



Summary Report

July – September 2014

Prepared by:

Performance Management Division



COLORADO
Department of Human Services

Table of Contents

| | |
|--|-----|
| Colorado Department of Human Services..... | 3 |
| The C-Stat Process | 4 |
| How Do I Read This Report? | 5 |
| Office of Behavioral Health | 6 |
| Community Behavioral Health | 7 |
| Mental Health Institutes..... | 13 |
| Office of Children, Youth, and Families..... | 19 |
| Division of Child Welfare | 20 |
| Division of Youth Corrections | 31 |
| Domestic Violence Program | 42 |
| Office of Community Access and Independence..... | 46 |
| Aging and Adult Services | 47 |
| Disability Determination Services | 49 |
| Division of Regional Center Operations | 53 |
| State Veterans’ Community Living Centers..... | 60 |
| Division of Vocational Rehabilitation | 64 |
| Office of Early Childhood..... | 69 |
| Early Care and Learning..... | 70 |
| Community and Family Supports | 75 |
| Office of Economic Security..... | 81 |
| Child Support Services..... | 82 |
| Colorado Refugee Services Program | 85 |
| Employment and Benefits Division..... | 91 |
| Food and Energy Assistance | 100 |

Colorado Department of Human Services

Mission

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

Vision

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

Values

The Colorado Department of Human Services will:

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

The C-Stat Process

What is C-Stat?

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

C-Stat Meetings

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

C-Stat Report

This report reflects the measures identified by CDHS to be tracked on an ongoing basis through the C-Stat process as of September 30, 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 September 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.



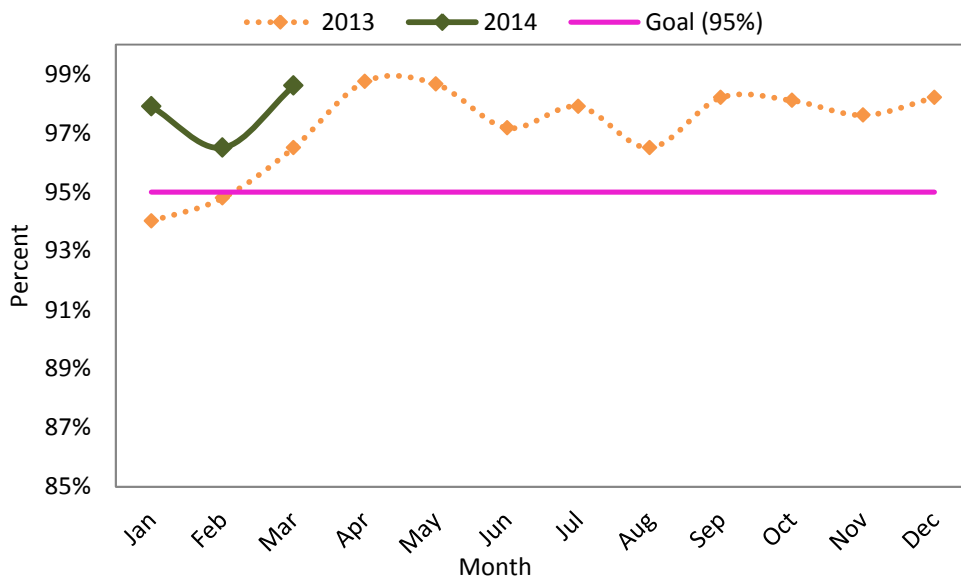
How Do I Read This Report?

The Division

- Measure: **What the C-Stat measure is attempting to capture. (Federal Measure where applicable)**
- How it is measured: *Numerator:* Describes what is being “counted.”
Denominator: 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 use disorder 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

In December 2013, changes were made to the batch file submission process for both the Colorado Client Assessment Record (CCAR) and Drug and Alcohol Coordinated Data System (DACODS), the two clinical tools used to capture, submit, and analyze mental health and substance use data. This caused delayed and inaccurate data submissions by providers, with less than 20% of data reported for each month until April 2014. This transition required providers resubmit all data under the new format. During the most recent quarter of 2014, the volume for most CMHCs has returned to expected levels, suggesting that data is more reliable than previous quarters.

Alongside batch file changes that took effect in January 2014, methodological changes to the C-Stat measures were also implemented. These changes were incorporated into the contracts held with various providers across the state, and became part of the data collection and analyses processes in July 2014 (the start of State Fiscal Year (SFY) 2014-15). For the mental health measures, the changes reflect updated special studies codes aimed at better identifying indigent populations, thereby filtering out Medicaid clients. Substance use disorder measures include both indigent and Medicaid clients within the denominator.

The new methodological parameters are denoted with a grey dashed line marking the end of SFY 2013-14 and the start of SFY 2014-15. Within the “Notes” section of each CBH measure, additional methodological changes are identified for reference.

Additional highlights within Community Behavioral Health include:

- *Timeliness of Access to Outpatient Substance Use Disorder Treatment:* Methodological changes now measure the length of time between the date of first contact with a client and when the first available appointment is offered.
- *Mental Health Clients Engaged in Services:* In addition to special studies codes better identifying Medicaid clients, this measure will only review clients with a Symptom Severity of 5 or above. This is designed to measure the rate of engagement for individuals with more severe symptomatology, those who are most likely to need more services and resources than others.

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](#)



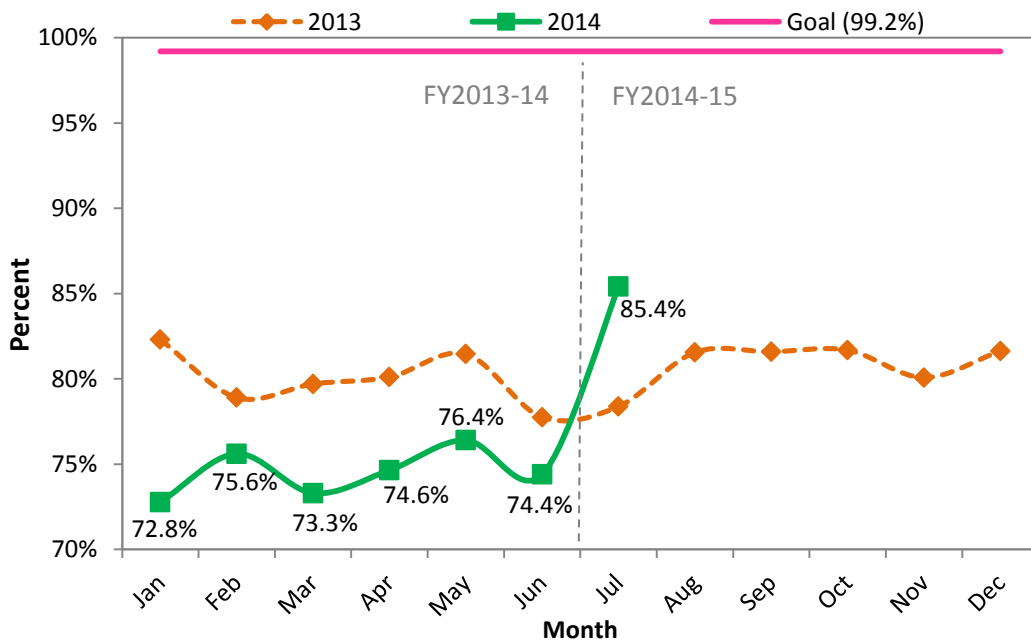
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons admitted into or offered an appointment for 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: 841.3

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

Goal: **↑99.2%**



Trend: Only one data point is available with new methodology, so a trend is not yet possible.

Notes: Methodological changes to this measure include: Analyzing Special Connections clients submitted by providers directly. The denominator captures Medicaid and indigent clients. Performance now measures the number of days between a client’s first contact date and the date of first appointment offered. Historical data reviewed with the new methodology suggested a performance increase of ~8% now that providers receive credit for offering clients appointments within three days of first contact (regardless of whether the client is actually seen within that time frame).



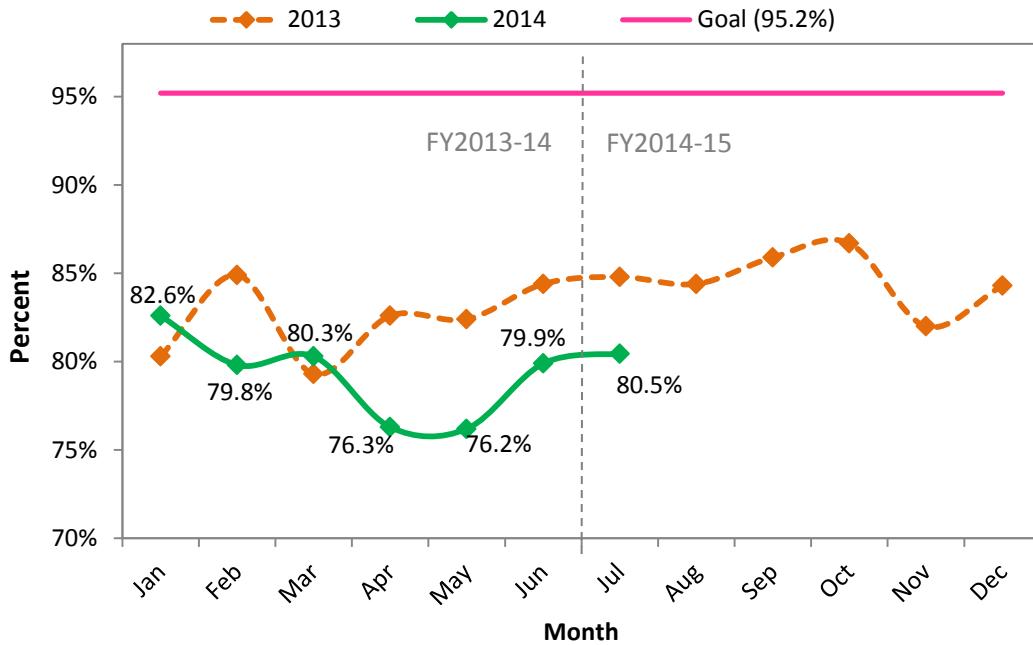
Community Behavioral Health (CBH)

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: 360.3

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: Only one data point is available with new methodology, so a trend is not yet seen.

Notes: Methodological changes to this measure include: Analyzing Special Connections clients submitted by providers directly. The denominator captures Medicaid and indigent clients. No additional changes to this methodology were incorporated.



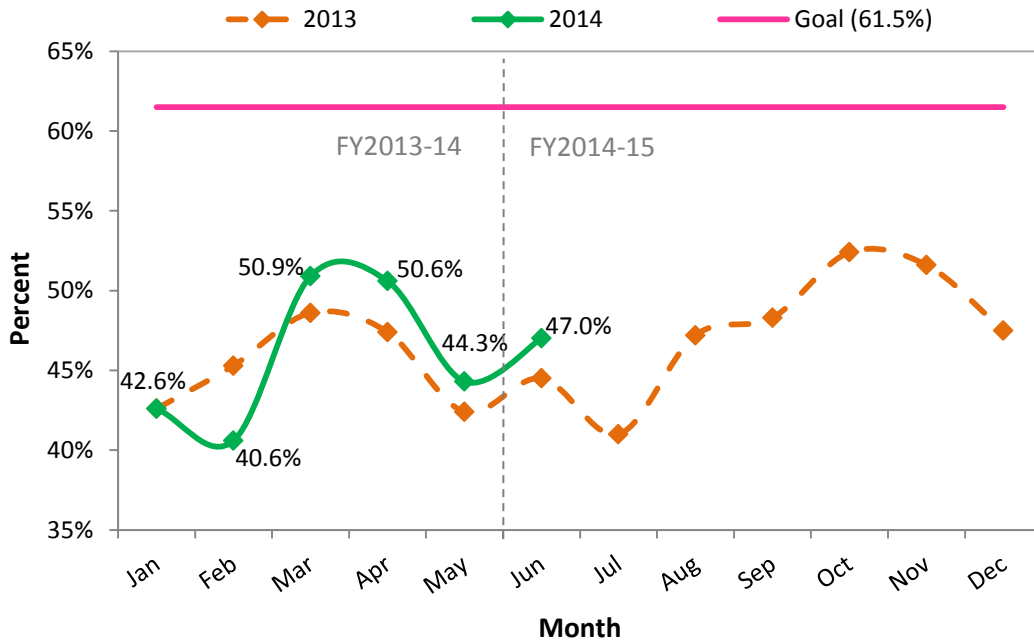
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Percent of clients with a symptom severity of 5 or above who are engaged (i.e., received 4 or more services within 45 days of admission)
Denominator: All Admissions; Average monthly denominator: 820.3

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

Goal: **↑61.5%**



Trend: Only one data point is available with new methodology, so a trend is not yet seen.

Notes: Methodological changes to this measure include: Using CCAR and Encounters data for Special Studies Codes (to better filter out Medicaid clients), and filtering out clients with a symptom severity rating of 1-4 on the CCAR .

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



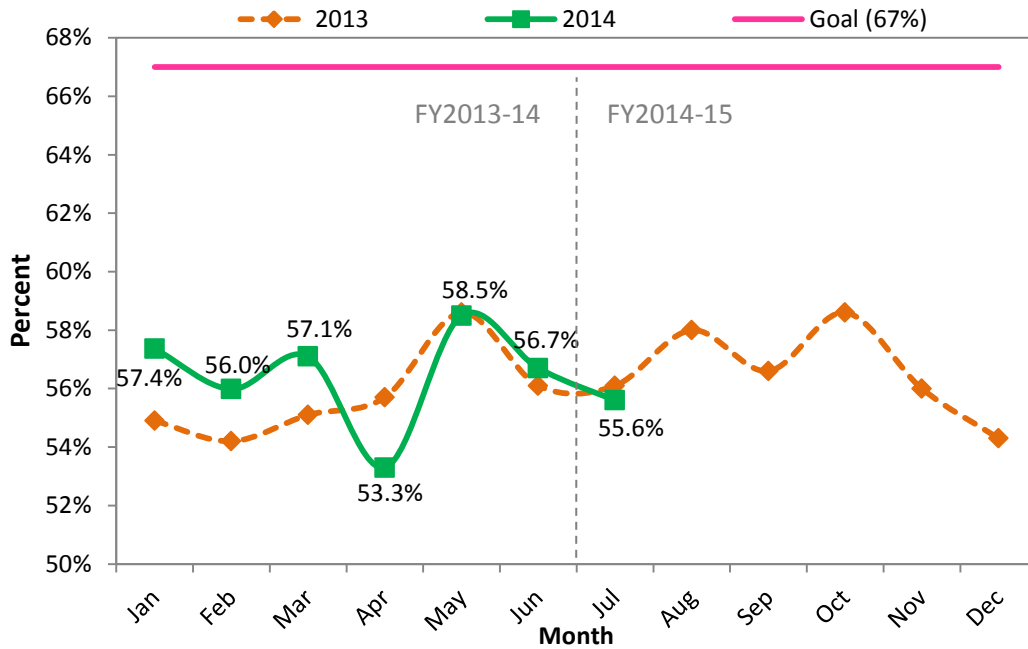
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons with lesser symptom severity at follow-up
Denominator: Number of discharged persons receiving mental health treatment who report significant symptom severity at Time One; Average monthly denominator: 1,742

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: Only one data point is available with new methodology, so a trend is not yet seen.

Notes: Methodological changes to this measure include: Using Colorado Client Assessment Record (CCAR) and Encounters data for Special Studies Codes (to better filter out Medicaid clients), and filtering out clients with a symptom severity rating of 1-4 on the CCAR, and medication-only clients are now included in the denominator.

“Time One” can be an admission or update in the CCAR. An admission CCAR is the first time in which a client is seen by a provider. An update CCAR is completed when there is a change in major life event (e.g., a change in housing status).

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.





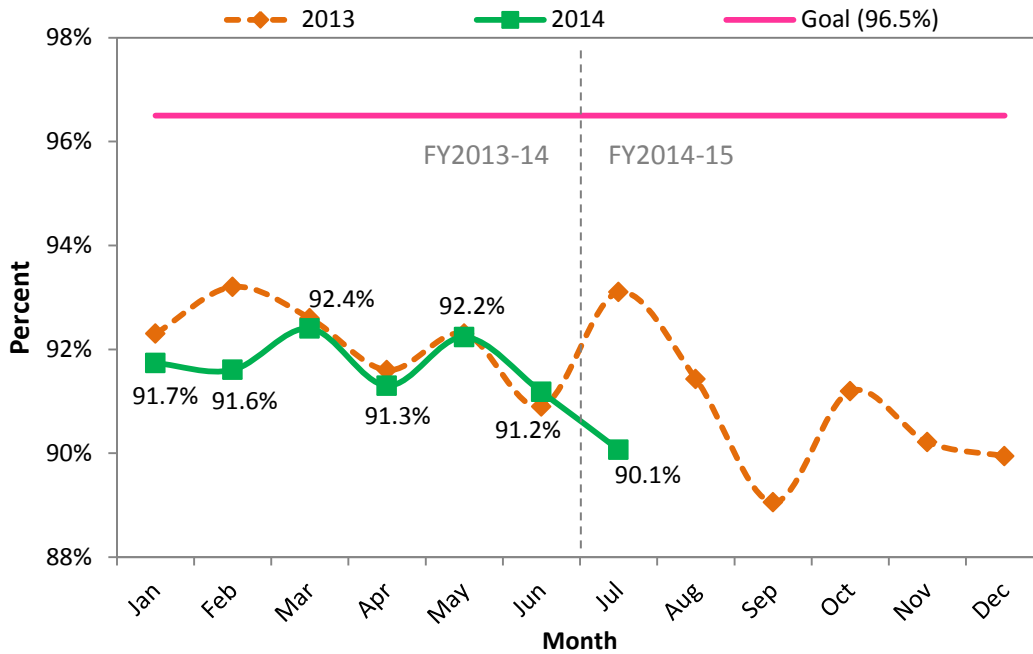
Community Behavioral Health (CBH)

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: 2,107.7

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: Only one data point is available with new methodology, so a trend is not yet seen.

Notes: Methodological changes to this measure include: Using the Colorado Client Assessment Record (CCAR) and Encounters data for Special Studies Codes (to better filter out Medicaid clients).

“Time One” can be an admission or update in the CCAR. An admission CCAR is the first time in which a client is seen by a provider. An update CCAR is completed when there is a change in major life event (e.g., a change in housing status).



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
Interim CMHIP Hospital Director: Dr. Birgit Fischer
CMHIFL Hospital Director: Dr. Christopher Burke

Executive Summary:

- *Rates of Restraint Use: Fort Logan & Pueblo:* The Fort Logan Institute met the goal for restraint use in June, but saw rates above the goal for the other months of the quarter; the Pueblo Institute also saw monthly averages above the goal. Pareto analyses indicated that a small number of patients with unique clinical histories explained most of the restraint hours at CMHIP.
- *Rates of Seclusion Use: Fort Logan & Pueblo:* CMHIFL has met the established goal for sixteen consecutive months. CMHIP also saw rates well-below the established C-Stat goal for the duration of the quarter.
- *Percent of Civil Patients Ready for Discharge but Have Barriers: Fort Logan & Pueblo:* The Mental Health Institute at Pueblo saw three consecutive months of upward trend on this measure, whereas rates at Fort Logan remained relatively flat. 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 but providing more in-depth data clarifying the barriers facing each individual on the waitlist, as well as making plans to utilize resources from the Money Follows the Individual (MFI) program, which will create an oversight committee that helps facilitate engagement and conversation between communities and providers.
- *Percent of 30-Day Readmissions: Fort Logan & Pueblo:* CMHIP stayed below the goal for the duration of the quarter, and CMHIFL saw a decline in 30-day readmissions for the last two months of the quarter.
- *Percent of 180-Day Readmissions: Fort Logan & Pueblo:* CMHIFL fell below the national average for the last two months of the quarter, but stayed above the C-Stat goal. CMHIP fell below the C-Stat goal for the last month of the quarter.

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](#)



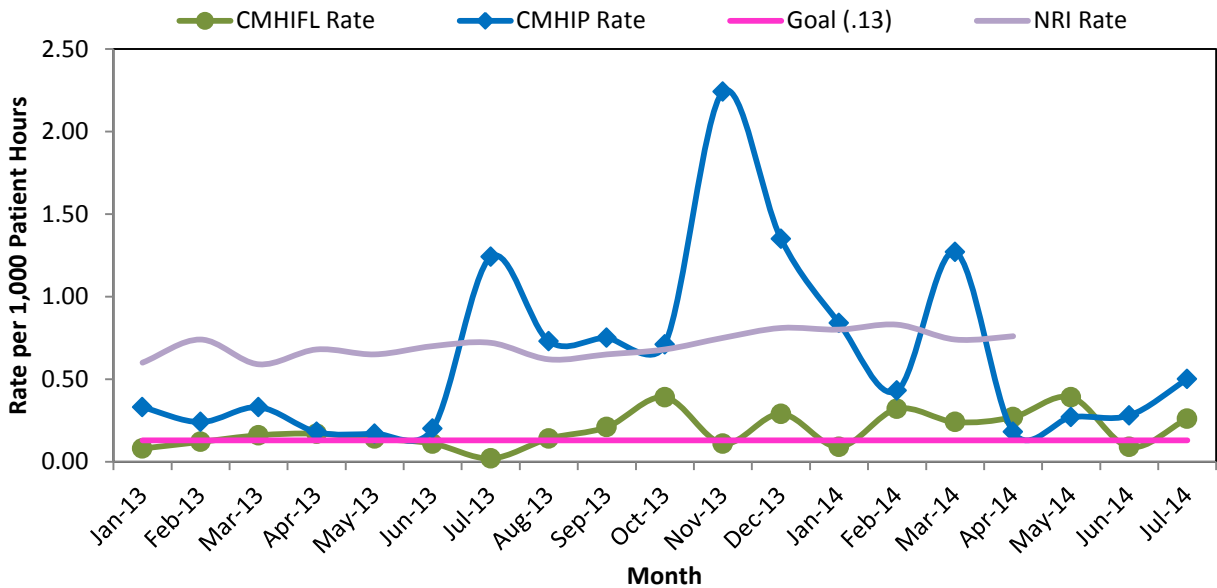
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* Number of hours of restraint
Denominator: Per 1,000 patient hours;
Average monthly denominator – Fort Logan: 19,729
Average monthly denominator – Pueblo: 90,070

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: The Fort Logan Institute reached the goal for the month of June. The Pueblo Institute was above the goal for the duration of the quarter, but demonstrated lower rates than those seen between February and March 2014.

Notes: Both Institutes agreed on the .13 goal rate in December 2013. The NRI rate reflects the national average and typically runs several months behind in data reporting because its rate is calculated from data by all hospitals in the country (both private and public).





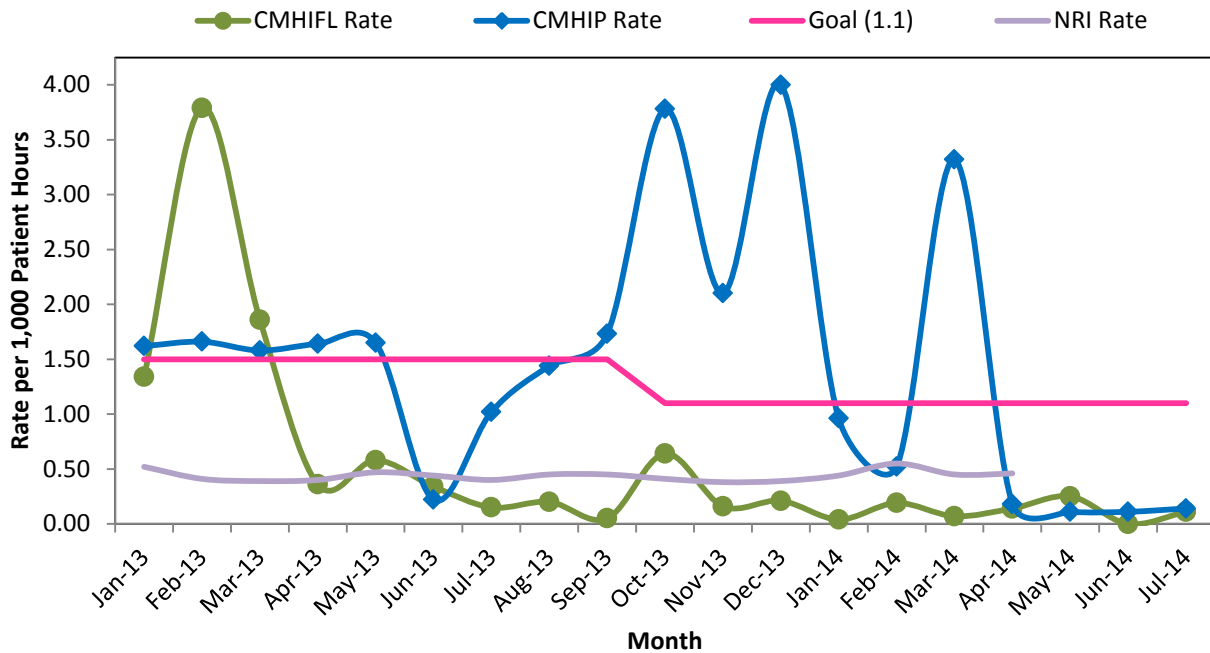
Mental Health Institutes (MHI)

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

How it is measured: *Numerator:* Number of hours of seclusion
Denominator: Per 1,000 patient hours;
Average monthly denominator – Fort Logan: 19,729
Average monthly denominator – Pueblo: 90,692

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: Both Institutes stayed below the established goal rate for the duration 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 several months behind in data reporting because its rate is calculated from data by all hospitals in the country (both private and public).





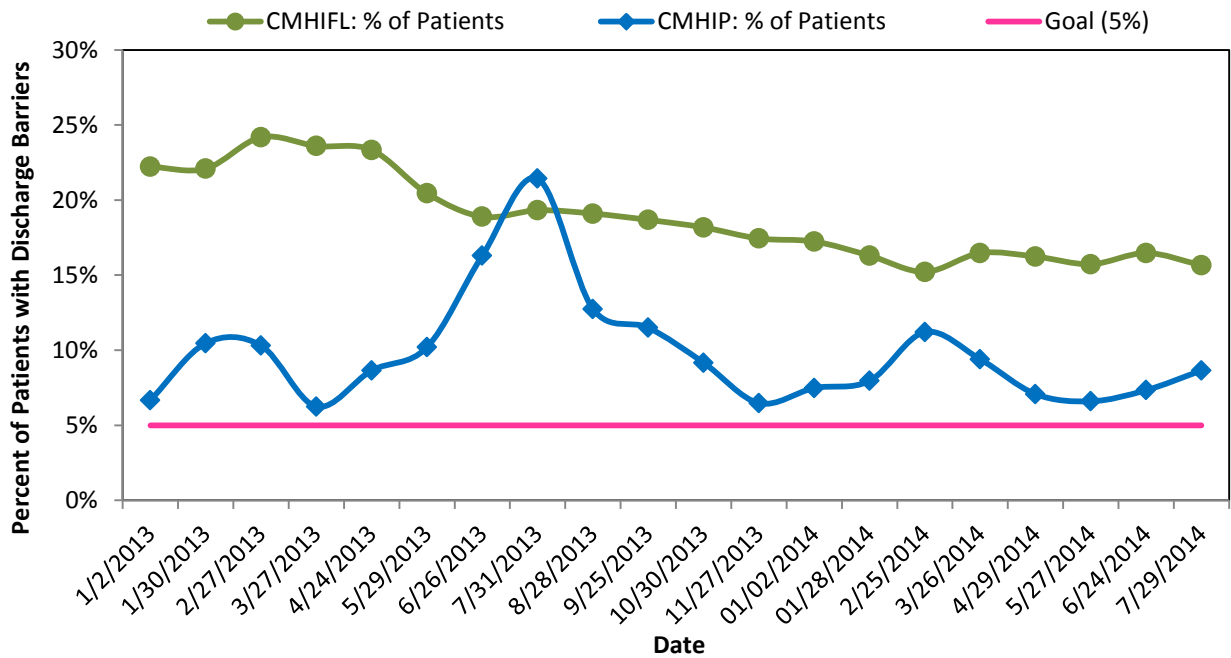
Mental Health Institutes (MHI)

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;
Average monthly denominator – Fort Logan: 85.7
Average monthly denominator – Pueblo: 106.3

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 Fort Logan Institute saw rates remain relatively flat, and the increase in June 2014 reflects a smaller denominator (in which a fewer number of civil patients were admitted during that time). The Pueblo Institute saw an increase in rates from 6.6% in May to 8.7% in July.





