



## Summary Report

July – September 2016

Prepared by:  
Performance Management



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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.

### 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 31st, 2016. 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 2016 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 **Randi Bretz** at **303-866-5021** or at [randi.bretz@state.co.us](mailto:randi.bretz@state.co.us).

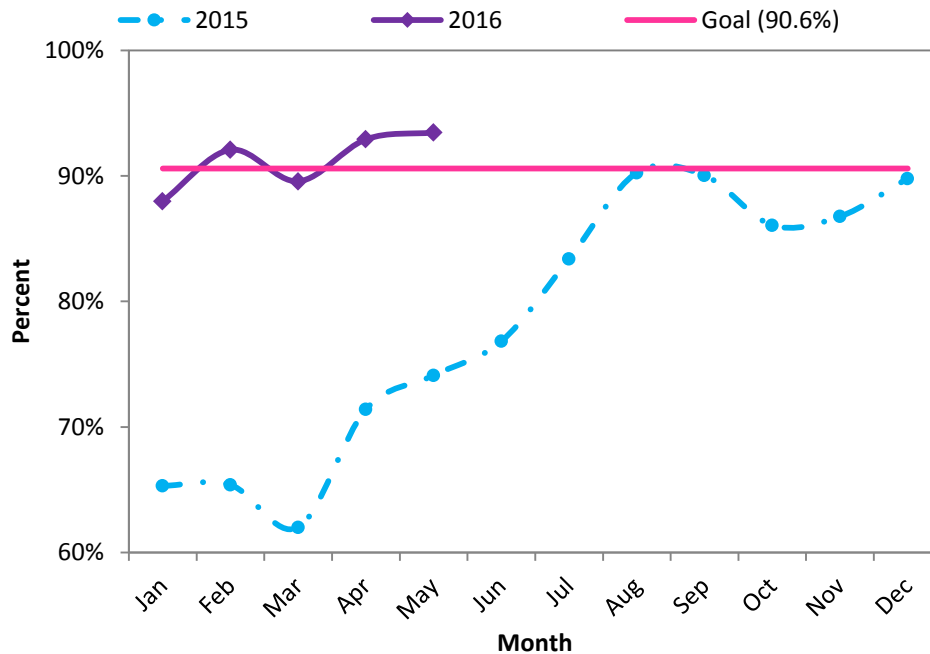
## How Do I Read This Report?

### 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. The Office of Behavioral Health 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

Acting Deputy Director: Sabina Genesio

## 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. The Division 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. The Division 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: Camille Harding

#### Executive Summary

- *Timeliness of Appointments Offered for Outpatient Substance Use Disorder Treatment:* Due to consistently high performance, this measure was moved to the CDHS C-Stat Dashboard in July 2016, therefore this measure is no longer detailed in the C-Stat Quarterly Report. The C-Stat Dashboard is distributed along with the monthly C-Stat data and reviewed by Executive Management on a monthly basis, but is not reported as a part of the C-Stat Quarterly Report.
- *Persons Reducing the Use of Substances from Admission to Discharge in Substance Use Disorder Treatment:* Performance has improved since 2012 with CBH achieving its highest performance in June 2016. In July 2016, the Performance Management Division conducted a literature review to determine an appropriate goal for this measure. The literature concluded that the reduction of substance use varies based on many factors including co-morbidity, type of drug of abuse, severity of symptoms, type and length of treatment, family and social supports, employment status, housing status, and socioeconomic status. The literature also noted that drug dependence is a life-long illness, which requires long-term care and strategies. Therefore, expectations for an individual's reduction of substance use can vary depending on many factors.
- *Mental Health Clients Engaged in Services:* The Division examined engagement data to develop an understanding regarding a decline in performance. As a result of this analysis, CBH hypothesizes that there are capacity issues within the system due to an increased volume of clients vying for the same appointments.
- *Percent of Persons who Maintained or Improved Housing while Receiving Mental Health Services:* In August 2016, the Division changed the goal from 96.5% to 91.0%.
- *Percent of Persons with Reduced Mental Health Symptoms in Mental Health Treatment:* As of August 2016, this measure is no longer monitored in C-Stat and is, therefore, no longer reported in the C-Stat Quarterly Report.
- *Number of Timely New and Renewal Licensing Decisions:* The Division established a 95% goal for this measure in September 2016. As part of this performance measure, the CBH Quality Assurance & Standards Staff have 30 days to complete a site visit and 15 days to give a two-year license/designation or a 90-day provisional license/designation.

#### Measures

- [Persons Reducing the Use of Substances from Admission to Discharge in Substance Use Disorder Treatment](#)
- [Mental Health Clients Engaged in Services](#)
- [Percent of Persons who Maintained or Improved Housing while Receiving Mental Health Services](#)
- [Timeliness of Crisis Services](#)
- [Percent of Clients with Reduced Suicidality](#)
- [Number of Timely New and Renewal Licensing Decisions](#)

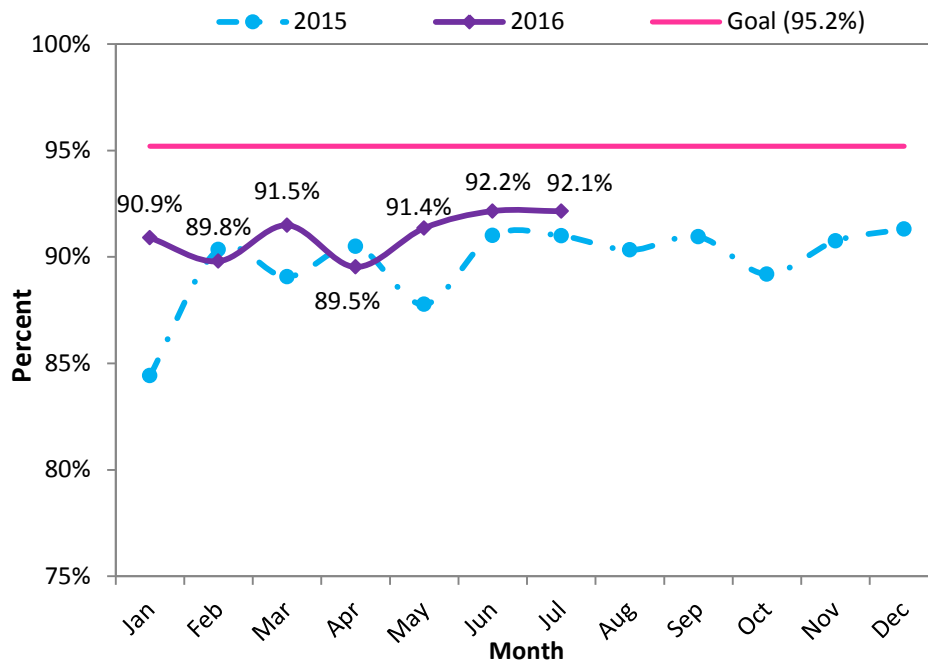
## Community Behavioral Health (CBH)

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: 815.3

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

Goal: **↑95.2%**



Trend: Performance in the most recent quarter ranged from 92.2% to 91.4%. The goal was not attained. However, Community Behavioral Health achieved its highest performance to date in June 2016 (92.2%).

Notes: All data presented are retroactively updated.

## Community Behavioral Health (CBH)

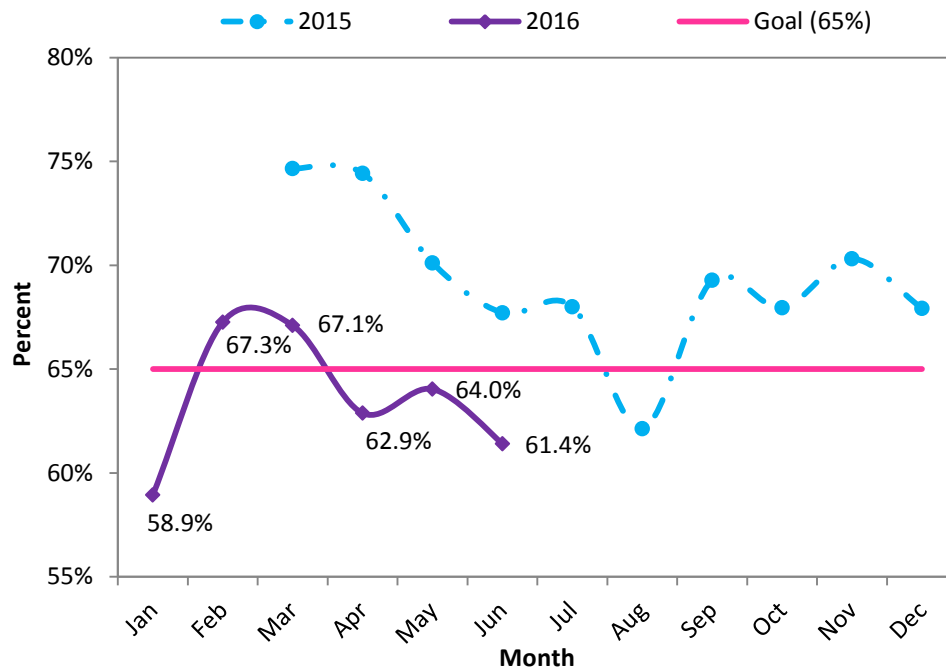
Measure: **Mental Health Clients Engaged in Services**

How it is measured: *Numerator:* Percent of clients engaged within 45 days of admit (4 qualifying services in 45 days), who also have a symptom severity of 5 or above on the Colorado Client Assessment Record (CCAR).

*Denominator:* All Admissions; average monthly denominator: 449.7

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

Goal: **↑65%**



Trend: Performance in the most recent quarter ranged from 64.0% to 61.4%. The goal was not attained.

Notes: As of June 2016, this measure includes mental health AND substance use disorder services. All data presented are retroactively updated. Data on mental health and substance use disorder services are not available until 60 days after services are received.

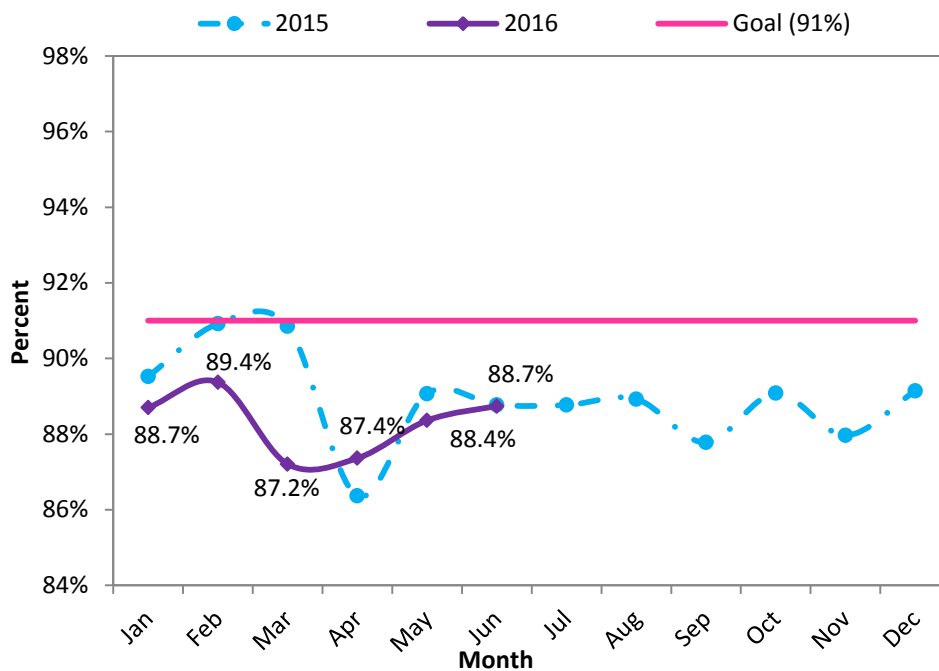
## Community Behavioral Health (CBH)

Measure: **Percent of Persons who Maintained or Improved Housing While Receiving Mental Health Services**

How it is measured: *Numerator:* Number of persons who maintained or improved their housing situation  
*Denominator:* Number of persons who discharged or had an updated Colorado Client Assessment Record (CCAR) in the month that were receiving mental health services at Time One; average monthly denominator: 1,338.0

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

Goal: **↑91%**



Trend: Performance in the most recent quarter ranged from 88.7% to 87.4%, improving each month throughout the most recent quarter. The goal was not attained.

Notes: In August 2016, the goal changed from 96.5% to 91%. All data presented are retroactively updated.

## Community Behavioral Health (CBH)

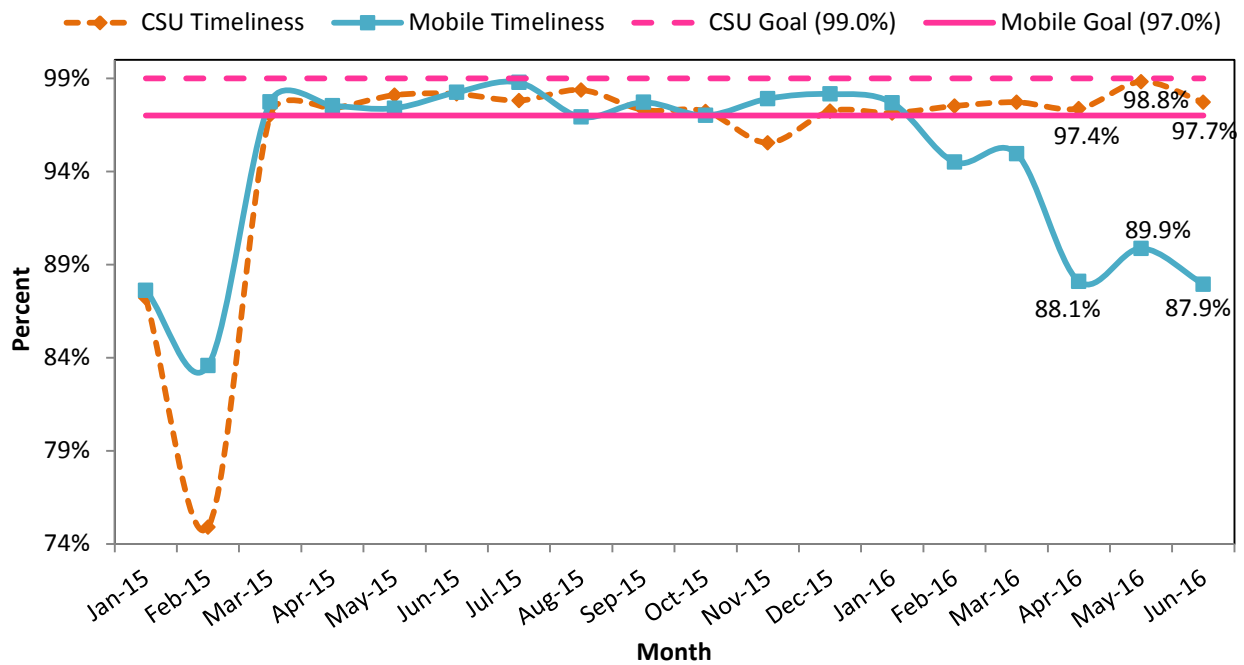
Measure: **Timeliness of Crisis Services**

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

*Denominator:* Number of individuals receiving crisis services; average monthly denominator: CSU: 648; Mobile: 1,787

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

Goal: **↑ CSU 99%, Mobile 97%**



Trend: In the most recent quarter, CSU’s timeliness ranged from 98.8% to 97.4%. The goal was not attained this quarter, though Community Behavioral Health achieved its highest performance to date in May 2016 (98.8%). Mobile’s timeliness from April-June 2016 declined when compared to January-March 2016 (the previous quarter). The goal was not attained this quarter.

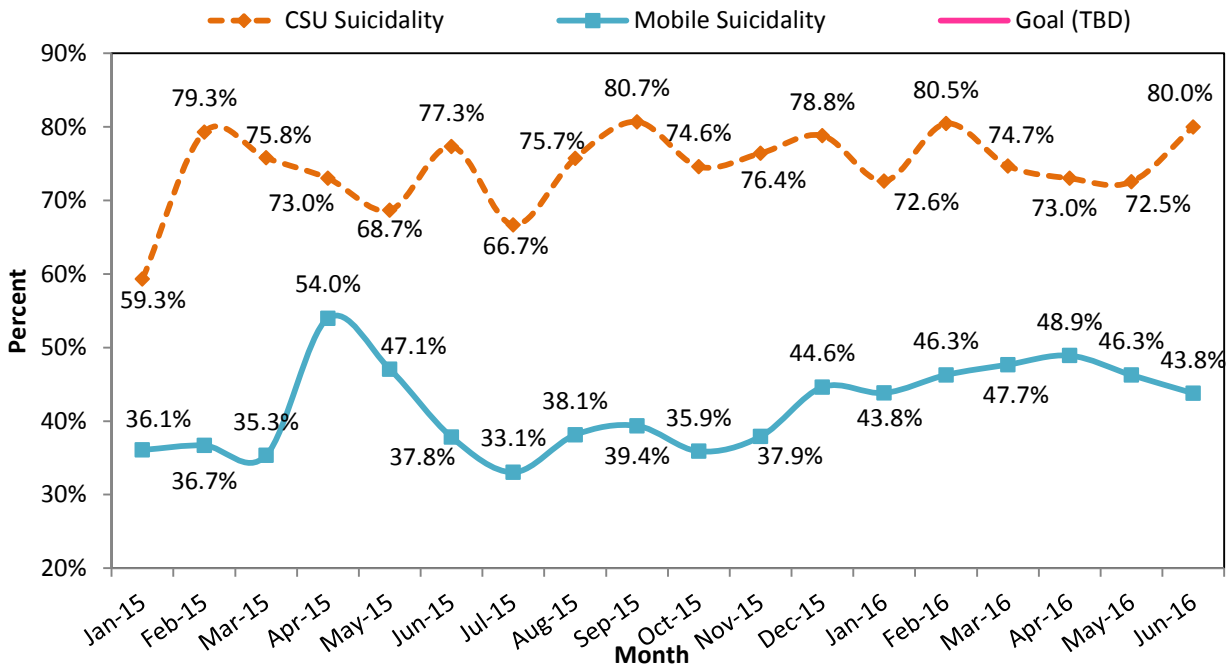
## Community Behavioral Health (CBH)

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): 326; Mobile: 917

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

Goal: **↑ TBD**



Trend: CSU performance in the most recent quarter ranged from 80.0% to 72.5%. Mobile performance in the most recent quarter ranged from 48.9% to 43.8%.

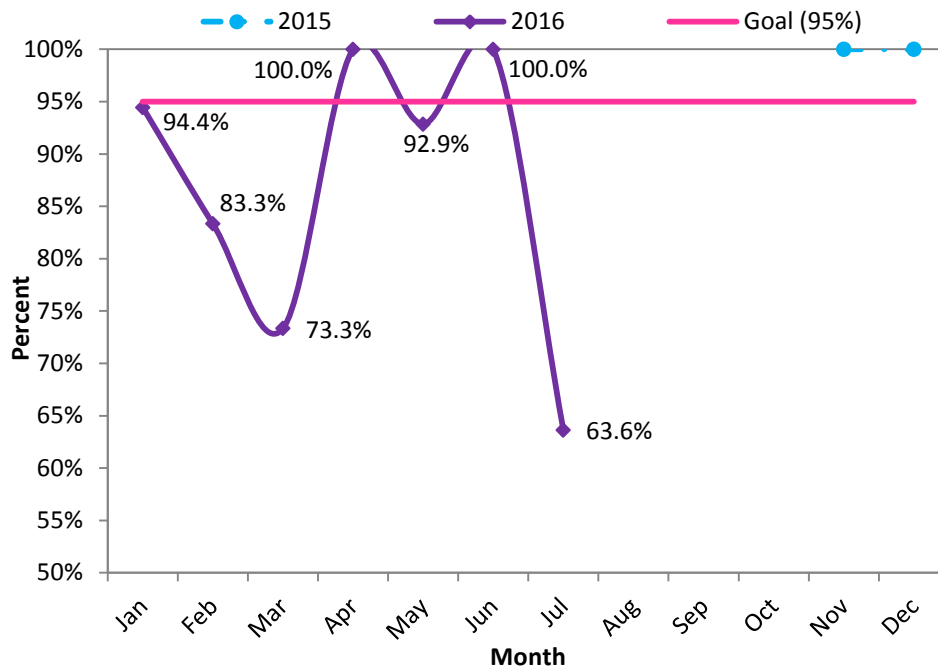
## Community Behavioral Health (CBH)

Measure: **Number of Timely New and Renewal Licensing Decisions**

How it is measured: *Numerator:* Total number of applications completed within 45 days  
*Denominator:* Total number of applications whose 45-day mark falls within a given month; average monthly denominator: 12

Why this matters: Completing licensing decisions timely allows providers to serve clients in need of treatment.

Goal: **↑ 95%**



Trend: Performance in the most recent quarter ranged from 100.0% to 63.6%. This Division’s July 2016 performance was its lowest to date (63.6%). The goal was attained in June 2016.

Notes: The 95% goal was established in September 2016.

## 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). Both Institutes 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.

The **Colorado Mental Health Institute at Fort Logan** (CMHIFL) primarily serves adult clients in the civil mental health system. Civil clients are referred for admission by the state's Community Mental Health Centers.

The **Colorado Mental Health Institute at Pueblo** (CMHIP) serves clients in the civil mental health system, as well as forensic clients. The Colorado Mental Health Institute at Pueblo'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). The Colorado Mental Health Institute at Pueblo also provides evaluations of competency to stand trial for individuals referred for evaluation by the state's courts.

Director: Dr. Kimberly Nordstrom

CMHIFL Hospital Director: David Polunas

CMHIP Superintendent: Ron Hale

#### Executive Summary:

- *Rates of Seclusion Use – Fort Logan & Pueblo:* An in-depth analysis showed that six patients used 98.62% of the seclusion hours at CMHIP in July 2016. This suggests that the rate of seclusion is primarily driven by a few select patients. Additionally, CMHIFL achieved the goal in every month this quarter.
- *Rates of Restraint Use – Pueblo:* An in-depth analysis showed that five patients used 81.28% of the restraint hours at CMHIP in July 2016. This suggests that the rate of restraint is primarily driven by a few select patients.
- *Percent of Civil Patients Ready for Discharge but Have Barriers: Fort Logan & Pueblo:* In August 2016, the Division reviewed the Absence of Benefits as a primary barrier to discharge. The Division found that patients at CMHIFL cannot receive Social Security Benefit determination until after discharge. However, community placements prefer to accept patients into their facilities after the determination of benefits has been established. The Division is working with state and federal agencies to create a process which will allow Social Security Benefit determination before discharge.

