, meaning only one month is available to report in this quarter.

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 (APS) and Long Term Care Ombudsman programs.

Acting Director: Todd Coffey

Executive Summary

- *Timely Adult Protection Inquiries*: One performance measure, within the program area of protection and advocacy, continues to be examined on a monthly basis. This program is delivered, locally, at the county level.
 - In December 2013, the performance goal for timely adult protection inquiries was increased from 90% to 95%. 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](#)

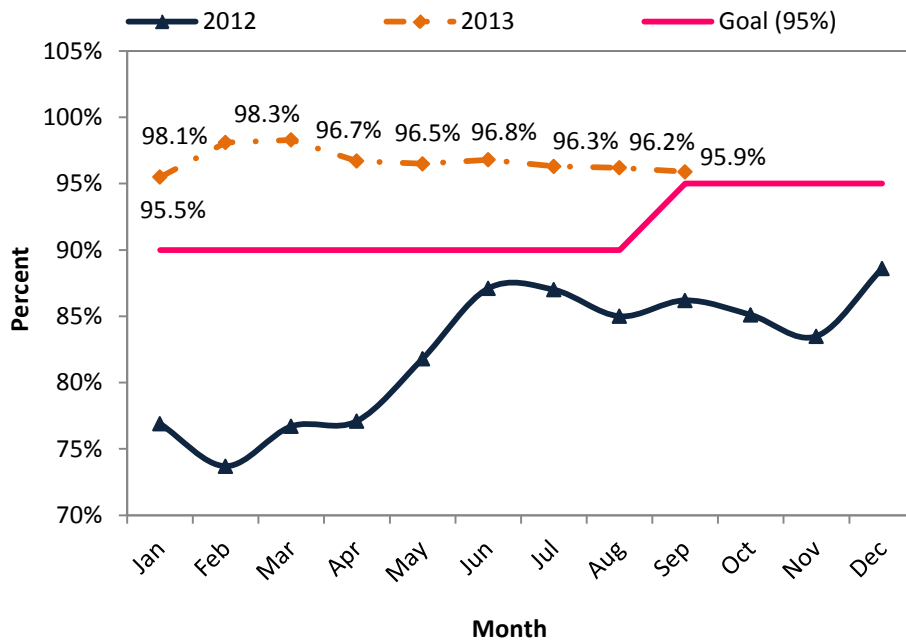
Aging and Adult Services (AAS)

Measure: **Timely adult protection inquiries**

How it is measured: *Numerator:* Number of timely responses
Denominator: Number of responses; Average monthly denominator: 613

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

Goal: **↑95%**



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

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

Goal was changed to 95% beginning in the December 2013 C-Stat meeting which reflects September data.

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 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

- *Participants Receiving Supported Employment in 1) Group and Individualized Settings and 2) Individualized Settings*: DDD has identified two performance measures in the area of adult programming to be examined on a monthly basis related to supported employment (SE).
 - 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.
 - 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](#)

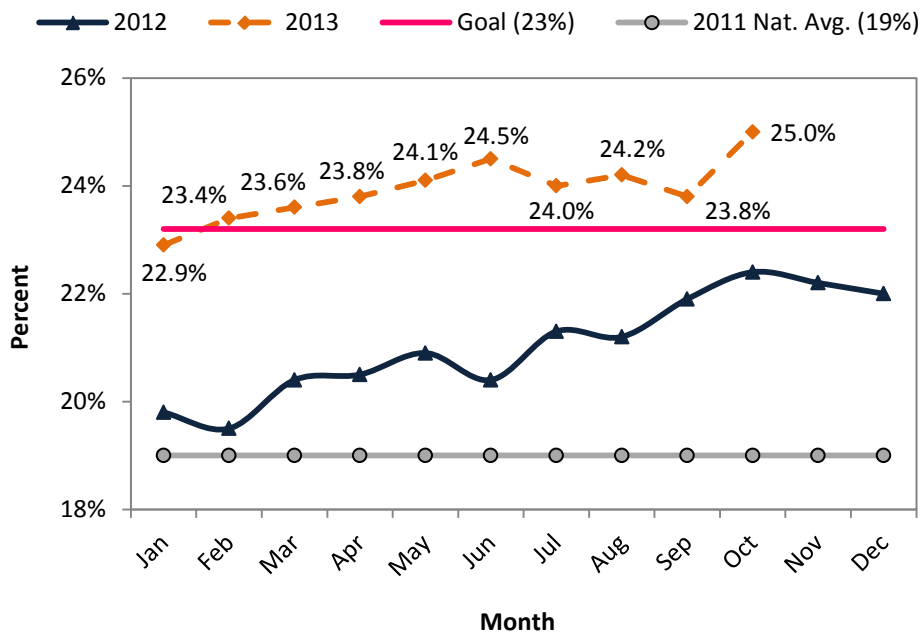
Developmental Disabilities Division (DDD)

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: 6,234

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, with highest performance to date in October 2013.

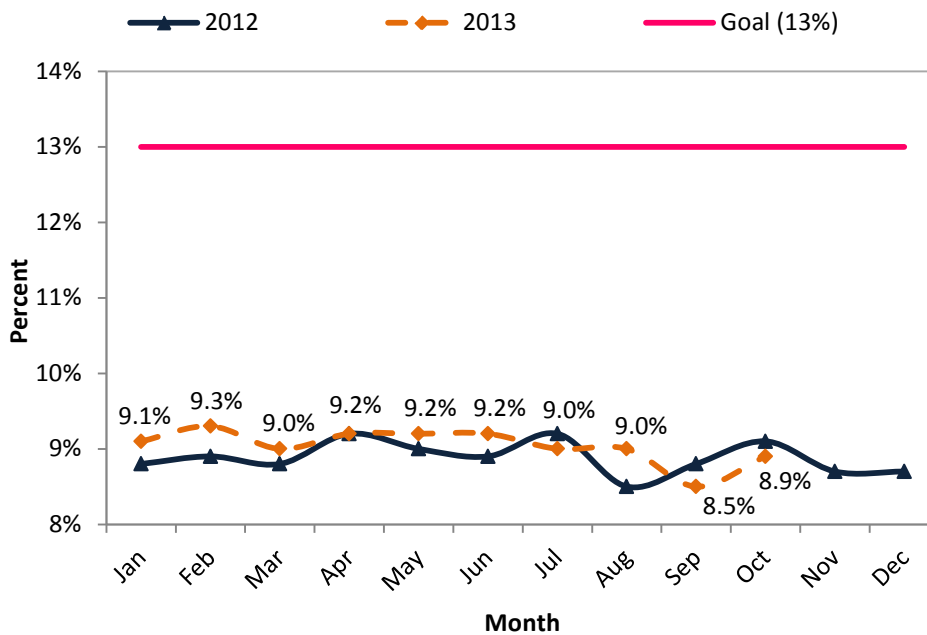
Developmental Disabilities Division (DDD)

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: 6,234

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 relatively stable, fluctuating between 8.5% and 9.0%.