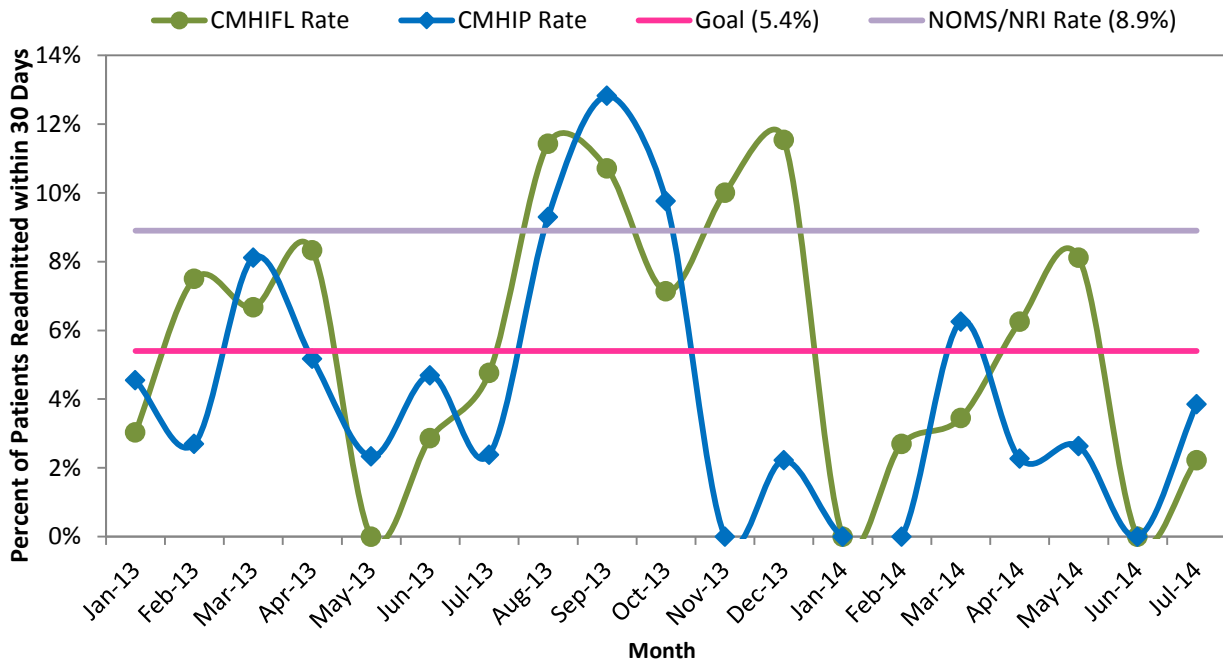
Mental Health Institutes (MHI)

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;
Average monthly denominator – Fort Logan: 35.7
Average monthly denominator – Pueblo: 35.7

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: The Mental Health Institute at Fort Logan saw rates increase in May, followed by zero 30-day readmissions in June and one readmission in July. The Pueblo Institute stayed below the goal for the duration of the quarter (and four consecutive months).





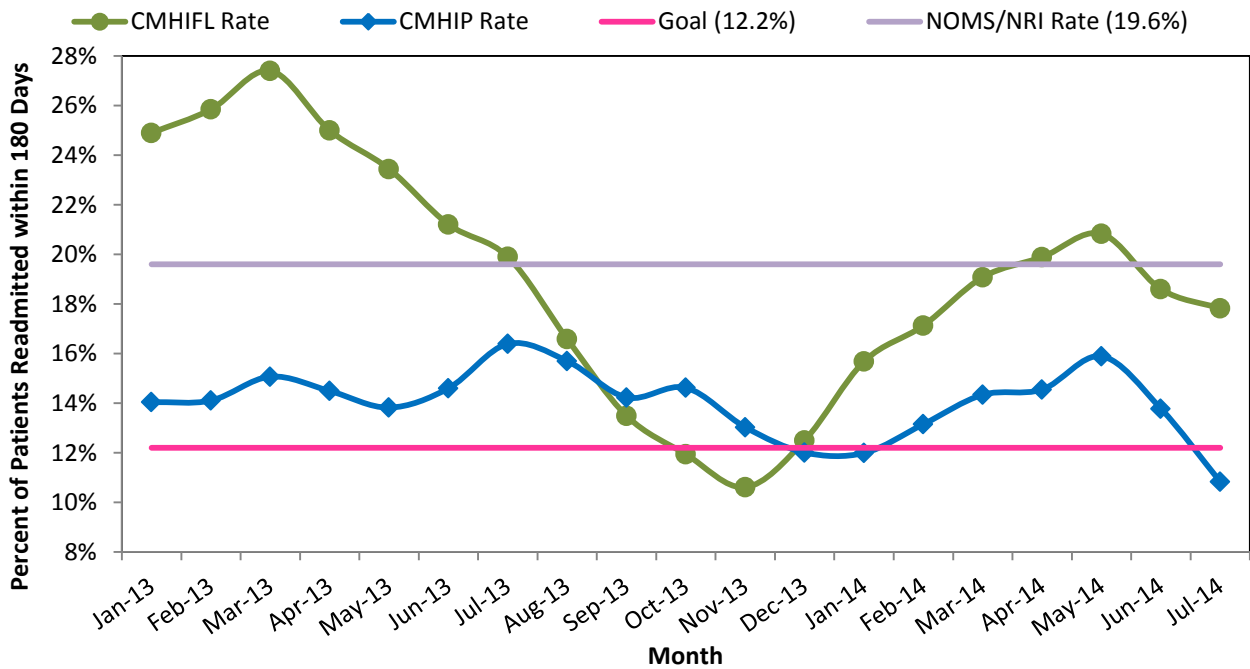
Mental Health Institutes (MHI)

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;
Average monthly denominator – Fort Logan: 171.3
Average monthly denominator – Pueblo: 250.7

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: After seven consecutive months of upward trend, the Fort Logan Institute saw a decline in 180-day readmissions, dropping below the national average in June and July. The Pueblo Institute also saw rates decline in June and July, and fell below the goal the last month of the quarter.



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 Division of Child Welfare, the Division of Youth Corrections, and the Domestic Violence Programs. These supports are facilitated through partnerships with families, providers, and local communities to ensure that children and families have safe, healthy, stable environments and 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: Ann Rosales

Executive Summary

- **Timeliness of Initial Response to Abuse/Neglect Assessments:** Performance on this measure is continuing to demonstrate a strong seasonal trend. DCW examined the seasonality phenomenon and discovered that assessments that are opened in March, April, and September are statistically more likely to be timely, while assessments opened in November and December are statistically more likely to be untimely. Similarly, those referrals that occur on a holiday are statistically more likely to be untimely than non-holiday referrals.
 - Additionally, DCW completed an assessment of the appropriateness of the assigned assessment referral time (e.g., Immediate, 2-Day, 5-Day). The analysis revealed that referral assessment times were assigned accurately in 94.3% of all referrals, referral assessment were assigned an earlier response time than was necessary in 3.8% of all referrals, and referral assessments were assigned a response time that was later than the appropriate in 1.9% of all referrals.
- **Safety Assessment Forms Completed Accurately:** DCW is implementing a new Safety Assessment Form that is expected to improve the caseworker's process of assessing safety. DCW and ARD began the pilot stage of testing and training in July 2014. A large (Pueblo), medium (Eagle), and small (Garfield) county is included in the pilot program. Statewide training of the new tool will begin in December 2014.
- **Legally Freed Children Discharged to Permanency:** DCW staff are continuing to reduce the barriers to fully implement House Bill 14-1368, which was passed May 2014. HB 14-1368 concerns the transition of youth ages 18-21 that have developmental disabilities (DD) to the adult program of services.
 - Additionally, an annual review of the number of children with an Other Planned Permanent Living Arrangement (OPPLA) goal revealed that the use of OPPLA goals for Legally Freed Children has reduced from 82% in January 2013 to 62% in July 2014.
- **Caseworker Contact with Parent:** The goal for this measure was achieved. The measure was removed from the C-Stat slide deck and therefore, is not included in the Quarterly Report. A caseworker's efforts to contact parents will continued to be assessed and measured as part of the Administrative Review Division's regular county reviews.
- **Number of Children in Congregate Care:** This quarter DCW focused their efforts on completing a thorough analysis of congregate care use within Colorado. As a result DCW has implemented several practice and data strategies to reduce congregate care use in the State. These efforts include: a) add a new C-Stat measure to assess the number of children in congregate care, in addition to the existing measure, which is a percentage of children in congregate care over the total population of children in out of home care, b) engage Court, Probation, County Attorney, and Guardian Ad Litem partners to create better strategies to address congregate care in the counties of Colorado, and c) analyze data by county to identify patterns of congregate care and out of home care use.



Measures

- [Timeliness of Initial Response to Abuse/Neglect Assessments](#)
- [Compliance with the Statutory Requirement Related to Timeliness of Assessment Closure](#)
- [Safety Assessment Forms Completed Accurately](#)
- [Legally Freed Children Discharged to Permanency](#)
- [Children in Out of Home Care for 24+ Months](#)
- [Maintain Children Safely in Their Home](#)
- [Children in Congregate Care](#)
- [Number of Children in Congregate Care](#)
- [Child Welfare Runaways](#)



Division of Child Welfare (DCW)

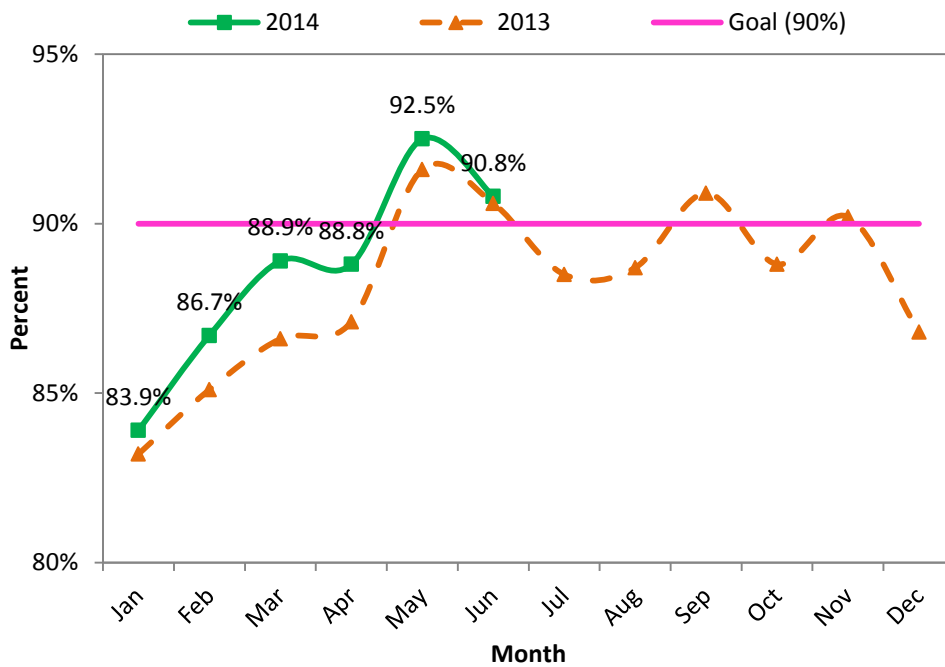
Measure: **Timeliness of initial response to abuse/neglect assessments**

How it is measured: *Numerator:* Number of alleged victims with a timely face to face contact or attempted contact as set in rule (Volume 7); timely is based on the assigned response time frame (Immediate, 3-Day, 5-Day)

Denominator: Number of child protection assessments closed in the specified month (both Traditional and Family Assessment Response); Average monthly denominator: 3,573

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

Goal: **↑ 90%**



Trend: This quarter's performance has demonstrated an increase from April to May 2014, followed by a decrease from May to June 2014. Performance was above the 90% goal in both May and June 2014. Performance demonstrates heavy overlap from year to year.

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





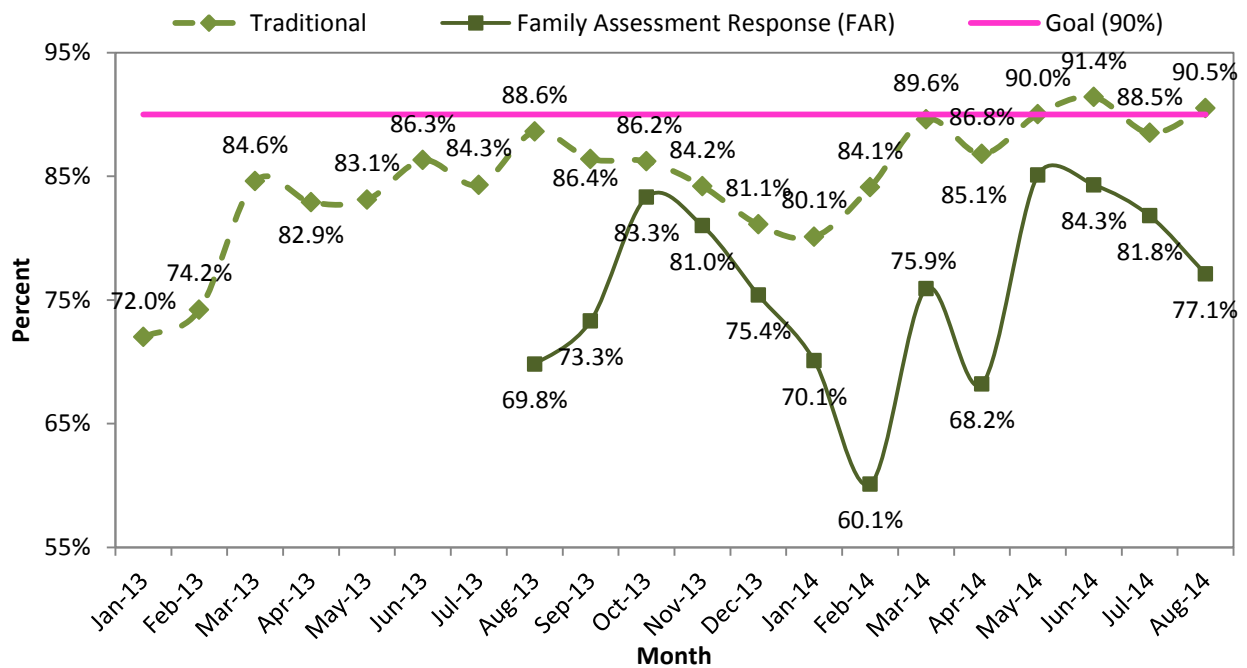
Division of Child Welfare (DCW)

Measure: **Compliance with the Statutory Requirement Related to Timeliness of Assessment Closure**

How it is measured: *Numerator:* Number of child protection assessments closed within 60 days of referral
Denominator: Number of child protection assessments closed in a specific month; Average monthly denominator: Traditional: 1,814; Family Assessment Response (FAR): 464

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 Traditional Response improved, attaining the 90% goal two out of the three months this quarter. Performance for Family Assessment Response overall declined throughout the quarter.

Notes: FAR is one track for responding to a child welfare referral, while Traditional is another track for responding to a child welfare referral.



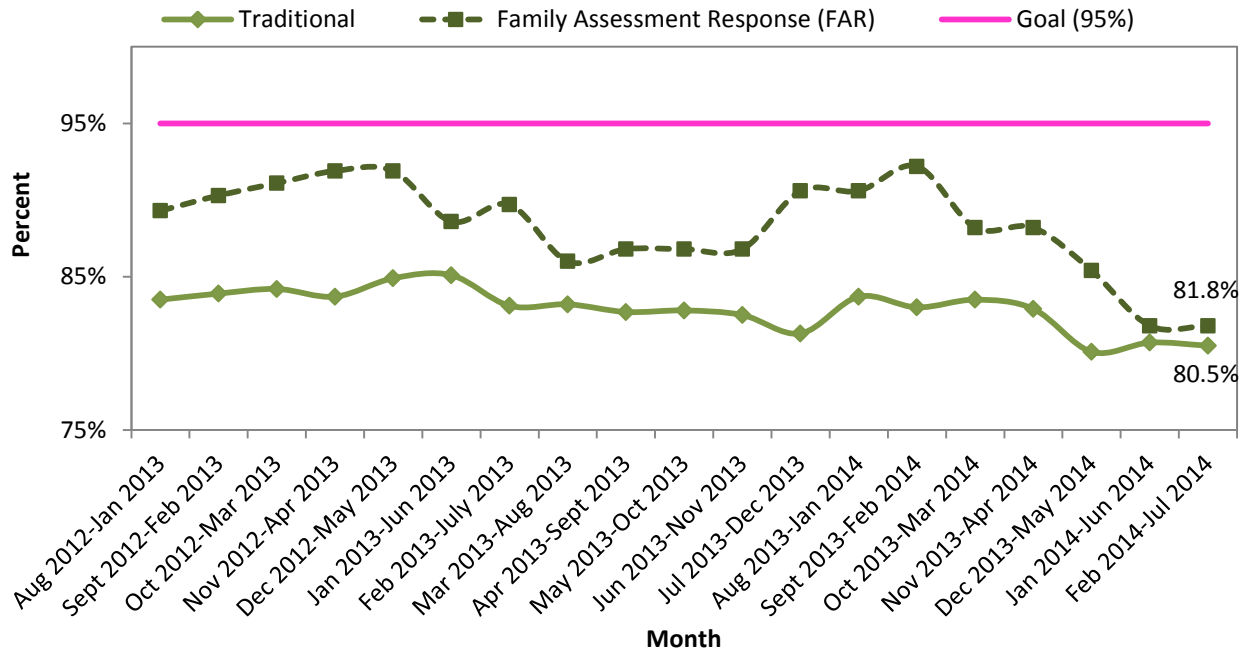
Division of Child Welfare (DCW)

Measure: **Safety assessment forms completed accurately**

How it is measured: *Numerator:* Number of safety assessment forms completed accurately in accordance with state rule
Denominator: Number of safety assessment forms completed and reviewed by ARD; Average monthly denominator: Traditional: 951; Family Assessment Response (FAR): 171

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

Goal: **↑ 95%**



Trend: This quarter’s performance for Traditional Response and Family Assessment Response declined when compared to last quarter.

Notes: FAR is one track for responding to a child welfare referral, while Traditional is another track for responding to a child welfare referral.





Division of Child Welfare (DCW)

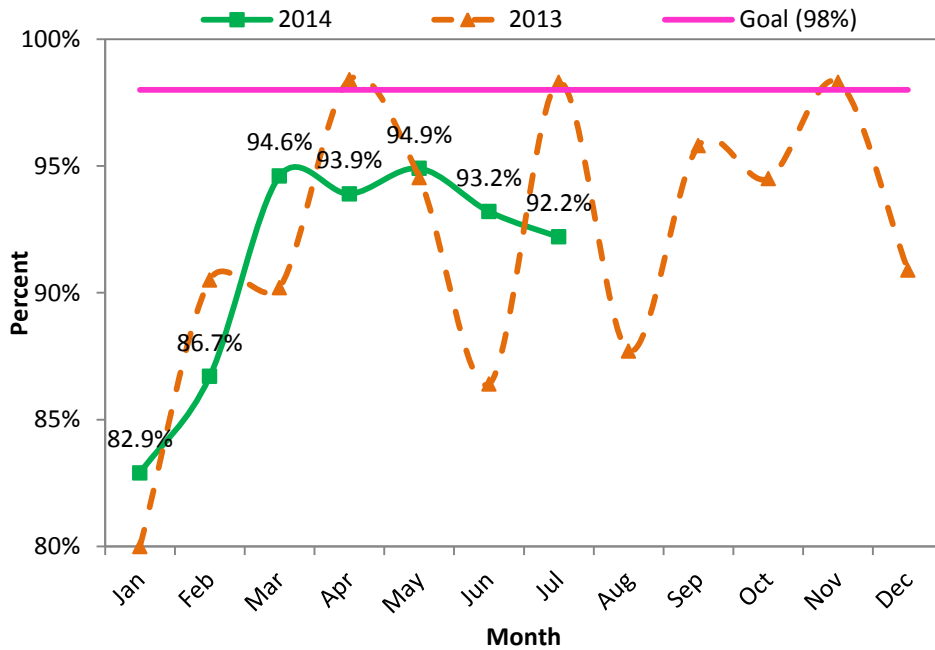
Measure: **Legally freed children discharged to permanency**

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: 72

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 throughout the recent quarter; however, the variability in performance has reduced from month to month. The 98% goal has not been achieved since November 2013.

Notes: Legally freed children discharged to permanency is a federal measure.



Division of Child Welfare (DCW)

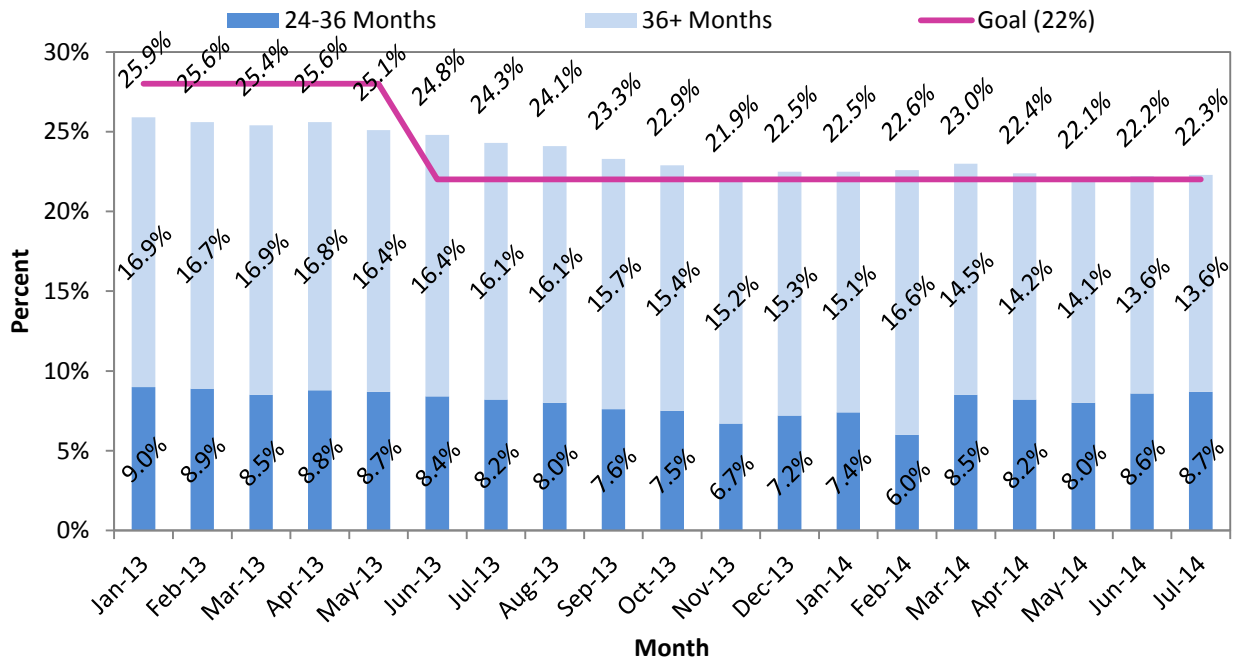
Measure: **Children in out of home care for 24+ months**

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

Denominator: Number of children in out of home care on the last day of the specified month; Average monthly denominator: 4,568

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 has remained near the goal (within 1 percentage point) for the last 10 months.

Notes: The goal for this measure was decreased to 22% in June 2013 after the original goal (28%) was achieved for 14 consecutive months. Children in out of home care 24+ months is a Federal Measure.



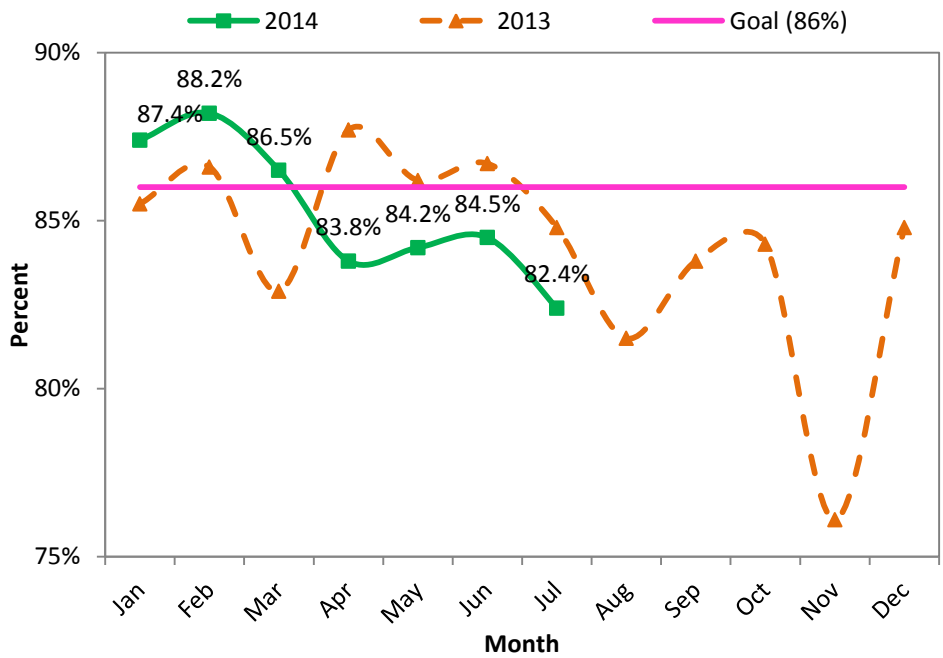
Division of Child Welfare (DCW)

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

How it is measured: *Numerator:* Children who were not initially (first 30 days) in out of home care and did not enter out of home placement during case involvement
Denominator: 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: 525

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: The previously attained goal was not achieved this quarter. Performance declined throughout the quarter, mirroring last year's performance.