#### 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](#)

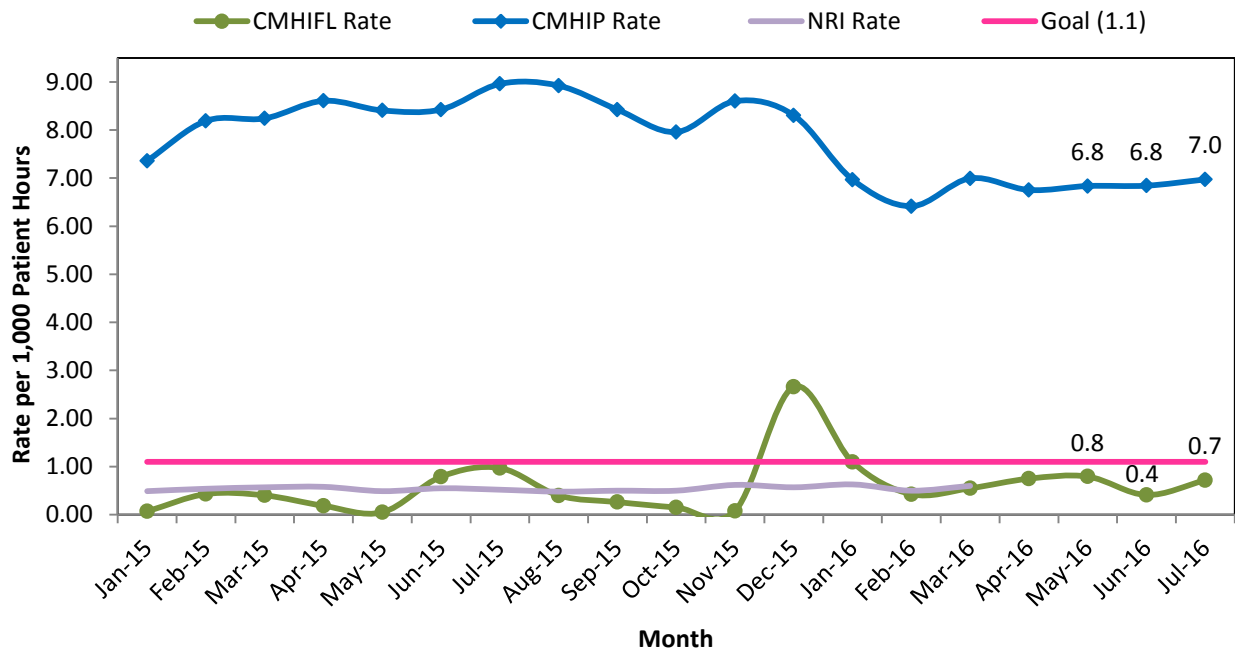
## Mental Health Institutes (MHI)

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: 66.5; Pueblo: 301.2

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 the last option used to prevent harm, and is therefore viewed by the Institutes as a treatment failure.

Goal: **↓ 1.1**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 0.8 to 0.4, attaining the goal each month this quarter. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 7.0 to 6.8. The goal was not attained.

Notes: The NRI rate 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).

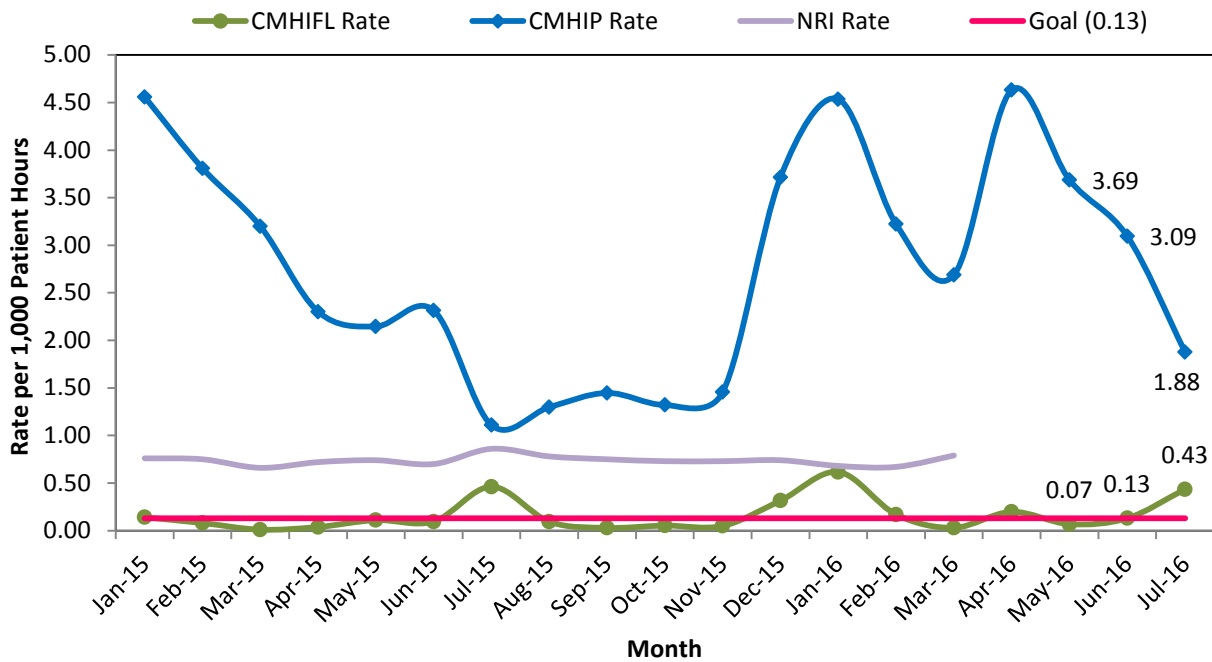
## Mental Health Institutes (MHI)

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: 66.46; Pueblo: 301.21

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 the last option used to prevent harm, and is therefore viewed by the Institutes as a treatment failure.

Goal: **↓ 0.13**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 0.43 to 0.07. The Colorado Mental Health Institute at Fort Logan met the goal in two out of three months this quarter. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 3.69 to 1.88. The goal was not attained.

Notes: The NRI rate 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).

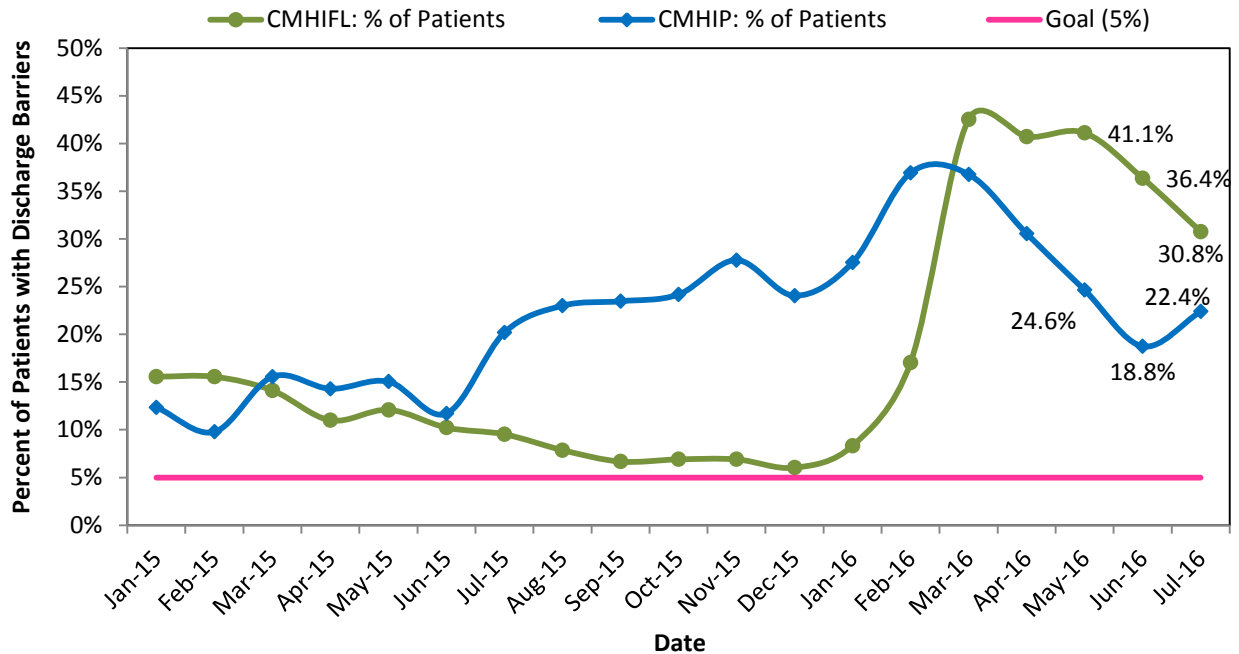
## Mental Health Institutes (MHI)

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 to placement in the community  
*Denominator:* Current number of civil patients; average monthly denominator: Fort Logan: 89.7; Pueblo: 66.7

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

Goal: ↓ 5%



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 41.1% to 30.8%. The Colorado Mental Health Institute at Pueblo’s performance (CMHIP) in the most recent quarter ranged from 24.6% to 18.8%. The goal was not met by either Institute throughout the quarter.

Notes: Last quarter, the Institutes created consistent criteria for the Discharge Barriers List resulting in increased numbers of patients on the list beginning in February 2016.

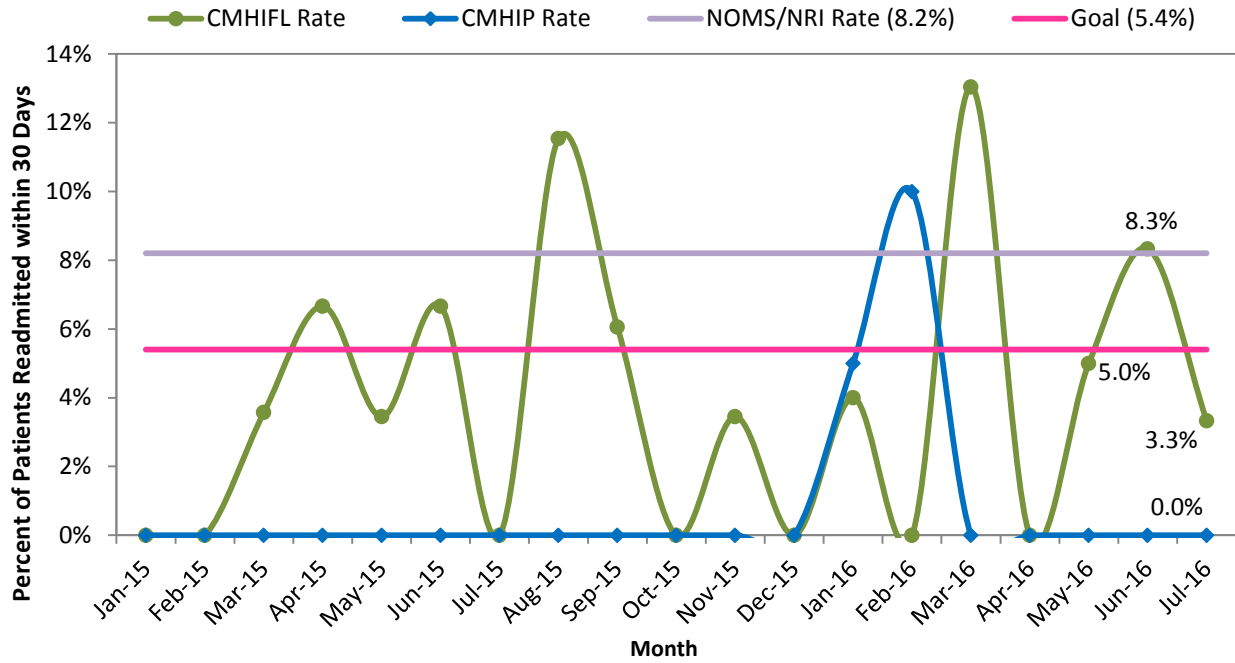
## Mental Health Institutes (MHI)

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: 24.7; Pueblo: 10.3

Why this matters: A rapid readmission may reflect a failure of continuity of care following discharge, resulting in a patient suffering decompensation and subsequent need for hospitalization.

Goal: **↓5.4%**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 8.3% to 3.3%. The goal was met in two out of three months. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter remained at 0.0%. The goal was met throughout the quarter.

## Mental Health Institutes (MHI)

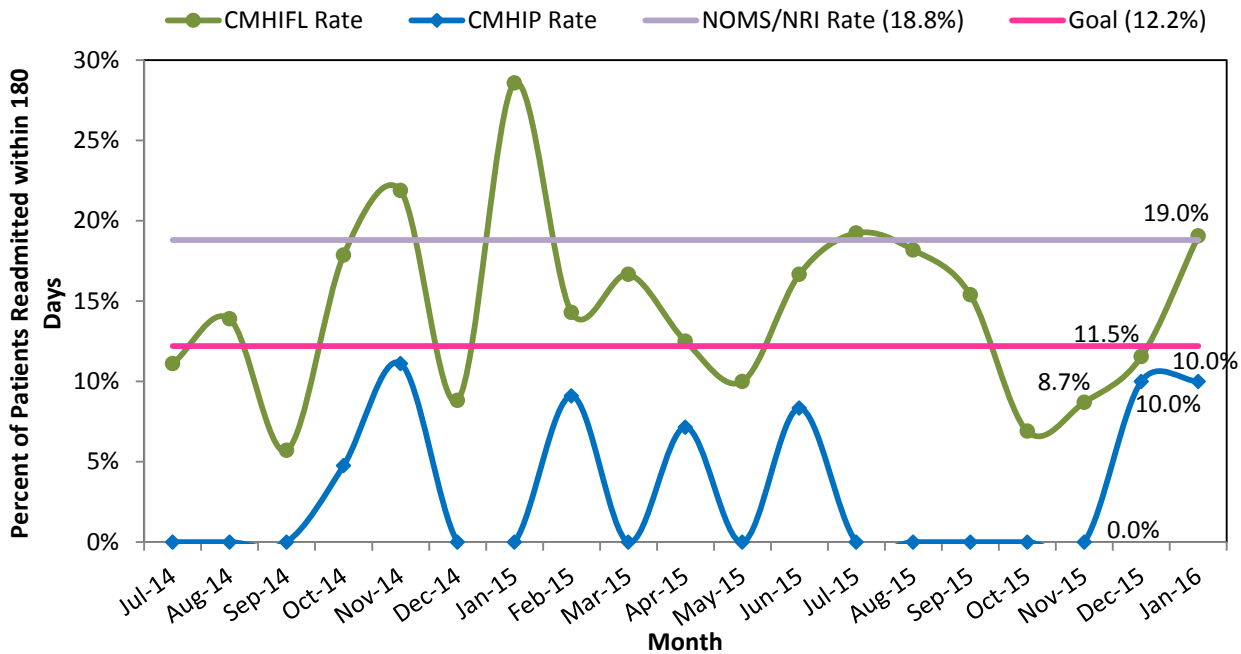
Measure: **Percent of 180-Day Readmissions – Fort Logan & Pueblo**

How it is measured: *Numerator:* Number of Civil patients readmitted within 180 days, based on those discharged in the reporting month

*Denominator:* Number of Civil patients discharged in the reporting month; average monthly denominator: Fort Logan: 23.3; Pueblo: 15.0

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 decompensation and subsequent need for hospitalization.

Goal: **↓12.2%**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 19.0% to 8.7%, declining throughout the quarter. The Colorado Mental Health Institute at Pueblo’s performance in the most recent quarter ranged from 10.0% to 0.0%. The goal was met throughout the quarter.

Notes: As of June 2016, data are now based on one month of discharges (the denominator) and how many of those patients readmitted within 180 days (the numerator). Due to this change, data is reported eight months in arrears.

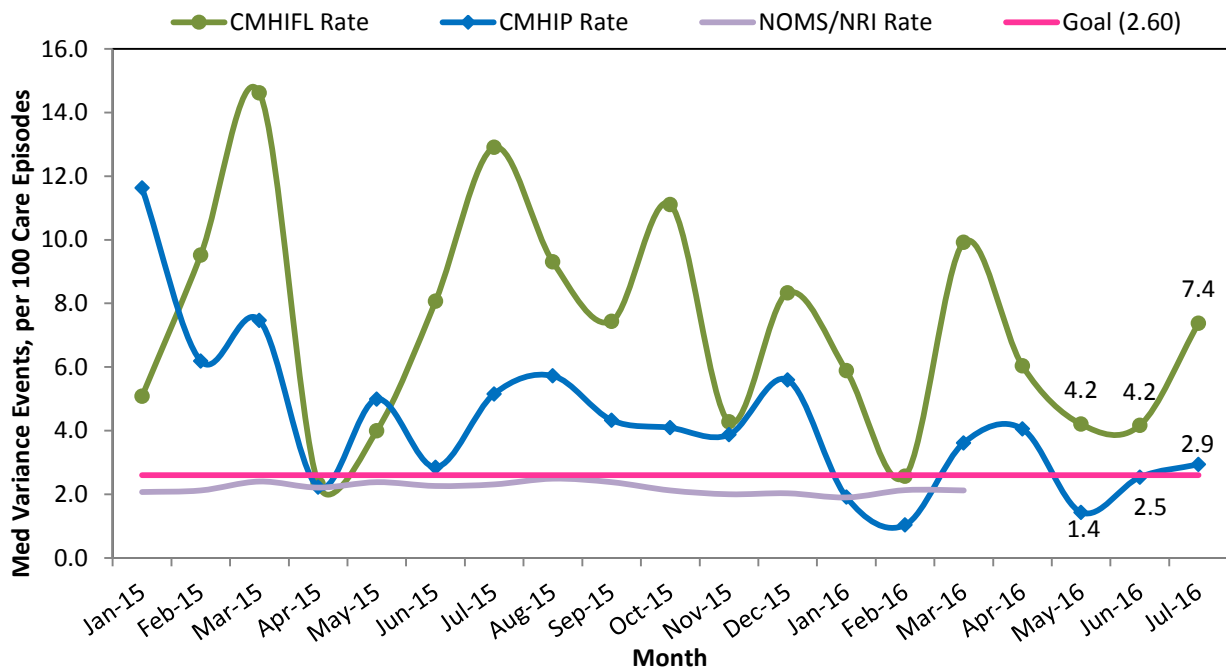
## Mental Health Institutes (MHI)

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: 1.2; Pueblo: 4.8

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

Goal: **↓2.60**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 7.4 to 4.2. The goal was not met throughout the quarter. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 2.9 to 1.4. The goal was met in two out of three months (May and June 2016).

## 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 which are paramount in addressing the needs of juvenile offenders.

Director: Robert Werthwein

Deputy Director: Luis Guzman

## 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

- Several DCW measures reflect data that is collected via Results Oriented Management (ROM), which is a web-based data management reporting system developed and maintained by the University of Kansas. As a result, Colorado counties can view performance at the state aggregate and county level by visiting <http://www.cdhsdatamatters.org>. Measures that utilize ROM include: *Timeliness of Initial Response to Abuse/Neglect Assessments*, *Compliance with the Statutory Requirement Related to Timeliness of Assessment Closure*, *Maltreatment in Out-of-Home Care*, *Placement Stability for Children in Out-of-Home Care*, and *Children Who Re-Enter Care within 12 Months*.
- *Timeliness of Initial Response to Abuse/Neglect Assessments*: Performance on this measure is at an all-time high, with three consecutive months above the goal. More importantly, performance for the Immediate Response type was above the 90% goal for the last two months. Immediate Responses represent those cases that are potentially more egregious in nature or in which a youth or child is particularly vulnerable.
- *Maltreatment in Out-of-Home Care*: The Division reviewed a generalizable sample of maltreatment in out-of-home care cases in an effort to identify the incident date. In a number of cases, DCW identified that the maltreatment occurred prior to the child being placed in out-of-home care as opposed to during the out-of-home care episode. Once accounting for incident date, performance on this measure improves greatly. Thus, DCW is working to account for incident date in Trails (the Division's case management and data reporting system).
- *Placement Stability for Children in Out-of-Home Care*: Due to consistently strong performance, this measure was moved to the CDHS C-Stat Dashboard in August 2016. Therefore this will be the last time this measure is detailed in the C-Stat Quarterly Report. The CDHS C-Stat Dashboard is distributed along with the monthly C-Stat data and reviewed by Executive Management on a monthly basis, but is not reported as a part of the C-Stat Quarterly Report.
- *Children Who Re-Enter Care within 12 Months*: The Division created a Permanency Taskgroup last year in an effort to work on improving permanency outcomes for children and youth. This group has begun focusing their efforts on utilizing permanency supports as a method for improving reunification of child and family and reducing child re-entry into out-of-home care.

#### Measures

- [Timeliness of Initial Response to Abuse/Neglect Assessments](#)
- [Compliance with the Statutory Requirement Related to Timeliness of Assessment Closure](#)
- [Maltreatment in Out-of-Home Care](#)
- [Placement Stability for Children in Out-of-Home Care](#)
- [Children Who Re-Enter Care within 12 Months](#)
- [Children in Congregate Care](#)

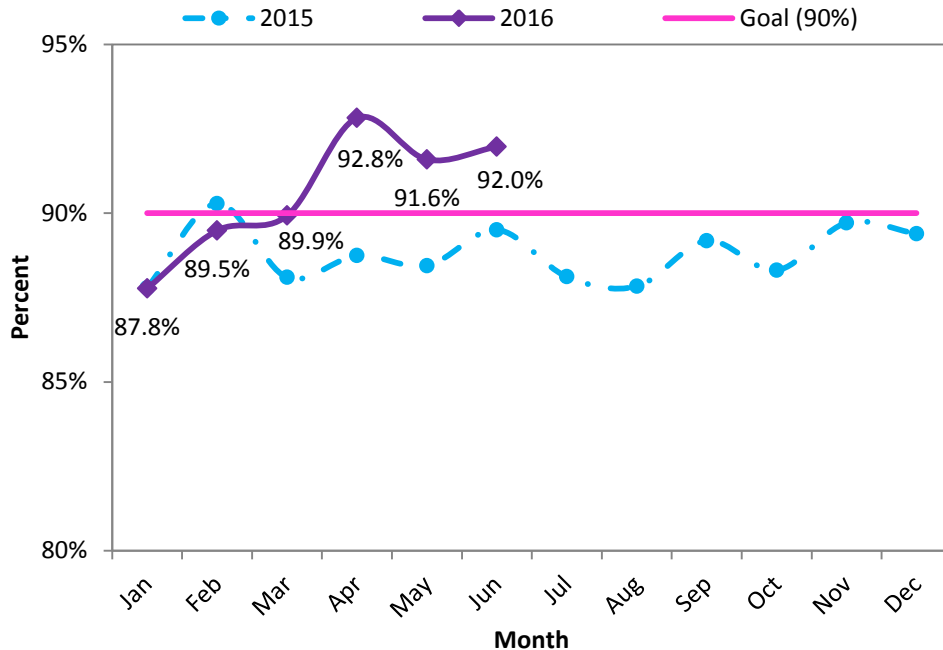
## Division of Child Welfare (DCW)

Measure: **Timeliness of Initial Response to Abuse/Neglect Assessments**

How it is measured: *Numerator:* Number of alleged victims with a timely face-to-face contact or attempted contact as set in rule (Volume 7); timely is based on the assigned response time frame (Immediate, 3-Day, 5-Day)  
*Denominator:* Number of alleged victims with a child protection assessment opened in the specified month (both Traditional and Family Assessment Response); average monthly denominator: 4,445

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

Goal: **↑ 90%**



Trend: The Division’s performance in the most recent quarter improved, attaining the goal for all three months within the quarter (April-June 2016).