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

- *Examiner Processing Time*: In November 2013, the performance goal for this measure was decreased from 49.1 days to 44.0 days.
- *Percentage of Accurate Initial Eligibility Decisions*: DDS is modifying the structure and scope of their internal quality assurance (QA) program beginning in December 2013. The essence of the modified program is a more proactive QA strategy that includes:
 - Targeted sampling based on continuously updated profiles of Federal returns;
 - Improved statistical methodology behind sampling plan; and
 - Expansion on the in-process (in-line) review program.

Measures

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

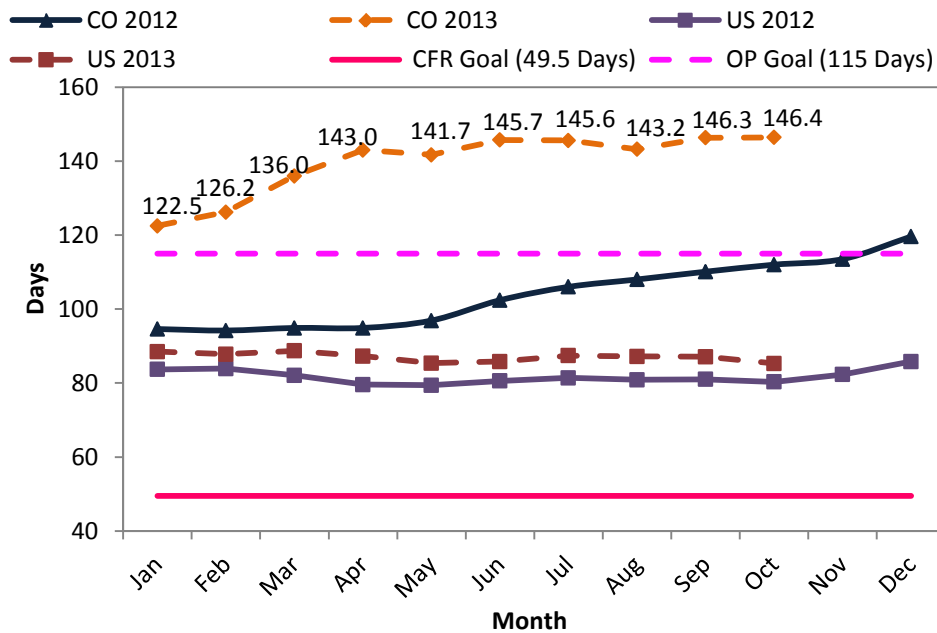
Disability Determination Services (DDS)

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: 3,264

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.

The 49.5 day federal goal is based on the Code of Federal Regulations (CFR). For FFY 2014, the SSA consolidated operating plan (OP) contains a mean processing time goal of 115 days. DDS has added this goal to their measure for tracking purposes.

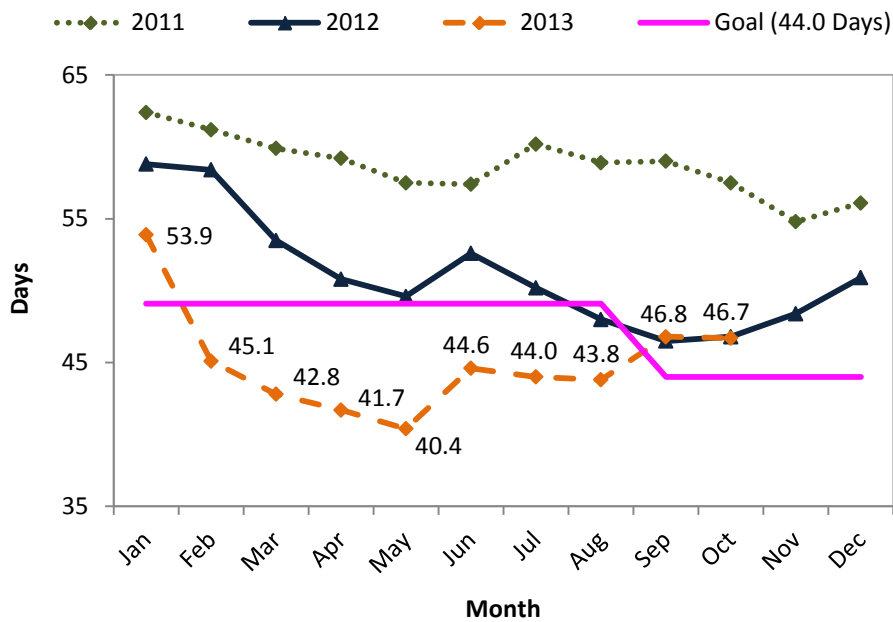
Disability Determination Services (DDS)

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: 3,190

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

Goal: **↓44.0 days**



Trend: In the most recent quarter, performance has declined on this measure, no longer meeting the goal.

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

The goal was changed to 44 days beginning in the November C-Stat 2013, which reflects September data.

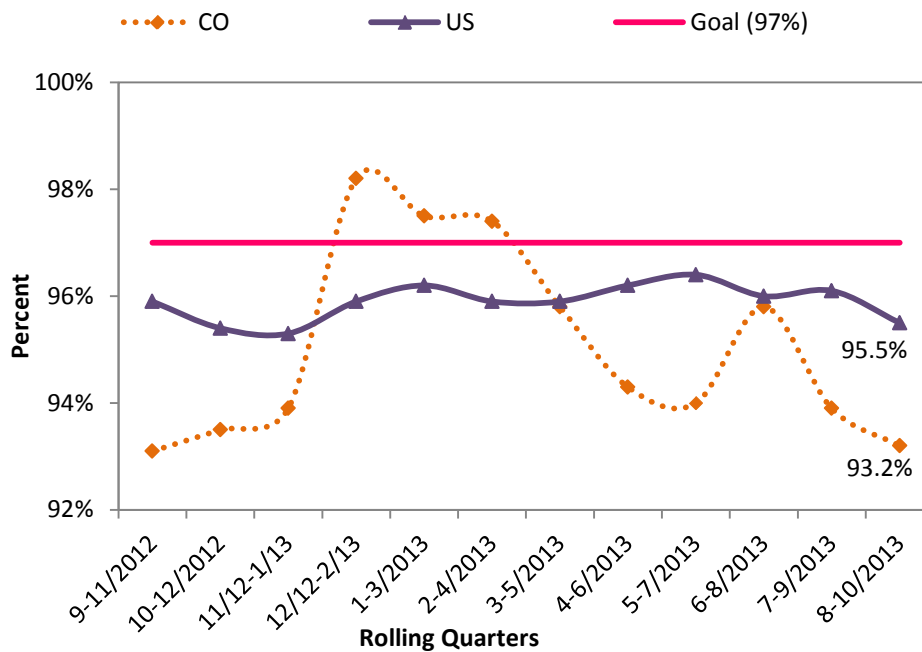
Disability Determination Services (DDS)

