

Colorado Department of Human Services



Summary Report

January – March 2014

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 March 31, 2014. 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 March 2014 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.



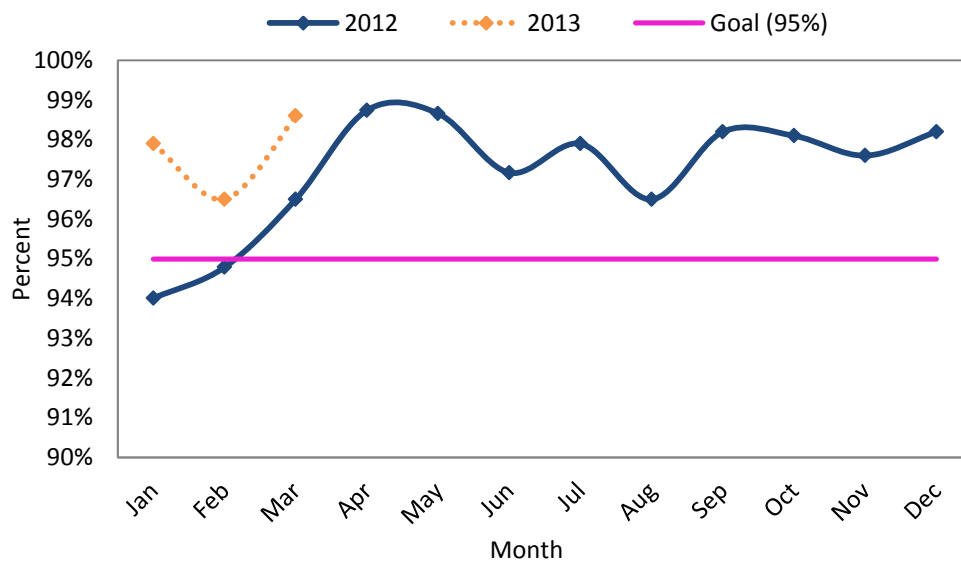
How Do I Read This Report?

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 the 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).

Director: Dr. Lisa Clements

Community Behavioral Health

Summary

Description

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

Director: Dr. Liza Tupa

Executive Summary

Of the five measures within Community Behavioral Health, all showed monthly variation during the past quarter. Important to note are the batch file changes that took place in CCAR and DACODS, the two software tools used to capture, submit, and analyze mental health and substance use data. This transition required providers to resubmit all data under the new format, resulting in delays. The most recent quarter would ordinarily reflect data from November 2013, December 2013, and January 2014. Because of the batch file complications, January 2014 data was underreported by internal C-Stat deadlines. Substance use data was reporting fewer than 20% of data, and mental health data was reporting fewer than 60% of data. Consequently, January 2014 data was not presented at the March 2014 C-Stat meeting. The Office of Behavioral Health is working to remedy these issues, and January 2014 data will be presented in the next Quarterly Report. Monthly denominators and trend statements reflect two months of data, specifically from November and December 2013.

Additional highlights within Community Behavioral Health include:

- *Timeliness of Access to Outpatient Substance Use Disorder Treatment:* The last six months of 2013 reflect rates higher than those seen during respective months of 2012.
- *Mental Health Clients Engaged in Services:* For the duration of 2013, engagement rates were lower than those seen in 2012. The fluctuations in performance appear to follow engagement trends of 2012.
- *Percent of Persons with Reduced Mental Health Symptoms in Mental Health Treatment:* This measure has also shown six consecutive months of higher statewide averages than those seen for respective months in 2012. Fluctuation in monthly rates is common, and performance has reflected a downward trajectory in November and December 2013.
- *Percent of Persons who Maintained Housing while Receiving Mental Health Services:* The most recent quarter shows lower performance rates than those seen during the same of 2012. Comparison of 2012 and 2013 data show some seasonal trends in statewide housing averages, particularly trends seen from March to May, and those seen from August to December.

Measures

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



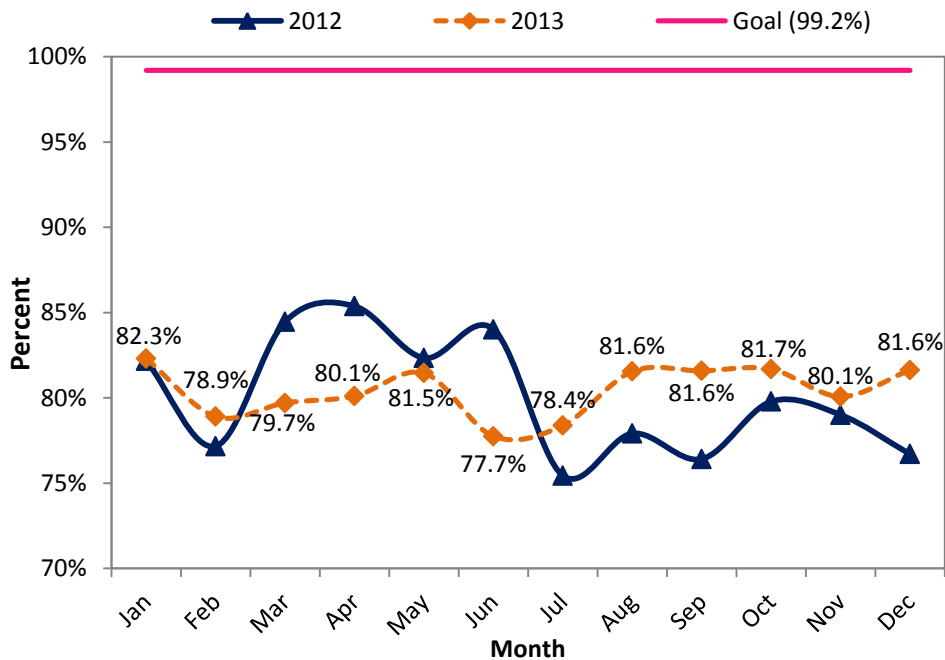
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons admitted into outpatient substance use disorder treatment in less than three days from first contact
Denominator: Number of persons admitted into outpatient substance use disorder treatment;
 Average monthly denominator: 2,399

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

Goal: **↑99.2%**



Trend: Timeliness of treatment access remained relatively stagnant throughout the year, with an initial rate of 82.3% in January 2013 and a final rate of 81.6% in December 2013. Monthly trends for the most recent year do not seem to reflect those seen in 2012.

Notes: Performance around this measure reflects two of the three months in the most recent quarter. January 2014 data was underreported due to data system changes to the CCAR and DACODS. The monthly denominator captured above represents the average of November and December 2013 data.

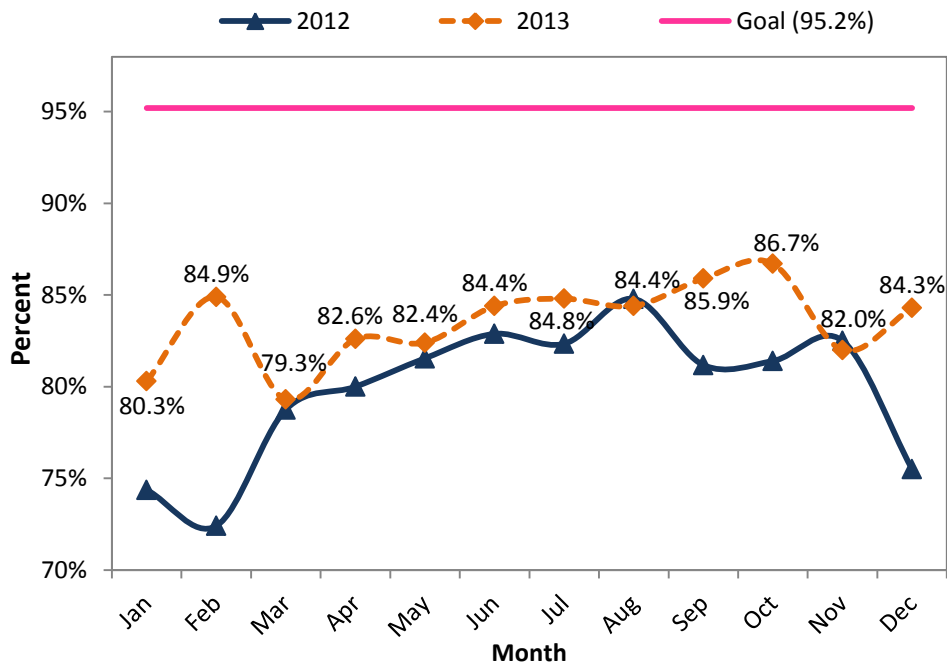
Community Behavioral Health (CBH)

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; Average monthly denominator: 995

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 last two months of 2013 reflect a growth of 2.3%. Rates typically stayed in the low- to mid-eighties throughout 2013.

Notes: Performance around this measure reflects two of the three months in the most recent quarter. January 2014 data was underreported due to data system changes to the CCAR and DACODS. The monthly denominator captured above represents the average of November and December 2013 data.

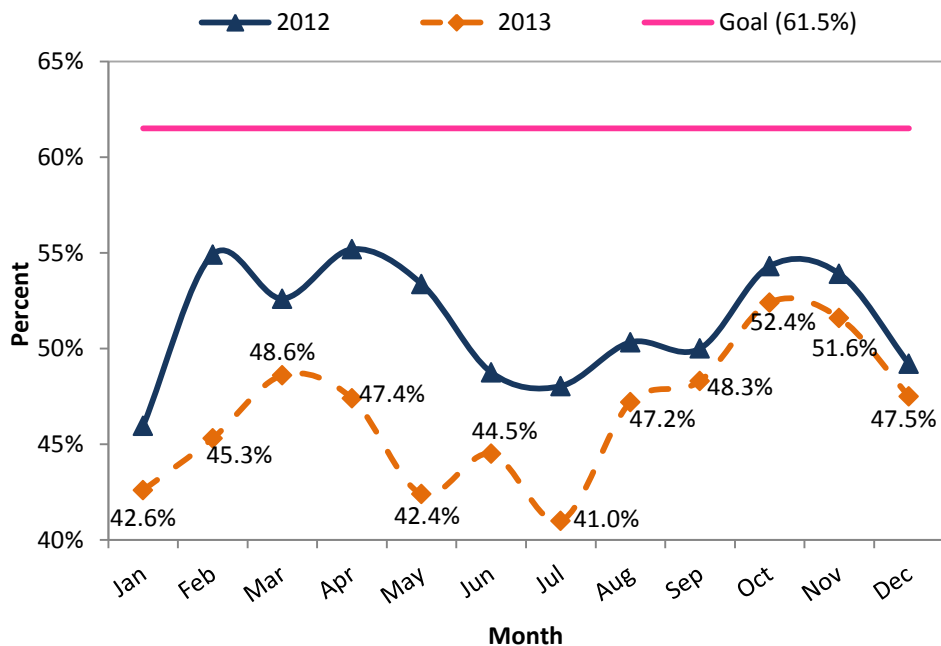
Community Behavioral Health (CBH)

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; Average monthly denominator: 1,134

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

Goal: **↑61.5%**



Trend: Engagement data showed a downward trajectory the past quarter, reflecting a drop of 4.9%. The average performance for 2013 is 50.4%. Rates of 2013 appear to follow the same trend of rates in 2012.

Notes: Data on mental health services are not available until 60 days after services are received. This measure was not affected by data issues that took place with the CCAR and DACODS formatting changes since Encounters data runs an additional 30 days behind other Office data.

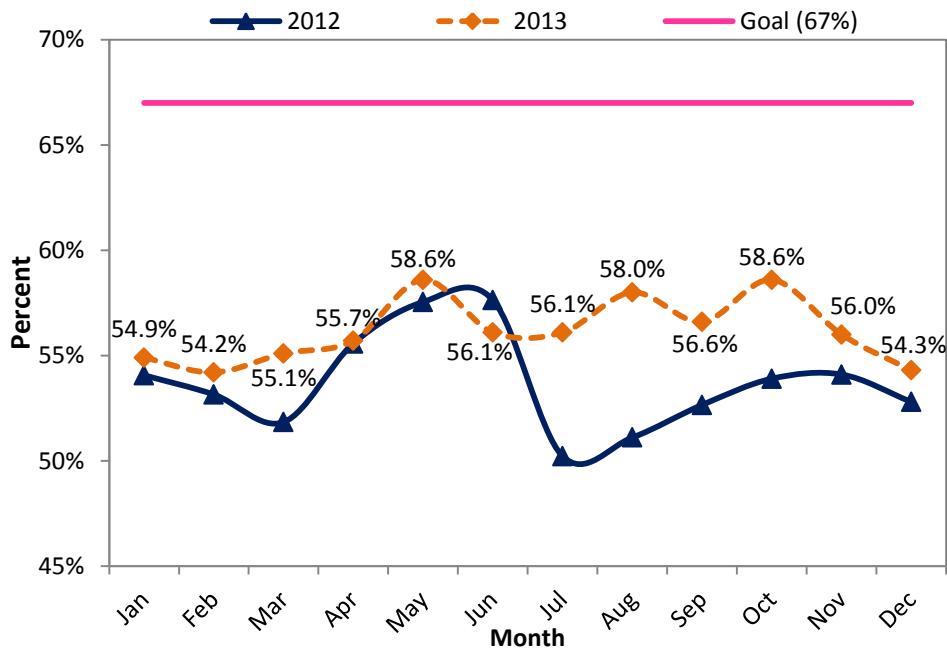
Community Behavioral Health (CBH)

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; Average monthly denominator: 4,381

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

Goal: **↑67%**



Trend: The last two months of 2013 reflect the start of a downward trajectory. Rates have continued to fluctuate throughout the year and do not appear to follow the same trends seen in 2012.

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

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

Performance around this measure reflects two of the three months in the most recent quarter. January 2014 data was underreported due to data system changes to the CCAR and DACODS. The monthly denominator captured above represents the average of November and December 2013 data.

The CCAR rates a patient’s symptoms on a scale of 1-9, and severity is considered “significant” if the patient is assessed between five and nine.

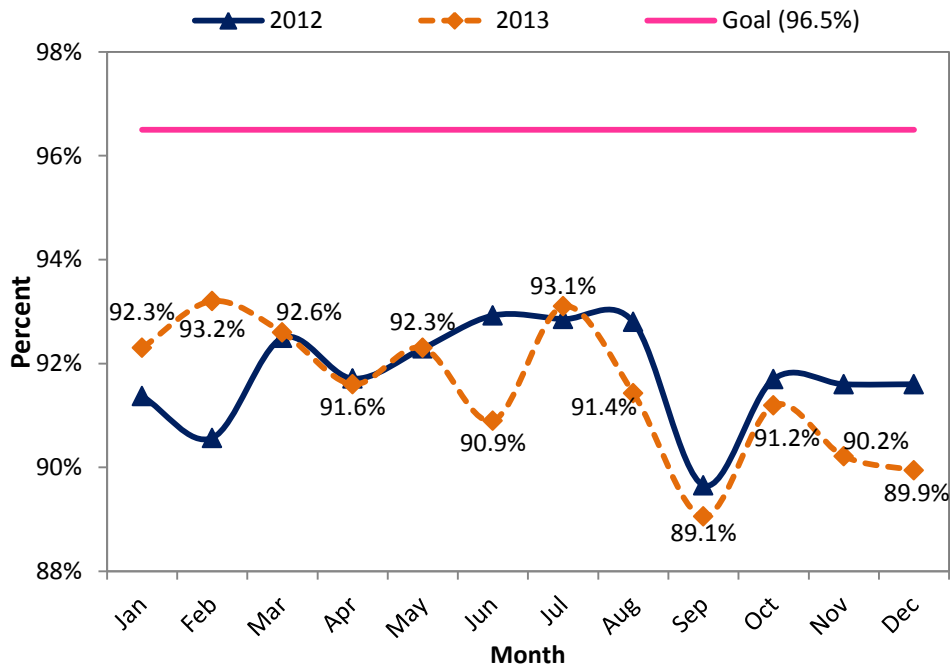
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons who maintained housing
Denominator: Number of housed persons (at Time One) receiving mental health services;
 Average monthly denominator: 1,362

Why this matters: People with behavioral health needs are a vulnerable population who are at higher risk for homelessness or instability of housing.

Goal: **↑96.5%**



Trend: Data for the last two months of 2013 reflect a decrease in performance by 0.3%. Overall, 2013 data seem to mirror trends in 2012.

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

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

Performance around this measure reflects two of the three months in the most recent quarter. January 2014 data was underreported due to data system changes to the CCAR and DACODS. The monthly denominator captured above represents the average of November and December 2013 data.

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

CMHIP Hospital Director: Dr. Bill May

CMHIFL Hospital Director: Dr. Christopher Burke

Executive Summary:

- *Average Days on Waitlist – Pueblo:* This measure was moved from the monthly C-Stat slide deck to the Dashboard in December 2013 after 24 consecutive months below the 21-day goal. It will no longer be part of the Quarterly Report.
- *Rates of Restraint Use: Fort Logan & Pueblo:* CMHIFL was below the established goal rate for two of the three months in this quarter. While CMHIP's rates are above the goal, rates decreased for three consecutive months at CMHIP. A pareto analysis indicated that a small number of patients with unique clinical histories drove most of the restraint use during this quarter.
- *Rates of Seclusion Use: Fort Logan & Pueblo:* Rates have stayed well-below the established goal at Fort Logan for ten consecutive months. A pareto analysis showed that rate fluctuation at CMHIP was due to the few patients which also influenced higher restraint rates.
- *Percent of Civil Patients Ready for Discharge but Have Barriers: Fort Logan & Pueblo:* Both Institutes saw some decline in patients with discharge barriers. Analysis indicates that some of the patients on the discharge barriers list do not have a legal guardian, making it difficult for the Institutes to find community placements. The Institutes are actively working on solutions to remedy this issue.
- *Percent of 30-Day Readmissions: Fort Logan & Pueblo:* Both Institutes had zero 30-day readmissions in January 2014, and Pueblo stayed below the established goal rate for the duration of the quarter.
- *Percent of 180-Day Readmissions: Fort Logan & Pueblo:* Fort Logan saw an upward trajectory in this measure, though it started the quarter below the goal in November 2013. Rates at Pueblo have slowly declined, and the Institute met the goal for the first time in December 2013.

Measures:

- [Rate of Restraint Use – Fort Logan & Pueblo](#)
- [Rate of Seclusion Use – Fort Logan & 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](#)



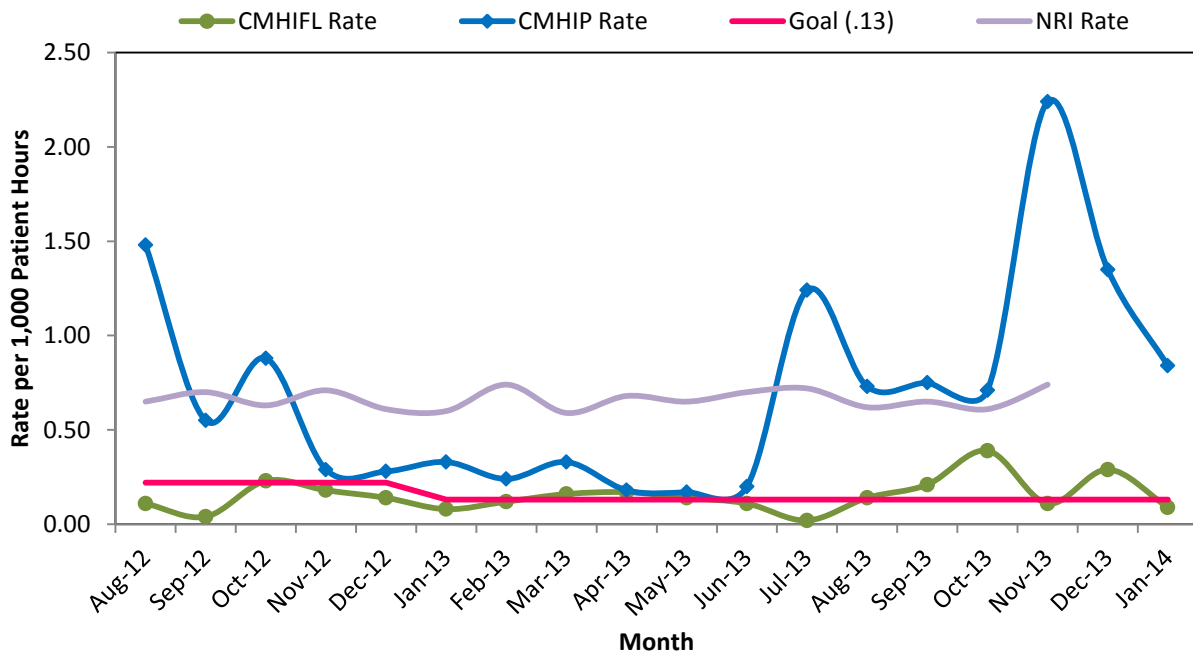
Mental Health Institutes (MHI)

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: 20,040
 Approximate monthly denominator – Pueblo: 87, 511

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: Rates at Fort Logan stayed below the established C-Stat goal rate for two of the three months in the most recent quarter, averaging a rate of 0.16. The Mental Health Institute at Pueblo saw a downward trajectory in restraint rates, with a quarterly average of 1.46.

Notes: Both Institutes agreed on the .13 goal rate in December 2013. The NRI rate reflects the national average and typically runs two months behind in data reporting.

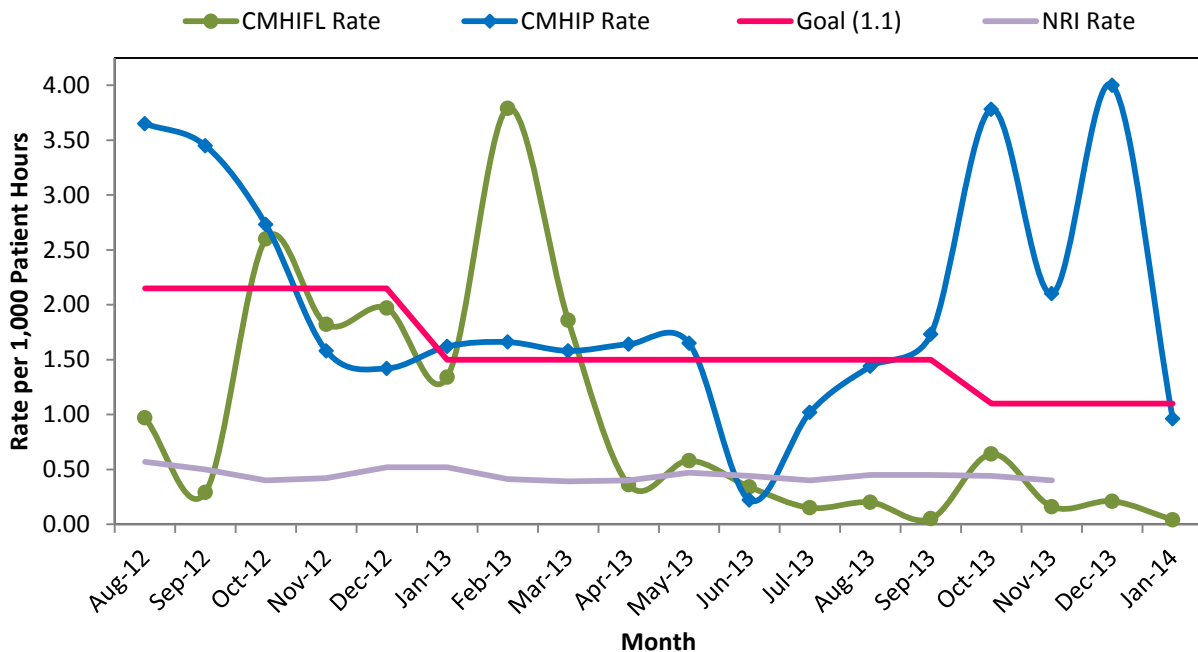
Mental Health Institutes (MHI)

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: 20,040
 Approximate monthly denominator – Pueblo: 87,511

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: Rates at Fort Logan stayed below the established C-Stat goal of 1.1 and the NRI rate for the duration of the quarter, averaging 0.13 seclusion hours per month. Pueblo saw variation in monthly rates and stayed above the established goal and national average for the first two months of the quarter.

Notes: Both Institutes agreed on the 1.1 goal rate in December 2013. The NRI rate reflects the national average and typically runs two months behind in data reporting.

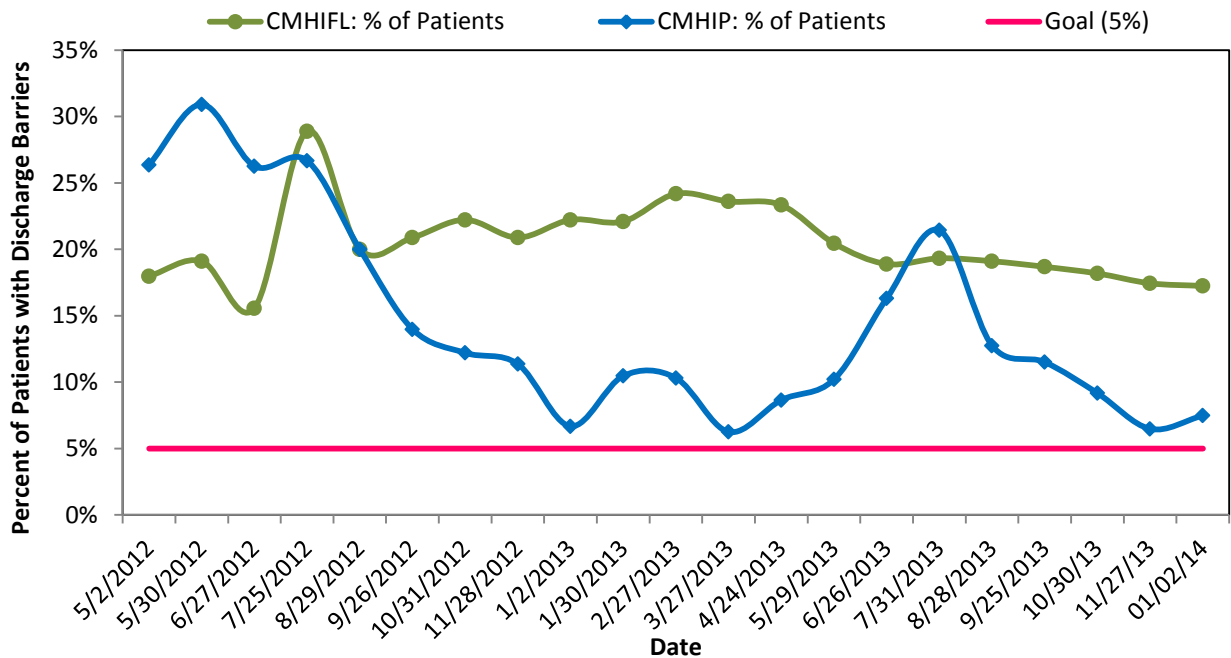
Mental Health Institutes (MHI)

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: 108
 Approximate monthly denominator – Pueblo: 87

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

Goal: **↓ 5%**



Trend: The Colorado Mental Health Institute at Fort Logan has continued its downward trajectory for five consecutive months, though is still above the established 5% goal. Rates at Pueblo continued to move towards the goal until January 2014, at which point a slight increase was seen.