Notes: Due to caseworker data entry timeframes, this measure is reported three months in arrears.

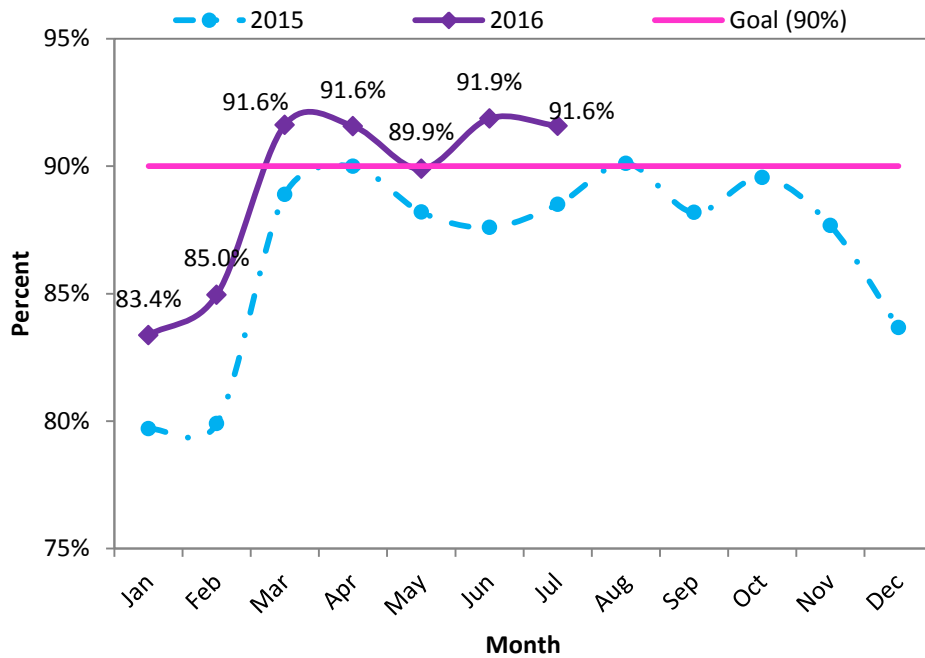
## Division of Child Welfare (DCW)

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 due to close during the specified month (both Traditional and Family Assessment Response); average monthly denominator: 3,042

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: The Division of Child Welfare has met the goal for the last two months (June and July 2016) of the most recent quarter, demonstrating an improvement when compared to this same quarter in 2015.



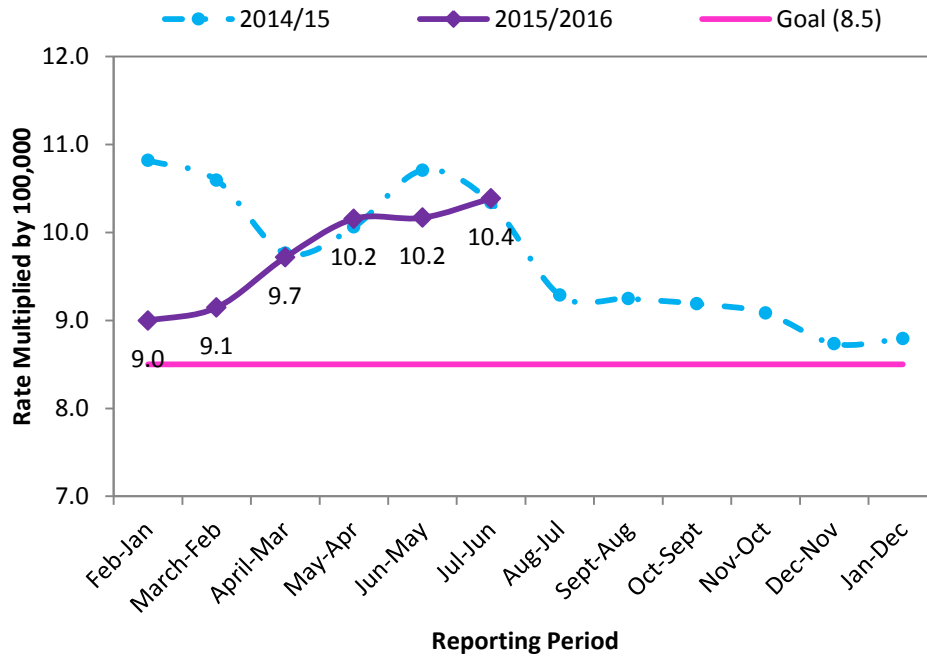
### Division of Child Welfare (DCW)

Measure: **Maltreatment in Out-of-Home Care (Federal Measure)**

How it is measured: *Numerator:* The total number of substantiated or indicated reports of maltreatment during a foster care episode within a 12-month period  
*Denominator:* Of the children in foster care during a 12-month period, the total number of days these children were in foster care as of the end of the 12-month period; average reporting period denominator: 1,712,810

Why this matters: When children are in out-of-home care they deserve to be safe and free of maltreatment.

Goal: **↓ 8.5**



Trend: The Division’s performance worsened in the most recent quarter when compared to the last quarter. The goal was not met this quarter.

Notes: The rate is multiplied by 100,000.

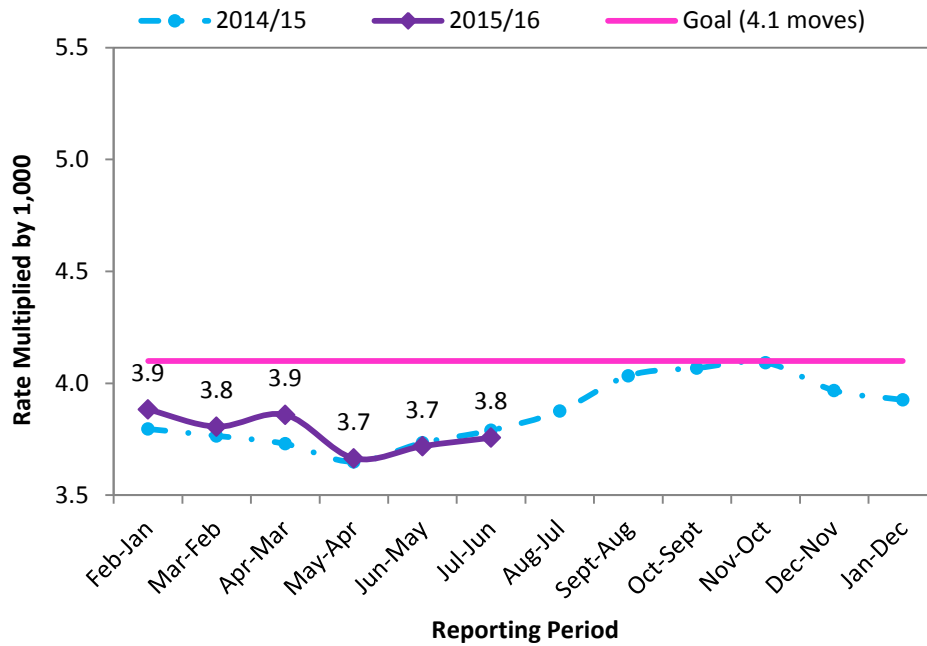
## Division of Child Welfare (DCW)

Measure: **Placement Stability for Children in Out-of-Home Care (Federal Measure)**

How it is measured: *Numerator:* Number of placement moves for children in out-of-home care  
*Denominator:* Total number of out-of-home days for children in out-of-home care within a 12-month period; average reporting period denominator: 633,212

Why this matters: Placement stability is important for children to develop healthy secure relationships and serves to reduce the potential stressors that arise from being displaced multiple times.

Goal: **↓ 4.1 moves**



Trend: The Division has consistently met the goal each month for the last 18 months.

Notes: The rate is multiplied by 1,000.

## Division of Child Welfare (DCW)

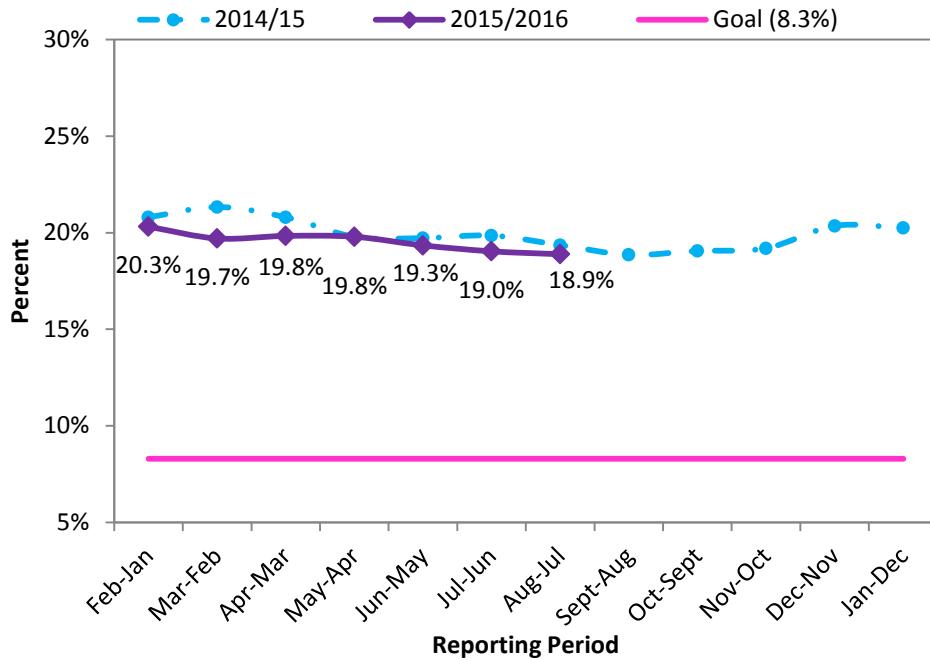
Measure: **Children who Re-Enter Care within 12 Months (Federal Measure)**

How it is measured: *Numerator:* The number of children who re-entered care within 12 months of discharge from out-of-home care

*Denominator:* Number of children entering out-of-home care in a 12-month period; average reporting period denominator: 2,206

Why this matters: Children deserve to remain in a safe and stable environment.

Goal: **↓ 8.3%**



Trend: Performance remained stable throughout the last 19 months, with very little fluctuation. The goal has yet to be achieved for this measure.

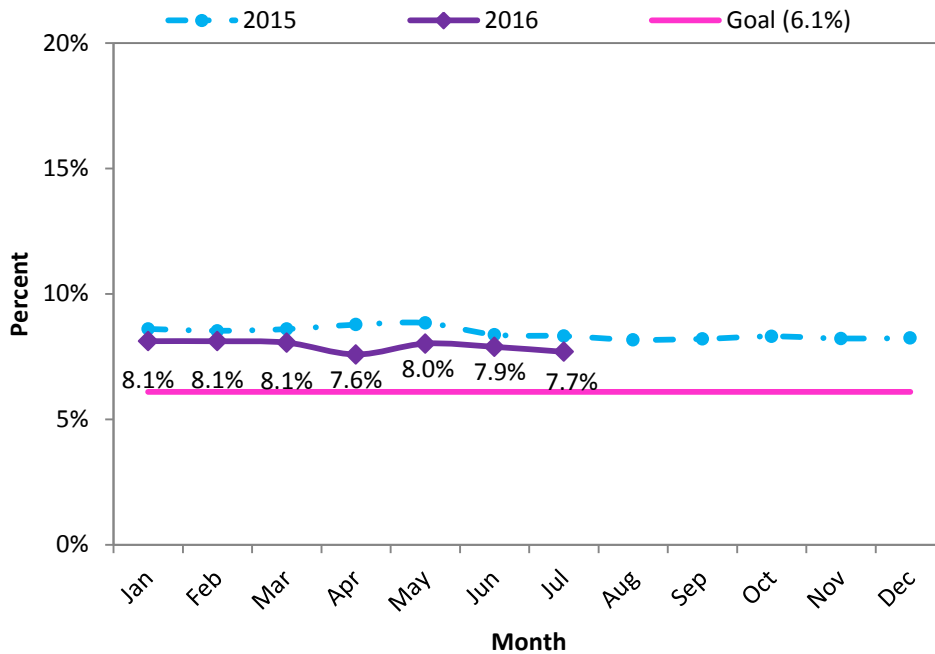
## Division of Child Welfare (DCW)

Measure: **Children in Congregate Care**

How it is measured: *Numerator:* Average daily population in congregate care  
*Denominator:* Average daily population served by child welfare (in-home and out-of-home); average monthly denominator: 11,374

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: **↓ 6.1%**



Trend: The Division’s performance remained steady throughout the most recent quarter with a slight improvement over the past 16 months.

## Division of Youth Corrections

### Summary

#### Description

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

Interim Director: Anders Jacobson

#### Executive Summary

- *Eligible Youth Who Have a GED or High School Diploma by Discharge:* After months of varied performance below the goal, this measure has been returned to the C-Stat slide deck for more focused and continued monitoring. The Division is continuing to explore methods to ensure success on this measure, including exception analyses each month on those youth who did not attain their GED or diploma by discharge.
- *Committed or Detained Youth Who Escape or Walkaway:* The Division's Provider Workgroup continues to discuss the walkaway intervention strategies providers have found to be successful (e.g., youth-written commitment to not run, youth-driven run-prevention interventions, heightened attention to youth's historical run information, etc.) in an effort to reduce the number of youth escapes/walkaways.
- *Timely Initial Placement for Committed Youth:* The Division continues to experience waitlists at state-secure facilities as the number one cause of delayed initial placements. The Division is working to explore solutions to the lack of capacity in state-secure facilities and how to best resolve this issue.
- *Youth Injuries in DYC State-Secure Facilities:* An in-depth review of youth injuries completed in July 2016 demonstrated that 56.2% of youth injuries are the result of an aggressive act by the youth, 37.5% of youth injuries are the result of self-harm, and 6.3% of youth injuries are the result of an accident. The Division's Behavioral Health Management Team will continue to closely monitor and discuss self-inflicted injury prevention and behavioral regulation strategies with youth. Behavioral Health and facility staff will maintain focus on teaching youth emotional regulation, frustration tolerance, and conflict resolution skills. Additionally, DYC has decided to work to modify Trails (the Division's case management and data reporting system) to include the option to collect self-inflicted injury data by reason for the injury, in an effort to assist the Behavioral Health staff in working with the youth to improve outcomes.
- *Family Attendance at Multidisciplinary Team (MDT) Review Meetings:* The Division is now capturing all MDT types in the Trails data system. The five MDT types include: Treatment Planning, Parole Planning, Transition Planning, Mid-Parole, and Assessment. This will assist DYC to learn more about how to engage families in all MDTs.

#### Measures

- [Eligible Youth Who Have a GED or High School Diploma by Discharge](#)
- [Committed or Detained Youth Who Escape or Walkaway](#)
- [Timely Initial Placement for Committed Youth](#)
- [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 Multidisciplinary Team \(MDT\) Review Meetings](#)

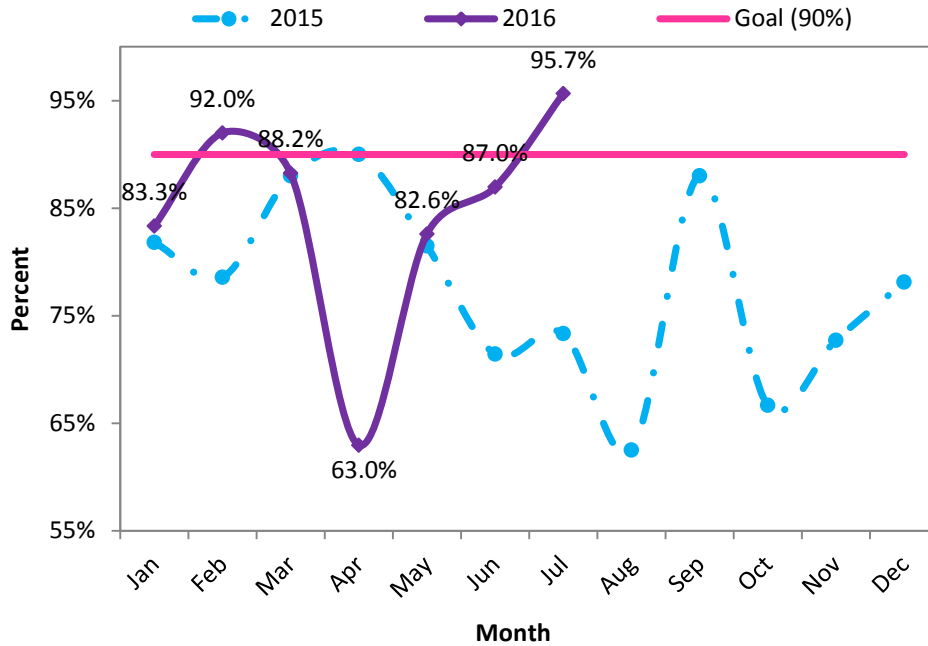
## Division of Youth Corrections (DYC)

Measure: **Eligible Youth Who Have a GED or High School Diploma by Discharge**

How it is measured: *Numerator:* Number of eligible youth who receive a GED or high school diploma by the time they discharge  
*Denominator:* Number of eligible DYC clients discharged in a specific month; average monthly denominator: 23

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

Goal: **↑ 90%**



Trend: The Division's performance improved throughout this quarter, culminating in 95.7% of youth attaining a GED or high school diploma by the time they discharged.

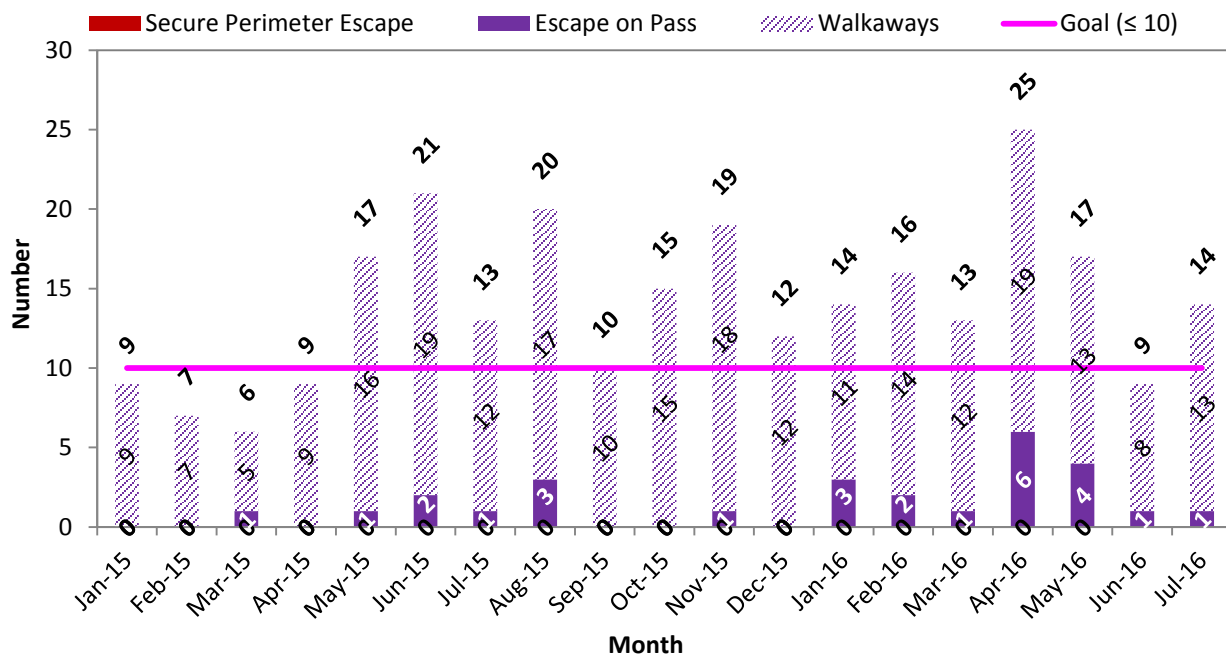
## Division of Youth Corrections (DYC)

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 six 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 six hours; average daily population: 937.2

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

Goal: ↓ ≤10



Trend: The Division experienced an average of 13 escapes/walkaways in the most recent quarter, five fewer than the average demonstrated last quarter. The number of escapes/walkaways met the goal in one month throughout the most recent quarter (June 2016).

Notes: “Secure perimeter escape” was added to differentiate between youths who escape while in the community on pass, and those who escape from the walls of a state-secure facility.

