



Summary Report

July – September 2015

Prepared by:
Performance Management



COLORADO
Department of Human Services

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Colorado Department of Human Services

Mission

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

Vision

The people of Colorado are safe, healthy, and 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 people's 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 the Office of Behavioral Health; Children, Youth, and Families; Community Access and Independence; Early Childhood; and Economic Security 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 the Deputy Executive Directors. The Executive Director facilitates the C-Stat meetings, focusing on any of the performance measures and action items.

This past quarter the department underwent an alignment exercise to review all C-Stat measures to determine if they were the most critical measures for the department to focus on. Over the next quarter some new measures will be added and some current measures will be placed on a dashboard. These changes will be reflected in the next quarterly report.

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, 2015. 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 2015 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. The data in this report was accurate at the time of publication. Please note data are subject to change over time.

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)**

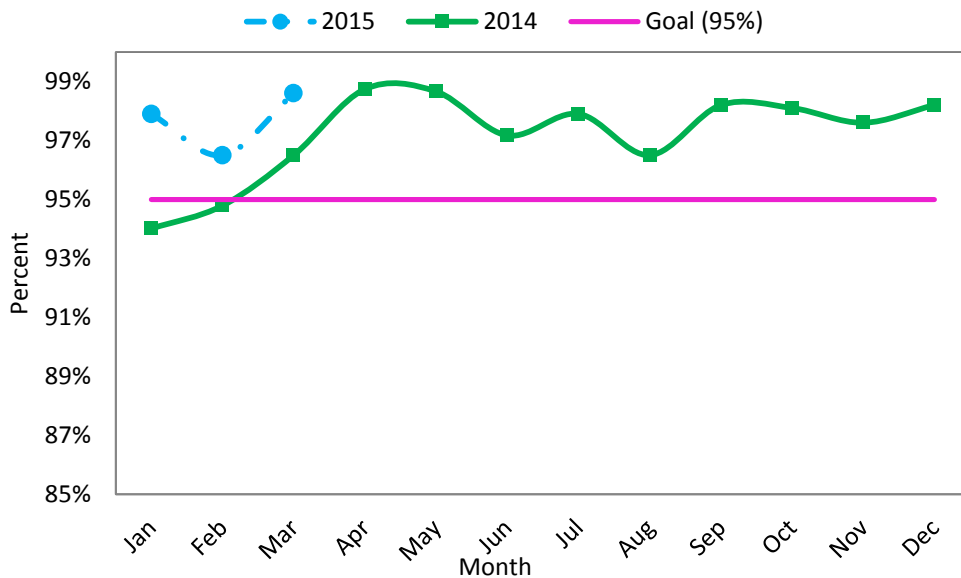
How it is measured: *Numerator:* Describes what is being “counted.”
Denominator: Describes the overall population: Average monthly denominator; average of the last three months’ denominators OR Cumulative denominator; cumulative up to the last month of the reporting period OR Average daily population; 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. Nancy VanDeMark

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

The Office of Behavioral Health recently implemented Colorado Crisis Services throughout the state. Of the many services provided, the two that are regularly reviewed in C-Stat include timeliness and reduction of suicidality for the Crisis Stabilization Units (CSU) and Mobile Units. These two new measures are titled: *Timeliness of Crisis Services* and *Percent of Clients with Reduced Suicidality*. These two measures were added to C-Stat in May 2015 and are reported in the C-Stat Quarterly Report for the first time.

Additional highlights within Community Behavioral Health include:

- *Timeliness of Appointments Offered for Outpatient Substance Use Disorder Treatment*: This measure achieved its highest performance in July 2015, though this measure continues to perform below the goal.
- *Persons Reducing the Use of Substances from Admission to Discharge in Substance Use Disorder Treatment*: This measure improved markedly from the previous quarter, achieving its highest performance in June 2015.

Measures

- [Timeliness of Appointments Offered for 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 Obtained / Maintained Housing while Receiving Mental Health Services](#)
- [Timeliness of Crisis Services](#)
- [Percent of Clients with Reduced Suicidality](#)



Community Behavioral Health (CBH)

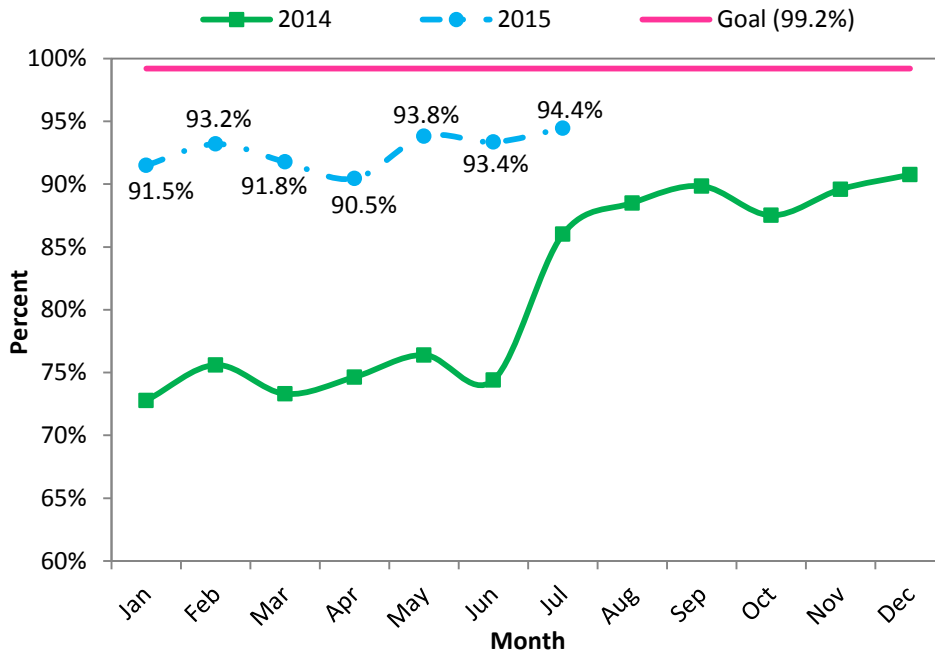
Measure: **Timeliness of appointments offered for outpatient substance use disorder treatment**

How it is measured: *Numerator:* Number of persons offered an appointment for outpatient substance use disorder treatment in less than three days from first contact

Denominator: Number of persons admitted to outpatient substance use disorder treatment; average monthly denominator: 1,111.0

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

Goal: **↑99.2%**



Trend: Performance in the most recent quarter went from 93.8% to 94.4%, demonstrating a 0.6% improvement in three months.

Notes: As of July 2014, performance measures the number of days between a client’s first contact date and the date of first appointment offered.





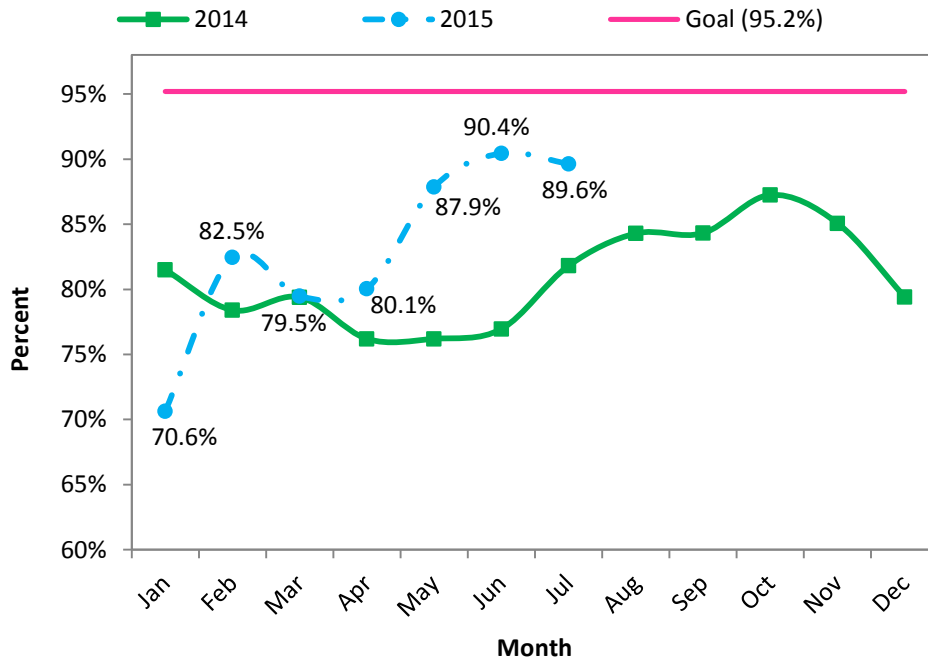
Community Behavioral Health (CBH)

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: 939.0

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: Performance in the most recent quarter went from 87.9% to 89.6%, demonstrating a 1.7% improvement in three months.



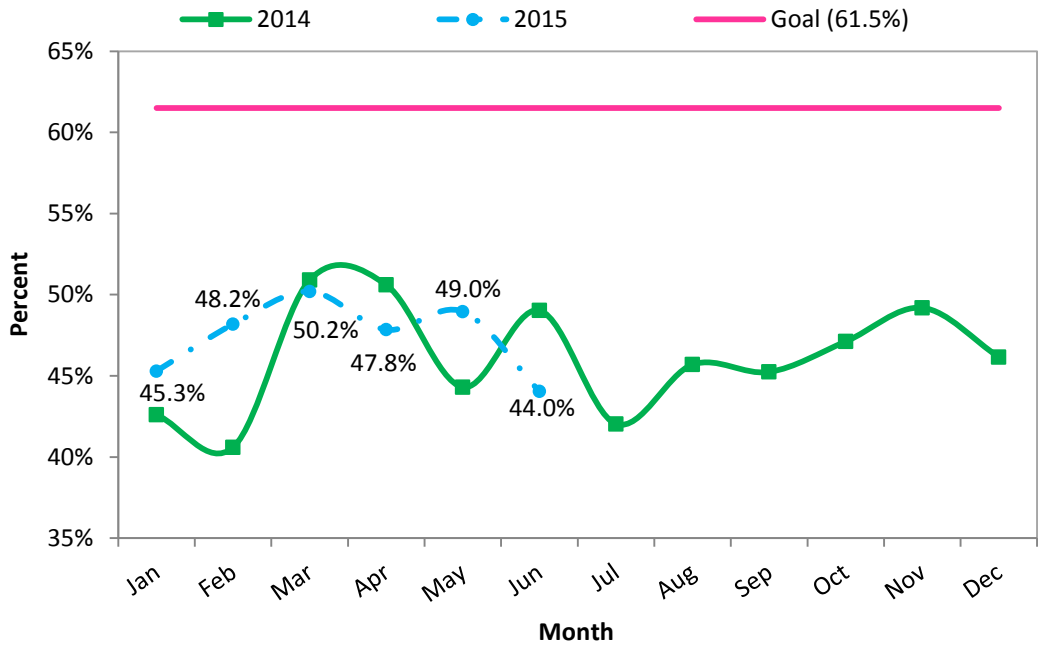
Community Behavioral Health (CBH)

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: 551.7

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

Goal: **↑61.5%**



Trend: Performance in the most recent quarter went from 47.8% to 44.0%, demonstrating a 3.8% decline in three months.

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



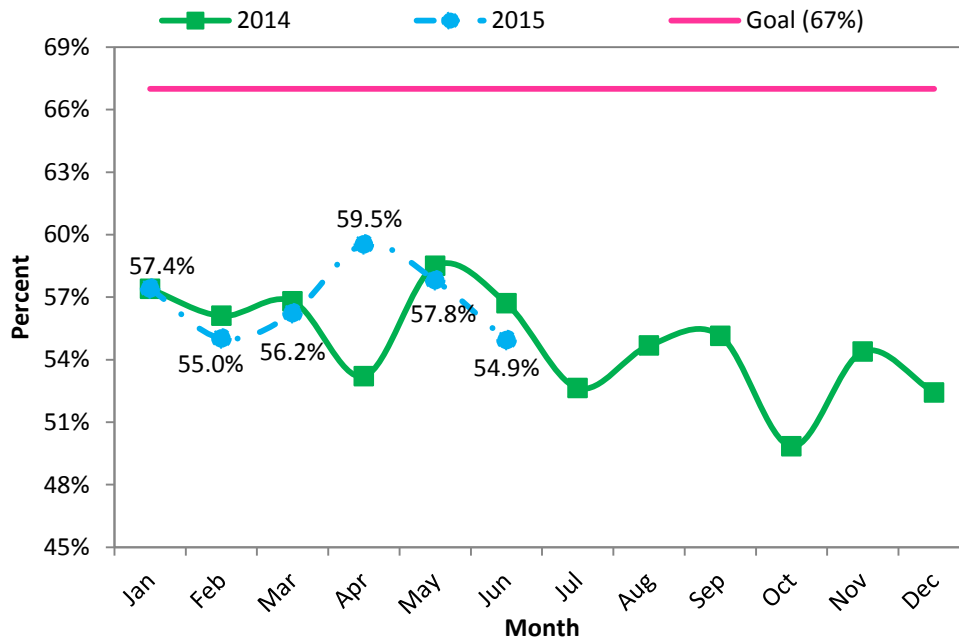
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons with lesser symptom severity at follow-up
Denominator: Number of discharged persons receiving mental health treatment who report significant symptom severity at Time One; average monthly denominator: 1,272.33

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: Performance in the most recent quarter went from 59.5% to 54.9%, demonstrating a 4.6% decline in three months.

Notes: "Time One" can be an admission or update in the Colorado Client Assessment Record (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 or major life event (e.g., a change in housing status).



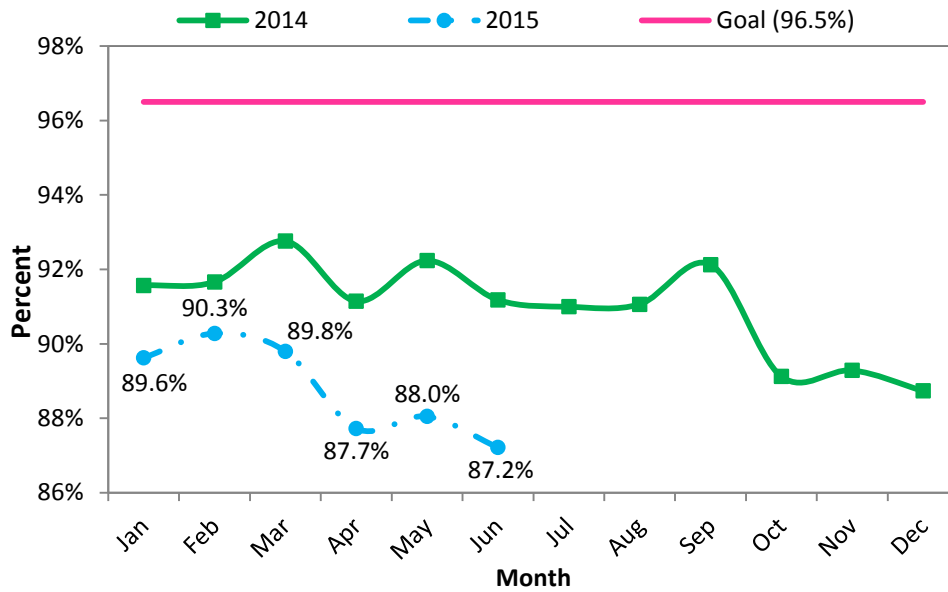
Community Behavioral Health (CBH)

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

How it is measured: *Numerator:* Number of persons who obtained / maintained housing
Denominator: Number of persons who discharged or had an updated CCAR in the month that were receiving mental health services at Time 1; average monthly denominator: 1,482.67

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: Performance in the most recent quarter went from 87.7% to 87.2%, demonstrating a 0.5% decline in three months.

Notes: "Time One" can be an admission or update in the Colorado Client Assessment Record (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 or major life event (e.g., a change in housing status).



Community Behavioral Health (CBH)

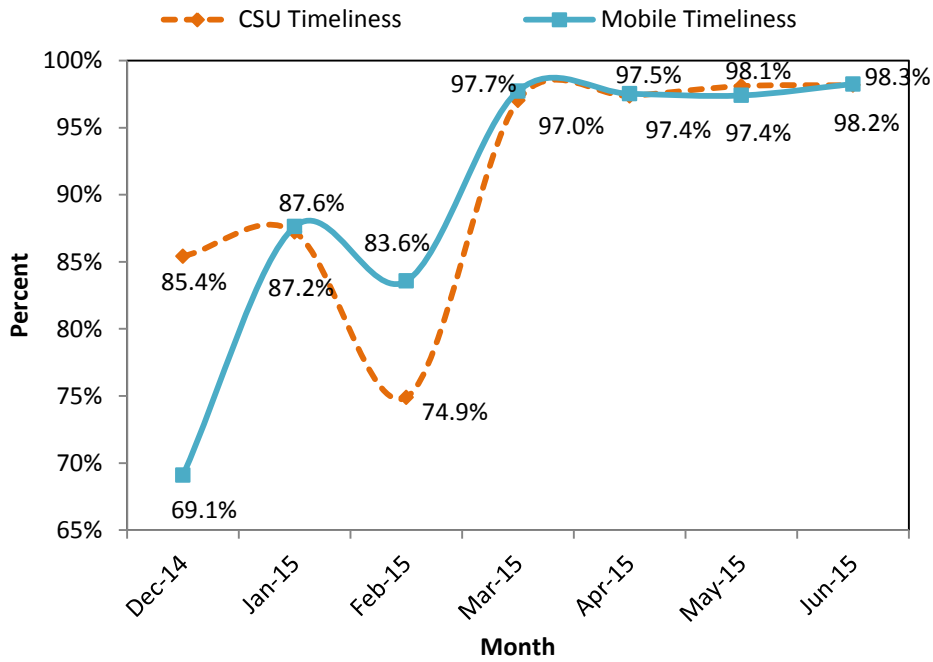
Measure: **Timeliness of crisis services**

How it is measured: *Numerator:* Number of individuals receiving crisis services within allotted time frame (1 hour for all Crisis Stabilization Units (CSU), 1 hour for mobile units in urban settings, 2 hours for mobile units in rural settings)

Denominator: Number of individuals receiving crisis services; average monthly denominator: CSU: 594; Mobile: 2,004

Why this matters: Receiving timely access to crisis services is a best practice.

Goal: **↑ TBD**



Trend: Performance in the most recent quarter remained steady for CSU and Mobile.



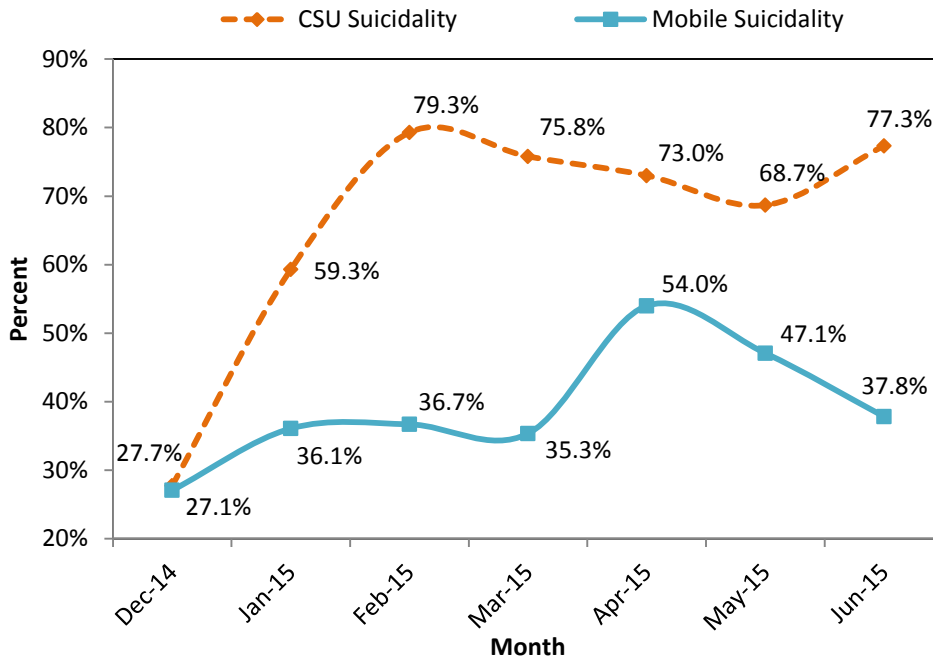
Community Behavioral Health (CBH)

Measure: **Percent of clients with reduced suicidality**

How it is measured: *Numerator:* Number of people with decreased suicidal risk
Denominator: Number of people presenting for crisis services with suicidal risk; average monthly denominator: Crisis Stabilization Unit (CSU): 287; Mobile: 831

Why this matters: Reduction in suicidality is a primary goal of Colorado Crisis Services.