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: 144

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: In the most recent quarter, performance on this measure has remained relatively static, with continued 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 (WRRC), 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.
- *Length of Time to Become Ready for Transition/Discharge* and *Length of Time to Transition/Discharge*: These measures are examined for both the Short-Term Treatment and Stabilization model and the Intensive Treatment model. DRCO has recently implemented a dashboard which alerts staff to whether individuals are on schedule to become ready within the time frame of the goal and to transition to the community within the time frame of the goal. This information is reviewed regularly to determine which individuals are at-risk of exceeding the goal, or are already exceeding the goal. It then allows staff to develop a strategy to determine readiness for an individual or to transition “ready” individuals to the community. This dashboard allows DRCO to better examine reasons for not meeting set goals and to better identify barriers to transition.
- *Length of Time to Transition/Discharge*: This measure is examined for the Long-Term Habilitation service model.
- With regard to the *Length of Time to Transition/Discharge* measures, for all models, DRCO has partnered with DDD to focus on three initiatives: 1) conducting Support Level reviews to allow an enhanced rate during a transitional period for those individuals who are difficult to transition due to challenging behaviors, 2) identifying transition coordinators at each CCB who are responsible for facilitation of community transitions, and 3) developing a Community Transition Initiative that incorporates Colorado Department of Health Care Policy and Financing (HCPF) Community Transition Services, under the Colorado Choice Transitions program, as well as takes advantage of the enrollments reserved in the DDD waiver for DRCO transitions.
- The performance measure of *Decreased Use of Physical Interventions (PIs)* is collected cumulatively for all treatment/service models and is displayed by Regional Center.
 - The baseline for number of PIs was revised in December 2013. Baseline data collected reflects the time period from January 2013 to June 2013.
 - The following system-wide changes have impacted performance on this measure: 1) greater management emphasis on reviewing each PI incident report and discussing reasons behavior has occurred to better develop interventions to reduce specific behaviors, 2) the incident report

form has been revised and improved to better prompt staff to detail behavior antecedents, proactive interventions attempted and de-escalation methods applied to avoid physical interventions, 3) new emphasis on alternative interventions, such as blocking and giving residents space, and 4) implementation of a plan for Verbal Defense Influence drills.

Measures

- 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](#)
- [Decreased Use of Physical Interventions](#)

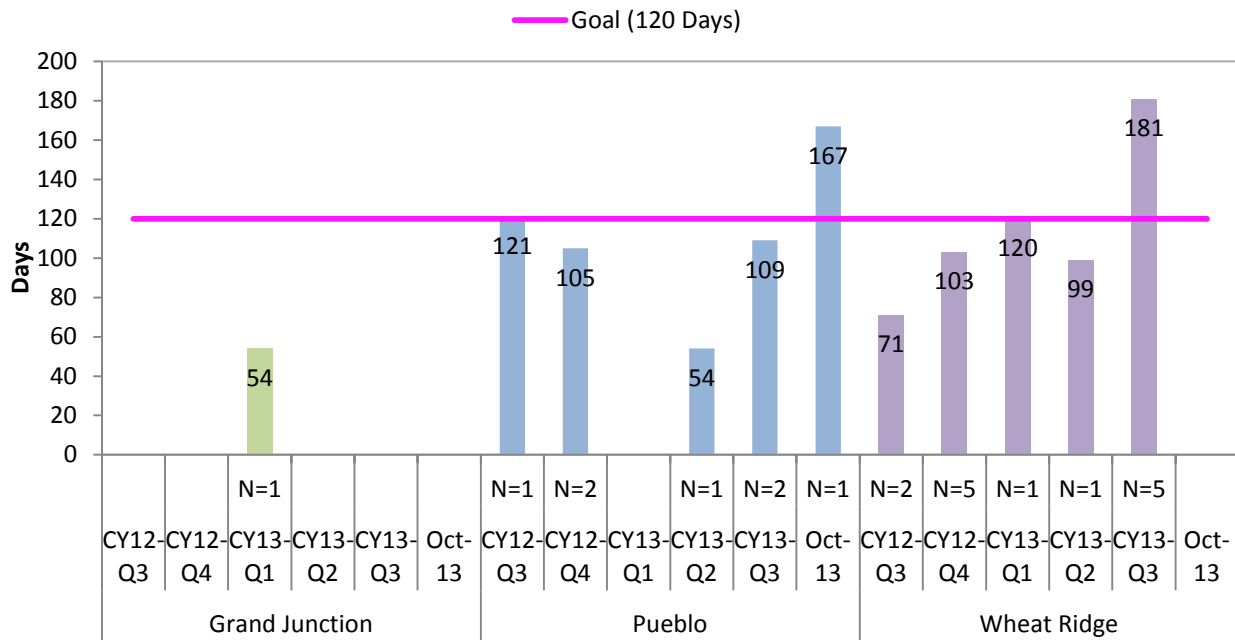
Division of Regional Center Operations (DRCO)

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: Seven individuals became ready for transition/discharge in the most recent quarter (Aug. 2013-Oct.2013). Performance on this measure is often below the goal, with a few exceptions.