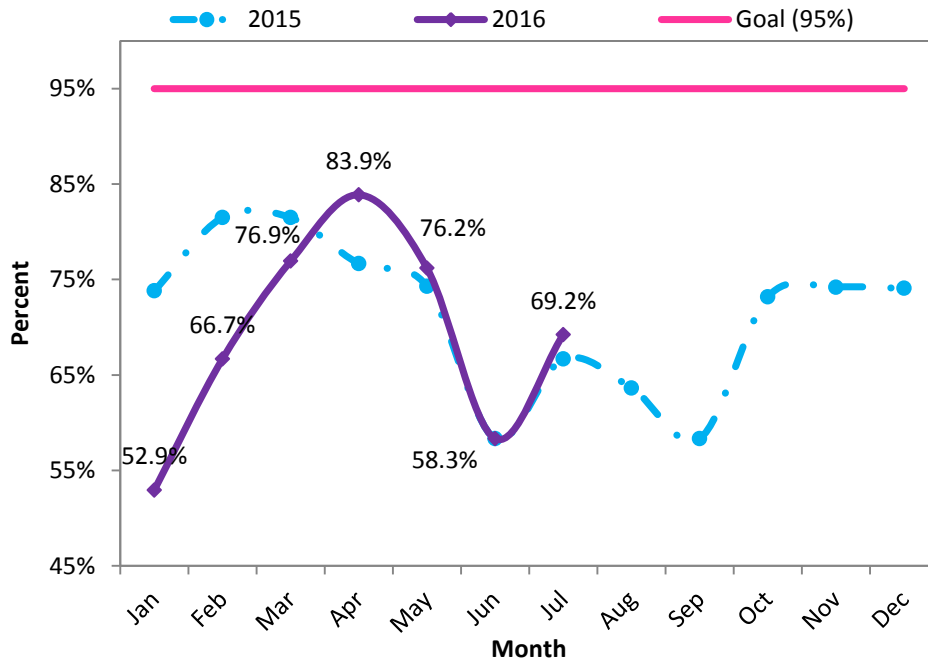
## Division of Youth Corrections (DYC)

Measure: **Timely Initial Placement for Committed Youth**

How it is measured: *Numerator:* Number of newly-committed youth who are placed in their initial placement within 40 days of their commitment date  
*Denominator:* Number of newly-committed youth placed in their initial placement in a specified month; average monthly denominator: 35

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

Goal: **↑ 95%**



Trend: The Division's performance in the most recent quarter declined, aligning with performance from the same quarter in 2015. The goal was not met.

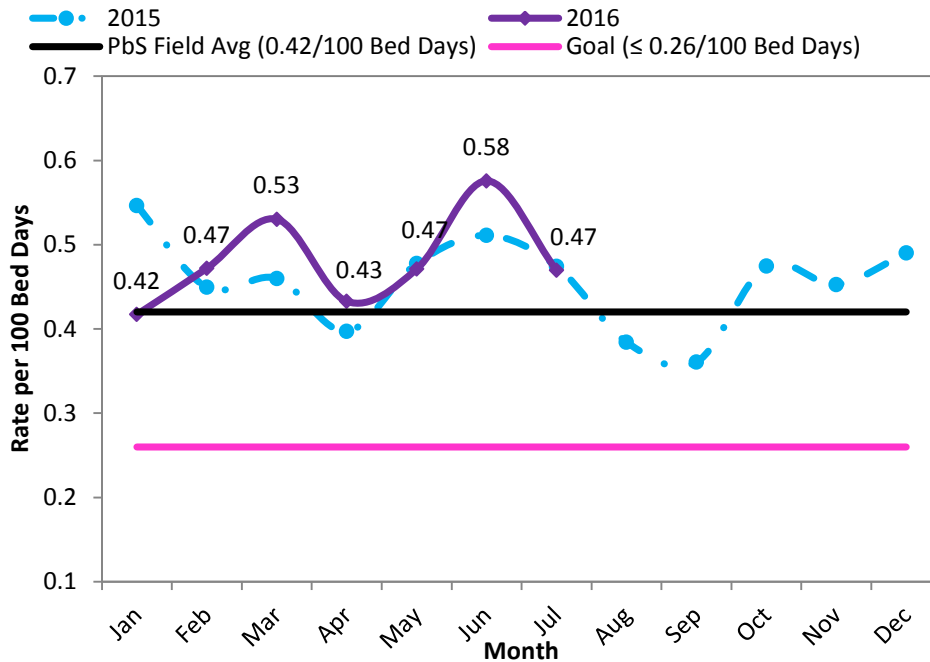
## Division of Youth Corrections (DYC)

Measure: **Fights and/or Assaults in DYC State-Secure Facilities**

How it is measured: *Numerator:* Number of fights and/or 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: 18,550.3

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: ↓ ≤ 0.26 per 100 Bed Days



Trend: The rate of fights and/or assaults in state-secure facilities ranged from .47 to .58 throughout the most recent quarter. The goal was not attained.

Notes: Data from DYC is compared to the Performance-based Standards (PbS) Field Average, which is a data-driven improvement model grounded in research that holds juvenile justice agencies, facilities, and residential care providers to the highest standards for operations, programs, and services.

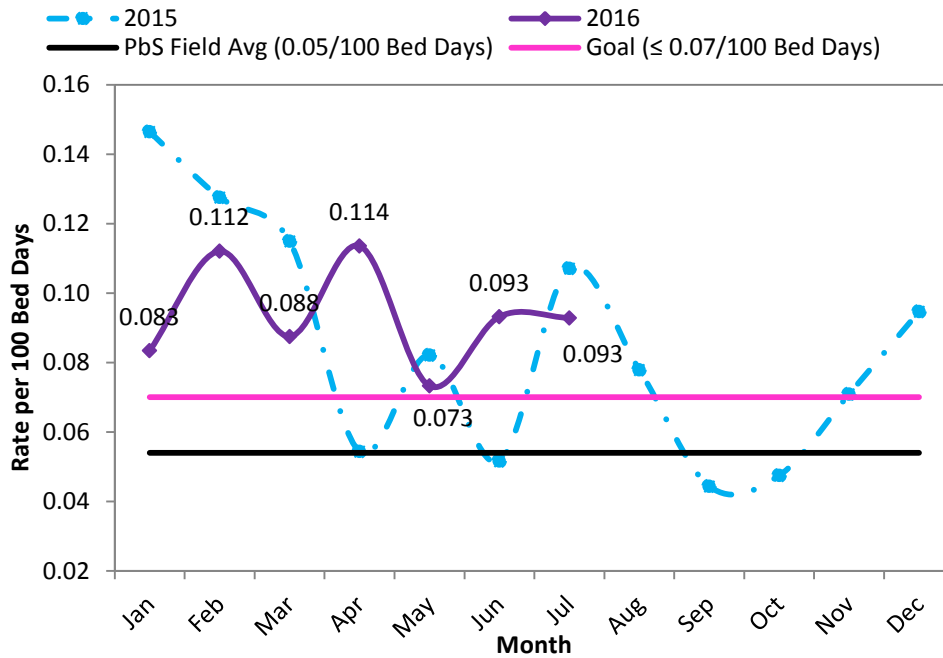
## Division of Youth Corrections (DYC)

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: 18,550.3

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 Division's performance varied in the most recent quarter, with a range of .073 to .093. The goal was not met.

Notes: Data from DYC is compared to the Performance-based Standards (PbS) Field Average, which is a data-driven improvement model grounded in research that holds juvenile justice agencies, facilities, and residential care providers to the highest standards for operations, programs, and services.



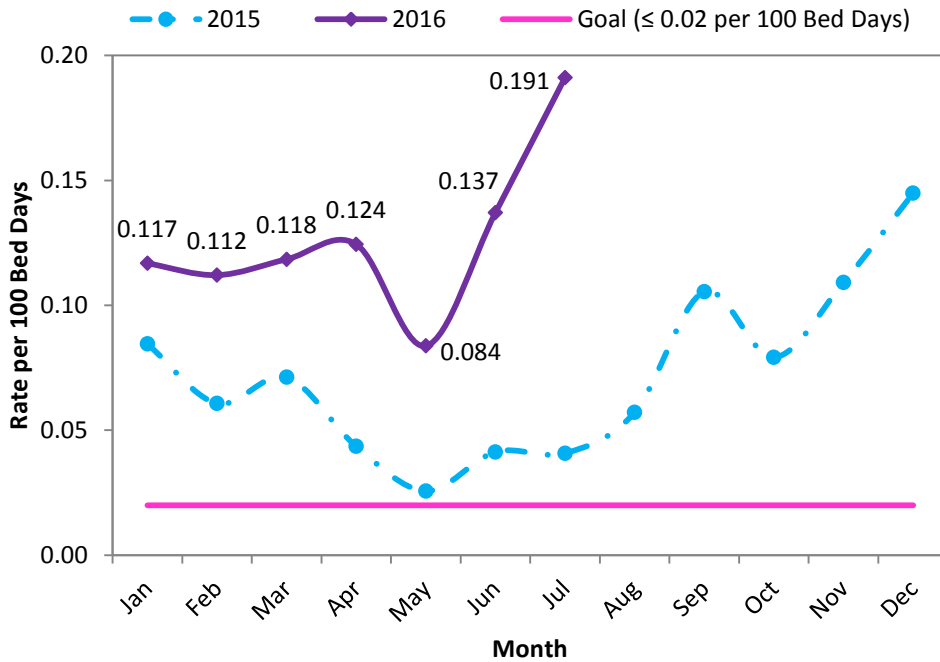
### Division of Youth Corrections (DYC)

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: 18,550.3

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

Goal: **↓ ≤ 0.02 per 100 Bed Days**



Trend: The Division’s number of staff injuries increased throughout the most recent quarter when compared to this same quarter in 2015. The goal has yet to be achieved.

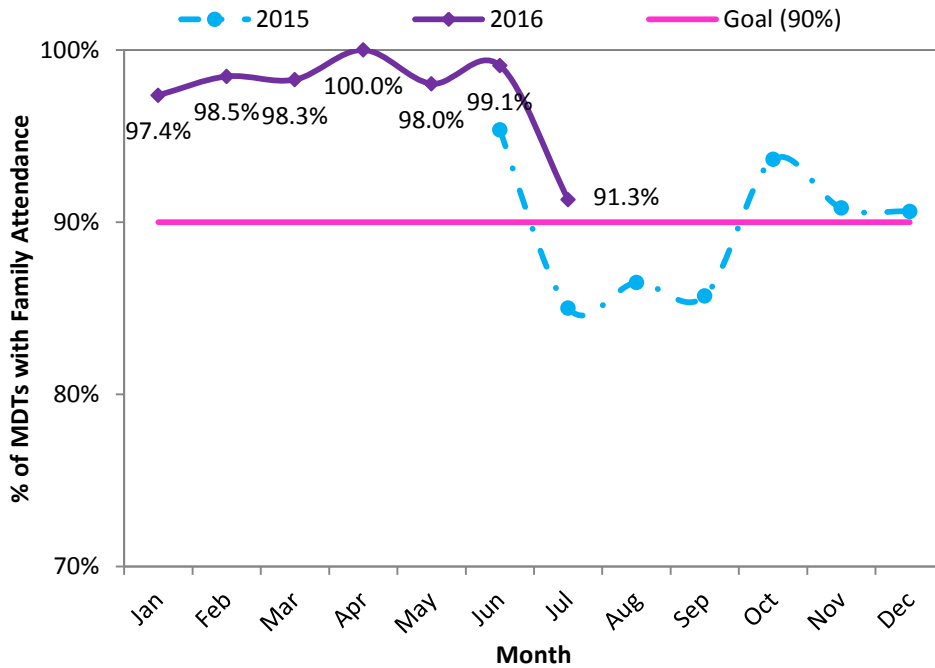
## Division of Youth Corrections (DYC)

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: 134

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

Goal: **↑ 90%**



Trend: The Division's performance remained above the 90% goal throughout the most recent quarter.

Note: In July 2016, three more MDT types were added to this measure, in addition to the two MDT types that were already being captured.

## 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 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.

Program Director: Brooke Ely-Milen

#### Executive Summary

- *Timely Assessment of Client Need and Risk*: This measure assesses the number of Client Need and Risk Assessments that were completed within the first week of client contact with the grant-funded program. Programs have achieved great performance gains on this measure across the last year. The program continues to offer technical assistance to grant-funded programs.
- *Self-Sufficiency Matrix – Percent of Change*: This is the second of the new outcome measures for DVP (with *Timely Assessment of Client Need and Risk* being the first). Data collection and technical assistance around the tool has been ongoing. After nearly a year of data collection, DVP is now exploring how to best utilize the Self-Sufficiency Matrix data in evaluating if clients' needs are being met.

#### Measures

- [Timely Assessment of Client Need and Risk](#)
- [Self-Sufficiency Matrix – Percent of Change](#)

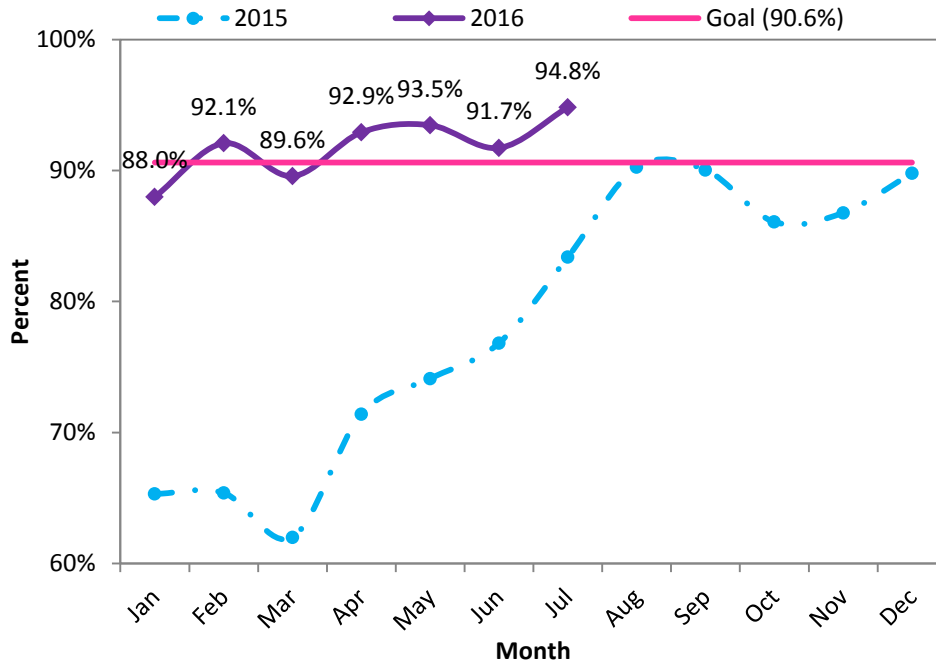
## Domestic Violence Program (DVP)

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: 1,400

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

Goal: **↑ 90.6%**



Trend: The grand-funded programs have improved over the last year in the timeliness of assessments. Performance remained above the 90.6% goal for each month within the most recent quarter.

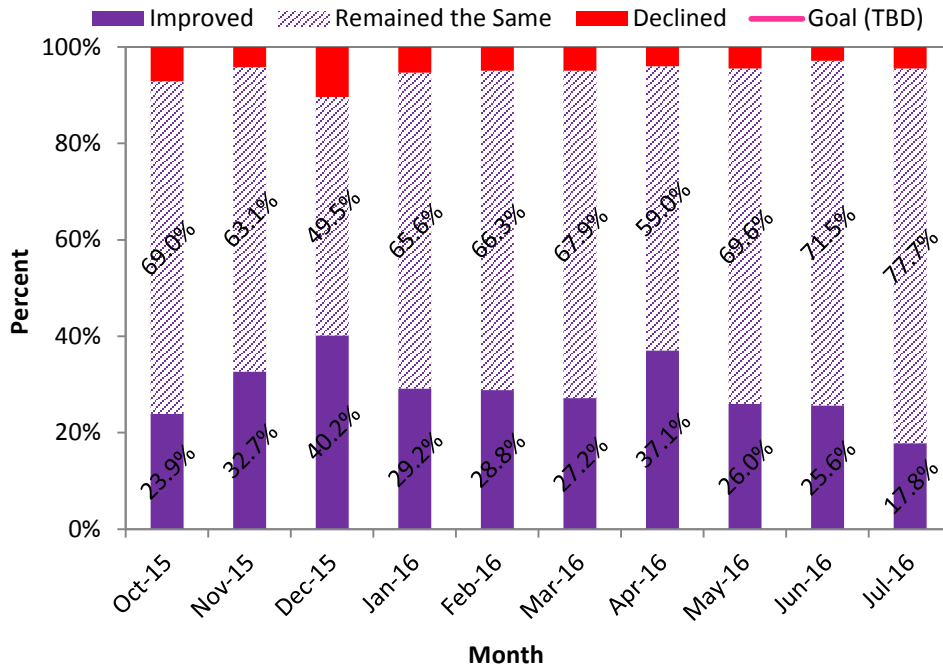
## Domestic Violence Program (DVP)

Measure: **Self-Sufficiency Matrix – Percent of Change**

How it is measured: *Numerator:* Percent of follow-up assessments that demonstrated an improvement, remained the same, or declined, per domain, per client  
*Denominator:* Total number of follow-up assessment domains completed in the reporting month per client; average monthly denominator: 2,170

Why this matters: The Self-Sufficiency Matrix assesses clients’ needs across 21 domains, allowing DVP programs to more thoroughly assist clients and work to provide the services needed.

Goal: **↑ To be determined**



Trend: The percent of Self-Sufficiency Matrix domains that have improved fluctuated between 17.8% and 26.0% in the most recent quarter. The percent of Self-Sufficiency Matrix domains that have remained the same fluctuated between 69.6% and 77.7%.

Notes: The Self-Sufficiency Matrix assesses how clients rate their needs across 21 domains to create a change score between two assessment periods.

## 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, and State Veterans Community Living Centers.

Director: Mark Wester

Deputy Director: vacant

## Aging and Adult Services

### Summary

#### Description

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

- *Timeliness of Monthly Contacts:* Adult Protective Services (APS) continues to distribute a weekly report for monthly contacts. This effort is intended to assist in prompting counties to enter data timely. In addition, APS examines all untimely contacts, in detail, to review the reasons for a late contact and any trends associated with the untimely contacts. As needed, APS staff are also contacting counties who struggle with this measure to determine if technical assistance can be offered, as well as determine what actions could be taken to improve performance. These actions, as well as the continued focus of the counties, led to achieving the goal for two of the three months in the current quarter. Performance this year has remained consistently near the goal, thus the Division, in conjunction with Executive Management, agreed to raise the goal to 95%.

#### Measures

- [Timeliness of Monthly Contacts](#)



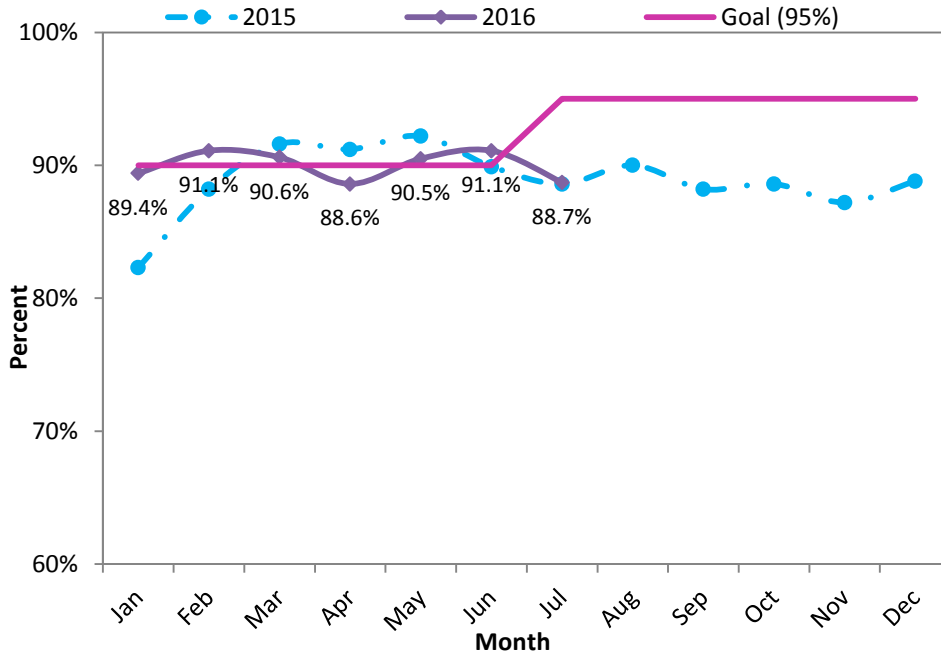
### Aging and Adult Services (AAS)

Measure: **Timeliness of Monthly Contacts**

How it is measured: *Numerator:* Number of cases with a timely monthly contact in the reporting month  
*Denominator:* Number of cases requiring a monthly contact in the reporting month; average monthly denominator: 1,450

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

Goal: **↑95%**



Trend: The Division’s performance in the most recent quarter has remained relatively stable, ranging from 90.5% in May 2016 to 88.7% in July 2016. Division performance was above the 90% goal for the first two months of the quarter.

Notes: The goal changed in July 2016 from 90% to 95%.

## Disability Determination Services

### Summary

#### Description

The Division of Disability Determination Services (DDS) makes disability decisions for Social Security. The DDS staff gathers medical information from the sources listed by clients and any new sources discovered in that process. The DDS staff evaluates that evidence against Social Security Disability criteria. Applicants must have a medically-determinable physical or mental impairment that is expected to result in death, or which will last for at least 12 consecutive months, and prevents them from performing the work-related activities of their previous jobs or any other jobs which they might be able to perform, based on their age, education, and work experience.

Social Security has two disability programs: Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI). The definition of medical disability is the same under both programs. However, SSDI pays disability benefits to the applicant and certain members of the applicant's family if the applicant is "insured" meaning that the applicant worked long enough and paid Social Security taxes. Supplemental Security Income pays disability benefits based on financial need.

Director: Vicki Johnson

#### Executive Summary

- *Mean Number of Days to Process Initial Eligibility Decisions:* DDS continued to receive assistance processing cases from multiple processing centers throughout the country, hired and began training several examiners, and continued to focus on several Lean initiatives to enhance performance, workflow, and staffing.
- *Percentage of Accurate Initial Eligibility Decisions:* DDS continues to focus on internal quality assurance reviews in which they conduct a targeted sampling of all eligibility decisions. Disability Determination Services 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](#)



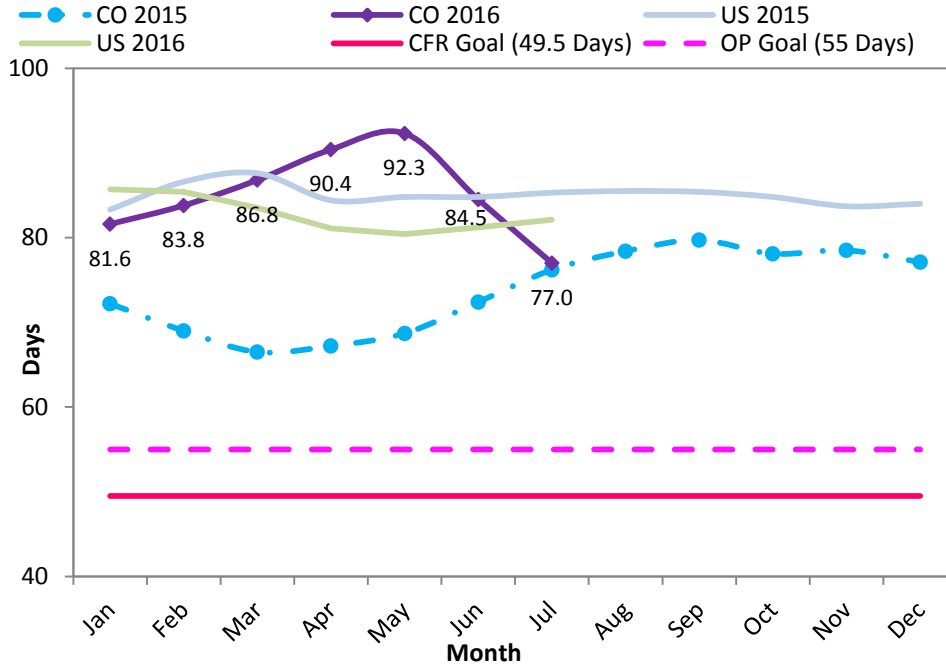
### Disability Determination Services (DDS)

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: 3,202

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: Division performance has improved by 15.3 days during the most recent quarter (purple line). The Division reduced the number of days from 92.3 days in May 2016 to the July 2016 processing time of 77.0 days.