Goal: **↑ TBD**



Trend: CSU Suicidality performance went from 73.0% to 77.3%, demonstrating a 4.3% improvement in the most recent quarter. Mobile Suicidality performance went from 54.0% to 37.8%, demonstrating a 16.2% decline in the most recent quarter.

Mental Health Institutes (MHI)

Summary

Description

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

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

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

CMHIFL Hospital Director: Dr. Christopher Burke

CMHIP Superintendent: Ron Hale

Executive Summary:

Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As a part of that process, the *Eloperments: Fort Logan & Pueblo* measure will no longer be reported in the C-Stat Quarterly Report.

Additional highlights within Mental Health Institutes include:

- *Rates of Restraint Use: Fort Logan & Pueblo:* The Fort Logan Institute met the 0.13 goal in two of the three months. The Pueblo Institute did not meet the goal throughout this quarter, but is trending in the right direction, starting with a rate of 2.15 in May 2015 and decreasing to a rate of 1.11 in July 2015.
- *Percent of 30-Day Readmissions: Fort Logan & Pueblo:* The Fort Logan Institute met the goal in two of the three months. The Pueblo Institute met the goal for the duration of the quarter, and had seven consecutive months of zero 30-day readmissions.

Measures:

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



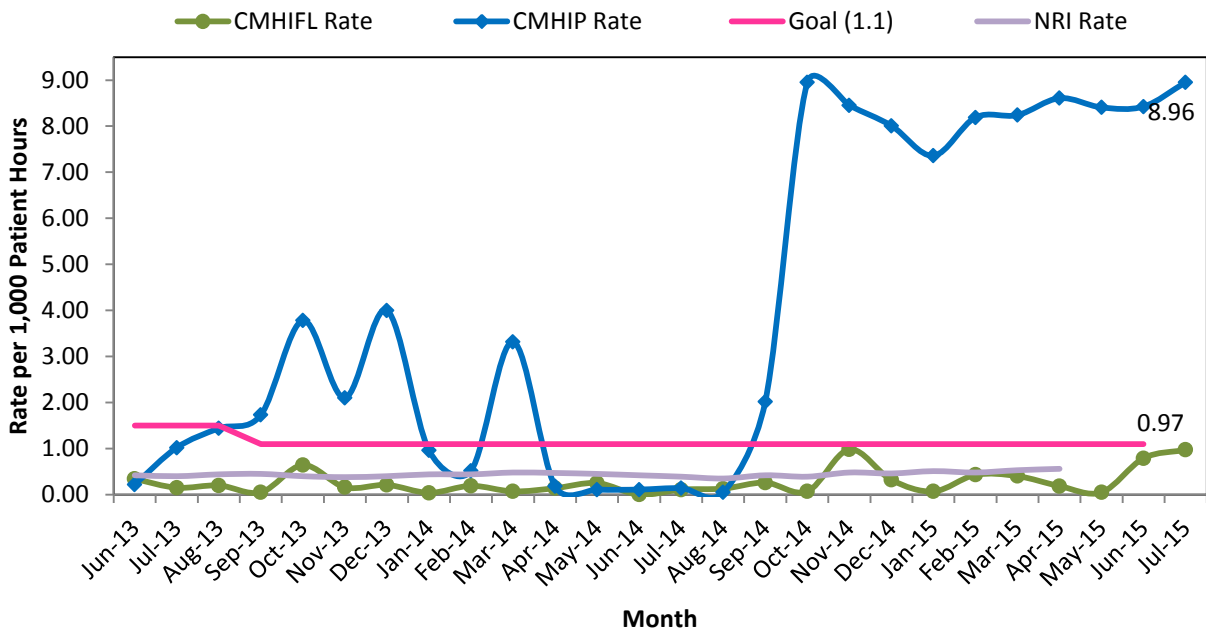
Mental Health Institutes (MHI)

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: 67.29; Pueblo: 296.98

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, along with other psychological harm. Secluding a patient is viewed by the Institutes as a treatment failure.

Goal: **↓ 1.1**



Trend: Performance in the most recent quarter at the Fort Logan Institute achieved the goal, while performance at the Pueblo Institute did not achieve the goal.

Notes: Both Institutes agreed on the 1.1 goal rate in October 2013. The NRI rate (grey line) reflects the national average and typically runs several months behind in data reporting because the rate is calculated from data by all hospitals in the country (both private and public).



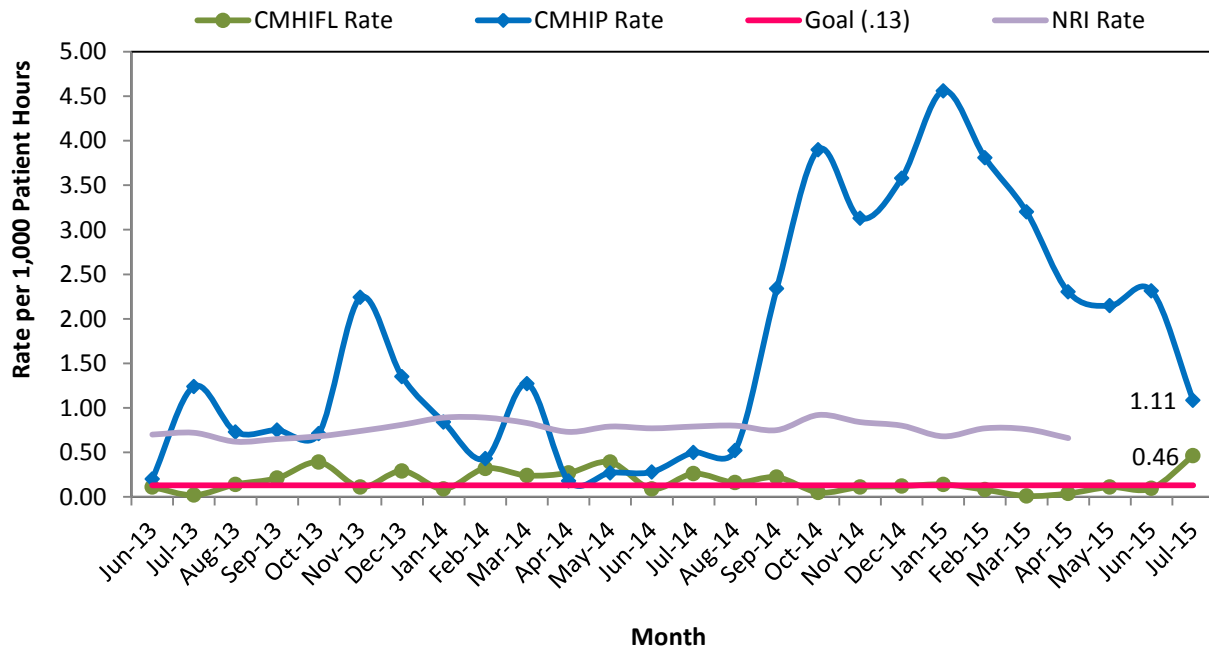
Mental Health Institutes (MHI)

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: 67.29; Pueblo: 296.98

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, along with other psychological harm. Restraining a patient is viewed by the Institutes as a treatment failure.

Goal: **↓ 0.13**



Trend: In the most recent quarter, the Fort Logan Institute did not meet the goal in the final month of the quarter, whereas the Pueblo Institute did not achieve the goal but trended in the right direction.

Notes: Both Institutes agreed on the 0.13 goal rate in December 2013. The NRI rate (grey line) reflects the national average and typically runs several months behind in data reporting because the rate is calculated from data by all hospitals in the country (both private and public).



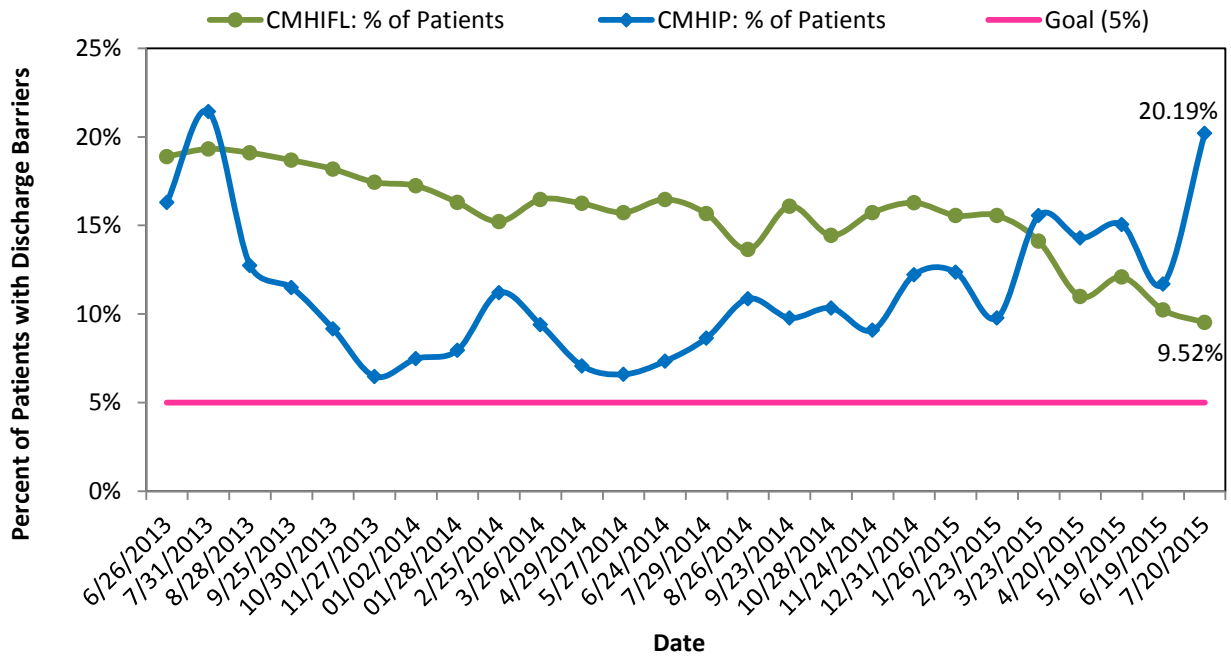
Mental Health Institutes (MHI)

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: 88; Pueblo: 97

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

Goal: **↓ 5%**



Trend: Performance in the most recent quarter improved at the Fort Logan Institute, while performance at the Pueblo Institute worsened.

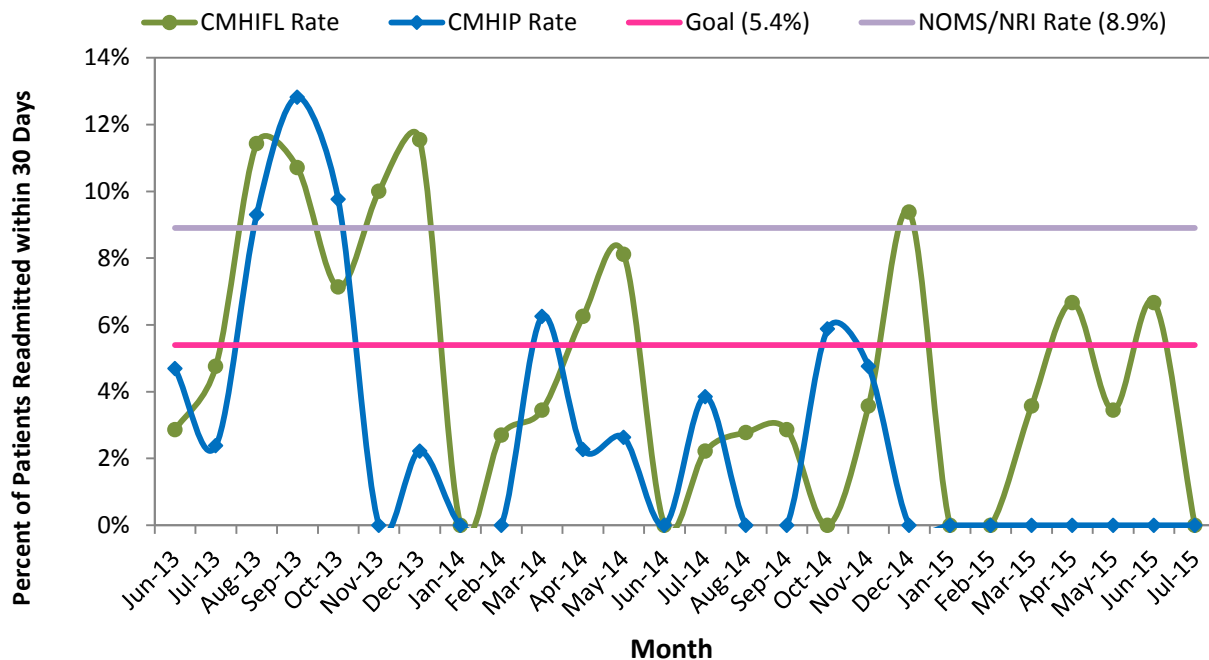
Mental Health Institutes (MHI)

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: 29.67; Pueblo: 12.0

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: Performance in the most recent quarter was variable at the Fort Logan Institute (representing three readmissions within 30 days), while performance at the Pueblo Institute remained steady and consistently met the goal.



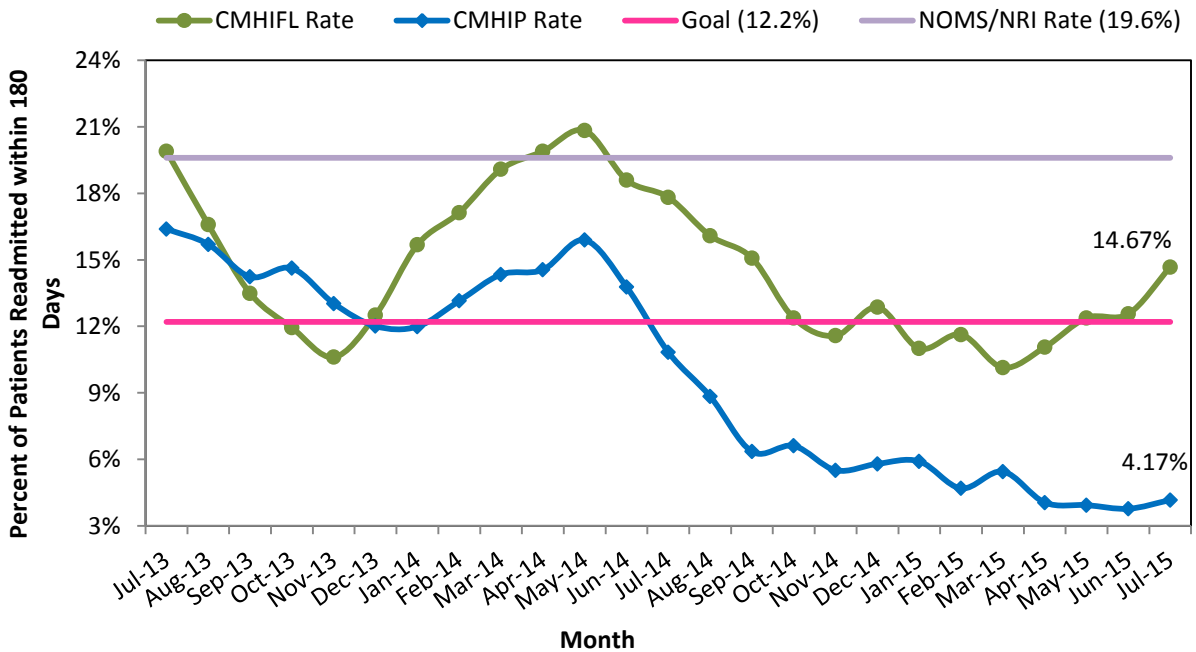
Mental Health Institutes (MHI)

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: 197.67; Pueblo: 109.67

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: Performance in the most recent quarter worsened at the Fort Logan Institute, while performance at the Pueblo Institute remained steady and consistently met the goal.



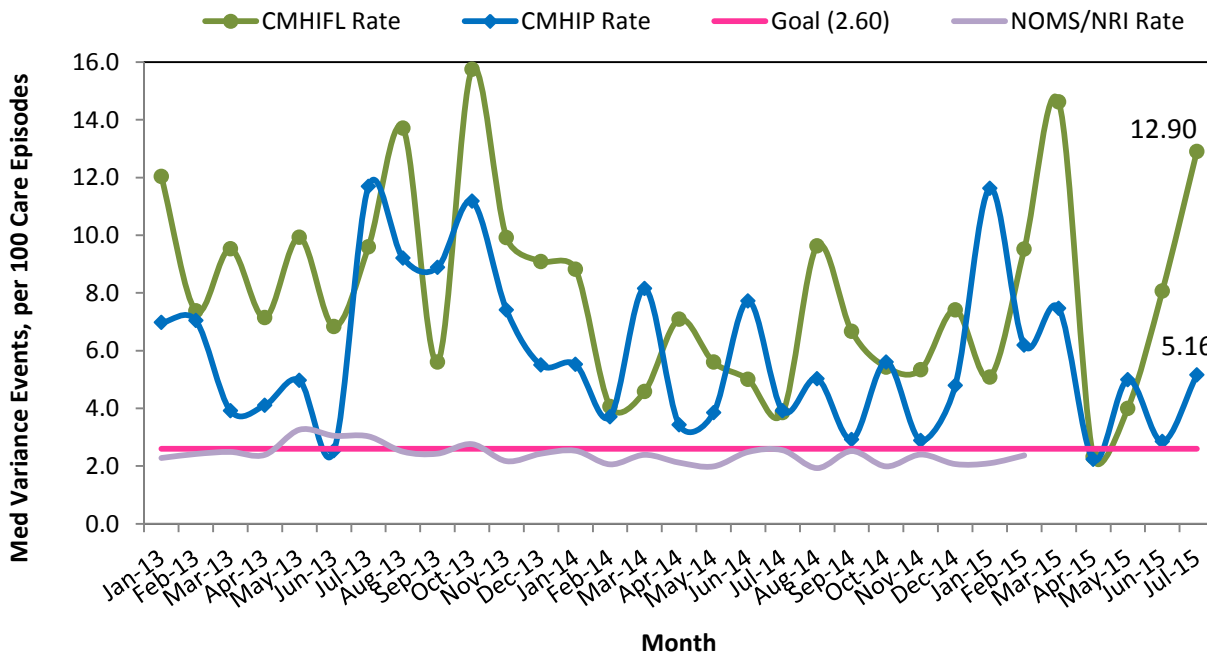
Mental Health Institutes (MHI)

Measure: **Events of medication variance – Fort Logan & Pueblo**

How it is measured: *Numerator:* The number of medication variance events (the initial errors that reach a patient, counted only once per each medication involved)
Denominator: Per 100 episodes of care (the number of patients enrolled at the end of the previous month, plus the new admissions for the current month); average monthly denominator: Fort Logan: 1.24; Pueblo: 4.61

Why this matters: Decreasing the number of medication errors reduces potential to cause harm.

Goal: **↓2.6%**



Trend: Performance in the most recent quarter worsened at the Fort Logan Institute, while performance at the Pueblo Institute remained variable. Neither Institute attained the goal throughout the most recent quarter.