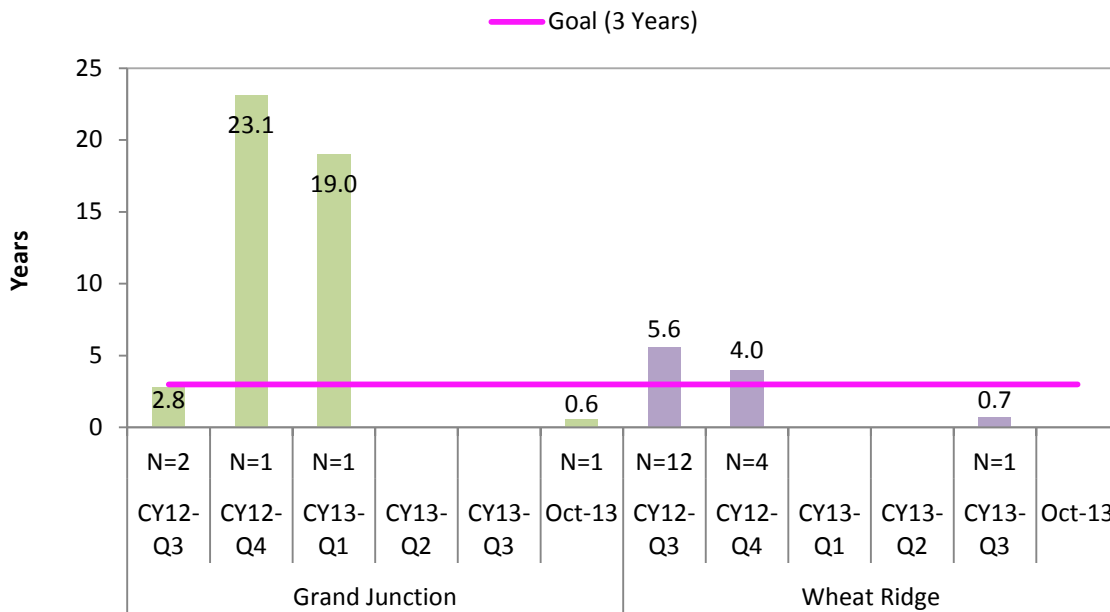
Division of Regional Center Operations (DRCO)

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 (Aug. 2013-Oct.2013). While performance on this measure is often above the goal, it fell below in the last quarter. It is, however, trending in a positive direction.

Notes: PRC does not offer the Intensive Treatment model.

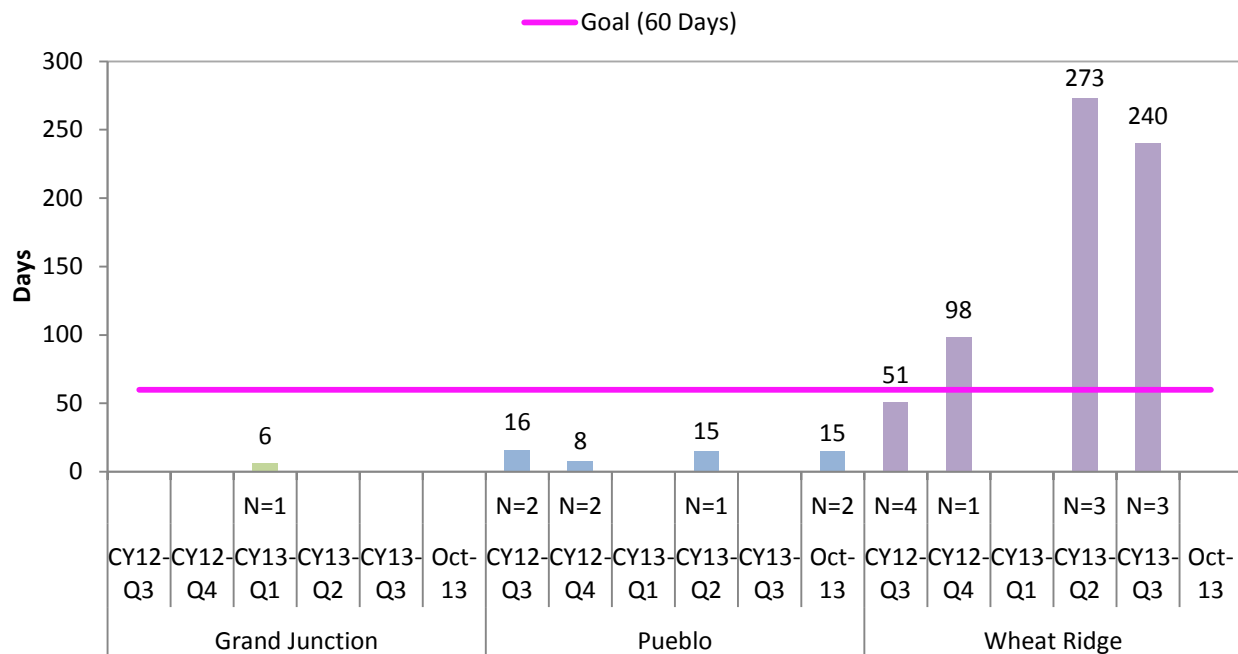
Division of Regional Center Operations (DRCO)

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 (Aug. 2013-Oct.2013), two individuals transitioned from the DRCO with length of time to transition/discharge well-below the goal.

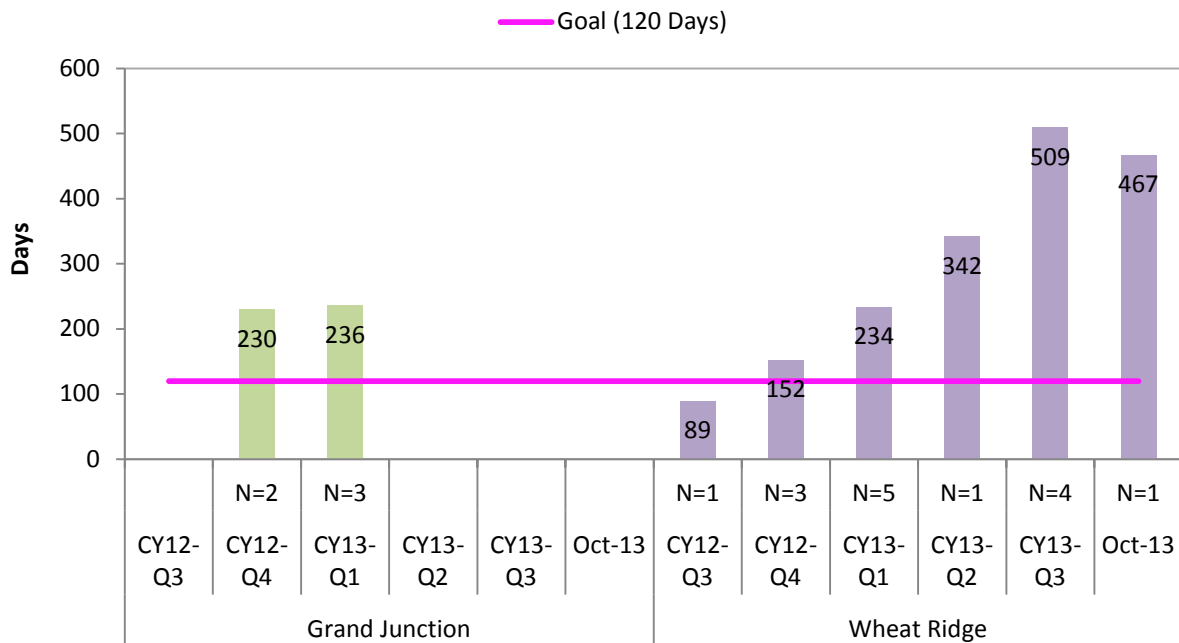
Division of Regional Center Operations (DRCO)

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 (Aug. 2013-Oct.2013). Performance on this measure is often above the goal.