Notes: This measure utilizes data from the SSDI program only. The 49.5 day Federal goal (solid red line) 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 (dashed red line). Disability Determination Services has added this goal to their measure for tracking purposes.



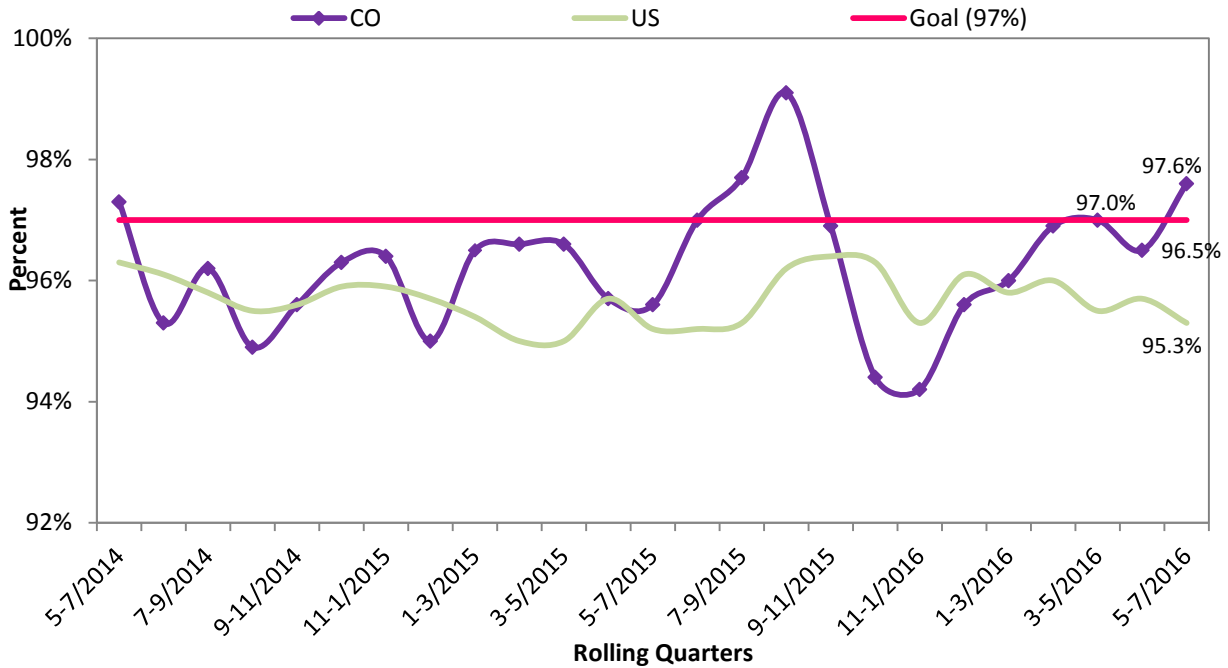
### Disability Determination Services (DDS)

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: 148

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: In the most recent quarter, DDS demonstrated a 0.6% increase in performance in the accuracy of initial decisions. Performance met or exceeded the goal in two of the last three rolling quarters (purple line).

Notes: This measure includes data from both the SSDI and SSI programs. Due to the measure having a small sample, approximately 50 cases, performance data are displayed utilizing a rolling three-month average. 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 (WRRC). The Region Centers 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

- *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 physical intervention and what strategies may be implemented to reduce future physical interventions. There were no significant trends identified through this analysis. Each center continues to explore resident-specific ways to best mitigate physical interventions.

#### Measures

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

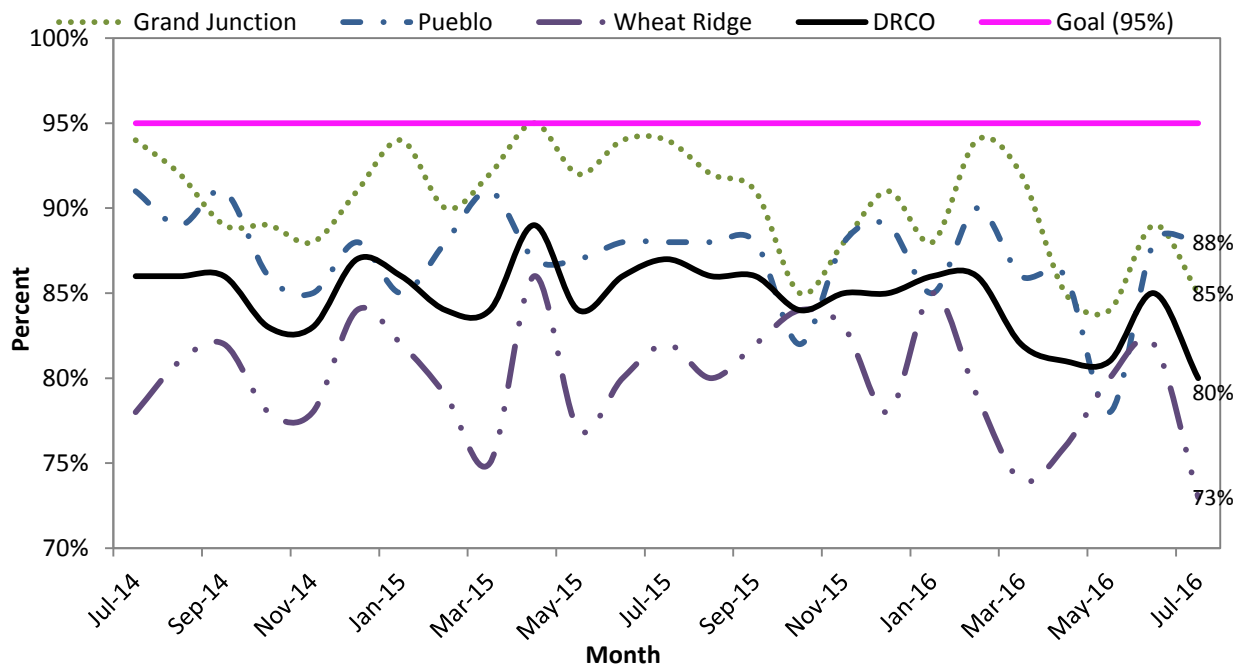
## Division of Regional Center Operations (DRCO)

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: 83, Pueblo: 59, Wheat Ridge: 119, DRCO: 260

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, performance in each center fluctuated. Grand Junction (green line), Wheat Ridge (purple line), and the Division as a whole, (black line) performed in a similar manner, starting with an increase in performance in May and June followed by decline in July. Pueblo (blue line) improved in performance the first two months, and remained stable in July. Performance in July 2016 was as follows: Grand Junction at 85%, Pueblo at 88%, Wheat Ridge at 73%, and the Division at 80%, all of which were 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 the SVCLC in Walsenburg 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, including 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.

Director: Aaron Termain

#### Executive Summary

- *Percent of Residents without Anti-Psychotic Medication:* State Veterans Community Living Centers continue to examine the data on this measure by conducting both chart audits and clinical roundtables to verify diagnoses for residents and the appropriateness of prescribed anti-psychotic medications.
- *Fall Rate:* Due to varied performance each month, Executive Management continues to review the SVCLC's performance for the following variables or factors: the location of the fall, the severity of the fall, falls per shift, as well as those residents who had more than one fall during the month. A deeper examination of falls provides a better understanding of how and why the falls occurred, and helps to focus future strategies.

#### Measures

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



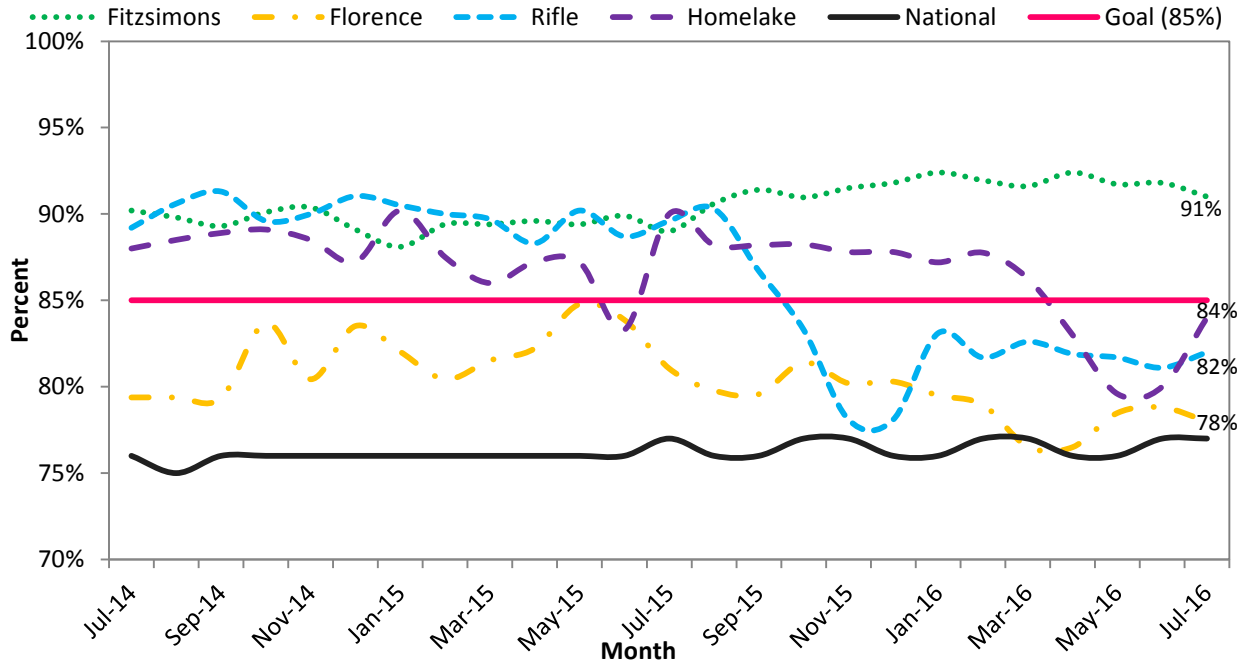
### State Veterans Community Living Centers (SVCLC)

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: 159, Florence: 84, Rifle: 72, Homelake: 50

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 over the most recent quarter has remained relatively stable in Fitzsimons (green line), Florence (yellow line), and Rifle (blue line), and demonstrated an increase in Homelake (purple line). In July 2016, Fitzsimons (green line) continued to exceed the 85% goal while Florence, Rifle, and Homelake were below the goal.

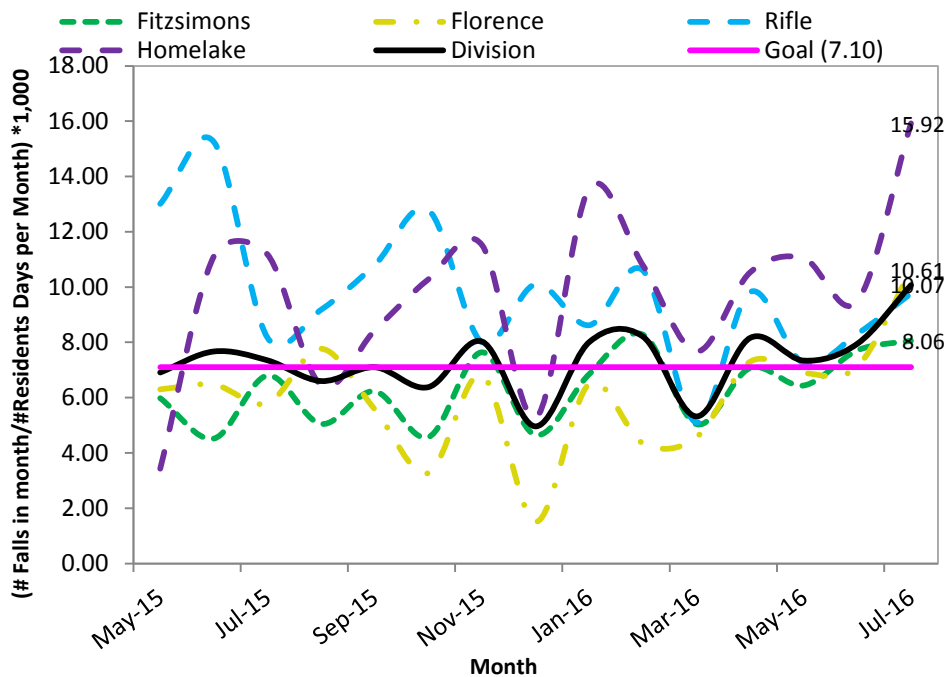
## State Veterans Community Living Centers (SVCLC)

Measure: **Fall Rate**

How it is measured: *Numerator:* Number of falls  
*Denominator:* Per 1,000 resident days. Average Resident Days by month: Fitzsimons: 4,859, Florence: 2,497, Rifle: 2,209, Homelake: 1,528

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: **↓7.10**



Trend: In the most recent quarter, all Community Living Centers performed in a relatively similar manner. Performance steadily worsened throughout the quarter, with Florence and Homelake demonstrating their worst performance since the start of the measure. In July 2016 the centers had not achieved the 7.10 goal.

## Office of Early Childhood

### Description

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

The Office of Early Childhood 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.

The Office of Early Childhood 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 (ECL) 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

- *Children in the Colorado Child Care Assistance Program (CCCAP), Under the Age of Five, Served by Top Tier Quality Rated Facilities:* Due to consistently high performance, this measure was moved to the CDHS C-Stat Dashboard in July 2016. Therefore, this will be the last time this measure is detailed in the C-Stat Quarterly Report. The CDHS C-Stat Dashboard is distributed along with the monthly C-Stat data and reviewed by Executive Management on a monthly basis, but is not reported as a part of the C-Stat Quarterly Report.
- *Community Dispersion of Rated High Quality CCCAP for Children Under Five:* This is the first time this measure has been included in the C-Stat Quarterly Report. This measure focuses on providing more equitable geographic dispersion of available high quality subsidized child care. As such, the state has been divided into 209 communities and ECL's goal is to have 69 communities with at least one rated high quality facility that offers CCCAP by June 2017. The following three targeted interventions have been identified to achieve this goal:
  - *Maintenance*-Retain communities with existing rated high quality facilities that offer CCCAP,
  - *Targeted Quality*- Increase quality in existing facilities that currently offer CCCAP,
  - *Targeted CCCAP*- Work with facilities who are currently rated high quality, to begin offering CCCAP.
- *Continuity of Child Care for Children Utilizing CCCAP Child Care Subsidy:* CCCAP rule changes will go into effect at the end of September 2016 which aim to make current rules less ambiguous and promote continuity of care. The Division is also planning on administering training to help staff understand the new rule changes and how to apply these changes in their work with families. Additionally, ECL continues to monitor individual counties to identify high and low performers. This allows ECL to work closer with low performers and to identify best practices from high performers that could be used to improve performance for all counties.
- *Child Injuries in Licensed Child Care That Require Medical Attention or Hospitalization:* The number of injuries being reported has continued to increase well above what was reported this time last year. To encourage facilities to both continue to report and to prevent fall-related injuries, ECL has continued to send facilities resources through the mail and will provide future trainings. There was a significant drop in injuries reported in July. OEC is working to understand what caused the reduction in reported injuries.

#### Measures

- [Children in the Colorado Child Care Assistance Program \(CCCAP\), Under the Age Five, served by Top Tier Quality Rated Facilities](#)
- [Community Dispersion of Rated High Quality CCCAP for Children Under Five](#)
- [Continuity of Child Care for Children Utilizing CCCAP Child Care Subsidy](#)
- [Increased Facility Engagement with the Colorado Shines Quality Rating and Improvement System \(QRIS\)](#)
- [Child Injuries in Licensed Child Care that Require Medical Attention or Hospitalization](#)

## Early Care and Learning (ECL)

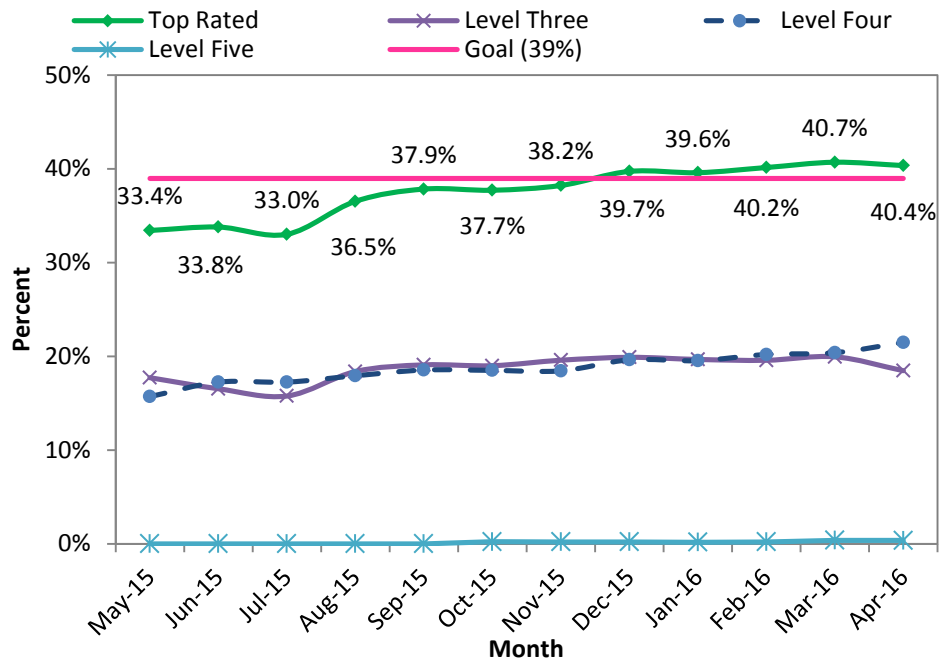
**Measure:** Children in the Colorado Child Care Assistance Program (CCCAP), Under the Age of Five, serviced by Top Tier Quality Rated Facilities

**How it is measured:** *Numerator:* Total number of children, under five years old, who utilized CCCAP at a child care facility 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: 10,198

**Why this matters:** Research supports positive outcomes associated with high quality early childhood experiences including: reduced racial, ethnic, and socio-economic achievement gaps; reduced special education costs, increased high school graduation rates, 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 April was 40.4% and the Division met the 39.0% goal for the fifth consecutive month.

**Notes:** There is only one month of performance for this measure in the most recent quarter due to the measure being moved to the CDHS C-Stat Dashboard and no longer being presented in C-Stat after the month of April 2016.



## Early Care and Learning (ECL)

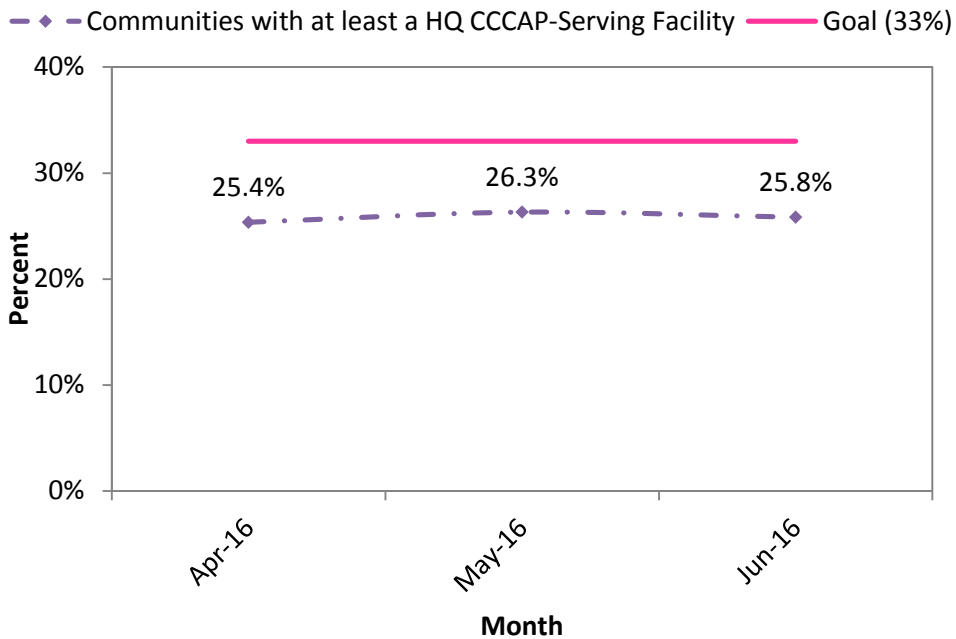
Measure: **Community Dispersion of Rated High Quality CCCAP for Children Under Five**

How it is measured: *Numerator:* Total number of communities with at least one child, under five years old, who utilized CCCAP at a child care facility with a current quality rating greater than Level Two at least once during the given month.

*Denominator:* Total number of communities (County Subdivisions): 209

Why this matters: Research supports positive outcomes associated with high quality early childhood experiences. This measure ensures a more equitable geographic dispersion of high quality services.

Goal: **↑ 33%**



Trend: The Division’s performance in the most recent quarter ranged from 25.4% to 26.3%. The goal was not met.

Note: This is the first time this measure has been included in the C-Stat Quarterly Report.