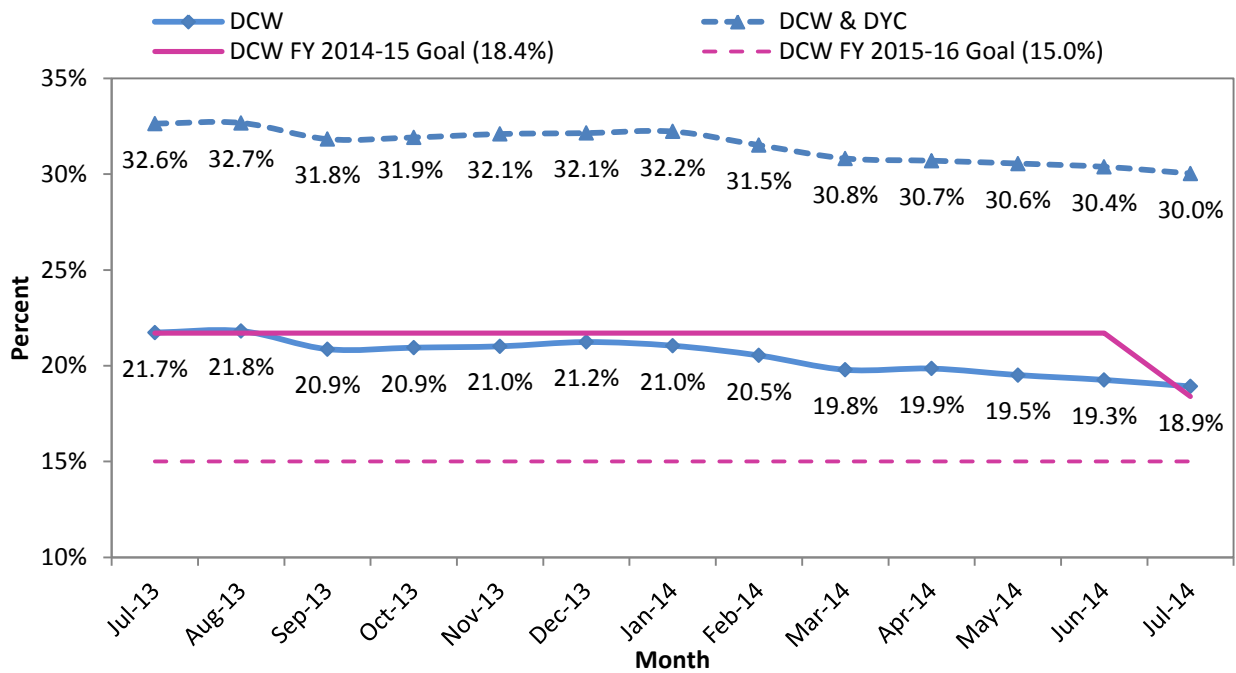
Division of Child Welfare (DCW)

Measure: **Children in congregate care**

How it is measured: *Numerator:* Number of children in congregate care (residential or group) *Denominator:* Number of children in out of home care (all types); Average monthly denominator: DCW- 5,255; DCW & Division of Youth Corrections (DYC)- 6,066

Why this matters: All children deserve to achieve permanency in a home to lessen the disruption and trauma out of home care can cause. Additionally, children deserve to reside in family-like settings, as opposed to institutional settings. Reducing congregate care use contributes to these efforts.

Goal: **↓ 15% (FY 2015-16 Goal); 18.4% (FY 2014-15 Goal)**



Trend: In July 2014 the new Fiscal Year goal of 18.4% took effect. Though July 2014’s performance did not achieve the new goal, performance is continuing to decline (lower is better). Performance for DCW & DYC is also continuing to demonstrate steady improvement each month within this quarter.

Notes: New measure as of July 2013. The Division of Child Welfare will reduce the goal to 18.4% for the Fiscal Year 2014-15 and again to 15.0% in Fiscal Year 2015-16.





Division of Child Welfare (DCW)

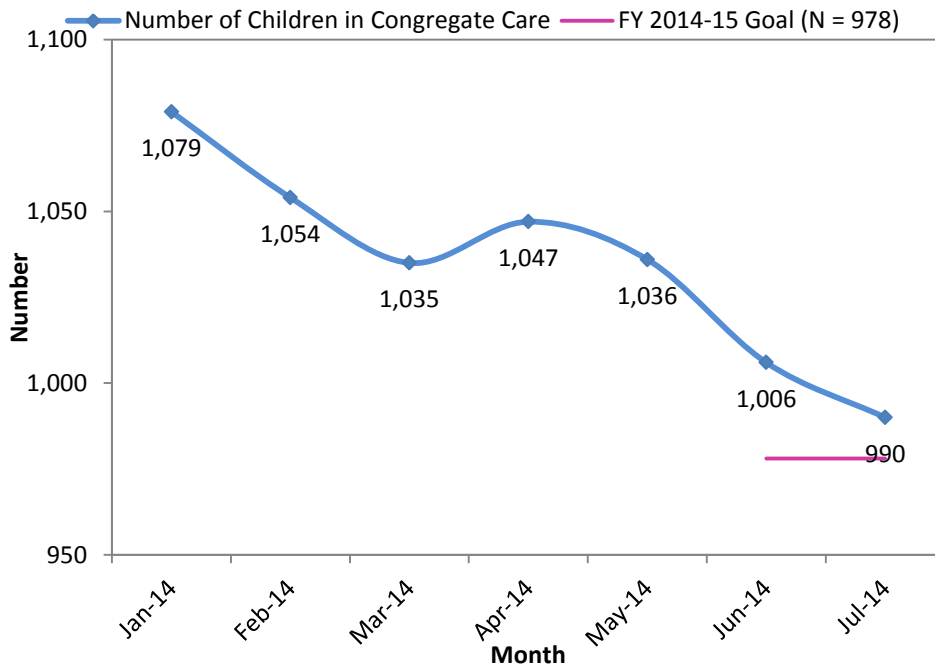
Measure: **Number of children in congregate care**

How it is measured: *Numerator:* Number of children and youth who experience any congregate care placement during a given period

Denominator: Average daily population of children and youth served in out of home care during with reporting month; Average monthly denominator: 5,255

Why this matters: All children deserve to achieve permanency in a home to lessen the disruption and trauma out of home care can cause. Additionally, children deserve to reside in family-like settings, as opposed to institutional settings. Reducing congregate care use contributes to these efforts.

Goal: **↓ 978**



Trend: This quarter’s performance demonstrated a consistent decline in the right direction.

Notes: New measure as of June 2014, thus the goal line started in June 2014.





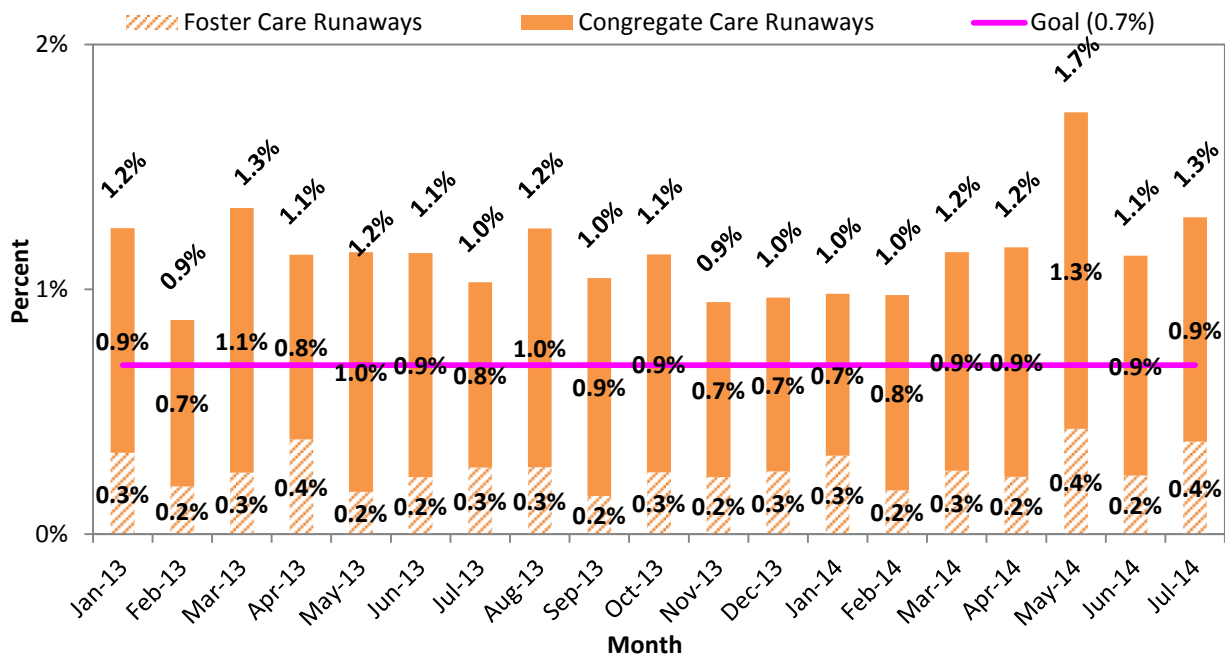
Division of Child Welfare (DCW)

Measure: **Child welfare runaways**

How it is measured: Foster Care Runaways: *Numerator:* Average daily population of youth with a runaway service authorization
Denominator: Average daily population of youth with an out of home placement; Average monthly denominator: 4,182
Congregate Care Runaways: *Numerator:* Average daily population of youth in congregate care with a runaway service authorization
Denominator: Average daily population of youth in Congregate Care with an out of home placement; Average monthly denominator: 867

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

Goal: **↓ 0.7%**



Trend: Performance worsened throughout this quarter, demonstrating an all-time high (lower is better) in May 2014.

Notes: The data in this measure is a cumulative frequency, meaning those who runaway in one month and are still on runaway 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.

Acting Director: Robert Werthwein

Executive Summary

- *Youth Enrolled in a Full/Part Time Program at Discharge:* An analysis on the type of programs most utilized by youth discharging from DYC revealed full-time work being utilized by 40% of youth, followed by full-time school/vocational training being utilized by 28% of youth, then part-time work being utilized by 15% of youth. The remaining youth utilized several other options, such as, part-time school/vocational training, community service, a combination of several part-time options, etc.
- *Eligible Youth Who Have a GED or High School Diploma by Discharge:* In July 2014 performance on this measure peaked at 100%, with eligible youth attaining a GED or High School Diploma by discharge. Due to consistently high performance this measure will be moved to the dashboard in October 2014, therefore this will be the last time this measure is detailed in the C-Stat Quarterly Report. 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.
- *Committed or Detained Youth Who Escape or Walkaway:* DYC has added a “walkaway/escape” section to the “New Youth Information Sheet,” part of the documentation that accompanies a youth when transitioning to a new placement. The new section of the documentation will help inform new placements about youth’s walkaway/escape history. Furthermore, the section will be completed by a case manager along with the youth and their family, which will foster open conversations about walkaway/escape behavior and triggers.
- *Timely Initial Placement for Committed Youth:* DYC is continuing to struggle with waitlists at both state-secure facilities and community placements. Analysis into initial placements throughout State Fiscal Year 2013/14 demonstrated that the same number of youth went to state-secure placements in the first half of the fiscal year as the second half. At the same time, only 5 of 85 went over 40 days to placement in the first half of the fiscal year, whereas in the second half of the fiscal year 47 of 83 referrals went over 40 days to placement.
- *Fights and/or Assaults in DYC State-Secure Facilities:* Performance on this measure worsened, reaching an all-time high (lower is better) in the last month of the most recent quarter. DYC continues to examine data relevant to fights and assaults (i.e., time, location, youth involved, etc.). DYC is working with the Office of Information Technology to develop real time data reports that will increase efficiency in data gathering and analysis at the facility leadership level.
- *Family Engagement Measures:* The Family Engagement: Client Manager Contact with Families measure has maintained performance above the goal for 6 consecutive months. The other Family Engagement Measure, Residential Client Contact with Family has attained the goal twice in the last 6 months and sustained performance near the goal in the remaining months within the last 6 months.



Measures

- [Youth Enrolled in a Full/Part Time Program at Discharge](#)
- [Eligible Youth who Have a GED or High School Diploma at Discharge](#)
- [Timely Initial Placement for Committed Youth](#)
- [Committed or Detained Youth Who Escape or Walkaway](#)
- [Fights and/or Assaults in NYC State-Secure Facilities](#)
- [Youth Injuries in State-Secure 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](#)



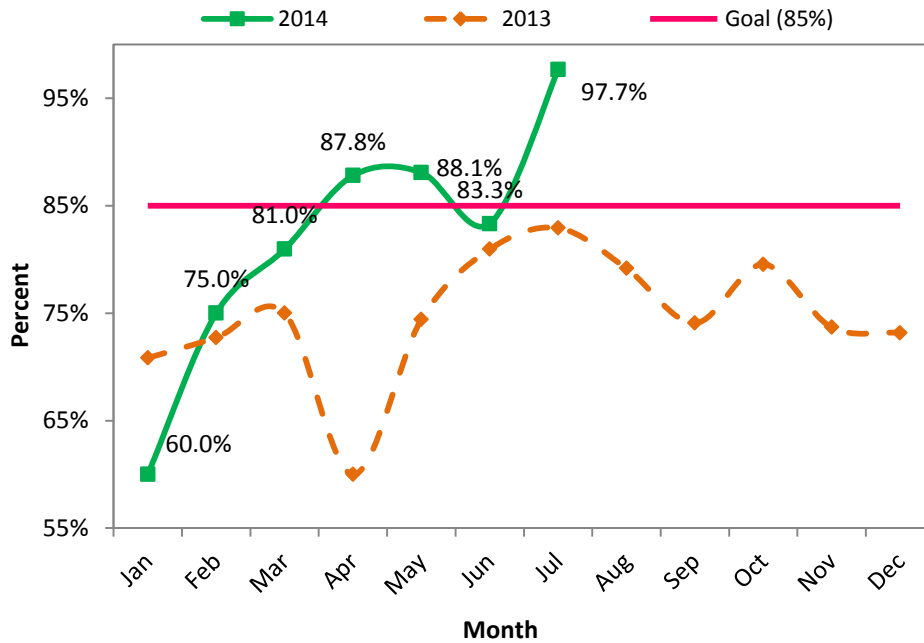
Division of Youth Corrections (DYC)

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: Number of eligible DYC clients who discharge in a specific month; Average monthly denominator: 44

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 reached an all-time high in July 2014 and the goal was achieved in 2 of the 3 months this quarter.





Division of Youth Corrections (DYC)

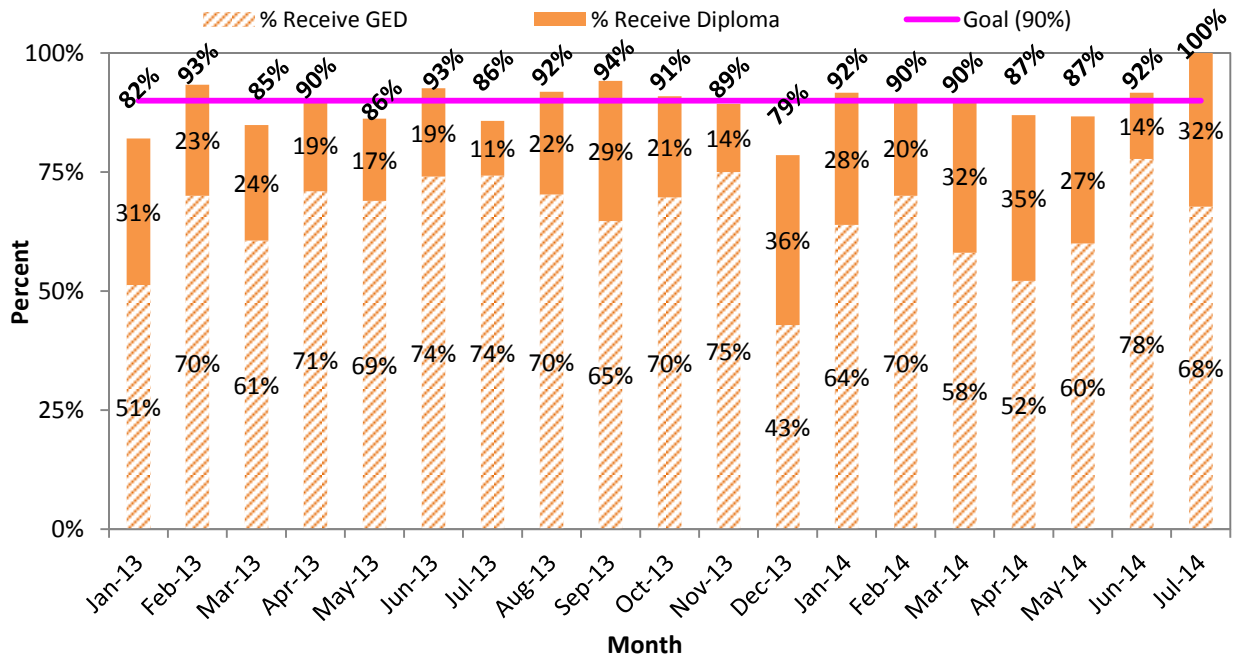
Measure: **Eligible youth who have a GED or high school diploma by discharge**

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

Denominator: Number of eligible DYC clients discharged in a specific month; Average monthly denominator: 32

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

Goal: **↑ 90%**



Trend: Performance improved throughout this quarter, culminating in a perfect 100% of youth attaining a GED or high school diploma by the time they discharge.





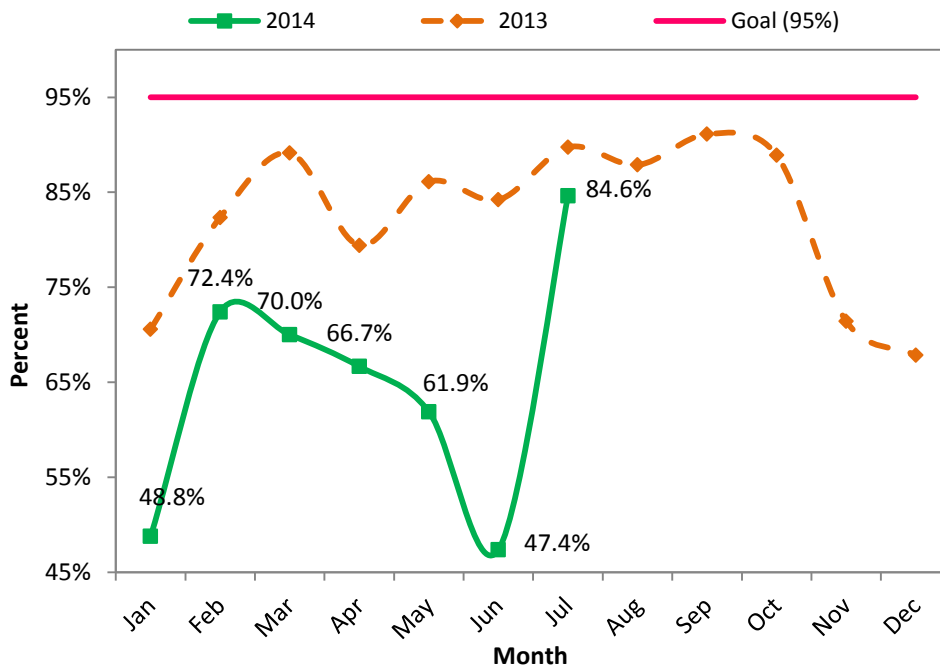
Division of Youth Corrections (DYC)

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: Number of newly committed youth placed in their initial placement in a specified month; Average monthly denominator: 40

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

Goal: **↑ 95%**



Trend: Performance declined in both May and June 2014, representing the worst performance to date in June 2014. Performance then improved in July 2014. The goal has yet to be achieved.



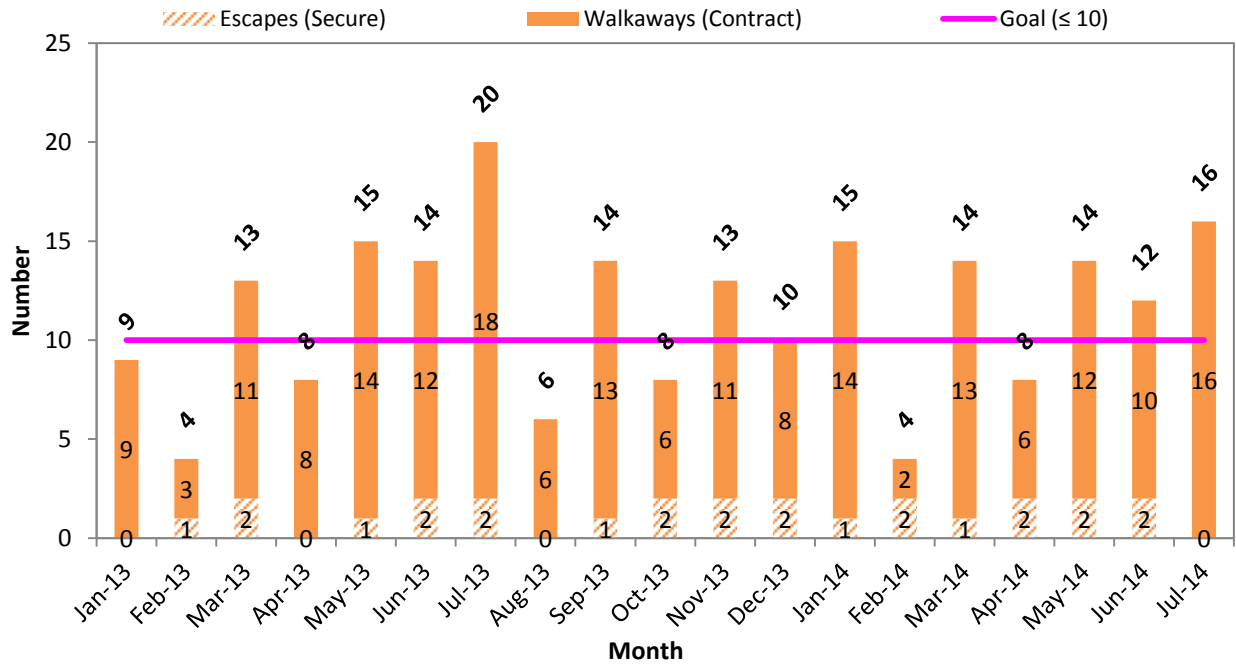
Division of Youth Corrections (DYC)

Measure: **Committed or detained youth who escape or walkaway**

How it is measured: Number of escapes and walkaways occurring while committed youth are in state-secure placement (escape) or in contract staff-supervised or community placement (walkaway); Average daily population: 1,067

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

Goal: **↓ ≤10**



Trend: Overall performance worsened from April to May 2014 and again from June to July 2014, though the number of escapes decreased from 2 in April, May, and June 2014 to 0 in July 2014. Additionally, a seasonal trend in this measure is starting to develop, with peaks in summer months (e.g., May, June, July) and valleys in February and March.





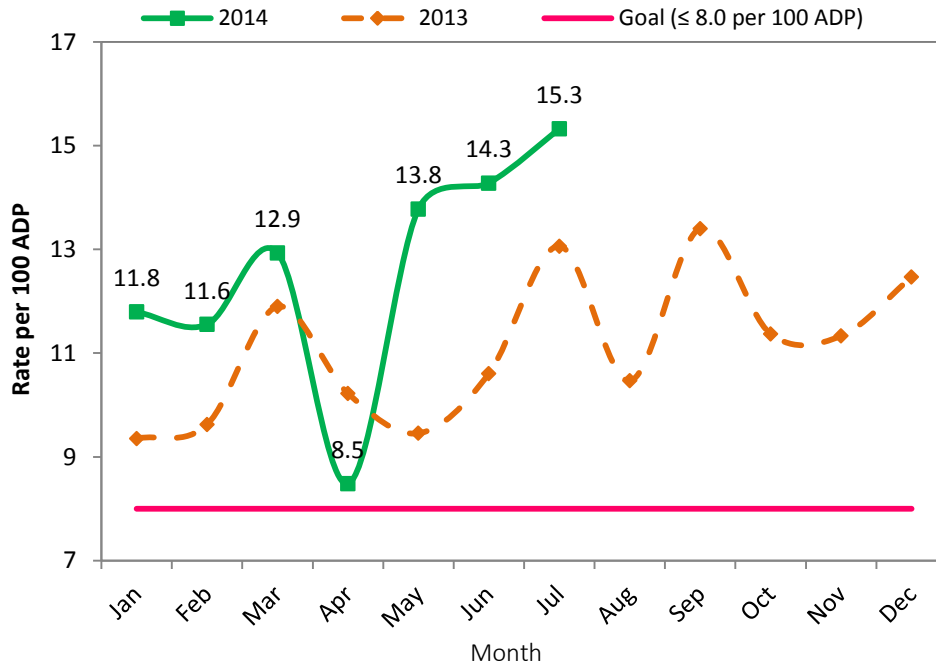
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Fights and assaults occurring in DYC state-secure facilities
Denominator: Monthly secure average daily population (ADP; state-secure detention, assessment and commitment); Average daily population: 618.5

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 has worsened each month since April 2014, concluding in July 2014's performance of 15.3, which is the worst performance to date.



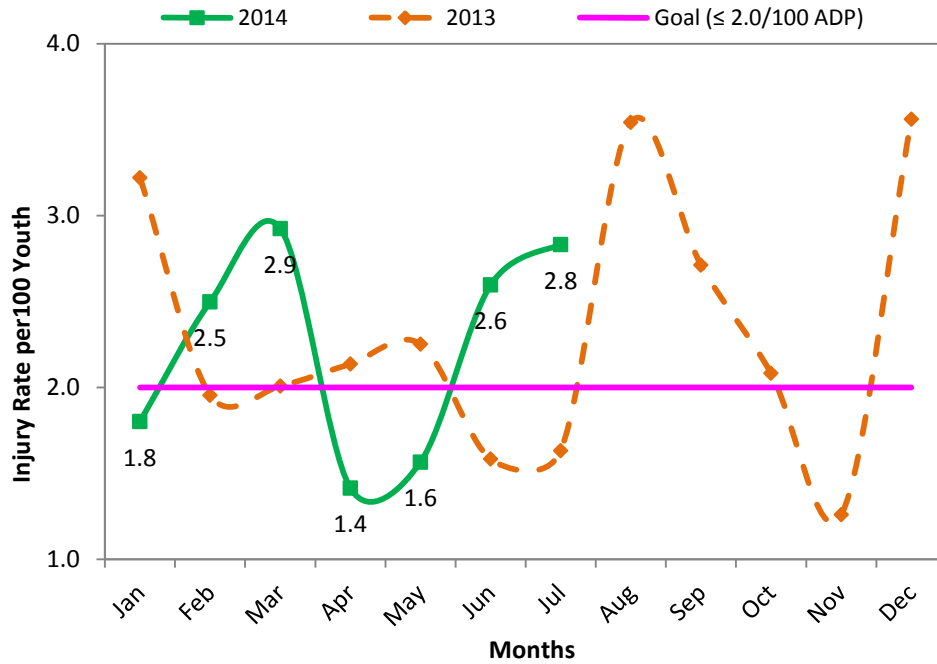
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Number of youth injuries in state-secure facilities
Denominator: Monthly secure average daily population (ADP; state-secure detention, assessment, and commitment); Average daily population: 618.5

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

Goal: **↓ ≤ 2.0/100ADP**



Trend: Performance worsened each month within this quarter, moving above (lower is better) the goal in June and July 2014.



Division of Youth Corrections (DYC)

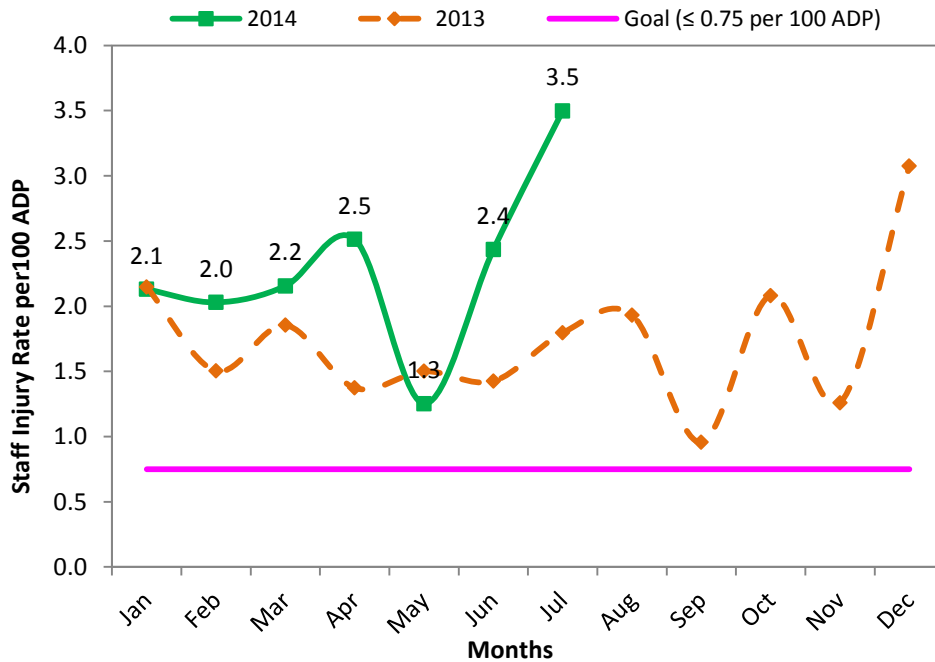
Measure: **Staff injuries on the job as a direct result of youth contact**

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-secure detention, assessment, and commitment); Average daily population: 618.5

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

Goal: **↓ ≤ 0.75/100 ADP**



Trend: Performance worsened this quarter, demonstrating an increase in the number of staff injuries from May to July 2014. The goal is yet to be achieved.