Notes: PRC does not offer the Intensive Treatment model.

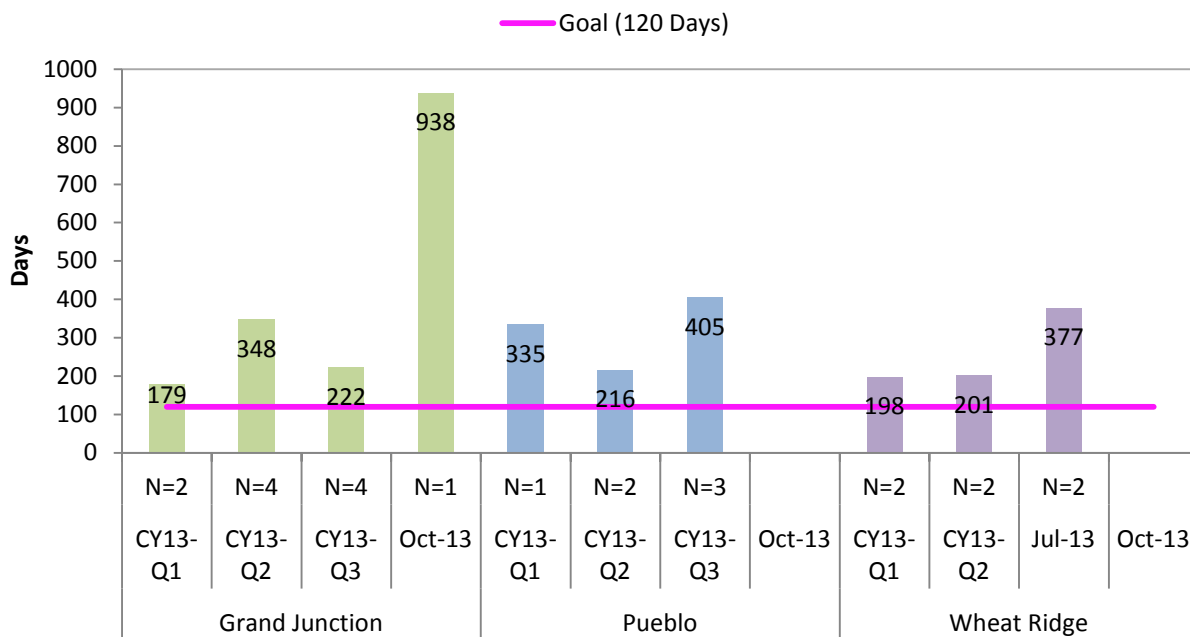
Division of Regional Center Operations (DRCO)

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 (Aug. 2013-Oct.2013), five individuals transitioned, from the DRCO, with lengths of time to transition/discharge well above the goal.

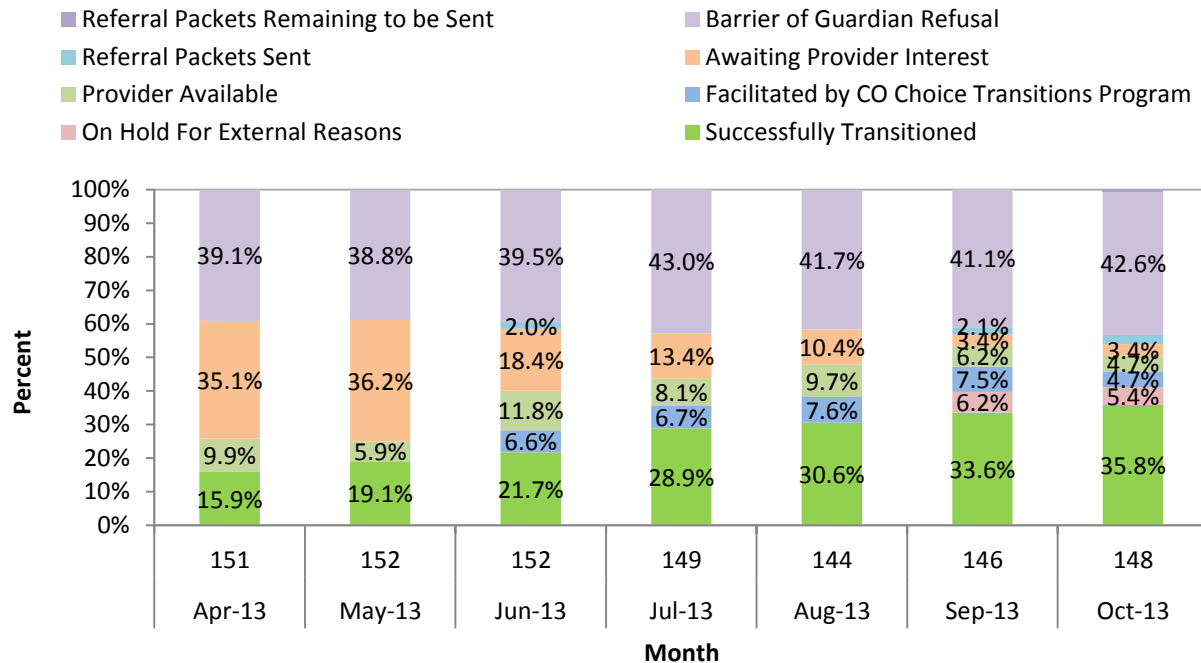
Division of Regional Center Operations (DRCO)

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; referral packets sent; awaiting provider interest; provider available; facilitated by CO Choice Transitions Program; on hold for external reasons; 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 (Aug. 2013-Oct.2013).