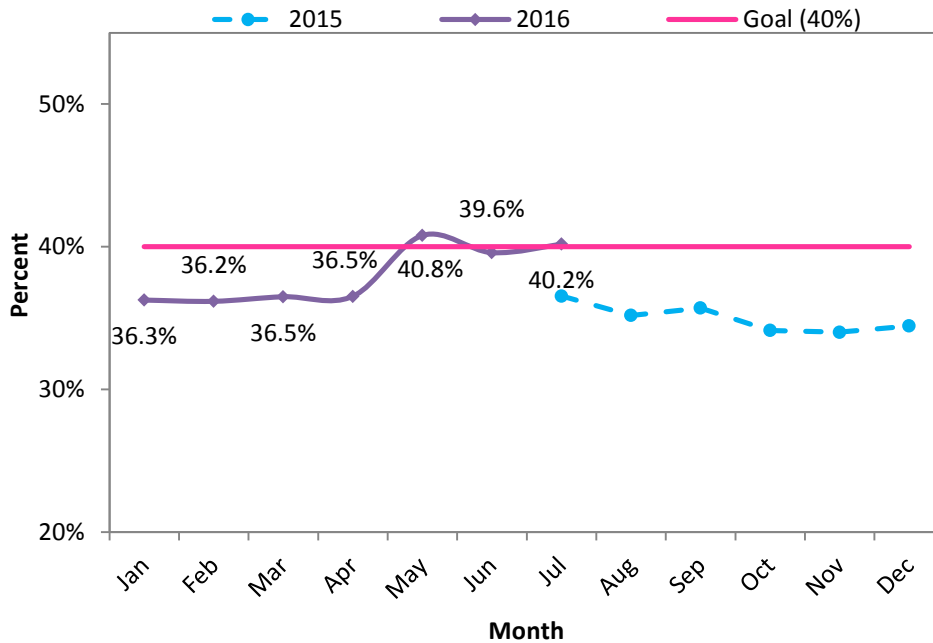
### Early Care and Learning (ECL)

Measure: **Continuity of Child Care for Children Utilizing CCCAP Child Care Subsidy**

How it is measured: *Numerator:* All children, under five years old, who utilized CCCAP at least once each month with the same provider for 12 months previous to the current month  
*Denominator:* All children under four years old, who utilized CCCAP at least once 12 months prior to the reporting month; average monthly denominator: 7,370

Why this matters: Continuity of child care and the security and stability it provides is important to the emotional growth and development of Colorado's children.

Goal: **↑ 40%**



Trend: The Division’s performance in the most recent quarter ranged from 39.6% to 40.8%. The goal was met in May 2016 for the first time.

## Early Care and Learning (ECL)

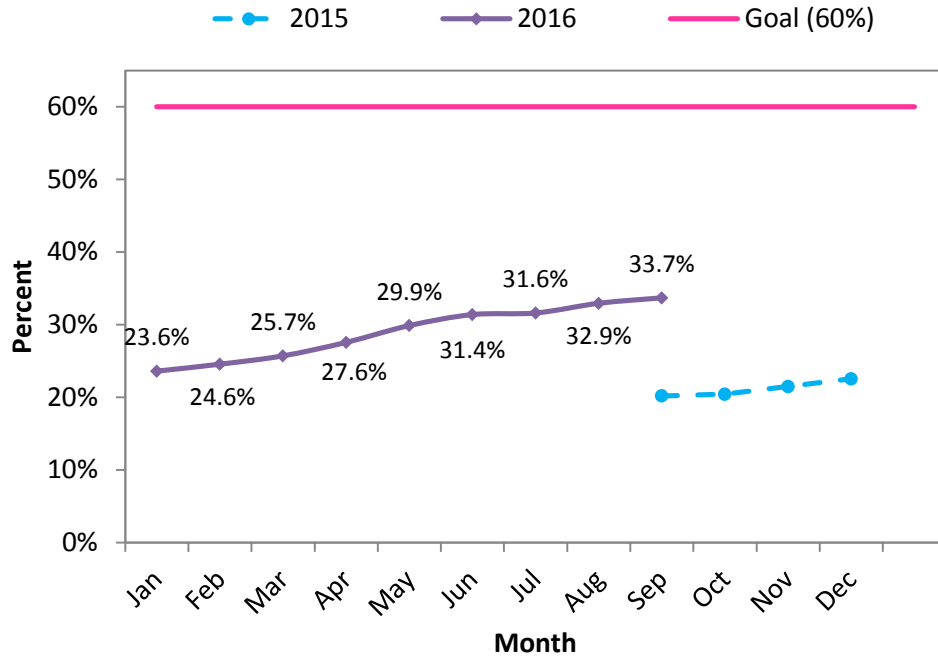
Measure: **Increased Facility Engagement with the Colorado Shines Quality Rating and Improvement System (QRIS)**

How it is measured: *Numerator:* Licensed facilities eligible for a Colorado Shines rating that have obtained at least a Level Two quality rating

*Denominator:* Licensed facilities eligible for a Colorado Shines rating; average monthly denominator: 4,329

Why this matters: Expanding the number of facilities who are engaged and working with the State to obtain a Colorado Shines high quality rating will provide higher quality care for Colorado's children.

Goal: **↑ 60%**



Trend: The Division’s performance across the last year has demonstrated consistent improvement each month. The goal has not been met.



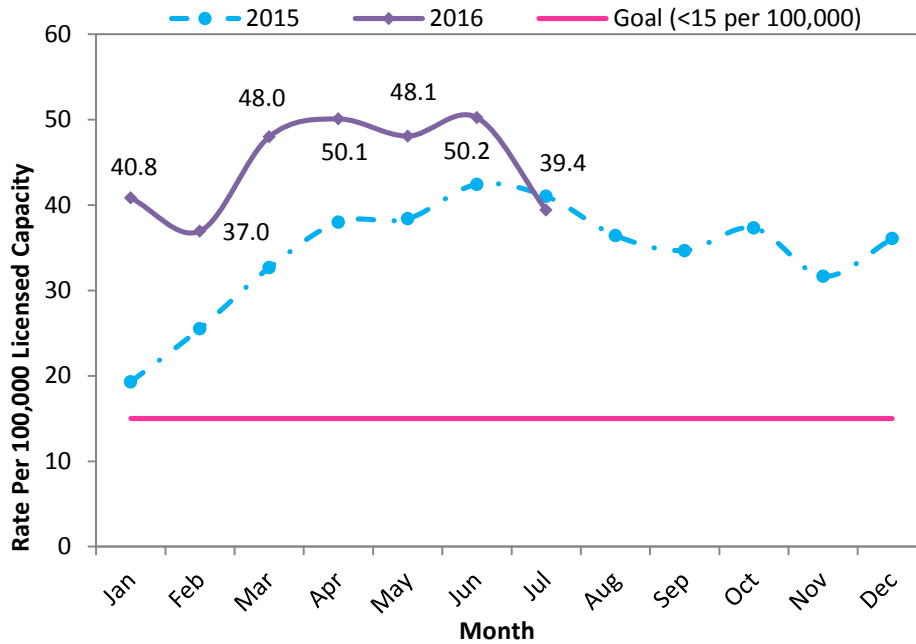
### Early Care and Learning (ECL)

Measure: **Child Injuries in Licensed Child Care that Require Medical Attention or Hospitalization**

How it is measured: *Numerator:* Number of children with an injury requiring 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: 232,450

Why this matters: Monitoring incidence of child injuries while in the care of a child care facility can contribute to child safety.

Goal: **↓ < 15 per 100,000**



Trend: The Division’s performance in the most recent quarter varied with a large improvement in performance in July. The goal was not met.

## Community and Family Support

### Summary

#### Description

The Division of Community and Family Support (CFS) is made up of 12 distinct programs. All CFS programs share objectives in alignment with at least one of two shared themes: 1) Reduced Child Abuse through Family Supports and 2) Increased Number of Children Ready for Kindergarten. These programs and services benefit families in need by strengthening collaboration and coordination between the state-level early childhood system and local delivery systems. 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

- *Child Abuse Protection and Treatment Act (CAPTA) Referrals to Early Intervention (EI) Who Complete the Eligibility Process:* Due to the amount of referrals from Child Welfare not being received by Community Centered Boards (CCBs), the Division has reinstated a process of manually checking for CAPTA referrals in the Child Welfare system. Those referrals not identified by CCBs electronically are sent to the CCBs manually in an effort to ensure all referrals are received. This has significantly increased the number of referrals to CCBs.
- *Parents as Teachers: Percent of Families Who Received One or More Visits in the Past Month:* This is the first time this measure has been included in the C-Stat Quarterly Report. Parents as Teachers (PAT), falls under the Maternal, Infant & Early Childhood Home Visiting (MIECHV) Program. It is an evidenced-based parent education and family support program serving families from pregnancy until kindergarten. This measure is intended to ensure that families are receiving the right number of visits per month.
- *Healthy Steps: Percent of Children Who Received Six or More Well Child Checks by 14 Months of Age:* This is the first time this measure has been included in the Quarterly Report. Healthy Steps (HS) falls under the Maternal, Infant & Early Childhood Home Visiting (MIECHV) Program. Healthy Steps looks at the whole child, including his or her parents and environment. Specialists address the medical, emotional, and social determinants of health and well-being, leading to healthier, happier children and families. This measure is intended to ensure families receive six Well Child Checks before the child reaches 14 months of age.

#### Measures

- [Child Abuse Protection and Treatment Act \(CAPTA\) Referrals to Early Intervention Who Complete the Eligibility Process](#)
- [Colorado Community Response \(CCR\) Children Without Subsequent Substantiated Cases of Abuse or Neglect](#)
- [Achieved Individualized Outcomes in Early Intervention](#)
- [Parents as Teachers \(PAT\): Percent of Families Who Received One or More Visits in the Past Month](#)
- [Health Steps \(HS\): Percent of Children Who Received Six or More Well Child Checks by 14 Months of Age](#)



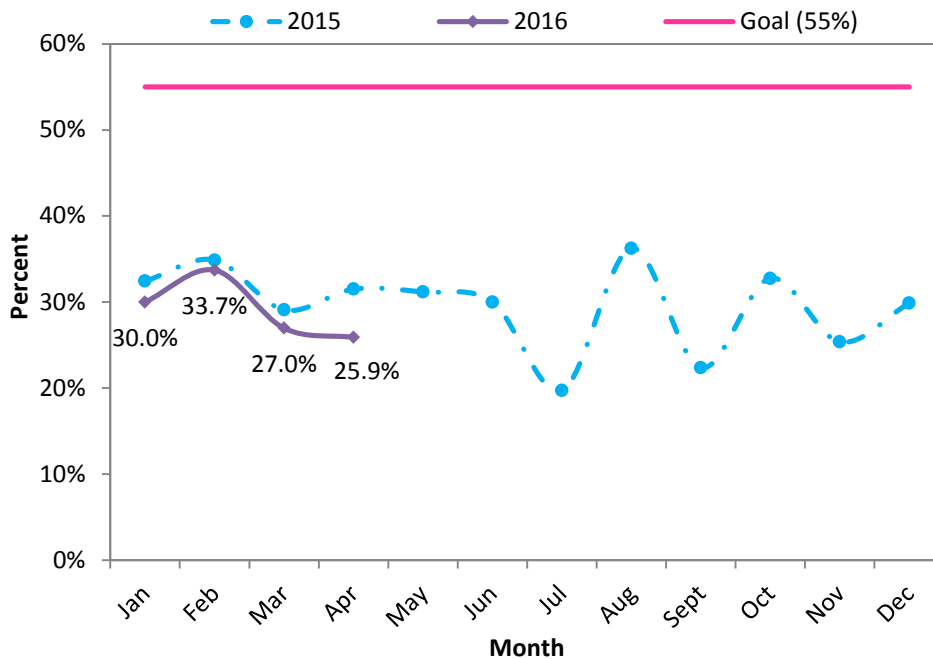
### Community and Family Support (CFS)

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: 97

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: The Division’s performance in the most recent quarter ranged from 25.9% to 33.7%. The goal was not attained.

Notes: The four month reporting lag allows for children and families to move through the eligibility process.



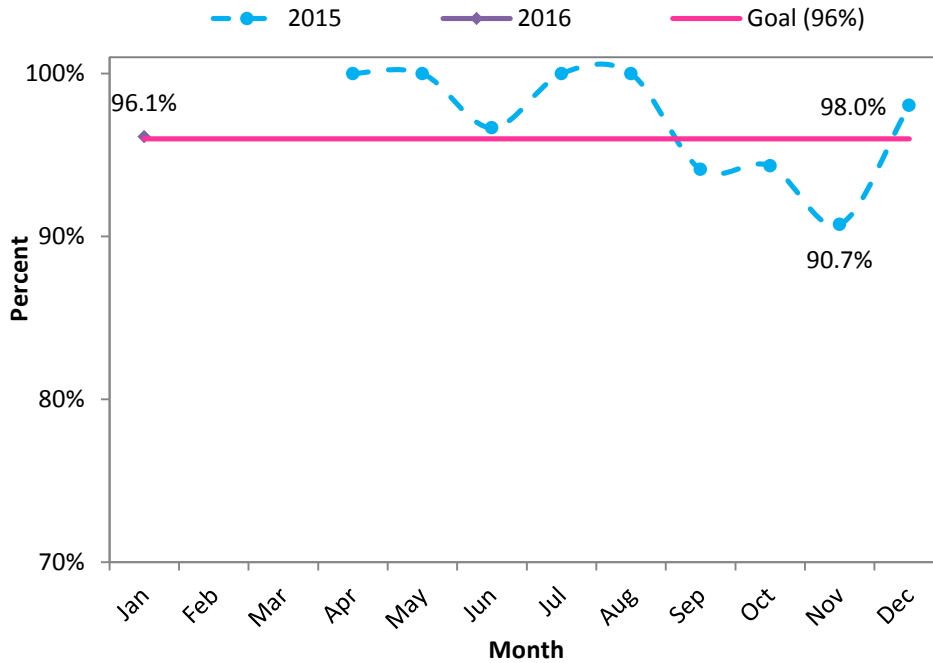
### Community and Family Support (CFS)

Measure: **Colorado Community Response (CCR) Children Without Subsequent Cases of Abuse or Neglect**

How it is measured: *Numerator:* Number of children without a substantiated case of abuse or neglect within six months of closing CCR case  
*Denominator:* Number of children whose family successfully completed CCR services; average monthly denominator: 69

Why this matters: The CCR program provides a comprehensive, community-based continuum for families at-risk for child maltreatment through a combination of case management, service linkages, and community supports. The intent of this measure is to keep safe the children who were initially screened out of child protection and then referred to CCR.

Goal: **↑ 96%**



Trend: The Division’s performance in the most recent quarter ranged from 90.7% to 98.0%. The goal was met two out of three months (December 2015 and January 2016).



## Community and Family Support (CFS)

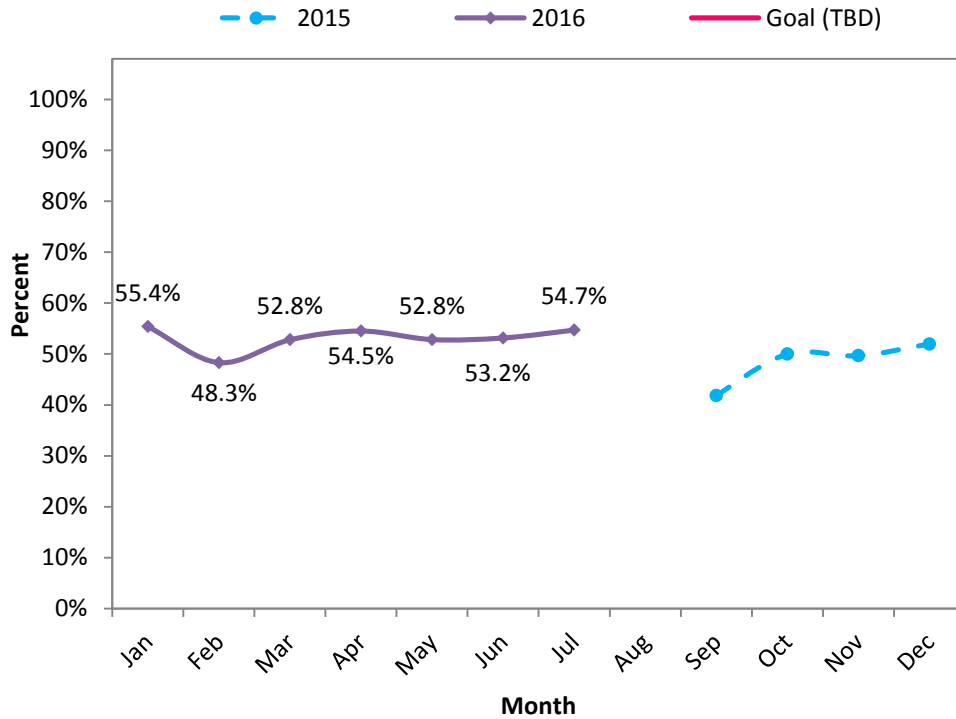
Measure: **Achieved Individualized Outcomes in Early Intervention**

How it is measured: *Numerator:* Number of individualized outcomes met at Individualized Family Service Plan (IFSP) review

*Denominator:* Number of individualized outcomes reviewed in a given month; average monthly denominator: 1,331

Why this matters: Research shows that the first three years are the most important time for developing and learning in a child’s life. Early Intervention is important in helping families to assist their children with special needs to develop to their full potential and possibly decrease or prevent the need for specialized help later during school age years.

Goal: **↑ To be determined**



Trend: Performance in the most recent quarter ranged from 52.8% to 54.7%. A goal has not been determined.

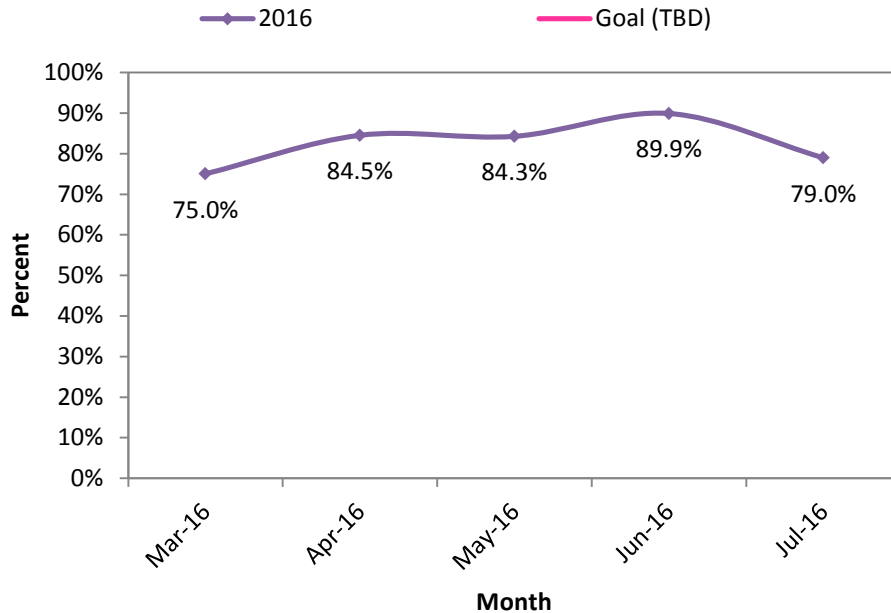
## Community and Family Support (CFS)

Measure: **Parents as Teachers (PAT): Percent of Families Who Received One or More Visits in the Past Month**

How it is measured: *Numerator:* Number of families who received one or more PAT visits in the past month  
*Denominator:* Number of families eligible for a PAT visit in the past month; average monthly denominator: 863

Why this matters: It has been determined that the early years of a child’s life are critical for optimal development and provide the foundation for success in school and in life. Parents are their children’s first and most influential teachers. Providing resources to parents that are evidenced-based increases not only engagement by the parents in their children’s education but also their children’s likelihood of success.

Goal: **↑ To be determined**



Trend: The Division’s performance in the most recent quarter ranged from 79.0% to 89.9%. A goal has not been determined.

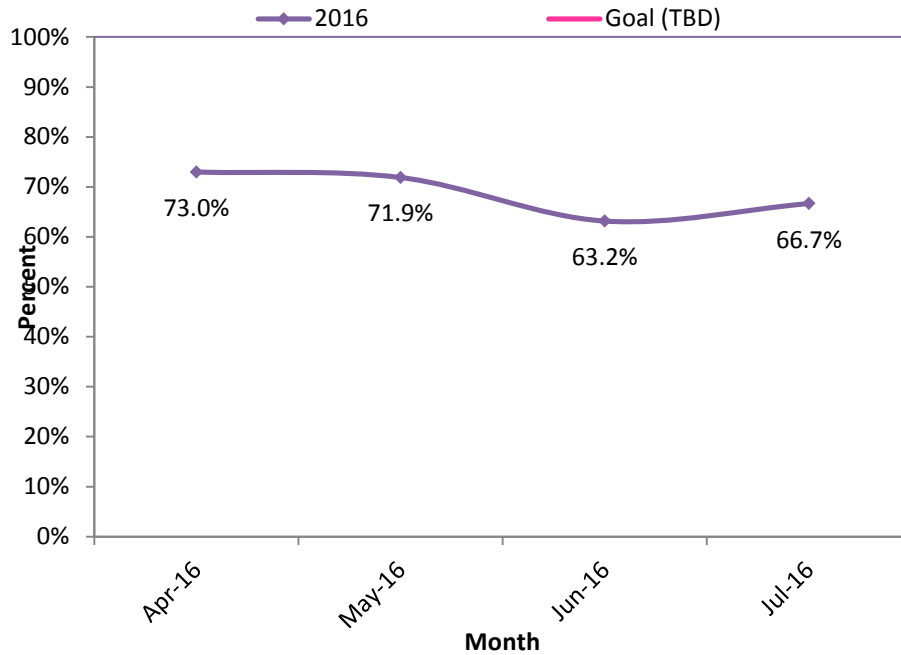
## Community and Family Support (CFS)

Measure: **Healthy Steps (HS): Percent of Families Who Received Six or More Well Child Checks by 14 Months of Age.**

How it is measured: *Numerator:* Number of children who received six or more Well Child Checks.  
*Denominator:* Number of children who are 14 months of age who enrolled in Healthy Steps within 2 weeks of birth: 57

Why this matters: Healthy Steps specialists monitor child health and development, promote good health practices, and respond to parents' concerns about their developing infants and toddlers. Ensuring these visits occur could result in healthier young children and families, as well as the opportunity to provide families with effective resources and referrals earlier in the child's life.

Goal: **↑ To be determined**



Trend: The Division's performance in the most recent quarter ranged from 63.2% to 71.9%. A goal has not been determined.

## 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, the Child Support Services (CSS) Division, the Employment and Benefits Division (EBD), which includes Colorado Works/Temporary Assistance for Needy Families (TANF), the Colorado Refugee Services Program (CRSP), and Adult Financial Services, along with the Food and Energy Assistance (FEA) Division, which includes the Food Assistance/Supplemental Nutritional Assistance Program (SNAP), the Low-Income Energy Assistance Program (LEAP), and Food Distribution Programs.