Office of Children, Youth, and Families

Description

The Office of Children, Youth, and Families (OCYF) is responsible for policy development, service provision, and coordination of efforts to improve the lives of Coloradans 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: Robert Werthwein

Division of Child Welfare

Summary

Description

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

Director: Ann Rosales

Executive Summary

- *Compliance with the Statutory Requirement Related to Timeliness of Assessment Closure:* The methodology for this measure has changed so that Traditional Assessments and Family Assessment Response (FAR) Assessments have been combined. As Colorado continues to increase in the number of FAR counties (12 counties provide FAR as an assessment option), the combination of this data better represents the State as a whole.
- *Safety Assessment Forms Completed Accurately:* Traditional Assessment performance demonstrated an 11.2% drop in July 2015. The Safety Assessment Form contains multiple sections. Based on plans to modify the General Information section of the Safety Assessment Form, the Administrative Review Division (ARD) had stopped reviewing to this section. The ARD, in consultation with DCW, decided to re-institute reviewing the General Information section of the Safety Assessment Form. Historically, the General Information section of the tool had the lowest accuracy percentage. Reintroducing the data from reviewing of all six parts of this section accounts for the performance drop in July 2015.
- *Legally Freed Children Discharged to Permanency:* The Division completed a comprehensive predictive analytic assessment of the factors that affect the likelihood of a legally free child or youth achieving permanency. As a result, DCW has created a strategy to target those children and youth who are statistically less likely to attain permanency in an effort to improve outcomes for those children/youth.
 - Additionally, a review of the Legally Freed children in Colorado demonstrated that the number of Legally Freed children has been slowly declining over the last 1.5 years, from 151 in January 2014 to 114 in July 2015; demonstrating a 25% reduction. Similarly, the utilization of an Other Planned Permanent Living Arrangement (OPPLA) goal for Legally Freed children has also decreased from 66% in January 2014, to 61% in July 2015.
- *Children in Care for More than 24 Months and No More than 2 Placements and Children Who Do Not Re-Enter Care within 12 Months:* Although preliminary data for both of these measures have been presented in the monthly C-Stat meetings throughout the most recent quarter, DCW is still in the process of validating the methodology and working to align with the new Federal Child and Family Services Reviews (CFSRs) methodology. The changes are expected to take place in October 2015 and will be presented in the next C-Stat Quarterly Report.
- *Number of Children in Congregate Care:* While the *Children in Congregate Care* measure will remain a part of C-Stat, DCW will no longer report the raw number of children in a separate measure. Reporting the raw number of children in congregate care was a part of CDHS's Wildly Important Goals for State Fiscal Year 2014/15.

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 Congregate Care](#)
- [Number of Children in Congregate Care](#)
- [Child Welfare Runaways](#)



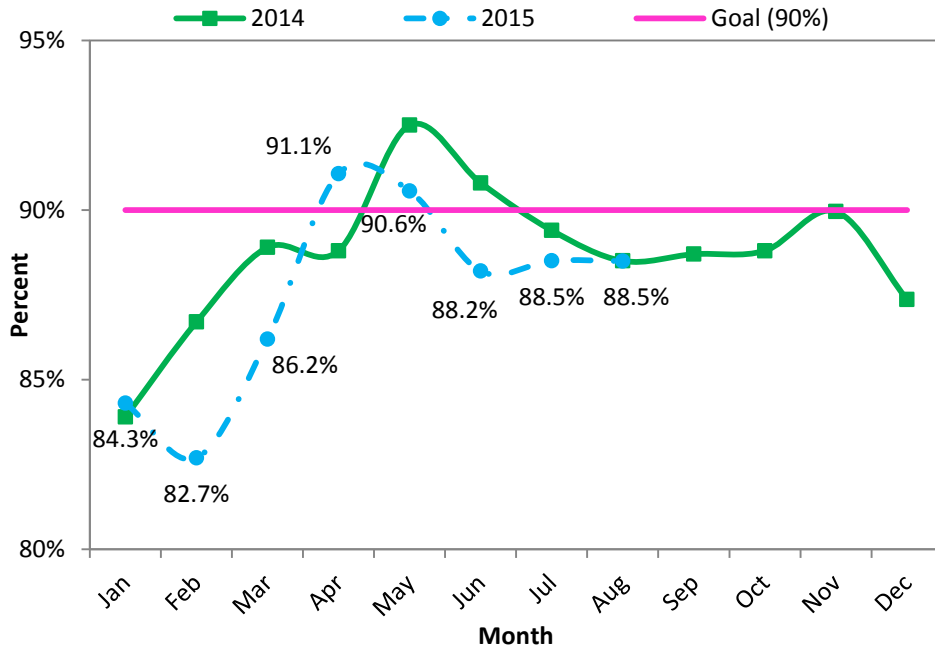
Division of Child Welfare (DCW)

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: Total number of alleged victims whose child protection assessment closed in the specified month (both Traditional and Family Assessment Response); average monthly denominator: 3,715

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

Goal: **↑ 90%**



Trend: Performance in the most recent quarter has demonstrated limited variability, ranging from 88.2% to 88.5%. The goal was not met within the most recent quarter.

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

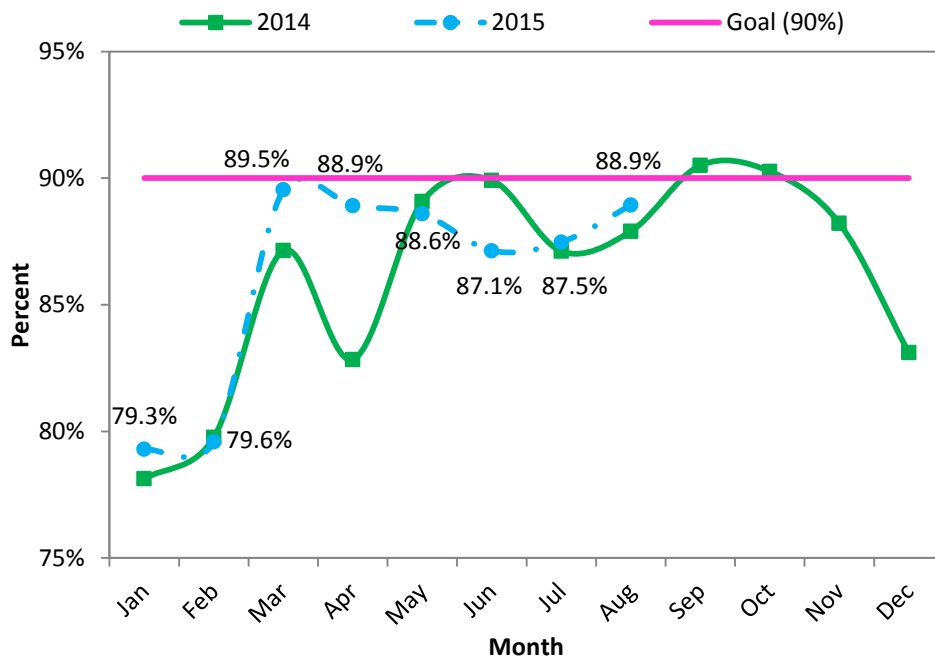
Division of Child Welfare (DCW)

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 specified month; average monthly denominator: 2,420

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 demonstrated an increase in both July and August 2015. Overall, performance has been stable on this measure for the last 6 months. The goal 90% has not been met in 2015.

Notes: The methodology for this measure has changed so that Traditional Assessments and Family Assessment Response (FAR) Assessments have been combined.

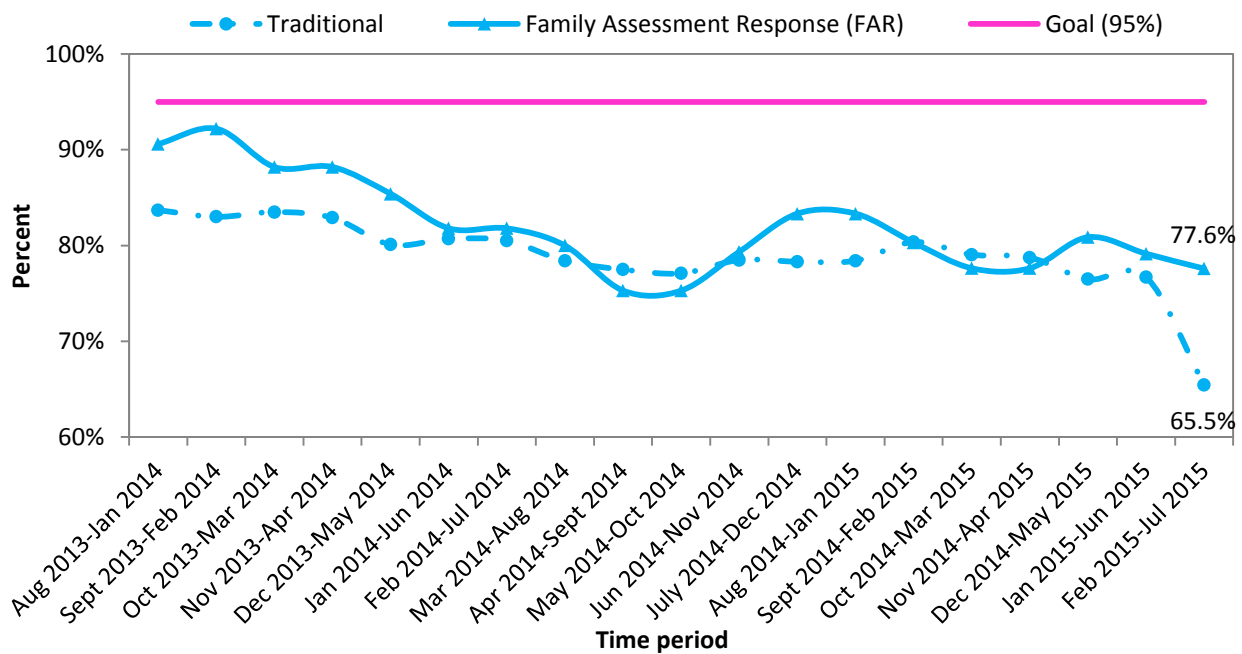
Division of Child Welfare (DCW)

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 the Administrative Review Division; average monthly denominator: Traditional: 788; Family Assessment Response (FAR): 220

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

Goal: **↑ 95%**



Trend: Performance for both Family Assessment Response and Traditional Response declined throughout the most recent quarter.

Notes: Family Assessment Response 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)

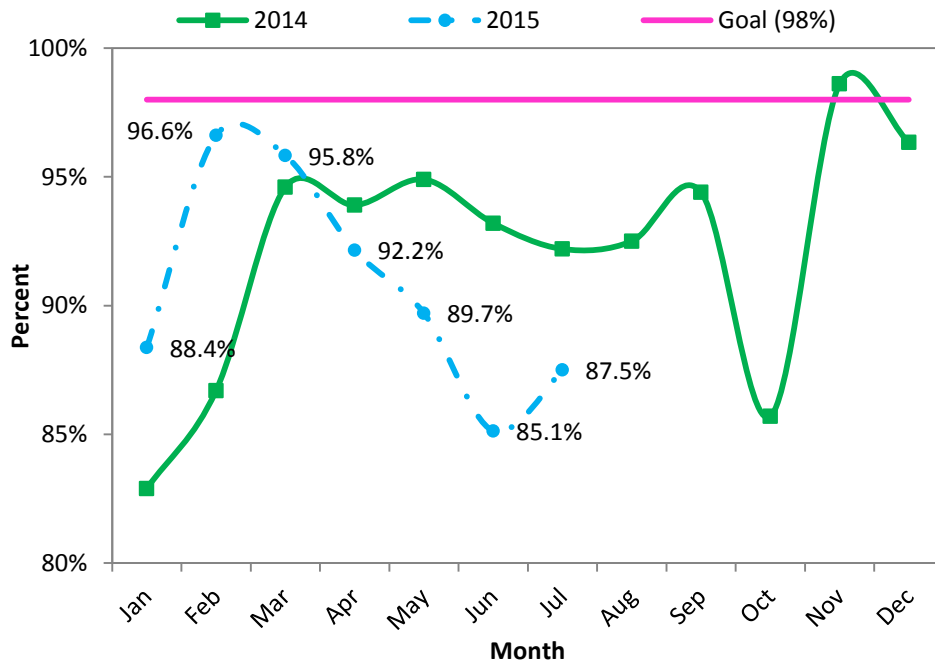
Measure: **Legally freed children discharged to permanency (Federal Measure)**

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

Denominator: Number of children who were legally free for adoption at the time of discharge; average monthly denominator: 63

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 at the start of the most recent quarter, then demonstrated improvement in the last month of the quarter (July 2015).

Notes: Legally freed children discharged to permanency is a Federal Measure.

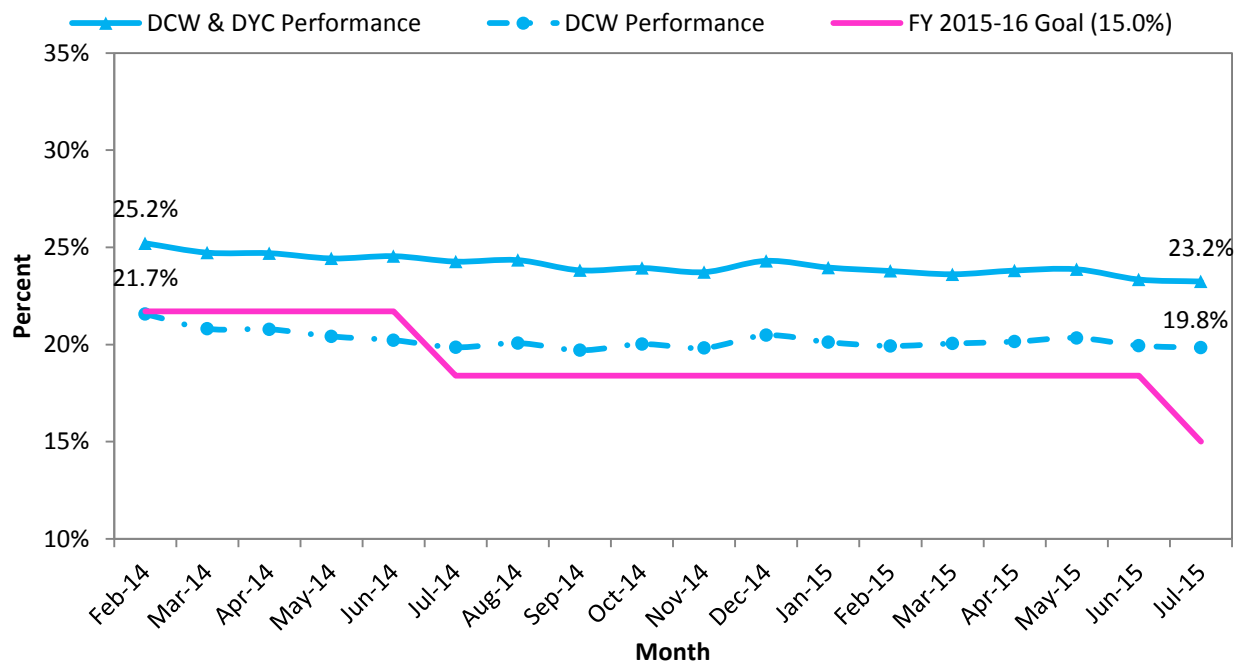
Division of Child Welfare (DCW)

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- 4,977; DCW & Division of Youth Corrections (DYC)- 5,758

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: ↓ 15.0% (FY 2015-16 Goal); 18.4% (FY 2014-15 Goal)



Trend: The Division’s performance remains steady.

Notes: New measure methodology as of February 2014, therefore, the January 2014 data point is unavailable. The Division of Child Welfare reduced the goal to 18.4% for the Fiscal Year 2014-15 and again to 15.0% in Fiscal Year 2015-16.

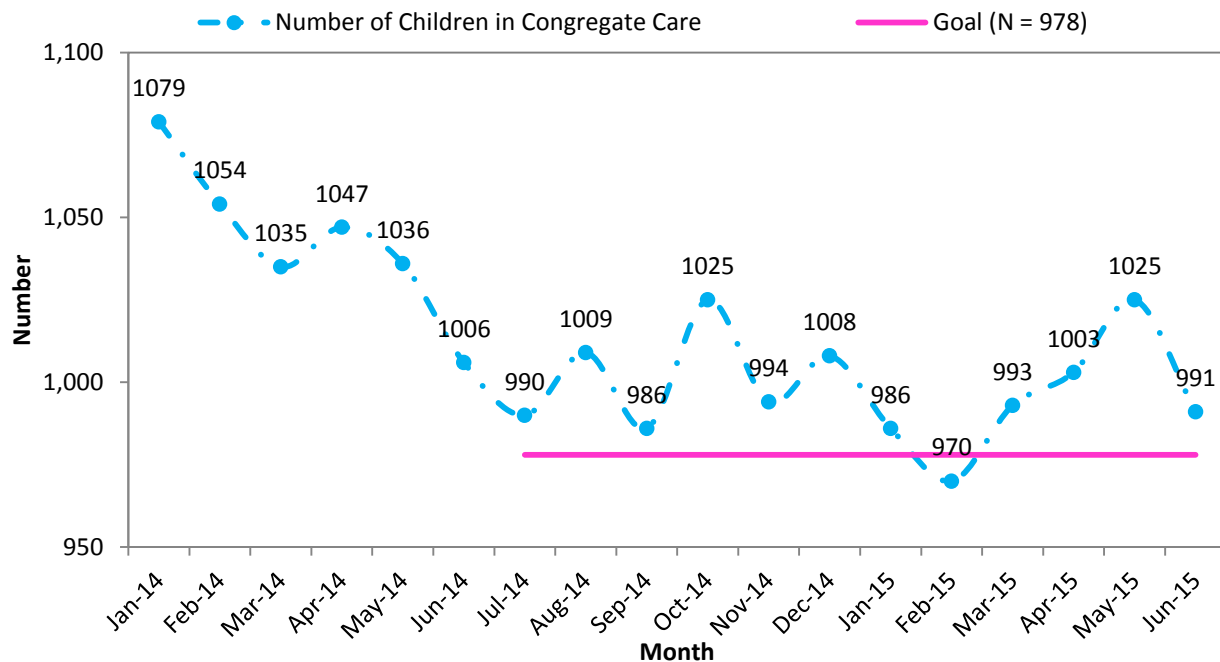
Division of Child Welfare (DCW)

Measure: **Number of children in congregate care: CDHS Wildly Important Goal**

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

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: **↓ N = 978**



Trend: Performance in the most recent quarter worsened at the start of the quarter and then improved in June 2015. The goal has not been met since February 2015.

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



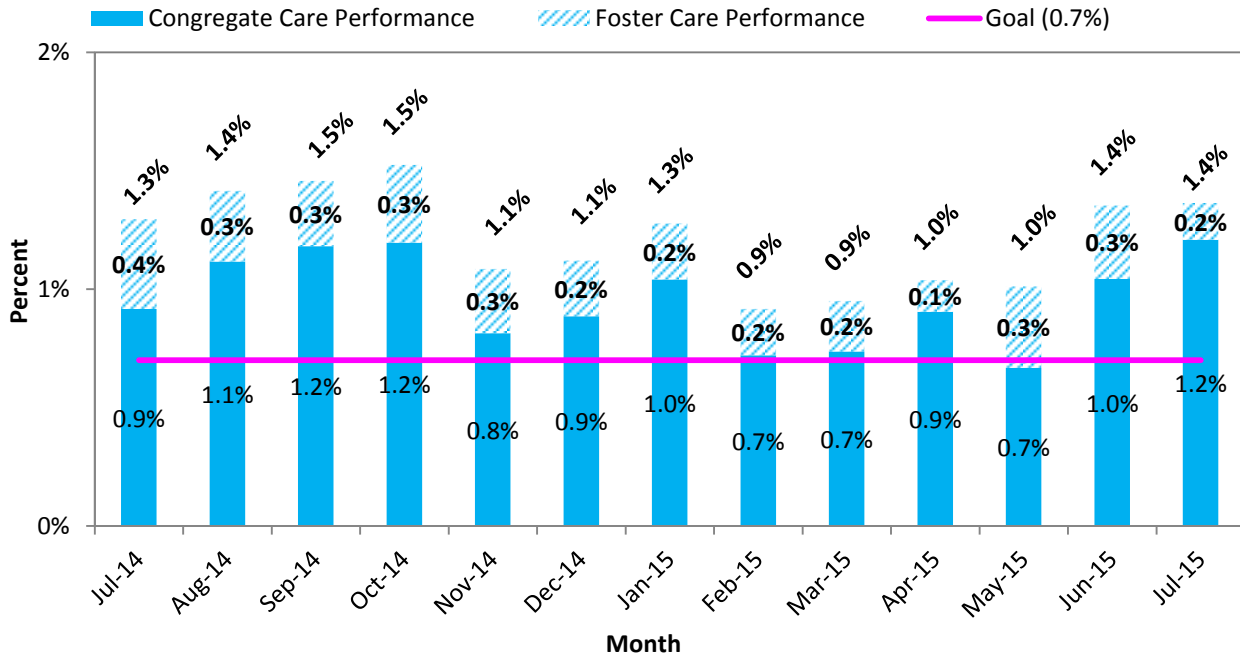
Division of Child Welfare (DCW)

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: 4,341
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: 844

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

Goal: **↓ 0.7%**



Trend: Within the most recent quarter, performance remained between 1.0-1.4% of youth in congregate care (with an out of home placement) are on runaway status.