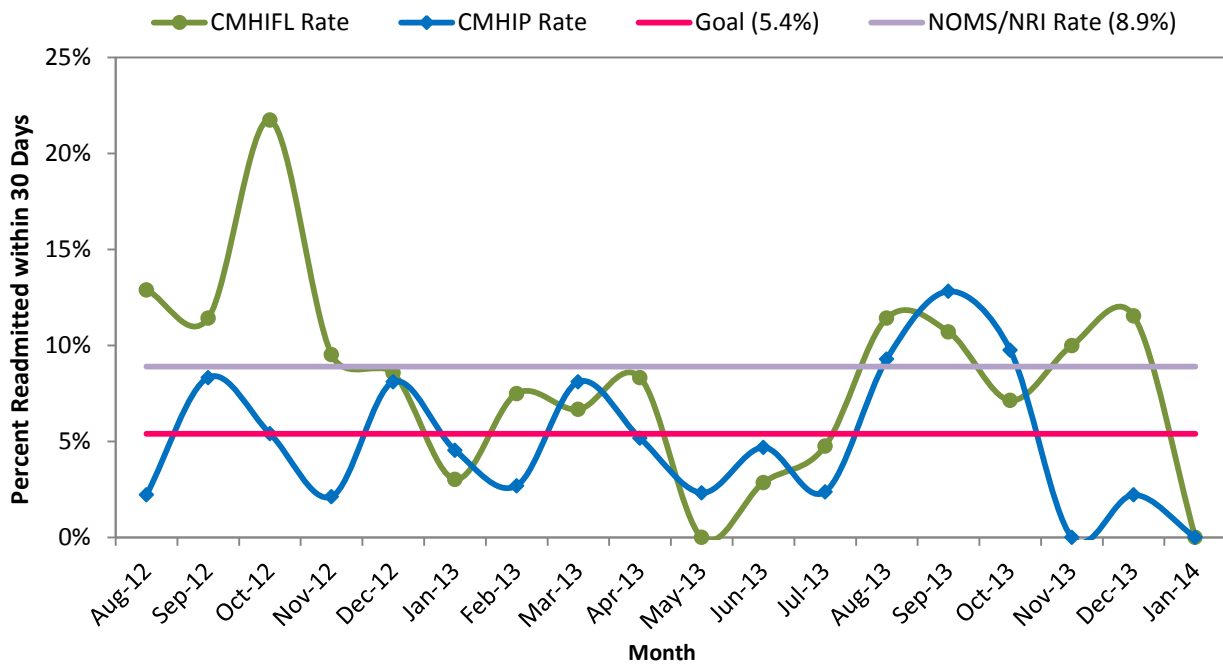
Mental Health Institutes (MHI)

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 30 days prior;
 Approximate monthly denominator – Fort Logan: 27
 Approximate monthly denominator – Pueblo: 44

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: Both Institutes saw variability in performance over the past quarter. Readmission rates at Fort Logan started above the established goal rate but ended at zero readmissions in January 2014. The Mental Health Institute at Pueblo also saw zero readmissions in January 2014, and stayed below the established goal of 5.4% and the NRI rate of 8.9% for the duration of the quarter.

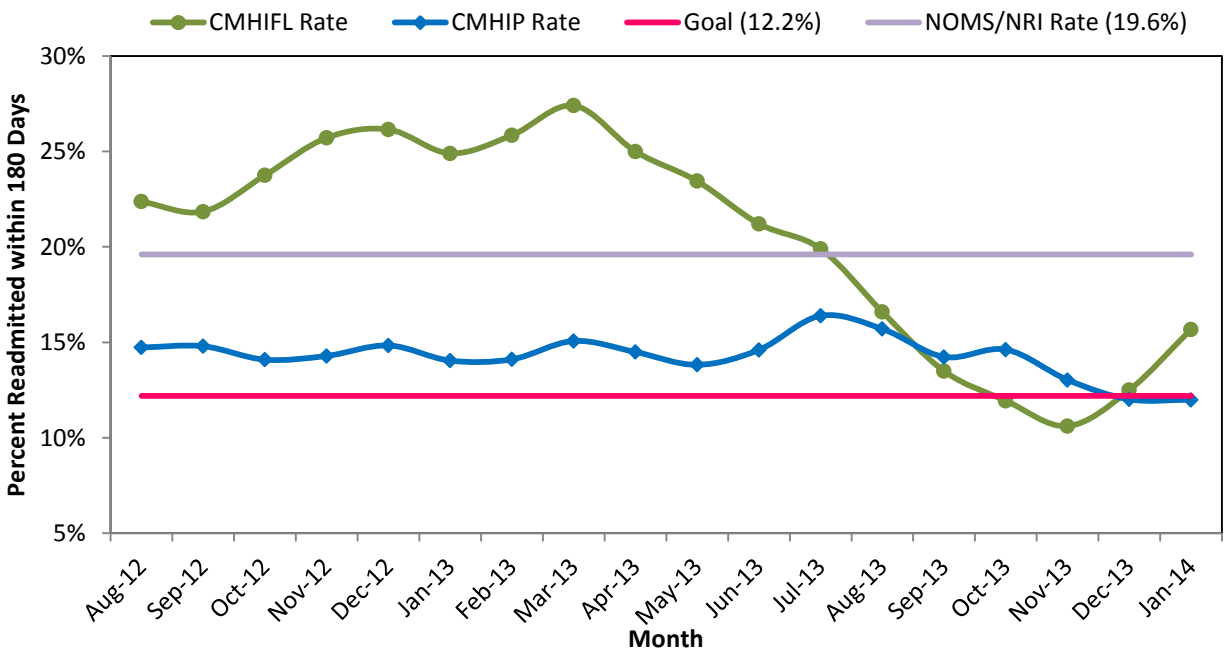
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* Number of patients readmitted within 180 days of discharge
Denominator: All patients discharged 180 days prior;
 Approximate monthly denominator – Fort Logan: 192
 Approximate monthly denominator – Pueblo: 286

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: The Mental Health Institute at Fort Logan shows an upward trajectory for the past quarter after nine consecutive months of reduced 180-day readmission rates. Performance at Pueblo has continued to steadily improve, with rates falling below the established goal for the first time in December 2013.

Office of Community Access and Independence

Description

The Office of Community Access and Independence (OCAI), formerly 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. OCAI consists of Aging and Adult Services, Developmental Disabilities, Disability Determination Services, Division of Regional Center Operations, State Veterans' Community Living Centers 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*: This program is delivered, locally, at the county level.
 - In January 2014, the performance goal for timely adult protection inquiries was increased from 95% to 98%. 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](#)

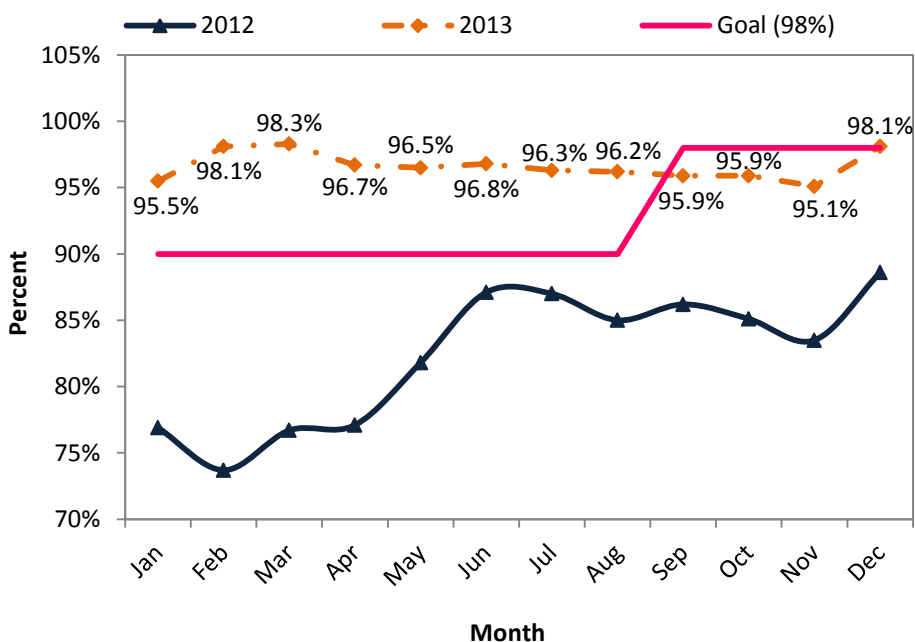
Aging and Adult Services (AAS)

Measure: **Timely adult protection inquiries**

How it is measured: *Numerator:* Number of timely responses; Timely is based on the assigned response time frame (Immediate, 24-Hour or 3 Day)
Denominator: Number of responses; Average monthly denominator: 555

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

Goal: **↑98%**



Trend: Performance remained above the initial goal of 95% from January through November 2013. Timely inquiries met the new goal of 98% for the first time in December 2013.

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

Goal was changed to 98% beginning in the January 2014 C-Stat meeting (October C-Stat 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.
- As of March 2014, DDD has moved to the Department of Health Care Policy and Finance (HCPF). This will be the last C-Stat report in which data from DDD is reported.

Measures

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



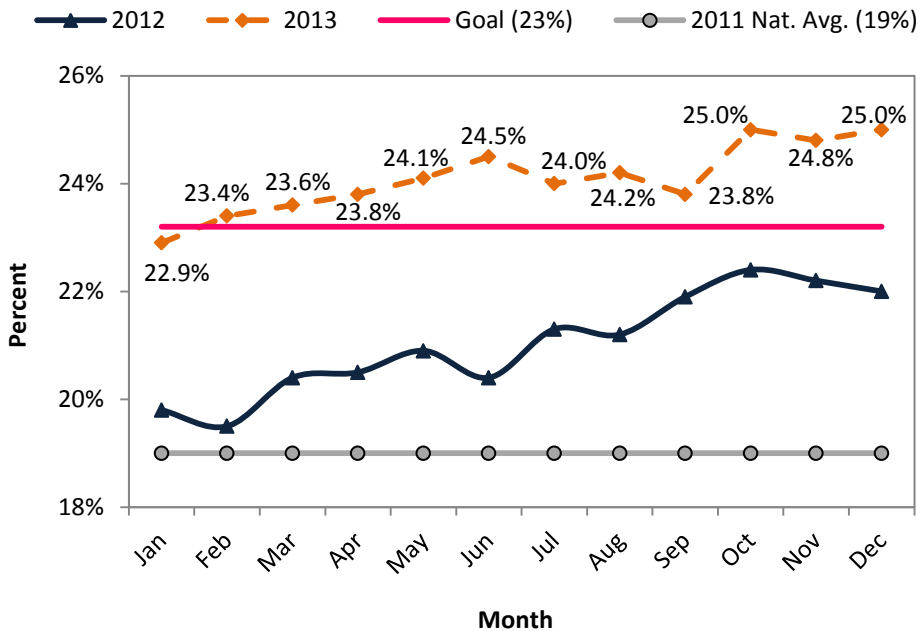
Developmental Disabilities Division (DDD)

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: 6,331

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

Goal: **↑23%**



Trend: Performance remained above the goal throughout the past quarter, at or just below 25%.

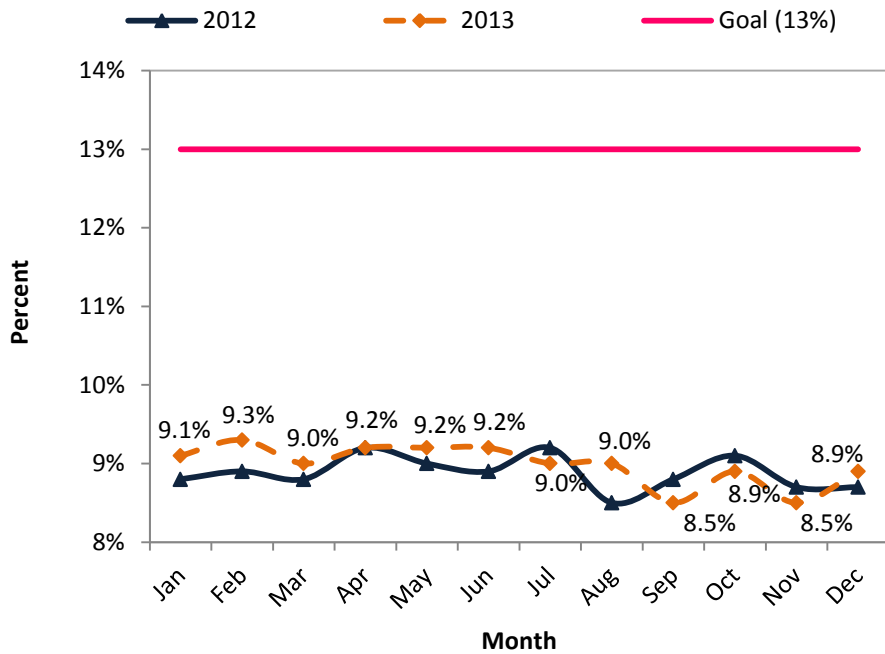
Developmental Disabilities Division (DDD)

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: 6,331

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

Goal: **↑13%**



Trend: Performance in the past quarter showed fluctuation between 8.5% and 8.9% for supported employment in individualized settings.

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

- *Mean Number of Days to Process Initial Eligibility Decisions:* Performance for this measure demonstrated a decrease in the mean number of days from 150.1 to 143.3 (i.e., 7 days).
- *Examiner Processing Time:* In November 2013, the performance goal for this measure was decreased from 49.1 days to 44.0 days. Historically, during the holiday season, there has been an increase in the time taken to process a case. Through the process improvement efforts over the last two quarters, examiners were able to meet their processing goal, and prevent a seasonal spike from occurring.
- *Percentage of Accurate Initial Eligibility Decisions:* Due to small Federal (SSA) quality assurance (QA) samples and high variability of Federal (SSA) performance on this measure, DDS began piloting the addition of in-line quality assurance activities in December 2013, and has continued this pilot through the current quarter. Preliminary results from the pilot have demonstrated improved Federal (SSA) performance on this measure, along with reduced processing times. The essence of the piloted program is a more proactive QA strategy that includes:
 - Targeted sampling, statistically based on error trends and body systems;
 - Case reviews conducted during the adjudication process and integrated into the process flow;
 - Policy analysts serving as in-line consultants and advisors ; and
 - Interactive communication in which quality input is provided to examiners during case processing, through in-person or e-mail consults.

Measures

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



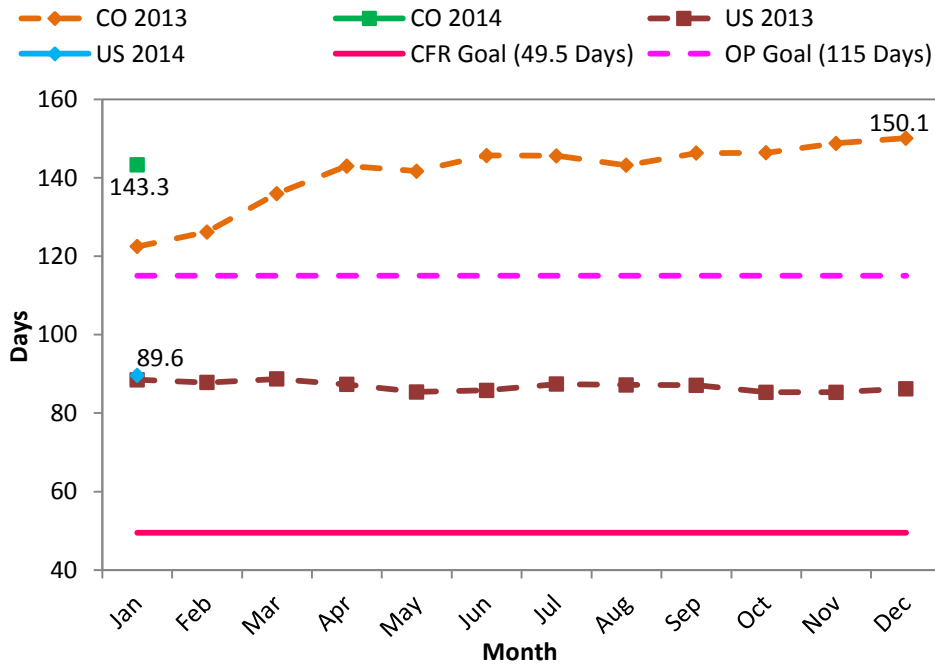
Disability Determination Services (DDS)

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: 3,644

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 number of days to process initial eligibility decisions showed an upward trajectory the last several months of 2013. However, processing time declined by approximately one week from December 2013 to January 2014.

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.

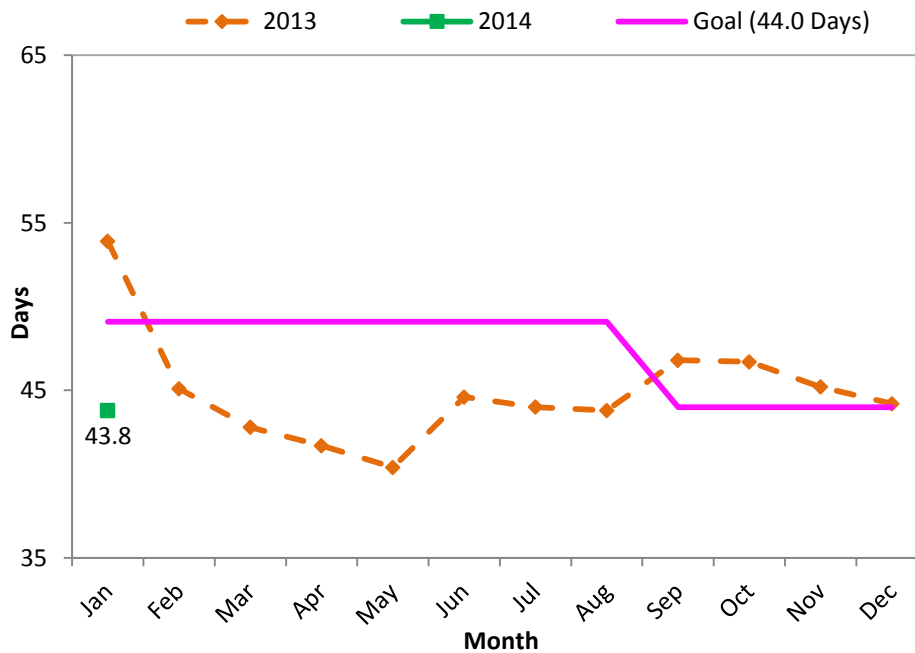
Disability Determination Services (DDS)

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: 3,453

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: Examiner processing time decreased during the final quarter, and met the goal in January 2014. In addition, performance did not demonstrate a historical seasonal spike during November 2013 through January 2014.

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

Goal was modified from 49.1 days to 44.0 days in September 2013.

Disability Determination Services (DDS)

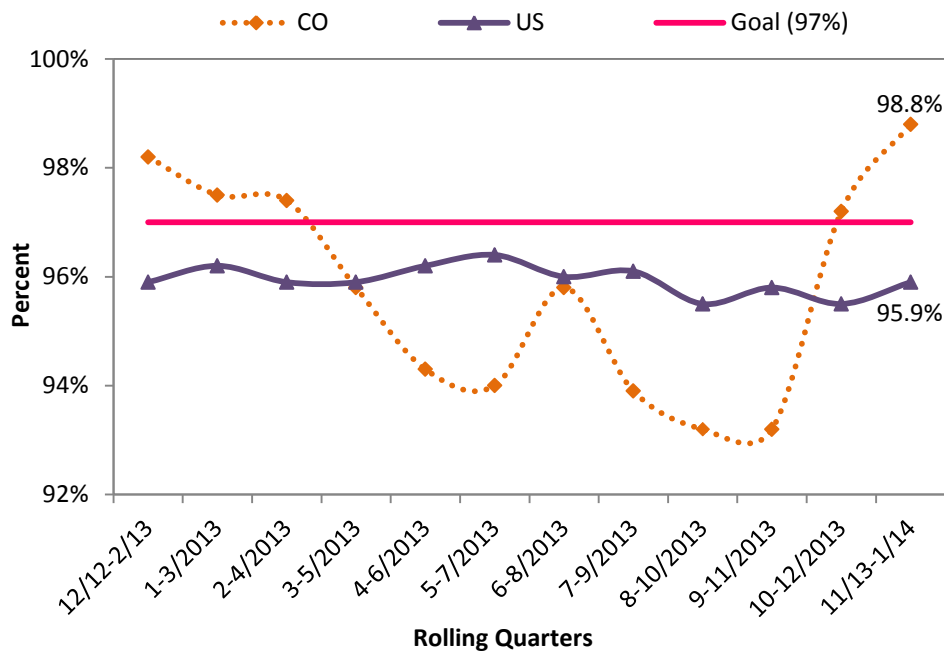
Measure: **Percentage of accurate initial eligibility decisions (Federal Measure)**

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: 147

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: The past quarter demonstrated improved performance in the accuracy of initial decisions, remaining above the goal for the second consecutive rolling quarter.

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, Retired effective February 2014.

Acting Director: Sarah Aurich

Executive Summary

- DRCO has identified six 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*: This measure is examined for both the Short-Term Treatment and Stabilization model and the Intensive Treatment model.
- *Length of Time to Transition*: This measure is examined for all models, Short-Term Treatment and Stabilization, Intensive Treatment and Long-Term Habilitation.
- *Percent of Residents without Physical Intervention by Regional Center*: This is typically a seventh measure examined by DRCO. However, the methodology of this measure is currently being reexamined. Therefore, no data is reported for this quarter.

Measures

- Length of Time to Become Ready for Transition/Discharge-[Short-Term](#), [Intensive](#)
- Length of Time to Transition/Discharge-[Short-Term](#), [Intensive](#), [Long-Term](#)
- [Individuals Clinically Recommended for Transition to a Community Provider](#)

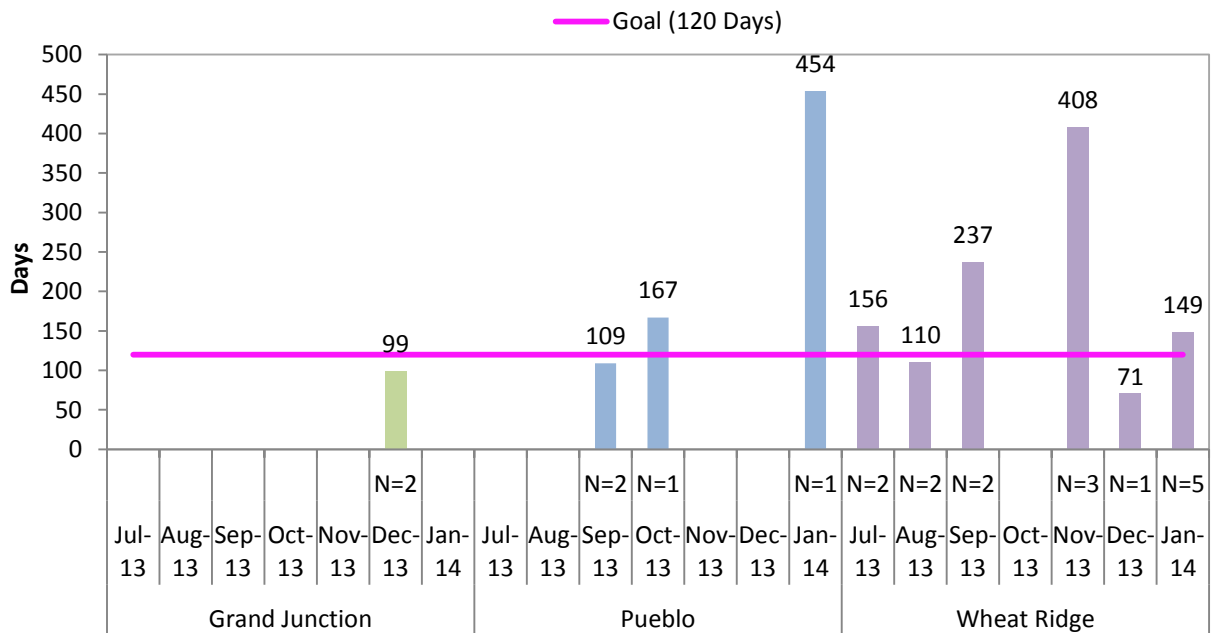
Division of Regional Center Operations (DRCO)

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

How it is measured: *Numerator:* Number of days from RC admission date to date ready for transition
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 keeps individuals from lingering in care and more quickly enhances their well-being.

Goal: **↓120 Days**



Trend: In the most recent quarter, Grand Junction met the goal for this performance measure, while Pueblo did not meet the goal for the one individual who became ready for transition in January 2014. Performance at Wheat Ridge showed more fluctuation, in which the goal was met one out of the three months of the most recent quarter.

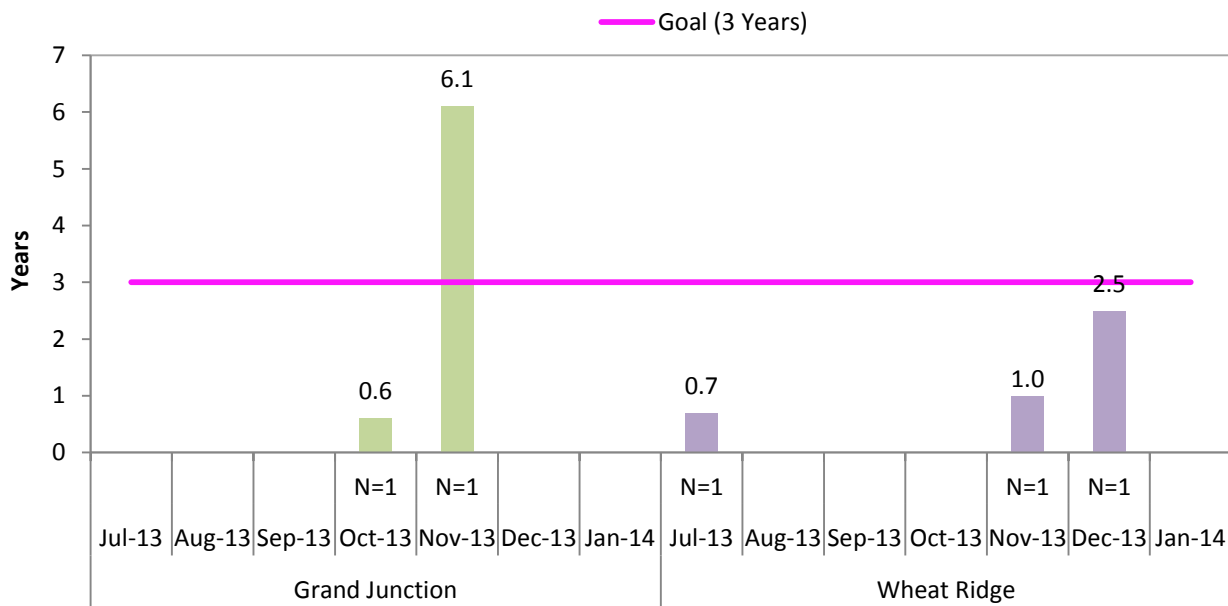
Division of Regional Center Operations (DRCO)

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

How it is measured: *Numerator:* Number of years from RC admission date to date ready for transition
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 keeps individuals from lingering in care and more quickly enhances their well-being.

Goal: **↓3 Years**



Trend: In the most recent quarter, Grand Junction did not meet the goal for the one individual who became ready for transition in November 2013, while Wheat Ridge met the goal for both clients who became ready for transition in November 2013 and December 2013, respectively.

Notes: PRC does not offer the Intensive Treatment model.

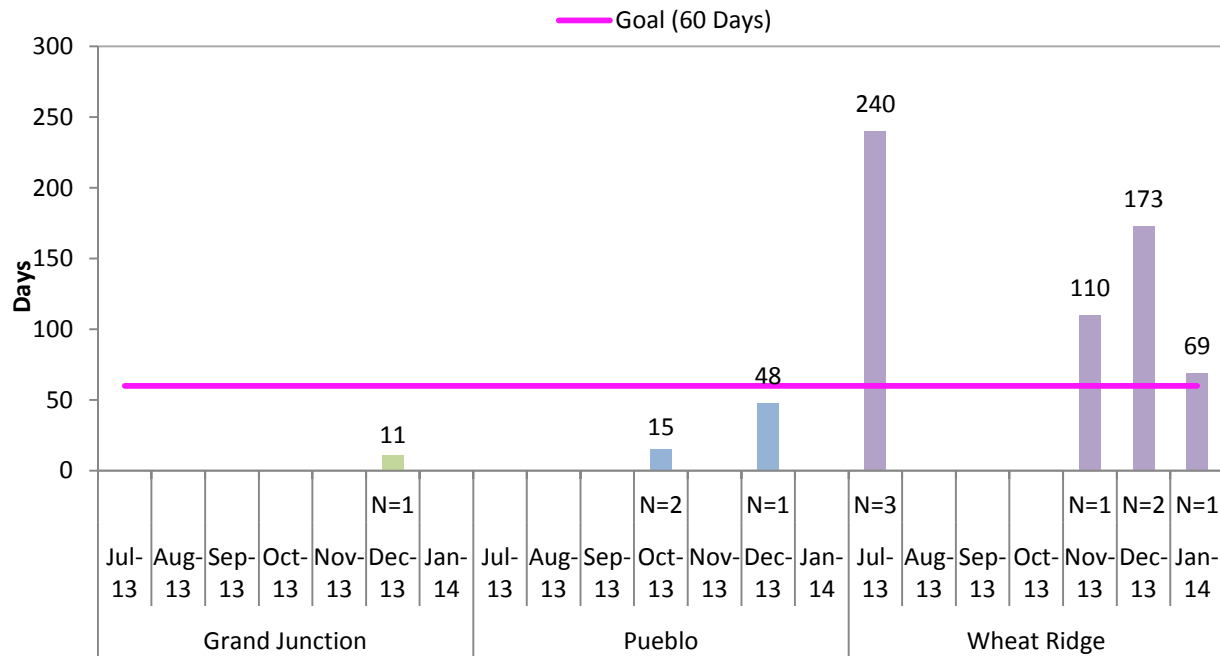
Division of Regional Center Operations (DRCO)

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

How it is measured: *Numerator:* Number of days from date ready for transition to RC transition date
Denominator: Number of individuals who transitioned in the month; See graph for monthly denominators.

