



Summary Report

January - March 2018

Prepared by:
Performance Management



COLORADO
Department of Human Services

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Colorado Department of Human Services

Mission

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

Vision

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

Values

The Colorado Department of Human Services will:

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

The C-Stat Process

What is C-Stat?

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

C-Stat Meetings

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

C-Stat Report

This report reflects the measures identified by CDHS to be tracked on an ongoing basis through the C-Stat process as of March 30th, 2018. C-Stat measures, however, remain fluid in nature as progress is made and data refined. C-Stat will continue to evolve to meet the objective of measuring key performance indicators for CDHS.

Each graph reflects the data available and reviewed as of the December 2017 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 **Julie James** at **303-866-3236** or at Julie.james@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)**

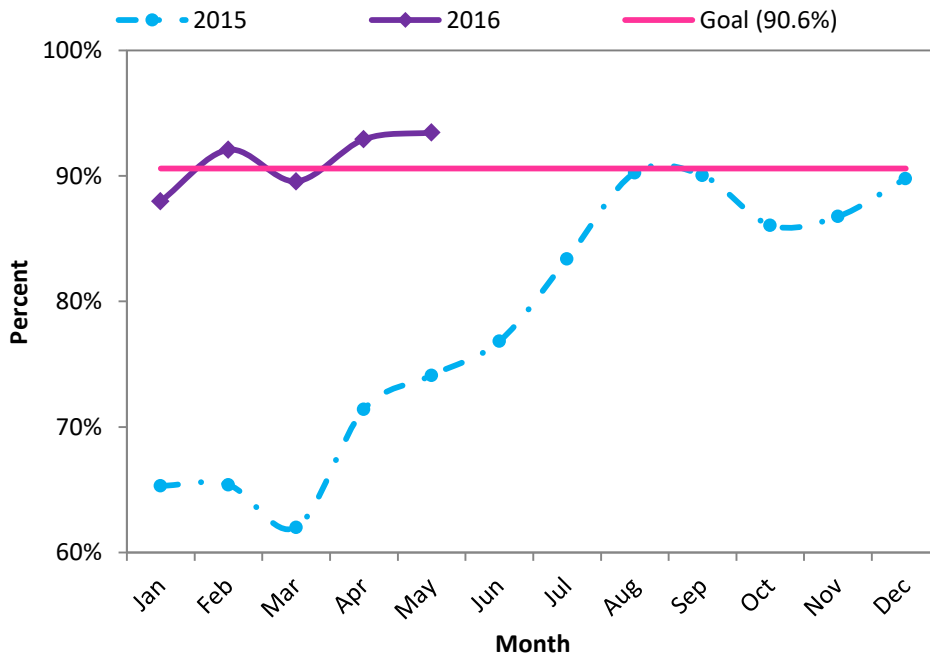
How it is measured: *Numerator:* Describes what is being “counted.”
Denominator: Describes the overall population: Average monthly denominator; average of the last three months’ denominators OR Cumulative denominator; cumulative up to the last month of the reporting period OR Average daily population; 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 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 (mental health and substance use disorder programs) and the Mental Health Institute Division (operation of two Mental Health Institutes at Fort Logan and Pueblo).

Director: Dr. Robert Werthwein

Deputy Director: Michael Tessean

Community Behavioral Health

Summary

Description

The Community Behavioral Health (CBH) Division 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 to fulfill its role as the single state authority for behavioral health services. The Division contracts with 17 Community Mental Health Centers, two specialty Mental Health Clinics, and four Managed Service Organizations that, in turn, manage 40 Substance Use Disorder providers.

Director: Camille Harding

Executive Summary

- *People with an Opioid Use Disorder Accessing Treatment:* The Division has met the goal since August 2017 and is increasing the number of people accessing treatment each month. To continue this trend, the Division hired Peer Recovery Coaches and will launch an Anti-Stigma campaign in Spring 2018.
- *Improved Living Situation for Homeless while Receiving Mental Health Services:* This measure focuses on Colorado's vulnerable homeless population and monitors the volume of homeless clients who have an update to their record or are discharged each month. This quarter, the measure was changed to show success as the number of persons who improved their housing situation from being homeless or in a locked facility who moved into a nursing home, residential treatment, assisted living, supported housing, or independent living. Analysis revealed that the majority of those who improve their housing situation move into independent living.
- *Timeliness of License Issuance:* The Division launched a new online licensing electronic records system in February 2018 known as the Licensing and Designation Database and Electronic Records System (LADDERS). Previously, providers submitted hard copies of their applications to the Division. Now, this system serves as an online provider portal for license applications. Due to the rollout of this database, only two new months of data are included in this report.

Measures

- [People with an Opioid Use Disorder Accessing Treatment](#)
- [Substance Use Disorder Clients Engaged in Services](#)
- [Improved Living Situation for Homeless while Receiving Mental Health Services](#)
- [Timeliness of Crisis Services](#)
- [Percent of Clients with Reduced Suicidality](#)
- [Timeliness of License Issuance](#)



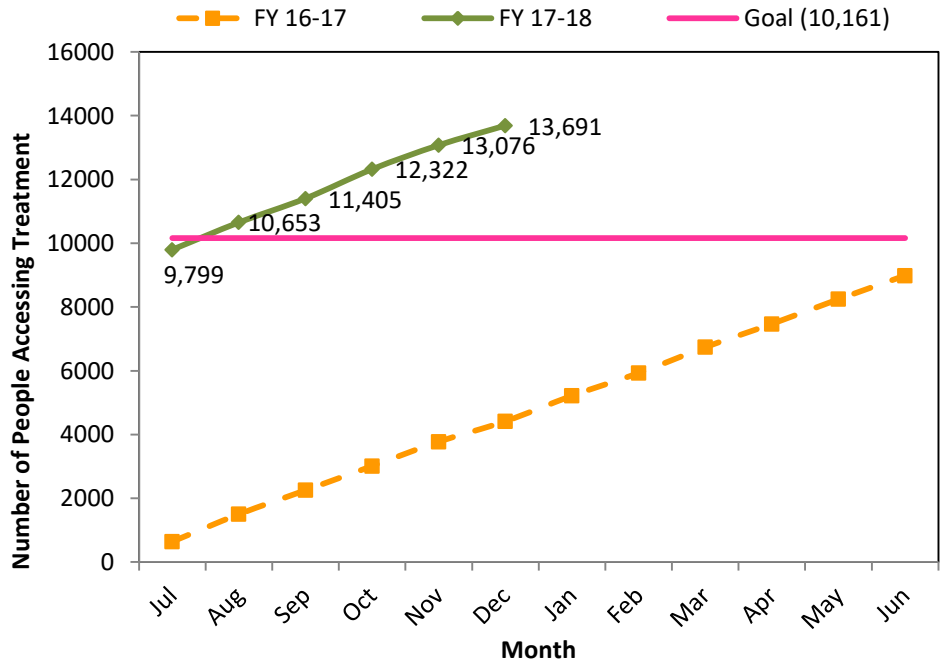
Community Behavioral Health (CBH)

Measure: **People with an Opioid Use Disorder Accessing Treatment**

How it is measured: Cumulative number of people with opioid use disorders accessing treatment
December 2017: 13,691

Why this matters: Access to treatment for people with an opioid use disorder increases the likelihood that an individual will reduce use.

Goal: **↑10,161**



Trend: Performance in the most recent quarter ranged from to 12,322 to 13,691. The goal was attained each month this quarter.

Notes: The FY 17-18 data are retroactively updated monthly. Data are not available until 60 days after services are received.



Community Behavioral Health (CBH)

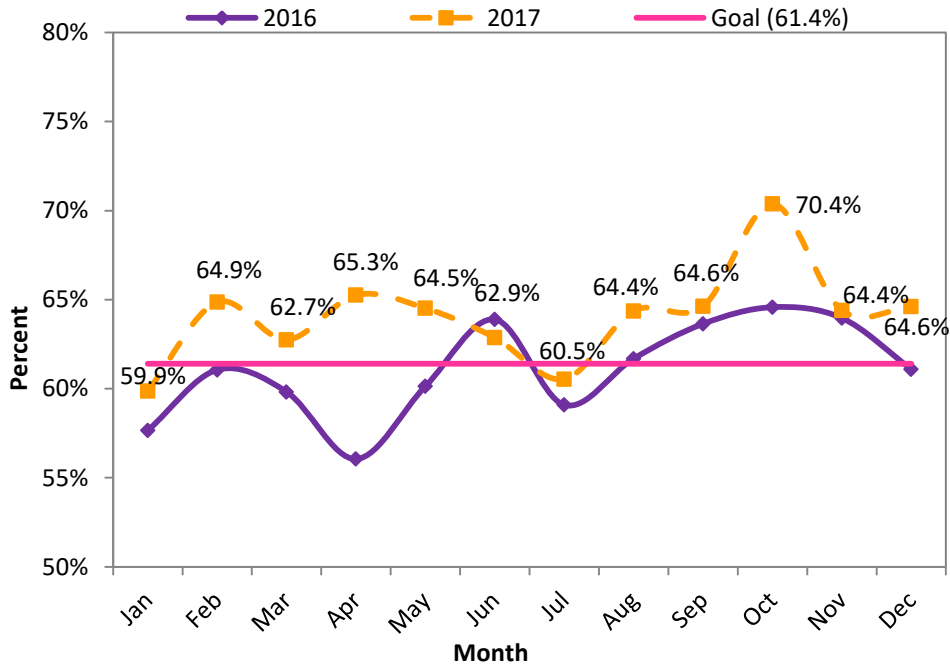
Measure: **Substance Use Disorder Clients Engaged in Services**

How it is measured: *Numerator:* Percent of clients engaged within 45 days of admission to Substance Use Disorder treatment

Denominator: All Substance Use Disorder treatment admissions; average monthly denominator: 1,091

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

Goal: **↑61.4%**



Trend: Performance in the most recent quarter ranged from 64.4% to 70.4%. The goal was attained each month this quarter.

Notes: The 12 most recent months of data are retroactively updated monthly. Data are not available until 60 days after services are received.