Notes: The data in this measure is a cumulative frequency, meaning youth who run away in one month and are still on runaway status the following month are counted in both months' data.



Division of Youth Corrections

Summary

Description

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

Director: Charles Parkins

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department.
 - As a part of that process, the following DYC measure was added to the C-Stat Quarterly Report: *Family Attendance at Multidisciplinary Team Review Meetings*.
 - The following DYC measures will no longer be reported in the C-Stat Quarterly Report: *Timely Initial Placement for Committed Youth*, *Family Engagement: Residential Client Contact with Families*, and *Family Engagement: Client Manager Contact with Families*
- *Committed or Detained Youth Who Escape or Walkaway*: The number of escapes and walkaways throughout the most recent quarter was noticeably higher compared to the previous quarter.
- *Staff Injuries on the Job as a Direct Result of Youth Contact*: Performance from April to July 2015 has demonstrated improvement each month compared to the same quarter 2014.
- *Family Attendance at Multidisciplinary Team Review Meetings* is a new measure, of which the methodology is continuing to be improved. A goal has not yet been established for this measure. DYC will continue to review the definitions and methodology to ensure that the data captured is meaningful and informative.

Measures

- [Committed or Detained Youth Who Escape or Walkaway](#)
- [Fights and/or Assaults in DYC State-Secure Facilities](#)
- [Youth Injuries in State-Secure Facilities](#)
- [Staff Injuries on the Job as a Direct Result of Youth Contact](#)
- [Family Attendance at MDT Review Meetings](#)



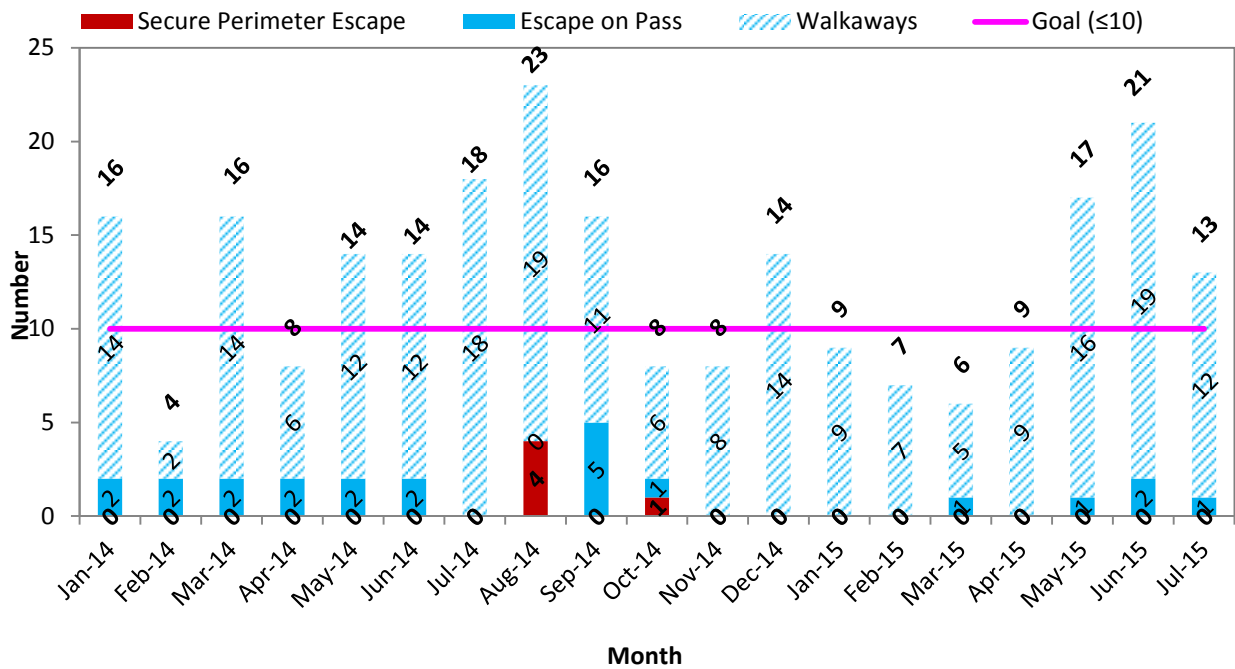
Division of Youth Corrections (DYC)

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

How it is measured: The number of escapes from state-secure facilities in which a youth a) breaches the secure perimeter of the facility or b) does not return from approved pass after 6 hours. Also included are the number of youth who walk away from a contract staff-supervised or community placement in which youth does not return within 6 hours; average daily population: 1,018

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

Goal: **↓ ≤10**



Trend: The Division’s performance declined in the most recent quarter, compared to the last quarter. For each month within the most recent quarter, the goal was not attained.

Notes: “Secure Perimeter Escape” was added as a new variable to differentiate between youths who escape while in the community on pass, and those who escape from the walls of a state-secure facility. The data illustrated above were back-dated to account for the new variable definitions.



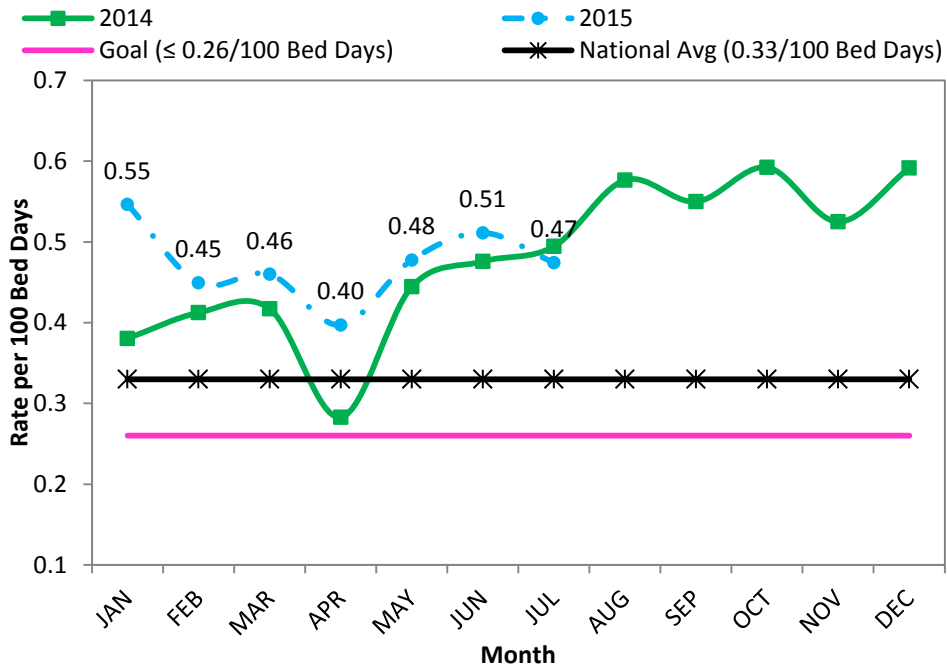
Division of Youth Corrections (DYC)

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 bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days population: 19,482.2

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

Goal: **↓ ≤ .26 per 100 Bed Days**



Trend: DYC’s rate of fights and/or assaults in state-secure facilities remained relatively stable throughout the most recent quarter. Performance throughout 2015, thus far, appears to be trending similarly to 2014.

Notes: The measure’s methodology changed from an “average daily population” to a “per 100 bed days” methodology in April 2015. This change was implemented to better compare DYC’s data to National Average data.

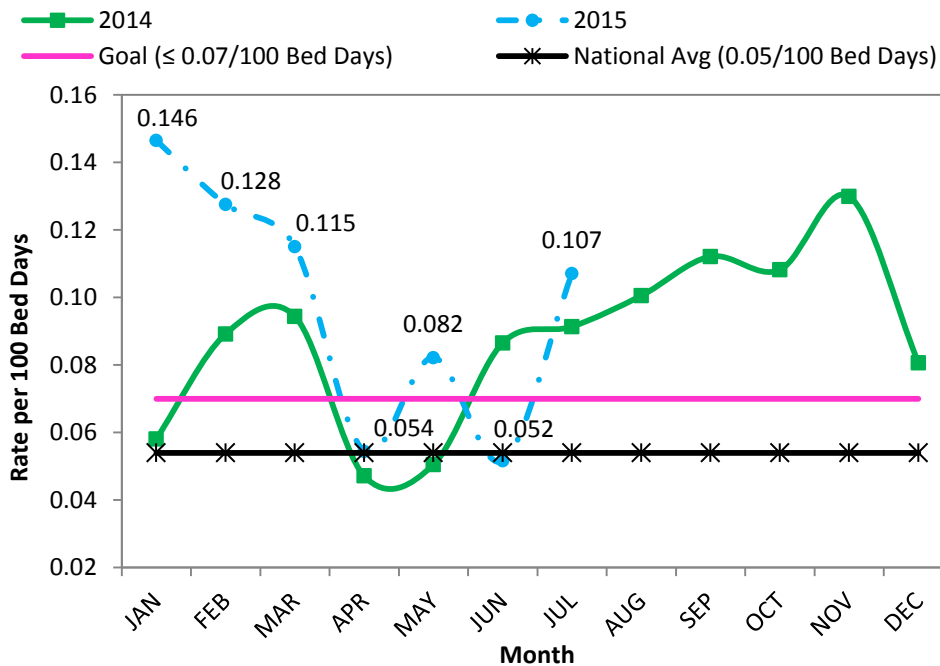
Division of Youth Corrections (DYC)

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

How it is measured: *Numerator:* Number of youth injuries in state-secure facilities
Denominator: Monthly bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days population: 19,482.2

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

Goal: **↓ ≤ 0.07 per 100 Bed Days**



Trend: The goal was attained in June 2015, with a youth injury rate of 0.052 per 100 bed days. The rate of youth injuries then increased to 0.107 per 100 bed days in July 2015.

Notes: The measure’s methodology changed from an “average daily population” to a “per 100 bed days” methodology in April 2015. This change was implemented to better compare DYC’s data to National Average data.



Division of Youth Corrections (DYC)

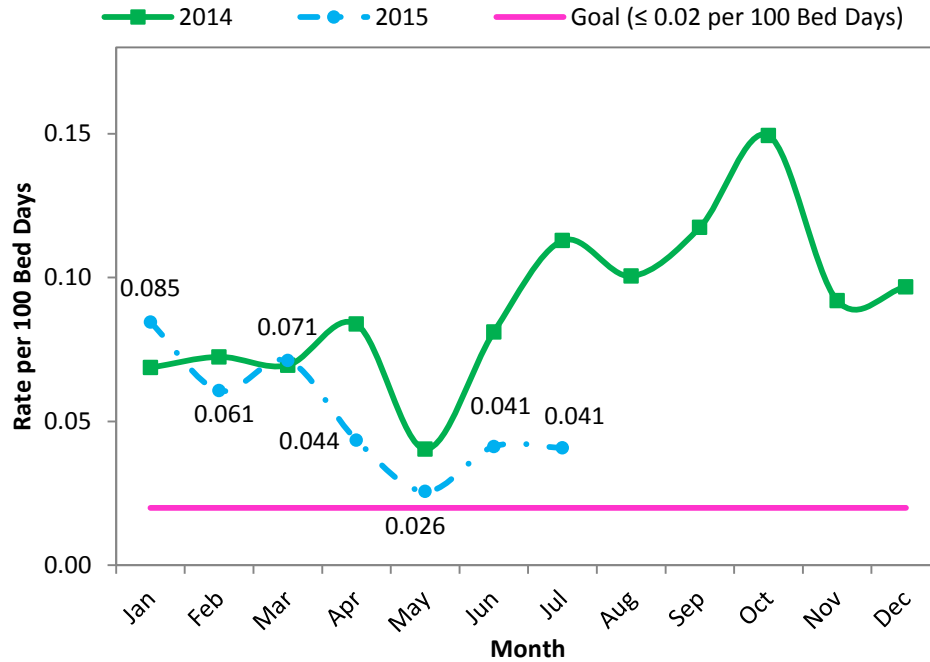
Measure: **Staff injuries on the job as a direct result of youth contact**

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 bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days population: 19,482.2

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

Goal: **↓ ≤ 0.02 per 100 Bed Days**



Trend: Overall, performance from May-June 2015 demonstrated an improvement when compared to May-June 2014. The goal is yet to be achieved.



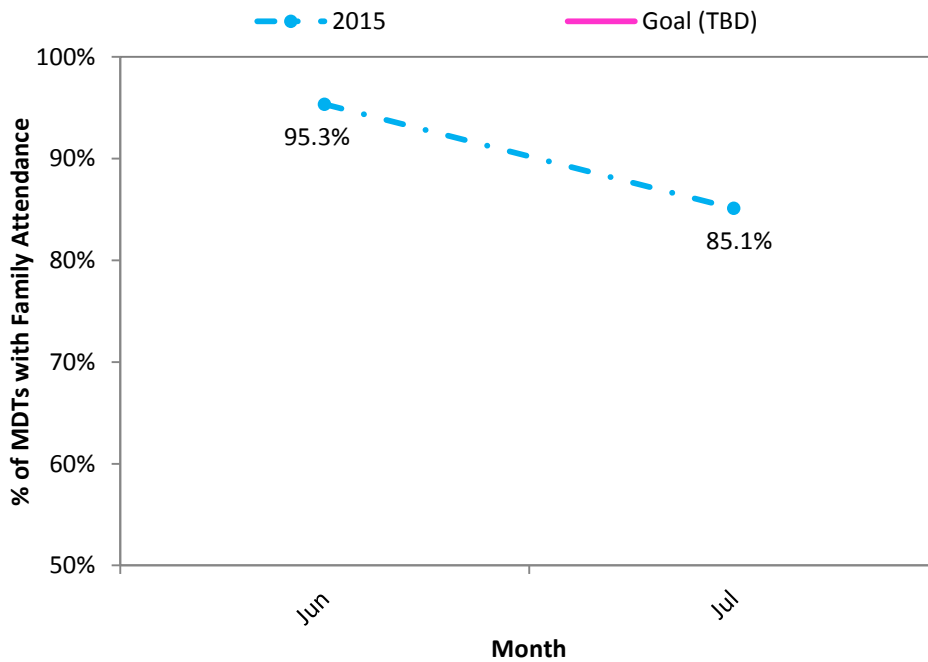
Division of Youth Corrections (DYC)

Measure: **Family attendance at multidisciplinary team (MDT) review meetings**

How it is measured: *Numerator:* Number of MDT meetings conducted with family attendance.
Denominator: Number of MDT meetings conducted during the month; average monthly denominator: 391

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

Goal: **↑ TBD**



Trend: Performance declined from June to July 2015.

Notes: As a part of CDHS Alignment, DYC has added this measure to assess the involvement of family members at the youth’s Multidisciplinary Team Meetings. This measure is still a work-in-progress, thus, the goal is yet to be determined.

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.

Acting Program Director: Brooke Ely-Milen

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department.
 - As a part of that process, the following DVP measures will no longer be reported in the C-Stat Quarterly Report: *Shelter services (residential)*, *Advocacy and individual counseling (non-residential)*, and *Support groups (non-residential)*.
- The Domestic Violence Program has implemented a new database in order to more efficiently and effectively collect data. DVP is continuing to offer technical assistance to individual programs relating to implementation of the database.
- The Domestic Violence Program created a Request for Proposals for an evaluator, which was released February 2, 2015. The outcome evaluation and capacity assessment study began in July 2015 and is expected to continue over the next 2 years.
- *Timely Assessment of Client Need and Risk*: This is the first of the new outcome measures for DVP. Data collection and technical assistance around the new tool have been ongoing. These efforts have demonstrated vast improvements in the timeliness of this measure, particularly for the Specialized Programs.
 - The new measure assesses the number of client need and risk assessments that were completed within the first week of client contact with the program.
 - Given the differences between Specialized and Traditional Programs in their focus and efforts, DVP has elected to report these two program types separately in C-Stat, along with separate goals. The goals were identified by mathematically calculating the top 25th percentile of performance and setting the goal at that mark. The goal will be re-evaluated every quarter to adjust to performance.

Measures

- [Timely Assessment of Client Need and Risk](#)

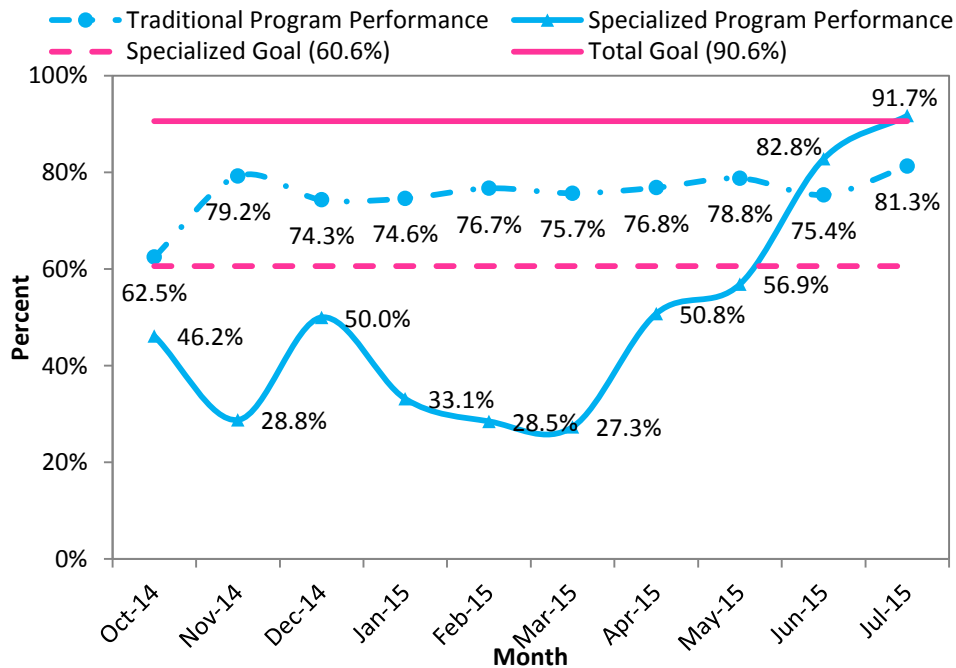
Domestic Violence Program (DVP)

Measure: **Timely assessment of client need and risk**

How it is measured: *Numerator:* Number of client assessments completed within the first week of service
Denominator: The number of new clients in the reporting month;
average monthly denominator: Traditional Programs- 1,190; Specialized Programs- 305

Why this matters: By timely assessing the needs and risks of Domestic Violence Program clients, programs are more able to help clients attain the services best suited to fit their needs.

Goal: **↑ Traditional Programs – 90.6%; Specialized Program – 60.6%**



Trend: Both Traditional and Specialized Programs’ performance demonstrated improvement throughout the most recent quarter, attaining top performance in July 2015. Specialized Programs surpassed the 60.6% goal for the first time in June 2015, surpassing Traditional Programs’ performance for the first time, as well.

Notes: Given the differences between Specialized and Traditional Programs in their focus and efforts, DVP has elected to report these two program types separately in C-Stat, along with separate goals.

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.

Acting Director: Sarah Aurich

Deputy Director: Sarah Aurich

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.

Director: Mindy Kemp

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As a part of that process, the following measures will no longer be reported in the quarterly report: *Timeliness of Initial Response to New Reports, Timeliness of Assessments, and Timeliness of Investigations*.
- *Timeliness of Monthly Contacts*: Aging and Adult Services continues to distribute a weekly report for monthly contacts. This effort is intended to assist in prompting counties to enter data prior to the time at which AAS runs their 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. As needed, APS staff are also contacting counties who struggle with the measure to determine if technical assistance can be offered, as well as determine what actions can be taken to increase performance.