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

Goal: **↓60 Days**



Trend: In the most recent quarter, Grand Junction and Pueblo both met the goal for length of time to transition, for their respective clients, while Wheat Ridge did not meet the goal in all three months in this quarter.

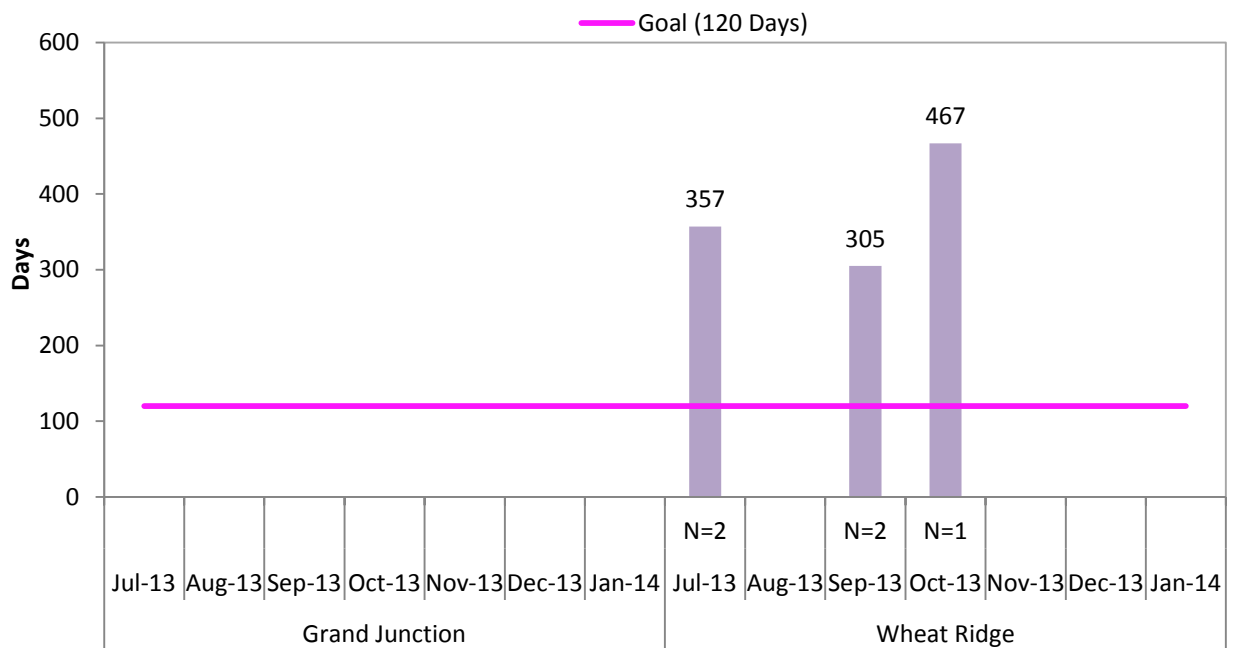
Division of Regional Center Operations (DRCO)

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

How it is measured: *Numerator:* Number of days from date ready for transition to RC transition date
Denominator: Number of individuals who transitioned in the month; See graph for monthly denominators

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

Goal: **↓120 Days**



Trend: In the most recent quarter, neither Grand Junction nor Wheat Ridge had any individuals transition from the Intensive Treatment model to the community.

Notes: PRC does not offer the Intensive Treatment model.

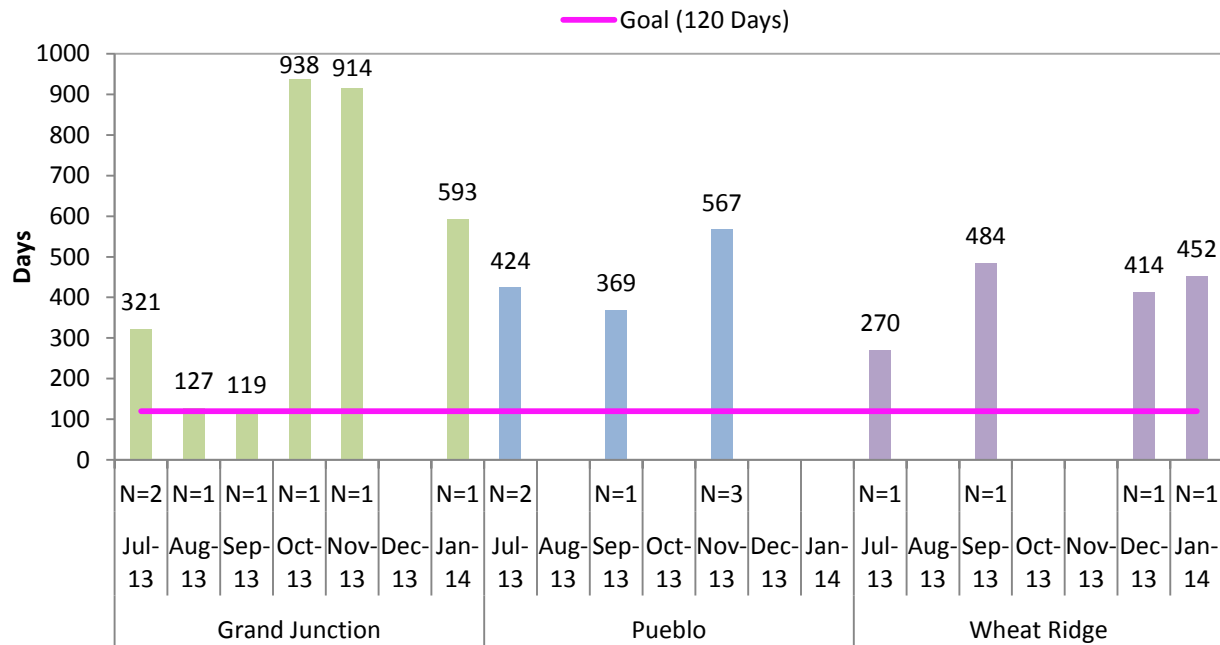
Division of Regional Center Operations (DRCO)

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

How it is measured: *Numerator:* Number of days from date ready for transition to RC transition date
Denominator: Number of individuals who transitioned in the month; See graph for monthly denominators

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

Goal: **↓120 Days**



Trend: In the most recent quarter, no Regional Center met the goal for length of time to transition in any month.

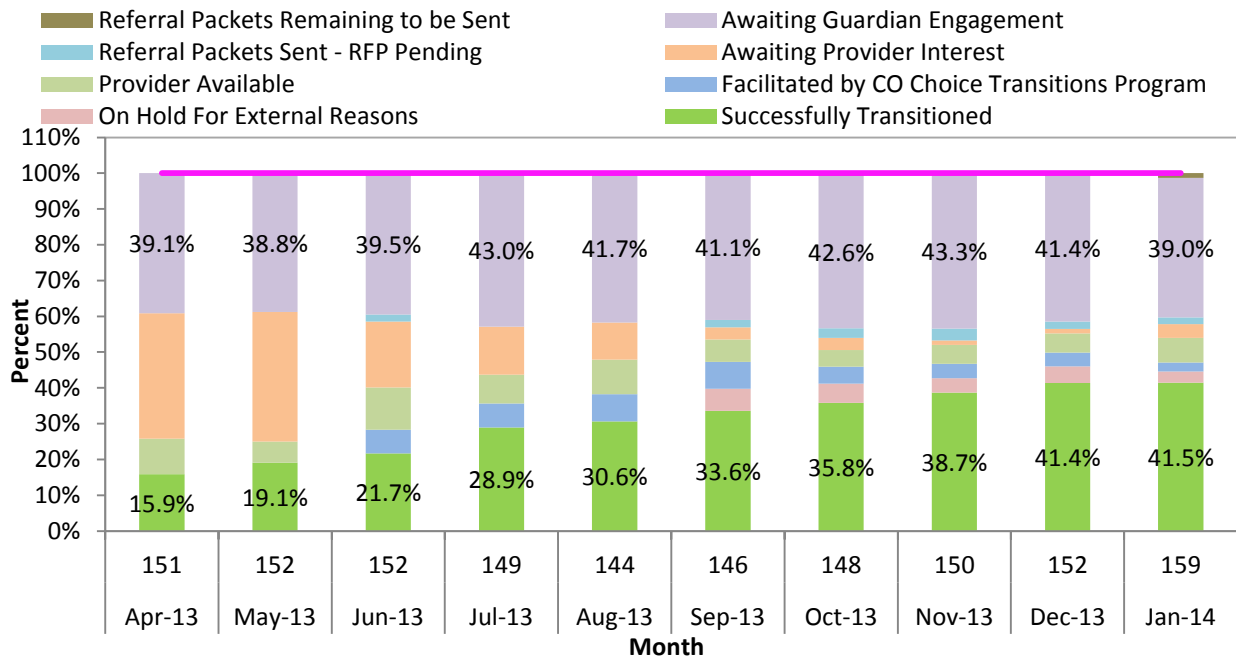
Division of Regional Center Operations (DRCO)

Measure: **Individuals clinically recommended for transition to a community provider**

How it is measured: *Numerator:* Number of individuals by transition process step (awaiting guardian engagement, referral packets remaining to be sent; 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 from the Regional Centers; See graph for monthly denominators

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

Goal: **↑100% Successfully Transitioned**



Trend: The number of individuals who have successfully transitioned has increased from 38.7% to 41.5% over the most recent quarter. Correspondingly, the number of individuals awaiting guardian engagement decreased during this time period.

State Veterans' Community Living Centers

Summary

Description

Colorado operates four State Veterans' Community Living Centers (SVCLC): Fitzsimons SVCLC in Aurora, Bruce McCandless SVCLC in Florence, Homelake SVCLC in Monte Vista, and Rifle SVCLC in Rifle. There is also a SVCLC located in Walsenburg, Colorado. This Community Living Center is operated by the Huerfano County hospital district. Data are not reported for this Community Living Center given that it is not state-owned or operated. Colorado's SVCLCs serve honorably discharged veterans, veterans' spouses/widows and "Gold-Star" parents, any of whose children died while serving in the Armed Forces. The Colorado SVCLCs 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 Anti-Psychotic Medication:* For the quarter represented in this report, SVCLC examined the data on this measure, in more depth, to determine the impact of such factors as residents who are admitted to the Community Living Centers on anti-psychotic medications and residents' physicians' prescribing behaviors. In their efforts to reduce the use of anti-psychotic medications for residents with a diagnosis of dementia, in-depth exploration of the data continues and efforts to verify mental health diagnoses for residents prescribed anti-psychotic medications has been initiated.

Measures

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

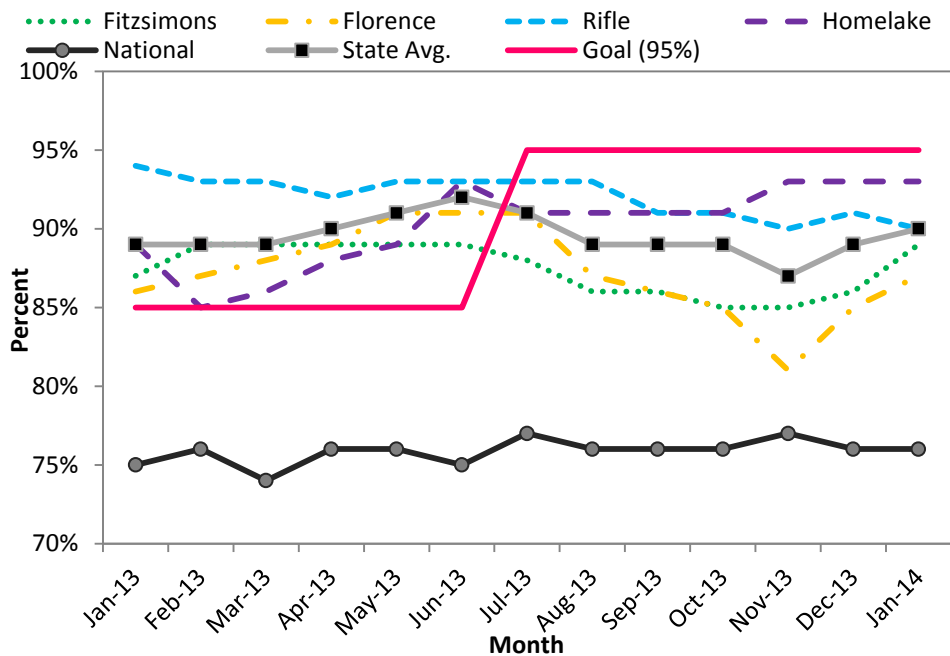
State Veterans' Community Living Centers (SVCLC)

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: 170, Florence: 89, Rifle: 66, Homelake: 58

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

Goal: **↑95%**



Trend: Performance remains steady. Has yet to achieve new goal.

Notes: Goal modified from 85% to 95% in July 2013.

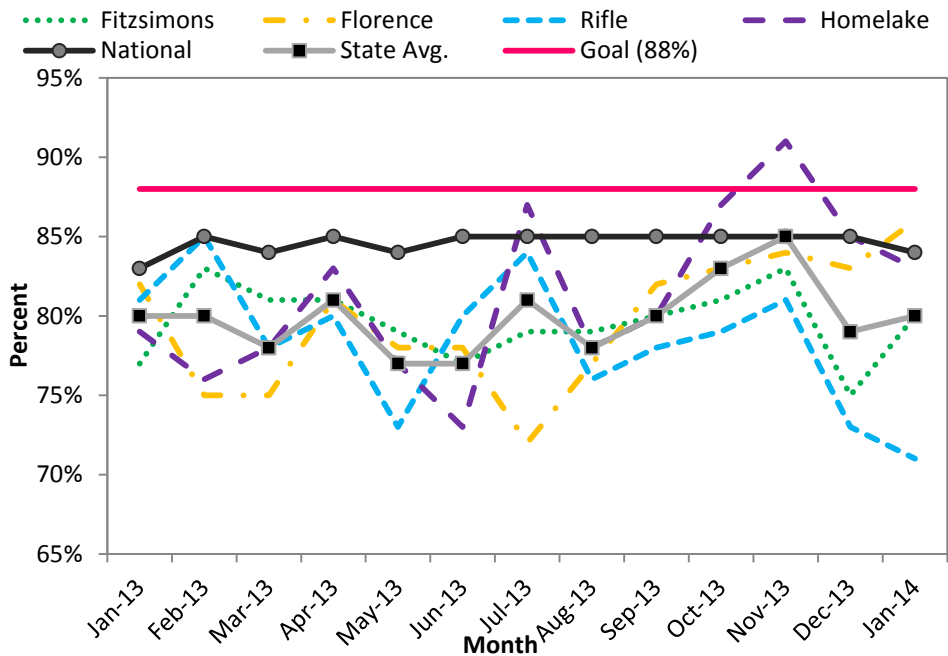
State Veterans' Community Living Centers (SVCLC)

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: 170, Florence: 89, Rifle: 66, Homelake: 58

Why this matters: Community Living Center 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, performance remained below the goal with the exception of Homelake in October 2013.

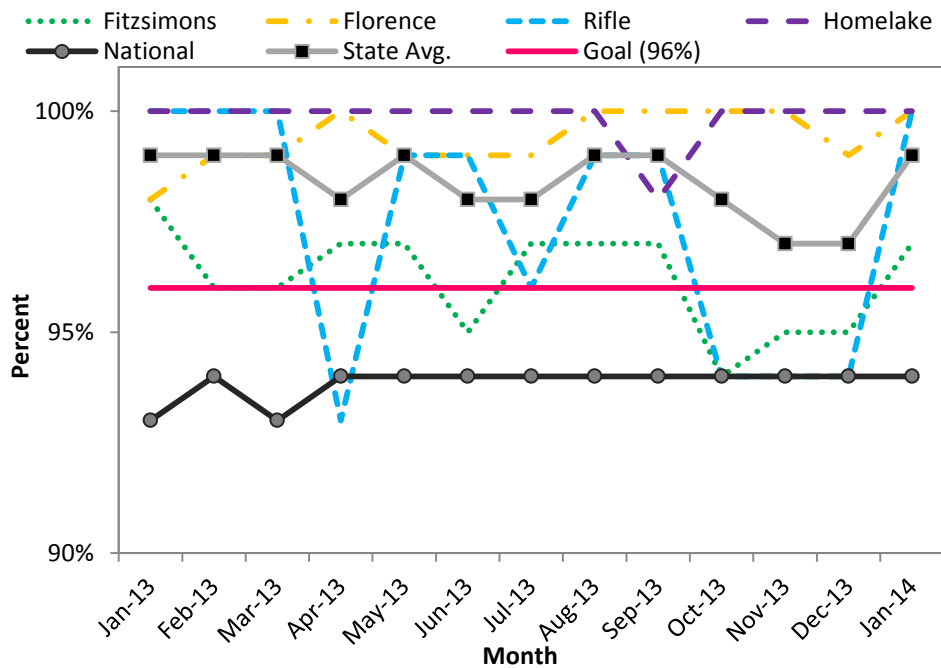
State Veterans' Community Living Centers (SVCLC)

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: 170, Florence: 89, Rifle: 66, Homelake: 58

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

Goal: **↑96%**



Trend: In the most recent quarter, Fitzsimons and Rifle were below the goal for two of the three months, whereas Homelake and Florence were above the goal for all three months.

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*: Successful closures have declined by approximately 25% over the past four months. The low percentage of successful closures is likely a result of the quality assurance review of all cases to be completed by June 2014. DVR is undergoing this review to promote more “active” engagement with clients and determine cases appropriate for closure (e.g., cases that may have been left open for long periods of time, without any client contact). Of those cases that are being closed, particularly those without client contact for long periods of time, many will likely close unsuccessfully.
- *Timeliness of Eligibility*: Efforts by DVR staff to reduce the percentage of eligibility decisions made in more than 60 days without an extension have included the following:
 - Examination of the average number of days from application to eligibility determination by DVR Office and by DVR counselor. In examining this data by DVR counselor, outliers on both ends were identified. This assists DVR in targeting coaching and training to those DVR counselors who struggle with meeting the time line for determining eligibility, and in recognizing those DVR counselors who regularly meet the time line for determining eligibility while seeking out best practices from those counselors and disseminating such practices to those who are in need of coaching and training.
 - Monitoring those cases that are close to exceeding the 60 day time frame, particularly if an extension between the client and counselor has not been agreed upon.
 - Clarification of policy with supervisors, at the monthly Field Services Meeting, regarding appropriate use of the Extension categories. Supervisors were informed that once counselors have enough information to determine a client eligible, they should do so, into whatever significance of disability category is indicated at the time. If additional information is obtained, following the determination, to indicate the client should be moved into a more significant category of disability, counselors were instructed to engage their supervisors in making such a change.
- *Frequency of Counselor/Client Contact*: In January 2014, *Frequency of Counselor/Client Contact* was introduced as a DVR performance measure. This measures the percent of all open cases that have a case note entered in the month. This measure is a first step at examining client engagement, allowing DVR staff to look for indicators that the counselors are having contact, at least once every thirty days, and are documenting that interaction. Moving to the next step, this measure can also be used to inform the development of a measure that examines the quality of client engagement. Efforts by DVR staff to increase the frequency of counselor/client contact have included the following:
 - Updating policies to finalize acceptable and unacceptable strategies to meet the requirement for making contact with a client every 30 days have been discussed.
 - Examination of data by DVR counselor to allow follow up with specific counselors to provide coaching and mentoring with the intention of increasing the occurrence and documentation of client contact. This breakdown of the data is provided to the Regional Supervisors on a monthly basis.
 - Incorporating questions related to appropriate efforts to engage clients in an active and meaningful partnership into the quality assurance case file reviews, as well as the presence of sufficient case notes



to document those efforts or to provide justification for extended periods without contact. Negative responses to these questions result in an Action Required Form being sent to the Counselor and Supervisor for follow-up and improvement.

Measures

- [Case Closure by Type](#)
- [Timeliness of Eligibility Determination](#)
- [Competitive Employment Wages](#)
- [Frequency of Counselor/Client Contact](#)

Division of Vocational Rehabilitation (DVR)

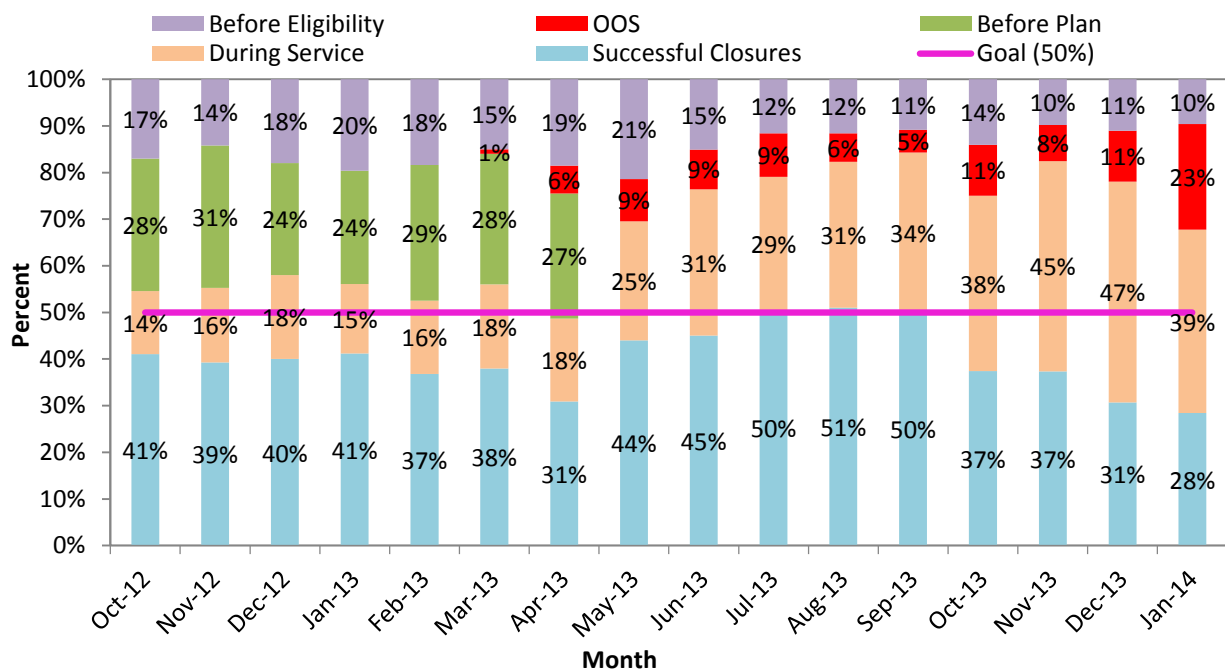
Measure: **Case closure by type**

How it is measured: *Numerator:* Number of cases by closure status type (before eligibility was determined; closed from waiting list; before beginning employment plan; during service but without successful employment; successful employment)

Denominator: Total number of case closures during the month; Average monthly denominator: 628

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

Goal: **↑Successful closures at 50%**



Trend: The percentage of successful closures declined for three consecutive months during the past quarter.

Notes: 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.



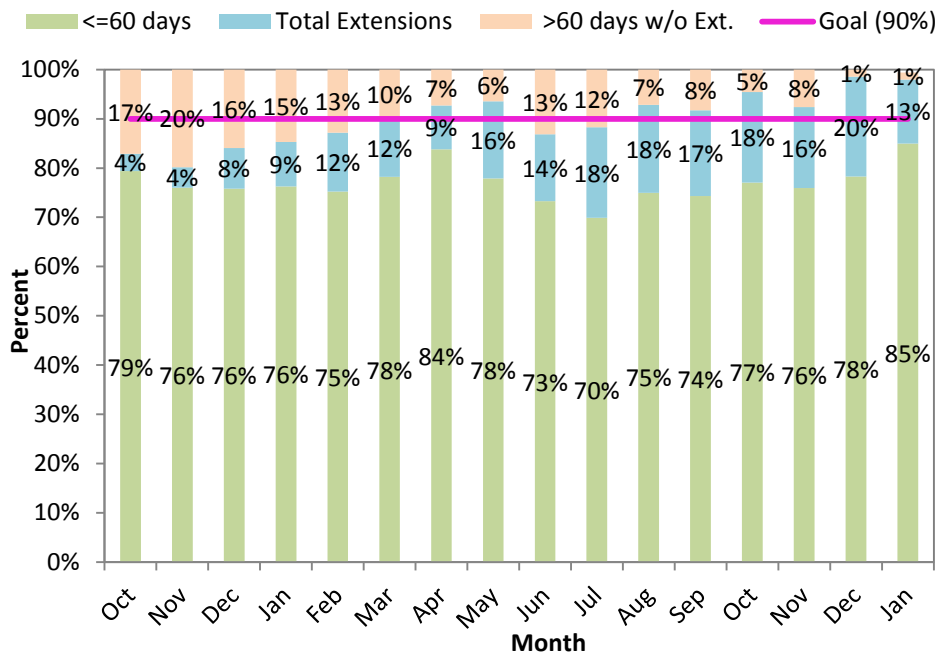
Division of Vocational Rehabilitation (DVR)

Measure: **Timeliness of eligibility determination**

How it is measured: *Numerator:* Number of eligibility decisions made in 1) less than 60 days, 2) with an extension beyond 60 days or 3) without an extension beyond 60 days
Denominator: Total number of eligibility decisions during the month; Average monthly denominator: 465

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 most recent quarter reflects an increase in the percentage of timely eligibility decisions within the 60 day timeframe and a decrease in the percentage of decisions made after 60 days without an extension.

Notes: Sixty (60) days is federally-defined processing time for applications without formal extension. In addition, the Total Extensions category includes three types of extensions: 1) Trial Work – Categorized as such when a DVR counselor uses Trial Work Experiences to determine eligibility because he/she has reason to question whether the individual can benefit from VR services due to the severity of the disability, 2) Extension – Categorized as such when circumstances beyond the control of DVR preclude an eligibility decision within 60 days and the counselor and client have agreed to a specific extension of time, and 3) Extended Evaluation – Categorized as such when a counselor uses Extended Evaluation because the consumer is unable to participate in Trial Work Experiences.



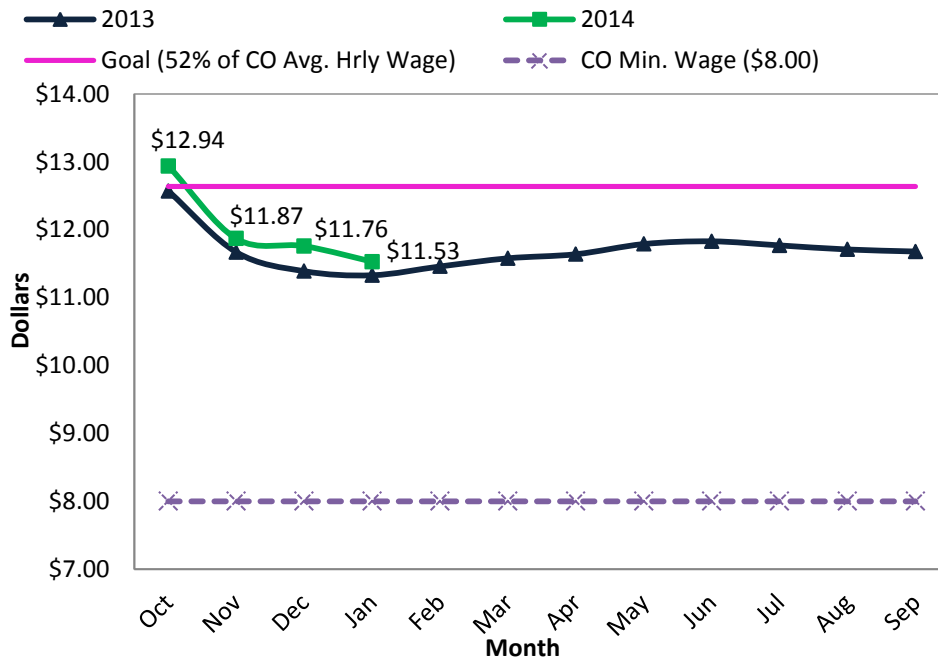
Division of Vocational Rehabilitation (DVR)

Measure: **Competitive employment wages**

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

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

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



Trend: The most recent quarter has shown a slow decline in the overall cumulative hourly wage earned by participants, similar to the previous year.