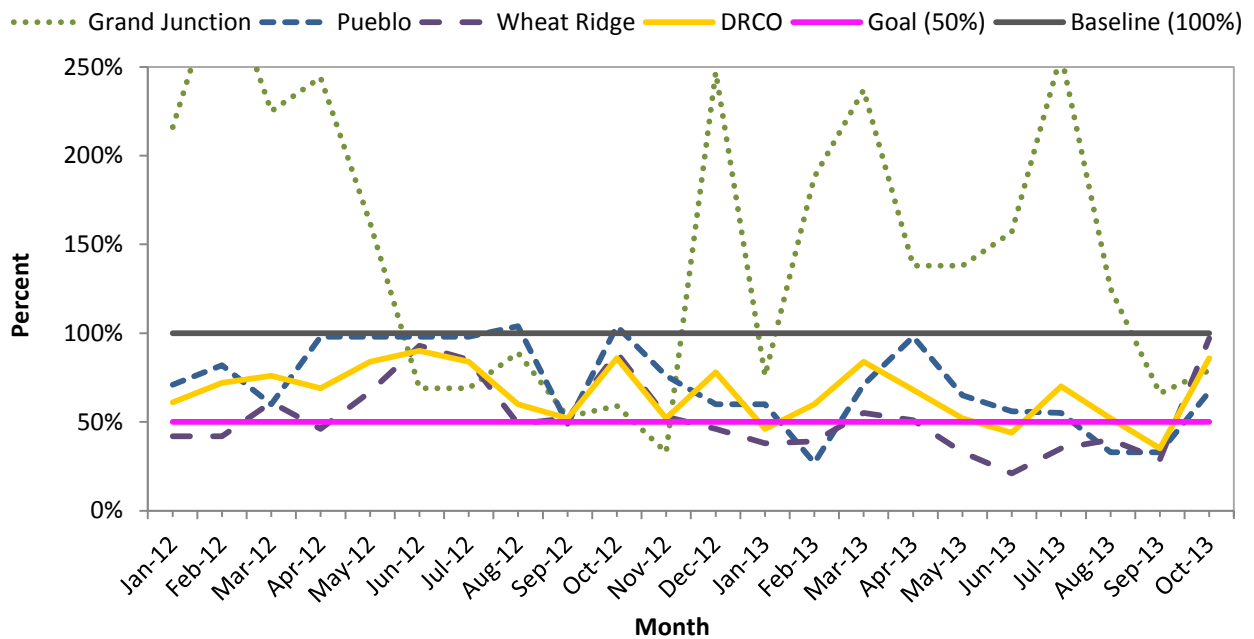
Division of Regional Center Operations (DRCO)

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: 47, Pueblo: 12, Wheat Ridge: 59, DRCO: 118

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 35% and 86%.

Notes: The baseline for number of physical interventions was revised in December 2013. Baseline data collected reflects the time period from January 2013 to June 2013.

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: Viki Manley

Executive Summary

- *Percent of Residents without Falls by Home:* In September 2013, all State Veteran's Nursing Homes participated in a LEAN Rapid Improvement Event focused on improving processes related to the *Percent of Residents without Falls by Home* measure. As a result of the event, SVNH has implemented action steps and activities over the past quarter including, but not limited to: 1) enhancement and standardization of the pre-admissions form, the Summarized Admission Notification form, the "Fall Information Sheet" and the checklist for Housekeeping staff, 2) prioritization of assessments related to falls within the first 72 hours of a new resident's arrival and 3) communication about incoming admissions, at least 24 hours before arrival, in daily huddles.

Measures

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

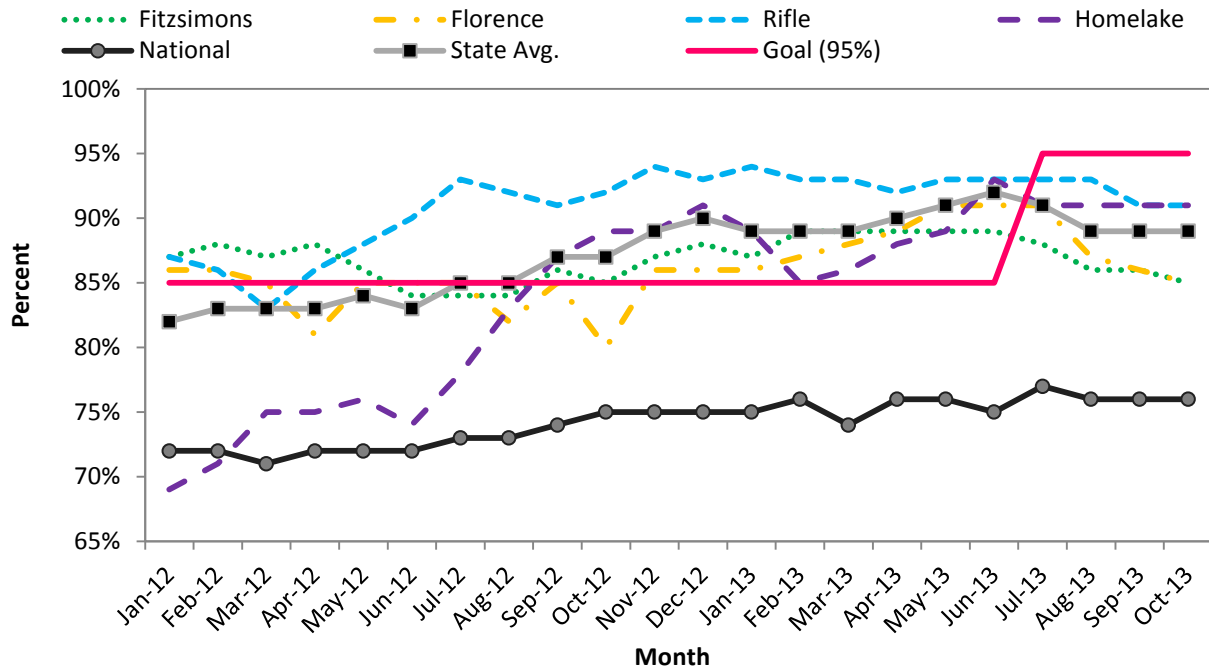
State Veterans Nursing Homes (SVNH)

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: 173, Florence: 93, Rifle: 69, Homelake: 56

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 at 89%.