Measures

- [Timeliness of Monthly Contacts](#)

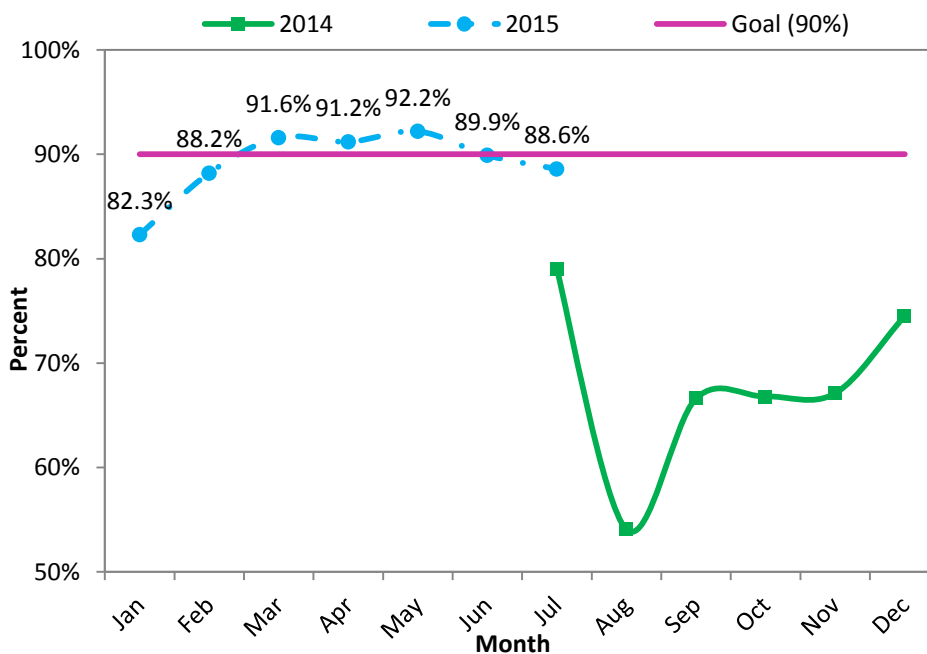
Aging and Adult Services (AAS)

Measure: **Timeliness of monthly contacts**

How it is measured: *Numerator:* Number of cases with a monthly contact in the reporting month
Denominator: Number of cases requiring a monthly contact in the reporting month; average monthly denominator: 1,540

Why this matters: Timely monthly contacts increase the safety of vulnerable adults.

Goal: **↑90%**



Trend: The most recent quarter has demonstrated a 3.6% decrease in performance, ranging from 92.2% in May 2015 to the current performance at 88.6% in July 2015. Performance this quarter started above the 90% goal, and is currently not meeting the goal.

Disability Determination Services

Summary

Description

The Division of Disability Determination Services (DDS) makes disability decisions for Social Security. The DDS staff gather medical information from the sources listed by clients and any new sources discovered in that process. The DDS staff evaluate 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

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As a part of that process, the following measure will not be reported in the quarterly report: *Examiner Processing Time*.
- *Mean Number of Days to Process Initial Eligibility Decisions*: Within the most recent quarter, performance increased by 7.5 days, ranging from 68.7 to 76.2 days. This can be attributed to staff turnover and the loss of trained examiners. To help mitigate the effect of the loss of staff, DDS has received limited assistance in processing cases, and will begin hiring and training examiners in the fall of 2015.
- *Percentage of Accurate Initial Eligibility Decisions*: Performance in the most recent quarter decreased from 96.6% in May 2015 to 95.6% in July 2015. DDS continues to focus on internal quality assurance reviews in which they conduct a targeted sampling that is statistically based on error trends and body systems. DDS also included goals specific to accuracy in the examiners' annual performance reviews.

Measures

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



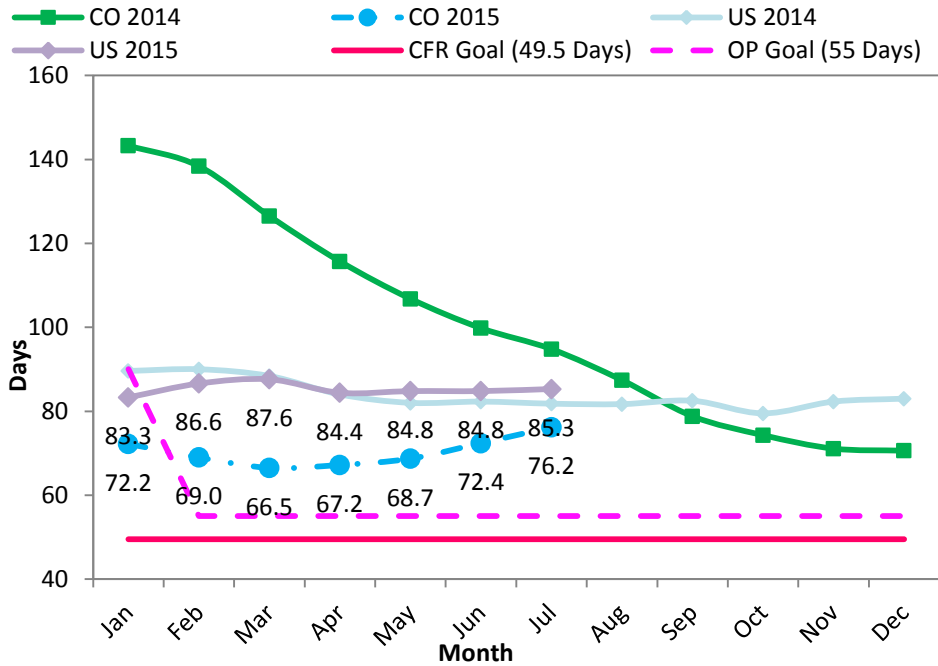
Disability Determination Services (DDS)

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: 3,283

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 has trended upward, away from the goal this quarter ranging from 68.7 days in May 2015 to current July 2015 processing time of 76.2 days.

Notes: This measure utilizes data from the SSDI program only. The 49.5 day Federal goal is based on the Code of Federal Regulations (CFR). The Social Security Administration (SSA) consolidated Operating Plan (OP) contains a mean processing time goal of 55 days. DDS has added this goal to their measure for tracking purposes.



Disability Determination Services (DDS)

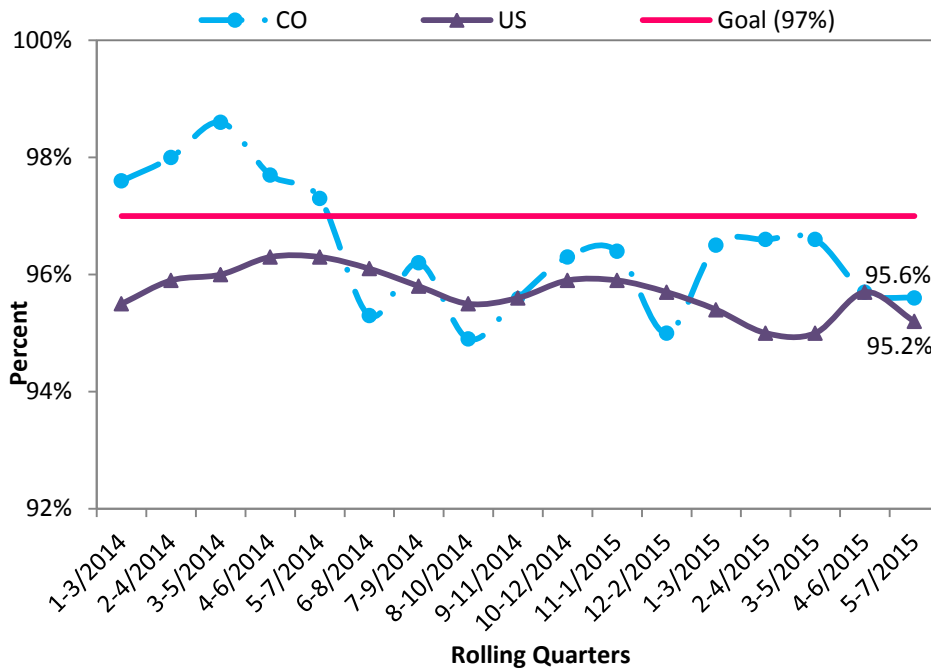
Measure: **Percentage of accurate initial eligibility decisions (Federal Measure)**

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: 141

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 most recent quarter demonstrated a decrease in performance in the accuracy of initial decisions and has remained below the goal for the last year’s rolling quarters (blue line).

Notes: This measure includes data from both the SSDI and SSI programs. Performance data are displayed utilizing a rolling, three month average. This is due to the measure having a small sample, approximately 50 cases, which are drawn to examine accuracy each month. This allows for data to be 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 (WRRRC), that provide a number of services, including: 24-hour supervision, residential, day programming, habilitation, medical, training and behavioral intervention, and short-term emergency/crisis support to the community system.

Director: Tracy Myszak

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As a part of that process the following measures will no longer be reported in the quarterly report: *Length of Time Toward Achieving Recommended Progress*, *Length of Time to Transition*, and *Individuals Clinically Recommended for Transition to a Community Provider*.
- *Percent of Residents without Physical Intervention by Regional Center*: Throughout the most recent quarter, reports were analyzed by an interdisciplinary team at each center to determine what preceded the incident and what interventions may be implemented to reduce future physical interventions. Performance, on average, improved during the quarter and currently ranges from 82% in Wheat Ridge to 94% in Grand Junction.

Measures

- [Percent of Residents without Physical Intervention by Regional Center](#)



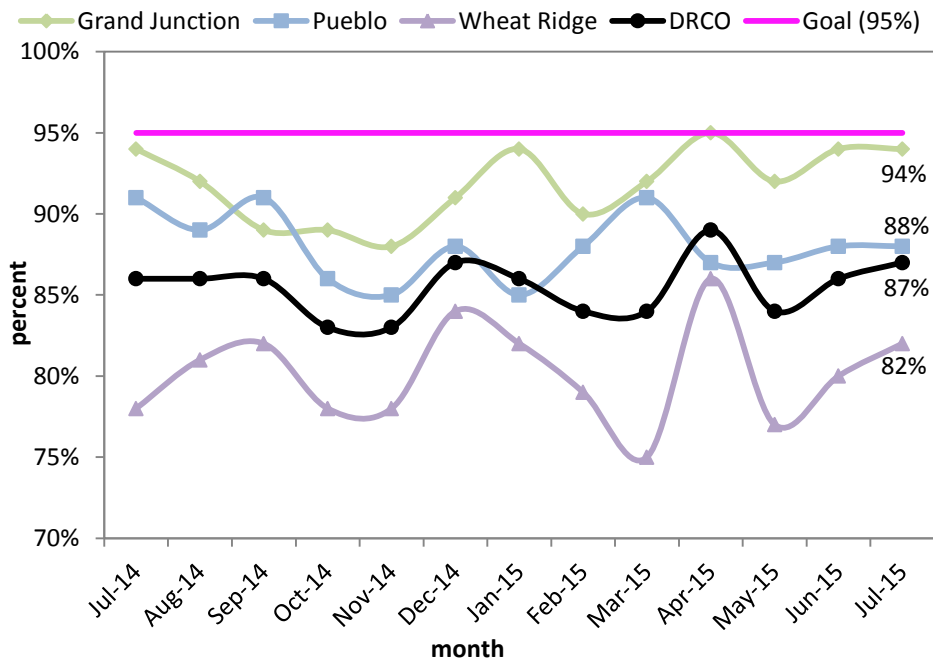
Division of Regional Center Operations (DRCO)

Measure: **Percent of residents without physical intervention by regional center**

How it is measured: *Numerator:* Number of individuals without physical intervention
Denominator: Number of individuals present in the given month; average monthly denominator: Grand Junction- 79, Pueblo- 59, Wheat Ridge- 127, DRCO- 265

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

Goal: **↑95%**



Trend: In the most recent quarter all three centers and the Division saw an increase in performance, with May 2015 as their lowest point, and trended upward throughout the quarter. Current performance in July 2015 is as follows: Grand Junction (green line) at 94%, Pueblo (blue line) at 88%, Wheat Ridge (purple line) at 82%, and the Division (black line) at 87%, all of which are below the 95% goal.

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: Sarah Aurich

Executive Summary

- *Percent of Residents without Falls:* The most recent quarter demonstrated varied performance. Fitzsimmons and Rifle are trending upward, Florence remained relatively stable, while Homelake trended downward. Due to the varied performance each month Executive Management reviews their performance in the C-Stat deck as a reference slide: the location of the fall, the severity of the fall, falls per shift, as well as those who had more than one fall during the month. A more focused look at falls will provide a better understanding of the falls, how and why they occurred, and help to focus future interventions.

Measures

- [Percent of Residents without Anti-Psychotic Medication](#)
- [Percent of Residents without Falls](#)



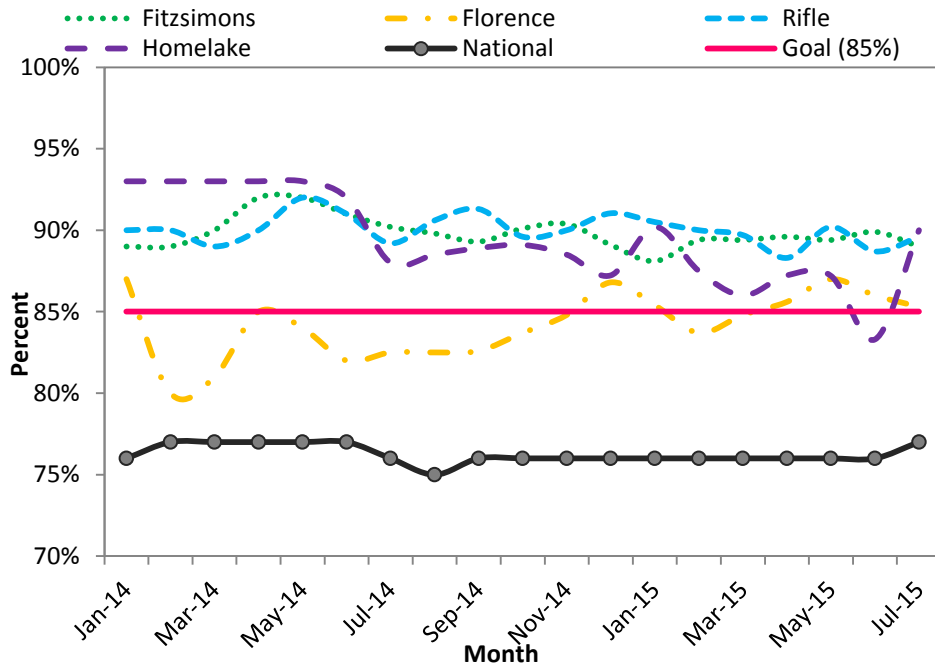
State Veterans Community Living Centers (SVCLC)

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: 170, Florence: 93, Rifle: 63, Homelake: 48

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 remained relatively stable among all Community Living Centers, with the exception of Homelake, over the most recent quarter. All four centers are exceeding the 85% goal in July 2015.



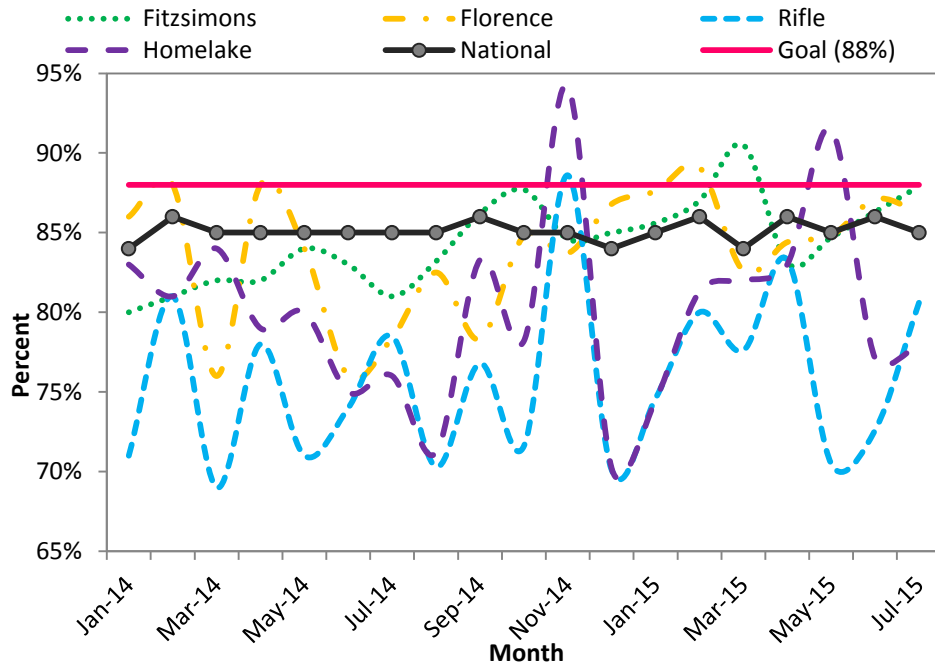
State Veterans Community Living Centers (SVCLC)

Measure: **Percent of residents without falls**

How it is measured: *Numerator:* Number of residents without falls
Denominator: Average Daily Census: Fitzsimons: 170, Florence: 93, Rifle: 63, Homelake: 48

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 varied from month to month and center to center. Fitzsimons (green line) and Rifle (blue line) both demonstrated an increase in performance throughout the quarter, while Florence (yellow line) remained relatively stable, and Homelake (purple line) demonstrated a decrease in performance. The centers are currently performing below the 88% goal, with the exception of Fitzsimons, who met the goal in July 2015.

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. The DVR provides assistance through an array of rehabilitation services which includes evaluation and diagnosis, physical and mental restoration, rehabilitation technology, training, education and employment services, as well as placement and post-employment supportive services. The DVR is a state-run program that helps disabled Coloradans participate in meaningful work throughout Colorado.

Interim Director: Steve Anton

Executive Summary

- DVR staff continues to distribute reports that drill down to varying levels, including region, office, and individual caseworker. These reports are sent to supervisors throughout the state on a consistent basis, and enable the supervisors to view performance at the office level, as well as on an individual basis in a timely manner. This enables the supervisor to meet with caseworkers who are excelling and identify promising practices, as well as offer additional supports to staff who need it.
- *Successful Employment Outcomes- Federal Indicators 1.1 and 1.2*: While both look at cumulative successful employment outcomes, *Federal Indicator 1.1* requires the number of successful closures to increase over the prior year's performance by at least one closure. In Federal Fiscal year 2014 there were 1,704 successful closures, which therefore requires 1,705 successful closures in Federal Fiscal year 2015. Whereas *Federal Indicator 1.1* measures volume, *Federal Indicator 1.2* measures the percentage of successful closures. It requires 55.8% of cases with a developed Individualized Plan for Employment (IPE) close as 'successfully rehabilitated'. Components of Successful Rehabilitation include; employment for greater than 90 days, earnings above minimum wage, client satisfaction with job, and services which were mutually agreed upon between the client and the rehabilitation counselor in the IPE were delivered and completed.
- *Competitive Employment Wages*: The 2015 Competitive Employment Wages, which is a cumulative measure, has begun to trend lower than in 2014, with current cumulative wages at \$11.58 an hour.