Notes: As of January 1, 2014, the minimum wage in CO was raised to \$8.00/hr.

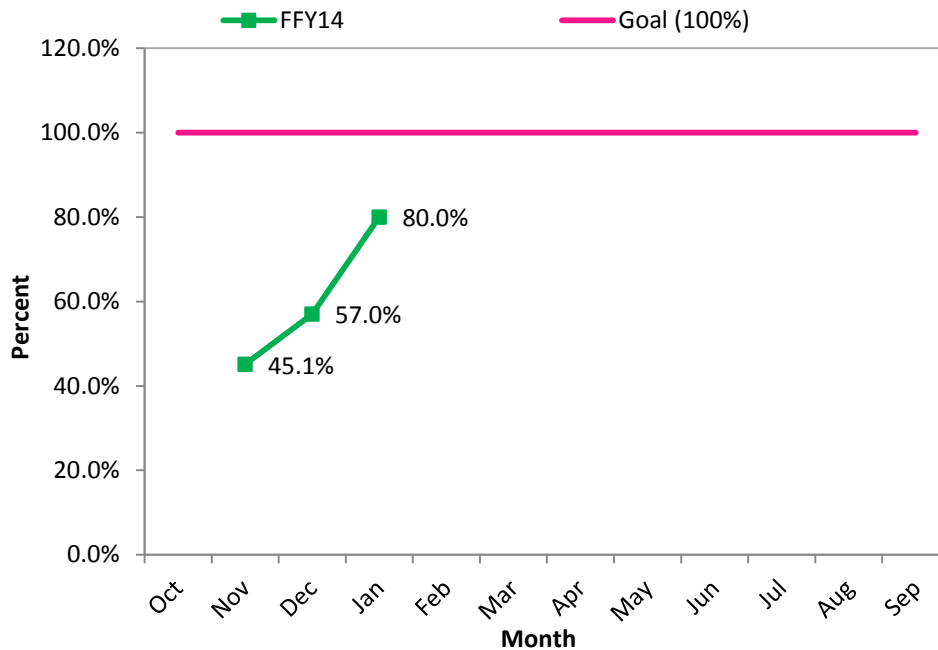
Division of Vocational Rehabilitation (DVR)

Measure: **Frequency of counselor/client contact**

How it is measured: *Numerator:* Number of open cases with a case note entered in the month
Denominator: Total number of open cases; Average monthly denominator: 11,411

Why this matters: Counselor contact with clients increases the likelihood of successful employment and improves overall client outcomes.

Goal: **↑100%**



Trend: The first quarter of data shows a significant improvement in the frequency of counselor contact with clients.

Notes: This measure was added in January 2014 (October 2013 C-Stat data).

No data is available for October 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 who seek and need assistance from the Child Welfare Division, the Division of Youth Corrections and the Domestic Violence Program. These supports are facilitated through partnerships with families, providers and local communities to ensure that children and families have safe, healthy and stable environments; and, that protection and public safety are paramount in addressing the needs of juvenile offenders.

Director: Julie Krow

Division of Child Welfare

Summary

Description

The Division of Child Welfare (DCW) provides supervision to counties that deliver child welfare services. Services provided through the counties are intended to protect children from harm and to assist families in caring for and protecting their children, along with ensuring permanency for those children placed in out of home care. Taken together, these programs comprise the main thrust of Colorado's effort to meet the needs of children who must be placed, or are at risk of placement, outside of their homes for reasons of protection or beyond the control of parent.

Director: Robert Werthwein

Executive Summary

- *Timeliness of Assessment Closure:* The goal for this measure has not been met. Furthermore, Family Assessment Response (FAR) data has shown a decline in performance throughout this quarter. Additional analyses have been completed to review performance within this measure. DCW has concluded the following:
 - For Traditional assessments the average number of days to closure has declined from a high of 70 days in August 2012 to a low of 43 days in October 2013. While overall performance for FAR assessments has demonstrated more variance; the range of average numbers of days to closure is as follows: a high of 78 days in July 2012 to a low of 46 days in June 2013.
 - Analysis demonstrated of the assessments that are not closed timely, those that are 70+ days have diminished across the last three years, from 79.9% in 2011 to 44.4% in 2013. Analysis further demonstrated that in 2013, a majority of assessments not closed timely were closed within 60-69 days.
- *Absence of Maltreatment Recurrence:* This measure was moved to the Dashboard in January 2014. The Dashboard is distributed along with the monthly C-Stat data and reviewed by Executive Management on a monthly basis, but is not reported as a part of the C-Stat Quarterly Report.
- *Legally Freed Children Discharged to Permanency:* Performance on this measure has varied a great deal, ranging from a low of 80% to a high of 98.4% within 2013.
 - To ensure that more youth attain permanency, DCW completed a comprehensive investigation of youth nearing 18 years of age and have yet to establish permanency. The top three barriers to permanency were identified as, 1) county culture, 2) youth delinquent behaviors, and 3) youth resistant to adoption.

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 Own Home](#)
- [Caseworker Contact with Parents](#)
- [Children in Congregate Care](#)
- [Child Welfare Walkaways](#)



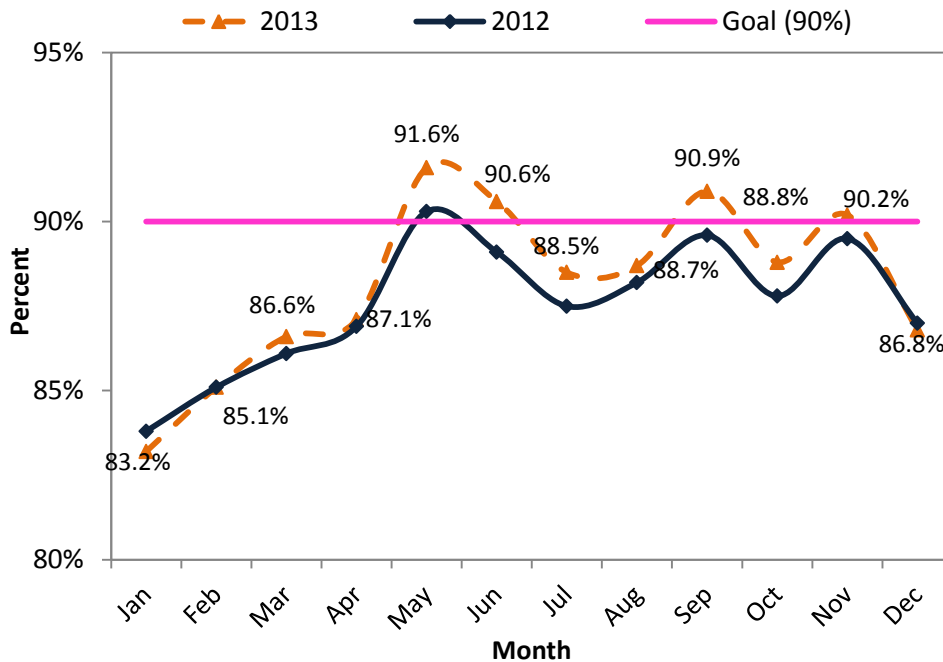
Division of Child Welfare (DCW)

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 alleged victim within time requirements set in rule (Volume 7)
Denominator: Total number of initial child protection assessments closed in the target month (both Traditional and Family Assessment Response); Average monthly denominator: 3,552

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

Goal: **↑90%**



Trend: Performance started to improve in November 2013, where the 90% goal was achieved. However, performance declined to 86.8% in December 2013, falling below the goal. Additionally, this measure has seen a consistent overlap from year to year.

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

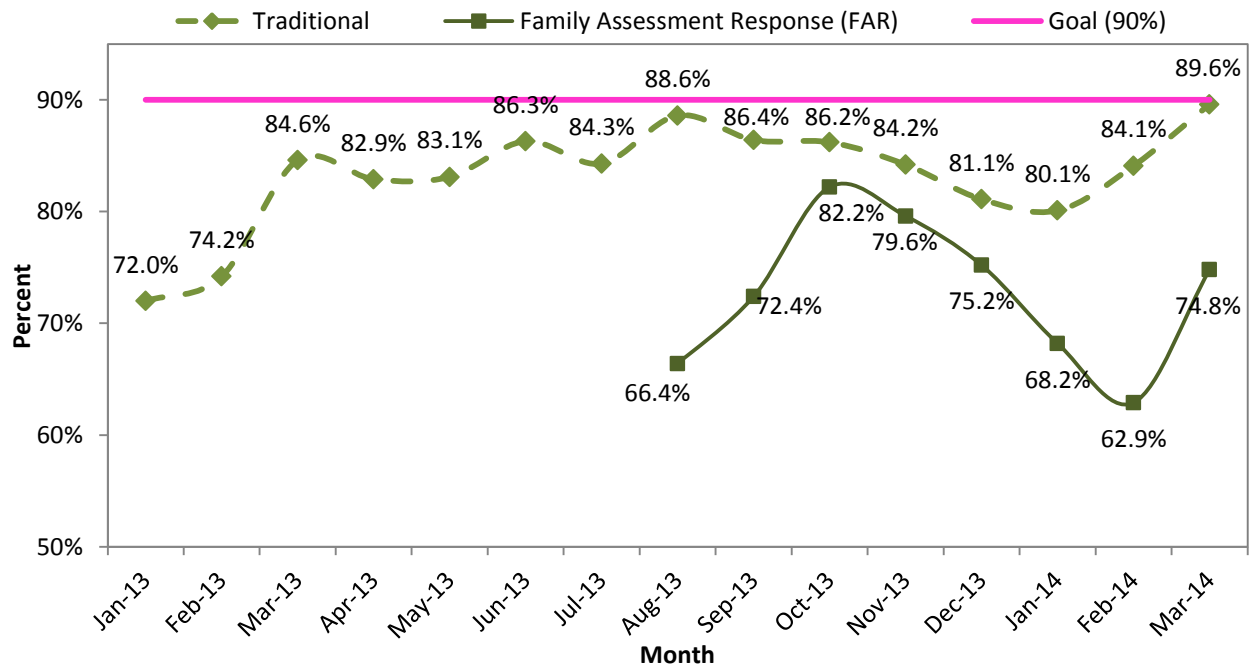
Division of Child Welfare (DCW)

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: Traditional: 2,001; Family Assessment Response (FAR): 406

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 for Family Assessment Response declined throughout the quarter. Performance for Traditional Response declined October 2013 through January 2014, though improvement was seen in February 2014. The goal for either assessment type has yet to be achieved.

Division of Child Welfare (DCW)

Measure: **Safety assessment forms completed accurately**

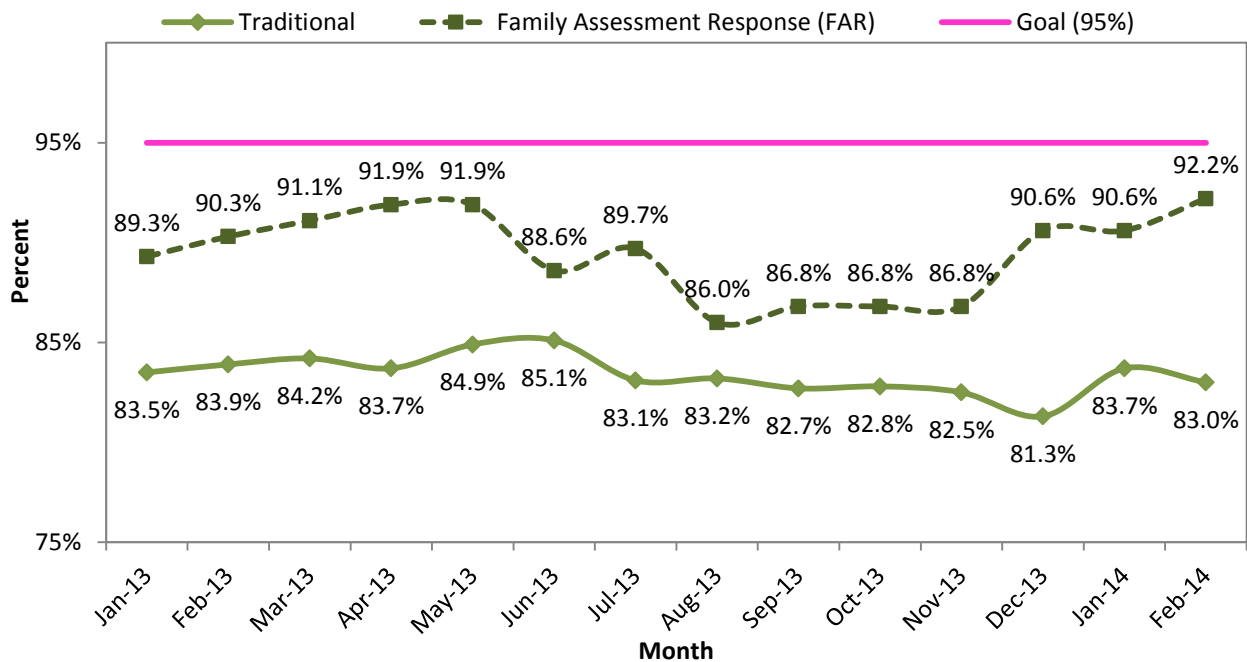
How it is measured: *Numerator:* Number of safety assessment forms completed accurately in accordance with state rule

Denominator: Total number of safety assessment forms completed and reviewed by ARD;

Average monthly denominator: Traditional: 867; Family Assessment Response (FAR): 92

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

Goal: **↑95%**



Trend: Performance for both Traditional Assessment and Family Assessment Response improved throughout the quarter. The goal has yet to be achieved.

Notes: Family Assessment Response (FAR) data only includes the six counties currently participating in the FAR evaluation pilot project. FAR is one track for responding to a child welfare referral, while Traditional/High Risk is another track for responding to a child welfare referral.

Division of Child Welfare (DCW)

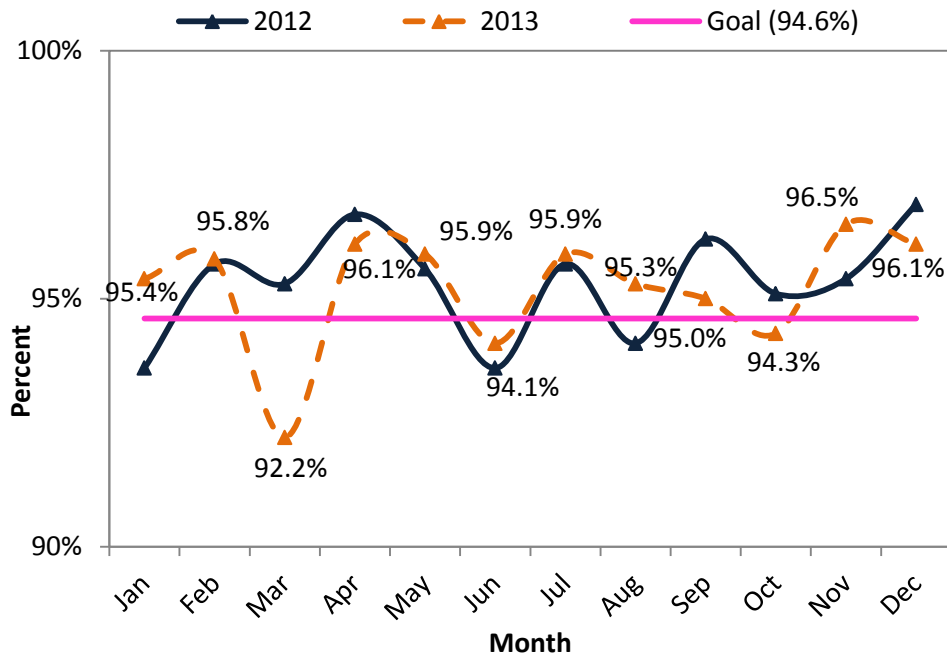
Measure: **Absence of maltreatment recurrence (Federal Measure)**

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

Denominator: Total number of referrals with a founded incident of abuse and/or neglect in the month occurring six months prior to the reporting month; Average monthly denominator: 807

Why this matters: Children deserve to be safe from subsequent abuse and/or neglect.

Goal: **↑94.6%**



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

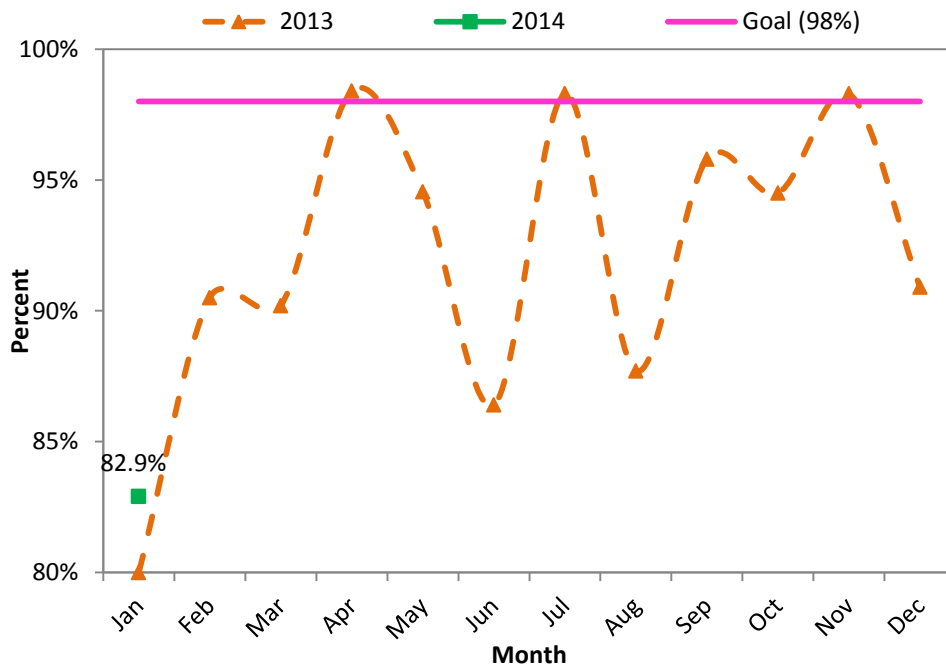
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Number of children who 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: 66

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

Goal: **↑98%**



Trend: Performance declined for two of three months in the most recent quarter. The 98% goal has not been achieved since November 2013.

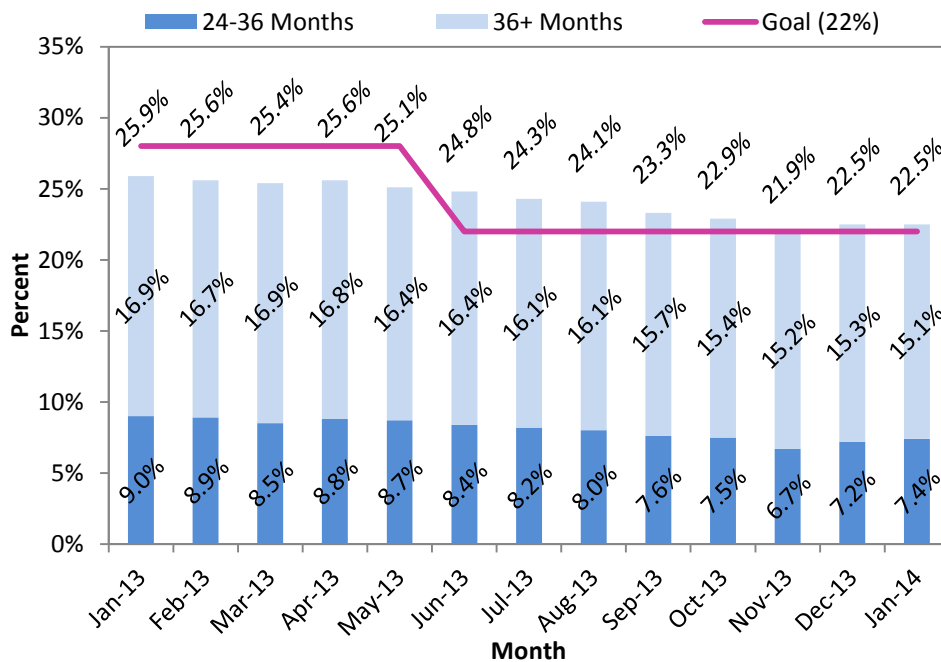
Division of Child Welfare (DCW)

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: 4,569

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

Goal: **↓ 22%**



Trend: Performance consistently improved until November 2013, in which the new goal of 22% was achieved. The goal was not met in either of the two remaining months within this quarter.

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

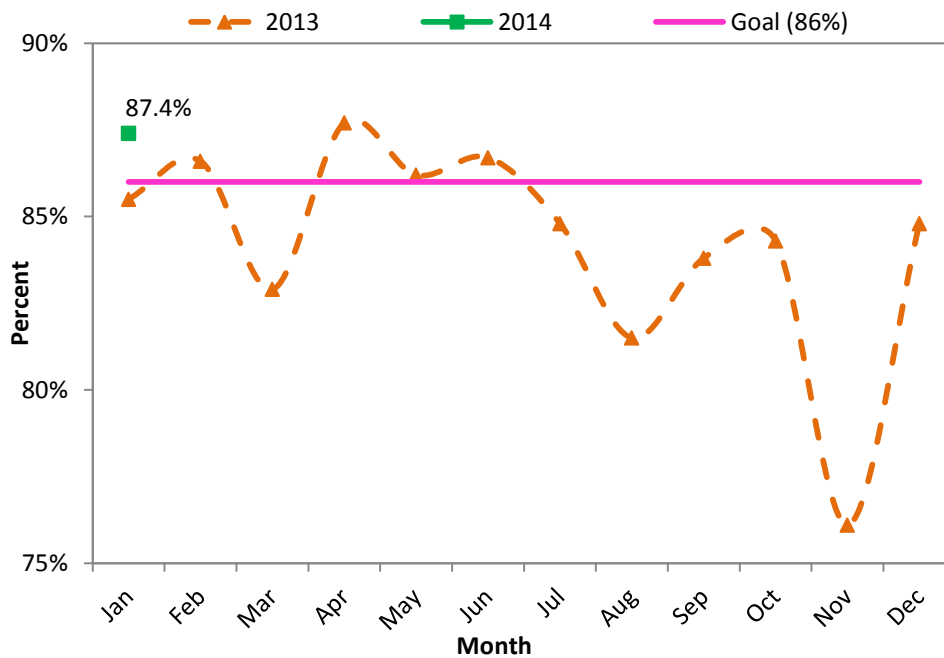
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Children who were not initially (first 30 days) in out of home care and did not enter out of home placement during case involvement
Denominator: Total number of children whose child welfare involvement ended during the reporting period who were not in out of home placement during the first 30 days of their involvement; Average monthly denominator: 523

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: **↑ 86%**



Trend: Performance has improved from November 2013 to January 2014. The 85% goal was achieved in January 2014, reflecting more than 11% improvement over the past quarter.

Note: A higher number of out of home cases close each November as this is Adoption month. This affects performance in November on this measure, causing a significant decline in performance.

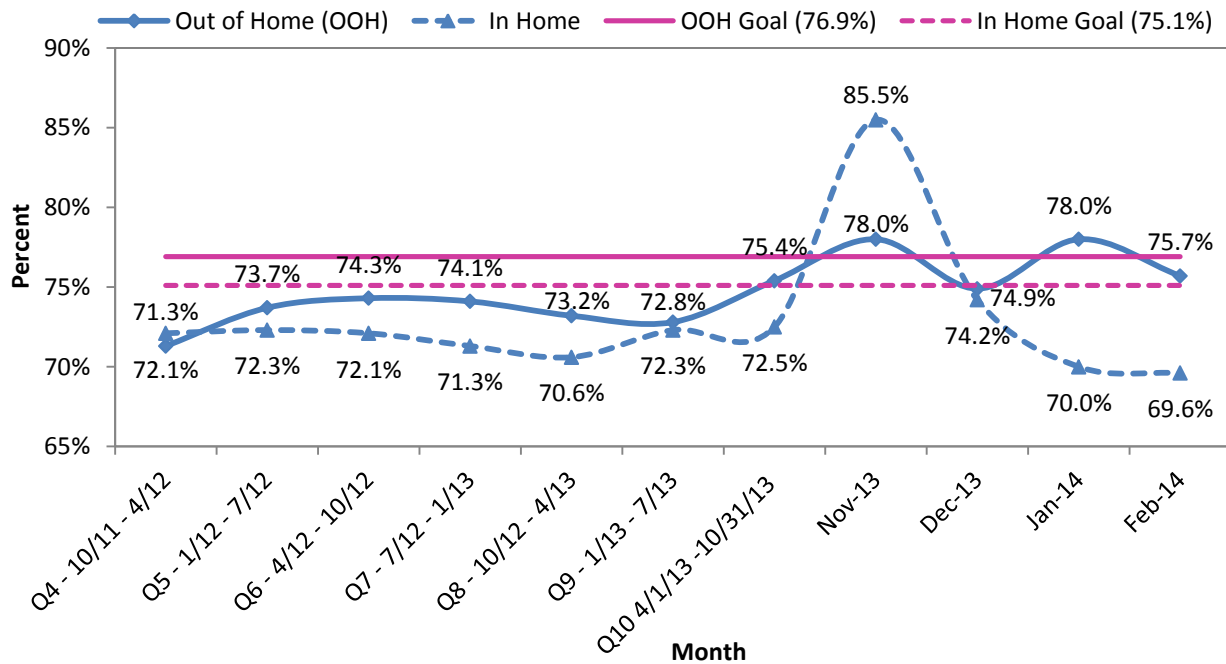
Division of Child Welfare (DCW)

Measure: **Caseworker contact with parents**

How it is measured: In Home: *Numerator:* Number of children within 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 within in home care reviewed within a given month; denominator in November: 196
 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; denominator in November: 935

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 In Home has declined for the last three months, though the goal was achieved in November 2013. Out of Home performance has varied, attaining the goal in both November 2013 and January 2014.

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



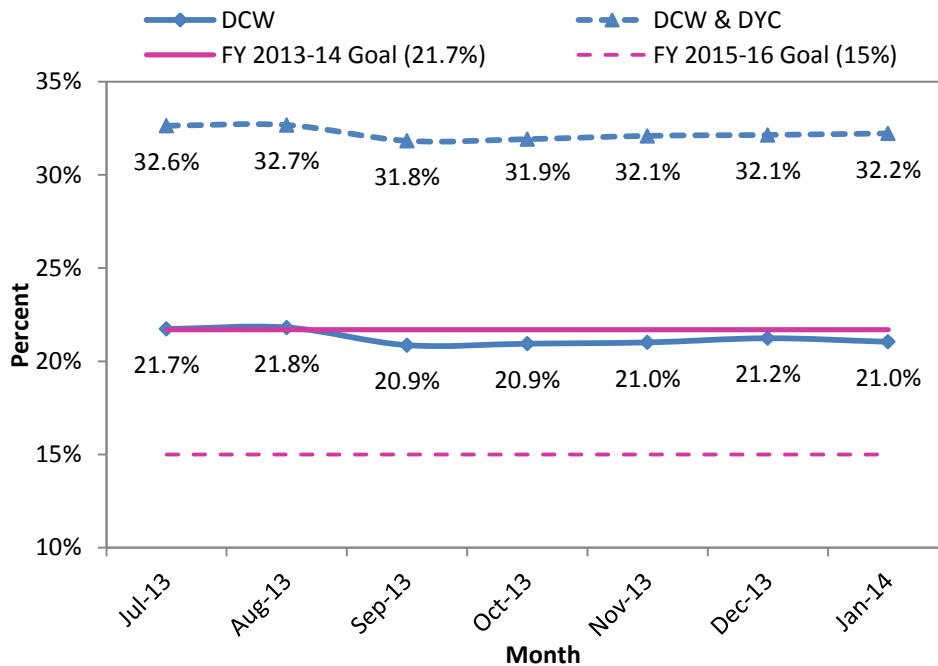
Division of Child Welfare (DCW)

Measure: **Children in congregate care**

How it is measured: *Numerator:* Number of children placed in congregate care (residential or group).
Denominator: Number of children placed in out of home care (all types); Average monthly denominator: DCW- 5,190; DCW & Division of Youth Corrections (DYC)- 6,024

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 all three months within this quarter. Performance for both DCW and DCW & DYC has remained consistent across each month within this quarter.

Notes: This is a new measure as of July 2013. The Division of Child Welfare will reduce the goal to 18% for the Fiscal Year 2014-15 and again to 15% in Fiscal Year 2015-16, which is the end goal.