Division of Youth Corrections (DYC)

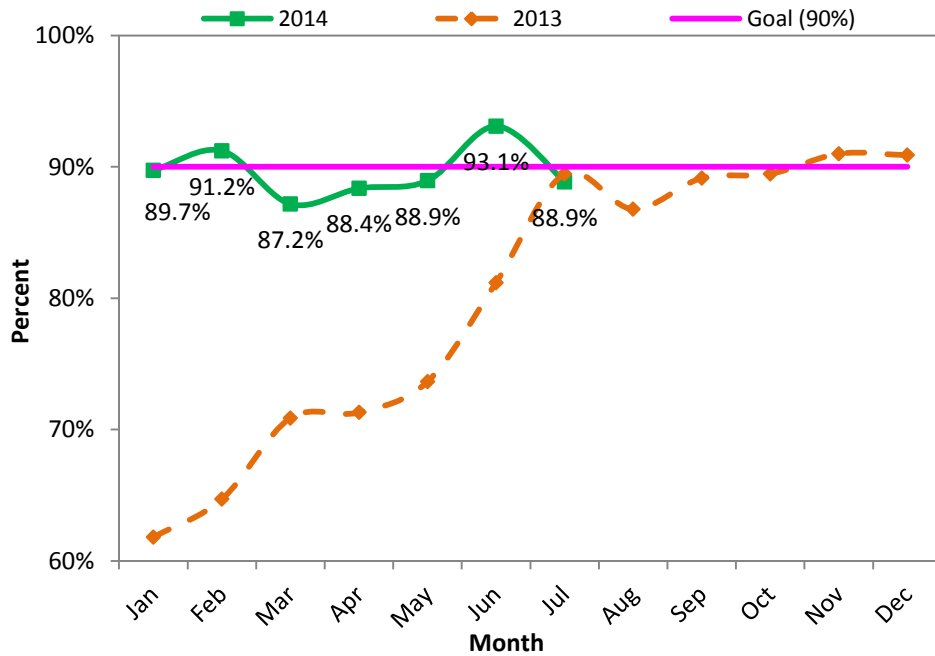
Measure: **Family engagement: residential client contact with families**

How it is measured: *Numerator:* Number of committed youth in state-secure facilities who have at least one face-to-face or phone contact with their families during a given month

Denominator: Number of committed clients in state-secure 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: Performance improved above the goal in June 2014 and was very near the goal in both May and July 2014. Performance on this measure is continuing to sustain itself at or near the goal each month.





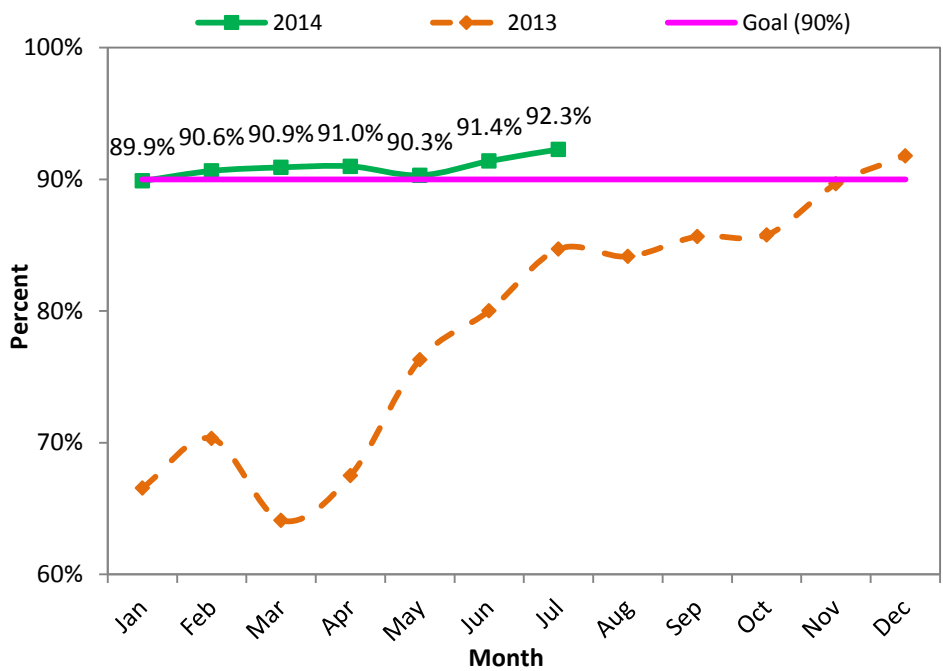
Division of Youth Corrections (DYC)

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: Number of committed clients, both residential and parole; Average monthly denominator: 1,086

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

Goal: **↑ 90%**



Trend: Performance continued to increase each month within the current quarter, remaining above the goal for each month, as well.

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

- DVP has maintained performance above the goal for every month within the reporting quarter for each of the three measures.
- The Domestic Violence Program has begun to implement a database in order to more efficiently and effectively collect data. The database is complete and a pilot program utilizing the database is currently being implemented.
- DVP's Outcomes Task Force has established outcomes that are meaningful and relevant to DVP, in addition to the Federal measures. Five outcomes were selected: 1) Identify clients' immediate needs and provide information, 2) Increase client's positive stress management skills and coping strategies, 3) Increase client access to community resources, 4) Strengthen two-generation relationship skills, and 5) Increase in healthy relationship knowledge and attitudes for children and youth 0-25. These outcomes were deliberated and tools to capture the outcomes were discussed at the June DVP Program Forum Meeting. DVP's next steps include beginning a Request for Proposals for an evaluator and begin preliminary tracking of outcomes.

Measures

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



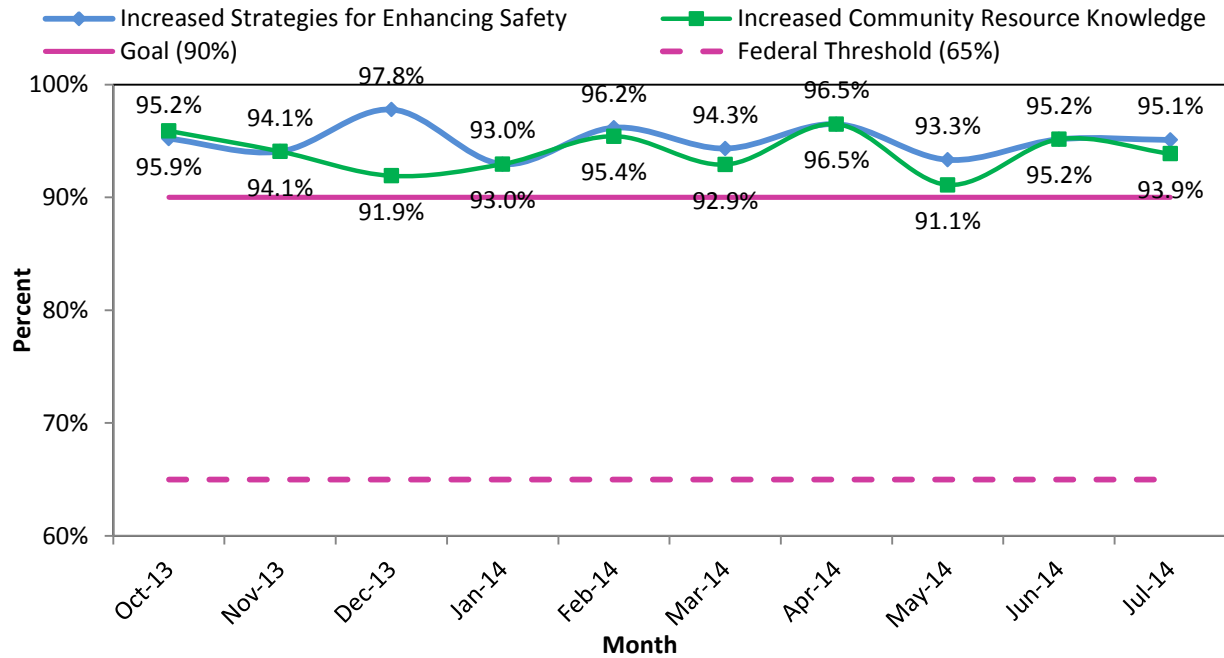
Domestic Violence Program (DVP)

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: 154.33

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% (Federal); 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.





Domestic Violence Program (DVP)

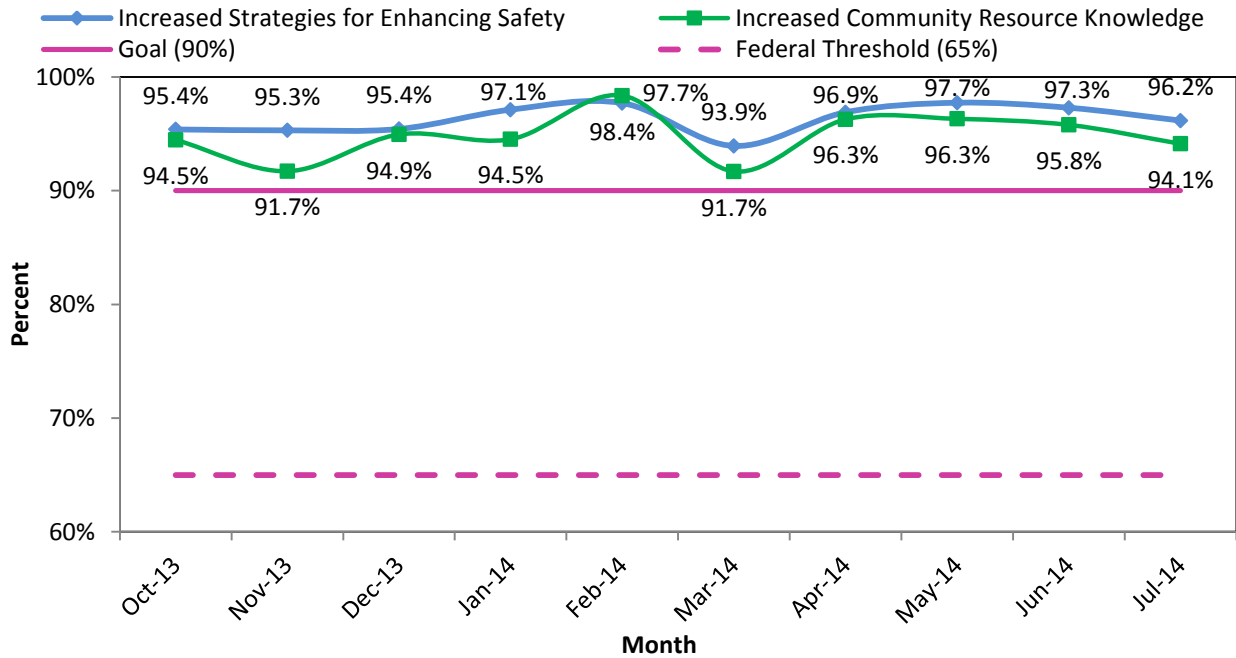
Measure: **Advocacy and individual counseling (non-residential; Federal Measure)**

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: 358.33

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% (Federal); 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.



Domestic Violence Program (DVP)

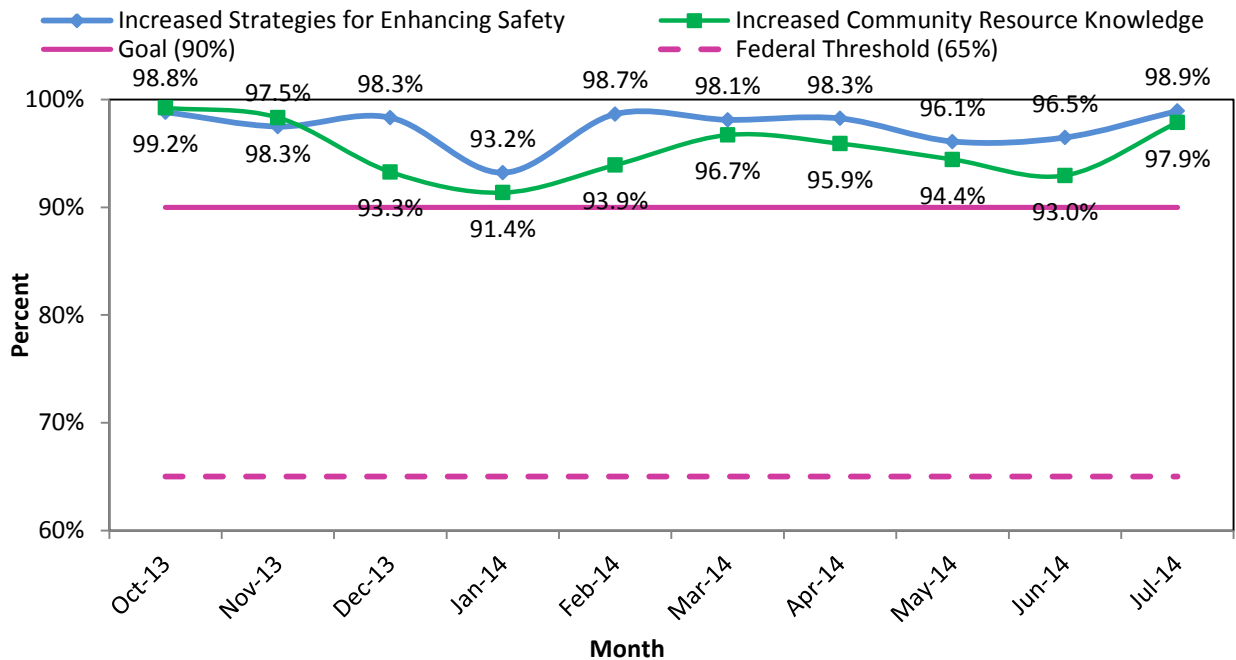
Measure: **Support groups (non-residential; Federal Measure)**

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: 138.67

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% (Federal); 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.



Office of Community Access and Independence

Description

The Office of Community Access and Independence (OCAI) houses programs that provide in-home supports for aging populations, employment supports for disabled populations, operate community living centers for veterans, and provide protective services for at-risk adults. OCAI consists of Aging and Adult Services, Disability Determination Services, Division of Regional Center Operations, State Veterans' Community Living Centers, and Division of 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, and 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

- *Timeliness of Adult Protection Inquiries*: This program is delivered, locally, at the county level.
 - During this quarter, APS implemented a new case management system called CAPS (Colorado Adult Protective Services). APS staff trained county employees on documentation and casework in CAPS throughout the month of June with full implementation on July 1, 2014. Data is available for real-time reporting in the new system, as opposed to the 60 day delay previously available with CBMS. Due to the change in data availability this quarter has four months performance to review.
 - 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.
 - With the implementation of the new case management system AAS has more casework- specific data available for analysis. With this in mind APS will begin reporting on the following new measures in the September C-Stat deck: *Timeliness of Initial Assessments, Timeliness of Investigations, Timeliness of Monthly Contacts, and Safety Improvement.*

Measures

- [Timeliness of Adult Protection Inquiries](#)



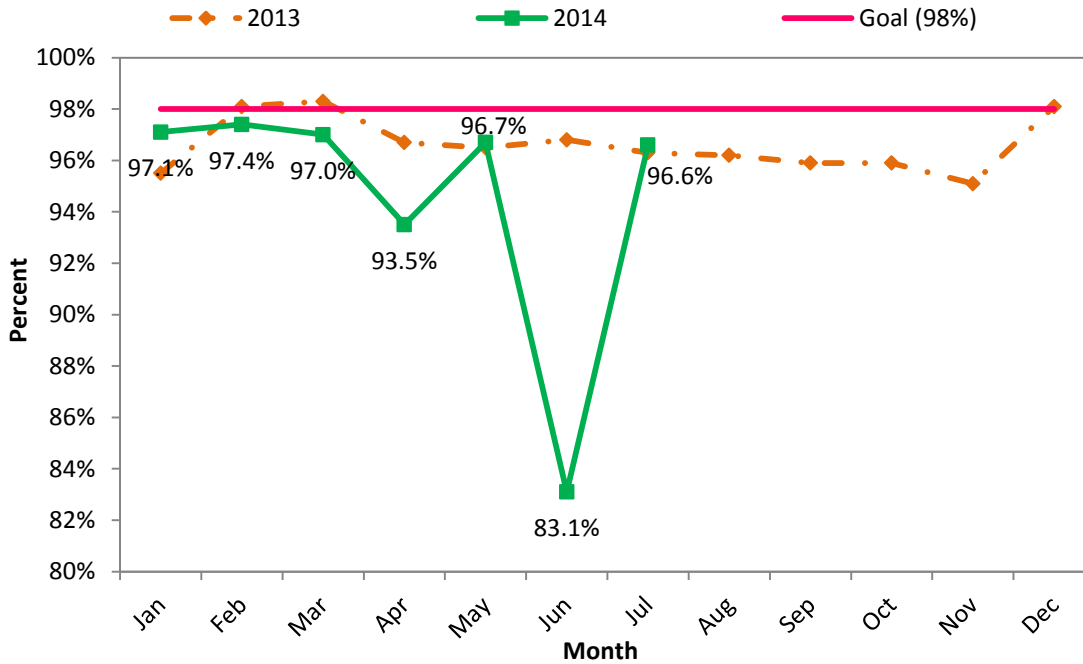
Aging and Adult Services (AAS)

Measure: **Timeliness of 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: 615

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

Goal: **↑98%**



Trend: Performance during this quarter showed greater variability. On July 1, 2014 Adult Protective Services migrated to a new case management system, which contributed to the drop in June 2014 performance. Performance in July has returned to pre-software implementation performance.

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 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 significant reduction in the mean number of days from 115.7 to 94.8 (i.e., 21 days).
- *Examiner Processing Time:* This quarter showed greater variability, much like the previous year, with an increase in processing time during the first two months and then a decrease in July. Additionally, DDS employees continue to work overtime and receive processing assistance from their Federal partners both in Denver as well as Baltimore.
- *Percentage of Accurate Initial Eligibility Decisions:* Due to small Federal Social Security Administration (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 implemented and reported on performance in the current quarter. The essence of the 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](#)

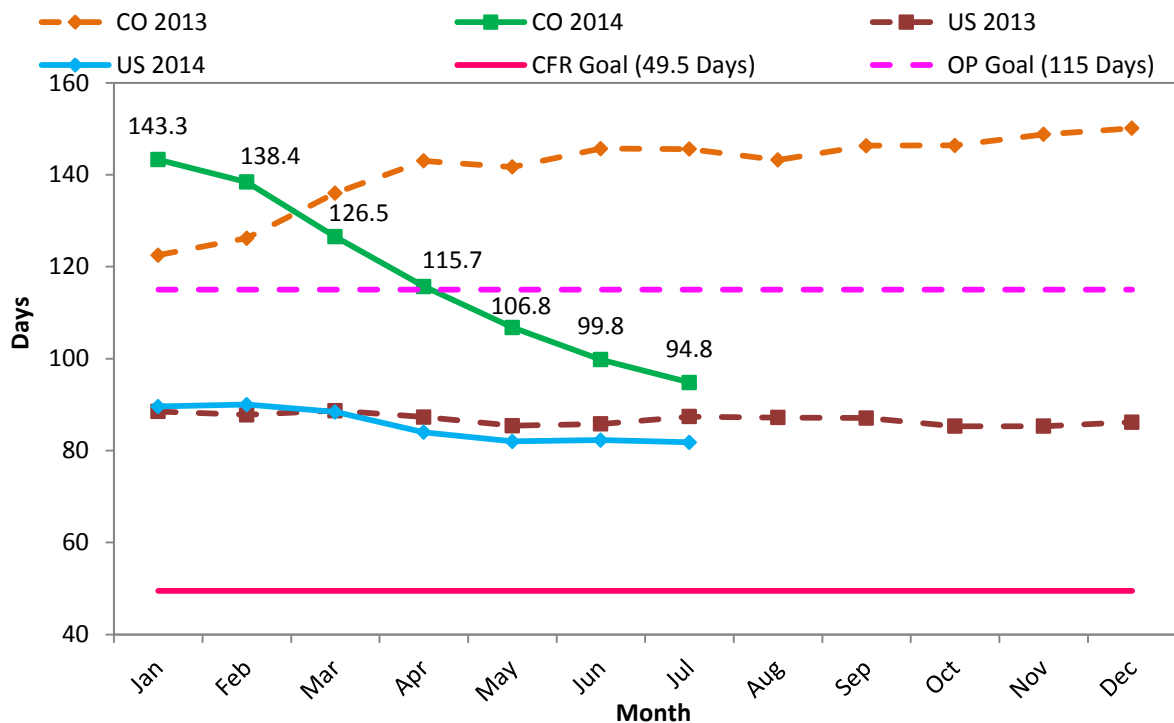
Disability Determination Services (DDS)

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: 3,639

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: Performance in 2014 continues to show a downward trajectory, with a three week reduction in processing time during the recent quarter (green line).

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 Social Security Administration (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.



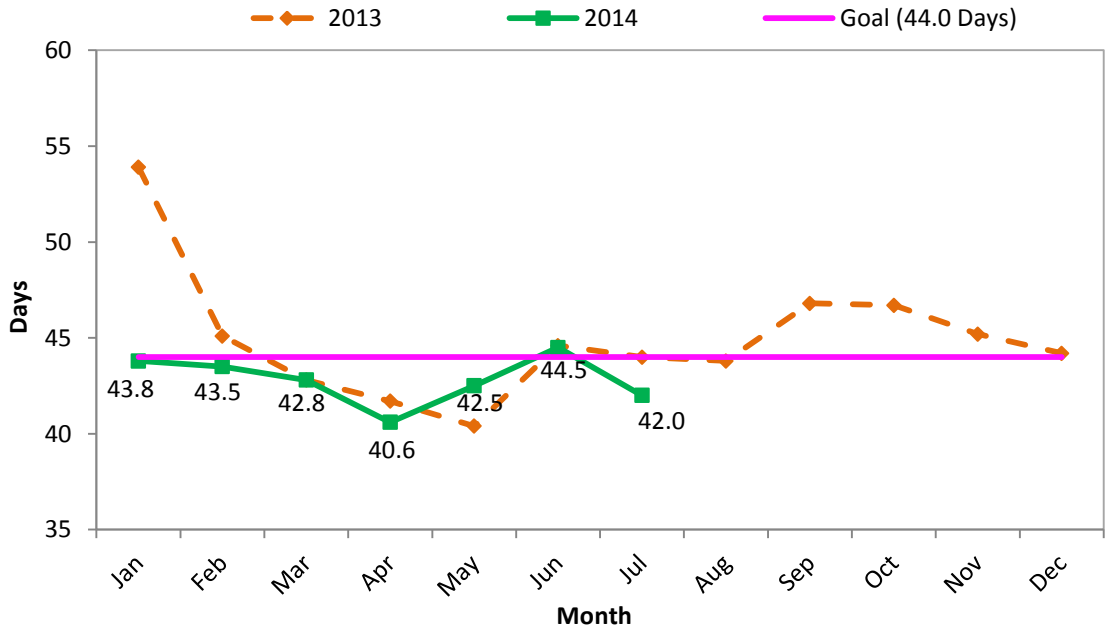
Disability Determination Services (DDS)

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: 3,461

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 showed more variability during the current reporting period, mirroring last year’s increase in processing time in May and June. Performance in July showed a reduction in processing time and appears to be returning to previous performance levels.

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



Disability Determination Services (DDS)

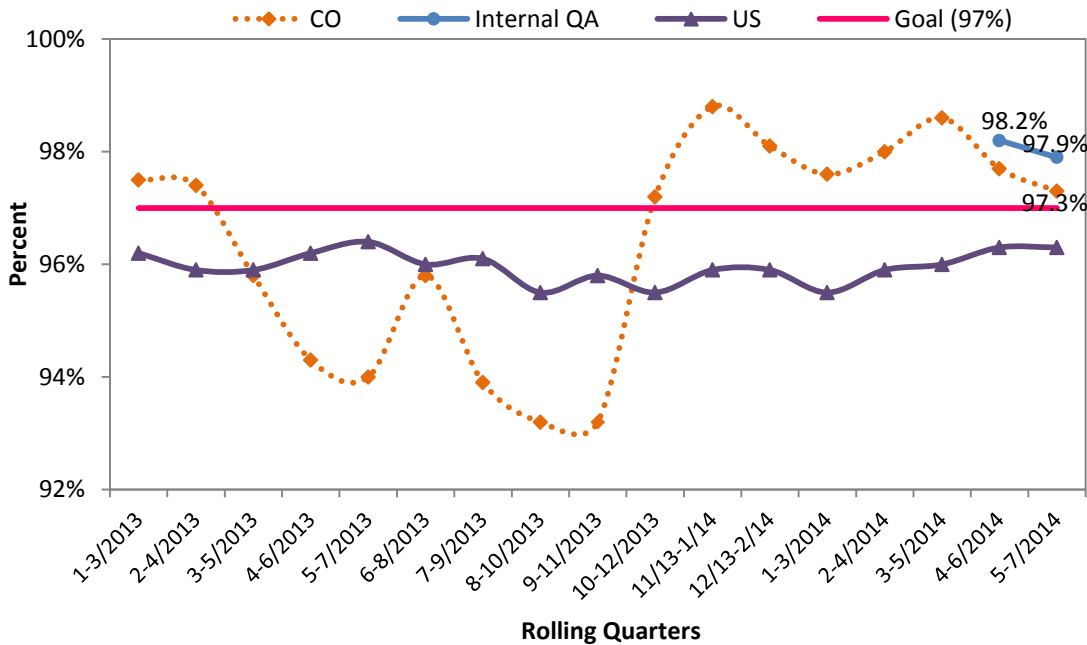
Measure: **Percentage of accurate initial eligibility decisions (Federal Measure)**

How it is measured: *Numerator:* Number of accurate initial eligibility decisions (i.e., no documentation or decisional errors were found)

Denominator: Number of initial eligibility decisions sampled by Social Security Administration-Disability Quality Branch; Average quarterly denominator: 142

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

Goal: **↑97% (Federal Goal)**



Trend: The past quarter demonstrated a slight decrease in performance in the accuracy of initial decisions, however, remained above the goal for the eighth consecutive rolling quarter. Also, the Colorado DDS office Internal Quality Assurance team began measurement during this quarter as well.

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 in residential facilities. 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: Tracy Myszak

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. Over the past quarter, three individuals have become ready to transition in the Short-Term Treatment Model. On average this has taken 300 days, whereas the goal is 120 days. During this same quarter, one individual has become ready to transition in the Intensive Treatment Model. This has taken 20 months, well below the three year goal.
- *Length of Time to Transition*: This measure is examined for all models, Short-Term Treatment and Stabilization, Intensive Treatment and Long-Term Habilitation. Over the past quarter, seven individuals have transitioned from the Short-Term Treatment Model. On average this has taken 112 days, whereas the goal is 60 days. Within the Intensive Treatment Model there were three individuals who transitioned. On average this took 289 days, whereas the goal is 120 days. Also, there were two individuals who transitioned from the Long-Term Habilitation Model. On average the transition took 420 days, whereas the goal is 120 days.