Measures

- [Successful Employment Outcomes- Federal Indicator 1.1](#)
- [Successful Employment Outcomes- Federal Indicator 1.2](#)
- [Competitive Employment Wages](#)



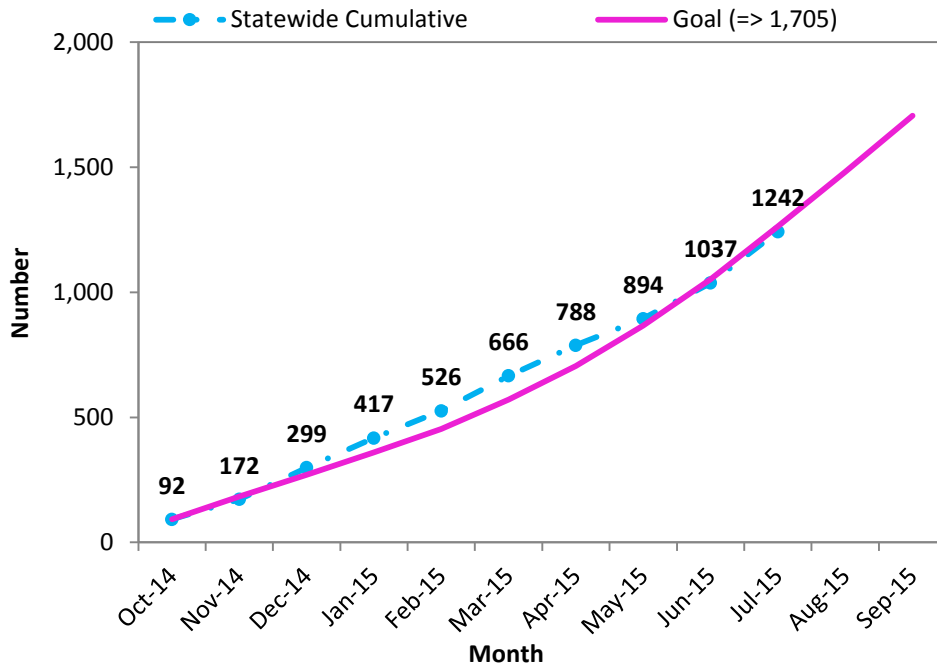
Division of Vocational Rehabilitation (DVR)

Measure: **Successful employment outcomes- Federal Indicator 1.1**

How it is measured: *Goal:* Federal Indicator 1.1 requires that DVR close the same number of cases as successfully employed as they did during the previous year (1,704) plus one more successful closure (1,705)

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

Goal: **↑1,705**



Trend: In the most recent quarter, successful employment outcomes closely followed the forecasted goal line, with performance just below the forecasted goal of 1,263 cases.



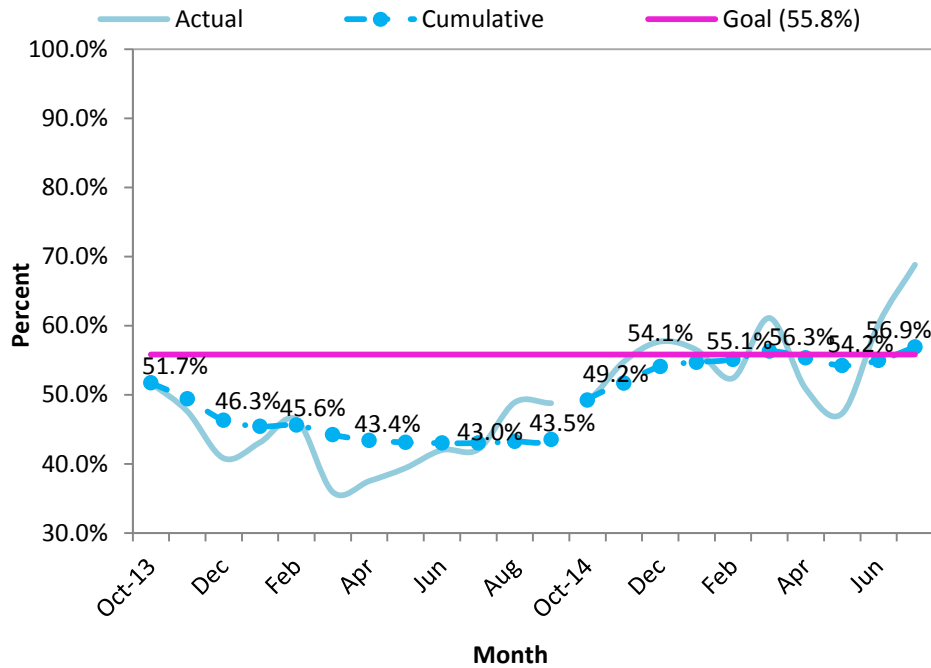
Division of Vocational Rehabilitation (DVR)

Measure: **Successful employment outcomes- Federal Indicator 1.2**

How it is measured: *Numerator:* Federal Fiscal Year cumulative number of cases closed as successfully rehabilitated. *Denominator:* Federal Fiscal Year cumulative number of cases closed after an IPE (Individualized Plan for Employment) has been established; current cumulative denominator: 2,184

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

Goal: **↑ 55.8%**



Trend: During the most recent quarter, which is cumulative (dash line), performance has remained relatively stable, and is now just above the 55.8% goal. Not only has the cumulative performance increased from the prior year, the actual monthly successful closures demonstrates greater success over the same timeframe.

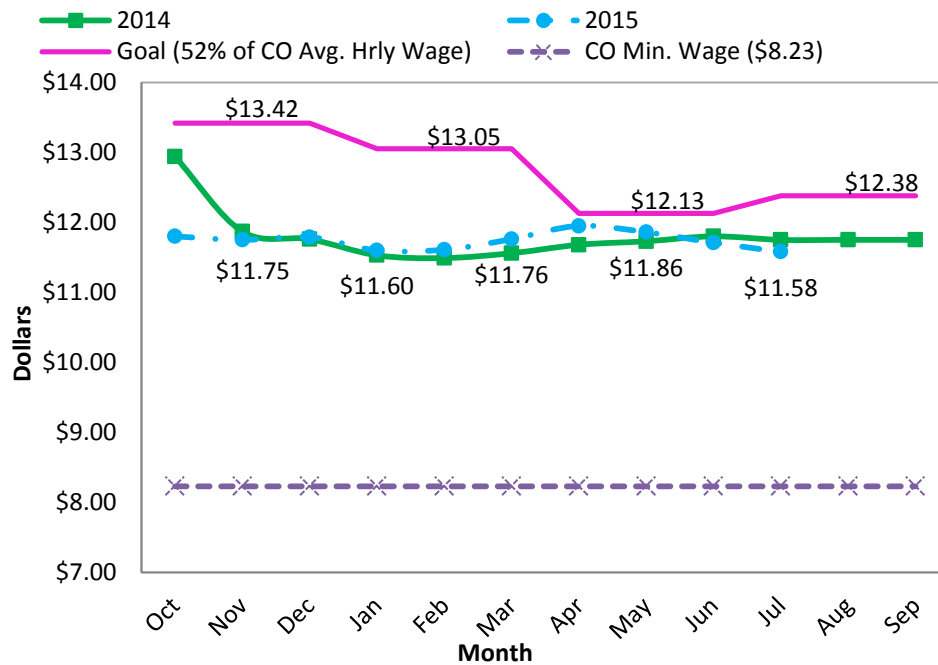
Division of Vocational Rehabilitation (DVR)

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 little variation in the overall cumulative hourly wage earned by participants, currently at \$11.58 just below the previous year at \$11.75.

Notes: As of January 1, 2015, the minimum wage in CO was raised to \$8.23/hr.

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 (DECL) and the Division of Community and Family Support (DCFS).

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 providers, Community Centered Boards (CCBs), early intervention service providers, businesses, community organizations, and other stakeholders to provide high quality early childhood programs and effective prevention strategies.

OEC provides collaborative leadership to align resources for children, families, and early childhood professionals to best prepare Coloradans for future success, through access to coordinated and quality early childhood programs and family supports.

The Office of Early Childhood identified three outcomes to align all operations and efforts:

- School Readiness – All Colorado children are ready for school when entering kindergarten.
- Safe, Stable and Nurturing Environment – All Colorado children develop positive relationships within safe and stable environments free of toxic stress.
- Resilience in Early Childhood – All Colorado children have the tools necessary to successfully adapt and overcome challenging situations and/or stressful environments.

Director: Mary Anne Snyder

Deputy Director: Brian Conly

Early Care and Learning

Summary

Description

The Division of Early Care and Learning (DECL), is the State's lead agency in planning and implementing public child care policy. The Division 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: Erin Mewhinney

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department.
 - As part of that process, the following measures were added and will be reported in the next C-Stat Quarterly Report: 1.) Increased Provider Engagement with the Colorado Shines Quality Rating and Improvement System (QRIS) and 2.) Continuity of Child Care for Children Receiving CCCAP.
 - The following measures will no longer be reported in the C-Stat Quarterly Report: 1.) Timely Supervisory Inspections, 2.) Timely Response to Serious Child Care Complaints, and 3.) Timely Monitoring Visits for Child Care Facilities Pending Adverse Action.
- *Children in the Colorado Child Care Assistance Program (CCCAP), Under the Age of Five, in Top Tier Quality Rated Facilities:* Colorado Shines, the new Quality Rating and Improvement System (QRIS), was implemented in November 2014 with the original performance goal of 31%. This goal was increased to 39% in April 2015 after achieving and exceeding the 31% goal.
 - OEC has implemented several outreach and coaching activities to ensure the 39% goal is achieved by the end of the 2015-2016 State Fiscal Year (June 30, 2015). These activities include targeting outreach to child care providers that serve large numbers of CCCAP children and engaging providers rated under the previous quality rating system (Qualistar).
- *Child Injuries in Licensed Care:* OEC completed an in-depth analysis of injuries reported between June 1, 2014 and June 19, 2015 and concluded that only 8% of licensed facilities reported an injury requiring emergency medical attention or hospitalization in the last 12 months. Despite being required to report, OEC suspects providers are under-reporting child injuries due to implementation of the new online injury reporting system (effective July 1, 2014). OEC is taking action to address this by reaching out to those providers who have not yet reported an injury in the past year.

Measures

- [Children in the Colorado Child Care Assistance Program \(CCCAP\), Under the Age Five, in Top Tier Quality Rated Facilities](#)
- [Child Injuries in Licensed Care](#)

Early Care and Learning (ECL)

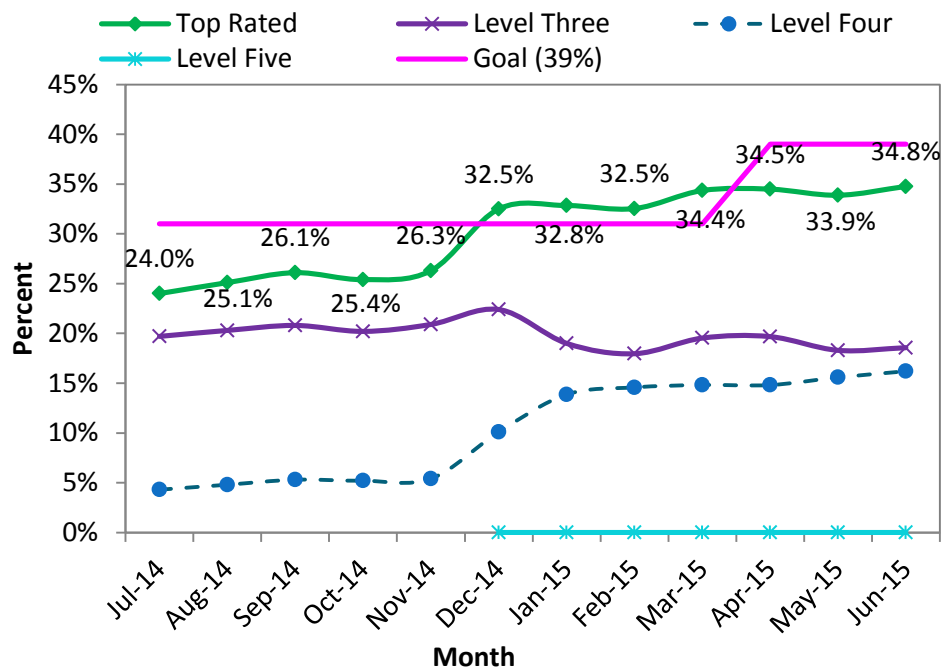
Measure: Children in the Colorado Child Care Assistance Program (CCCAP), under the age of five, in top tier quality rated facilities

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 three levels 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: 9,787

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: ↑39%



Trend: Performance in the most recent quarter remained steady, with minimum fluctuation between 33.9% and 34.8%. The goal was increased from 31% to 39% in April 2015.

Notes: Two things drive performance for this measure: the number of quality rated facilities and the number of CCCAP kids served. The lever OEC is focused on is increasing the number of high quality facilities, but CCCAP utilization also influences performance.

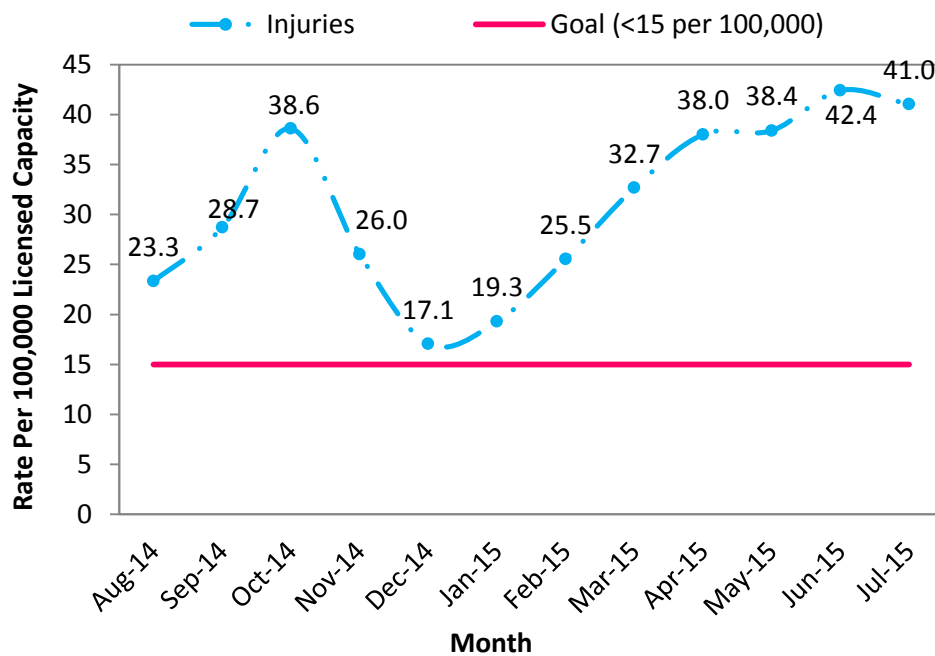
Early Care and Learning (ECL)

Measure: **Child injuries in licensed care**

How it is measured: *Numerator:* Number of children with an injury requiring emergency medical attention or hospitalization that occurred in licensed care in a given month
Denominator: Aggregate licensed capacity for facilities with an open license in a given month;
 average monthly denominator: 224,912

Why this matters: Monitoring incidence and location of child injuries in child care facilities ensures child safety.

Goal: **↓ 15 per 100,000**



Trend: Performance in the most recent quarter declined overall, going from a low of 38.4 in May 2015 to a high of 42.4 in June 2015. The goal of less than 15 injuries per 100,000 aggregate licensed capacity was not achieved.

Notes: The online child care injury reporting system was implemented in July 2014. Data are self-reported by child care providers.

Community and Family Support

Summary

Description

The Division of Community and Family Support (DCFS) 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 DCFS 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. The Division 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

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. The following measures will no longer be reported in the C-Stat Quarterly Report:
 - *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)*

Measures

- [Child Abuse Protection and Treatment Act \(CAPTA\) Referrals to Early Intervention who Complete the Eligibility Process](#)
- [Maternal Infant Early Childhood Home Visiting \(MIECHV\) Caregivers who Demonstrate Increased Knowledge of their Child's Development](#)
-

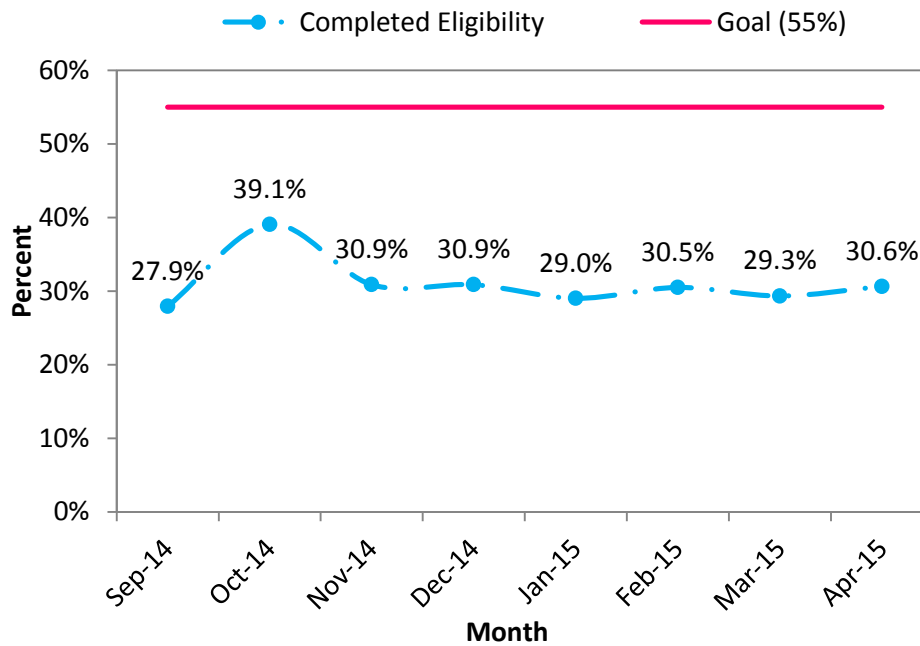
Community and Family Support (CFS)

Measure: **Child Abuse Protection and Treatment Act (CAPTA) referrals to Early Intervention (EI) who complete the eligibility process**

How it is measured: *Numerator:* Number of CAPTA referrals to EI who complete the EI eligibility process
Denominator: Number of CAPTA referrals received by EI, "Pending" statuses removed; average monthly denominator: 71

Why this matters: Research shows that children who are abused or neglected often experience physical, cognitive, emotional, behavioral, and social problems, including attachment disorders, cognitive delays, and altered brain development. Providing early intervention services to support the healthy development of young children can have positive effects that last throughout childhood and into adulthood.

Goal: **↑55%**



Trend: Performance in the most recent quarter remained steady. The 55% goal was not achieved.

Notes: The four month lag in reporting is due to an Early Intervention leadership decision to give a reasonable amount of time for children and families to get through the eligibility process. The CAPTA statute requires that all children under the age of three with a substantiated case of abuse or neglect be referred to the Early Intervention Program for developmental screening.



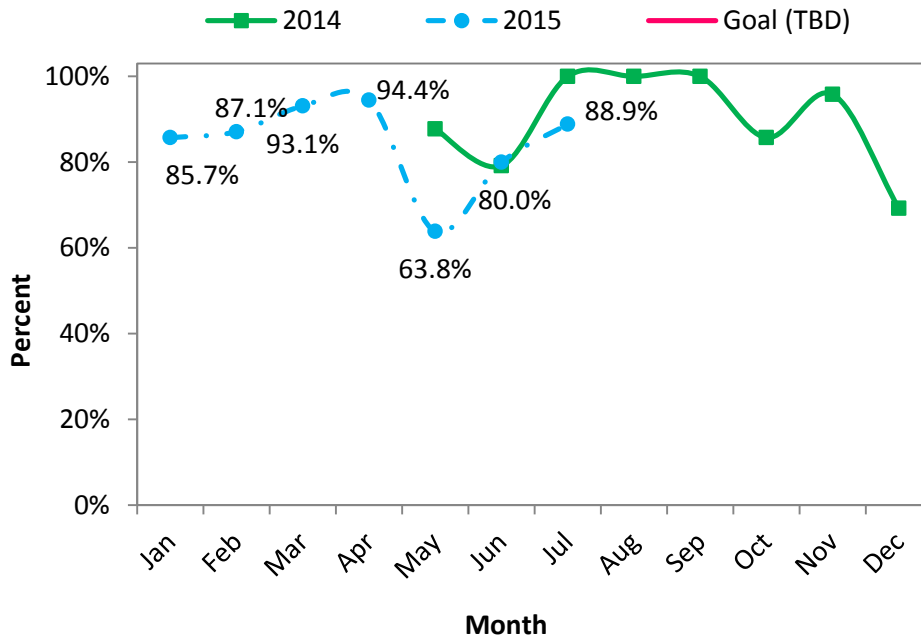
Community and Family Support (CFS)

Measure: **Maternal Infant Early Childhood Home Visiting (MIECHV) caregivers who demonstrate increased knowledge of their child’s development**

How it is measured: *Numerator:* Number of caregivers who report increased knowledge of appropriate child development after one year in MIECHV funded home visiting services
Denominator: Number of caregivers who have completed one year of MIECHV funded home visiting services; average monthly denominator: 35

Why this matters: Accurate information about child development and appropriate expectations for a child’s behavior at every age help parents see their children and youth in a positive light and promote their healthy development.