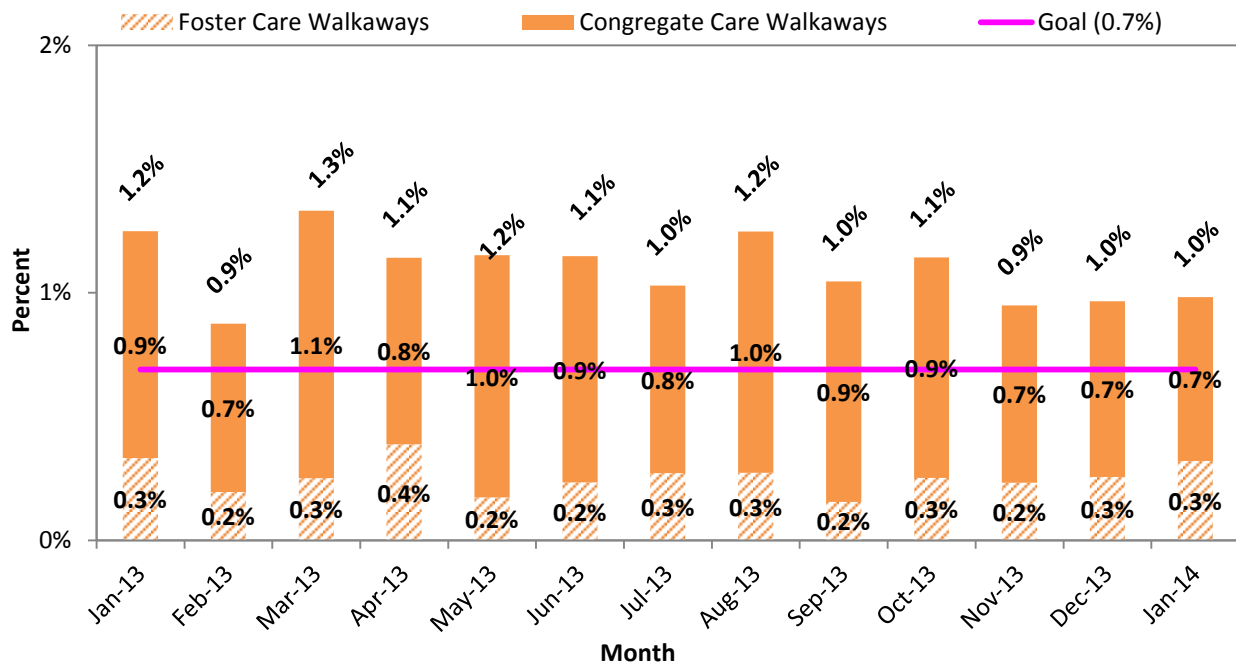
Division of Child Welfare (DCW)

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: 4,108
 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: ↓ 0.7%



Trend: Performance improved in November 2013 from October, and held steady in December 2013 and January 2014. The goal has yet to be achieved.

Notes: This measure is newly introduced to C-Stat. The data in this measure is a cumulative frequency, meaning those who walkaway in one month and are still on walkaway status the following month are counted in both month's data.

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. 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 two of the three months within this quarter.
 - Additionally, the Office of Information Technology has assisted the Division by establishing mobile testing capabilities by use of laptops, thus enabling the Division to provide testing in facilities where the technology was not previously available.
- *Committed to Detained Youth Who Escape or Walkaway from Residential Care:* In-depth analysis revealed that walkaways primarily occur while the youth is on pass in the community.
 - The Division contacted multiple states which utilize contract residential programs in a manner similar to Colorado to gain a new perspective on potential strategies that may work to minimize escapes/walkaways.
- *Timely Initial Placement for Committed Youth:* The Division continues to analyze available data to determine specific factors that impact delayed placements stays. Some of the identified factors include DYC transport delay, sheriff transport delay, Community Review Board (CRB), placement denial, and specialized treatment needs.
 - Performance has decreased throughout the recent quarter; however, DYC has completed a Lean project specifically aimed at identifying and overcoming inefficiencies and barriers to meeting the 40-day initial placement timeline for committed youth. Several strategies identified in the Lean project have been implemented. For example, multidisciplinary team review meetings are held an average, 25 days from the youth's arrival at the assessment center, 5 days earlier than previous average. Additionally, submissions of CRB referrals occur 5 days earlier than the previous 30 day average. Finally, submissions of youth placement referrals also occur 5 days earlier than previous 30 day average.
- *Fights and/or Assaults in DYC State-Operated Residential Facilities:* Performance on this measure has maintained well above the goal, where lower performance is desired.
 - In an effort to improve rates around fights and assaults, DYC has continued through the process of implementing Positive Behavioral Interventions & Supports (PBIS) into each state-operated facility. With a framework of consistent, strength-based behavior management programming (coupled with evidence-based therapeutic programming), PBIS is a new strategy aimed at reducing the occurrences of fights/assaults in state-operated, secure facilities.
- *Family Engagement Measures:* When DYC began measuring family engagement in October 2012, only 51% of client managers had contact with youths' families. By December of 2013, both measures have achieved their 90% goals. DYC implemented several strategies aimed at improving Family Engagement, including: working to improve the quality of data collected, holding youth and family focus groups to learn which

engagements families find meaningful, and working with individual Client Managers to improve the amount and quality of family contact.

Measures

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

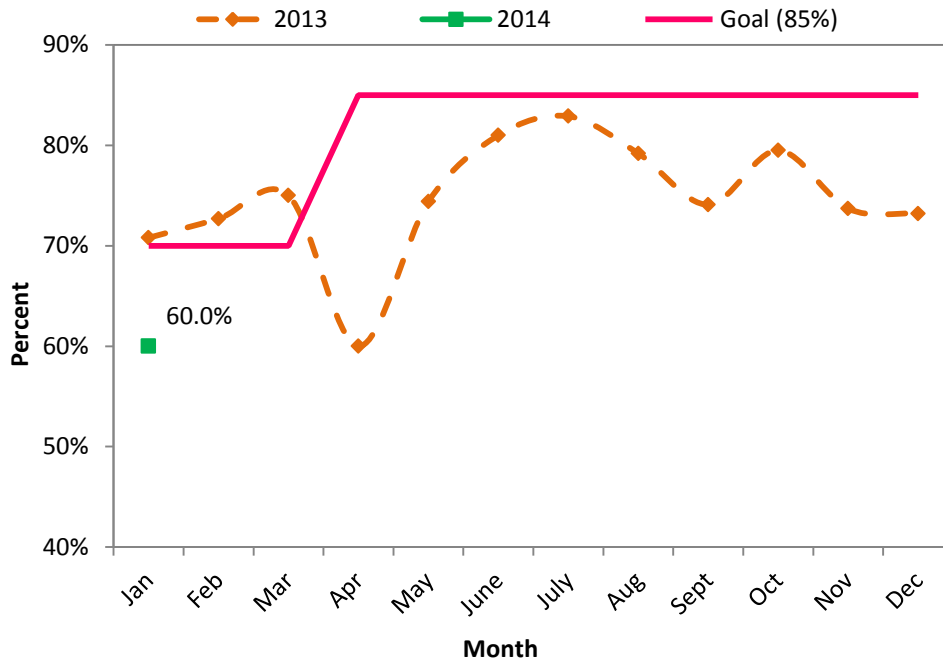
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Number of eligible clients enrolled in a Full or Part-Time program upon discharge from DYC (education, employment, or other form of pro-social community engagement)
Denominator: Total number of eligible DYC clients who discharge in a specific month; Average monthly denominator: 41

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 declined each month throughout the current quarter. The new goal of 85% has yet to be achieved.

Division of Youth Corrections (DYC)

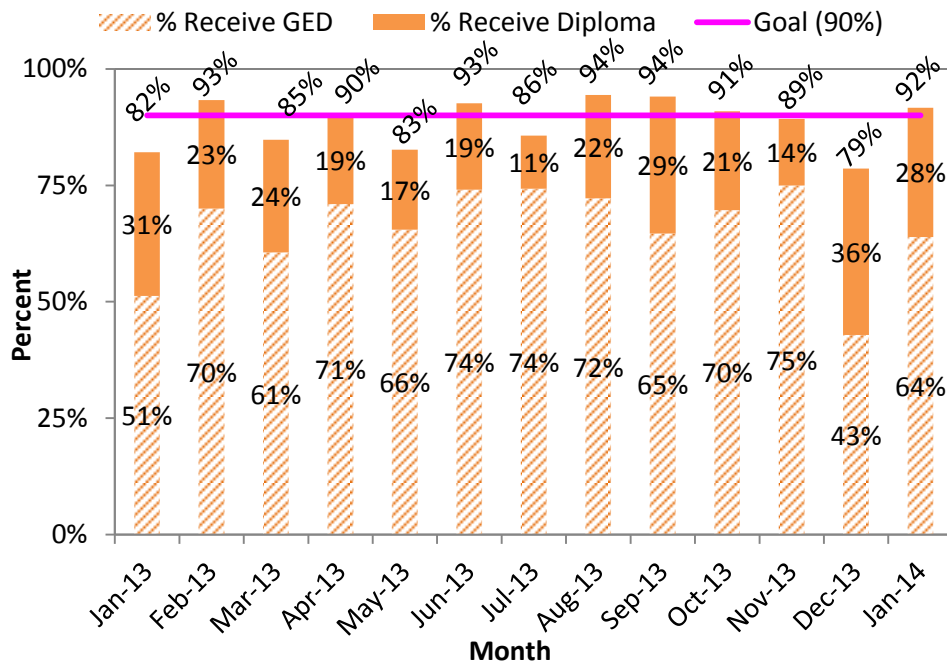
Measure: **Eligible youth who have a GED or high school diploma by discharge**

How it is measured: *Numerator:* Number of eligible youth who receive a GED or high school diploma by the time they discharge

Denominator: Total number of eligible DYC clients discharged in a specific month; Average monthly denominator: 31

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

Goal: **↑ 90%**



Trend: Performance in this quarter declined from 91% to 79% from November to December. However, performance recovered in January 2014, reaching above the 90% goal.

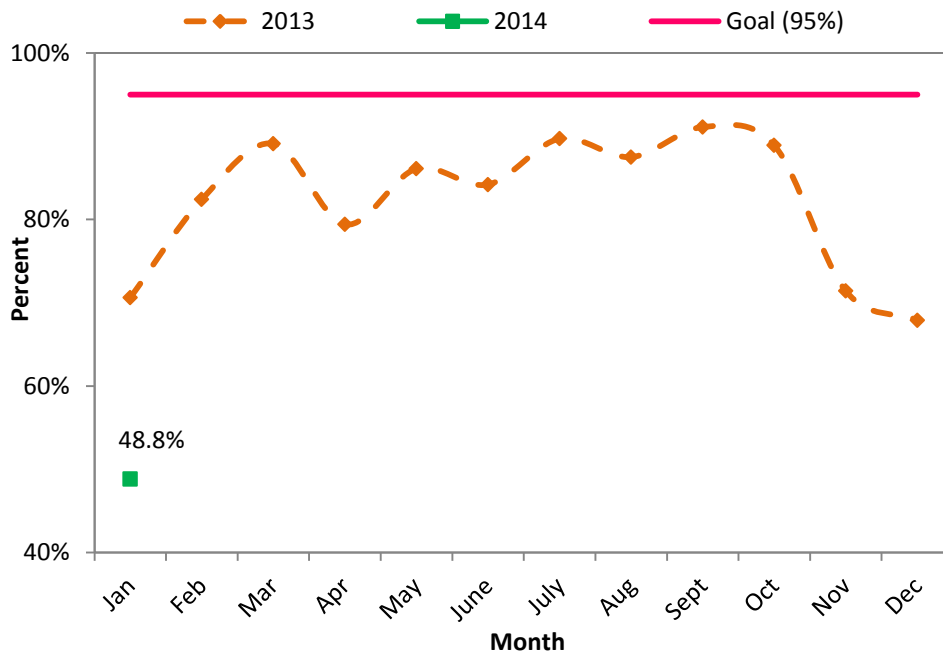
Division of Youth Corrections (DYC)

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 a specified month; Average monthly denominator: 37

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

Goal: **↑ 95%**



Trend: Performance declined in each month throughout the current quarter. The goal has yet to be achieved.

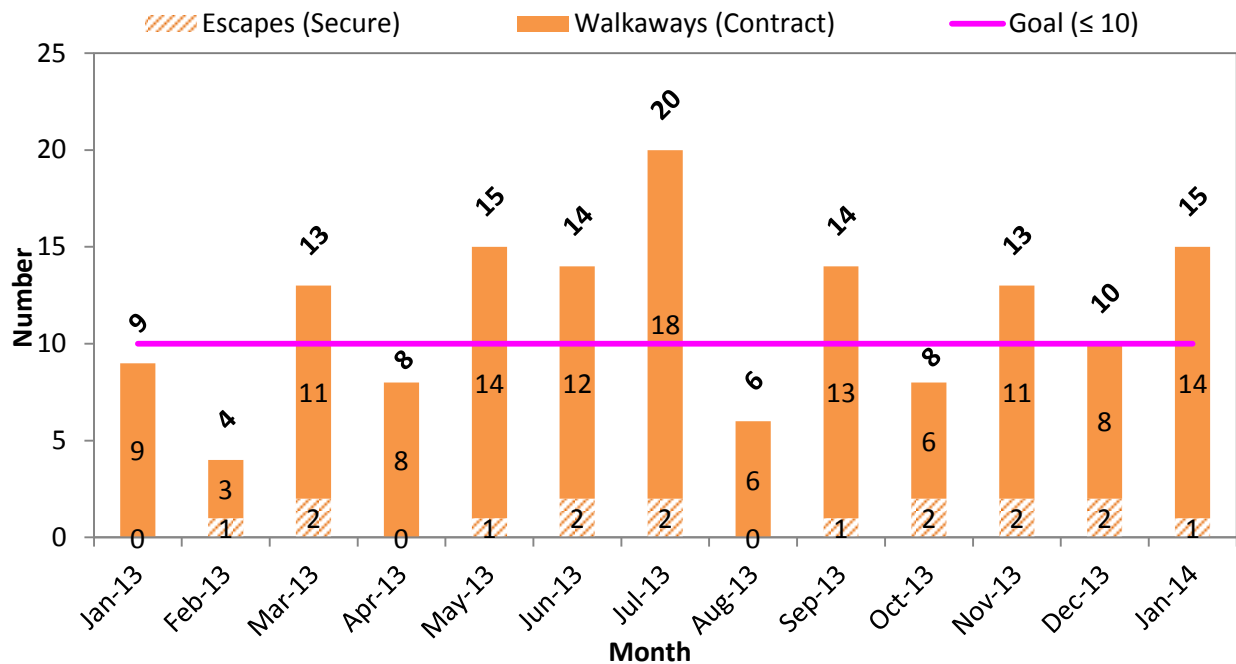
Division of Youth Corrections (DYC)

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

How it is measured: Number of escapes/walkaways occurring while committed youth are in state-operated residential placement (escape) or in contract staff-supervised or community placement (walkaway); Average daily population: 1,102

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

Goal: ↓ ≤10



Trend: Performance improved from November to December 2013 with 13 and 10 escapes/walkaways, respectively. Performance then worsened in January 2014, with 15 escapes/walkaways. The goal was achieved once within this quarter, in December 2013. Additionally, January 2014 performance is inconsistent with previous seasonal trends. Traditionally, winter months result in less escapes and walkaways, with more occurring in the summer months.

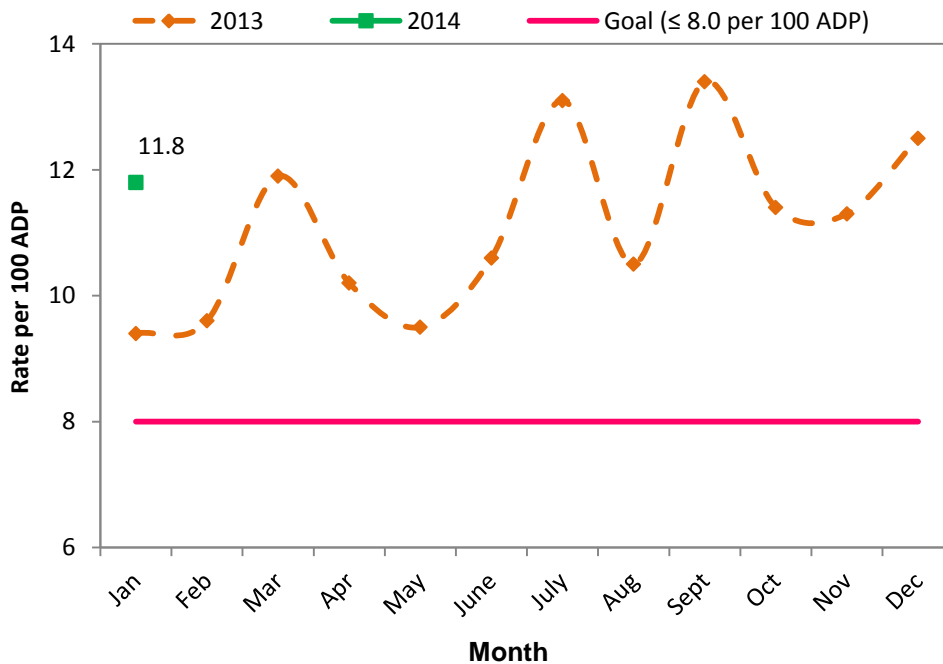
Division of Youth Corrections (DYC)

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: 621.2

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 worsened from November to December 2013; though performance improved slightly from December 2013 to January 2014. The goal was not achieved in any month throughout 2013.

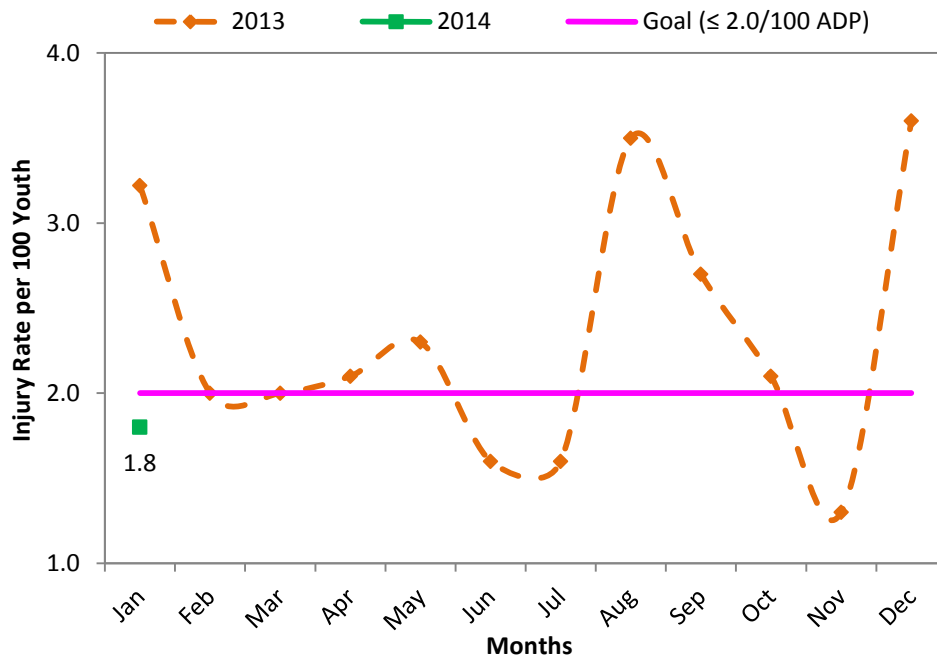
Division of Youth Corrections (DYC)

Measure: **Youth injuries in state-operated residential facilities**

How it is measured: *Numerator:* Number of youth injuries in state-operated facilities
Denominator: Monthly secure average daily population (ADP; state-operated detention, assessment, and state-secure commitment); Average daily population: 621.2

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: The lowest performance was seen in December 2013, while the best performance was demonstrated in November 2013. The goal was achieved in both November 2013 and January 2014.

Division of Youth Corrections (DYC)

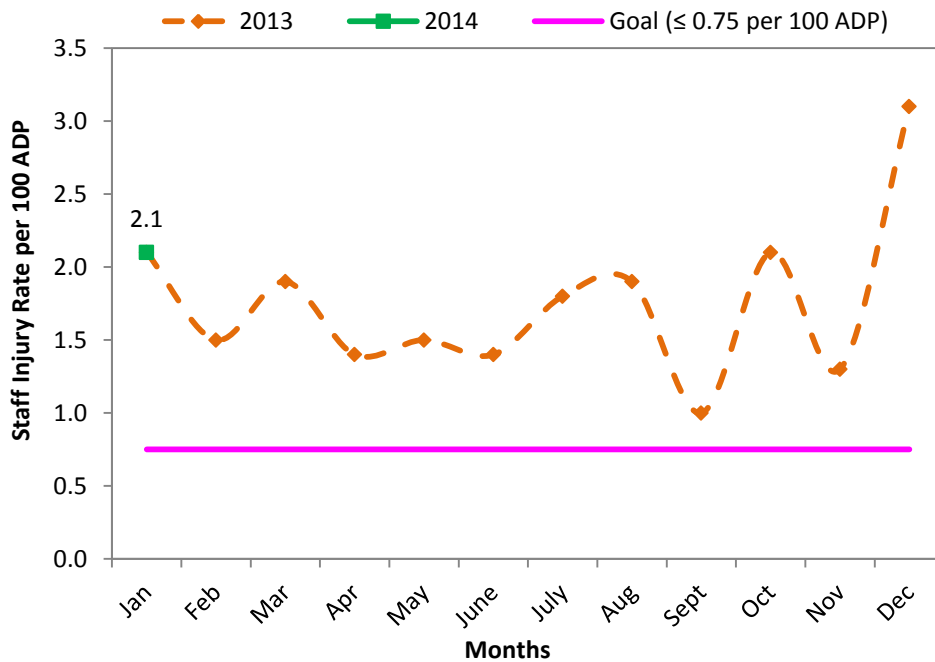
Measure: **Staff injuries on the job as a direct result of youth contact**

How it is measured: *Numerator:* Number of staff injuries on the job in state-secure 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: 621.2

Why this matters: State facilities should be a safe environment in which staff work.

Goal: **↓ ≤ 0.75/100 ADP**



Trend: Performance fluctuated throughout this quarter, averaging 2.1 staff injuries per ADP in January 2014. The goal is yet to be achieved.

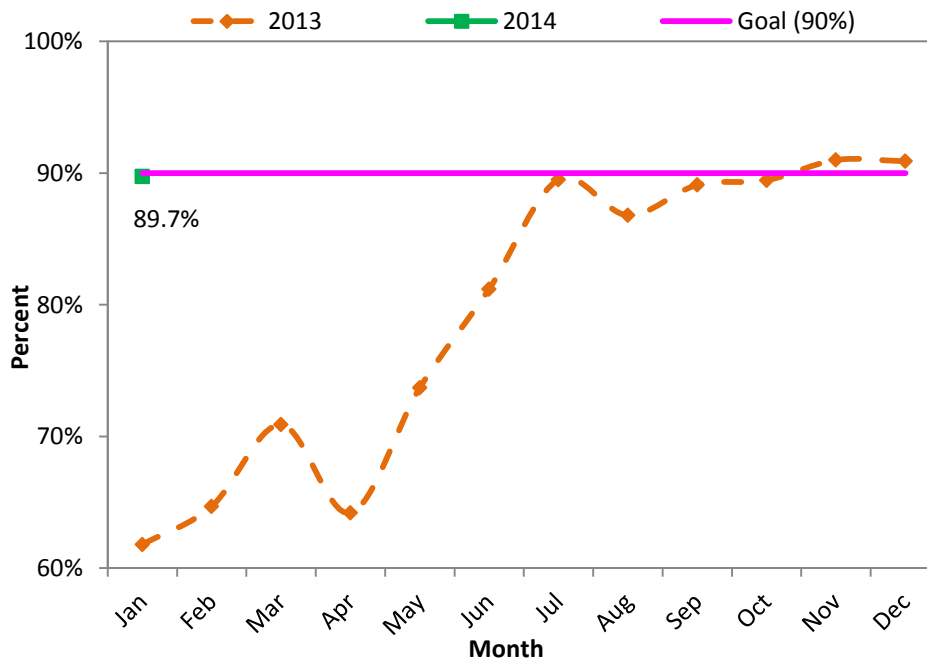
Division of Youth Corrections (DYC)

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: Total number of committed clients in state-secure residential facilities; Average monthly denominator: 416

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

Goal: **↑ 90%**



Trend: DYC achieved the goal for the first time during this quarter in both November and December 2013. Performance slightly declined in January 2014 and the goal was narrowly missed.

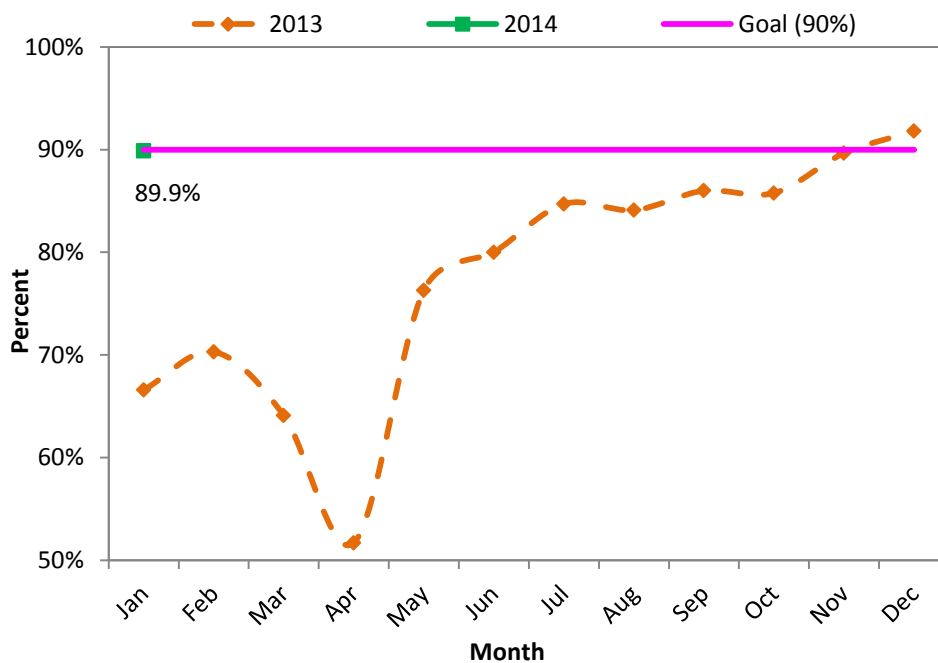
Division of Youth Corrections (DYC)

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 in state-secure residential facilities; Average monthly denominator: 1,156

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

Goal: **↑ 90%**



Trend: Performance increased in November and December 2013. The goal was achieved for the first time in December 2013. Performance slightly declined in January 2014 and the goal was narrowly missed.

Domestic Violence Program

Summary

Description

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

Director: Erin Mewhinney

Executive Summary

- The Domestic Violence Program has named Erin Mewhinney the new DVP Director as of January, 6th 2014.
- 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.
 - The measures currently utilized by the Division are federally-established and required.
- The Domestic Violence Program has begun collecting the federally required measures on a monthly basis from programs to better analyze, understand, and react to data that is more real-time.
- DVP has conducted a focus group and webinar with contracted programs to begin the discussions of implementing a database in order to more efficiently and effectively collect data.