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](#)

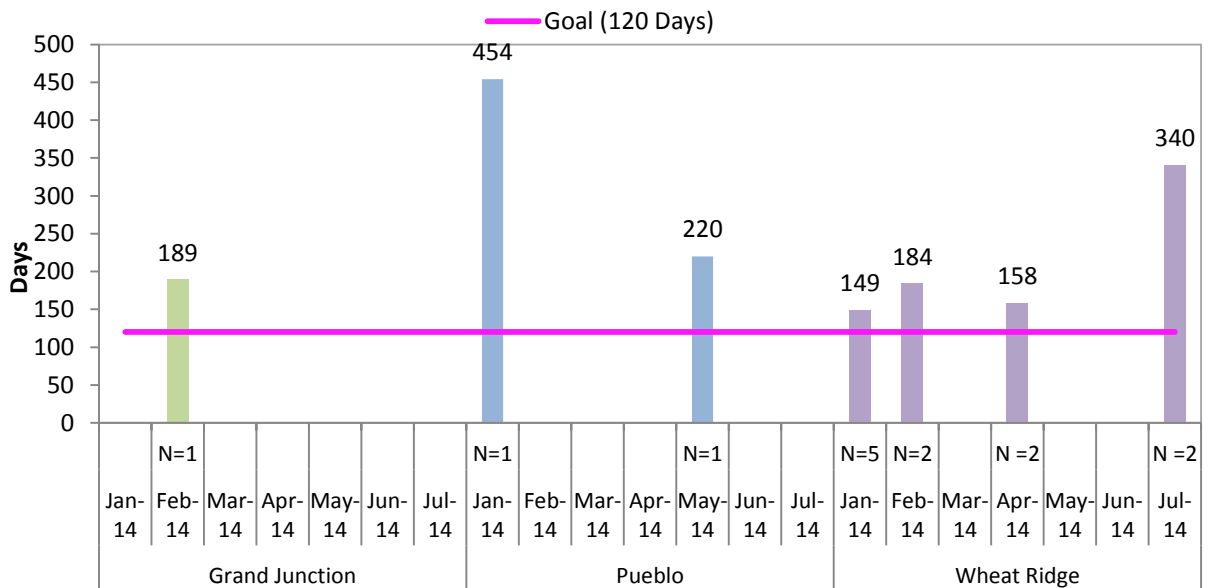
Division of Regional Center Operations (DRCO)

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 denominator.

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 did not have any individuals who became ready for transition. The one individual at Pueblo and two individuals at Wheat Ridge who became ready for transition this quarter exceeded the 120 day goal.



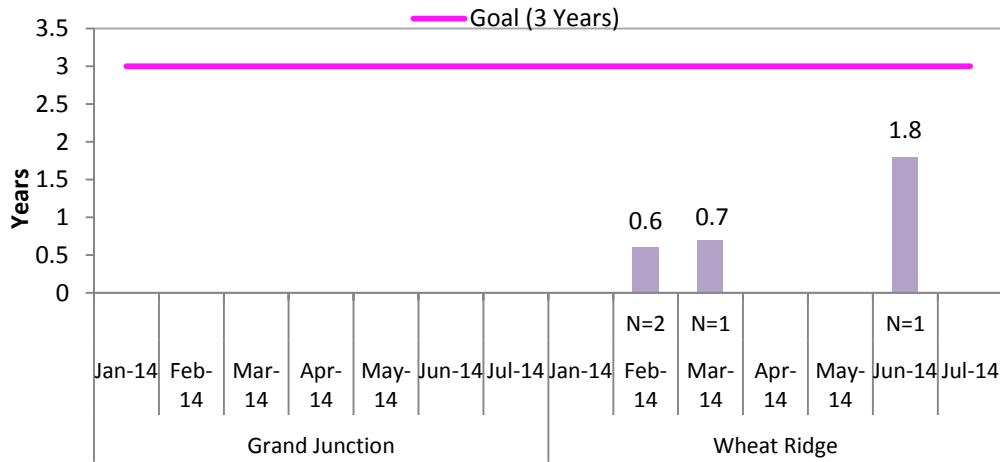
Division of Regional Center Operations (DRCO)

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 denominator.

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: Wheat Ridge met the goal for the client who became ready for transition in June 2014. Grand Junction did not have any individuals become ready to transition in the most recent quarter.

Notes: PRC does not offer the Intensive Treatment model.



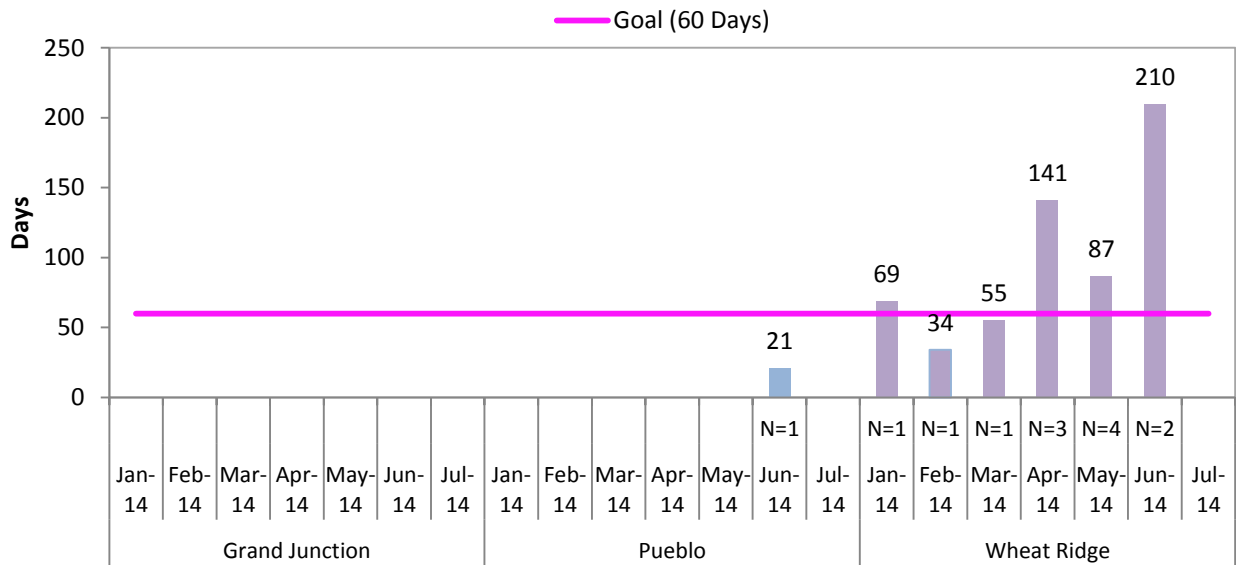
Division of Regional Center Operations (DRCO)

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 denominator.

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 did not transition any individuals from the Short-term model. Pueblo met the goal for the individual who transitioned in June. Wheat Ridge did not meet the goal in two of the three months this quarter, across six individuals.



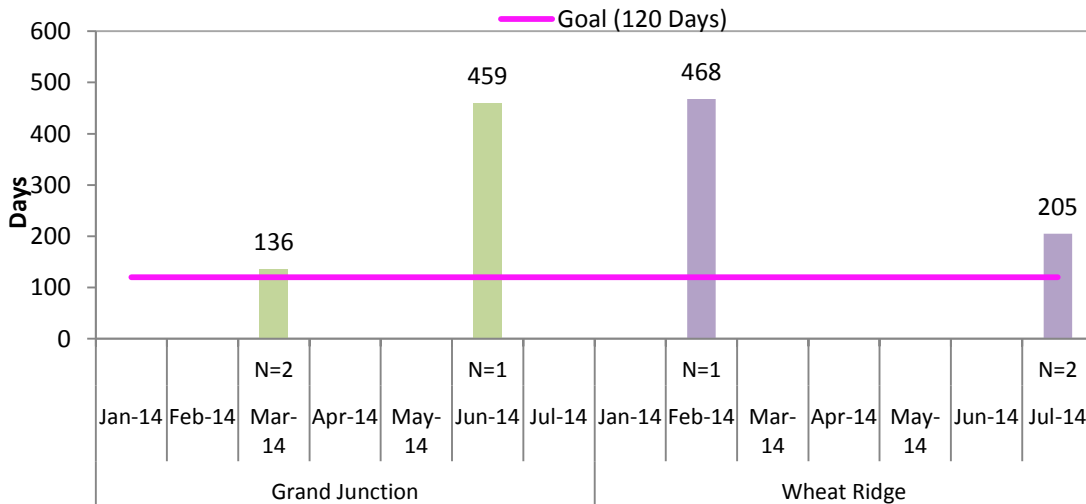
Division of Regional Center Operations (DRCO)

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 denominator.

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, both Grand Junction and Wheat Ridge transitioned individuals from the Intensive Treatment model to the community. None of the three transitions met the 120 day goal.

Notes: PRC does not offer the Intensive Treatment model.



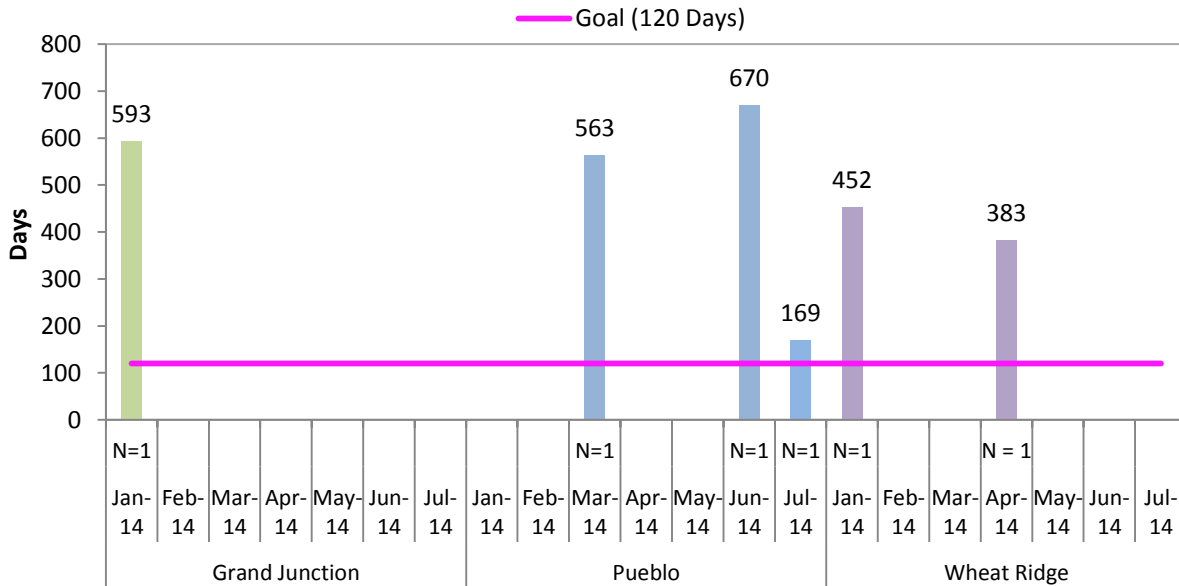
Division of Regional Center Operations (DRCO)

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 denominator.

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, Grand Junction and Wheat Ridge did not have any individuals who transitioned. Pueblo had two individuals who transitioned; both transitions were not made within the 120 day goal.



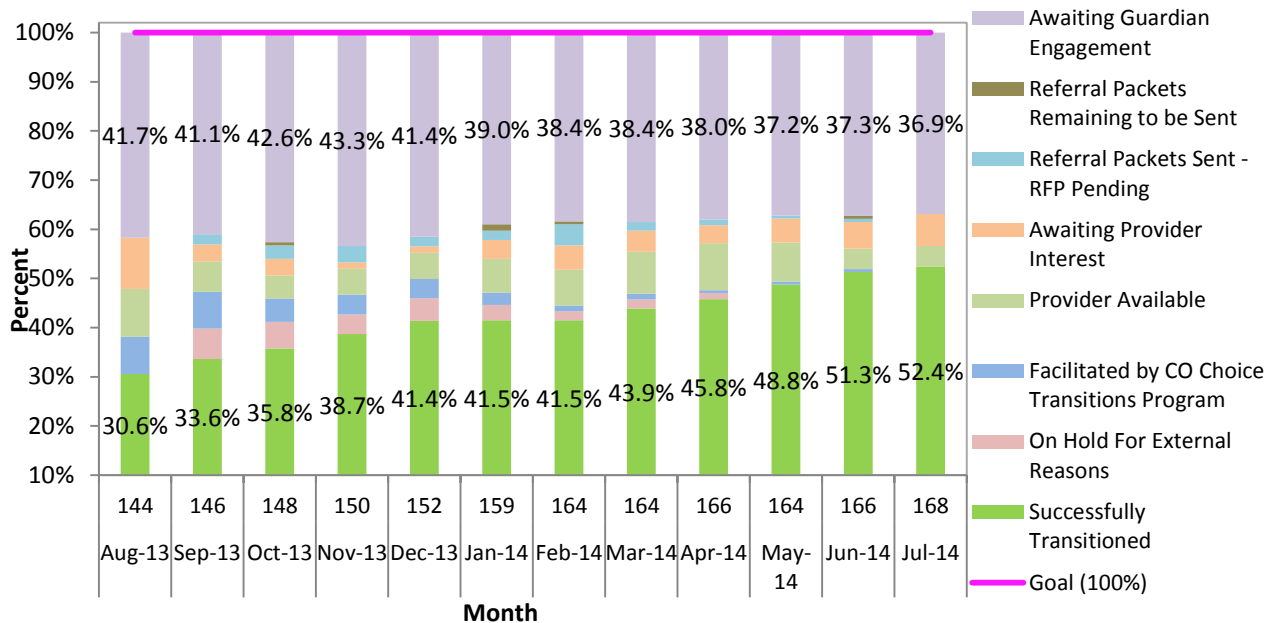
Division of Regional Center Operations (DRCO)

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 denominator.

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 48.8% to 52.4% over the most recent quarter.



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 being represented in this report, SVCLC examined the data on this measure by conducting both chart audits and clinical round tables to verify diagnoses for residents and that prescribed anti-psychotic medications were appropriate.
- *Percent of Residents without Falls:* A fall prevention program, called the Guardian Keepers was developed and implemented in all Community Living Centers in the following months; Homelake, Dec. 2013, Fitzsimmons and Rifle, Feb. 2014, and Florence, Mar. 2014. While performance initially improved in the centers, it more recently has begun a downward trajectory. The Division has begun further exploration into the practice at each Community Living Center in order to understand the occurrences (location, type, and severity) as well as how to anticipate and reduce falls in the future.
- *Percent of Residents without Unplanned Weight Loss or Gain:* Two centers (Florence and Homelake) had previously sustained high performance on this measure and therefore results are monitored through dashboard reporting. 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. Fitzsimmons and Rifle have now continuously performed above the goal and will join Florence and Homelake on the dashboard. Due to all centers now being monitored through dashboard maintenance, this is the last time this measure will be included in the C-Stat Quarterly Report.

Measures

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



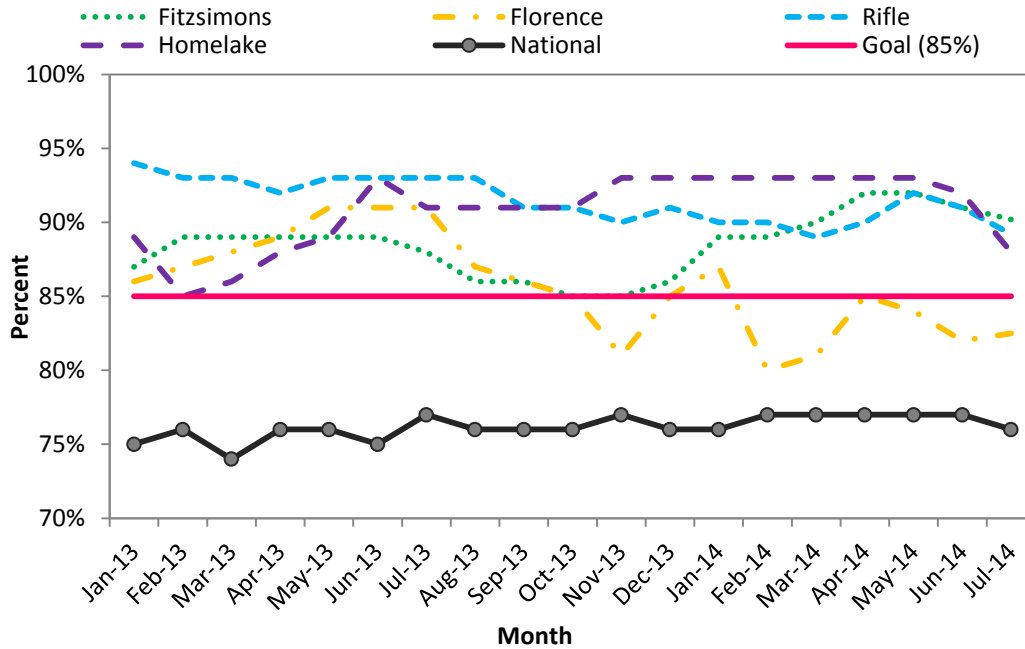
State Veterans' Community Living Centers (SVCLC)

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

How it is measured: *Numerator:* Number of residents without anti-psychotic medication
Denominator: Average Daily Census: Fitzsimons: 164, Florence: 96, Rifle: 66, Homelake: 52

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: **↑85%**



Trend: Performance has trended downward among all Community Living Centers over the most recent quarter. Nevertheless, Fitzsimmons, Homelake, and Rifle have all exceeded the 85% goal throughout the quarter.



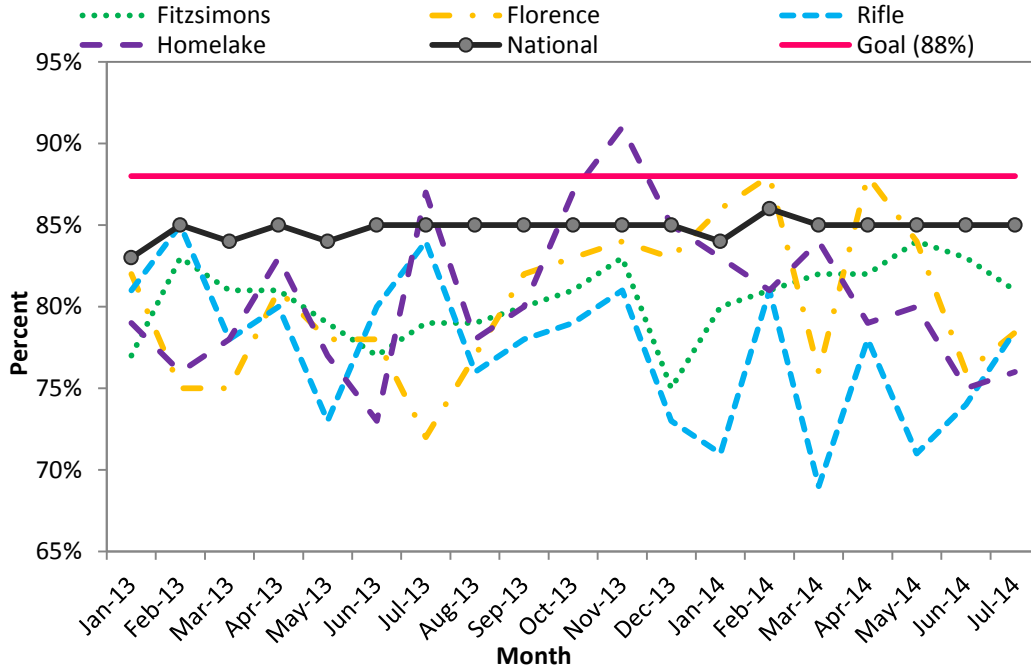
State Veterans' Community Living Centers (SVCLC)

Measure: **Percent of residents without falls**

How it is measured: *Numerator:* Number of residents without falls
Denominator: Average Daily Census: Fitzsimons: 164, Florence: 96, Rifle: 66, Homelake: 52

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 and varied greatly across the Community Living Centers.



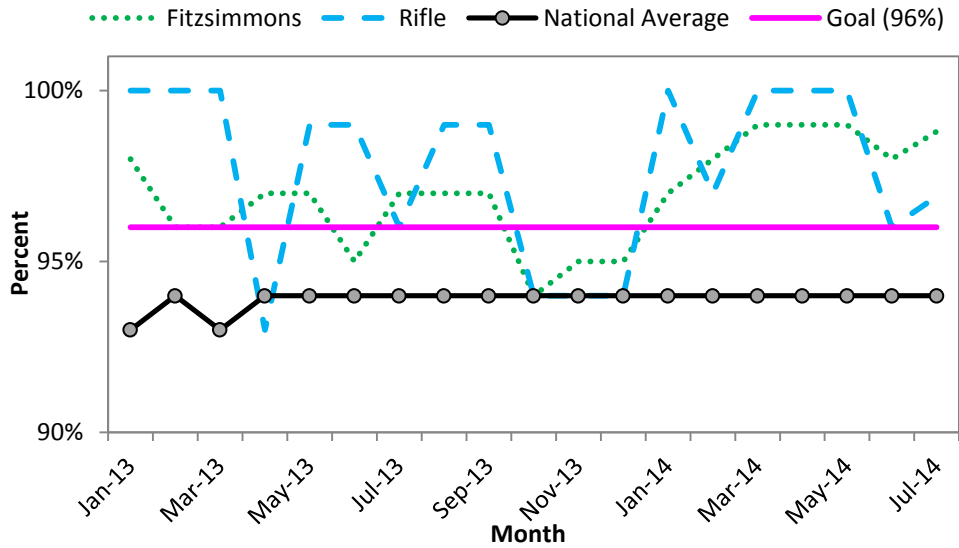
State Veterans' Community Living Centers (SVCLC)

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: Average Daily Census: Fitzsimons: 164, Rifle: 66,

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, both Community Living Centers were above the goal for all three months.

Note: Florence and Homelake were previously moved to the dashboard.

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

- DVR began reporting all data by region each month in the C-Stat meeting. This allows the Division to look for outliers among regions, and provide further analysis so as to understand what is driving performance.
- *Case Closure by Type*: Successful closures have a slight upward trajectory this quarter moving from 16% to 20%.
 - DVR completed a quality assurance review of all cases in June 2014. DVR underwent this review to promote more “active” engagement with clients and determined 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 were closed, particularly those without client contact for long periods of time, many closed unsuccessfully and are represented in both Order of Selection (OOS) and “Before Plan” closures.
- *Timeliness of Eligibility*: Performance on this measure has consistently improved month after month, and plateaued this quarter, achieving 95-96%. Efforts DVR staff has taken to reduce the length of time needed to determine eligibility include: identifying best practices among counselors, as well as a change in process which encouraged counselors to determine eligibility first, and level of disability severity second. Due to their sustained high performance on this measure, beginning with August, data will be reported on the dashboard. 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.
- *Frequency of 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. The next step will be to leverage, this measure to inform the development of a measure that examines the quality of client engagement.

Measures

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



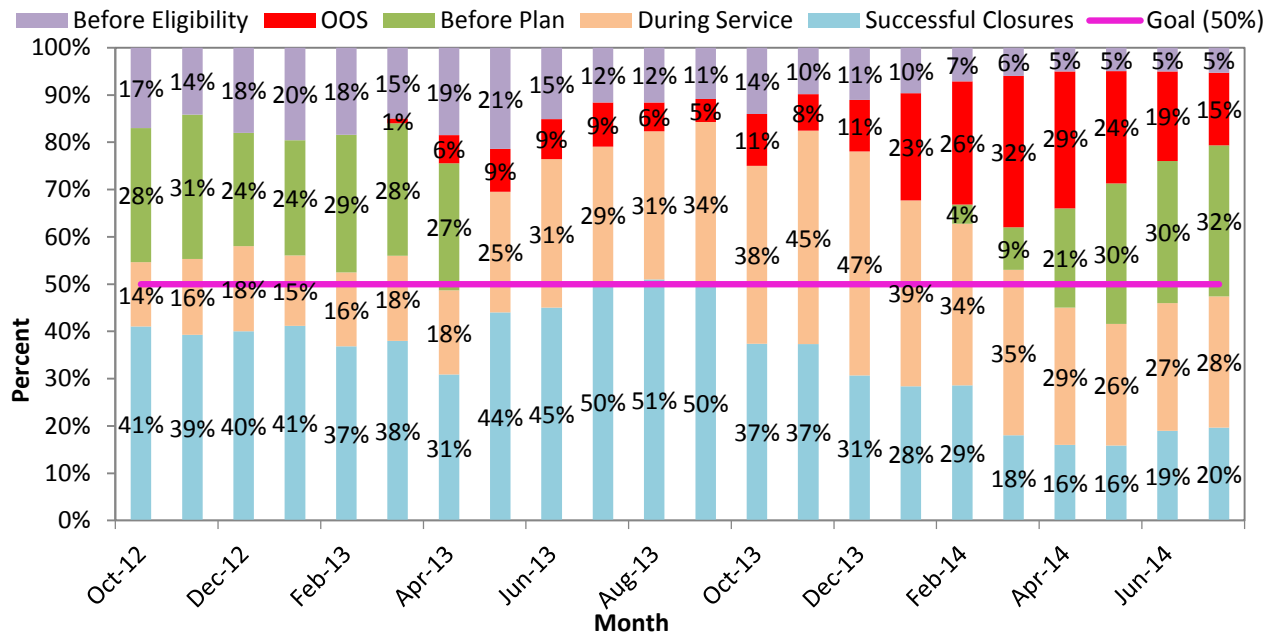
Division of Vocational Rehabilitation (DVR)

Measure: **Case closure by type**

How it is measured: *Numerator:* Number of cases by closure status type (before eligibility; closed from waiting list; before plan; during service; successful closure)
Denominator: Number of cases closed during the month; Average monthly denominator: 577

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 (blue section) increased for three consecutive months during the past quarter (16% to 20%).