Goal: **↑TBD**



Trend: Performance in the most recent quarter improved, going from 63.8% in May 2015 to 88.9% in July 2015. A goal for this measure has not yet been established.

Notes: This measure only includes performance for two of the five MIECHV home visiting models: Healthy Steps and Parents as Teachers. Parents as Teachers (PAT) historically measured using a pre-post, but changed the measurement methodology effective in January 2015 to measure retrospectively, which is the reason for the jump between December 2014 and February 2015. The number of clients served in the Healthy Steps model are low due to new sites with clients that have not yet completed services.

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 three divisions: 1. Child Support Services (CSS), 2. Employment and Benefits Division (EBD) (Colorado Works/Temporary Assistance for Needy Families (TANF), the Colorado Refugee Services Program (CRSP), and Adult Financial Services), and 3. 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.

Director: Larry Desbian

Executive Summary

- *Percent of Child Support Collected* is the identified Wildly Important Goal (WIG) for the Office. Performance has remained steady over the past quarter.
 - The total amount of child support collected is roughly \$4 million higher than that collected in 2014.
 - Part of the stagnant performance on this measure is attributed to low-performing counties with high populations. It was learned that Mesa County specifically experienced an 84% increase in unemployment claims after a major employer left the county in February 2015.
 - The Division is working to assess counties on their daily processes that may be helping or hindering the overall dollar amounts they are able to collect each month. It is anticipated that work from these efforts will conclude in January 2016.
- The Division is in the process of implementing and monitoring the Lead Measures identified under the Four Disciplines of Execution (4DX) framework. Efforts to increase the number of Early Intervention Alerts and Verified Employment are tracked and reported in C-Stat as reference material each month.
 - Much of the early progress on the identified Lead Measures has stabilized, and the Division is looking at new measures that could help influence performance on the *Percent of Child Support Collected*. The Division is considering Lead Measures that align with Business Process Reengineering (BPR) efforts some counties have already adopted.
- The Division has continued to expand acceptance of electronic payment options for obligors. As of March 11, 2015 the Division began accepting payments through a statewide system. The process of training county staff and updating policy and procedures is ongoing.

Measures

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



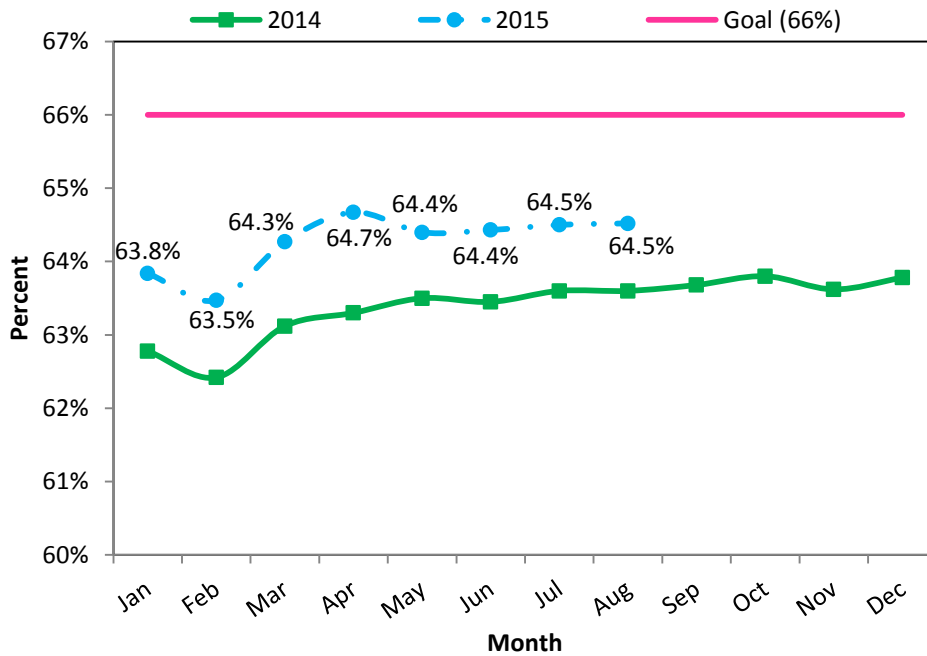
Child Support Services (CSS)

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 February 2015: \$262 million

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

Goal: **↑66%**



Trend: Performance remained relatively stable, increasing 0.1% in August to 64.5%.

Note: The goal was increased as of January 1, 2015 to 66%. The previous goal was 64.3%.



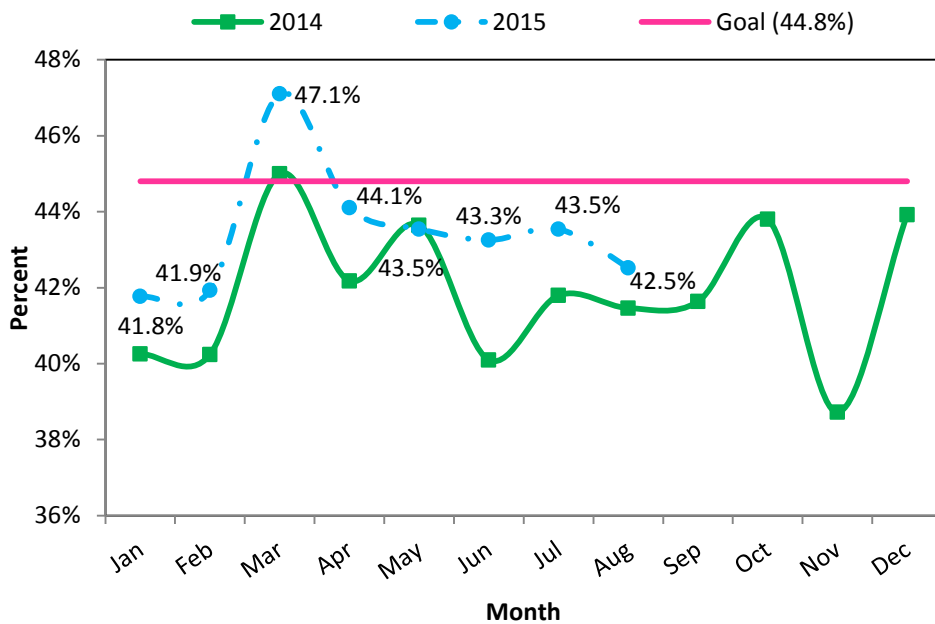
Child Support Services (CSS)

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: 106,274

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

Goal: **↑44.8%**



Trend: The most recent quarter reflects monthly fluctuation in performance. August’s rate represents the lowest performance in five months.

Employment and Benefits Division

Summary

Description:

The Employment and Benefits Division (EBD) houses the state's cash assistance programs for families and older adults, as well as the Colorado Refugee Services Program. 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. The Colorado Refugee Services Program (CRSP) exists to ensure effective resettlement of officially designated refugees and to promote refugee self-sufficiency. CRSP works through local volunteer agencies, and supports an array of activities that include resettlement, education, employment, health, legal/citizenship, financial and housing services.

Director: Katie Griego

Executive Summary

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As part of that process, the following measures were removed from C-Stat: *Timeliness of New Adult Financial Applications*, *Timeliness of New Colorado Works Applications Processed in 7-Days or Less* and *Social Security Income (SSI) Attachment*.
- Data for the numerator, denominator, and reported monthly average changed in June 2015 for a number of months as a result of corrected data. These revisions apply to the *Timeliness of New Adult Financial Applications*, *Timeliness of Redetermination Adult Financial Applications*, *Timeliness of New Colorado Works Applications*, and *Timeliness of Redetermination Colorado Works Applications* measures.
- *Timeliness of Redetermination (RRR) Adult Financial Applications* has not yet reached the goal, but has demonstrated improved performance over the previous year.
- *Adult Financial Payment Accuracy Rate* has demonstrated worsening performance since November 2014.
- *CRSP Entered Employment* has demonstrated improved performance since January 2015. The *90-Day Employment Retention* demonstrated monthly fluctuation in performance.
 - As of January 1, 2015, the Colorado Refugee Services Program (CRSP) was integrated into the Employment and Benefits Division to align programming.

Measures

- [Timeliness of New Adult Financial Applications](#)
- [Timeliness of Redetermination Adult Financial \(RRR\) Applications](#)
- [Adult Financial Payment Accuracy Rate](#)
- [Timeliness of Redetermination \(RRR\) Colorado Works Applications](#)
- [Colorado Works Payment Accuracy Rate](#)
- [Colorado Works Entered Employment](#)
- [Colorado Refugee Service Program Entered Employment](#)
- [Colorado Refugee Service Program 90 Day Employment Retention](#)



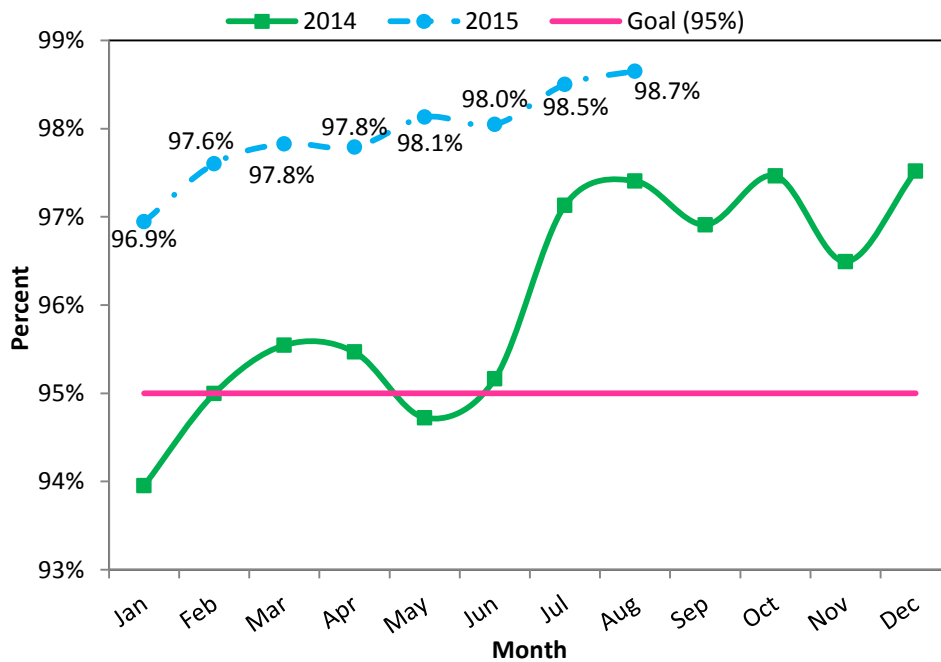
Employment and Benefits Division: Adult Financial (AF)

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

How it is measured: *Numerator:* Number of new applications processed timely (45 days for OAP and 60 days for AND)
Denominator: Number of new applications processed in the month; average monthly denominator: 2,674

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 stayed above the 95% goal for 15 consecutive months.

Note: Data for the numerator, denominator, and reported monthly average changed in July 2015 for a number of months as a result of corrected data.

Because this measure has demonstrated strong performance, it will no longer be reported in the C-Stat Quarterly Report moving forward.



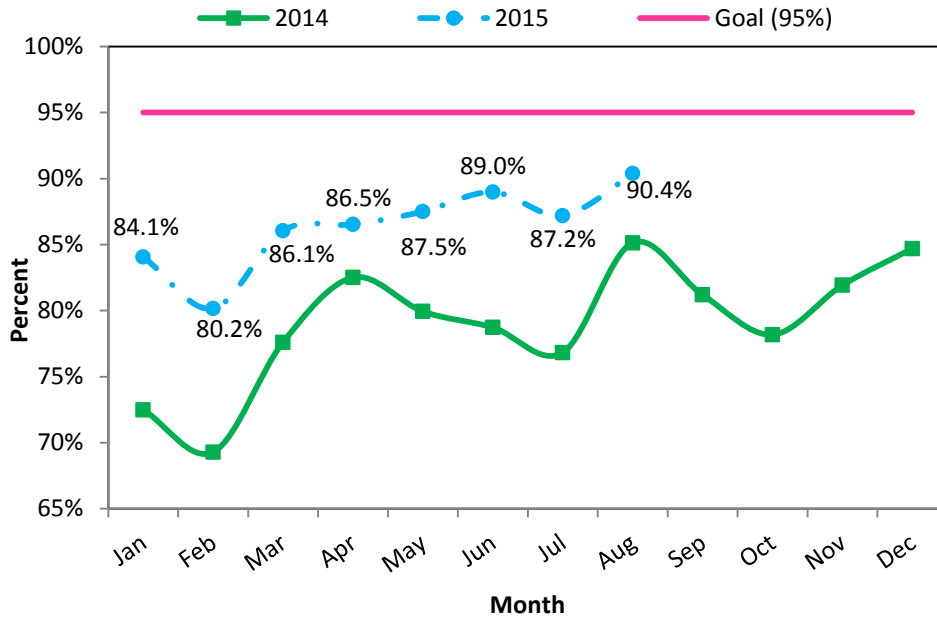
Employment and Benefits Division: Adult Financial (AF)

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: 1,161

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

Goal: **↑95%**



Trend: Performance during the most recent quarter showed monthly fluctuation.

Note: Data for the numerator, denominator, and reported monthly average changed for a number of months as a result of corrected data.



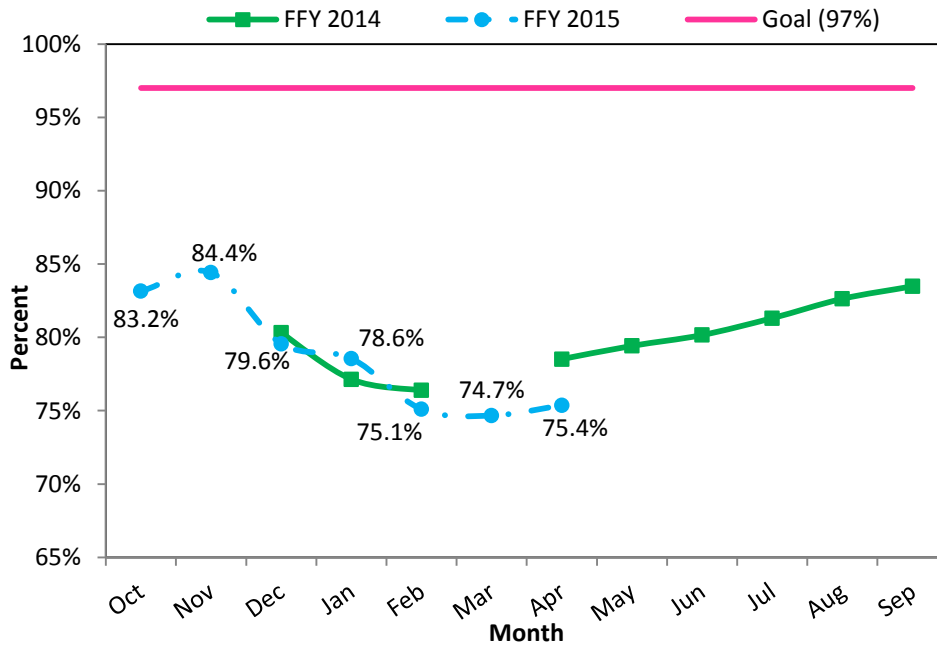
Employment and Benefits Division: Adult Financial (AF)

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; (FFY15): \$19,749

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

Goal: **↑97%**



Trend: Rates fluctuated month-to-month over the most recent quarter, and are trending in the wrong direction.

Notes: March 2014 does not have a data point, as no cases were reviewed.



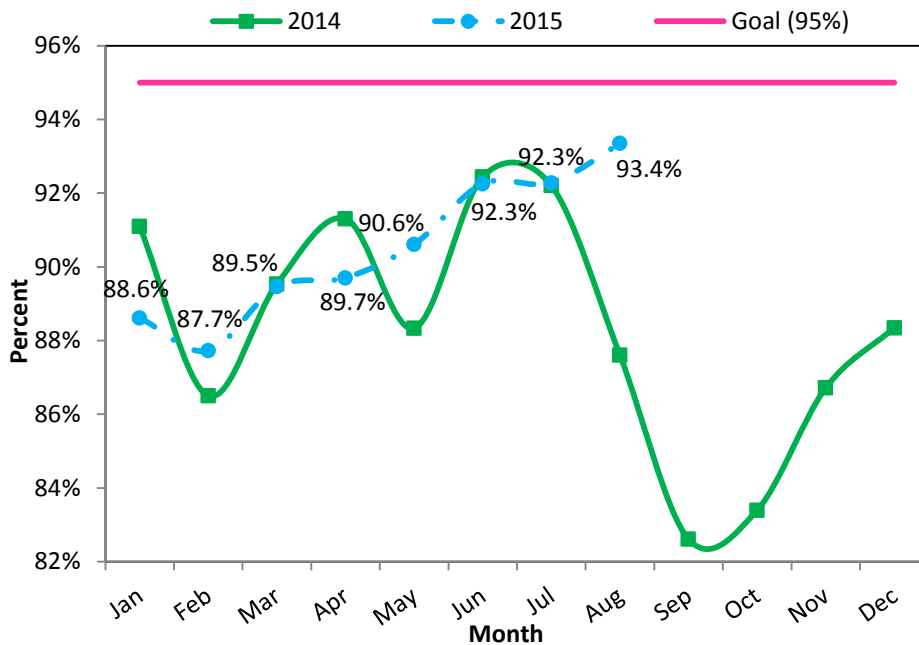
Employment and Benefits Division: Colorado Works (CW)

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

How it is measured: *Numerator:* Number of redetermination applications processed timely (60 days)
Denominator: The total number of Colorado Works RRR Applications (timely and untimely); average monthly denominator: 2,015

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: Rates have demonstrated an upward trajectory since March 2015.

Notes: Data for the numerator, denominator, and reported monthly average changed in June 2015 for a number of months as a result of corrected data.



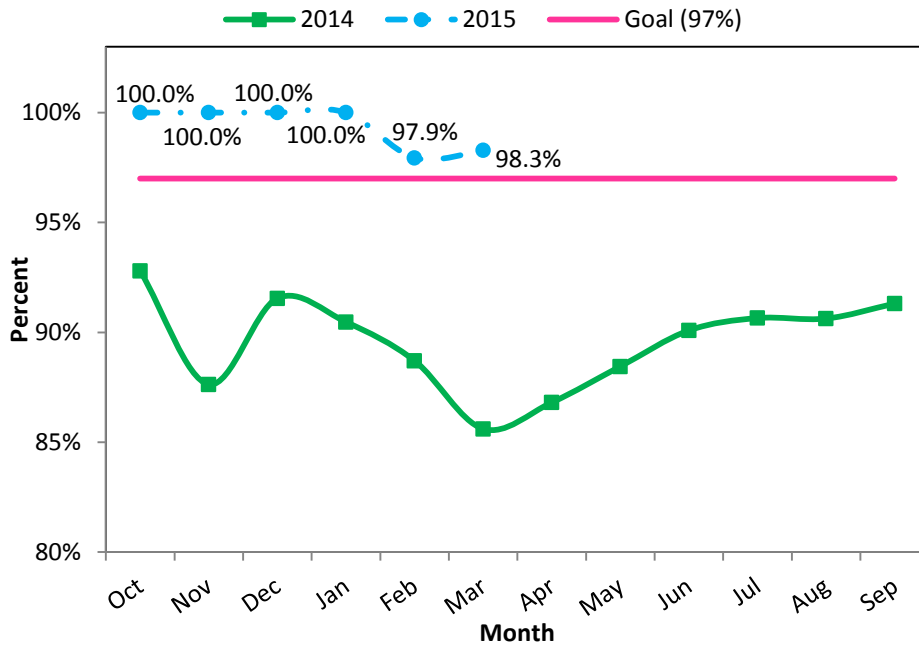
Employment and Benefits Division: Colorado Works (CW)

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; (FFY15) \$20,922

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

Goal: **↑97%**



Trend: Performance declined to 97.9% in February, but still staying above the goal for the duration of the quarter.