Measures

- [Shelter Services \(Residential\)](#)
- [Advocacy and Individual Counseling \(Non-Residential\)](#)
- [Support Group \(Non-Residential\)](#)

Domestic Violence Program (DVP)

Measure: **Shelter services (residential; Federal Measure)**

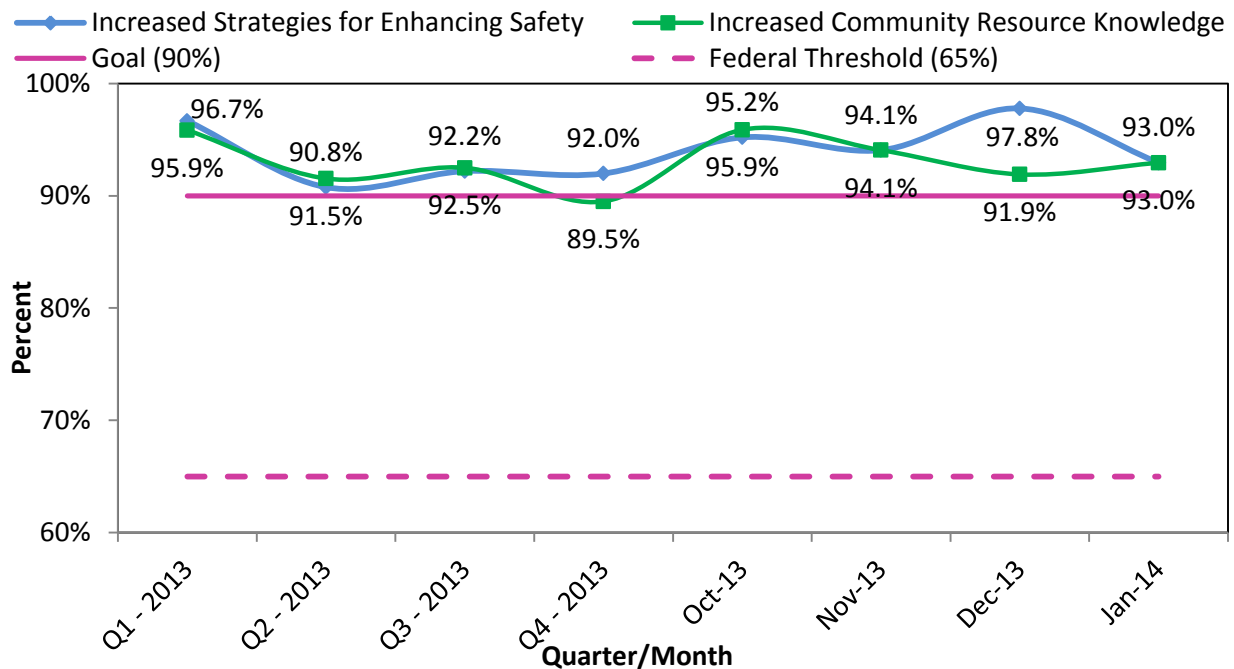
How it is measured: *Numerator:* Number of clients who indicated having achieved the specified outcome because of shelter service received

Denominator: The number of surveys returned by clients receiving shelter services;

Average monthly denominator: 137

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

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for both Increased Strategies for Enhancing Safety and Increased Community Resource Knowledge measures were above the goal for each month within the current quarter.

Notes: Monthly reporting began in October 2013. Prior to this date, data was reported quarterly.

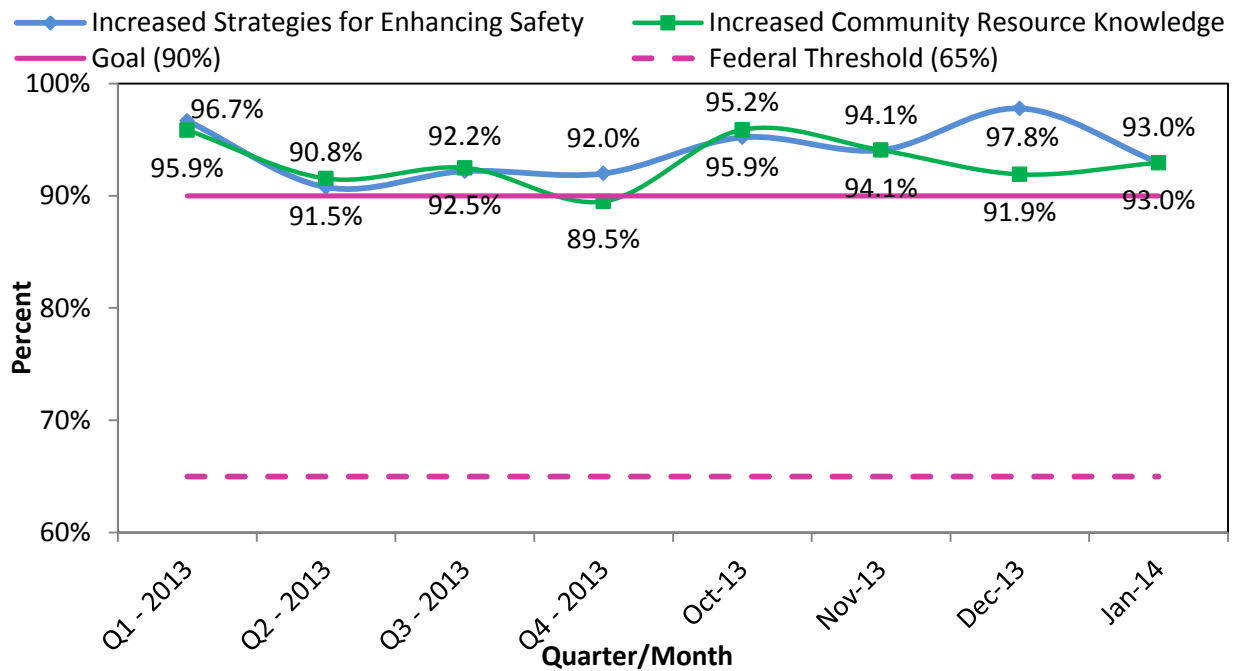
Domestic Violence Program (DVP)

Measure: **Advocacy and individual counseling (non-residential; Federal Measure)**

How it is measured: *Numerator:* Number of clients who indicated having achieved the specified outcome because of advocacy and/or individual counseling service received
Denominator: The number of surveys returned by clients receiving advocacy and/or individual counseling services; Average monthly denominator: 375

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

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for both Increased Strategies for Enhancing Safety and Increased Community Resource Knowledge measures were above the goal for each month within the current quarter.

Notes: Monthly reporting began in October 2013. Prior to this date, data was reported quarterly.

Domestic Violence Program (DVP)

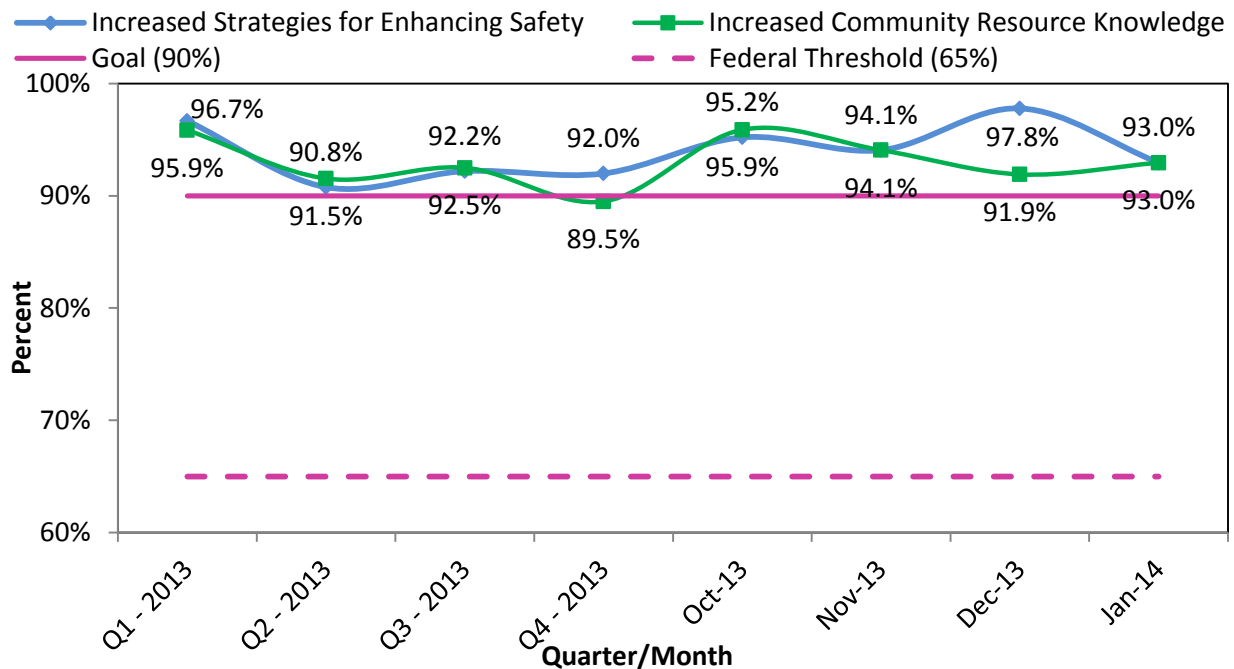
Measure: **Support groups (non-residential; Federal Measure)**

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

Denominator: The number of surveys returned by clients receiving support group services;
Average monthly denominator: 134

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

Goal: **↑ 65% (FVPSA); 90% (DVP)**



Trend: Performance for both Increased Strategies for Enhancing Safety and Increased Community Resource Knowledge measures were above the goal for each month within the current quarter.

Notes: Monthly reporting began in October 2013. Prior to this date, data was reported quarterly.

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 Supports (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:* Performance appears to have stabilized and manual payments account for only 3% (or \$174,000) of all CCCAP reimbursements – a decline of nearly \$1 million when compared to January 2011 when measurement in C-Stat began.
- *Children in the Colorado Child Care Assistance Program (CCCAP), under the age of five, in top tier quality rated facilities:* CCCAP serves nearly 10,000 children under the age of five each month, however, only 21% are served in high-quality child care. To address this gap, Colorado is using Race to the Top Grant funds to accelerate the development and implementation of an enhanced and expanded Next Generation Quality Rating and Improvement System (QRIS) that is embedded in state child care licensing.
- *Timely supervisory inspections:* In March 2014, ECL implemented a revised definition of timely for One-Month Inspections to further ensure the safety of children in licensed child care facilities. Under the previous definition, One-Month inspections were considered timely if they were completed in no more than 45 days. The revised definition only considers One-Month inspections timely if they are completed within 30 days.
- *Timely response to serious child care center complaints (Severity 1-3):* Performance remains at 100% after first exceeding the 95% goal in August 2013.

Measures

- [Accurate Child Care Reimbursement](#)
- [Children in the Colorado Child Care Assistance Program \(CCCAP\), under the age five, in top tier quality rated facilities](#)
- [Timely supervisory inspections](#)
- [Timely response to serious child care center complaints \(Severity 1-3\)](#)

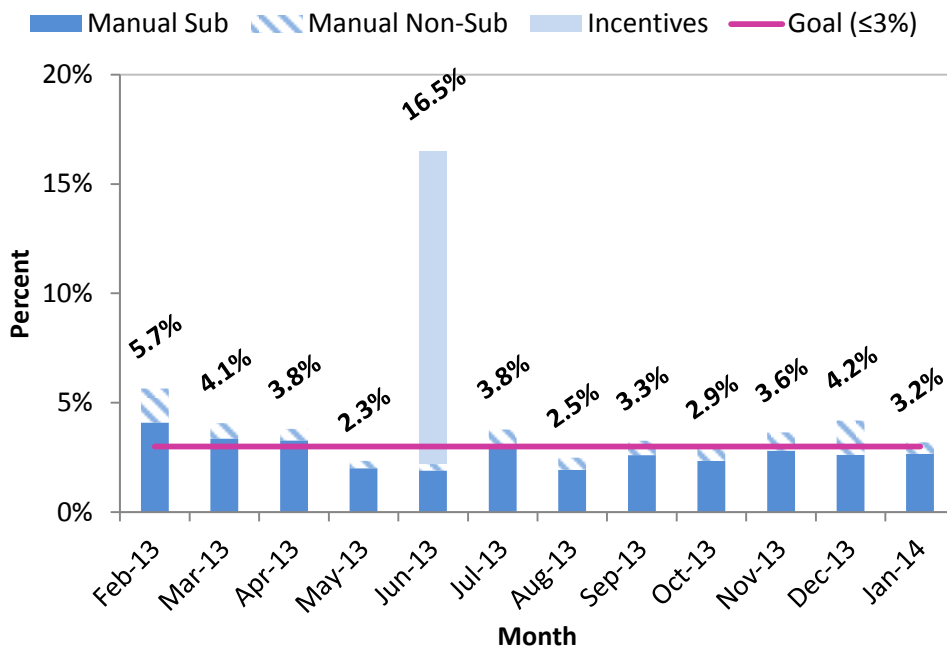
Early Care and Learning (ECL)

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
Denominator: Total amount, in dollars, of all CCCAP payments (payment of service, manual sub, and manual non-sub) paid to providers in a given month; Average monthly denominator: \$5,101,900

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 remains stable with limited fluctuation; the 3% goal was not achieved in the current quarter.

Notes: The spike in manual payments in June 2013 coincides with the end of the state fiscal year. Some counties underspend their CCCAP allocation throughout the year in an effort to avoid over-expending resources. Counties then distribute any remaining funds to providers in the form of incentives at the end of the fiscal year.

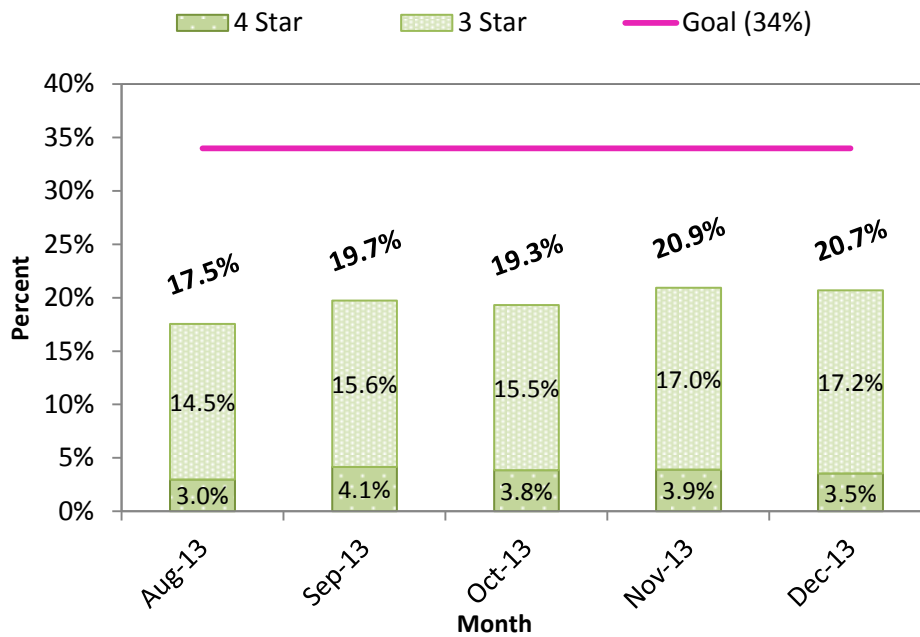
Early Care and Learning (ECL)

Measure: Children in the Colorado Child Care Assistance Program (CCCAP), under the age of 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
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: 9,933

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

Goal: ↑34%



Trend: Performance remained stagnant over the last quarter.

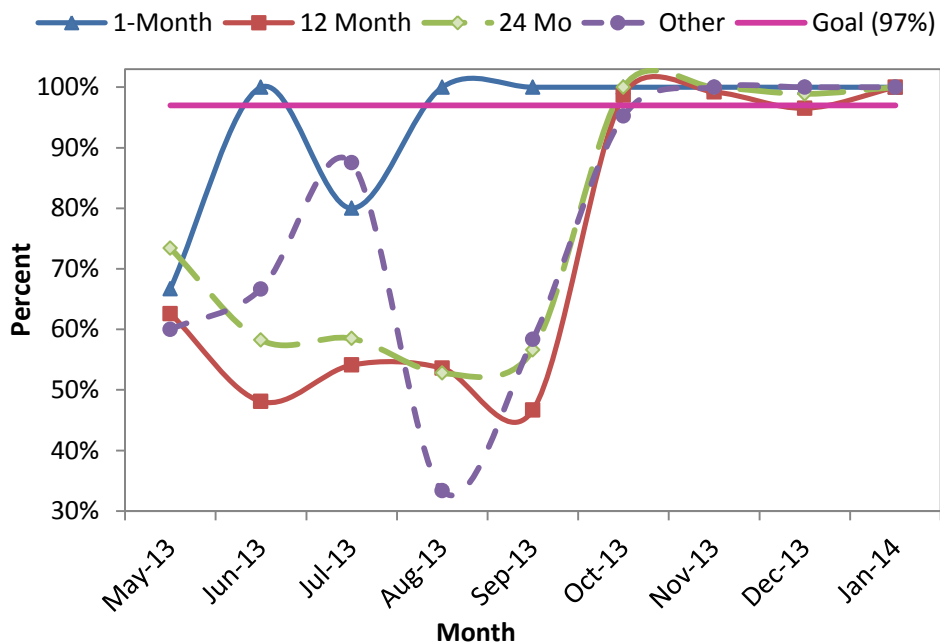
Early Care and Learning (ECL)

Measure: **Timely supervisory inspections**

How it is measured: *Numerator:* Total number of child care facility supervisory licensing inspections, by category, completed by the date the inspection is due in a given month
Denominator: Total number of child care facility licensing inspections, by category, due in a given month; Average monthly denominator: One-Month: 20; 12-Month: 130; 24-Month: 103; Other: 22; Total: 275

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 improved considerably in the most recent quarter; performance across all inspection categories exceeds the 97% goal.

Notes: This measure initially only included data for the highest risk categories: One-Month and 12-Month inspections; however, beginning in December 2013, ECL began reporting data for all categories.

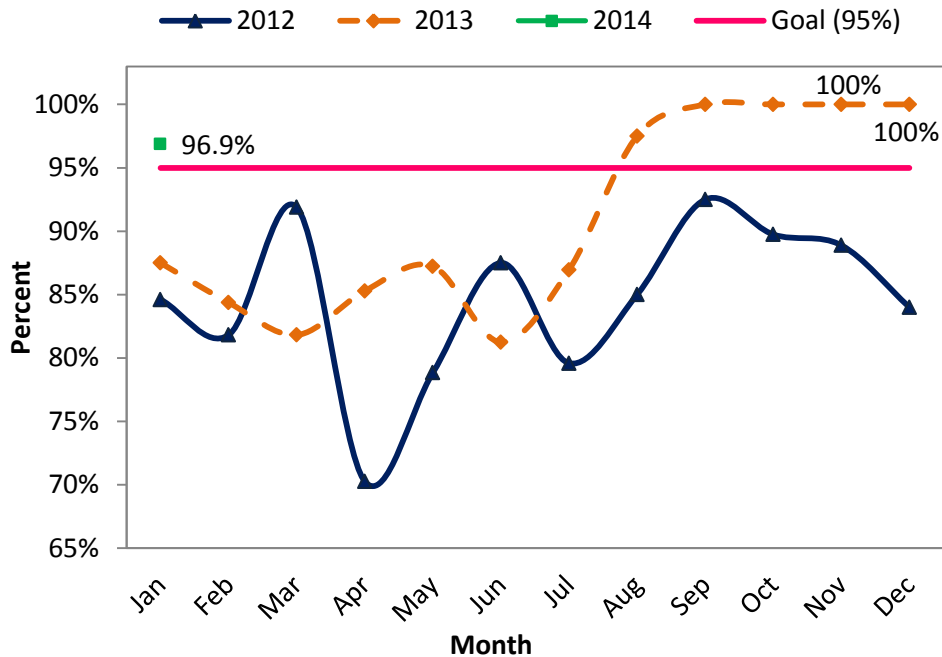
Early Care and Learning (ECL)

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

How it is measured: *Numerator:* Number of serious child care center complaints (severity 1-3) completed within the required corresponding timeframes;
Denominator: Total number of serious child care center complaint visits required in a given month (severity 1-3); Average monthly denominator: 30

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 stabilized at 100% after first exceeding the 95% goal in August 2013.

Notes: Data only include 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 Supports

Summary

Description

The Division of Community and Family Supports (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

- CFS programs support families and communities, many of which use two-generation approaches such as home visiting to improve outcomes for children and families. Early Intervention is the only CFS program tracking outcomes in C-Stat, however, the Division is actively working to:
 - *Align Performance Measures*—Align and implement performance measures across DCFS programs to more effectively target funding across programs, reduce duplication and improve outcomes for children.
 - *Increase Regularity of Data Collection*—Where possible, move to monthly data reporting to allow for constant monitoring and process improvement—implement through contract updates with funded entities.
 - *Focus on Client Level Data*—Begin to collect client level data where possible, but contracting entity at a minimum—implement through contract updates with funded entities.
 - *CFS-Wide Data System*—Reduce complexity and increase efficiency of data flows and storage by replacing the currently scattered data practices. Allow tracking of clients across programs, enabling more effective communication and referrals.
- *Timely transitions for infants and toddlers exiting Early Intervention*: This measure was added in March 2014.

Measures

- [Timely services for infants and toddlers eligible for Early Intervention \(Federal Measure\)](#)
- [Timely transitions for infants and toddlers exiting Early Intervention \(Federal Measure\)](#)
- [Early Intervention participants who substantially increase social-emotional functioning](#)
- [Early Intervention participants who substantially increase their use of knowledge and skills](#)
- [Early Intervention participants who substantially increase their use of appropriate behaviors to meet their needs](#)

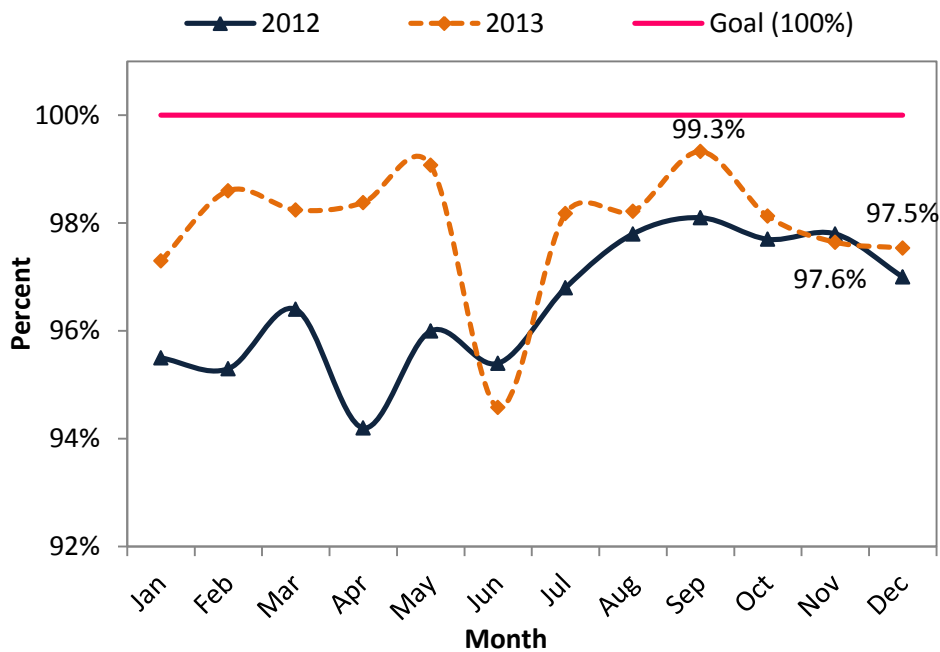
Community and Family Supports (CFS)

Measure: **Timely services for infants and toddlers eligible for Early Intervention (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: 938

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 declined in the most recent three months, going from 99.3% in September 2013 to 97.5% in December 2013. The 100% goal was not achieved.

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

Community and Family Supports (CFS)

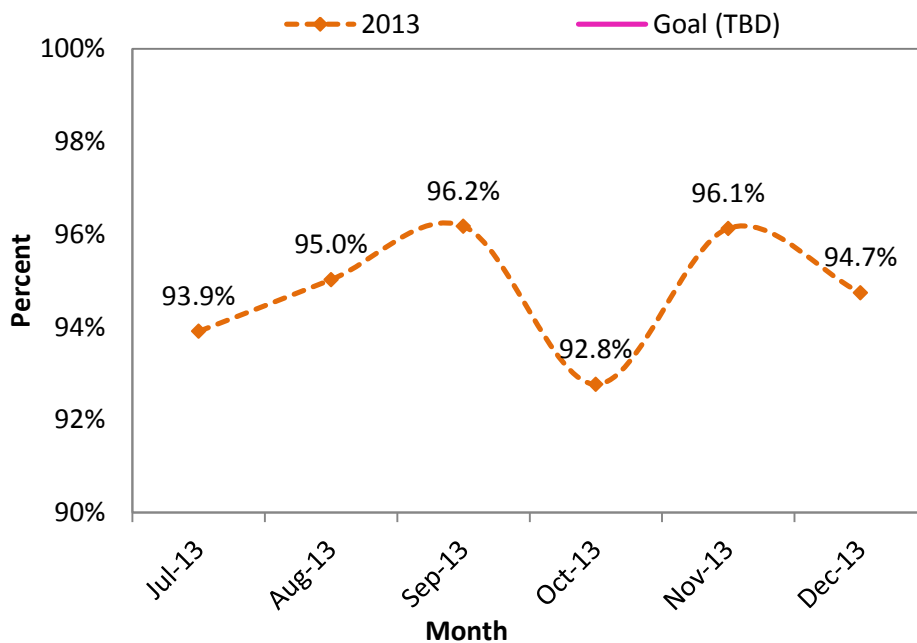
Measure: **Timely transitions for infants and toddlers exiting Early Intervention (Federal Measure)**

How it is measured: *Numerator:* Number of early intervention participants who completed a transition conference prior to age 2 years, 9 months

Denominator: Number of early intervention participants who reached the age of 2 years, 9 months and should have received a transition conference; Average monthly denominator: 262

Why this matters: Timely transition services put a child on a path toward enhanced well-being, as soon as possible.

Goal: **↑TBD**



Trend: This measure was added in March 2014; performance fluctuates between 92.8% and 96.2% for the six months of available data; a goal has not yet been established.

Notes: Children who are not eligible for Part B, as well as children with guardians who opted out of the transition conference, are not included in this measure. Part B of IDEA—the Individuals with Disabilities Education Act - is focused on services to school-aged children with disabilities. This includes preschoolers (ages 3-5) and children in K-12.

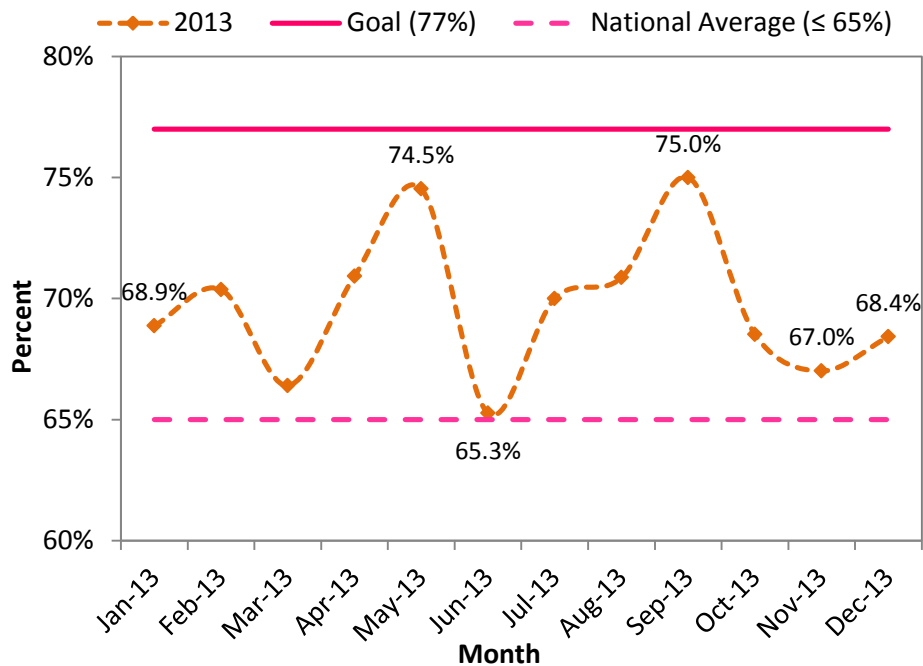
Community and Family Supports (CFS)

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;
 Average monthly denominator: 100

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 declined in recent months, fluctuating between 67% and 68%; the 77% goal was not achieved.

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.