Notes: Due to the Order of Selection waiting list, there are no “Before Plan” closures beginning in May 2013 through January 2014. These began again in February 2014 as people were being released from the waiting list. 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)

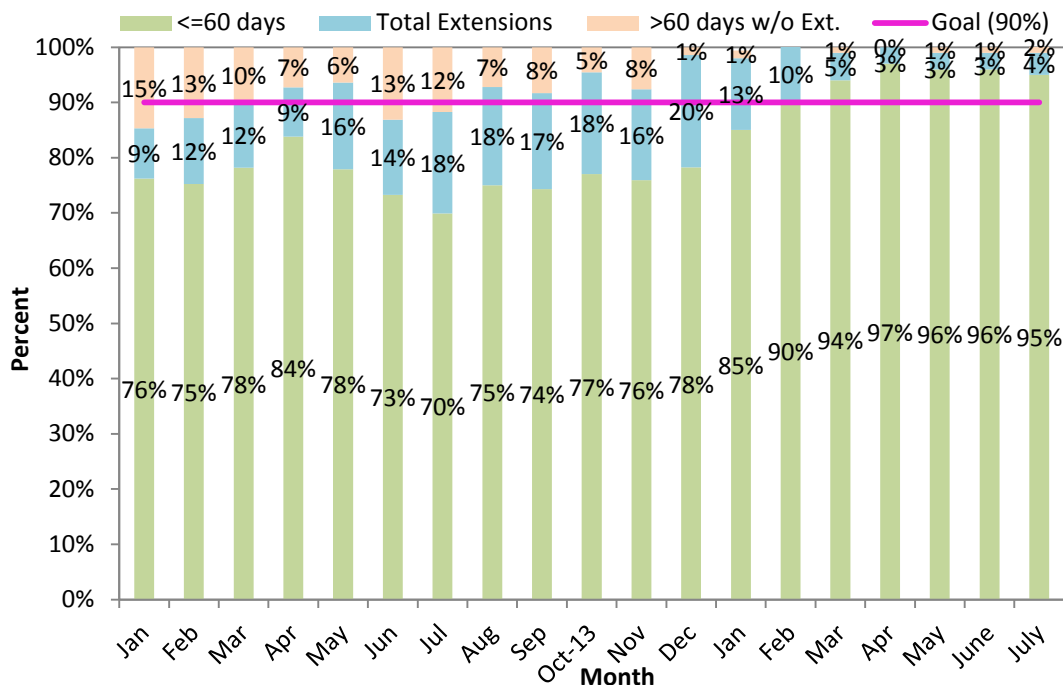
Measure: **Timeliness of eligibility determination**

How it is measured: *Numerator:* Number of eligibility decisions made in less than 60 days, with an extension beyond 60 days, or without an extension beyond 60 days

Denominator: Total number of eligibility decisions during the month; Average monthly denominator: 353

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 stable performance in the percentage of timely eligibility decisions within the 60 day timeframe (95-96%) as well as stable performance among the percentage of decisions made after 60 days both with and without an extension.

Notes: Sixty (60) days is the 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.



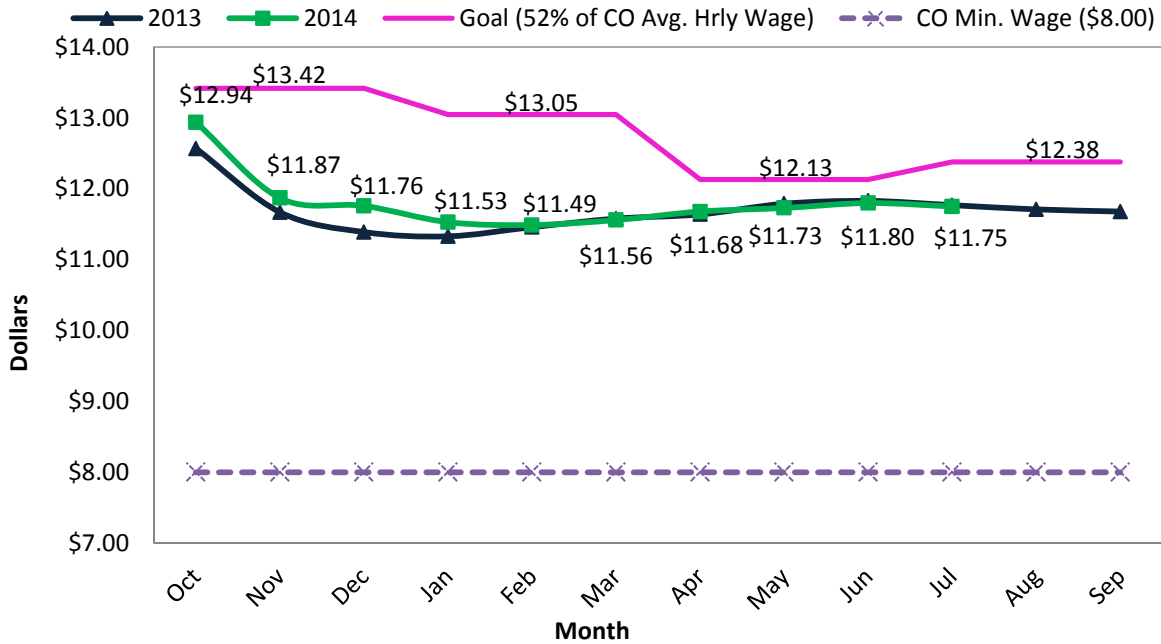
Division of Vocational Rehabilitation (DVR)

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 plateau in the overall cumulative hourly wage earned by participants, almost identical to the previous year.

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



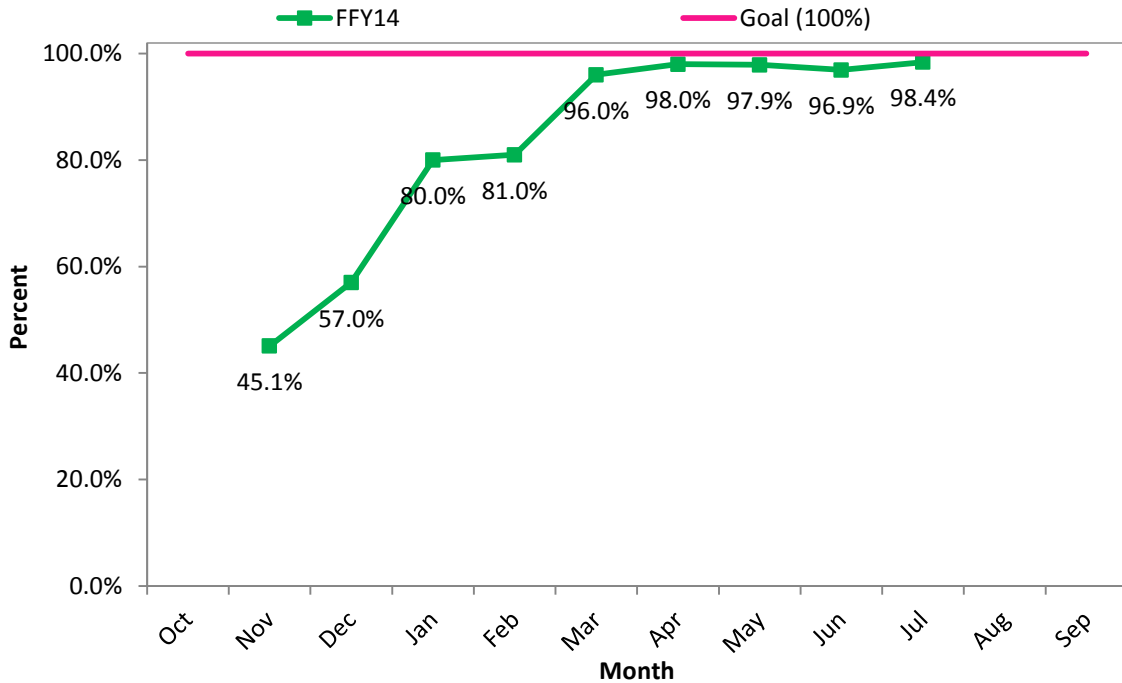
Division of Vocational Rehabilitation (DVR)

Measure: **Frequency of 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: 10,302

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

Goal: **↑100%**



Trend: This quarter of data shows an increase over the previous quarter, and stable performance within the quarter, in the frequency of contact with clients (97.9% to 98.4%).

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

No data is available for October 2013.

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:* Manual CCCAP payments declined nearly 19 percentage points since January 2011, going from 21.2% to 1.5% in July 2014. In August and September 2014, three counties received a C-Stat Award for their specific outstanding efforts to reduce manual CCCAP payments: Pueblo, Arapahoe, and Adams. State staff were also awarded for their efforts.
 - Adams County reduced manual payments from 27.5% in January 2012 to 2.1% in July 2014. Arapahoe County reduced manual payments from 16.1% in January 2012 to 0.5% in July 2014. Pueblo County maintained excellent performance, exceeding the 3% goal in 28 of the 30 months of measurement (January 2012 to July 2014).
 - Specific Actions that made this possible include reviewing policies and rules related to manual payments with providers and clients in order to ensure they facilitated few manual claims, regularly communicating with providers through site visits, telephone calls, and emails and as such, to rapidly communicate any issues related to manual payments, improved internal data and tracking, amongst others.
- *Children in the Colorado Child Care Assistance Program (CCCAP), Under the Age of Five, in Top Tier Quality Rated Facilities:* An in-depth analysis of data identified two key factors that played a role in the increase in performance from August 2013 to March 2014. The first is that a number of facilities increased their quality rating. The second was an increased number of children under five who utilized CCCAP at a particular facility.

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 Facility Complaints \(Severity 1-3\)](#)

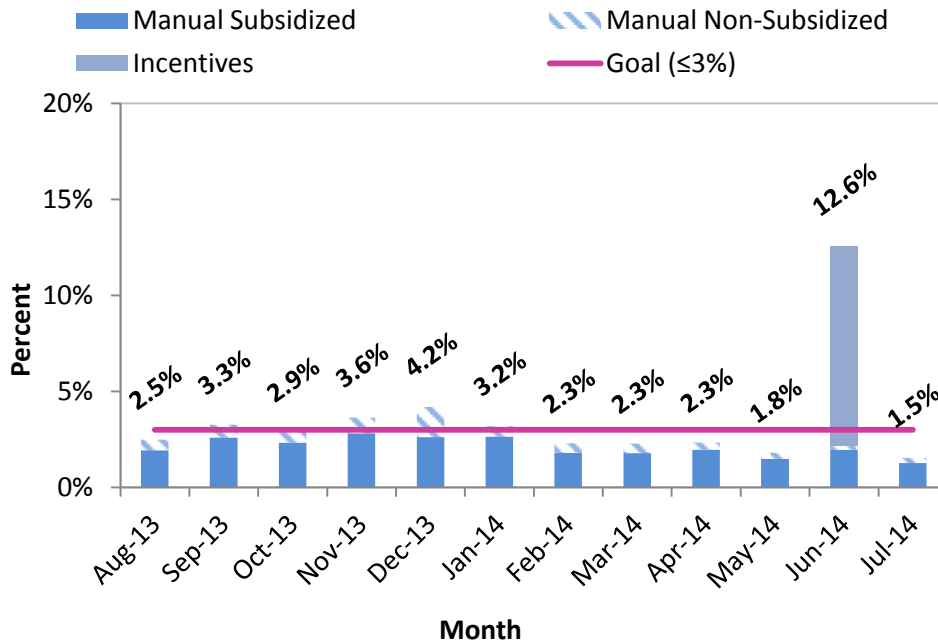
Early Care and Learning (ECL)

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 in a given month
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: \$6,684,142.97

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 to the 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 declined in June 2014 due to payment of bonuses to providers by a few counties. These bonuses accounted for 10.4% of the total 12.6% of manual payments in June 2014. When removed, performance for June 2014 is 2.2%, exceeding the 3% goal. Performance in both May and July 2014 was the best to date.

Notes: The increase in manual payments in June 2014 was due to bonuses paid to providers at the end of the State Fiscal year for unspent funds.

Early Care and Learning (ECL)

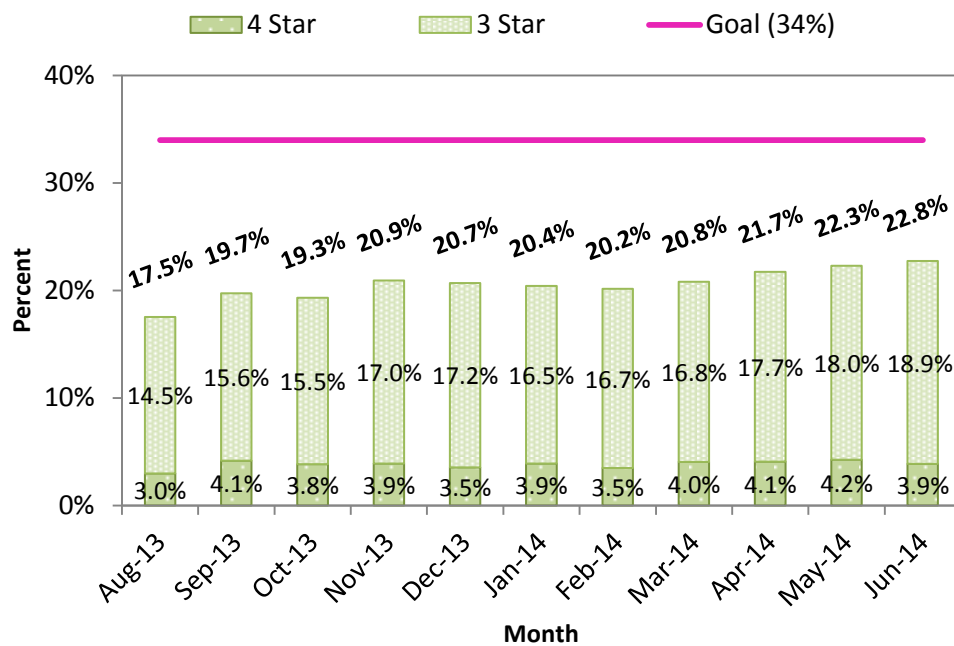
Measure: **Children in the Colorado Child Care Assistance Program (CCCAP), under the age of five, in top tier quality rated facilities**

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 facility at least once in the given month; Average monthly denominator: 9,679

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 improved slightly over the last quarter, going from 21.7% in April 2014 to 22.8% in June 2014. The 34% goal was not achieved.

Notes: This measure was added in C-Stat, effective December 2013, and is intended to measure whether access to quality childcare for children under five years old has increased for Colorado's highest risk/highest need children and families, a primary objective of the Race to the Top – Early Learning Challenge Grant.

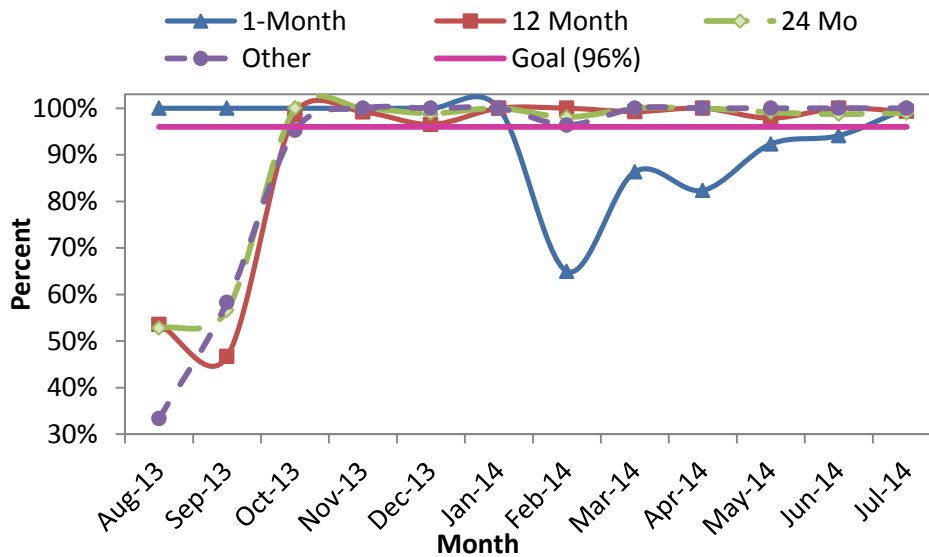
Early Care and Learning (ECL)

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: ; 12-Month: ; 24-Month: ; Other: ; Total:

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: **↑96%**



Trend: Performance for One-Month inspections improved in the past quarter, going from 92.3% in May 2014 to 100% in July 2014. Performance for the remaining inspection categories remains relatively stable and exceeds the 96% goal.

Early Care and Learning (ECL)

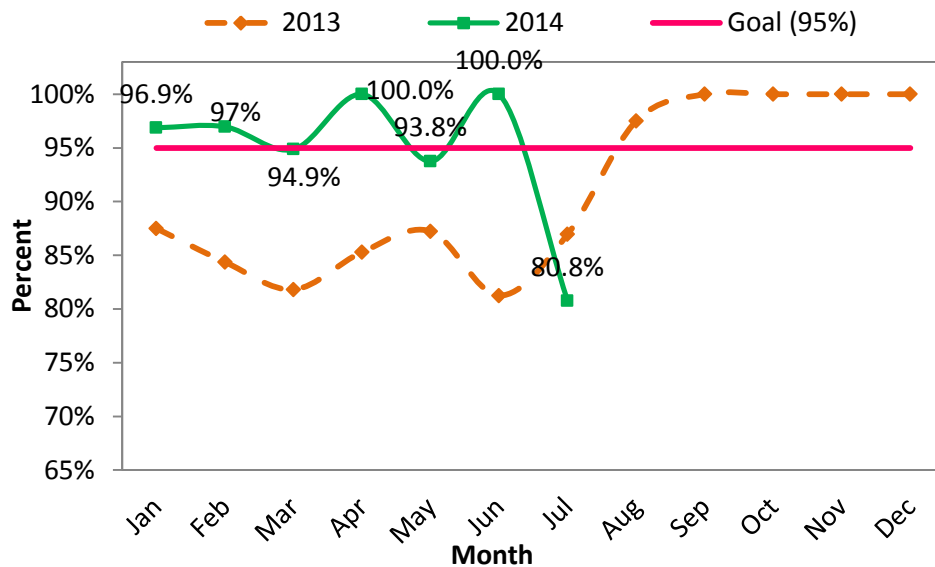
Measure: **Timely response to serious child care center complaints (severity 1-3)**

How it is measured: *Numerator:* Number of serious child care facility complaints (severity 1-3) completed within the required corresponding timeframes

Denominator: Total number of serious child care facility complaint visits required in a given month (severity 1-3); Average monthly denominator:

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 declined in the most recent quarter going from 93.8% in May 2014 to 80.8% in July 2014. The 95% was not achieved in May (93.8%) or in July (80.8%). July 2014 was the worst performance to date.

Notes: The Severity 2 complaints require a response within 0-7 business days; the Severity 3 complaints require a response within 0-17 business days.

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: Mary Martin

Executive Summary

- *Timely Services for Infants and Toddlers Eligible for Early Intervention Services:* Early Intervention completed an exception analysis of timely services to test the hypothesis that Community Center Boards (CCBs) located in relatively close proximity to each other may compete for contract providers, and, in turn, impact the timeliness of services. Data from January 2013 through April 2014 revealed no apparent relationship between contractor pay and timely service statewide. Stated differently, the analysis revealed that CCBs that pay higher rates for contract providers do not have more timely services.
- *Additional CFS Program Measures:* Early Intervention is currently the only CFS program tracking outcomes in C-Stat, however, there is an active effort to develop a plan to create measures for the remaining CFS programs. Each plan will include: 1. Program Goals, 2. Funding, 3. Proposed Measurement, 4. Necessary Contract or Purchase Order Revisions, and 5. Implementation Timelines and Responsibilities.

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 \(Federal Measure\)](#)
- [Early Intervention Participants who Substantially Increase their Use of Knowledge and Skills \(Federal Measure\)](#)
- [Early Intervention Participants who Substantially Increase their Use of Appropriate Behaviors to Meet their Needs \(Federal Measure\)](#)



Community and Family Supports (CFS)

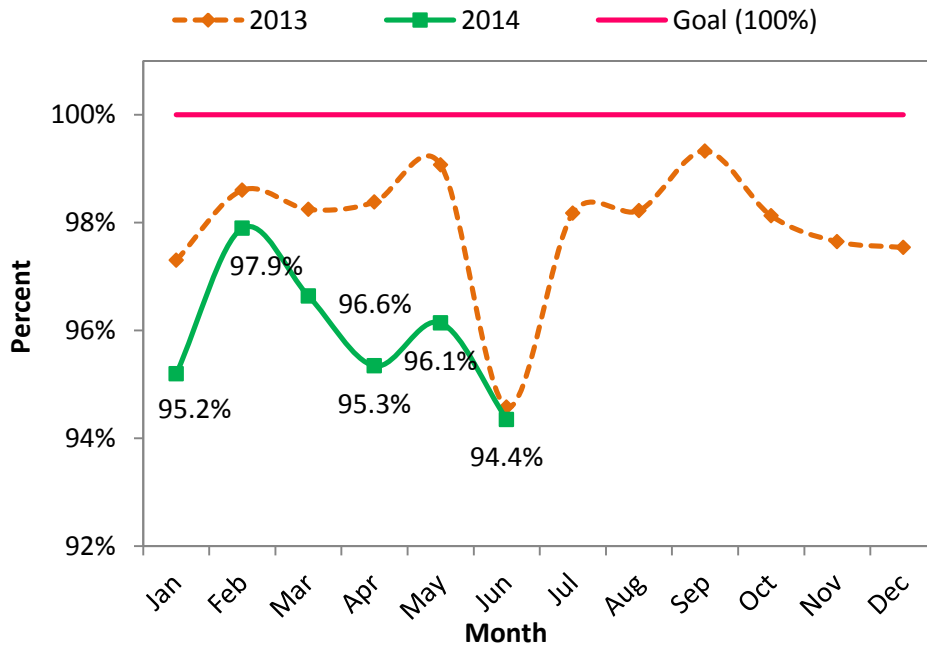
Measure: **Timely services for infants and toddlers eligible for Early Intervention (Federal Measure)**

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:

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 between April and June 2014 going from 95.3% to 94.4% and is below performance from the previous calendar year. The 100% goal was not achieved.





Community and Family Supports (CFS)

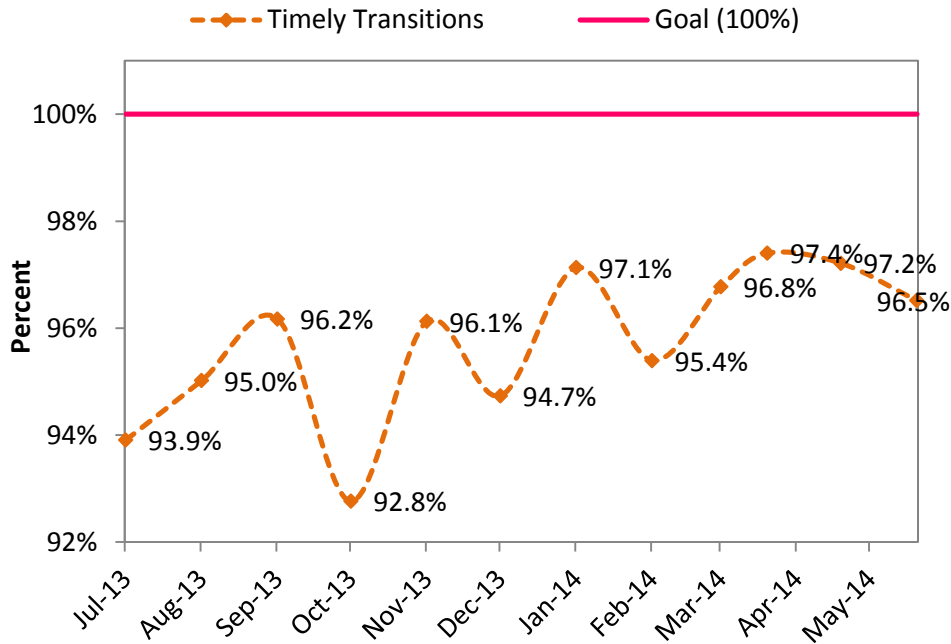
Measure: **Timely transitions for infants and toddlers exiting Early Intervention (Federal Measure)**

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:

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

Goal: **↑100%**



Trend: Performance declined between March and May 2014 going from 97.4% to 96.5%; the 100% goal was not achieved.

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.





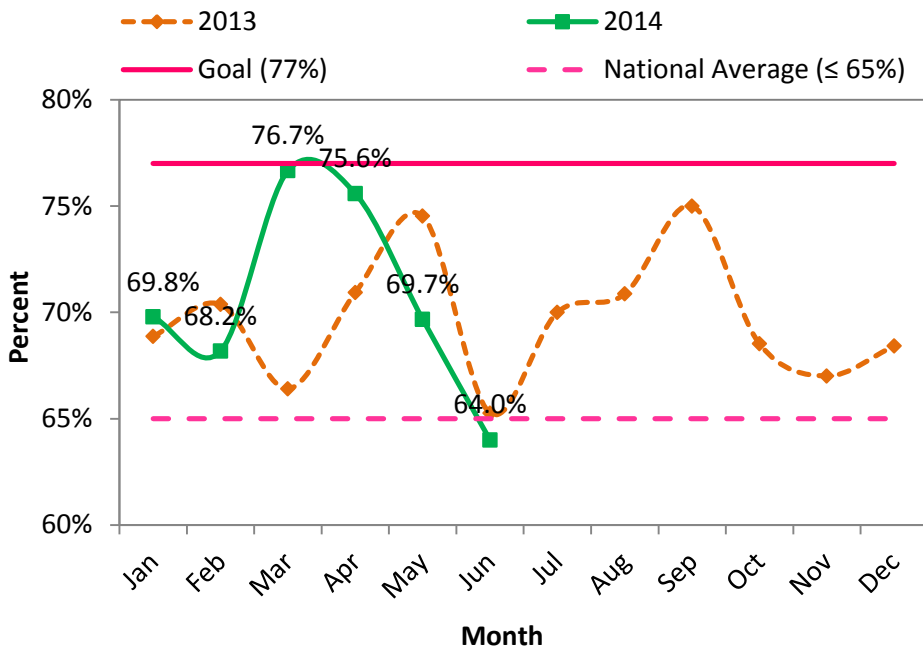
Community and Family Supports (CFS)

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: 125

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 between April and June 2014 going from 75.6% to 64%; the 77% goal was not achieved.

Notes: Social Emotional Functioning is defined as a child’s ability to demonstrate the following age-appropriate behaviors: build and maintain relationships with children and adults; begin to control his or her emotions; understand and follow rules; and communicate wants and needs effectively.



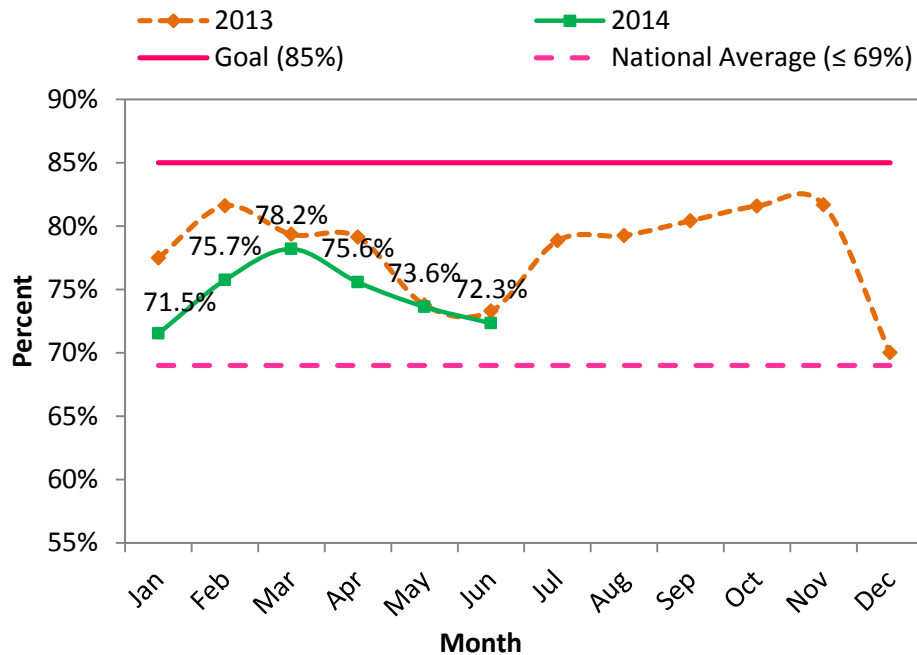
Community and Family Supports (CFS)

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: 188

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

Goal: **↑85%**



Trend: Performance declined slightly between April and June 2014 going from 75.6% to 72.3%; the 85% goal was not achieved.

Notes: Use of knowledge and skills is defined as a child’s ability to demonstrate the following age-appropriate behaviors: engage in thinking, reasoning, remembering and problem solving; show an eagerness for learning; explore his or her environment and engage in daily learning opportunities; show imagination and creativity in play; and understand and communicate thoughts and ideas.