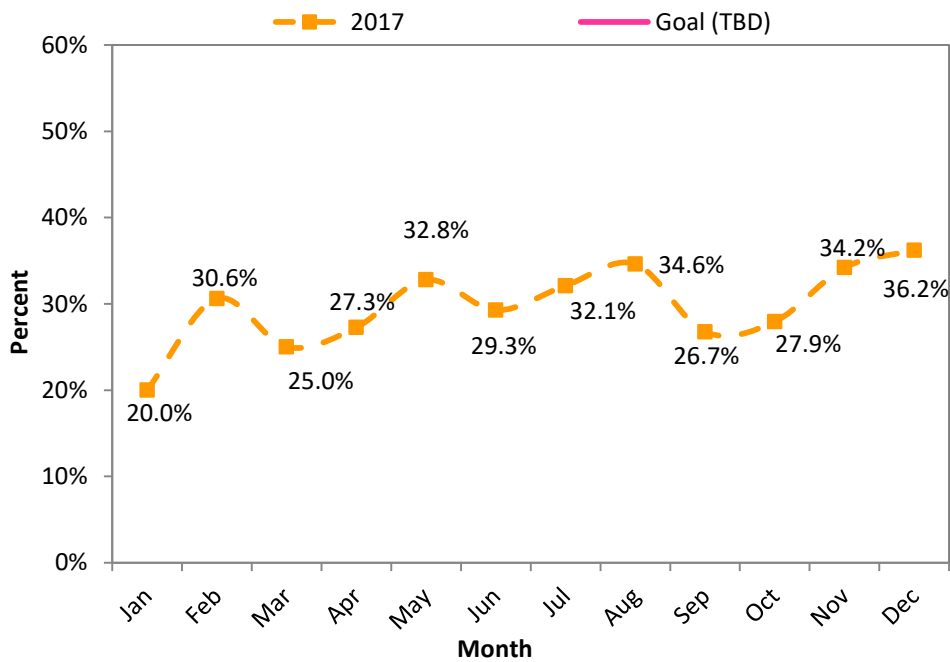
Community Behavioral Health (CBH)

Measure: **Improved Living Situation for Homeless while Receiving Mental Health Services**

How it is measured: *Numerator:* Number of homeless persons who improved their housing situation to Level 3 and above
Denominator: Number of homeless 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: 68

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

Goal: **↑TBD**



Trend: Performance in the most recent quarter ranged from 27.9% to 36.2%.

Notes: The 12 most recent months of data are retroactively updated monthly.

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

The levels of CCAR “Place of Residence” are as follows: “Level 1” is homelessness, “Level 2” is locked facility, “Level 3” is Acute Treatment Unit, “Level 4” is residential treatment, “Level 5” is assisted living, “Level 6” is supported housing, and “Level 7” is independent living.





Community Behavioral Health (CBH)

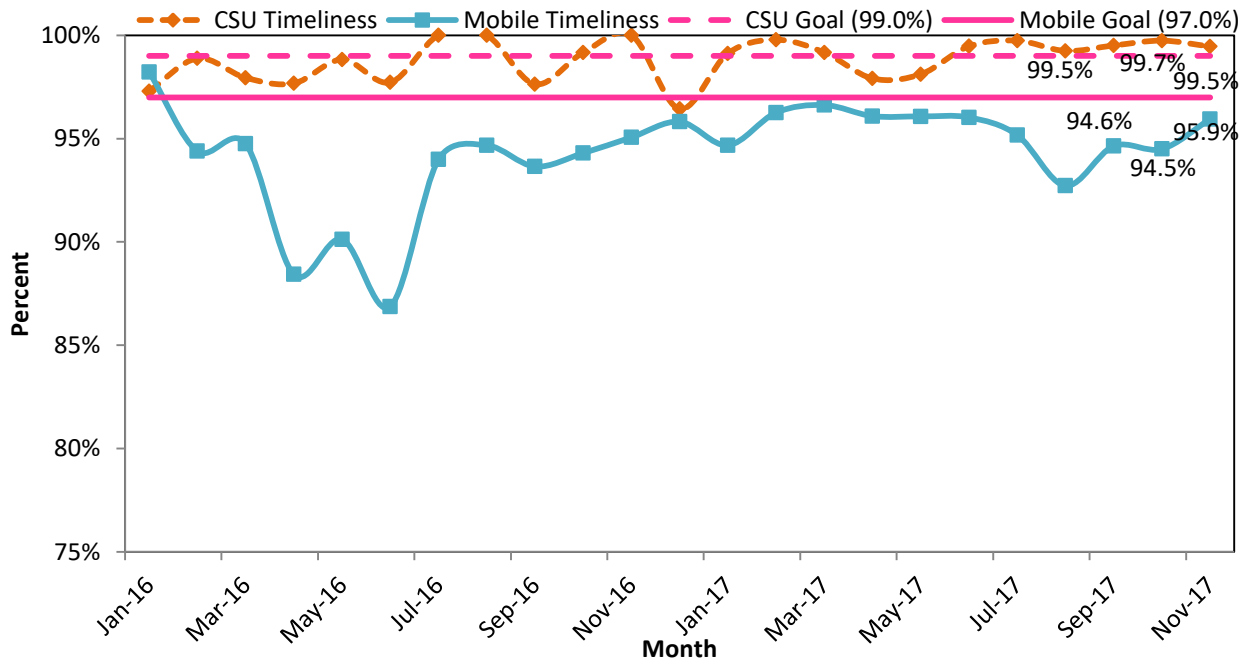
Measure: **Timeliness of Crisis Services**

How it is measured: *Numerator:* Number of individuals receiving crisis services within allotted time frame (24 hours 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: 390; Mobile: 2,017

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 timeliness ranged from 99.5% to 99.7% and met the goal each month this quarter. Mobile timeliness ranged from 94.5% to 95.9% and the goal was not attained.





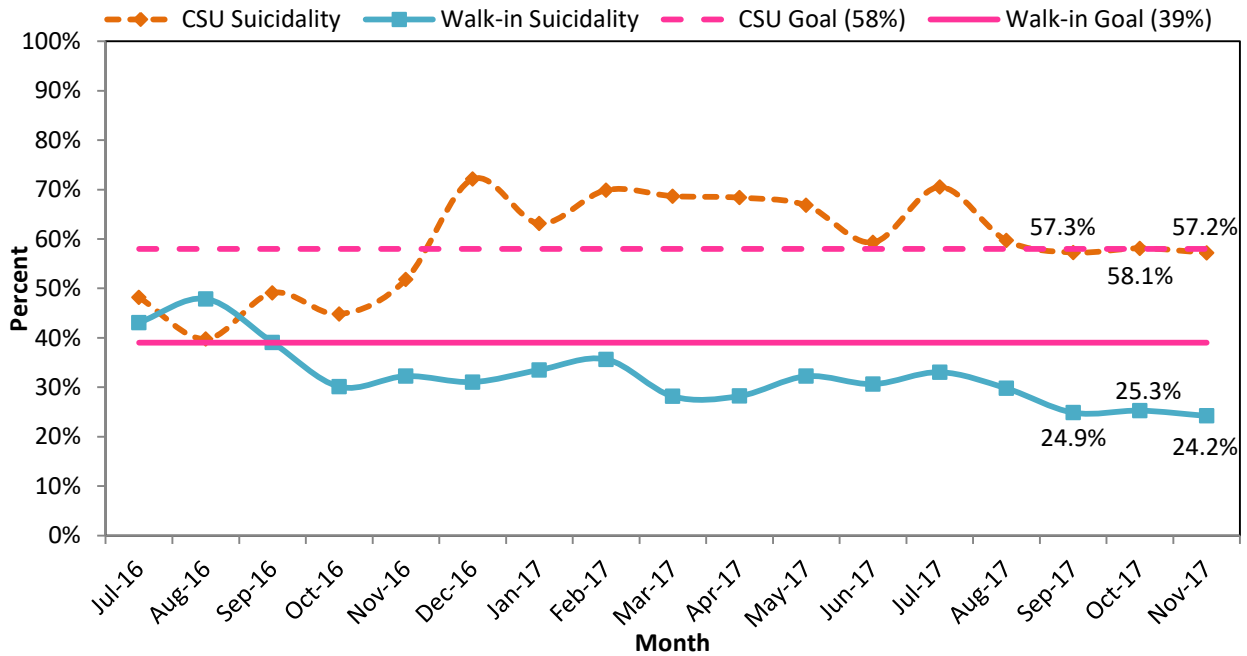
Community Behavioral Health (CBH)

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): 223; Mobile: 645

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

Goal: **↑ CSU 58%, Walk-in 39%**



Trend: Crisis Stabilization Unit performance in the most recent quarter ranged from 57.2% to 58.1% and met the goal in October 2017 (58.1%). Walk-in performance in the most recent quarter ranged from 24.2% to 25.3%. The Walk-in goal was not attained.



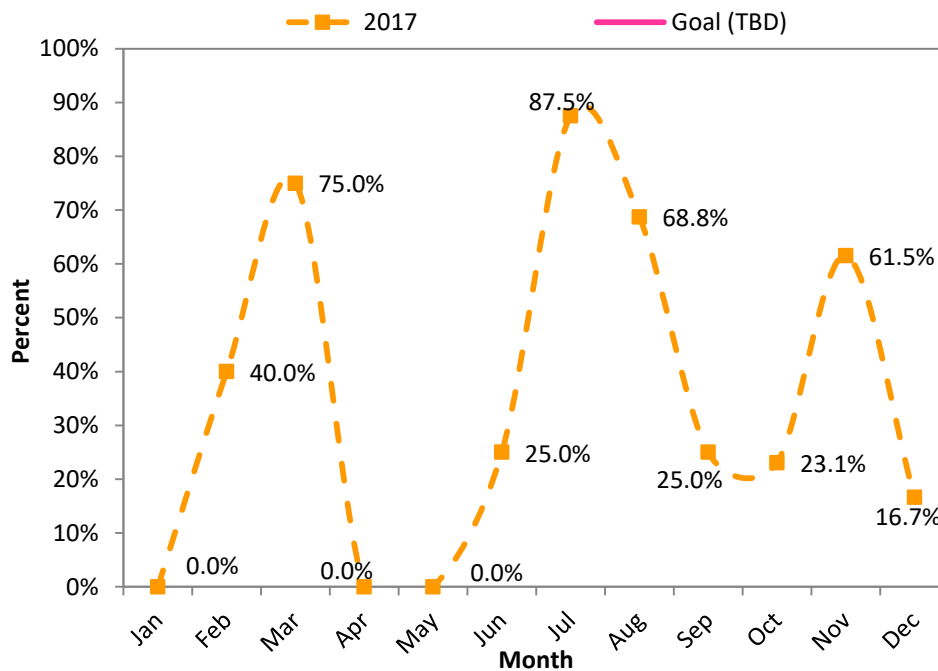
Community Behavioral Health (CBH)

Measure: **Timeliness of License Issuance**

How it is measured: *Numerator:* Total number of licenses issued before the expiration date
Denominator: Total number of licenses expiring in the month, excluding providers that closed;
average monthly denominator: 6.3

Why this matters: Issuing timely licenses ensures that providers can continue to serve clients.