Director: Phyllis Albritton

Deputy Director: Barry Pardus

## 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 Desbien

#### Executive Summary

- In August 2016, the Division implemented a regional approach to working with counties across Colorado. A Regional Representative is assigned to one of six regions. Regional Representatives are responsible for communication and process alignment across the 64 counties. They will serve as the main point of contact and training liaison, as well as conduct quality assurance reviews to identify areas for improvement for each county within the region.
- *Percent of Current Child Support Collected:* In July 2016, the Division developed a text messaging system to communicate when child support obligors have a payment coming due. The objective is to nudge child support obligors to make payments on time and reduce the number of child support cases with an arrears payment. The Division began piloting the text messaging system in August 2016. Further developments will include a link to Colorado's Child Support online payment site in the coming months.
- *Percent of Cases with an Arrears Payment:* The Division is continuing to explore county-facing strategies that will focus on child support cases of those parents who are unlikely to pay and those cases that have an arrears payment. County-facing strategies include the development of a case management model and the implementation of family-centered services.
  - In addition to county-facing strategies, the Division created an internal team of subject matter experts to analyze and identify external factors, such as a reduction in Unemployment Compensation Benefits and the number of days in the month that may be contributing to child support collections. The Division kicked off the first team meeting in August 2016 and will continue to identify external factors that might impact child support payments throughout the 2016/2017 calendar year.

#### Measures

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

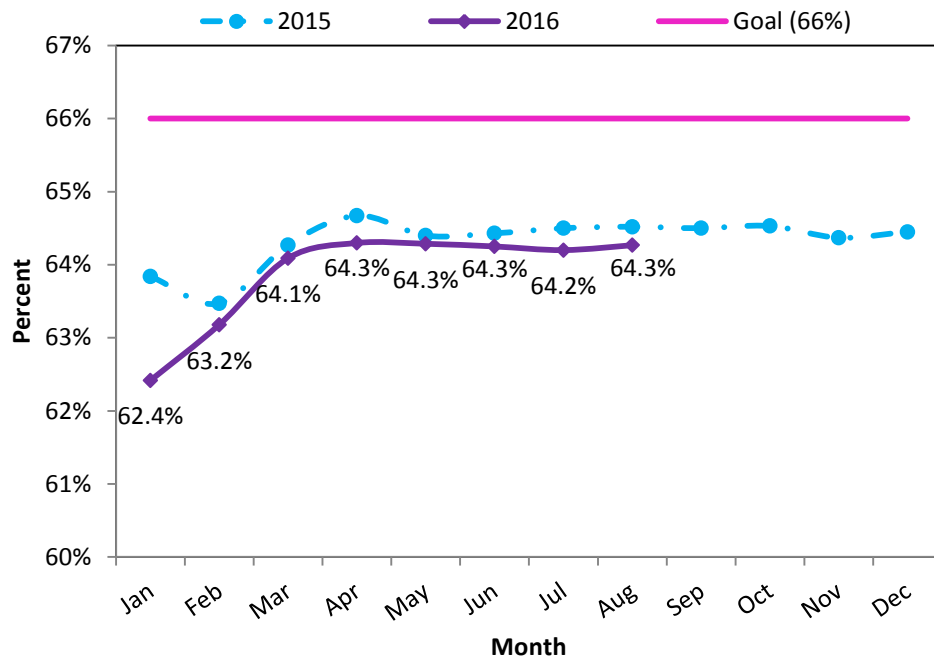
## Child Support Services (CSS)

Measure: **Percent of Current Child Support Collected (Federal Measure)**

How it is measured: *Numerator:* Cumulative current support dollars collected year to date  
*Denominator:* Cumulative current support dollars owed year to date; cumulative denominator for monthly support owed through August 2016: \$265,333,869

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

Goal: **↑66%**



Trend: The Division’s performance in the most recent quarter remained stable, ranging from 64.2% to 64.3%, and is relatively consistent with the previous year’s performance.

## Child Support Services (CSS)

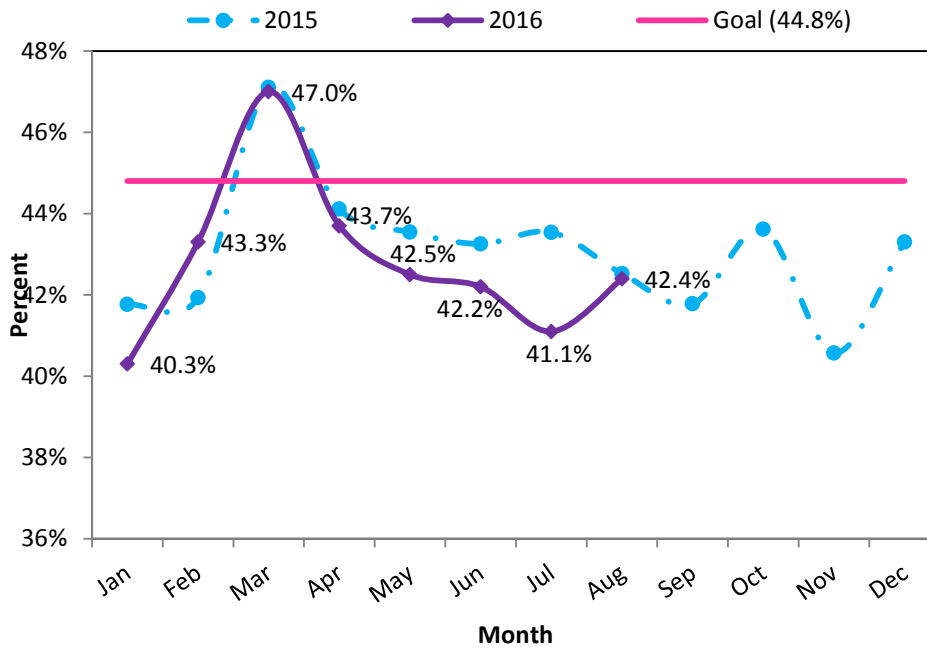
Measure: **Percent of Cases with an Arrears Payment**

How it is measured: *Numerator:* Number of 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: 104,730

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

Goal: **↑44.8%**



Trend: The Division's performance ranged from 41.1% to 42.4% in the most recent quarter. The goal was not met.

## 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. 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. The Colorado Refugee Services Program 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

- In July 2016, the Employment and Benefits Division (EBD) partnered with the Food and Energy Assistance (FEA) Division and the Office of Performance and Strategic Outcomes (OPSO) to conduct a Timeliness and Accuracy Summit for small and medium counties in Colorado. The Timeliness and Accuracy Summit shared best practices identified in neighboring counties and encouraged counties in attendance to employ one or two best practices at their location. In the coming months, EBD, FEA, and OPSO will track performance of counties who attended the Summit to determine the success of the Summit, and provide follow-up training if needed.
- *Colorado Works Entered Employment:* In July and August 2016, the Employment and Benefits Division conducted an analysis of counties to determine which counties demonstrate consistently strong performance in placing Colorado Works participants in employment and which counties may need assistance in improving performance. The Division plans to share promising strategies from strong-performing counties with their peers in the coming months.
- *Colorado Works Work Participation Rate:* The Employment and Benefits Division developed a workgroup with the Office of Performance and Strategic Outcomes and CDHS Executive Management in August 2016 to explore key strategies to support counties in meeting the Work Participation Rate (WPR). Key strategies include CDHS report development, visiting counties critical to improving statewide performance, providing statewide WPR training, and communicating State data-entry requirements to county staff. The workgroup plans to meet regularly throughout 2016 and 2017.
- *Colorado Refugee Services Program Entered Employment:* In July 2016, the Colorado Refugee Services Program (CRSP) invited CRSP vendor staff to assist in developing logic models that address the issue of limited affordable housing, which might prevent refugees from successfully settling in Colorado and finding meaningful employment. The group developed communication strategies to address these issues and will share the strategies with other CRSP vendor staff in the coming months.

#### Measures

- [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 Works All-Family Work Participation Rate](#)
- [Colorado Works Two-Parent Work Participation Rate](#)
- [Colorado Refugee Services Program Entered Employment](#)
- [Colorado Refugee Services Program 90 Day Employment Retention](#)



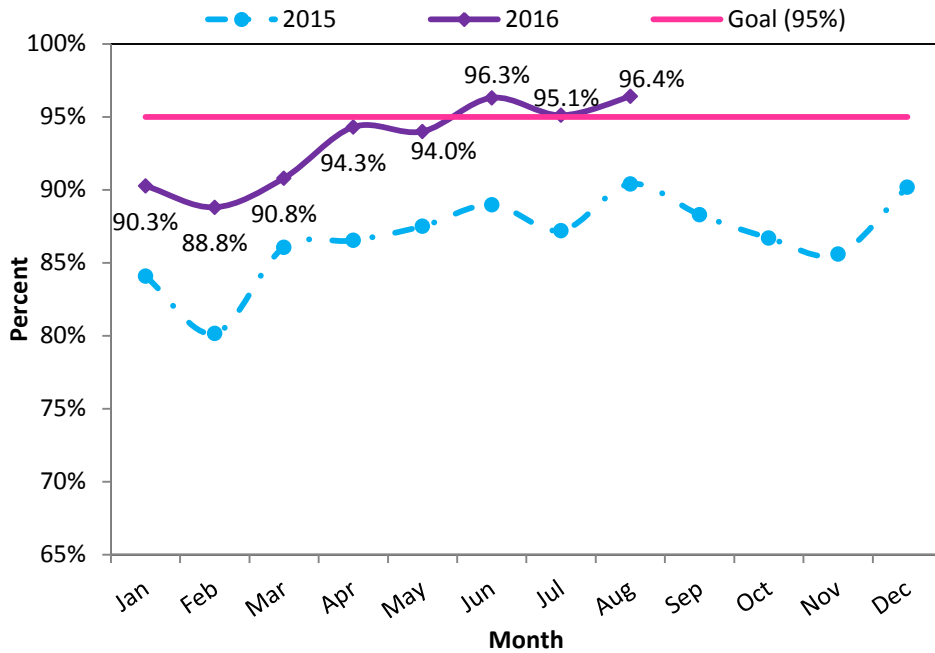
## Employment and Benefits Division: Adult Financial (AF)

Measure: **Timeliness of Redetermination (RRR) Adult Financial Applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely  
*Denominator:* Number of redetermination applications processed in the month; average monthly denominator: 1,174

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

Goal: **↑95%**



Trend: The timeliness of redetermination (RRR) Adult Financial applications from June-August 2016 improved when compared to Mach-May 2016. The goal was attained every month in the most recent quarter.



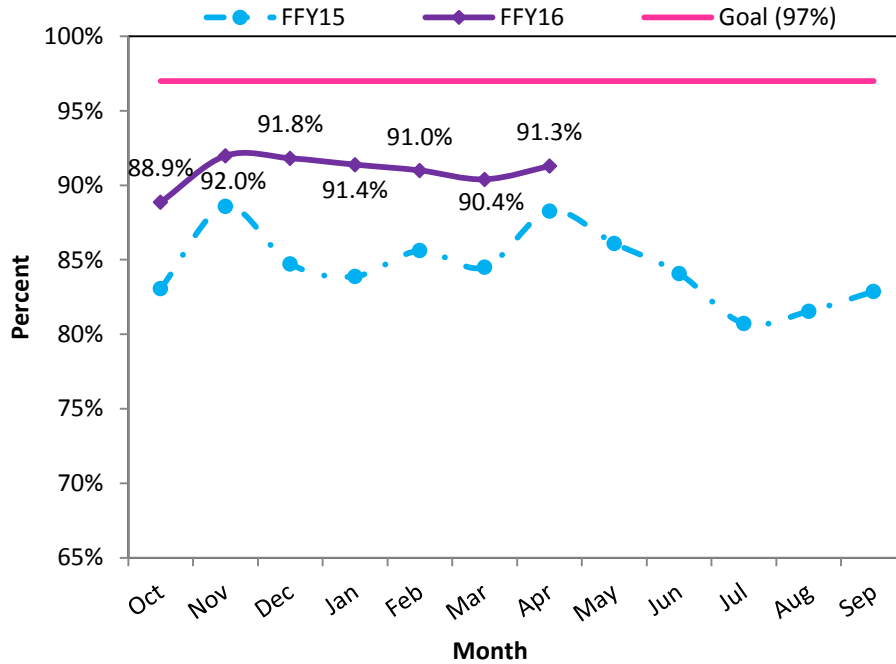
## Employment and Benefits Division: Adult Financial (AF)

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: \$66,057

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

Goal: **↑97%**



Trend: The Division’s performance in the most recent quarter ranged from 90.4% to 91.3%, with little variability demonstrated throughout this calendar year. The goal was not attained.



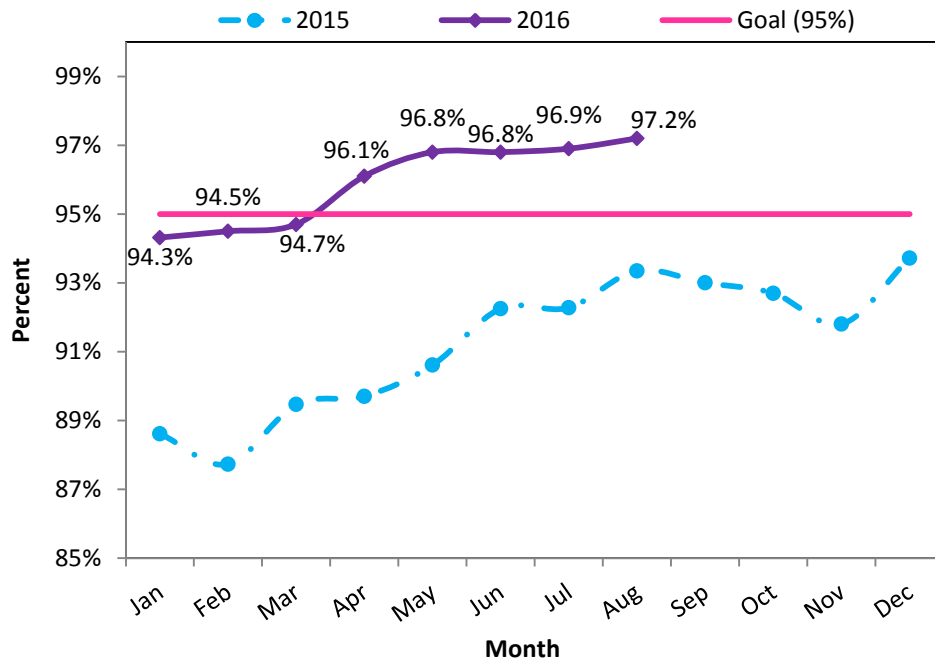
### Employment and Benefits Division: Colorado Works (CW)

Measure: **Timeliness of Redetermination (RRR) Colorado Works Applications**

How it is measured: *Numerator:* Number of redetermination applications processed timely  
*Denominator:* Number of redetermination applications processed in the month; average monthly denominator: 1,784

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: The Division’s performance in the most recent quarter ranged from 96.8% to 97.2%. June-August of 2016 out-performed June-August of 2015. The goal has been met for five consecutive months.



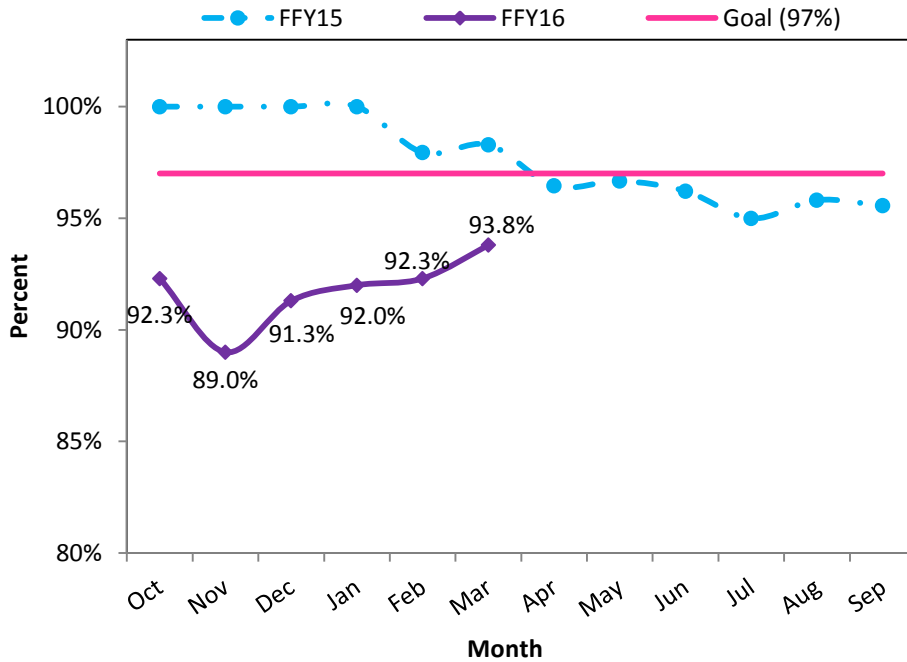
## Employment and Benefits Division: Colorado Works (CW)

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: \$49,611

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

Goal: **↑97%**



Trend: The Division’s performance in the most recent quarter ranged from 92.0% to 93.8% and is trending towards the goal.

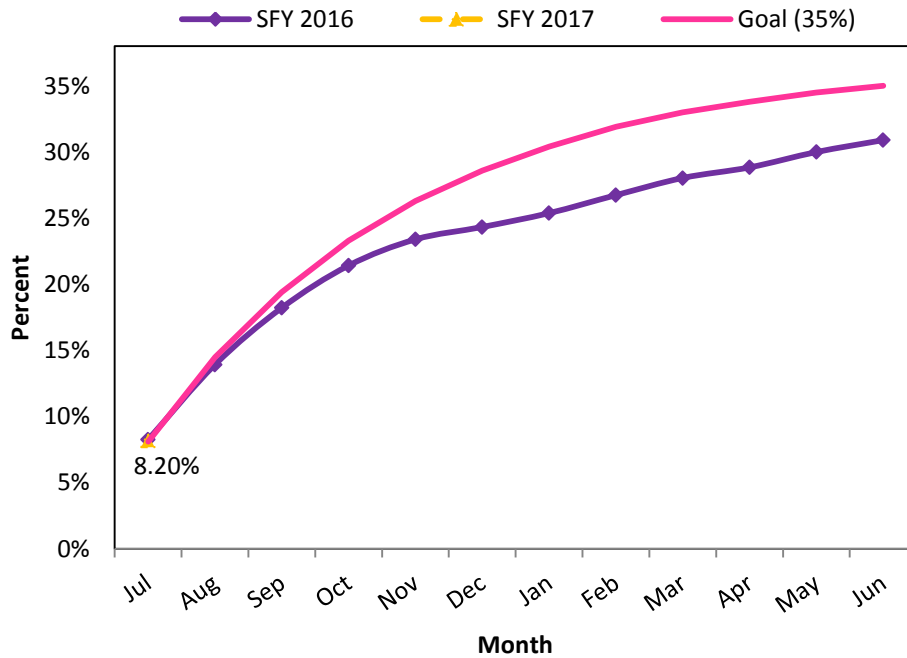
## Employment and Benefits Division: Colorado Works (CW)

Measure: **Colorado Works Entered Employment, Cumulative**

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: 10,845

Why this matters: Gaining employment enables eligible Coloradans to increase their economic security.

Goal: **↑35%**



Trend: The entered employment rate is starting the 2017 State Fiscal Year similar to the start of the 2016 State Fiscal Year.



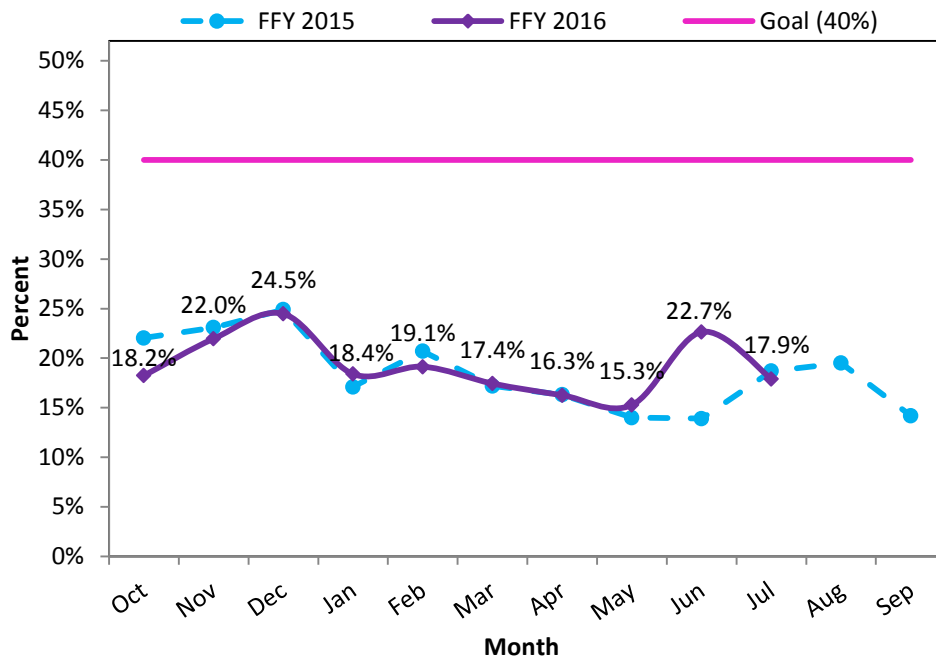
### Employment and Benefits Division: Colorado Works (CW)

Measure: **Colorado Works Work Participation Rate, All-Family Sample**

How it is measured: *Numerator:* Weighted number of families in the month’s All-Family sample participating in countable work activities for the minimum number of hours, as federally determined. *Denominator:* Weighted number of families in the month’s All-Family sample subject to federal work participation requirements, average monthly denominator: 6,158

Why this matters: The Work Participation Rate is a federal measure that tracks families who are participating in federally defined work activities.

Goal: **↑ 40%**



Trend: The Division’s performance in the most recent quarter ranged from 17.9% to 22.7%. The goal was not attained.

Notes: The Work Participation Rate (WPR) is a process measure that tracks the number of hours individuals spend in specified employment activities. Colorado operates as a Sampling State in that 314 cases are selected monthly, and the sample’s weighted rates are reported to the federal Administration for Children and Families (ACF). Child-Only cases are disregarded and are thus excluded from the WPR.