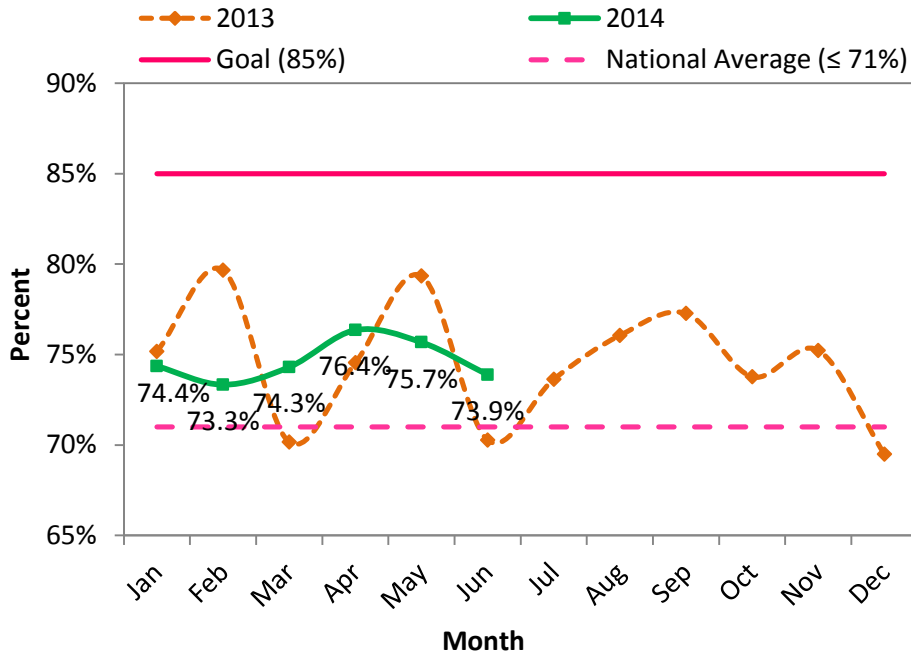
Community and Family Supports (CFS)

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: 151

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

Goal: **↑85%**



Trend: Performance declined slightly between April and June 2014 going from 76.4% to 73.9%; the 85% goal was not achieved.

Notes: Use of Appropriate Behaviors to Meet Needs defined as a child’s ability to demonstrate the following age-appropriate behaviors: build and maintain relationships with children and adults; begin to control his or her emotions; understand and follow rules; and 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 Program (CRSP), Employment and Benefits Division (EBD) (Colorado Works/Temporary Assistance for Needy Families (TANF) and Adult Financial Services), and Food and Energy Assistance (Food Assistance/Supplemental Nutritional Assistance Program (SNAP), the Low-Income Energy Assistance Program (LEAP), and Food Distribution Programs).

Director: Levetta Love

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.

Acting Director: Larry Desbian

Executive Summary

- The Division is focusing efforts on improving the performance in *Percentage of Current Support Collected* of four highlighted counties (Denver, El Paso, Mesa and Pueblo). The Division has set goals in performance for each of these counties, as written in an agreed upon plan. The goals have been calculated to include the actual number of cases and dollars needing to be collected in order to meet the standard. The Division is using best practices from counties within Colorado in tandem with additional face to face support to help counties meet the goals.
- Additionally the Division is implementing a comprehensive update to information technology systems which will build on the Flash Card tool and updates to CSeTools. Beginning early 2015 Division staff will be able to drill down to individual workers to see what, if any actions, have been taken on a case. This will allow for directed intervention and increased value when making contact with county Child Support Services program managers.
- The Division has added reference slides to the monthly C-Stat deck covering the Percent of Zero payers, or those who did not make a payment in the last 30 days, and Percent of Intergovernmental Support Paid. These were identified as areas that serve as leading indicators that may contribute to better performance on *Percent of Child Support Collect*.

Measures

- [Percent of Child Support Collected](#)
- [Percent of Cases with an Arrears Payments](#)

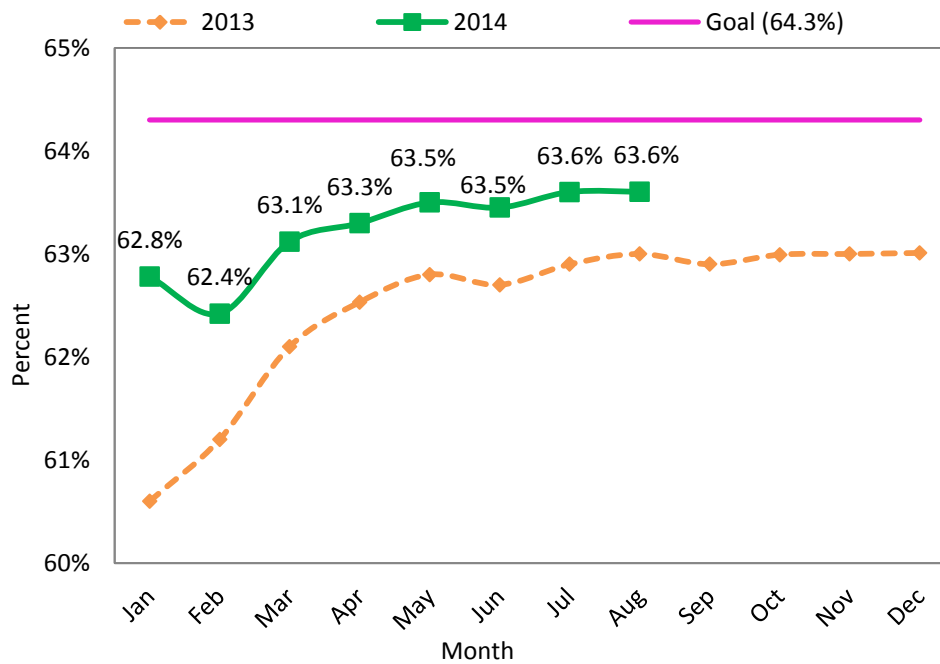
Child Support Services (CSS)

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

How it is measured: *Numerator:* Cumulative current support dollars collected year to date
Denominator: Cumulative current support dollars owed year to date; Cumulative denominator for monthly support owed through August 2014: \$164.2.m

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

Goal: **↑64.3%**



Trend: Performance is flattening, but is consistently outperforming 2013.



Child Support Services (CSS)

Measure: **Percent of cases with an arrears payment**

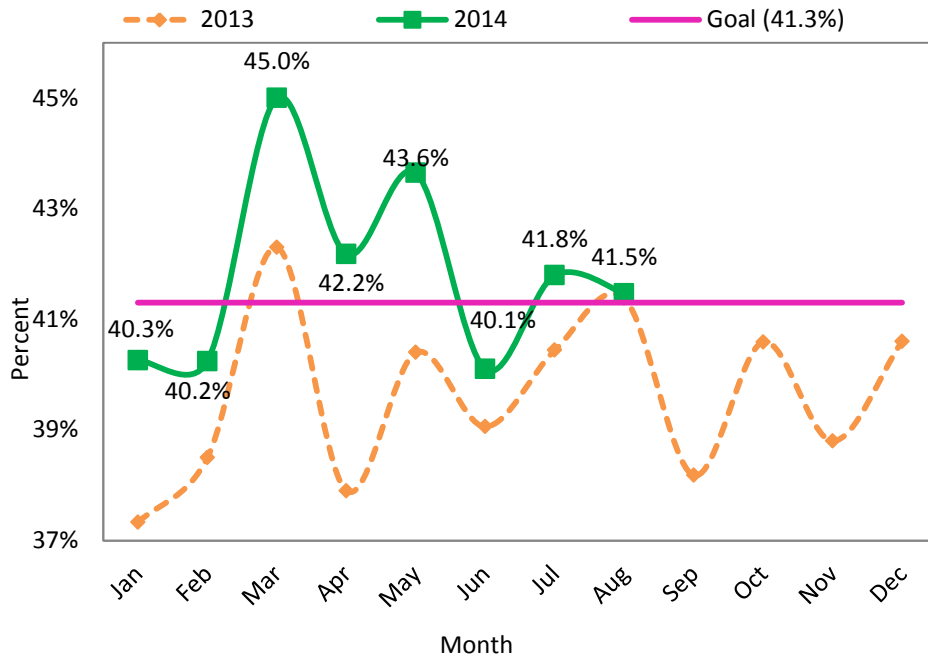
How it is measured: *Numerator:* Cases where an arrears balance was owed and at least some portion of that obligation was paid in the month

Denominator: Number of cases with arrears owed in the month;

Average monthly denominator: 108,127

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

Goal: **↑41.3%**



Trend: Performance has been above the goal nearly three times as many months this year, compared to 2013.

Colorado Refugee Services Program

Summary

Description

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

Acting Director: Kit Taintor

Executive Summary

- *Entered Employment* has reached the highest performance to date at 79% in July 2014. Program staff attributes this, in part, to changes in their management model, focusing more on relationships with employers and skill development for clients. For instance Job Developer positions have been created in each of the three large volunteer agencies, whose efforts focus on ensuring potential employers are aware of the benefits of hiring from within the refugee community.
- The Program is finding *90 Day Retention* to be very dynamic and complex. Current theories from CRSP staff as to why the measure isn't seeing sustained growth include refugee clients being more proactive in searching for positions that better fit their situation and those individuals, who in past years would have seen a delay in job placement due to various barriers, are entering the workforce and potentially seeing difficulty in maintaining positions. It should be noted that the measure is effectively a census asking if a client is employed on the 90th day following their initial placement. If clients are indeed being more active in seeking employment within the first 3 months, those who may effectively be employed that entire period, but, not on the single day being counted, would be excluded from results.
- Performance for "*Improved Placement, Wage Increase, and Employment Sector*" fluctuates and may be counter-intuitive. One explanation is that the competing interests and family structures typical of this client population may result in decisions that are not purely economic. For example, "Improved Placements" is defined as a placement where a client gains higher wages, additional hours, or healthcare benefits. While this may improve the client's employment situation from a programmatic perspective, the client may favor a more holistic improvement in a job situation where fewer hours or less pay is prioritized to allow the client to take care of a child or elderly family member.

Measures

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



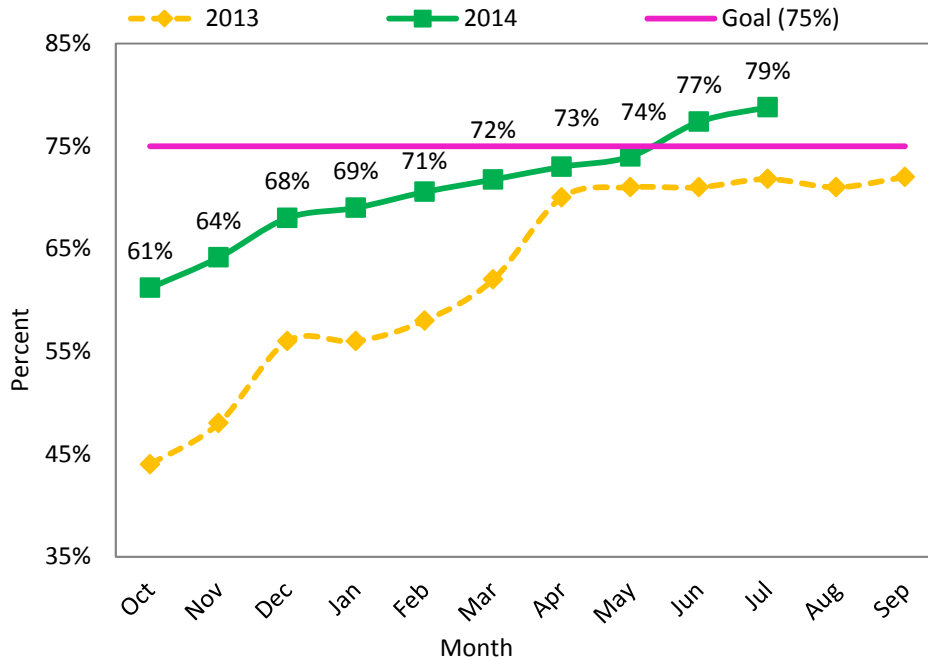
Colorado Refugee Services Program (CRSP)

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: 1249

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

Goal: **↑75%**



Trend: Performance has exceeded the goal twice in this quarter and reached the three highest months ever.



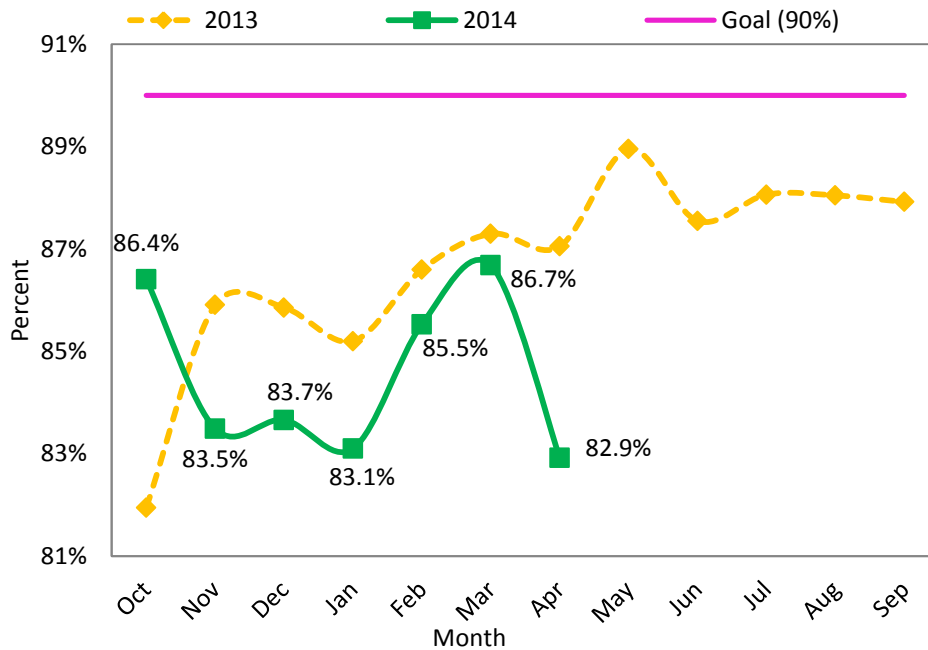
Colorado Refugee Services Program (CRSP)

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 year to date;
Cumulative monthly denominator: 984

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

Goal: **↑90%**



Trend: Performance has varied wildly this quarter, having both the highest and lowest results of the year in consecutive months.

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



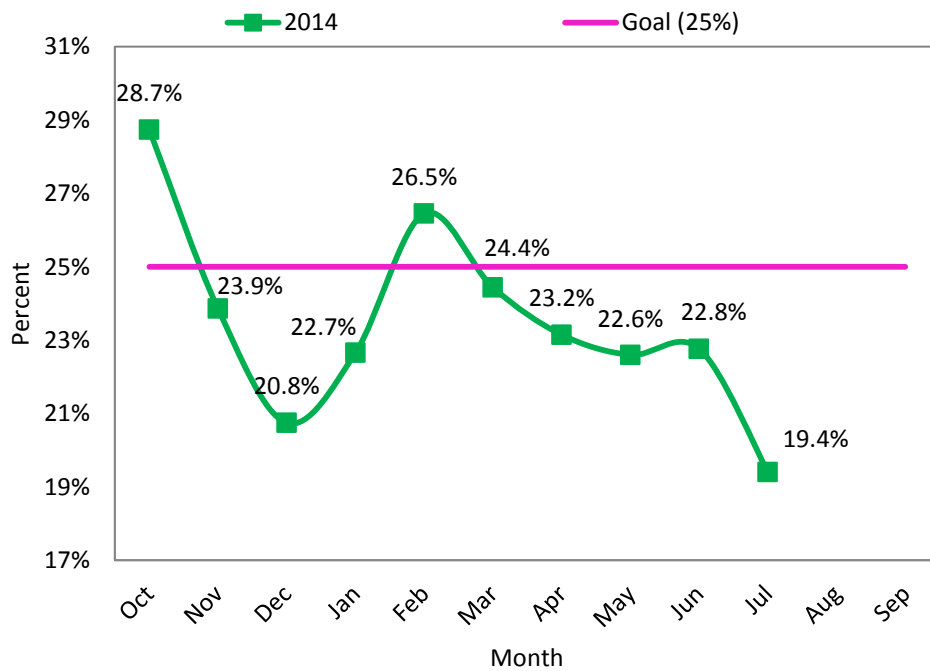
Colorado Refugee Services Program (CRSP)

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: 984

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

Goal: **↑25%***



Trend: A downward trend has emerged over the past two quarters, ending with July’s performance being the lowest of the year.

Notes: * The goal was increased to 25% during the second quarter of 2014



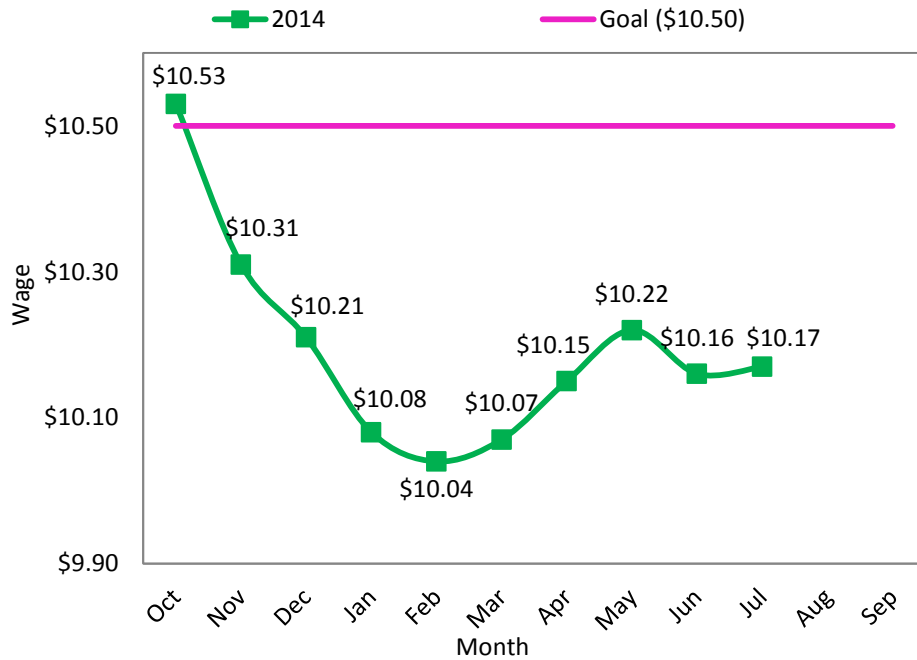
Colorado Refugee Services Program (CRSP)

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: \$10.17

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: Hourly wages have been relatively flat in the third quarter, varying by only \$0.05.



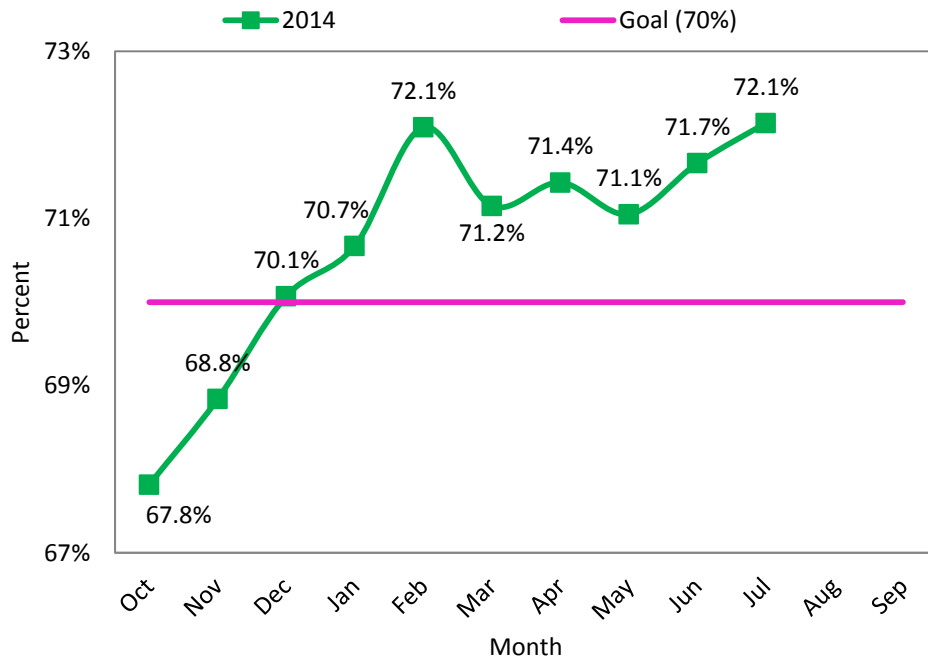
Colorado Refugee Services Program (CRSP)

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 in the current Federal Fiscal Year; Cumulative monthly denominator:1218

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 that will be more likely to lead to long term employment and economic security.

Goal: **↑70%**



Trend: Performance has steadily improved throughout the quarter, ending in July with the highest all year by a slim margin over February.

Employment and Benefits Division

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), has programs that encompass several types of assistance, which exist to provide financial support for low-income or disabled adults and includes the following programs: Aid to the Needy and 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.

Acting Director: Katie Griego

Executive Summary

- EBD is driving performance for timely processing of new applications in Adult Financial and Colorado Works to consistently exceed the goal (Colorado Works New Applications has been moved to the dashboard as it has exceeded the goal for greater than 12 months.)
- Performance for Redetermination measures has not met the goal in either program area. *Timeliness of Redetermination Colorado Works Applications* has continued to see widely varying results, much the same as was seen in 2013.
 - At the same time, Colorado Works Redetermination Applications are three times as large as the same periods in 2013. Division staff believes this is, in part, due to the change from a 12 month certification period to a 6 month period. The change was made to better align with other eligibility programs (i.e., Food Assistance), and to remove the Monthly Status Reports (MSRs), which clients were required to complete each and every month they were participating in the program. The MSRs were eliminated to reduce burdens on clients, who were required to prove ongoing eligibility while likely having no changes to their circumstances, and CW technicians who had to process these documents.
 - While Division staff report the change has in fact reduced the number of documents to process; it has dramatically increased the number of full CW redetermination applications processed. For instance, in August of 2013 nearly 530 redeterminations were processed. In August 2014, that number was just over 1900. County partners have indicated that while the increased number of applications presents logistical challenges, fewer clients are leaving the program due to challenges meeting the administrative requirements.

Employment and Benefits Division

Summary, Continued

- Additionally as the Business Process Reengineering (BPR) efforts have been underway more information is being gathered on how county processes are continuing to affect performance. For instance it is being reported by the consultant implementing BPR that while the bulk of work is in redeterminations and ongoing work such as change forms and updated client information, lobby traffic, because it is so visible, drives supervisors to pull staff away from redeterminations, changes, and backlog. This helps to maintain new application timeliness, but neglects to put resources toward the largest percentage of work counties are faced with each day.

Measures

- [Timeliness of New Adult Financial Applications](#)
- [Timeliness of Redetermination Adult Financial \(RRR\) Applications](#)
- [Adult Financial Payment Accuracy Rate](#)
- [New Colorado Works Applications Processed in 7 Days or Less](#)
- [Timeliness of Redetermination \(RRR\) Colorado Works Applications](#)
- [Colorado Works Payment Accuracy Rate](#)
- [Entered Employment](#)



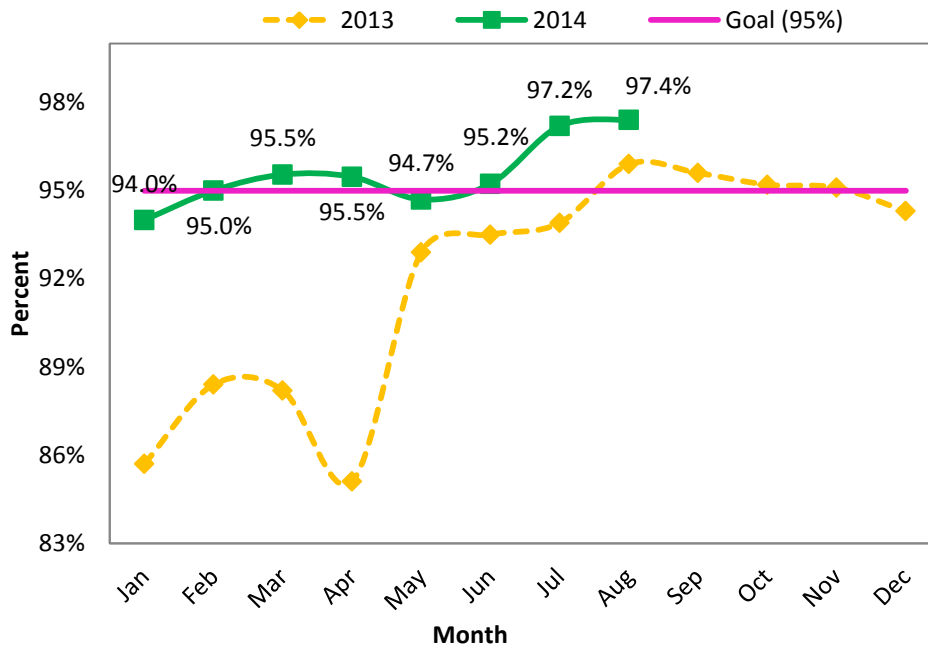
Employment and Benefits Division: Adult Financial

Measure: **Timeliness of new adult financial applications**

How it is measured: *Numerator:* Number of new Adult Financial applications processed timely
Denominator: Number of new Adult Financial applications processed in the month;
Average monthly denominator: 2,665

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

Goal: **↑95%**



Trend: Performance has climbed significantly above the goal, with the two highest results ever in the last two months of the third quarter.



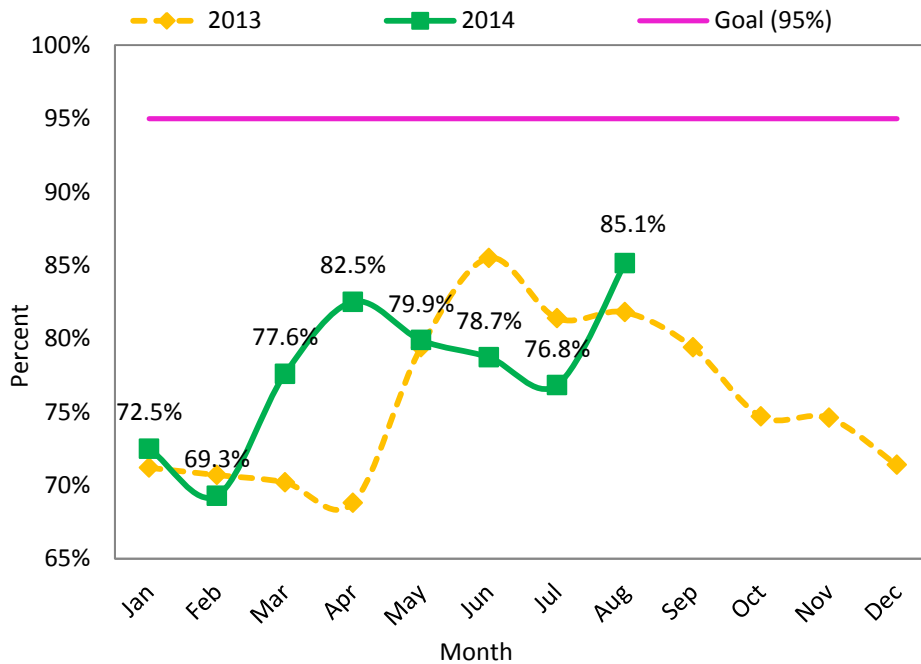
Employment and Benefits Division: Adult Financial

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

How it is measured: *Numerator:* Number of redetermination Adult Financial applications processed timely
Denominator: Number of redetermination Adult Financial applications processed in the month; Average monthly denominator: 1,367

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

Goal: **↑95%**



Trend: A large rebound in August brought performance out of a downward trend up to the highest result ever.