Goal: **↑TBD**



Trend: Performance in the most recent quarter ranged from 16.7% to 61.5%.

Note: The Community Behavioral Health Division launched the Licensing and Designation Database and Electronic Records System (LADDERS) in February 2018, which collects data for this measure. Due to the launch of this new reporting system, only two new months of data from November and December 2017 are reported in this Quarterly Report.

Mental Health Institutes (MHI)

Summary

Description

The Mental Health Institutes Division operates the two state psychiatric hospitals: the Colorado Mental Health Institute at Fort Logan and the Colorado Mental Health Institute at Pueblo. 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 and non-state hospitals.

The **Colorado Mental Health Institute at Pueblo** (CMHIP) primarily serves forensic clients but also serves a civil population. This Institute serves adults who are found Not Guilty by Reason of Insanity or Incompetent to Proceed (i.e., defendants unable to assist in their own defense). This Institute also provides evaluations of competency to stand trial, sanity, and other mental conditions for individuals referred for evaluation by the state's courts.

CMHIFL Hospital Director: David Polunas
Interim CMHIP Chief Executive Officer: Teresa Bernal

Executive Summary:

- *Percent of 30 and 180-Day Readmissions – Fort Logan:* An analysis of CMHIFL readmissions revealed that the majority of clients readmitted due to failure to take medication. To reduce readmissions, the Institute provides education to clients regarding their medication prior to discharge through individual and group therapy. The Medical Staff also encourage the patient's to utilize long acting injectable forms of the antipsychotic medications to increase compliance. The Medical Staff request long acting injectable forms of the antipsychotic medications when petitioning the Courts for involuntary medications. The Institute's pharmacists and psychiatrists also work together to decrease medication side effects and work with Mental Health Centers to accept certifications and maintain court ordered medications.
- *Events of Medication Variance – Fort Logan & Pueblo:* In January 2018, an analysis revealed that the most common type of medication error at CMHIFL is transcription error. In order to reduce the incidence of medication variance, CMHIFL instituted a second nurse check for transcriptions in January 2018. This analysis also revealed that "did not administer medication" is the most common type of medication error at CMHIP.

Measures:

- [Rate of Patient-to-Staff Assaults – 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](#)



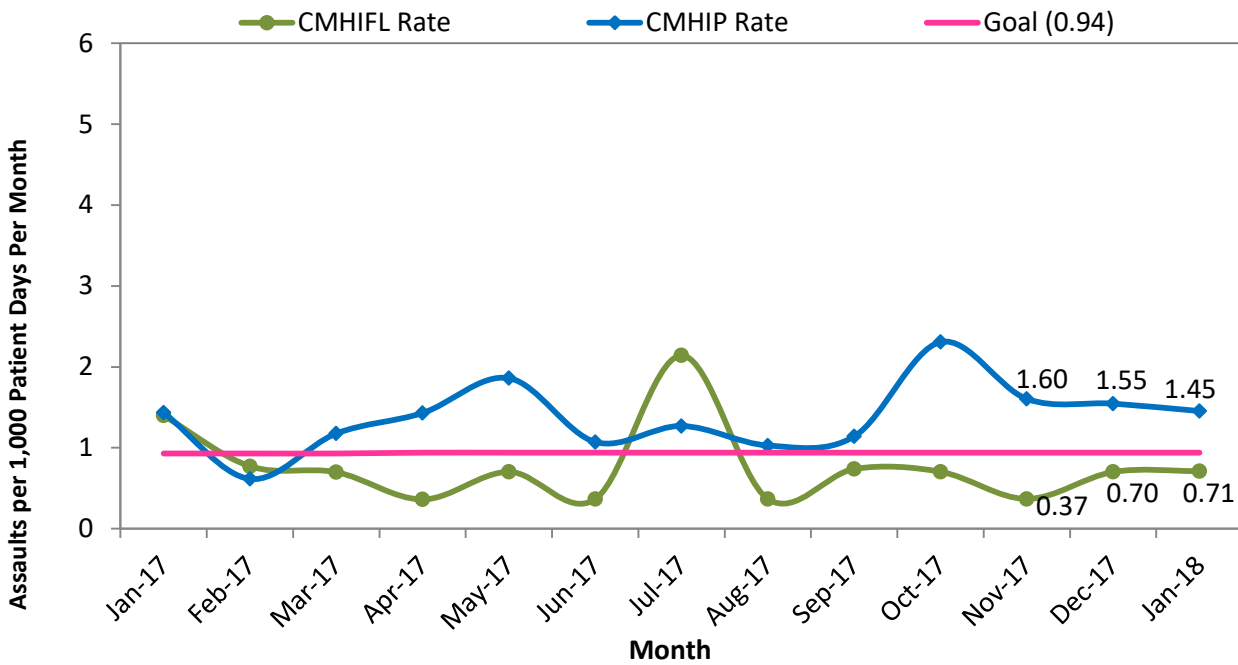
Mental Health Institutes (MHI)

Measure: **Rate of Patient-to-Staff Assaults – Fort Logan & Pueblo**

How it is measured: *Numerator:* The sum of unlawful sexual contact, physical assaults, and sexual assaults in a month
Denominator: All patient days in the month divided by 1,000; average monthly denominator: Fort Logan: 2.8; Pueblo: 12.2

Why this matters: Staff safety is paramount to reducing risk to patients and staff, while also ensuring an environment in which patients can receive treatment safely.

Goal: **↓ 0.94**



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 0.71 to 0.37 and met the goal each month this quarter. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 1.60 to 1.45. The goal was not attained this quarter.





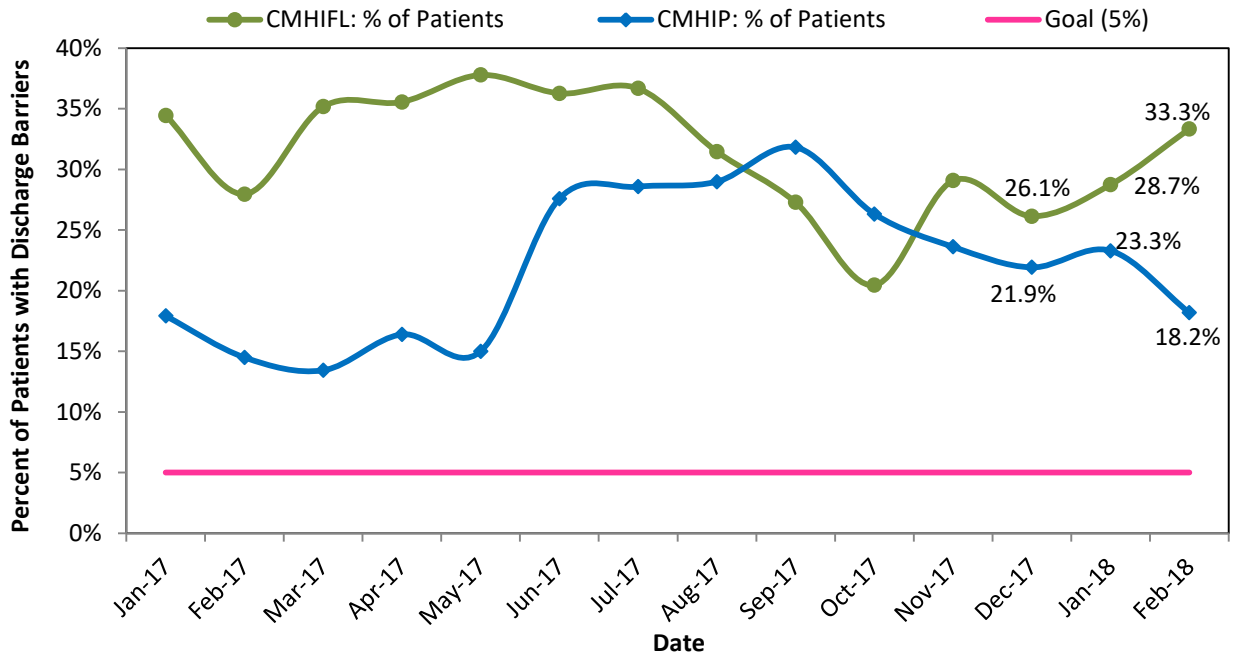
Mental Health Institutes (MHI)

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: 87.0; Pueblo: 72.7

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 33.3% to 26.1%. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 23.3% to 18.2%. The goal was not attained by either Institute throughout the quarter.



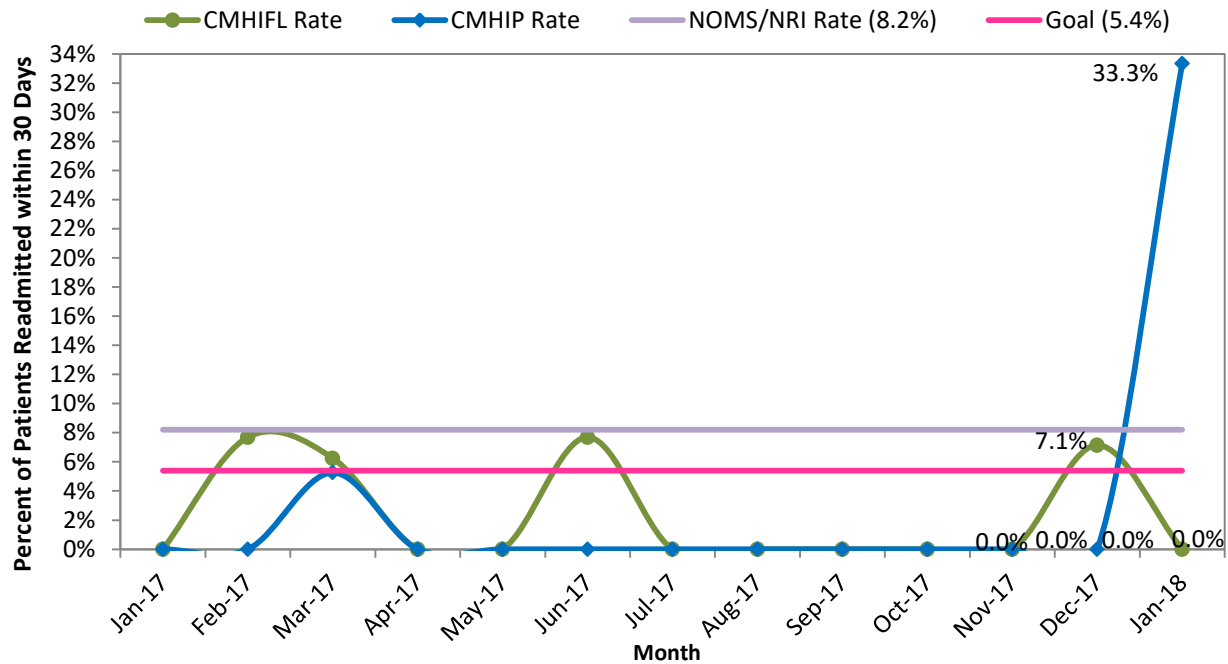
Mental Health Institutes (MHI)

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: 16.0; Pueblo: 3.3

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 7.1% to 0.0% and attained the goal in November 2017 (0.0%) and January 2018 (0.0%). The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 33.3% to 0.0% and attained the goal in November 2017 (0.0%) and December 2017 (0.0%).