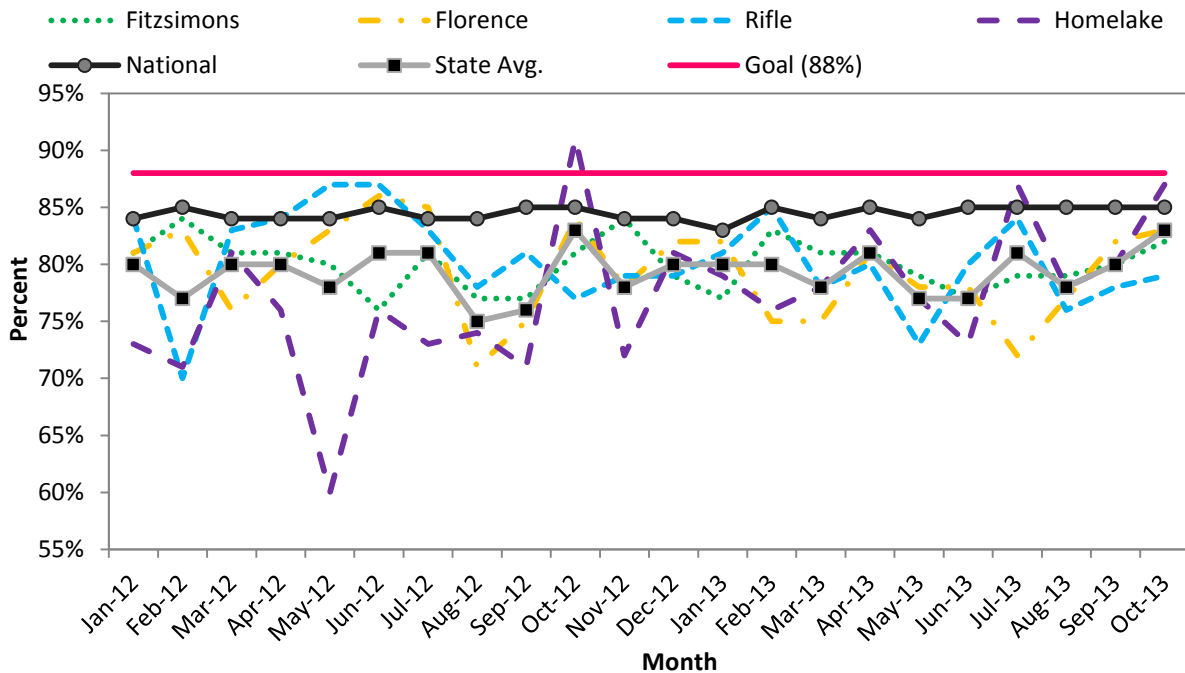
State Veterans Nursing Homes (SVNH)

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: 173, Florence: 93, Rifle: 69, Homelake: 56

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: In the most recent quarter, overall performance on this measure has seen steady improvement, with all Homes experiencing an increase in performance.

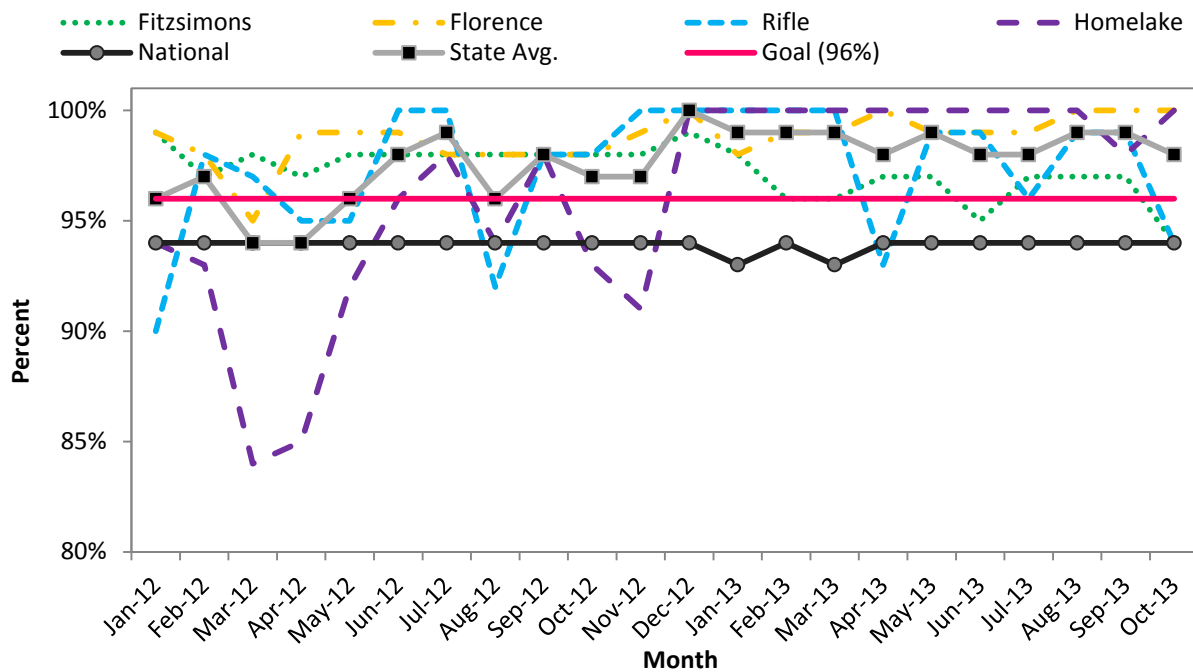
State Veterans Nursing Homes (SVNH)

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: 173, Florence: 93 Rifle: 69, Homelake: 56

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: In the most recent quarter, overall performance on this measure has remained above the goal line; however, Fitzsimons and Rifle experienced a decrease in performance in October 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.

Director: Joelle Brouner

Executive Summary

- *Case Closure by Type:* For the quarter represented in this report, DVR staff has been engaged in a file review of 6,000 cases. As part of this review, cases appropriate for closure (that may have been left open, in during service status, for long periods of time) are being closed, not always successfully, resulting in the significant decrease in successful closures.
- *Competitive Employment Wage:* For the quarter represented in this report, DVR conducted an in-depth analysis to determine the relationship between age and wage earnings.
 - The analysis demonstrated that DVR consumers 25 years of age & younger, which accounts for 36% of all successful, competitive employment outcomes, earn, on average, 27% less per hour (or \$3.49 less) compared to DVR consumers who are 26 years of age & older. At the same time, when DVR compared this data to data from the Colorado Department of Labor and Employment (CDLE), for the general population, results showed that wages for DVR consumers aged 25 & younger were not significantly different.
 - In comparison, while DVR consumers aged 26 & older earn an average hourly wage above the goal for this measure, when compared to their counterparts in the general population, their earnings were significantly lower. This was determined to be a substantial contributor to the gap in wages between the DVR and general populations.