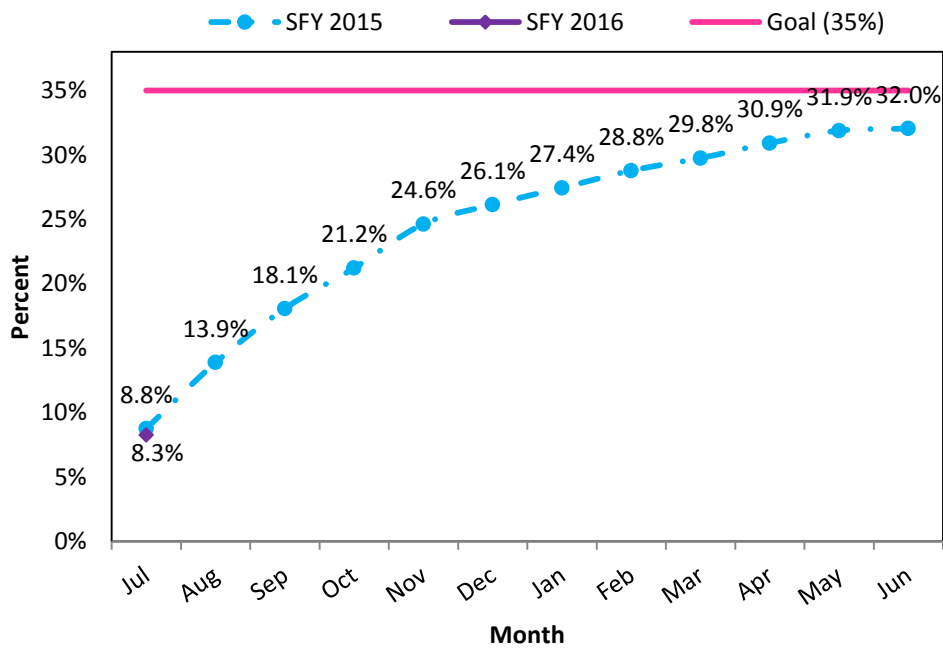
Employment and Benefits Division: Colorado Works (CW)

Measure: **Entered employment**

How it is measured: *Numerator:* Number of individuals who gained employment in the year to date
Denominator: Number of individuals enrolled in Workforce Development year to date who are not in the same employment activity continuously throughout the reporting month (i.e., not already employed); cumulative number of individuals entering employment year to date: 28,941

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

Goal: **↑35%**



Trend: Performance has continued its upward trajectory since July 2014.

Notes: Methodology for this measure changed in July 2015 for the new SFY. Please see the Executive Summary for details.

The goal for this measure was increased to 35% in July 2015. The previous goal was set at 25%.

Because this measure is cumulative, the average reported denominator represents the number of cases for SFY2015 (July 2014-June 2015). The denominator resets for July performance.

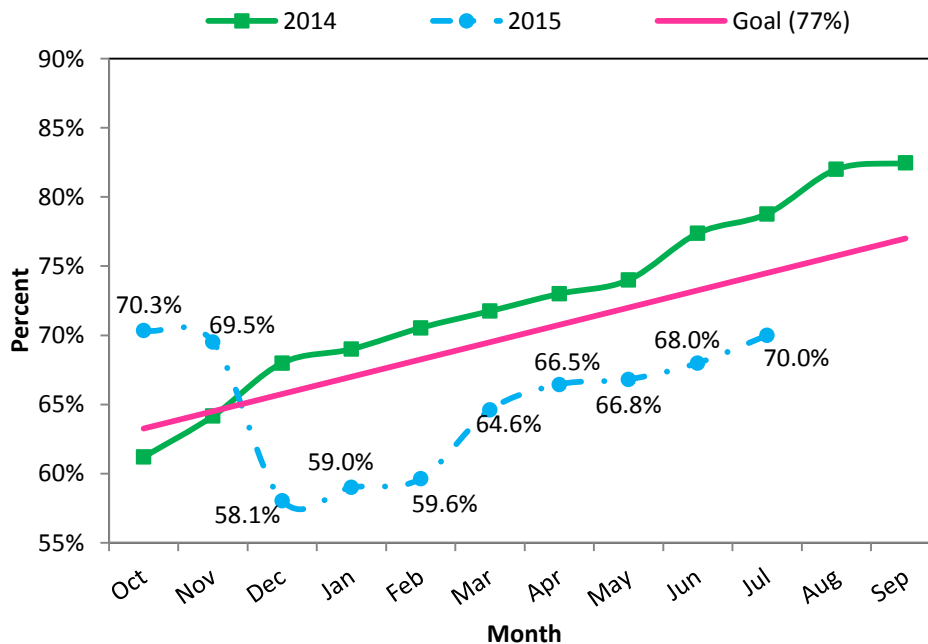
Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

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 employment services through the month; cumulative monthly denominator (October 2014-July 2015): 1,429

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

Goal: **↑77%**



Trend: Performance improved 3.5% over the past quarter.

Notes: Efforts to validate data integrity and accuracy resulted in a drop in performance in December 2014.

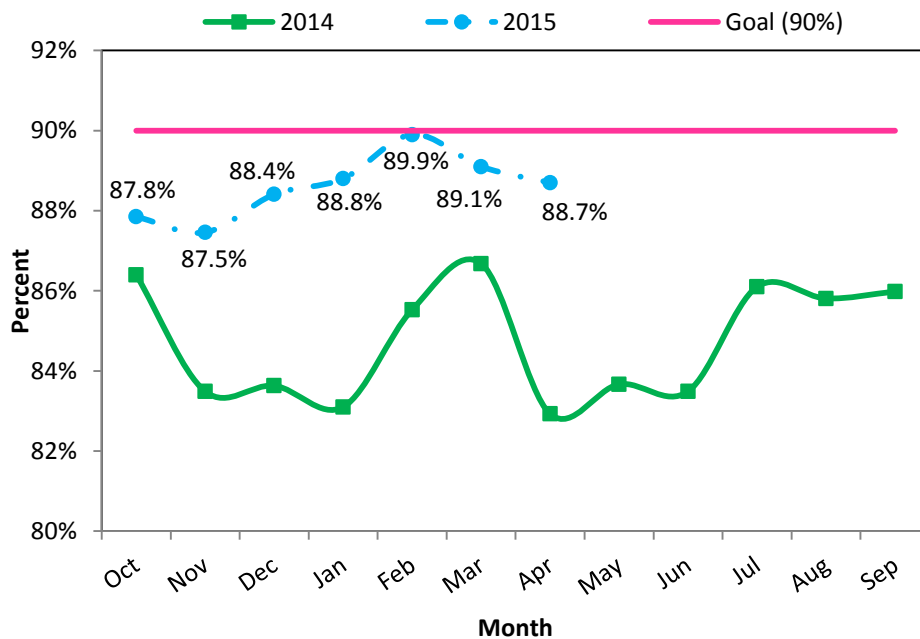
Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

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 (October 2014 – July 2015): 1,098

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

Goal: **↑90%**



Trend: The last quarter demonstrated one month of improved performance, but performance declined in March and April 2015.

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

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

- Over the past several months, the Colorado Department of Human Services (CDHS) engaged in a planning process to review all C-Stat measures and assure alignment with the most critical business functions of the department. As part of that process, the following measures were removed from C-Stat: *Timeliness of Applications Processed in 7-Days or Less*.
- Data for the numerators, denominators, and reported monthly averages changed for every month in June 2015 as a result of corrected data. Therefore, graphs presented in this Quarterly Report may not match those seen in previous reports. This applies to the *Timeliness of New Food Assistance Applications*, *Timeliness of Expedited Food Assistance Applications*, and *Timeliness of Redetermination Food Assistance Applications* measure.
- *Timeliness of New Food Assistance Applications* has been above the 95% goal for five consecutive months.
- *Timeliness of Expedited Food Assistance Applications* has continued its upward trajectory towards the goal. Although the measure has not yet reached the goal, it is demonstrating its strongest performance to date.
- *Timeliness of Redetermination (RRR) Food Assistance Applications* also saw a strong increase in performance over the last quarter, exceeding the goal in June 2015. Performance subsequently fell back below the goal, but represent an average increase of 7% over the previous quarter.
- *Food Assistance Case and Procedural Error Rate* shows a decline in performance throughout the most recent quarter.
- *Timeliness of Regular and Expedited LEAP Applications* is not reported. The LEAP season is over and new data are not being reported. The measures will be reincorporated into the C-Stat Quarterly Report that reflects October 2015 data.

Measures

- [Timeliness of New Food Assistance Applications](#)
- [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](#)



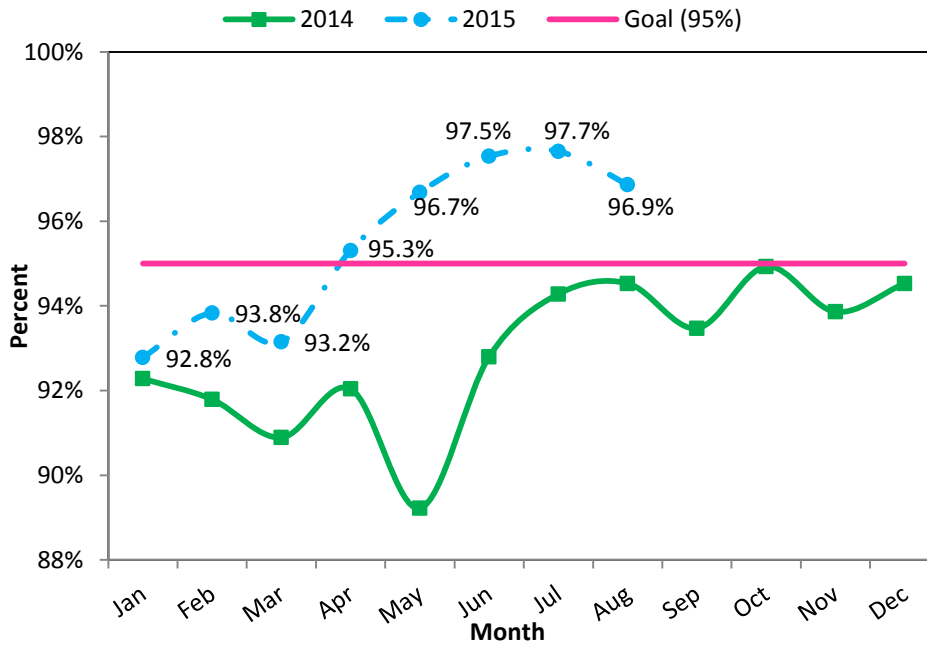
Food and Energy Assistance: Food Assistance (FA)

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: 15,543

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: **↑95%**



Trend: Performance has remained above the 95% goal for five consecutive months.

Notes: Data for the numerators, denominators, and reported monthly averages changed in June 2015 for every month as a result of corrected data.



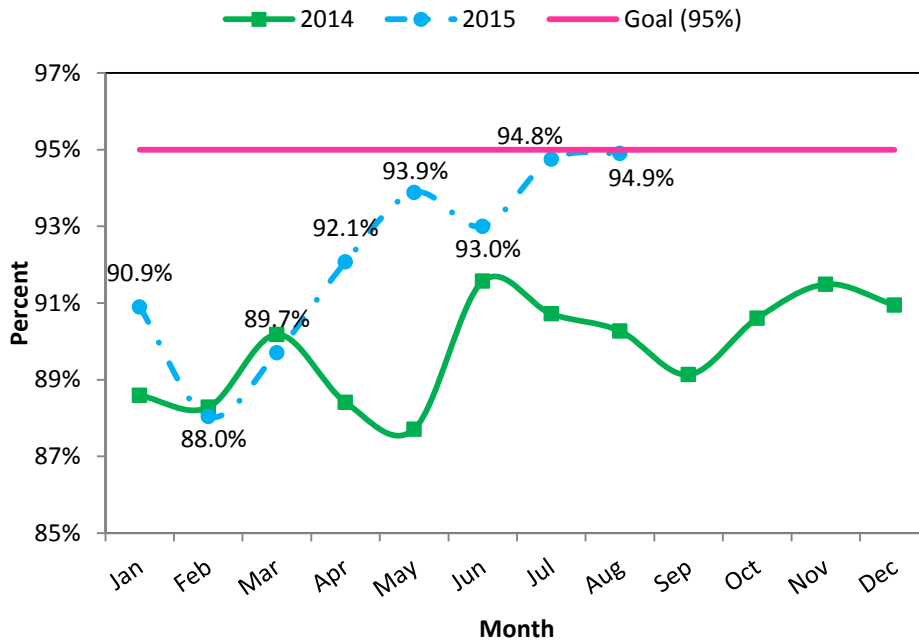
Food and Energy Assistance: Food Assistance (FA)

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: 9,534

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: **↑95%**



Trend: Although performance over the past five months represents the strongest performance to date, rates fell just below the 95% goal in the most recent quarter.

Notes: Data for the numerators, denominators, and reported monthly averages changed in June 2015 for every month as a result of corrected data.



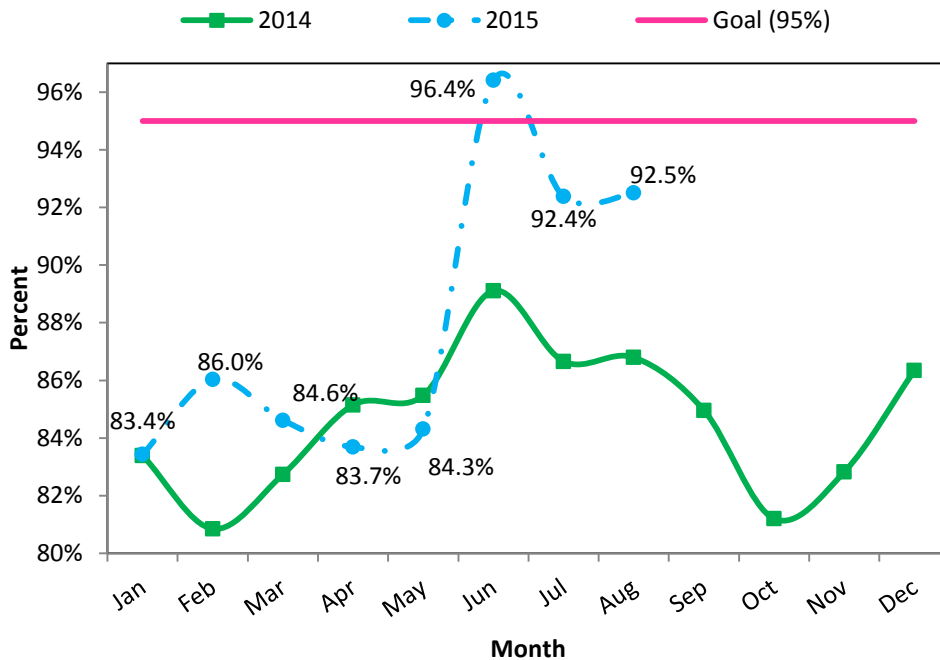
Food and Energy Assistance: Food Assistance (FA)

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: 19,281

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: The past quarter reflects ongoing monthly fluctuation. Performance in June 2015 met the goal for the first time.

Notes: Data for the numerators, denominators, and reported monthly averages changed in June 2015 for every month as a result of corrected data.



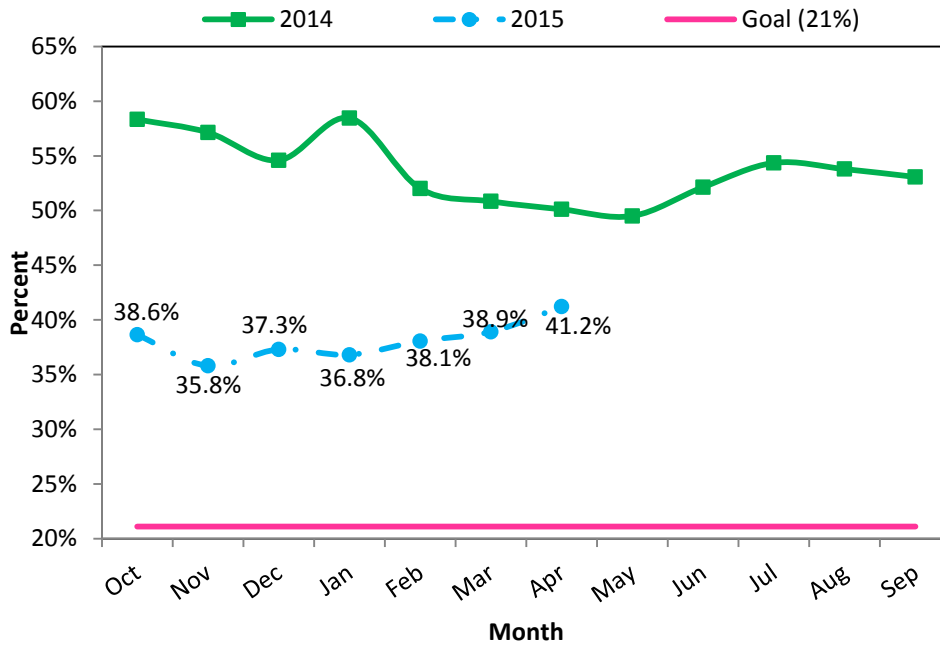
Food and Energy Assistance: Food Assistance (FA)

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 (October 2014- April 2015): 347

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

Goal: **↓**Below national average; 21% (Federal Measure)



Trend: The most recent quarter reflects three months of increased error rates.

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 have 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.



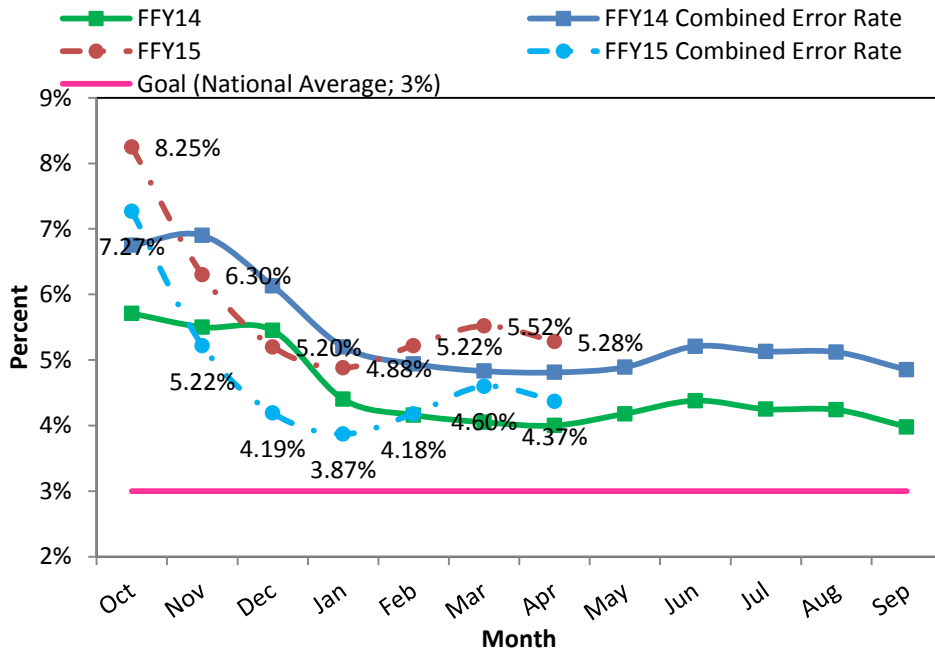
Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance payment error rate**

How it is measured: *Numerator:* Cumulative dollar amount of incorrectly authorized benefits in the sample through the month
Denominator: Cumulative dollar amount of authorized benefits sampled year to date; cumulative denominator (October 2014-April 2015): \$135,173

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

Goal: **↓**Below national average; 3% (Federal Measure)



Trend: The most recent quarter shows monthly fluctuation in performance. The goal has yet to be attained.