Mental Health Institutes (MHI)

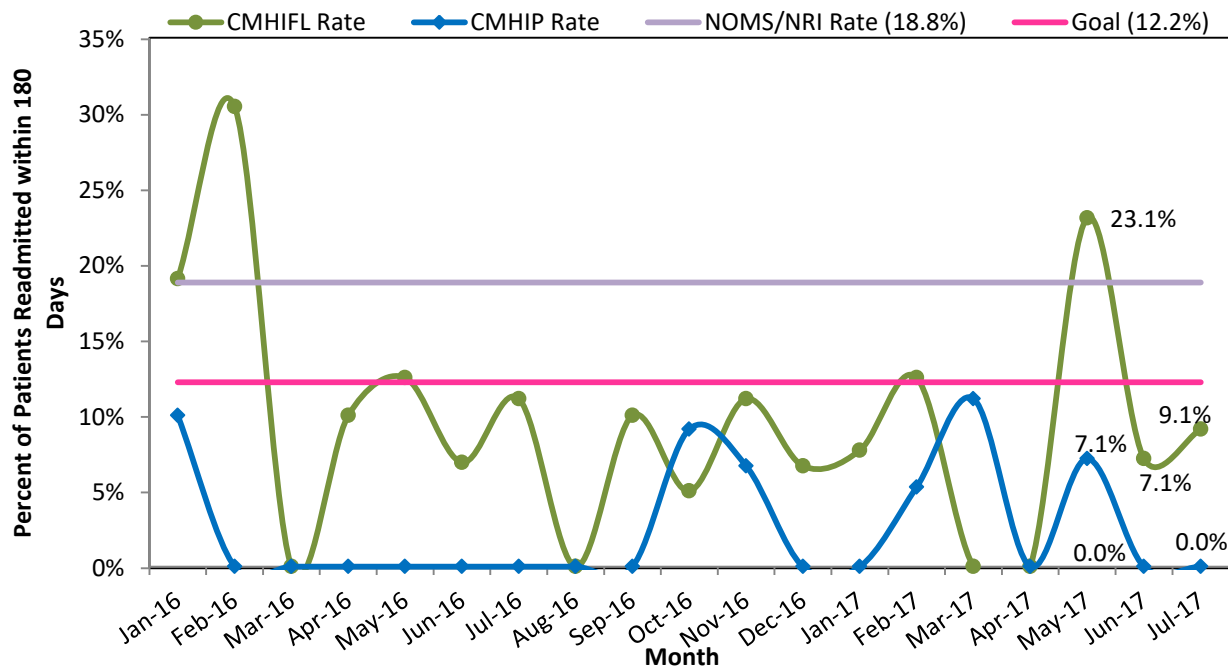
Measure: **Percent of 180-Day Readmissions – Fort Logan & Pueblo**

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: 17.0; Pueblo: 10.7

Why this matters: A rapid readmission may reflect a failure of continuity of care between the hospital and the community provider, resulting in a patient suffering 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 23.1% to 7.1%. The goal was attained in June 2017 (7.1%) and July 2017 (9.1%). The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 7.1% to 0.0% and attained the goal in every month of the quarter.

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

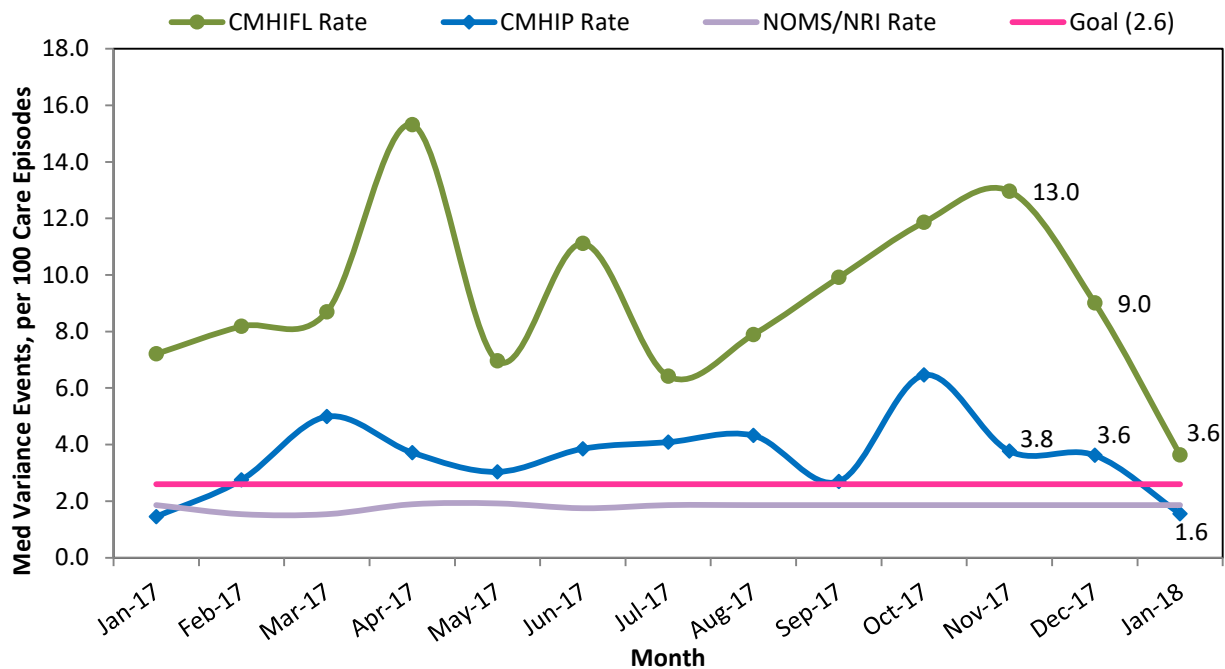
Mental Health Institutes (MHI)

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 (which includes existing patients, new patients, and readmissions in a single month, divided by 100); average monthly denominator: Fort Logan: 1.1; Pueblo: 4.5

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

Goal: ↓2.6



Trend: The Colorado Mental Health Institute at Fort Logan’s (CMHIFL) performance in the most recent quarter ranged from 13.0 to 3.6. At CMHIFL, the goal was not attained in any month this quarter. The Colorado Mental Health Institute at Pueblo’s (CMHIP) performance in the most recent quarter ranged from 3.8 to 1.6. At CMHIP, the goal was attained in January 2018 (1.6).

Office of Children, Youth, and Families

Description

The Office of Children, Youth, and Families 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 by the Division of Child Welfare, the Division of Youth Services, and the Domestic Violence Program. These services are facilitated through partnerships with families, providers, and local communities to ensure that children and families have safe, healthy, stable environments.

Director: Minna Castillo Cohen

Deputy Director: Luis Guzman

Division of Child Welfare

Summary

Description

The Division of Child Welfare (DCW) oversees and provides policy direction to counties that deliver child welfare services. The Division is composed of a specialized set of services that strengthen the ability of the family to protect and care for their own children, minimize harm to children and youth, and ensure timely permanency planning. Services stabilize the family situation and strengthen the family's capacity to care for their children. When safety is not possible within the family, services focus on the child's need for a stable, permanent home as quickly as possible.

Director: Ann Rosales

Executive Summary

- Several DCW measures reflect data that are collected via Results-Oriented Management (ROM), a web-based data management reporting system developed and maintained by the University of Kansas. The public can access performance data 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 and Maltreatment in Out-of-Home Care*.
- *Timeliness of Initial Response to Abuse/Neglect Assessments*: After consistently meeting the 90% goal, the Division increased the goal to 95% in June 2017. In an effort to reach the new goal, Division staff followed up with all counties about the new expectations for timeliness. The Division achieved the revised goal for the first time in December 2018.
- *Children Who Re-Enter Care within 12 Months (monthly measure)*: This measure does not appear in this C-Stat Quarterly Report, as the methodology is being updated to more accurately reflect the number of children discharged within a rolling 12-month period. This measure will return to the next C-Stat Quarterly Report with the revised methodology.
- *Children in Congregate Care*: The Department continues to review congregate care use across Colorado and the nation to determine areas to make potential impacts.

Measures

- [Timeliness of Initial Response to Abuse/Neglect Assessments](#)
- [Maltreatment in Out-of-Home Care](#)
- [Children in Congregate Care](#)



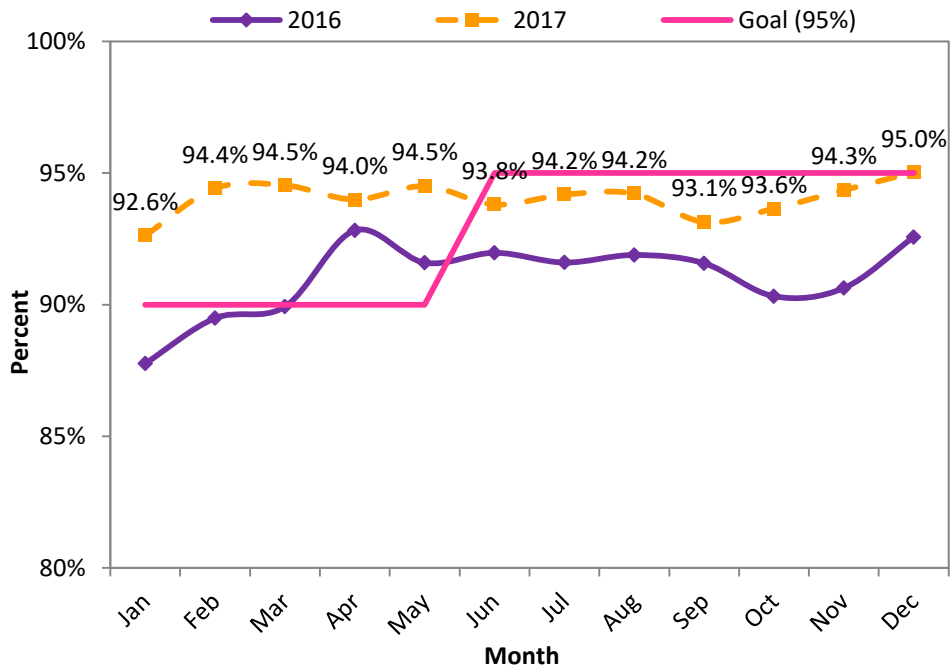
Division of Child Welfare (DCW)

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)
Denominator: Number of alleged victims with a child protection assessment opened in the specified month (both Traditional and Family Assessment Response); average monthly denominator: 4,454

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

Goal: **↑ 95%**



Trend: The Division’s performance ranged from 93.6% to 95.0% in the most recent quarter. In December 2017, the Division achieved the 95% goal for the first time.