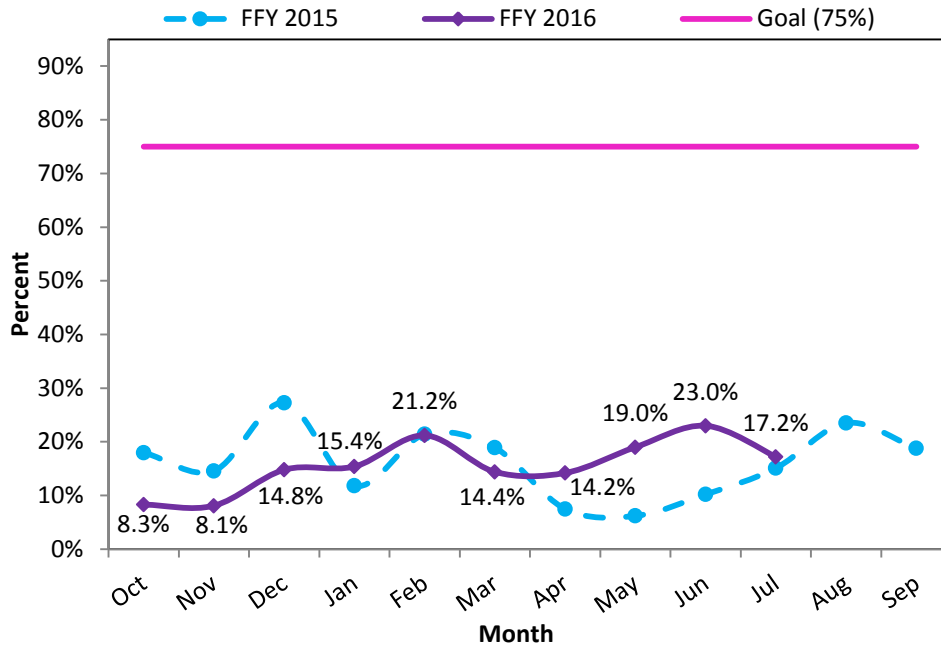
### Employment and Benefits Division: Colorado Works (CW)

Measure: **Colorado Works Work Participation Rate, Two-Parent Sample**

How it is measured: *Numerator:* Weighted number of families in the month’s Two-Parent sample participating in countable work activities for the minimum number of hours, as federally determined. *Denominator:* Weighted number of families in the month’s Two-Parent sample that are subject to federal work participation requirements, average monthly denominator: 877

Why this matters: The Work Participation Rate is a federal measure that tracks families who are participating in federally-defined work activities.

Goal: **↑ 75%**



Trend: The Division’s performance in the most recent quarter ranged from 17.2% to 23.0%. The goal was not attained.

Notes: The Work Participation Rate (WPR) is a process measure that tracks the number of hours individuals spend in specified employment activities. Colorado operates as a Sampling State in that 314 cases are selected monthly, and the sample’s weighted rates are reported to the federal Administration for Children and Families (ACF). Child-Only cases are disregarded and are thus excluded from the WPR.

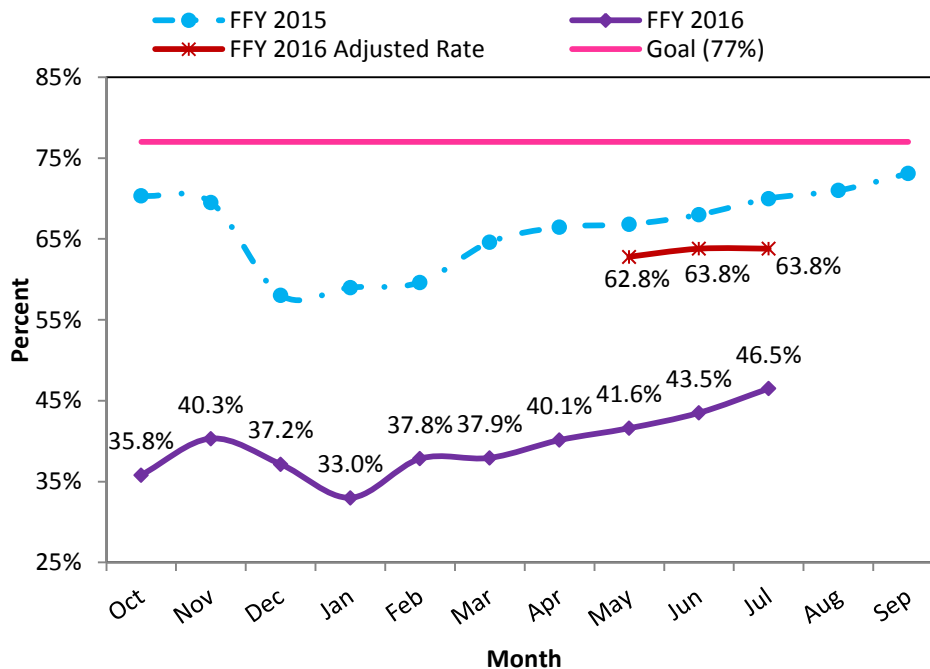
## Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

Measure: **Colorado Refugee Services Program Entered Employment (Federal Measure)**

How it is measured: *Numerator:* Cumulative number of individuals newly entering employment during the month  
*Denominator:* Cumulative number of individuals receiving employment services through the month; cumulative denominator (January 2016): 1,976

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

Goal: **↑77%**



Trend: In the most recent quarter, the Colorado Refugee Services Program’s FFY 2016 performance demonstrated an increase from 41.6% to 46.5% and the program’s FFY 2016 Adjusted Rate ranged from 62.8% to 63.8%.

Note: The Colorado Refugee Services Program tracks employment entry for all participants in the Colorado Refugee Services Program to share the success rates of the population who are active in an employment service. In May 2016, the Colorado Refugee Services Program began reporting the FFY 2016 Adjusted Rate, which excludes participants active in an employment service who are solely funded through another program (e.g. TANF) or considered “not job ready.” The FFY Adjusted Rate is reported to the federal Administration for Children and Families (ACF) at the end of the Federal Fiscal Year.

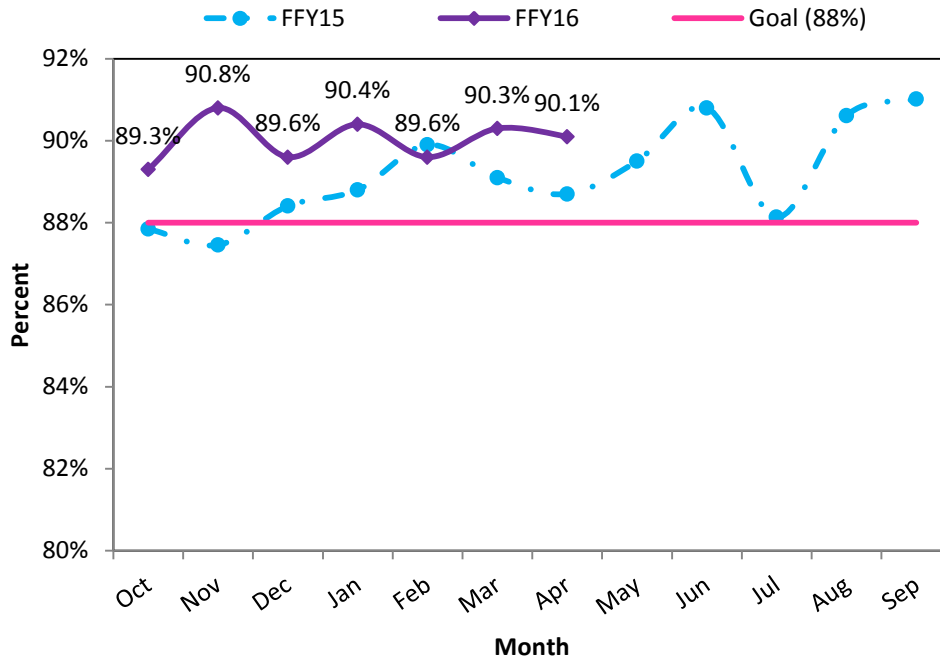
## Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

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 denominator (October 2015 – July 2016): 922

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

Goal: **↑88%**



Trend: The Colorado Refugee Services Program’s performance ranged from 89.6% to 90.3% in the most recent quarter. The goal was attained every month in the most recent quarter.

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

## 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 provides monthly food benefits to eligible Coloradans and is administered through county offices. This Division also houses the Food Distribution Program and the Low-Income Energy Assistance Program.

Director: Lena Harris-Wilson

#### Executive Summary

- In July 2016, the Food and Energy Assistance (FEA) Division partnered with the Employment and Benefits Division (EBD) and the Office of Performance and Strategic Outcomes (OPSO) to conduct a Timeliness and Accuracy Summit for small and medium counties in Colorado. The Timeliness and Accuracy Summit shared best practices identified in neighboring counties, and encouraged counties in attendance to employ one or two best practices at their location. In the coming months, EBD, FEA, and OPSO will track performance of counties who attended the Summit to determine the success of the Summit, and provide follow-up training if needed.
- The Division continued to demonstrate strong performance for each Food Assistance timeliness measure in the most recent quarter, exceeding the goals for six consecutive months or more in all three measures: *Timeliness of New Food Assistance Applications*, *Timeliness of Expedited Food Assistance Applications*, and *Timeliness of Redetermination (RRR) Food Assistance Applications*.
- *Food Assistance Case and Procedural Error Rate (CAPER) and Food Assistance Payment Error Rate (PER)*: In the most recent quarter, the Food Assistance Division partnered with the Public Assistance Quality Assurance Unit within CDHS to identify and separate errors generated by county caseworkers and the case management system. The Food Assistance Division will explore the causes for the most frequent errors, and will develop a plan to address those errors in the coming months.

#### 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](#)

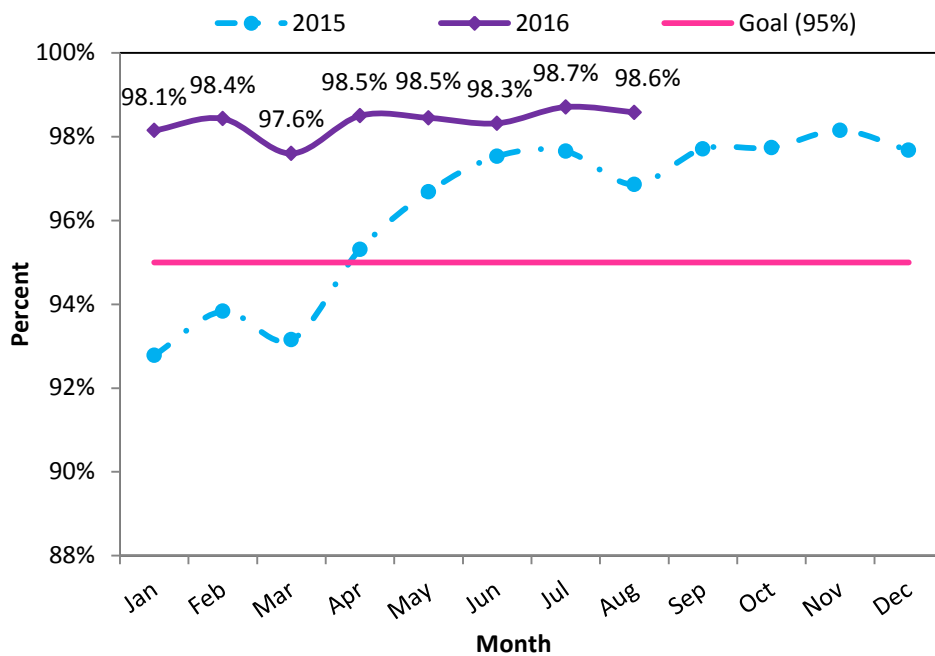
## Food and Energy Assistance: Food Assistance (FA)

Measure: **Timeliness of New Food Assistance Applications**

How it is measured: *Numerator:* Number of new applications processed timely (30 days)  
*Denominator:* Number of new applications processed in the month; average monthly denominator: 16,145

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: The Division’s performance in the most recent quarter ranged from 98.3% to 98.7%. The goal has been achieved for 17 consecutive months.



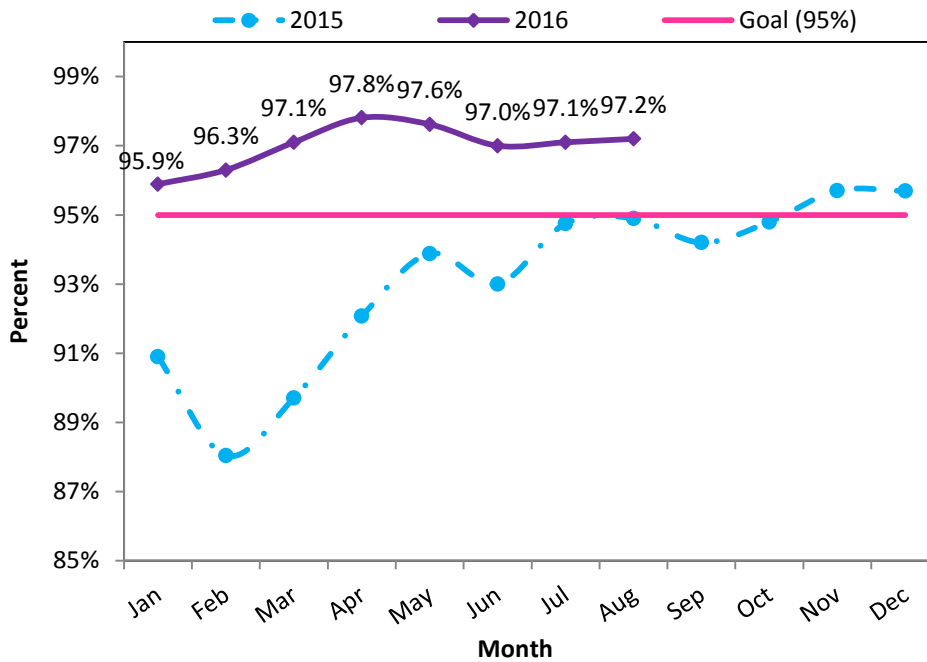
### Food and Energy Assistance: Food Assistance (FA)

Measure: **Timeliness of Expedited Food Assistance Applications**

How it is measured: *Numerator:* Number of expedited applications processed timely (7 calendar days)  
*Denominator:* Number of expedited applications processed in the month; average monthly denominator: 9,174

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: The Division’s performance in the most recent quarter ranged from 97.0% to 97.2%. The goal has been achieved for 10 consecutive months.



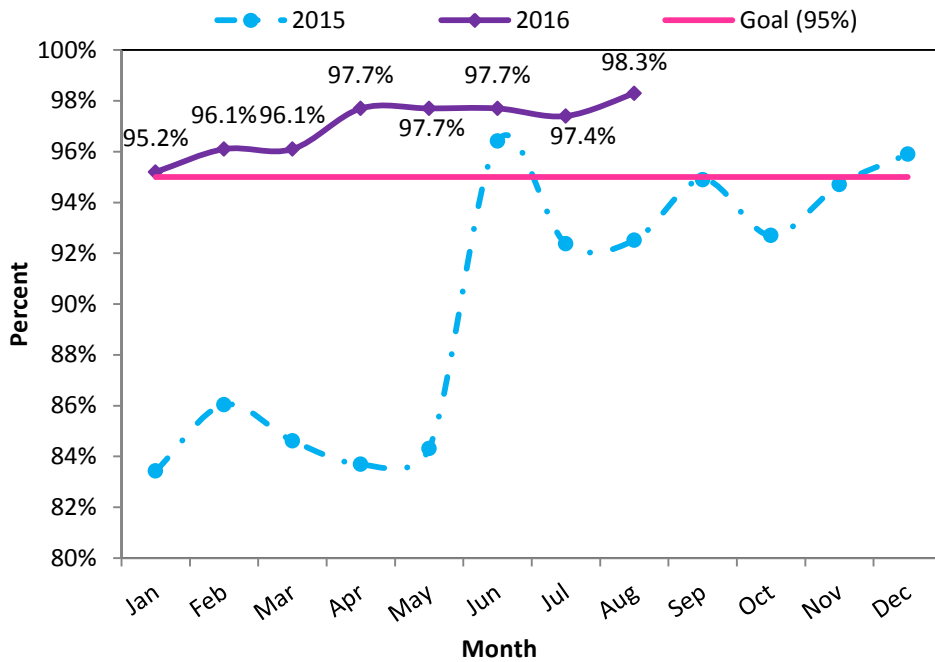
### Food and Energy Assistance: Food Assistance (FA)

Measure: **Timeliness of Redetermination (RRR) Food Assistance Applications**

How it is measured: *Numerator:* Number of redetermination (RRR) applications processed timely  
*Denominator:* Number of redetermination (RRR) applications processed in the month; average monthly denominator: 18,068

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

Goal: **↑95%**



Trend: Performance in the most recent quarter ranged from 97.4% to 98.3%. The goal has been achieved for nine consecutive months.



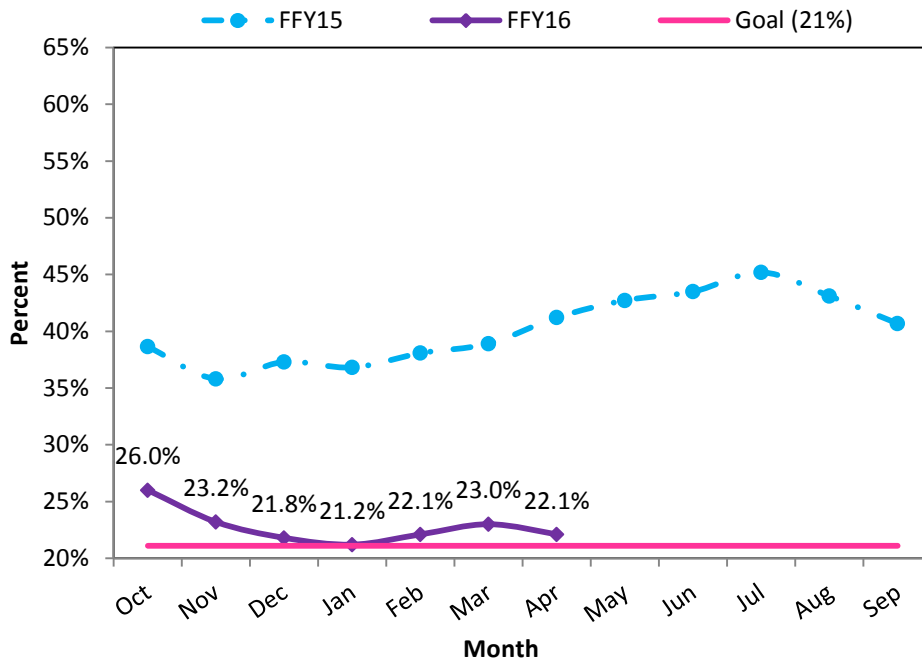
### Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance Case and Procedural Error Rate (CAPER) (Federal Measure)**

How it is measured: *Numerator:* Cumulative number of incorrect negative actions sampled through the month  
*Denominator:* Cumulative number of negative actions sampled Federal Fiscal Year-to-date; Cumulative denominator (October 2015): 489

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

Goal: **↓ 21%**



Trend: The Division’s performance in the most recent quarter ranged from 22.1% to 23.0%. February-April 2016 out-performed February-April 2015.

Notes: A case and procedural error can occur 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 the Quality Assurance and Quality Improvement Division has 115 days to complete necessary review elements before reporting a final decision. This is a federal measure compiled by SNAP Quality Assurance (QA) staff within CDHS. The Federal Fiscal Year begins each year on October 1st, resetting the cumulative measurement.

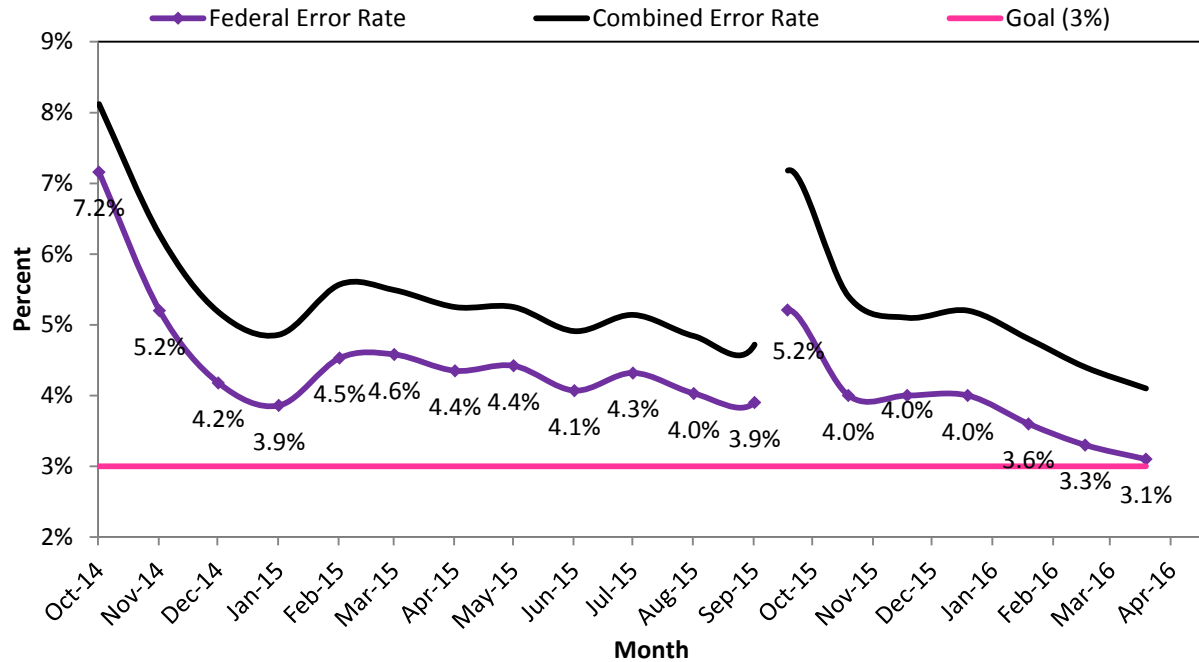
## Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance Payment Error Rate (PER)(Federal Measure)**

How it is measured: *Numerator:* Cumulative amount of misauthorized dollars in the sample through the month  
*Denominator:* Cumulative amount of authorized dollars in the sample Federal Fiscal Year-to-date; cumulative denominator (October 2015-July 2016): \$141,142

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

Goal: **↓ 3%**



Trend: The Division’s performance in the most recent quarter improved in both the FFY16 error and the FFY16 combined error rates. February-April of 2016 out-performed February-April of 2015.

Notes: The Payment Error Rate (PER) is a federal measure of misauthorized payments above an allowable threshold (\$37 as of 2014). This is a federal measure compiled by SNAP Quality Assurance (QA) staff. The Federal Fiscal Year begins each year on October 1st.