Measures

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

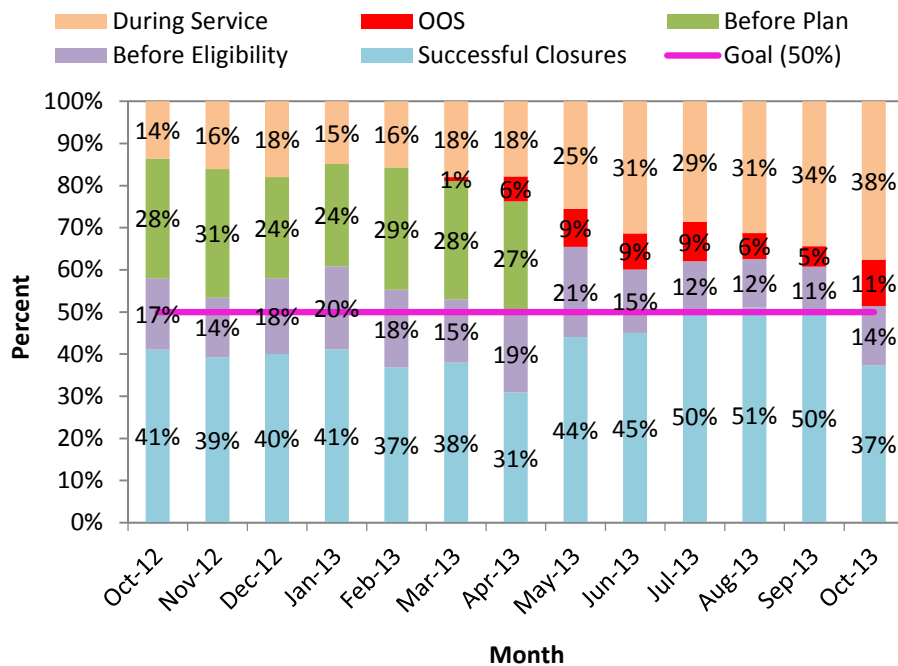
Division of Vocational Rehabilitation (DVR)

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: 493

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

Goal: **↑Successful closures at 50%**



Trend: After meeting the goal, for this measure, in the first two months of the most recent quarter, DVR experienced a sharp decline in performance.

Note: Due to the Order of Selection Waiting List, there are no “Before Plan” closures beginning in May 2013. In its place, a new cohort of closures was introduced which demonstrates those individuals who formally withdraw from the waiting list before beginning program participation.

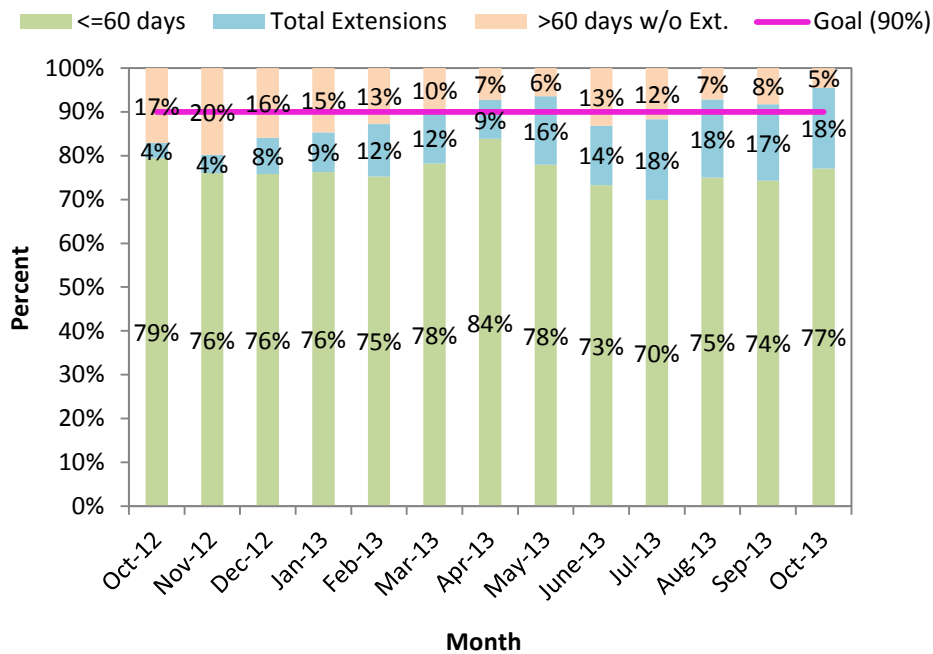
Division of Vocational Rehabilitation (DVR)

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: 354

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: The percent of eligibility determinations taking <60 days increased over the most recent quarter, with the percent of eligibility determinations taking >60 days without an extension at its lowest to date in the last month of the most recent quarter.

Note: Sixty (60) days is the federally-defined processing time for applications without formal extension.

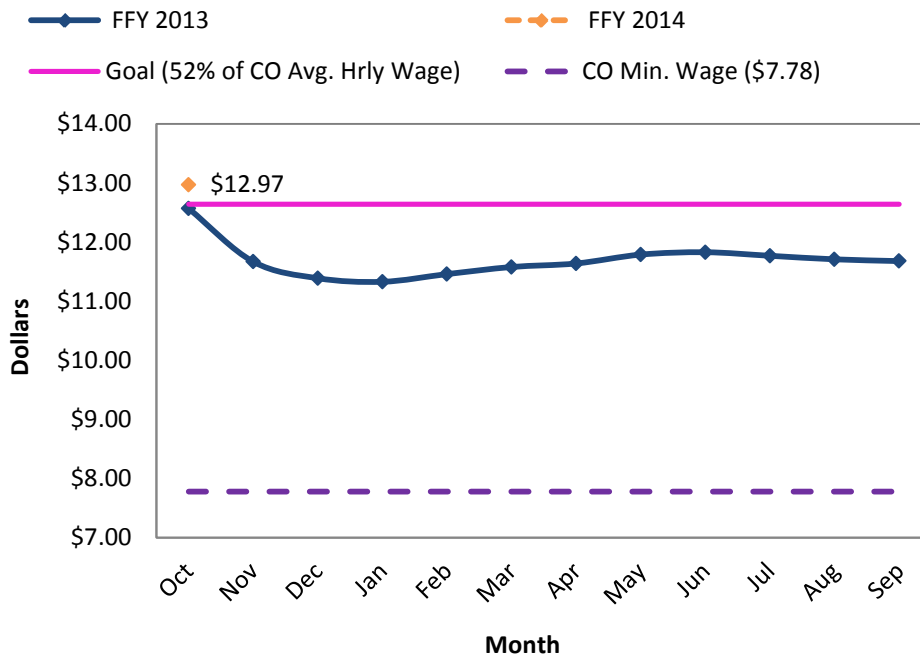
Division of Vocational Rehabilitation (DVR)

Measure: **Competitive employment wages**

How it is measured: Cumulative average hourly wage for competitively employed

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: In the first month of the new FFY(14), performance is trending similarly to the previous FFY(13).