Notes: DCW increased the goal to 95% in June of 2017 after consistently attaining the 90% goal.



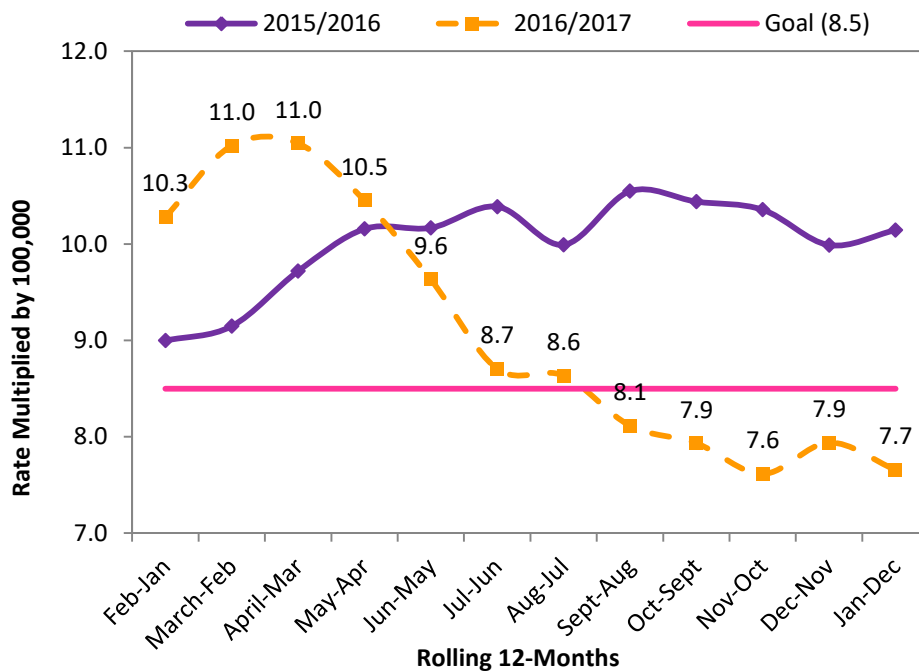
Division of Child Welfare (DCW)

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 an out-of-home care episode within a 12-month period
Denominator: Of the children in out-of-home care during a 12-month period, the total number of days these children were in out-of-home care as of the end of the 12-month period; average reporting period denominator: 1,813,848

Why this matters: Children in out-of-home care deserve to be safe and free of maltreatment.

Goal: **↓ 8.5**



Trend: Overall, the Division has demonstrated a consistent improvement in performance on the rate of Maltreatment in Out-of-Home Care over the last three quarters. The Division achieved its best performance to date (7.6) in Nov-Oct 2017.

Note: Data is presented in a rolling 12 months to align with the federal reporting methodology.



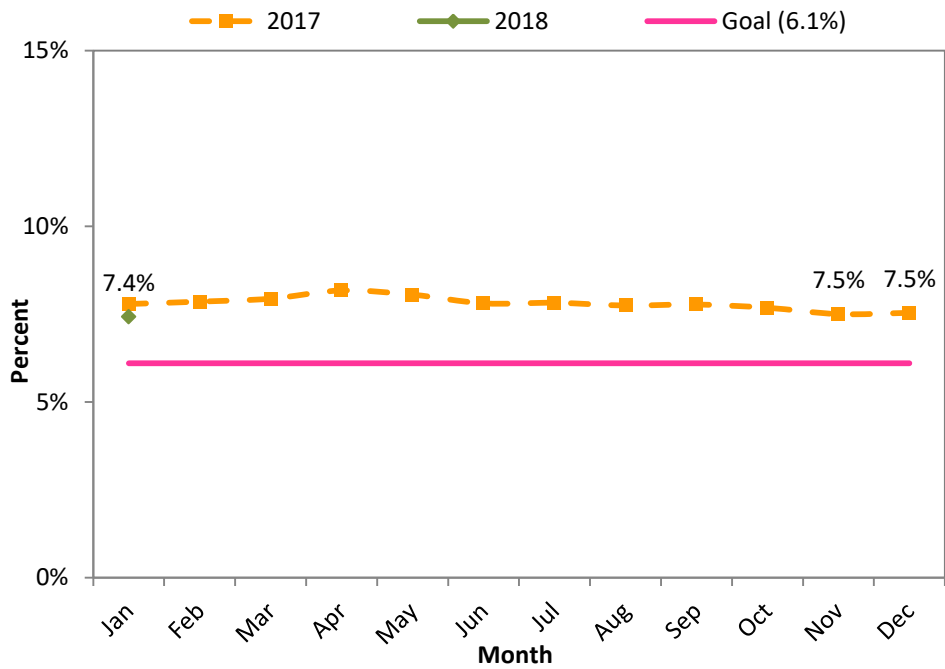
Division of Child Welfare (DCW)

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: 11,453

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 ranged from 7.5% to 7.4% in the most recent quarter. The goal has yet to be achieved.



Division of Youth Services

Summary

Description

The Division of Youth Services (DYS) provides for the care and supervision of youth committed by the District Court to the custody of CDHS. The Division operates 10 secure facilities that serve youth between the ages of 10-21 who are pre-adjudicated or committed. In addition to residential programming, DYS administers juvenile parole services throughout Colorado.

Director: Anders Jacobson

Executive Summary

- *Youth-on-Youth Fights and/or Assaults and Youth-on-Staff Assaults in DYS State-Secure Facilities:* Results from a recent data validation project showed that Youth Services centers have consistent and accurate documentation practices around fights and assaults data. The project also prompted additional analysis of fights and assaults by location, and found that a majority of fights and assaults across all facilities occur in the living units.
- *Seclusion Hours in DYS State-Secure Facilities:* The Division continues to implement additional efforts to reduce the use of seclusion in facilities, as isolation eliminates a youth's ability to engage in treatment and programming. For example, a few facilities recently implemented self-calming/self-care rooms, which reinforce the trauma-informed environment and offer an alternative way to prevent incidents that may lead to seclusion.
- *Rate of Wrap Applications in DYS State-Secure Facilities:* The Division successfully eliminated use of the Safe Restraint Wrap before the revised deadline of January 1, 2018. The Division continues to provide staff with ongoing education and training regarding alternative interventions. This measure was retired after December 2017 and will no longer appear in the C-Stat Quarterly Report.
- *Family Attendance at Multidisciplinary Team (MDT) Review Meetings:* The Division analyzed the reasons why family members did not attend MDT Review Meetings and found the top reason to be difficulty getting time off of work. The Division plans to continue analyzing this data in order to inform new strategies for engaging family members.

Measures

- [Timely Initial Placement for Committed Youth](#)
- [Youth-on-Youth Fights and/or Assaults in DYS State-Secure Facilities](#)
- [Youth-on-Staff Assaults in DYS State-Secure Facilities](#)
- [Youth Injuries in State-Secure Facilities](#)
- [Seclusion Hours in DYS State-Secure Facilities](#)
- [Rate of Wrap Applications in DYS State-Secure Facilities](#)
- [Family Attendance at Multidisciplinary Team \(MDT\) Review Meetings](#)



Division of Youth Services (DYS)

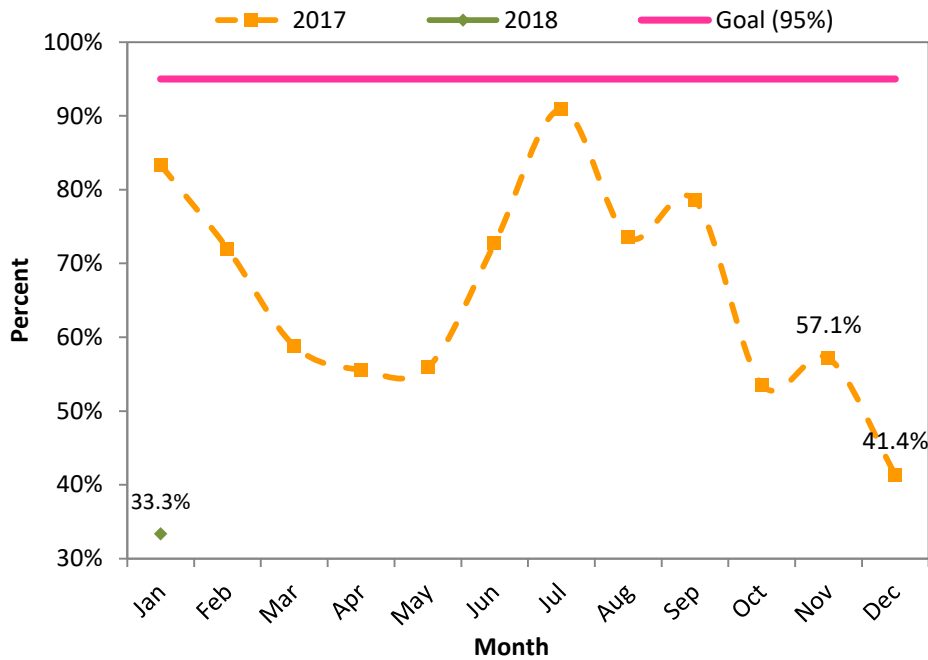
Measure: **Timely Initial Placement for Committed Youth**

How it is measured: *Numerator:* Number of newly-committed youth 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: 30

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

Goal: **↑ 95%**



Trend: The Division’s performance ranged from 33.3% to 57.1% in the most recent quarter. The goal was not attained.