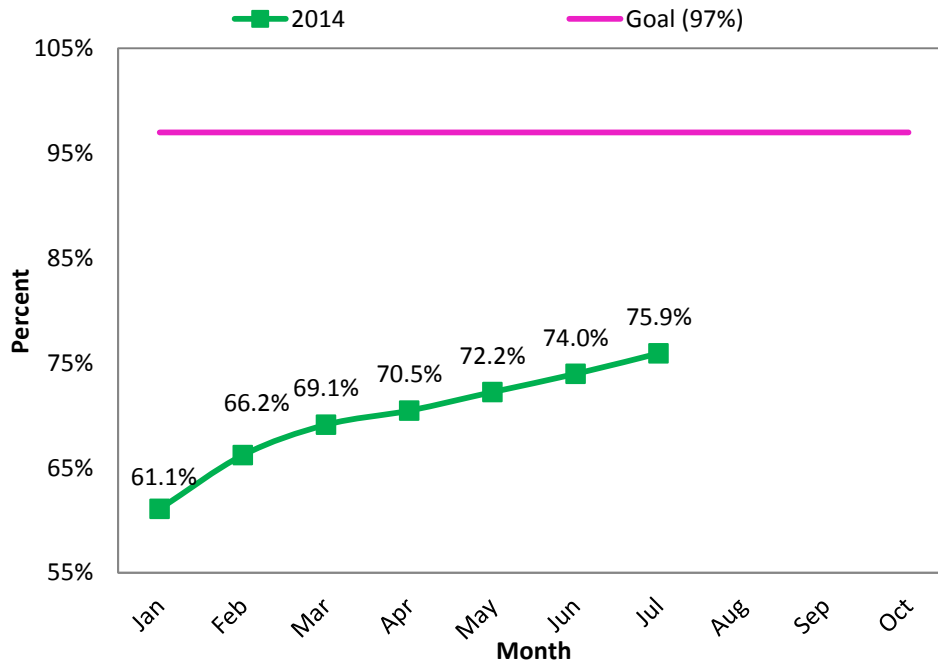
Employment and Benefits Division: Adult Financial

Measure: **Adult financial payment accuracy rate**

How it is measured: *Numerator:* Cumulative amount of accurately authorized dollars in the sample
Denominator: Cumulative amount of authorized dollars in the sample; Cumulative amount of authorized dollars in the sample: \$35,715

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

Goal: **↑97%**



Trend: Performance has steadily increased since C-Stat measurement began in January, increasing by nearly 15 percentage points.



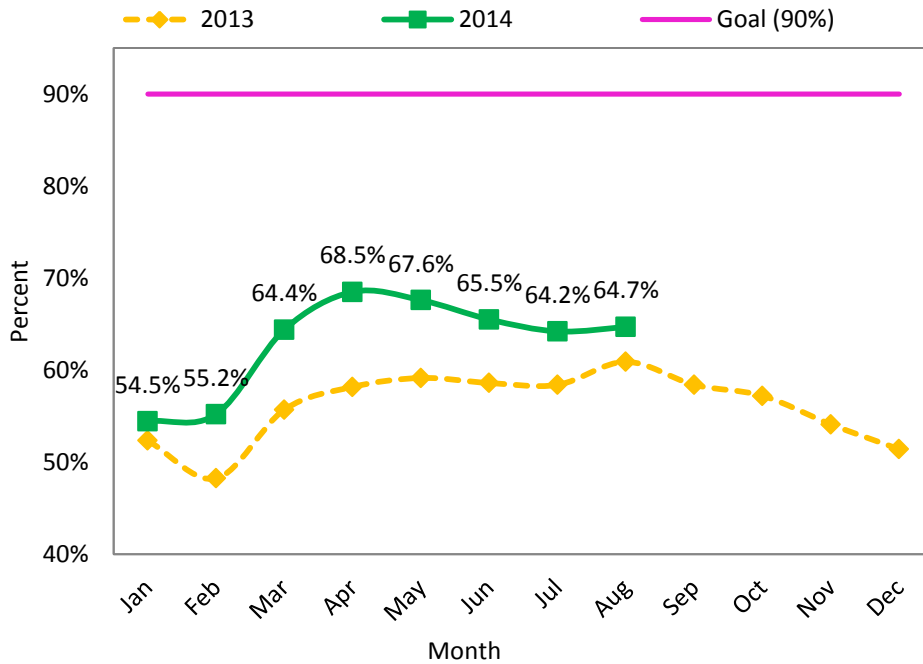
Employment and Benefits Division: Colorado Works

Measure: **Timeliness of new Colorado Works applications processed in 7 days or less**

How it is measured: *Numerator:* Number of new Colorado Works applications processed in 7 days or less
Denominator: Number of new Colorado Works applications processed in 7 days or less in the month; Average monthly denominator: 3,283

Why this matters: Processing new applications efficiently ensures eligible Coloradans have access, to needed cash assistance, case management, and employment services that increase their economic security.

Goal: **↑90%**



Trend: Performance continues to exceed the previous year’s result, remaining above 64% for the entire quarter.



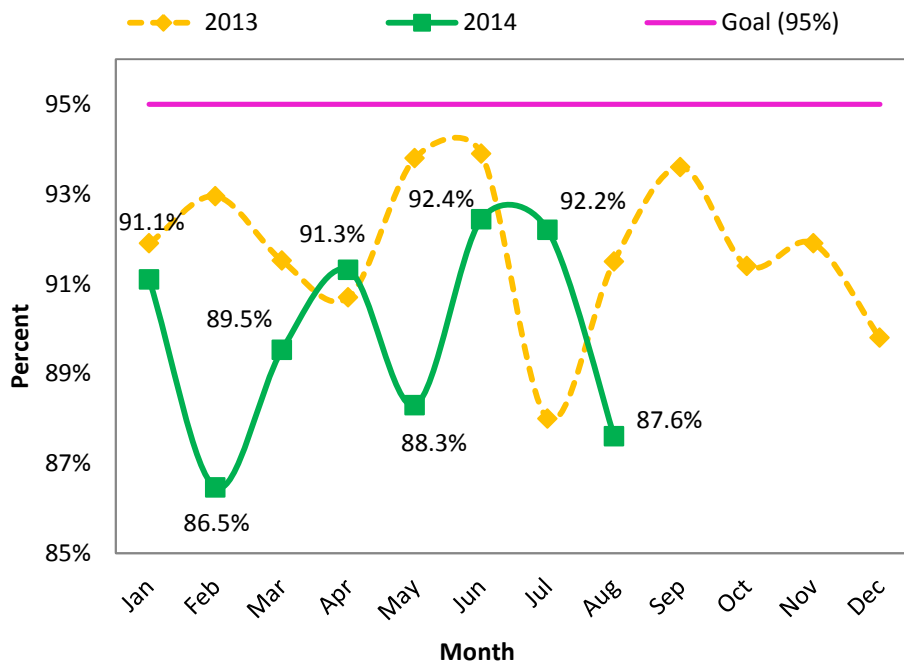
Employment and Benefits Division: Colorado Works

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

How it is measured: *Numerator:* Number of redetermination (RRR) Colorado Works applications processed timely
Denominator: Number of redetermination (RRR) Colorado Works applications processed timely in the month; Average monthly denominator: 1,880

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

Goal: **↑95%**



Trend: Performance has varied throughout the year ranging from a high of 92.4% to a low of 86.5%.



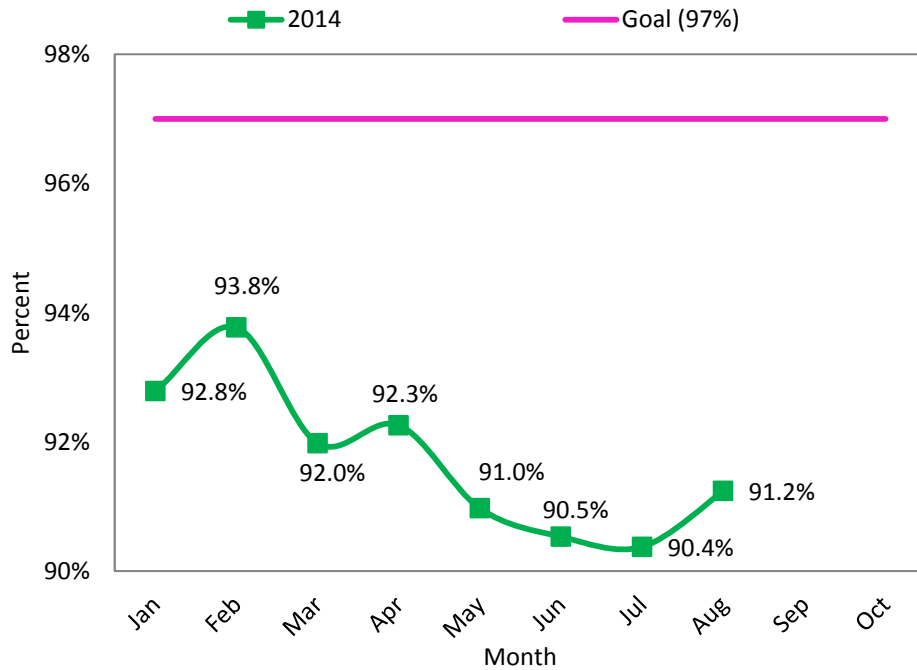
Employment and Benefits Division: Colorado Works

Measure: **Colorado Works payment accuracy rate**

How it is measured: *Numerator:* Cumulative amount of accurately authorized dollars in the sample
Denominator: Cumulative amount of authorized dollars in the sample; Cumulative amount of authorized dollars in the sample: \$40,511

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

Goal: **↑97%**



Trend: Performance steadily declined since C-Stat measurement over most course of the year so far. Performance did, however, rebound from the lowest point all year, by 0.8% to end the quarter.



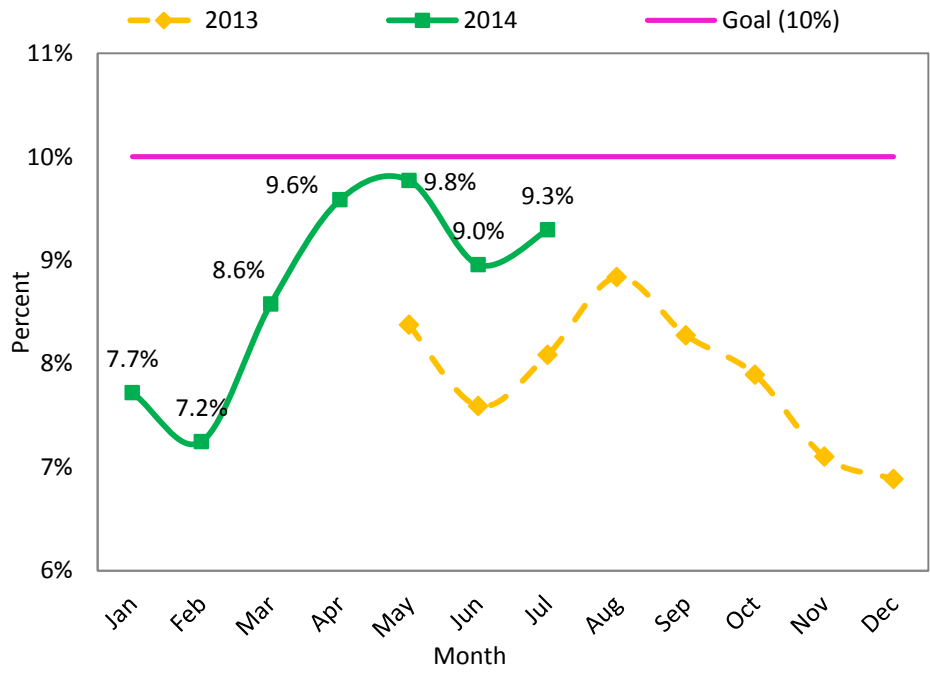
Employment and Benefits Division: Colorado Works

Measure: **Entered employment**

How it is measured: *Numerator:* Number of individuals that have entered employment for the month
Denominator: Total unique individuals needing employment enrolled in Workforce Development; Average number of individuals enrolled in Workforce Development needing employment: 11,280

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

Goal: **↑10%**



Trend: Performance has remained within 1% of the goal each of the last four months.

Food and Energy Assistance

Summary

Description

Food Assistance (FA) 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: Lena Harris-Wilson

Executive Summary

- County performance, as tracked in the C-Stat meetings, demonstrates that across each FA measure there is generally a group of five to six ten-large counties that consistently meet the goal (or in measures where no County meets the goal, they may consistently lead the group). The Division is employing business process reengineering (BPR) efforts to set in place high-quality, sustainable, business practices that enhance timely (timely, as defined by the client's needs) and accurate processing of benefit application and redeterminations.
- The Division staff has recognized that training continues to be an area needing attention to enhance performance across FA C-Stat measures. Results found and reported in C-Stat and in other accuracy focused meetings, reveal that training across the state, and often within a county may vary significantly. Division leadership has identified Supervisory training as an area to direct efforts toward, and have begun to implement plans to seek out supervisors needing additional training and providing that for them.

Measures

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



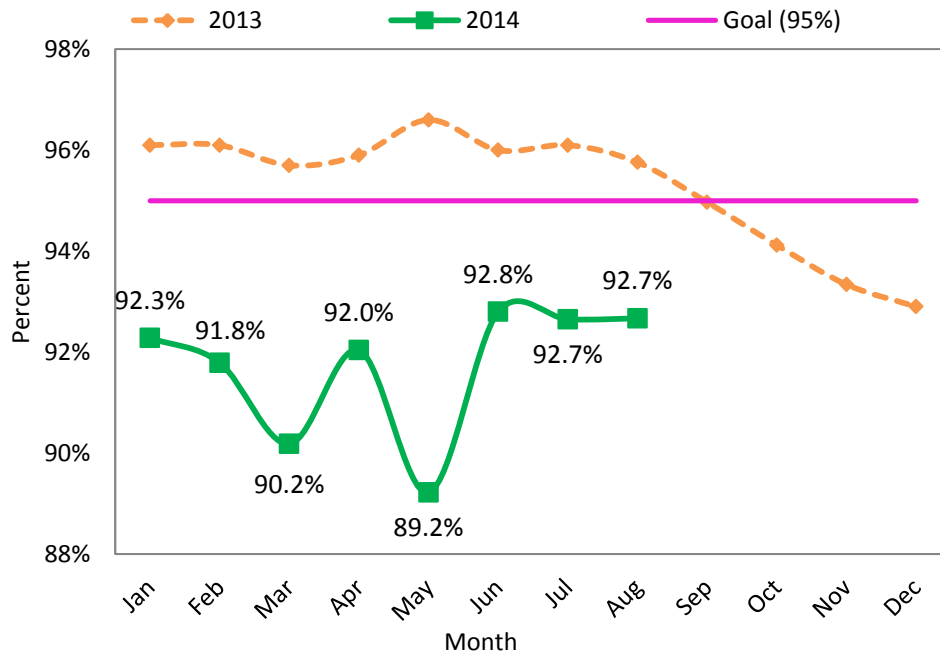
Food and Energy Assistance: Food Assistance (FA)

Measure: **Timeliness of new Food Assistance applications**

How it is measured: *Numerator:* Number of new Food Assistance applications processed timely
Denominator: Number of new Food Assistance applications processed timely in the month;
Average monthly denominator: 23,663

Why this matters: Processing new applications efficiently ensures eligible Coloradans have access to needed financial assistance for food, ultimately reducing the likelihood of Coloradans going hungry.

Goal: **↑90%**



Trend: Performance has been steady this quarter, remaining within 3% of the goal.



Food and Energy Assistance: Food Assistance (FA)

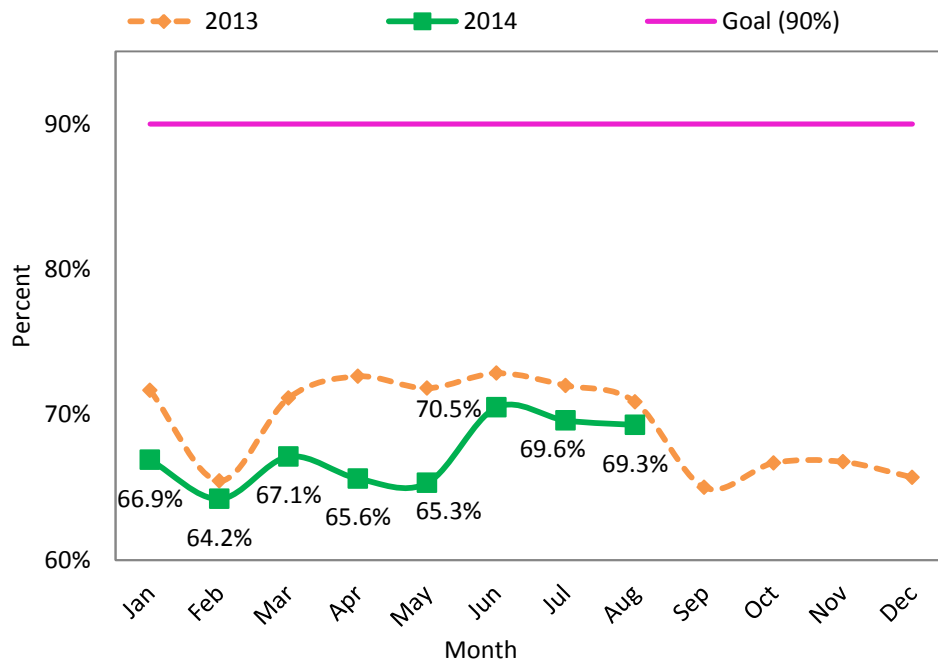
Measure: **New Food Assistance applications processed in 7 days or less**

How it is measured: *Numerator:* Number of new and expedited Food Assistance applications processed in 7 days or less

Denominator: Number of applications processed in the month; Average monthly denominator: 23,663

Why this matters: Processing new and expedited applications efficiently ensures that eligible Coloradans have access to needed financial assistance for food, ultimately reducing the likelihood of Coloradans going hungry.

Goal: **↑90%**



Trend: Performance has plateaued, yet each month this quarter it has been at least 2% higher than in any of the previous 3 quarters.



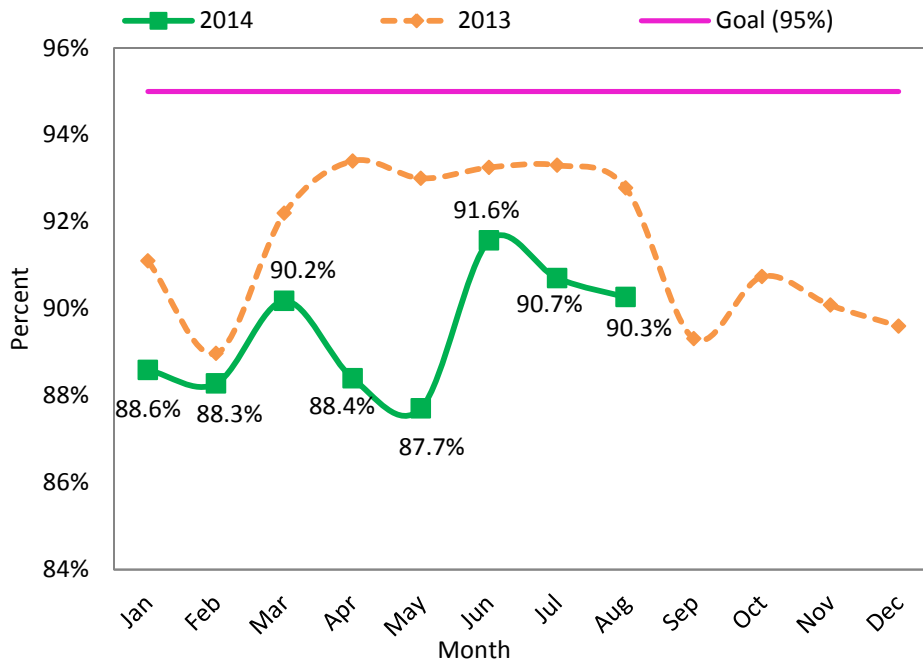
Food and Energy Assistance: Food Assistance (FA)

Measure: **Timeliness of expedited Food Assistance applications**

How it is measured: *Numerator:* Number of expedited Food Assistance applications processed timely
Denominator: Number of expedited Food Assistance applications processed in the month;
Average monthly denominator: 10,364

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

Goal: **↑90%**



Trend: Performance has remained above 90% in each month of the quarter for the first time since summer of 2013.

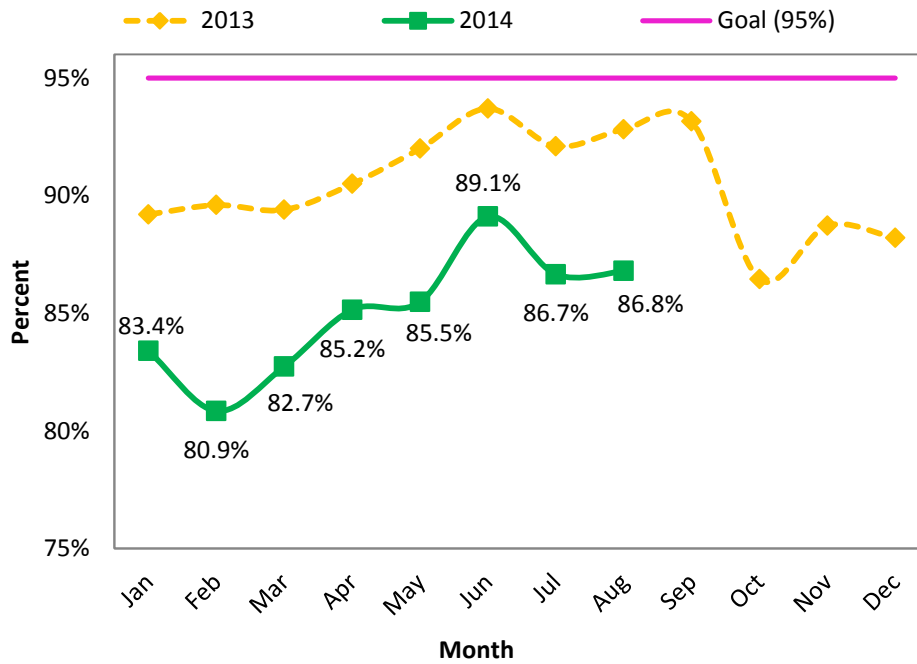
Food and Energy Assistance: Food Assistance (FA)

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

How it is measured: *Numerator:* Number of redetermination (RRR) Food Assistance applications processed timely
Denominator: Number of redetermination (RRR) Food Assistance applications processed in the month; Average monthly denominator: 20,685

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

Goal: **↑95%**



Trend: Performance has seen a sustained positive trend over the past two quarters, ending August nearly 6% above February’s performance.



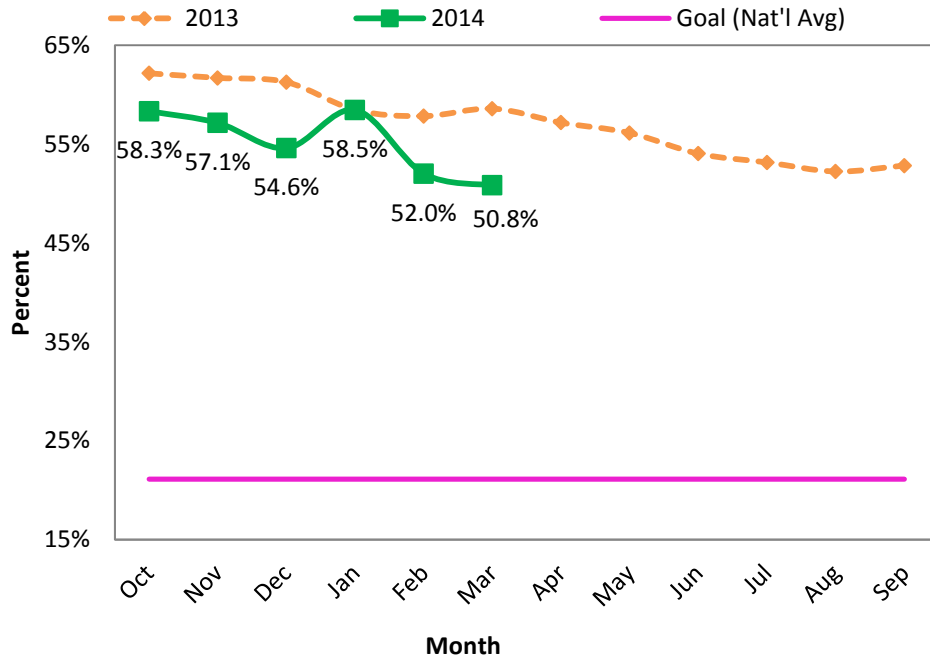
Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance case and procedural error rate**

How it is measured: *Numerator:* Cumulative number of incorrect negative actions sampled through the month
Denominator: Cumulative number of negative actions sampled year to date; Cumulative denominator: 358

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: Despite a worsening of performance in January, the quarter ended at the lowest point in 18 months (lower is better).

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 Quality Assurance Division 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.

This is a Federal Measure compiled by SNAP-Quality Assurance (QA) Staff.





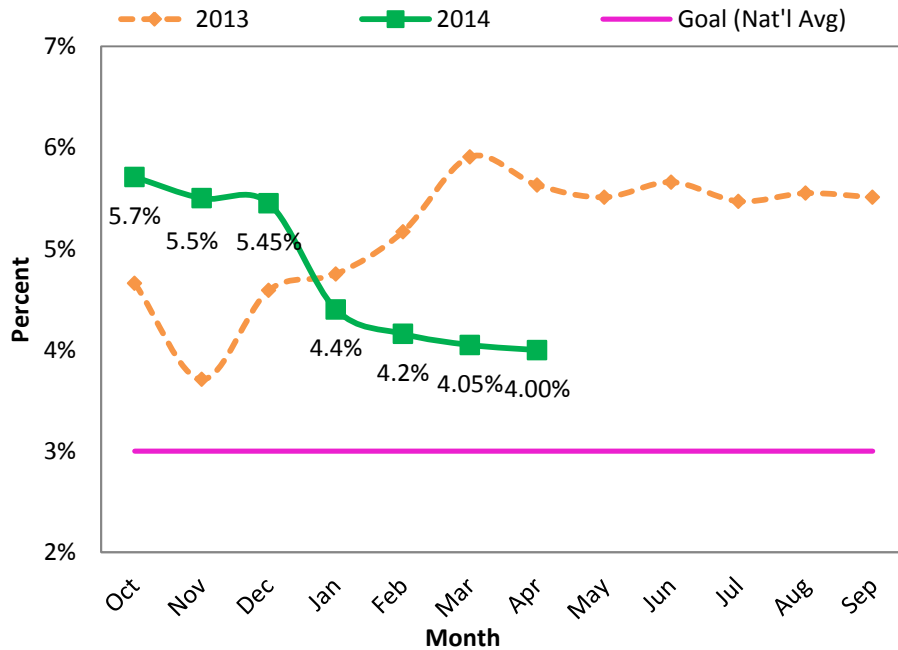
Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance payment error rate**

How it is measured: *Numerator:* Cumulative dollar amount of misauthorized benefits in the sample through the month
Denominator: Cumulative dollar amount of authorized benefits sampled year to date;
Cumulative denominator: \$153,260

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

Goal: **↓**Below national average



Trend: Performance continued a downward trend, ending the quarter within 1% of the goal.