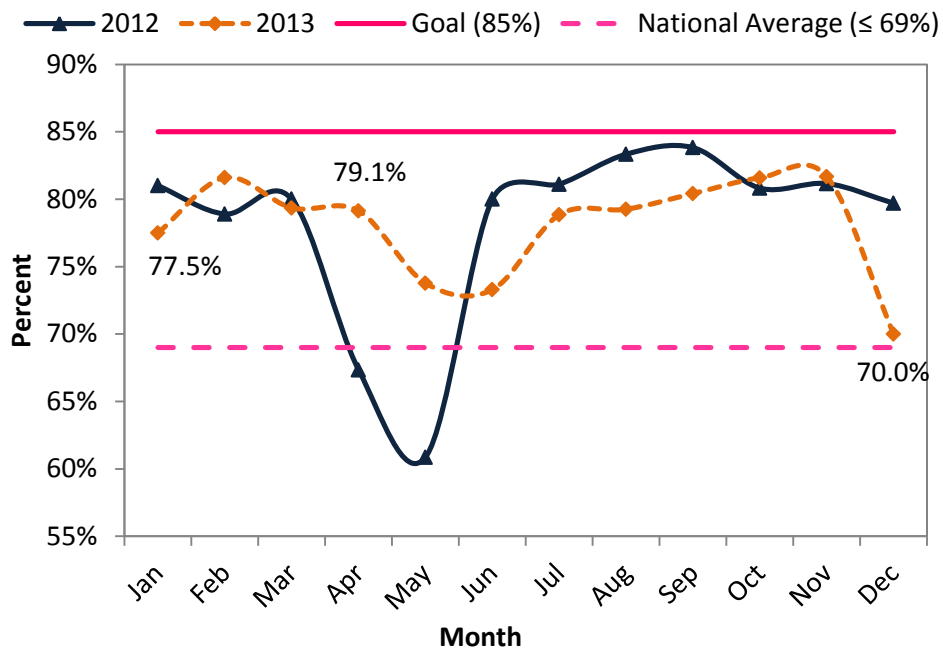
Community and Family Supports (CFS)

Measure: **Early Intervention participants who substantially increase 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: 144

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

Goal: **↑85%**



Trend: After stabilizing for several months, performance declined considerably in the last month of the current quarter (December 2013), going from 81.7% to 70%. The 85% goal has not yet been 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.

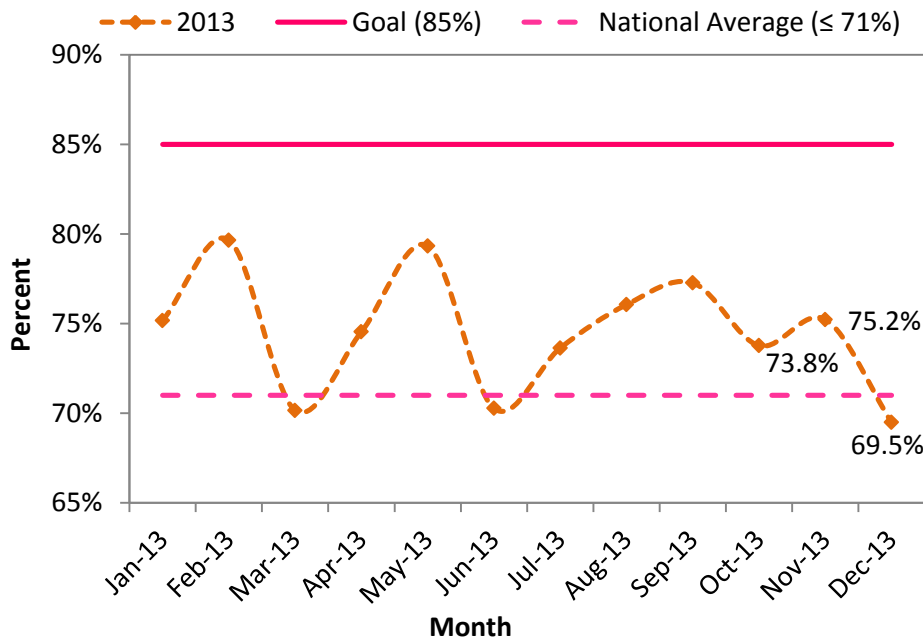
Community and Family Supports (CFS)

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: 116

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

Goal: **↑85%**



Trend: Performance declined in the last month of the current quarter (December 2013), going from 75.2% to 69.5%. The 85% goal was not achieved.

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.

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).

Acting Director: Todd Jorgensen

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

- *Child Support Collected:* The Department continues to see record levels of actual dollars collected while the overall percentage of child support collected has seen relatively flat performance for the last three quarters. This is due to increased dollars paid over an increase in dollars owed. The numerator, dollars owed is up nearly \$1.25 million this year over last, while the denominator, dollars owed, is up roughly \$870,000. The increase in payments eliminated the typical drop seen in previous January performance.
- *Arrears Payments* have seen an unprecedented consistency of performance this quarter, a departure from the highly varying results seen in previous years. There is no definitive explanation for the flat performance, though such factors as lower than average collections from a broad range of sources, higher than average collections of tax intercepts, fixes to automated systems, and efforts to match payment orders to obligors' ability to pay are all potential contributors.

Measures

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

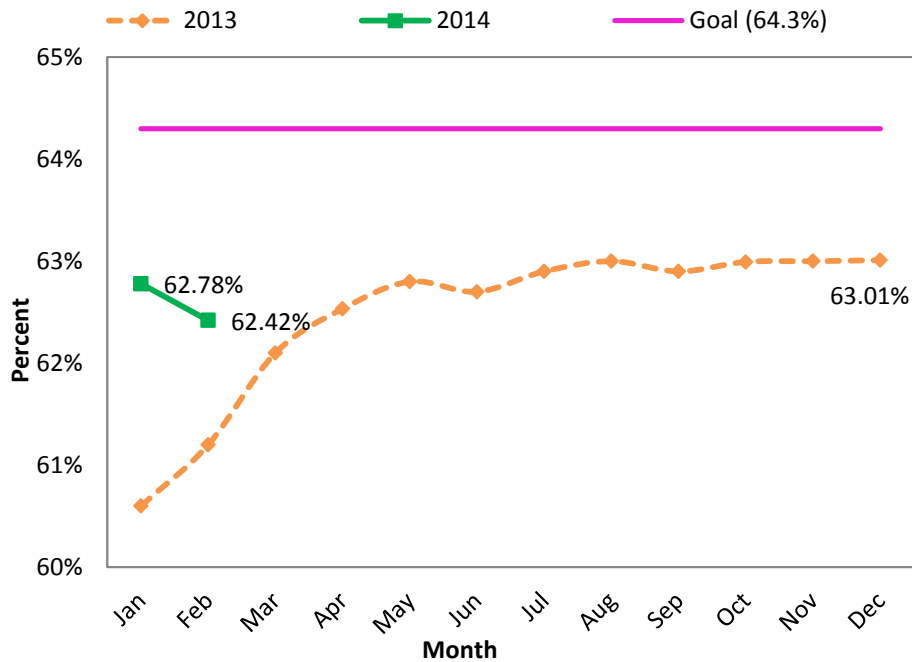
Child Support Services (CSS)

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 February 2014*: \$64.1m

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

Goal: **↑64.3%**



Trend: The beginning of calendar year 2014 shows a significant improvement over the same period in 2013. This is a departure from all previous years measured, where a drop-off in performance (as seen in 2013), was experienced. CSS has collected nearly \$1.25 million more dollars in 2014 than in the previous year.

Notes: *Cumulative dollar amount represents the months of January and February 2014.

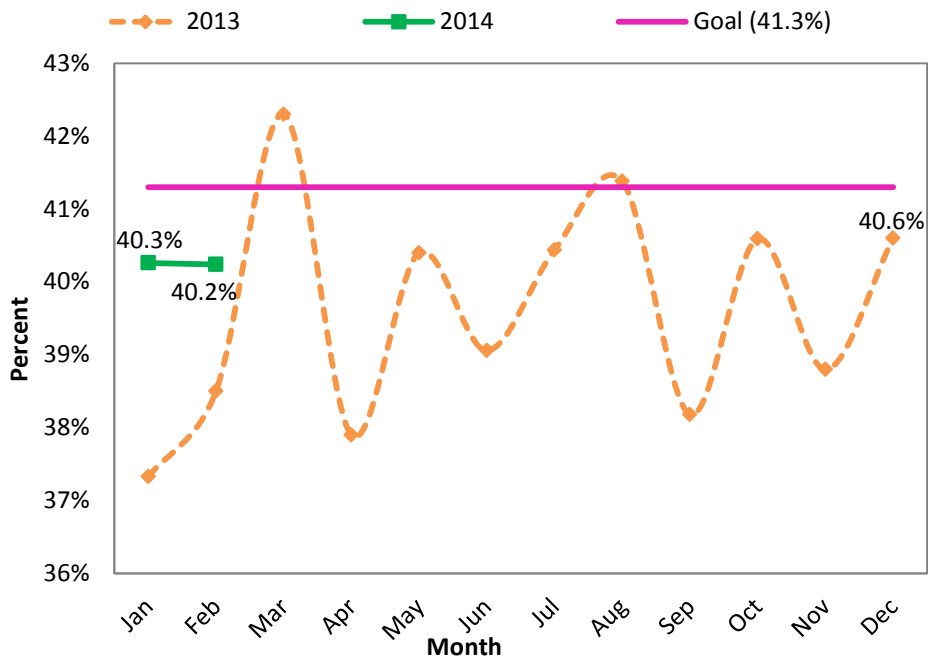
Child Support Services (CSS)

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: 110,569

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

Goal: **↑41.3%**



Trend: Significant improvement over same period in the previous year. The measure has seen three continuous months of flat performance. This is inconsistent with the prior year's performance.

Colorado Refugee Services Program

Summary

Description

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

Director: Paul Stein

Executive Summary

- CRSP is currently working with Employment Management Professionals (EMP), an organization that focuses on increasing employment among populations that have significant employment barriers, such as recent immigrants and refugees. The work has led to a re-writing of the contracts CRSP holds with volunteer agencies, which has in turn led to reorganization of these organizations so that they are increasingly able to help connect refugees with sustainable and worthwhile employment.
- Partly as a result of the work with EMP, CRSP has added three new measures to be reported this quarter: *Improved Placements*, *Increase in Hourly Wage*, and *Employment Sector*. Additionally, the measure *Language Progression* has been removed.
- *Improved Placements*: This was developed to measure how well CRSP and community partners are completing their obligations for the full 5 year term refugees are eligible for services. By providing high quality programming, it helps to ensure that if a refugee requires subsequent placements, the placement can be improved upon, thus enabling long-term economic security.
- *Increase in Hourly Wage*: This measures how well job placements are paying clients. This measure is strongly connected to the measure of *Employment Sector* as certain sectors (meat packing especially) tend to pay higher wages. This is attributable to CRSP's efforts to diversify industries in which refugees are being placed into jobs, often trading wages for safer working conditions and career potential.

Measures

- [Entered Employment](#)
- [Employment Retention 90 Days](#)
- [Improved Placements](#)
- [Increase in Hourly Wage](#)
- [Employment Sector](#)



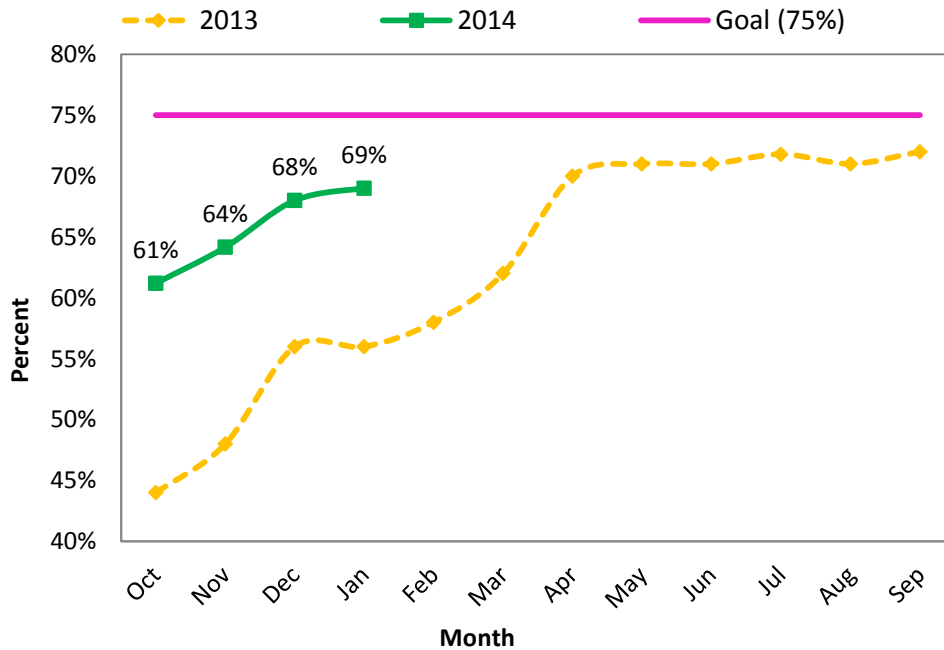
Colorado Refugee Services Program (CRSP)

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: 510

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

Goal: **↑75%**



Trend: This measure is performing well-above the same period last year. The improvement in performance represents roughly an additional 60 individuals entering employment through CRSP programs.

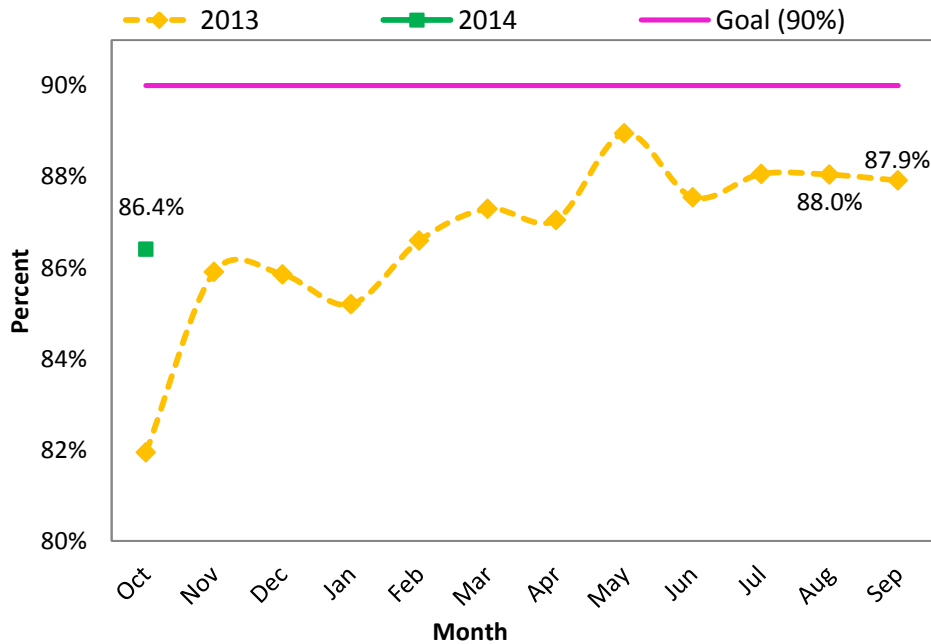
Colorado Refugee Services Program (CRSP)

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: 87

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

Goal: **↑88%**



Trend: Performance in 2014 started well-above same period last year, maintaining performance gains from the end of 2013.

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

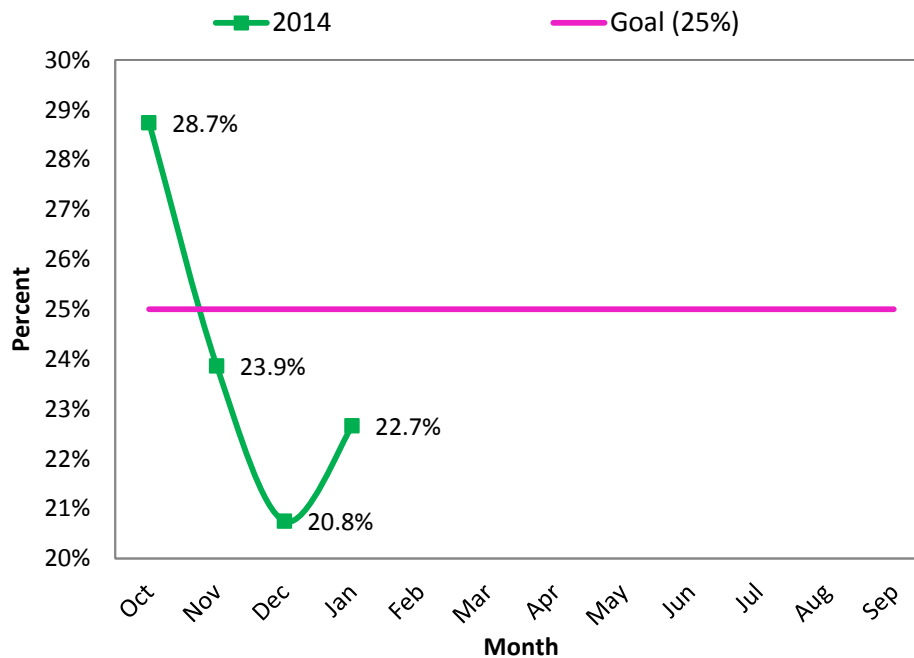
Colorado Refugee Services Program (CRSP)

Measure: **Improved placements**

How it is measured: *Numerator:* Cumulative number of placements which were improved from previous employment based on wage, hours, or benefits
Denominator: Cumulative job placements (both initial and secondary) for the month;
Cumulative monthly denominator: 353

Why this matters: Improved job placement shows continued commitment by volunteer agencies to clients success as well as an increased likelihood of meaningful employment, and long-term economic security.

Goal: **↑20%**



Trend: This measure saw a small rebound in January after three months of decline from the beginning of the Federal Fiscal Year.

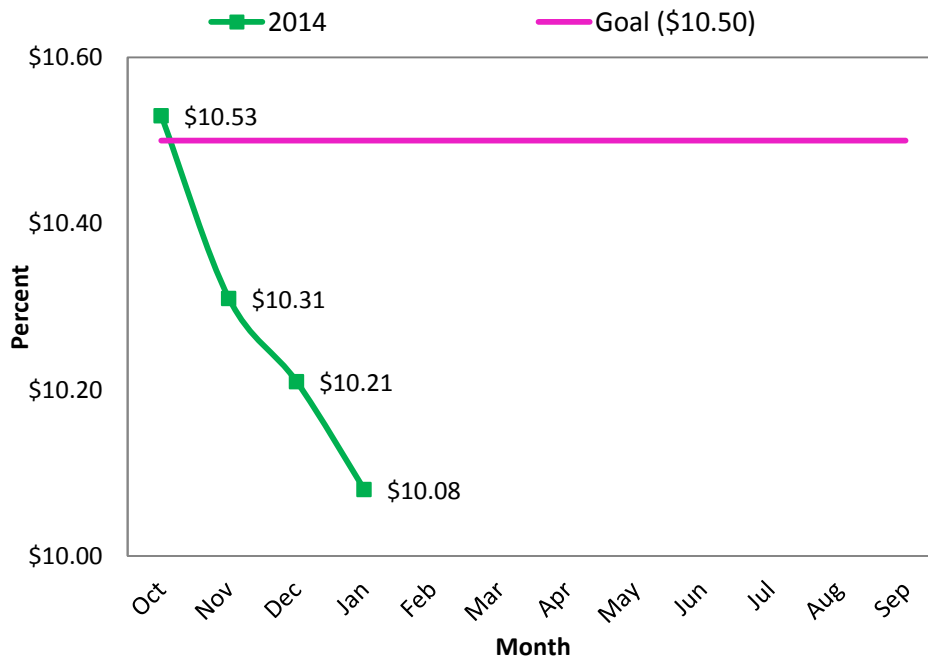
Colorado Refugee Services Program (CRSP)

Measure: **Increase in hourly wage**

How it is measured: Cumulative Average Wage (full time jobs only) each month for refugees as reported by Volunteer Agencies; Cumulative Average Wage: \$10.08

Why this matters: An increased hourly wage represents broad improvements in the earnings potential of refugees increasing the ability of refugees to afford basic needs, education and savings, contributing to long-term economic security.

Goal: **↑\$10.50**



Trend: This measure has been in decline since October.

Colorado Refugee Services Program (CRSP)

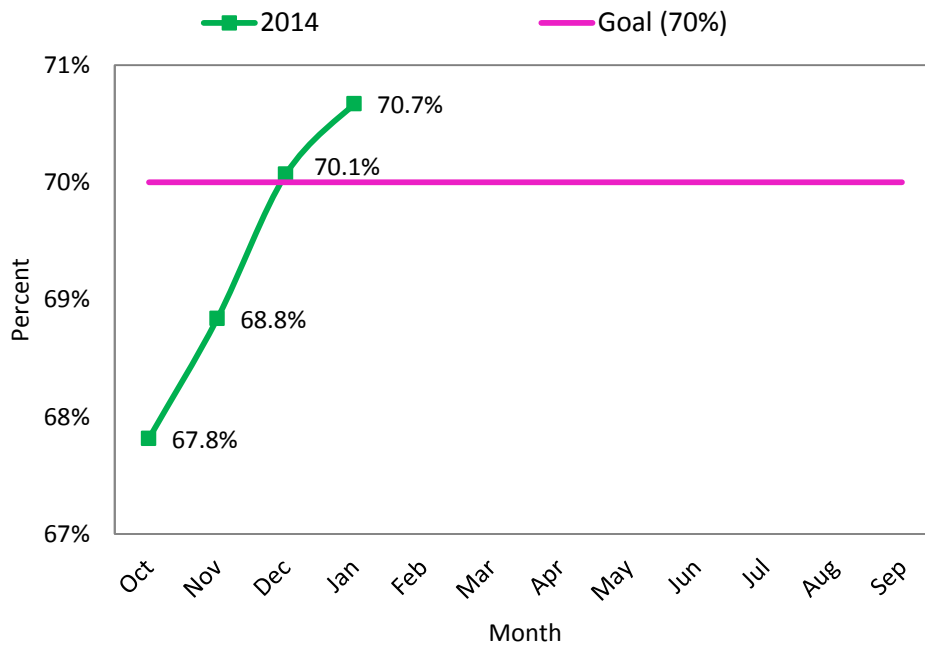
Measure: **Employment sector**

How it is measured: *Numerator:* Cumulative number of placements outside of the meat packing and hotel industries

Denominator: Cumulative total jobs in all industries for the current Federal Fiscal Year;
Cumulative monthly denominator: 375

Why this matters: Employment outside of meat packing and hotel industries is generally safer and more stable allowing refugees the opportunity to grow in a career with a greater likelihood to lead to long term employment and economic security.

Goal: **↑70%**



Trend: This measure has exceeded the goal for two months.

Employment and Benefits

Summary

Description

The Employment and Benefits Division (EBD) houses the state's cash assistance programs for families and older adults. One program, Adult Financial (AF), offers 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. A second program, Colorado Works (CW), 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

- The Employment and Benefits Division (EBD), as well as Food and Energy Assistance, continued to recover from the negative effects of three events, including: 1) the implementation of the federal Affordable Care Act, which required counties to update Medicaid records prior to an October 1, 2013 deadline; 2) annual Cost of Living Adjustments, which caused thousands of exceptions to internal system logic, causing the need to fix these cases by hand, and 3) flooding along the front range which displaced county workers for a period, reduced days available to work processing cases, and increased applications for emergency aid.
- Additionally, the ten largest Colorado counties are undergoing Business Process Reengineering for eligibility-based programs in the Employment and Benefits Division and Food and Energy Assistance (Colorado Works, Adult Financial, and Food Assistance). This is a large scale reorganization of county practices intended to eliminate inefficiencies, allowing applications for benefits to be processed more timely and accurately.
- *Timeliness of Colorado Works redetermination (RRR) applications:* While not reported here, Colorado Works has seen record volumes of redetermination (RRR) applications. The increased volume is due to RRR's being required after 6 months (a change from the previous 12 month timeframe). This is significant as most Colorado Works recipients receive benefits for an average of seven months; as such they were not previously required to submit a redetermination application. Redetermination volume is 2-3 times higher than in previous years.
- EBD has added two measures this quarter:
 - *Payment Accuracy Rate* reflects the increased focus on providing the right payments to the right person, lessening the effect of claims and recoupments on customers, and increasing their short term economic security.
 - *Entered Employment* reflects the Division's focus of Colorado Works acting as a program intended to guide customers toward full, sustainable employment, increasing their long term economic security.
- *Timely New Adult Financial Applications:* Performance fell below the goal after exceeding in the previous quarter; however this was short lived as the measure recovered to exceed the 95% threshold after a single month.

Employment and Benefits

Summary, Continued

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](#)
- [Payment Accuracy Rate](#)
- [Entered Employment](#)

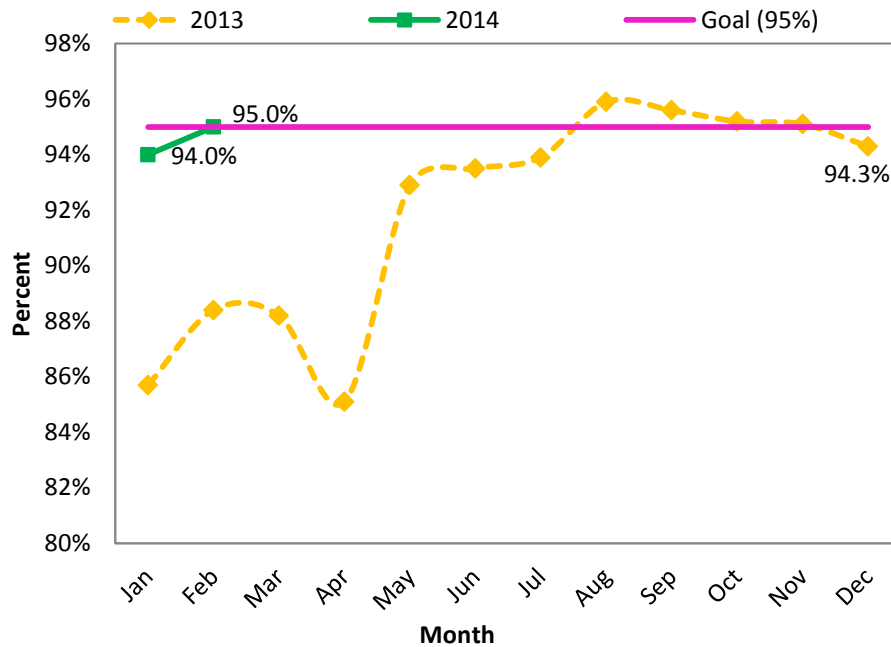
Employment and Benefits Program: Adult Financial

Measure: **Timely new adult financial applications**

How it is measured: *Numerator:* Number of timely processed new benefit applications
Denominator: Number of processed new benefit applications; Average monthly denominator: 2448

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

Goal: **↑95%**



Trend: This measure dipped below the goal in December 2013 and January 2014 after steady performance for four months. It has since rebounded to meet the goal in March.

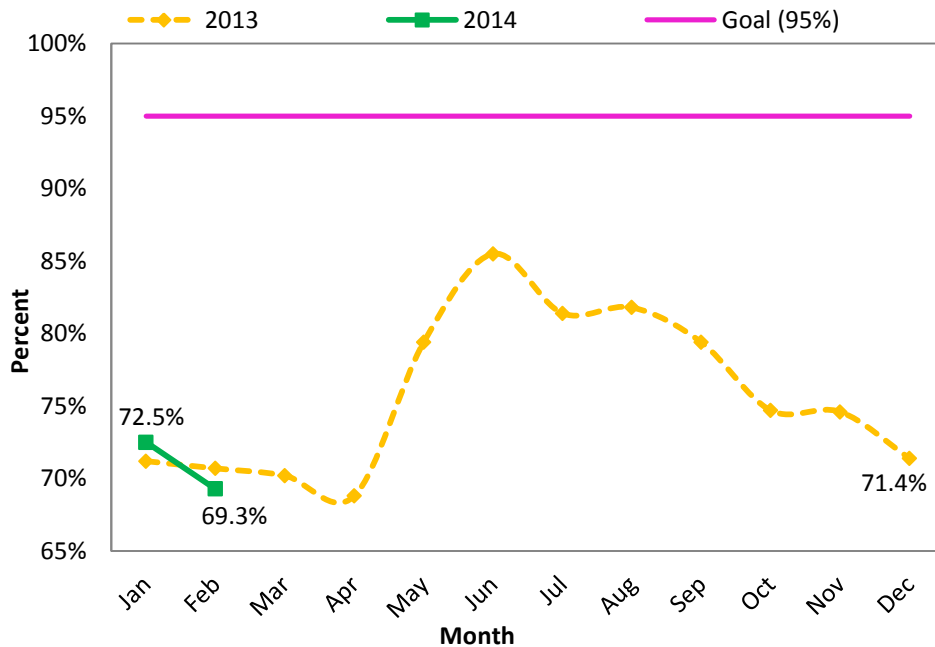
Employment and Benefits Program: Adult Financial

Measure: **Timely adult financial redetermination applications**

How it is measured: *Numerator:* Number of timely processed redetermination applications
Denominator: Number of processed redetermination applications; Average monthly denominator: 1311

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

Goal: **↑95%**



Trend: Measure continues to see a sustained decline for three consecutive quarters.