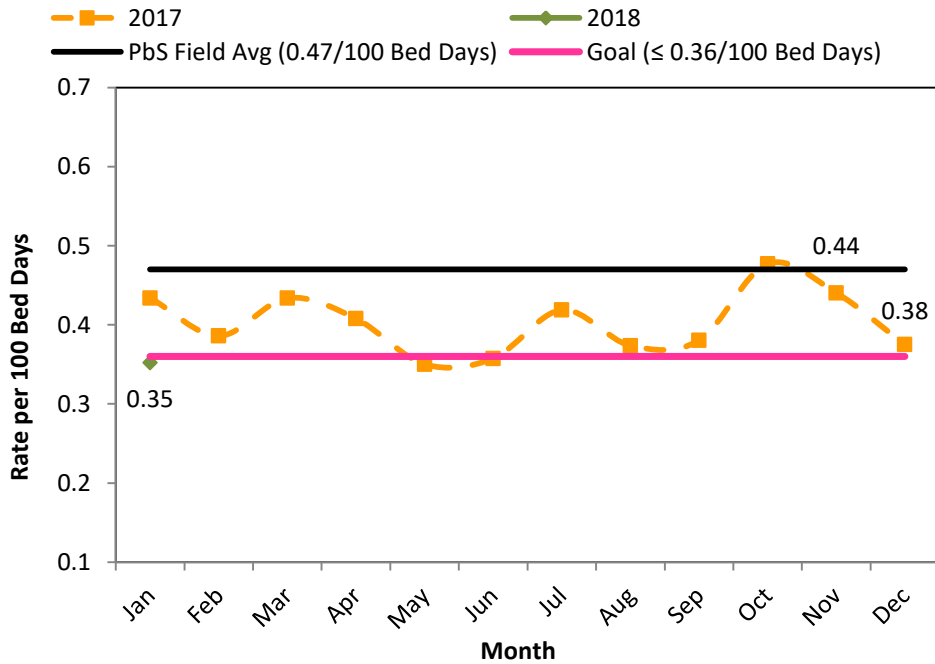
Division of Youth Services (DYS)

Measure: **Youth-on-Youth Fights and/or Assaults in DYS State-Secure Facilities**

How it is measured: *Numerator:* Youth-on-Youth fights and assaults occurring in DYS state-secure facilities
Denominator: Monthly bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days: 18,519.2

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

Goal: **↓ ≤ 0.36 per 100 Bed Days**



Trend: The rate of youth-on-youth fights and/or assaults improved each month of the quarter. The goal was attained in January 2018.

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



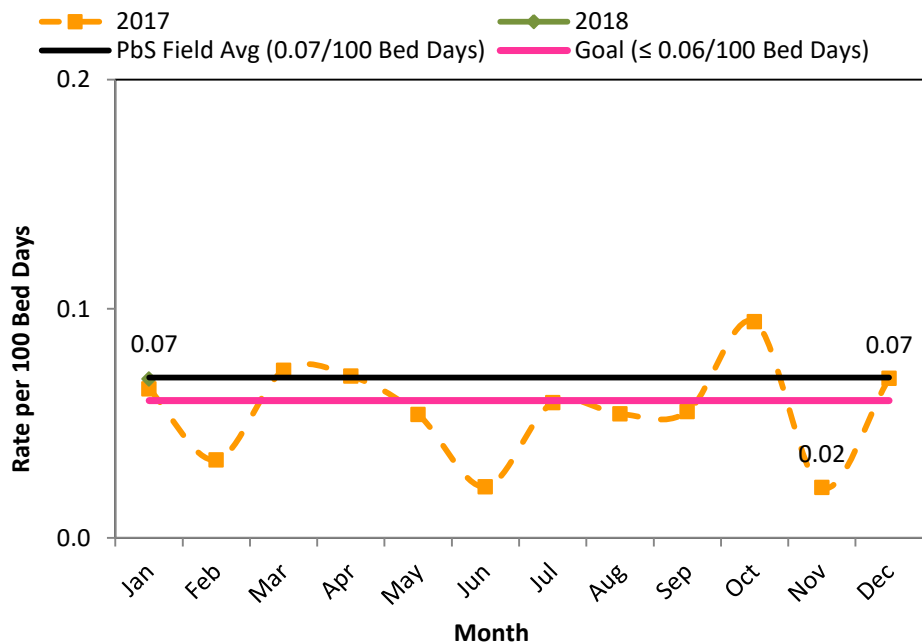
Division of Youth Services (DYS)

Measure: **Youth-on-Staff Assaults in DYS State-Secure Facilities**

How it is measured: *Numerator:* Youth-on-Staff assaults occurring in DYS state-secure facilities
Denominator: Monthly bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days: 18,519.2

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

Goal: ↓ ≤ 0.06 per 100 Bed Days



Trend: The Division’s performance ranged from 0.07 to 0.02 in the most recent quarter. The goal was attained in November 2017, and narrowly missed in both December 2017 and January 2018.

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



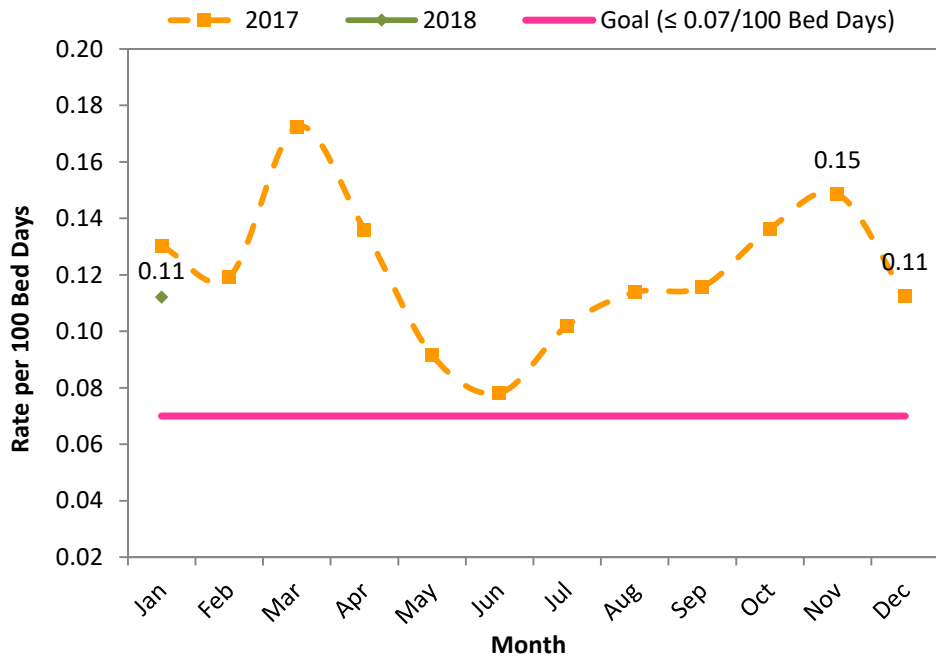
Division of Youth Services (DYS)

Measure: **Youth Injuries in DYS 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: 18,519.2

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

Goal: **↓ ≤ 0.07 per 100 Bed Days**



Trend: The rate of youth injuries worsened at the start of the quarter, but then improved by December 2017.





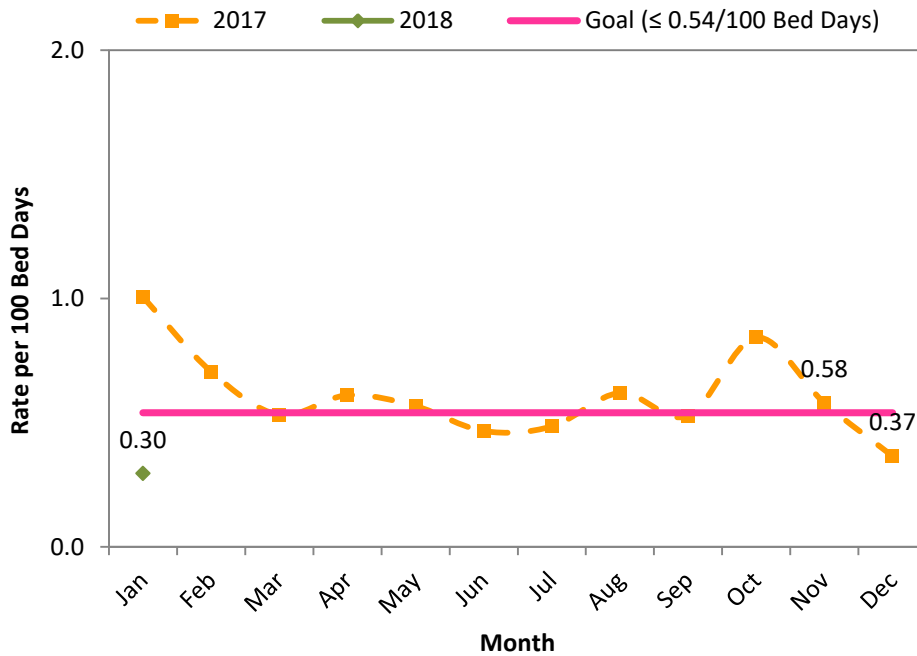
Division of Youth Services (DYS)

Measure: **Seclusion Hours in DYS State-Secure Facilities**

How it is measured: *Numerator:* Total seclusion hours
Denominator: Monthly bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days: 18,519.2

Why this matters: Isolation eliminates a youth’s engagement in treatment and programming.

Goal: ↓ ≤ 0.54 per 100 Bed Days



Trend: Overall, the rate of seclusion hours improved over the previous quarter. The goal was attained in December 2017 and January 2018.



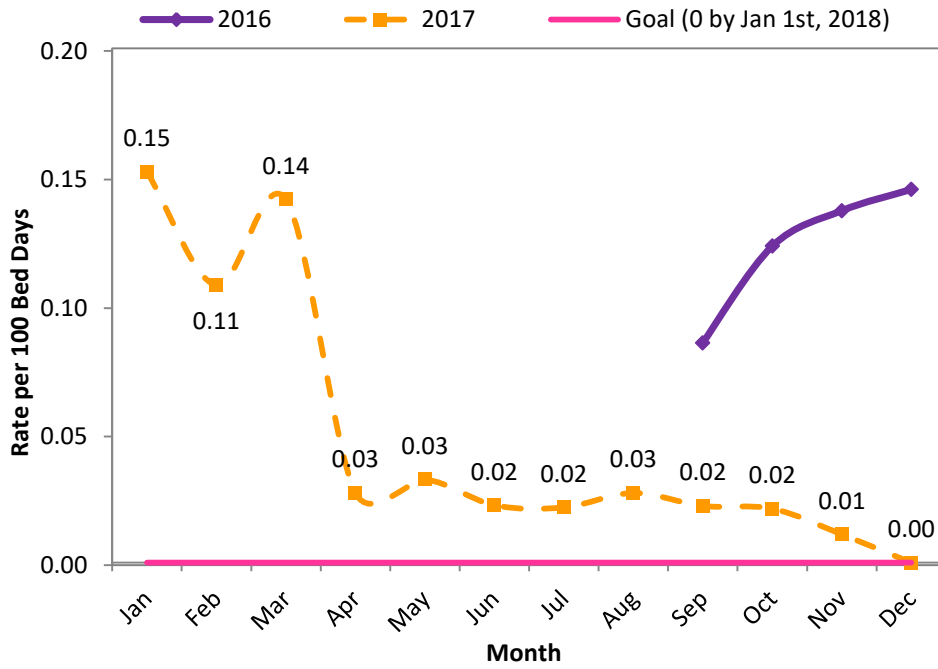
Division of Youth Services (DYS)

Measure: **Rate of Wrap Applications in DYS State-Secure Facilities**

How it is measured: *Numerator:* Number of Wrap applications
Denominator: Monthly bed days in state-secure facilities (state-secure detention, assessment, and commitment); average monthly bed days: 18,519.2

Why this matters: The Division implemented a process to eliminate use of the Safe Restraint Wrap device no later than January 1, 2018.

Goal: **↓ 0 by January 1, 2018**



Trend: The Division’s performance ranged from 0.02 to 0.00 in the most recent quarter. The Division successfully eliminated use of the Safe Restraint Wrap before the revised deadline of January 1, 2018.

Note: Only two months of data were reported this quarter, given that this measure was retired after December 2017.





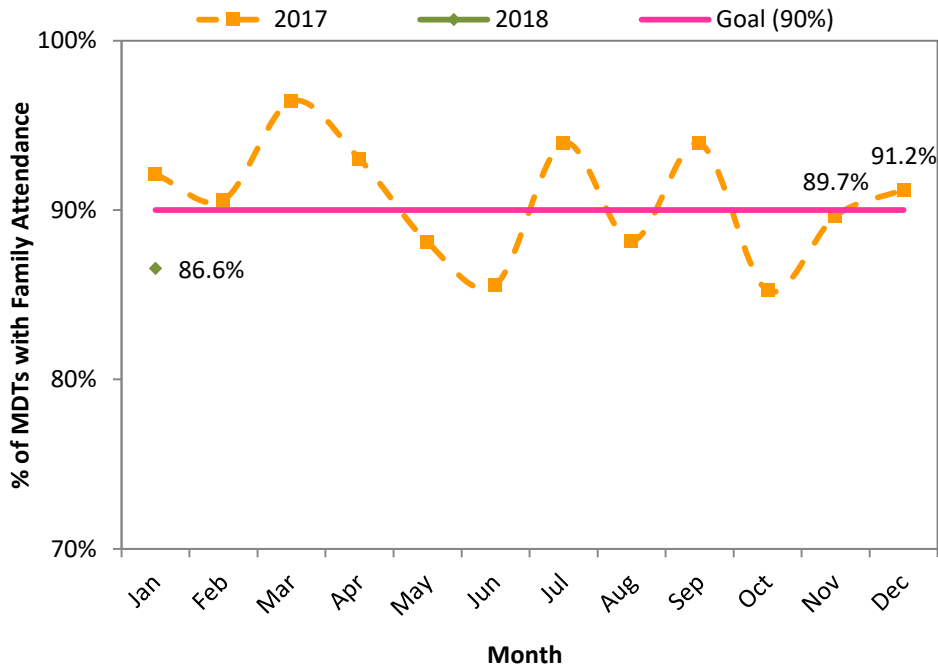
Division of Youth Services (DYS)

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: 109

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

Goal: **↑ 90%**



Trend: Family Attendance at MDT Review Meetings improved at the start of the quarter, but then worsened in January 2018.



Domestic Violence Program

Summary

Description

The Domestic Violence Program (DVP) serves as the state governmental authority on domestic violence issues. The Division provides leadership, guidance, and awareness within government agencies, as well as ensures grant-funded programs deliver optimal services to victims, ultimately promoting a Colorado free of domestic violence. The Division 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. The Division currently funds 45 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

- Beginning October 1, 2017, DVP revised its contracts with funded programs to include five specific, measureable performance targets. Programs receive quarterly progress reports on their contracted outcomes. The data from progress reports will help DVP continue to identify opportunities for improvement and enhance support to domestic violence crisis centers across Colorado.
- *Self-Sufficiency Matrix – Percent of Change*: In October 2016, DVP began requiring three of 21 domains to be reported: housing, food, and relationship safety. In May 2017, DVP began reporting the Self-Sufficiency Matrix broken out by the three domain types, which is how the data is reported in this C-Stat Quarterly Report. Across all three domains, the percent of clients who self-reported improvement from baseline to follow-up has steadily increased since January 2017. Limited conclusions can be drawn from these self-reported data, but it suggests DVP programs may be improving their ability to increase client self-sufficiency over time.

Measures

- [Self-Sufficiency Matrix – Food Domain](#)
- [Self-Sufficiency Matrix – Housing Domain](#)
- [Self-Sufficiency Matrix – Relationship Safety Domain](#)



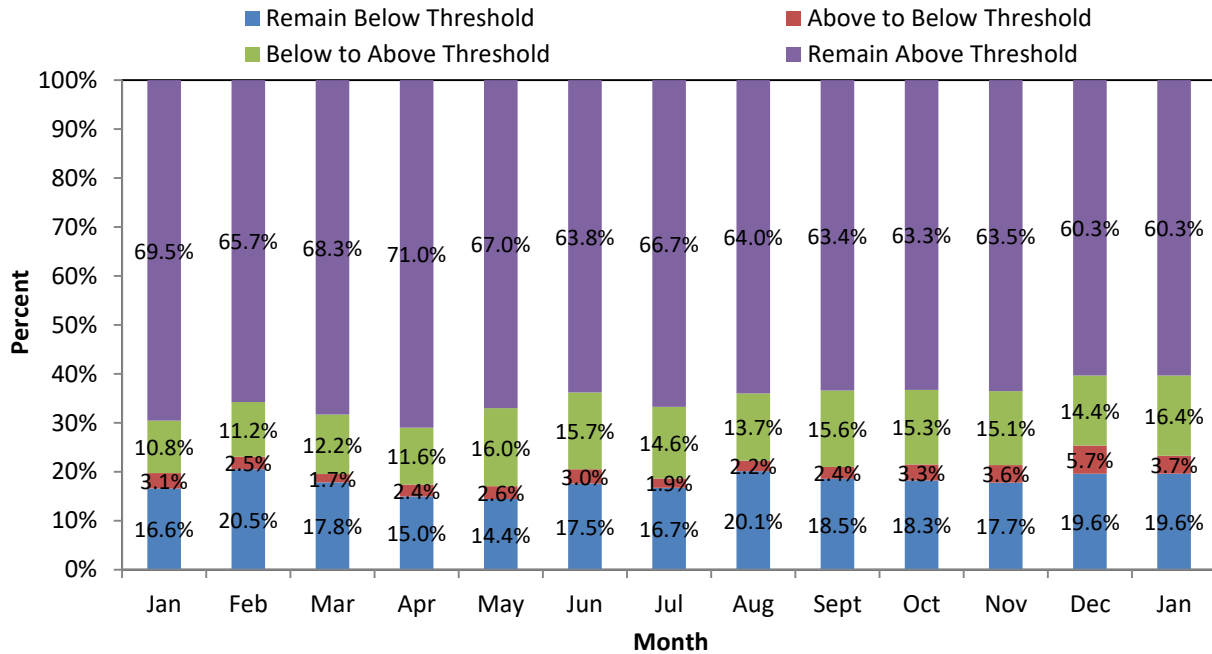
Domestic Violence Program (DVP)

Measure: **Self-Sufficiency Matrix – Food Domain**

How it is measured: *Description of Measure:* Of the total number of completed Self Sufficiency Matrix assessments completed in the reporting month for the Food Domain, the number that demonstrated change relating to the sufficiency threshold; average monthly denominator: 393

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

Goal: **↑ To be determined**



Trend: Remain Above Threshold continues to be the largest category for responders in the Food Domain.

Notes: The Self-Sufficiency Matrix assesses how clients rate their needs across three domains to create a change score between two assessment periods. The Food Domain is presented in the above data.



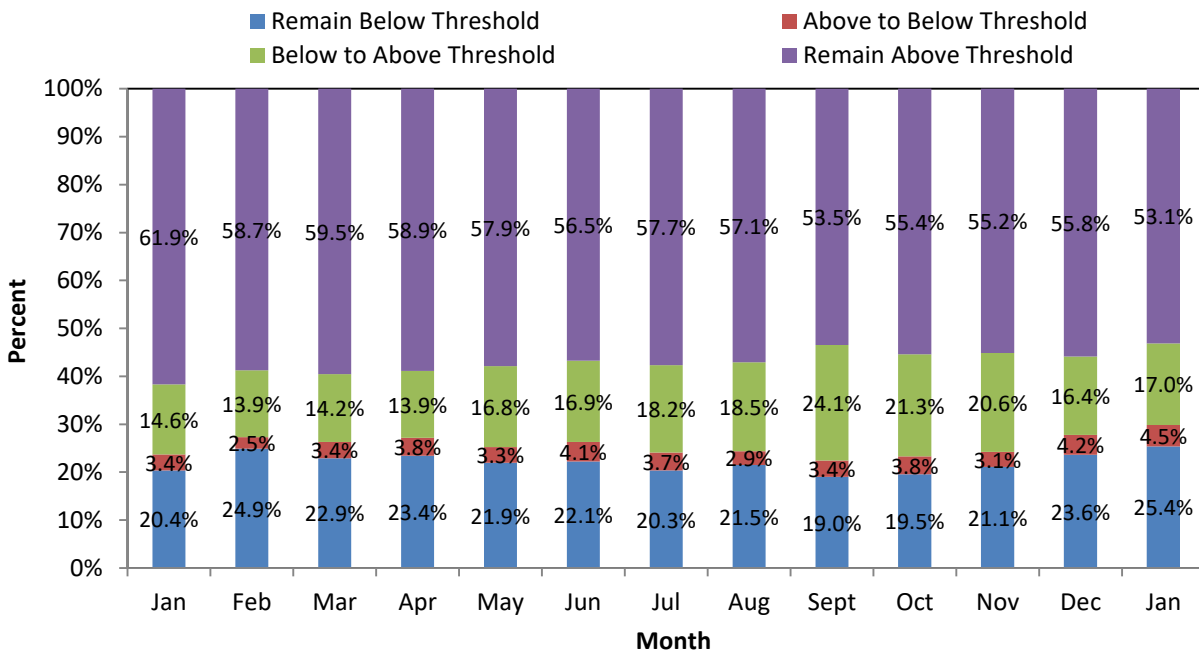
Domestic Violence Program (DVP)

Measure: **Self-Sufficiency Matrix – Housing Domain**

How it is measured: *Description of Measure:* Of the total number of completed Self Sufficiency Matrix assessments completed in the reporting month for the Housing Domain, the number that demonstrated change relating to the sufficiency threshold; average monthly denominator: 395

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

Goal: **↑ To be determined**



Trend: Remain Above Threshold continues to be the largest category for responders in the Housing Domain.