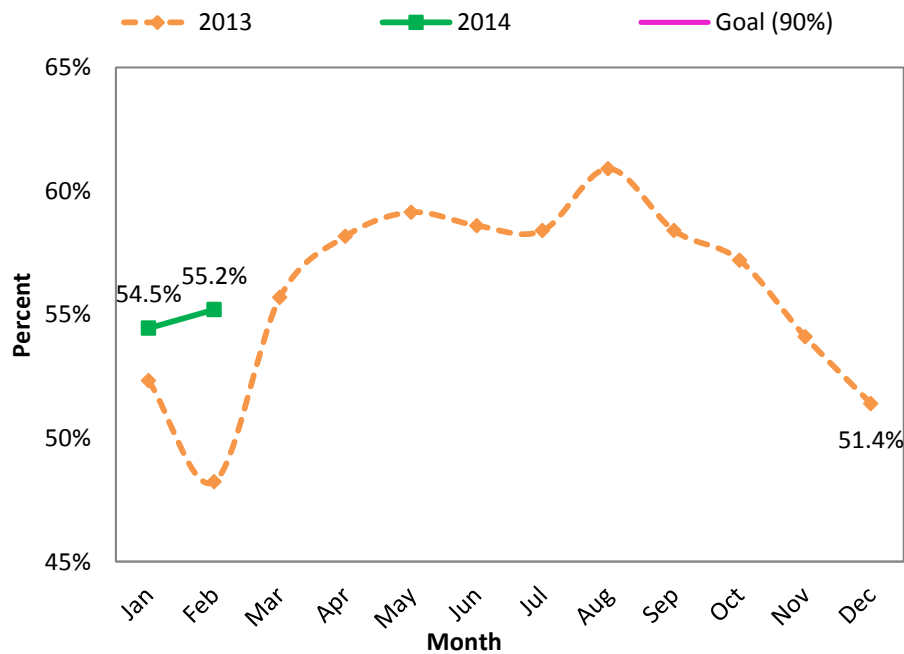
Employment and Benefits Program: Colorado Works

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

How it is measured: *Numerator:* Number of new applications processed in 7 days or less
Denominator: Total number of new applications; Average monthly denominator: 2714

Why this matters: More timely and efficient 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: This measure saw two months of gains this quarter, rebounding from steep declines in the previous two quarters. Counties are performing better than the same period for January and February 2013.

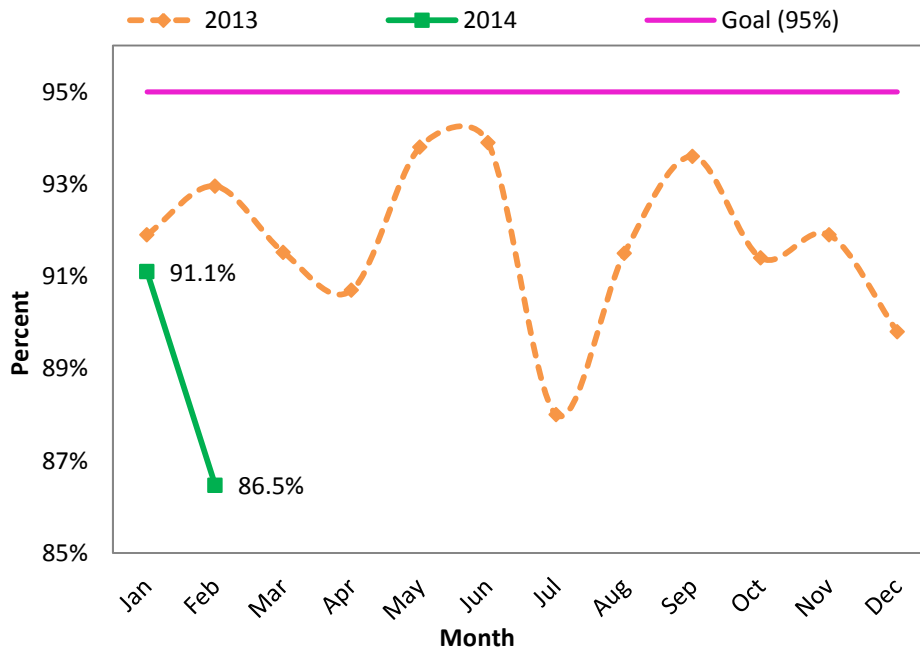
Employment and Benefits Program: Colorado Works

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: 1442

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: This measure has seen a continued decline over the past two quarters, ending in February at the lowest point in over a year.

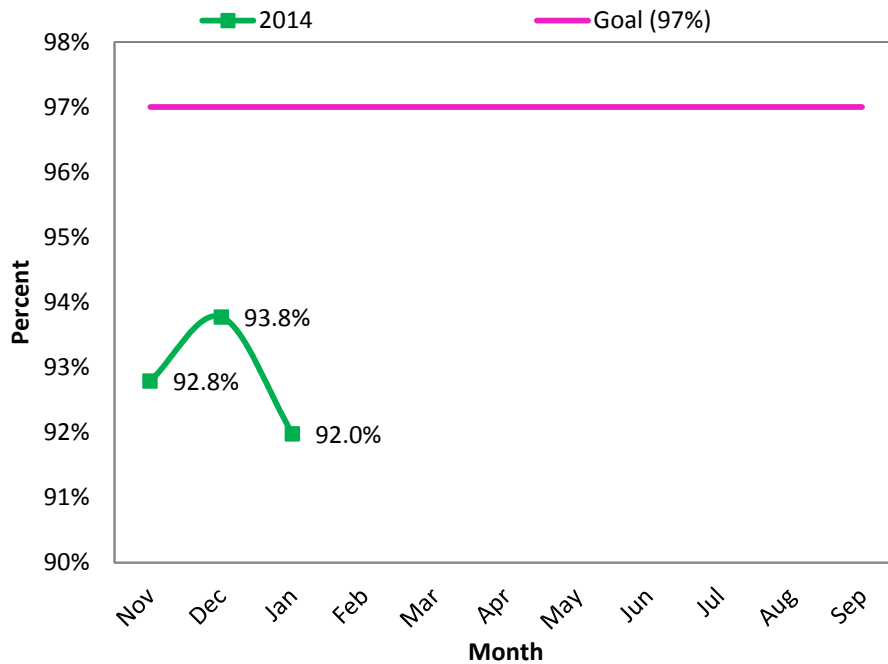
Employment and Benefits Program: Colorado Works

Measure: **Payment accuracy rate**

How it is measured: *Numerator:* Cumulative amount of misauthorized dollars in the sample
Denominator: Cumulative amount of authorized dollars in the sample; \$20,471

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

Goal: **↑97%**



Trend: Performance is hovering around 4-5% below the goal for the entire quarter with a downward trend line forming.

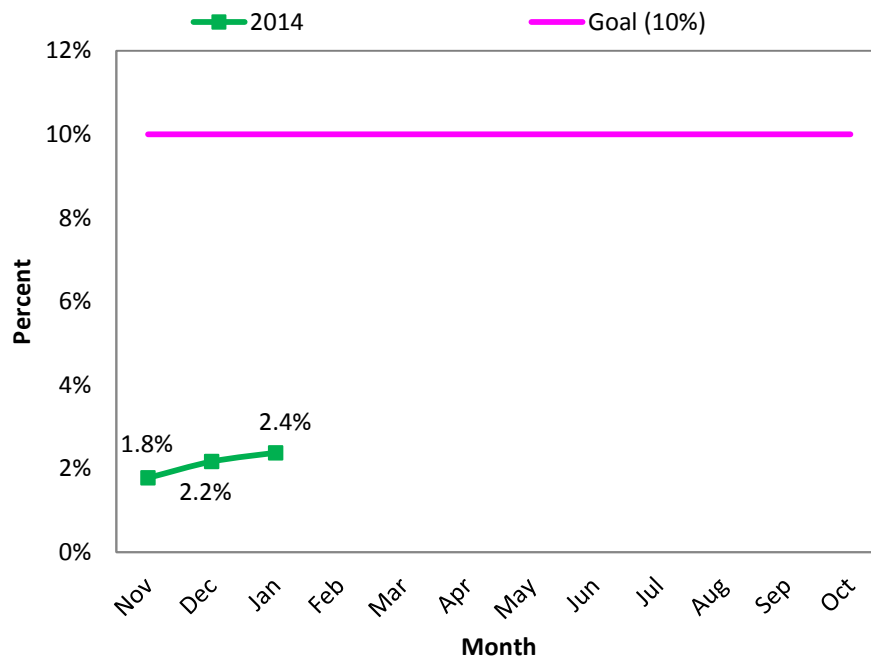
Employment and Benefits Program: Colorado Works

Measure: **Entered employment**

How it is measured: *Numerator:* Number of individuals entered employment for the month
Denominator: Total unique individuals enrolled in Workforce Development; Average number of individuals enrolled in Workforce Development :15,347

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

Goal: **↑10%**



Trend: This measure has improved since reporting began in November.

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

- The Division of Food and Energy Assistance (FEA) as well as the Employment and Benefits Division (EBD), continued to recover from the negative effects of three events, including: 1) the implementation of the federal Affordable Care Act, which required counties to update Medicaid records prior to an October 1, 2013 deadline; 2) annual Cost of Living Adjustments, which caused thousands of exceptions to internal system logic, causing the need to fix these cases by hand 3) Flooding along the front range which displaced county workers for a period, reduced days available to work processing cases, and increased applications for emergency aid.
- Additionally, the ten largest Colorado counties are undergoing Business Process Reengineering (BPR) for eligibility-based programs in the Employment and Benefits Division and Food and Energy Assistance (Colorado Works, Adult Financial, and Food Assistance). This is a large scale reorganization of county practices intended to eliminate inefficiencies, allowing applications for benefits to be processed more timely and accurately.
- *Payment Error Rate*: In conjunction with BPR efforts, the FEA Division and the SNAP-Quality Assurance Division within the Office of Performance and Strategic Outcomes began working closely with county leaders to affect positive change in this measure.
- *Timeliness of New Applications*, previously moved to the Dashboard, was added back into the C-Stat slide deck as of February 2014 as performance has experienced a decline over the past several months. Performance on this measure has been below the goal line since October 2013 (November 2013 C-Stat meeting).

Measures

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



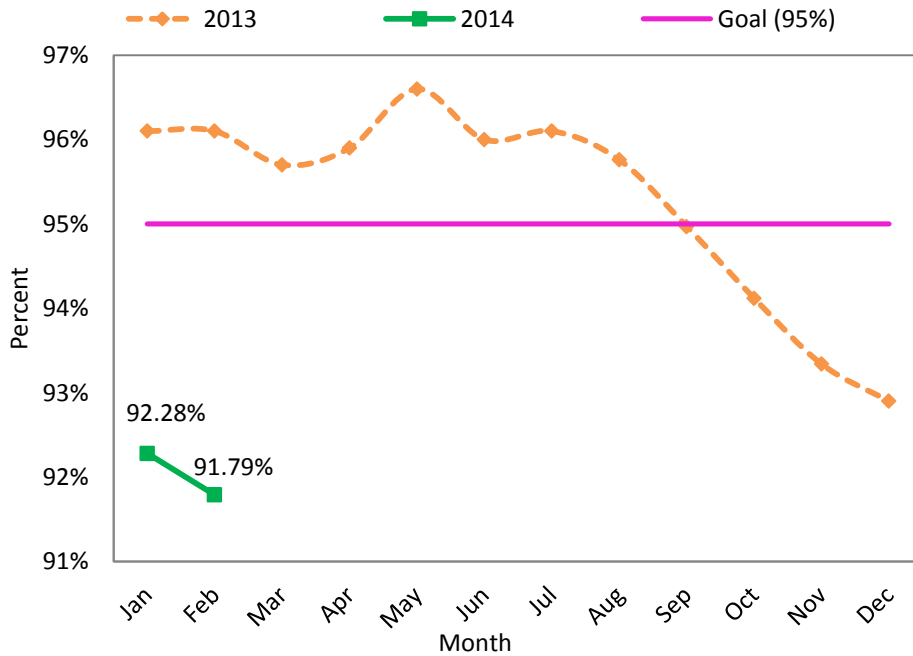
Food and Energy Assistance Program: Food Assistance (FA)

Measure: **Timeliness of new applications**

How it is measured: *Numerator:* Number of new applications processed timely
Denominator: Total number of new applications; Average monthly denominator: 24,034

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

Goal: **↑95%**



Trend: Performance has declined for two consecutive quarters ending February 2014 at the lowest point in over a year.

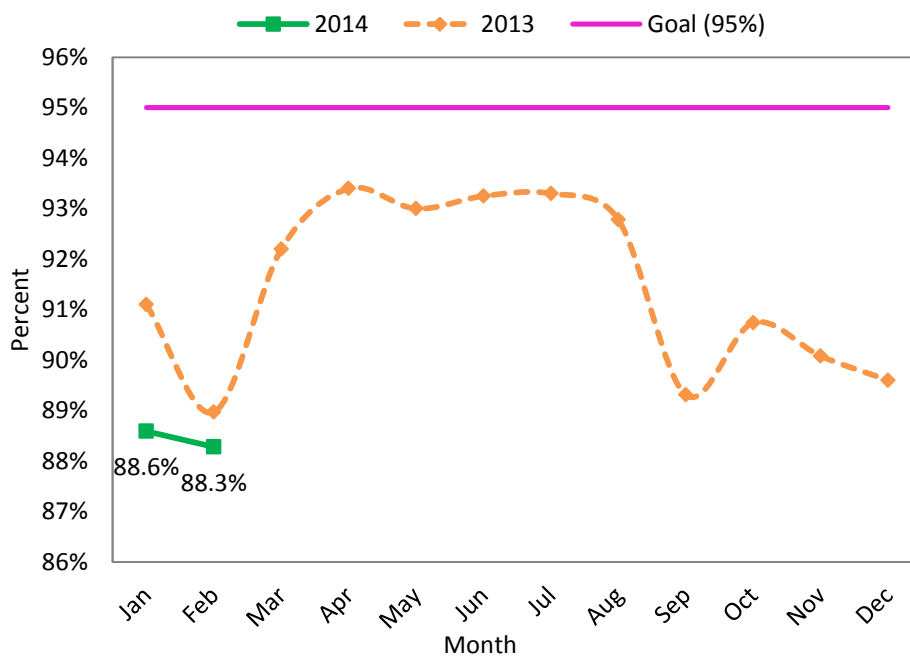
Food and Energy Assistance Program: Food Assistance (FA)

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: 23,649

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

Goal: **↑95%**



Trend: Performance has declined for five consecutive months ending at the lowest point in over a year in February 2014.

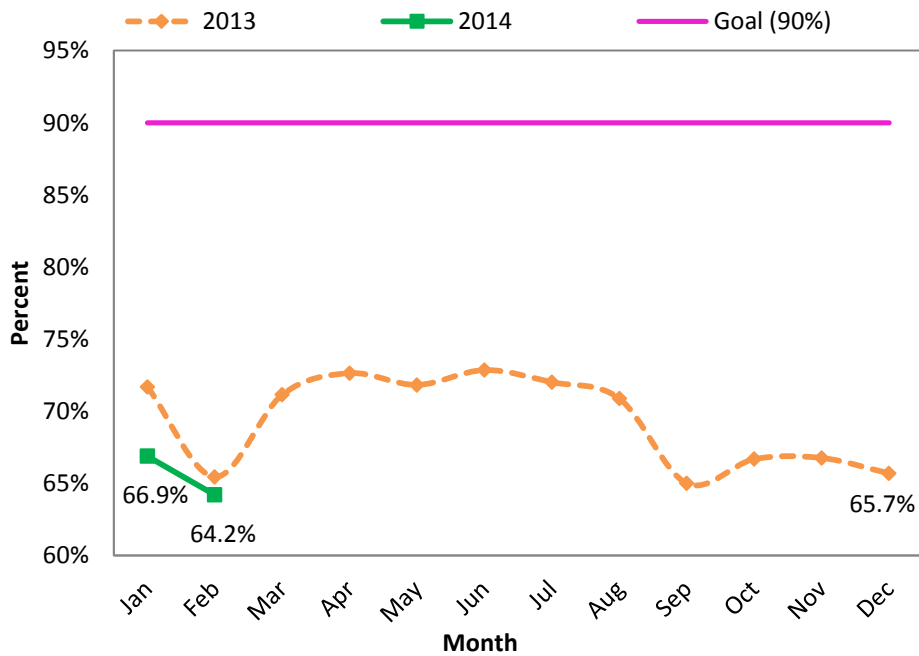
Food and Energy Assistance Program: Food Assistance (FA)

Measure: **Application processed in 7 Days or less**

How it is measured: *Numerator:* Number of new regular and expedited applications processed in 7 days or less
Denominator: Total number of new applications; Average monthly denominator: 24,034

Why this matters: Timely and efficient 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 is hovering around 65%

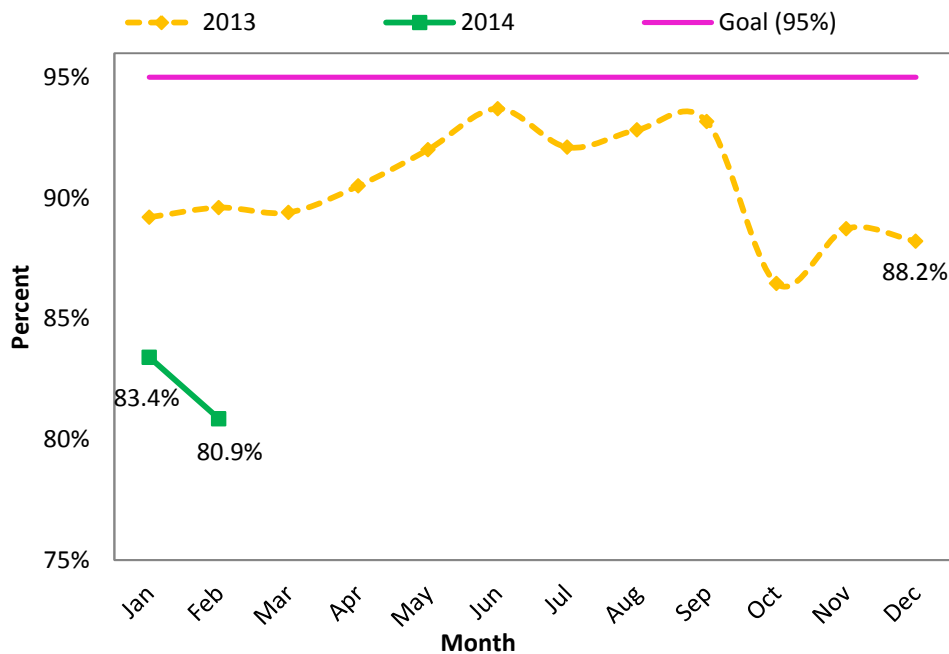
Food and Energy Assistance Program: Food Assistance (FA)

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: 20,199

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: This measure has declined to nearly 10% below the same period last year. A sustained decline is demonstrated over the last two quarters.

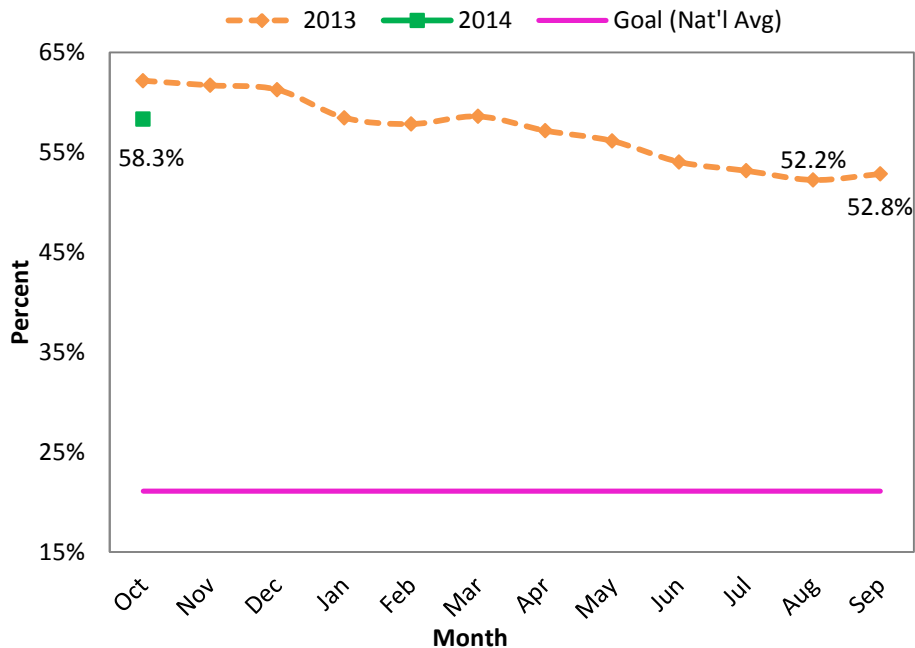
Food and Energy Assistance Program: Food Assistance (FA)

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: 74

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: This represents a new sample as of October 1, 2013. The measure begins the new federal fiscal year (October 1, 2013 – September 30, 2014) having lost the majority of gains made in 2013.

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 Federal Fiscal Year begins each year on October 1st, resetting the cumulative measurement.

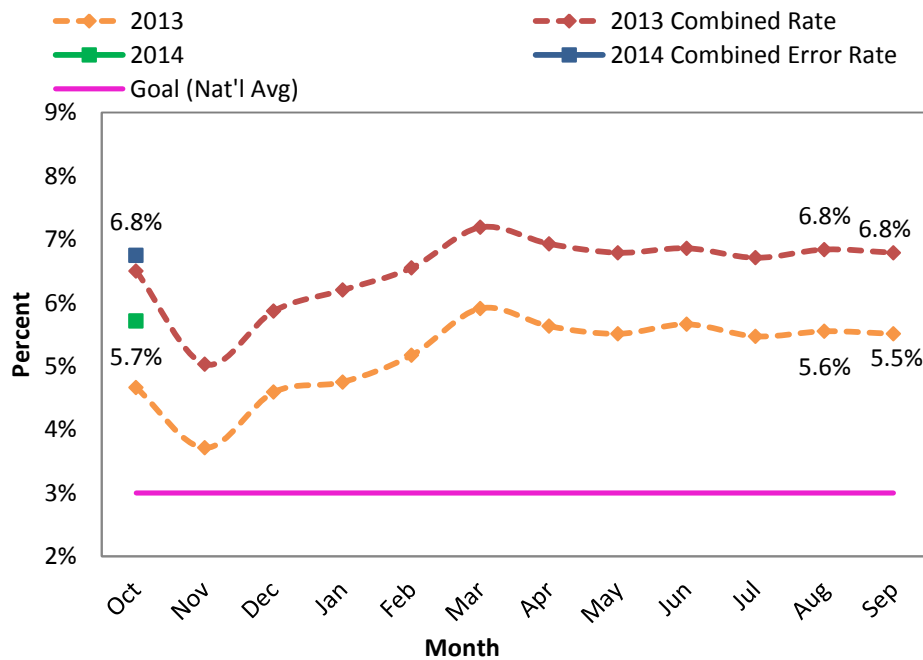
Food and Energy Assistance Program: Food Assistance (FA)

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: \$23,673

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

Goal: **↓ Below national average**



Trend: This represents a new sample as of October 1, 2013. The measure is beginning Federal Fiscal Year 2014 one percentage point above the same period last year. October rates reflect the highest in two years, and are the second highest point the measure has reached since 2012.

Notes: For federal purposes, payment errors over \$50 are the only ones counted in the calculation (see gold and green lines for 2013 & 2014). SNAP QA also tracks errors at any dollar threshold, called the "Combined Error Rate" (see red and blue lines). The Federal Fiscal Year begins each year on October 1st, resetting the cumulative measurement.

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.

Director: Sue McGinn

Program Manager: Aggie Berens

Executive Summary

- LEAP continues to report the average number of days it takes to process both regular and emergency applications overall, as well as for the ten largest counties and the balance of state.
- *Timely Regular Applications*: Changes in some county processes, such as implementing all electronic document management, has been reported by LEAP staff as contributing to longer application times than the same period last year. Over-verification of applications is also reported as a contributing factor.
- *Timely Expedited Applications*: Closer examination of data entry on this measure revealed some counties weren't following correct procedures for dating certain customer applications. Once this was discovered and data entry was corrected, it was found that performance in this measure was better than had been originally reported to C-Stat.

Measures

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

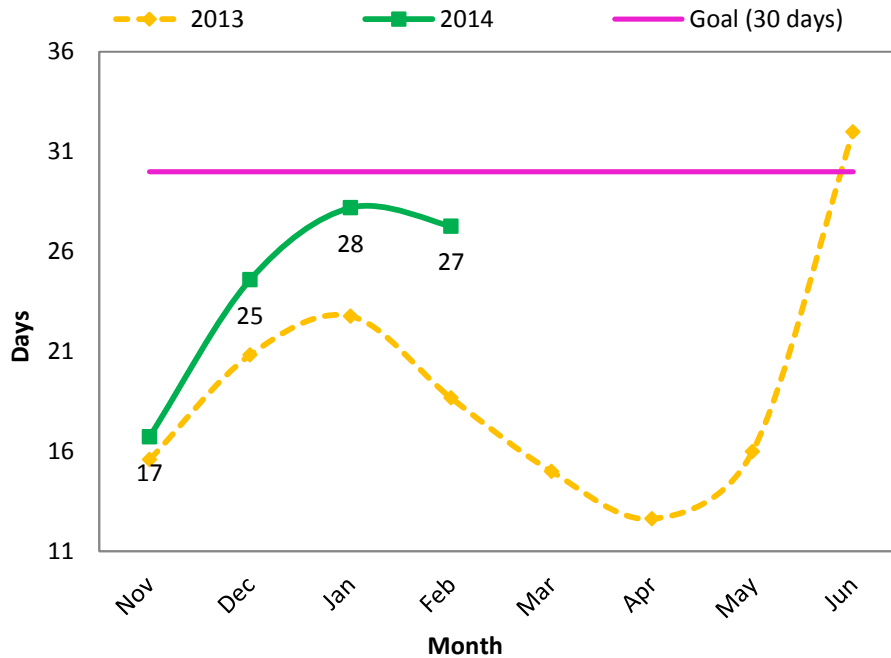
Food Assistance Program: Low-Income Energy Assistance Program (LEAP)

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: 14,430

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: The measure shows an increase in the number of days it takes to process regular applications, but rates have remained below the goal.

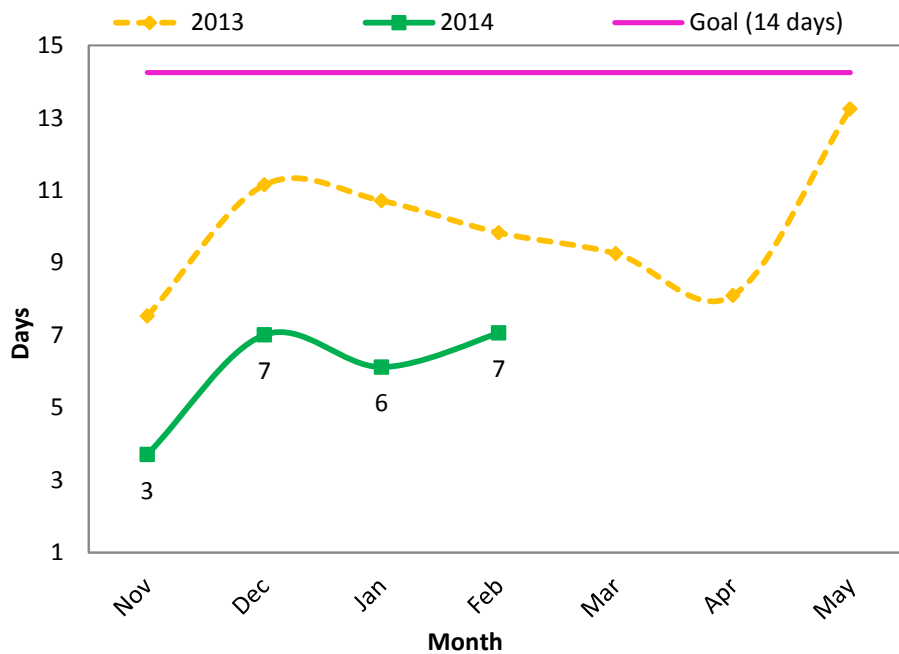
Food Assistance Program: Low-Income Energy Assistance Program (LEAP)

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: 3238

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: Average processing times this year have been much faster than the same quarter in 2013.