Notes: The Self-Sufficiency Matrix assesses how clients rate their needs across three domains to create a change score between two assessment periods. The Housing Domain is presented in the above data.

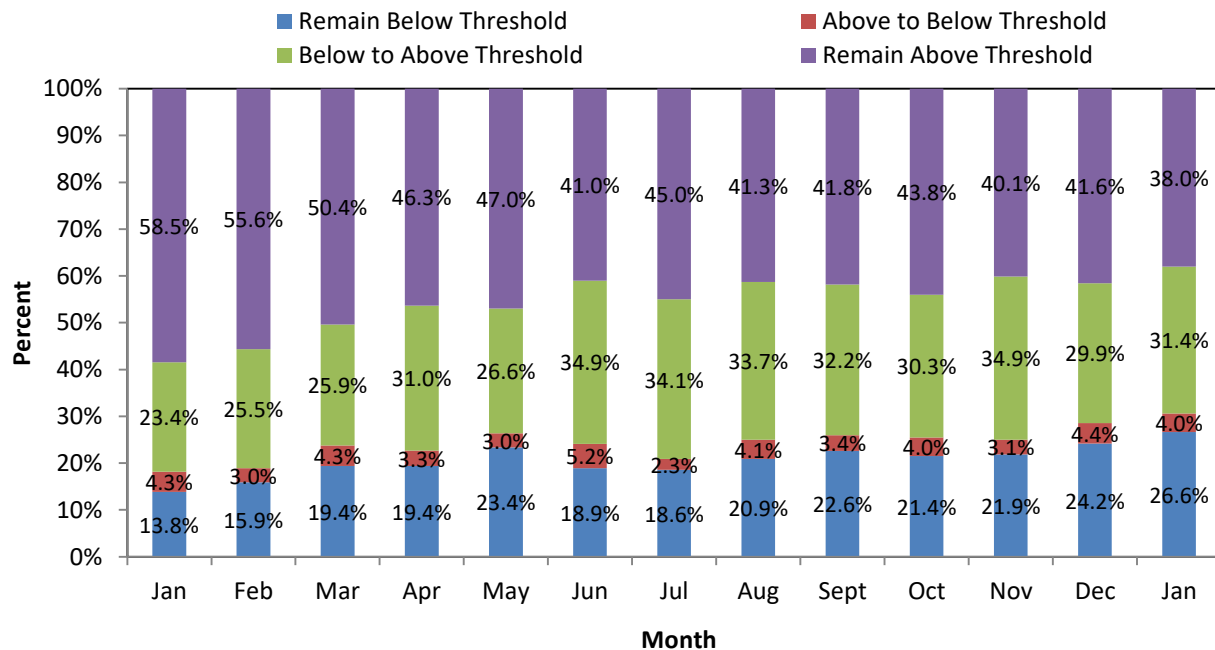
Domestic Violence Program (DVP)

Measure: **Self-Sufficiency Matrix – Relationship Safety Domain**

How it is measured: *Description of Measure:* Of the total number of completed Self Sufficiency Matrix assessments completed in the reporting month for the Relationship Domain, the number that demonstrated change relating to the sufficiency threshold; average monthly denominator: 393

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

Goal: **↑ To be determined**



Trend: Remain Above Threshold continues to be the largest category for responders in the Relationship Domain.

Notes: The Self-Sufficiency Matrix assesses how clients rate their needs across three domains to create a change score between two assessment periods. The Housing Domain is presented in the above data.

Office of Community Access and Independence

Description

The Office of Community Access and Independence 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. The Office of Community Access and Independence 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: Eric Johnson

Aging and Adult Services

Summary

Description

The Division of Aging and Adult Services provides assistance in two general areas. First, programs help older adults remain safely in their homes through services and supports such as: nutrition programs, caregiver programs, money management programs, senior community service employment programs, legal assistance and supportive services. Second, programs 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 distributes a weekly report for monthly contacts coming due. This report prompts counties to complete and document contacts timely. In addition, APS examines all untimely contacts to determine the reasons for a late contact and any associated trends. As needed, APS staff contacts low-performing counties to offer technical assistance, and determine actions to improve performance.
- *Percent of Cases with Safety Improvement:* This measure indicates whether the interventions implemented had a positive impact on the older adult receiving services. Adult Protective Services staff provides monthly reports to all counties and offers technical assistance and outreach to counties that demonstrate lower performance. These actions, as well as continued improvements by the counties, have led to higher performance than the previous year.

Measures

- [Timeliness of Monthly Contacts](#)
- [Percent of Cases with Safety Improvement](#)



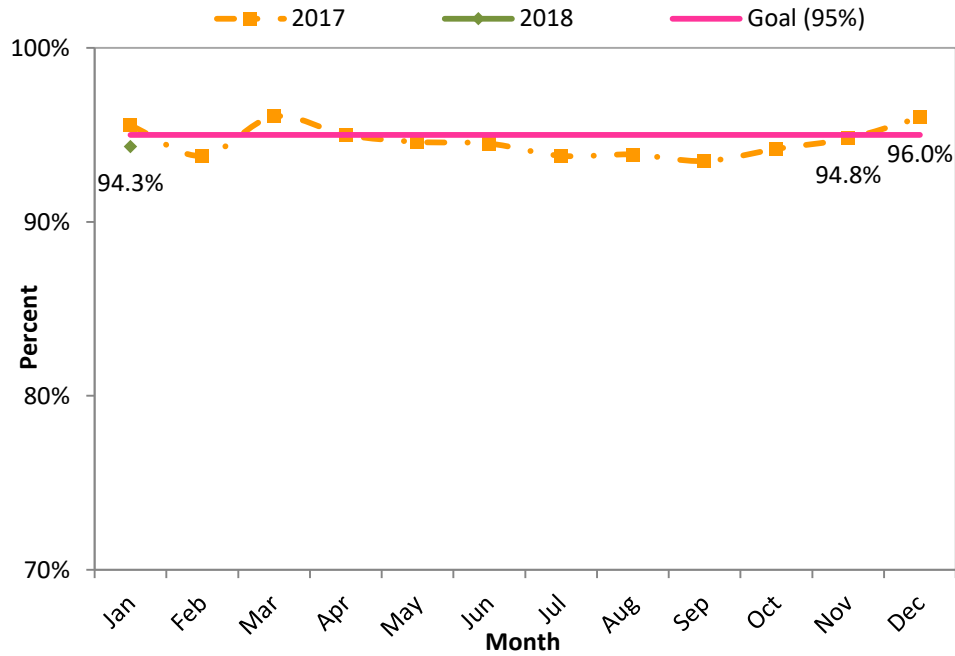
Aging and Adult Services (AAS)

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: 1,162

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

Goal: **↑95%**



Trend: Within the quarter, the Division’s performance met the goal in December 2017. Performance ranged from 94.3% in January 2018 to 96.0% in December 2017.



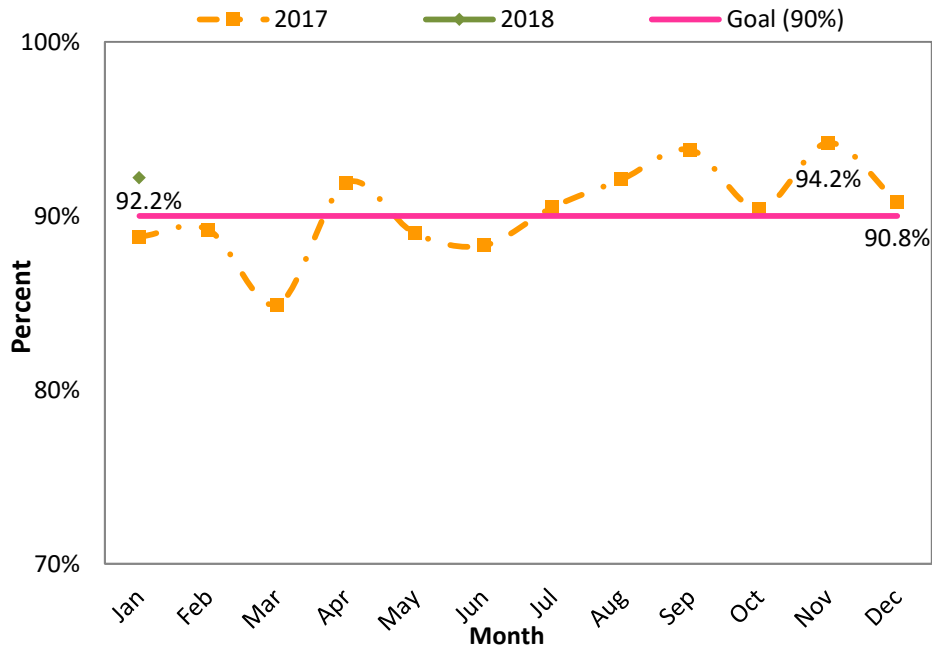
Aging and Adult Services (AAS)

Measure: **Percent of Cases with Safety Improvement**

How it is measured: *Numerator:* Number of cases with an improvement in safety in the reporting month
Denominator: Number of cases closed in the reporting month with two or more assessments; average monthly denominator: 200

Why this matters: Safety improvement indicates that the intervention implemented had a positive impact on the older adult receiving services.

Goal: **↑90%**



Trend: The Division’s performance varied, ranging from 90.8% in December 2017 to 94.2% in November 2017. Performance exceeded the 90% goal each month throughout the quarter.

Disability Determination Services

Summary

Description

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

Social Security has two disability programs: Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). 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 are "insured," meaning that the applicant worked long enough and paid Social Security taxes. Social Security Income pays disability benefits based on financial need.

Director: Thomas Haro

Executive Summary

- *Mean Number of Days to Process Initial Eligibility Decisions:* Two factors have increased the number of days to process initial eligibility decisions: 1) federal changes require a Medical Consultant to make the final eligibility decision and 2) due to a federal hiring freeze, the Division is unable to hire new staff. Examiners continue to focus on efficiencies that can be gained through internal LEAN projects.
- *Percentage of Accurate Initial Eligibility Decisions:* Disability Determination Services continues to focus on internal quality assurance (QA) reviews by selecting and reviewing a targeted sample of all eligibility decisions. At the start of the federal fiscal year, DDS determined the QA review sample size needed each month in the coming year and train additional staff as needed to meet this threshold. Disability Determination Services management also includes accuracy goals in the examiners' annual performance reviews.

Measures

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



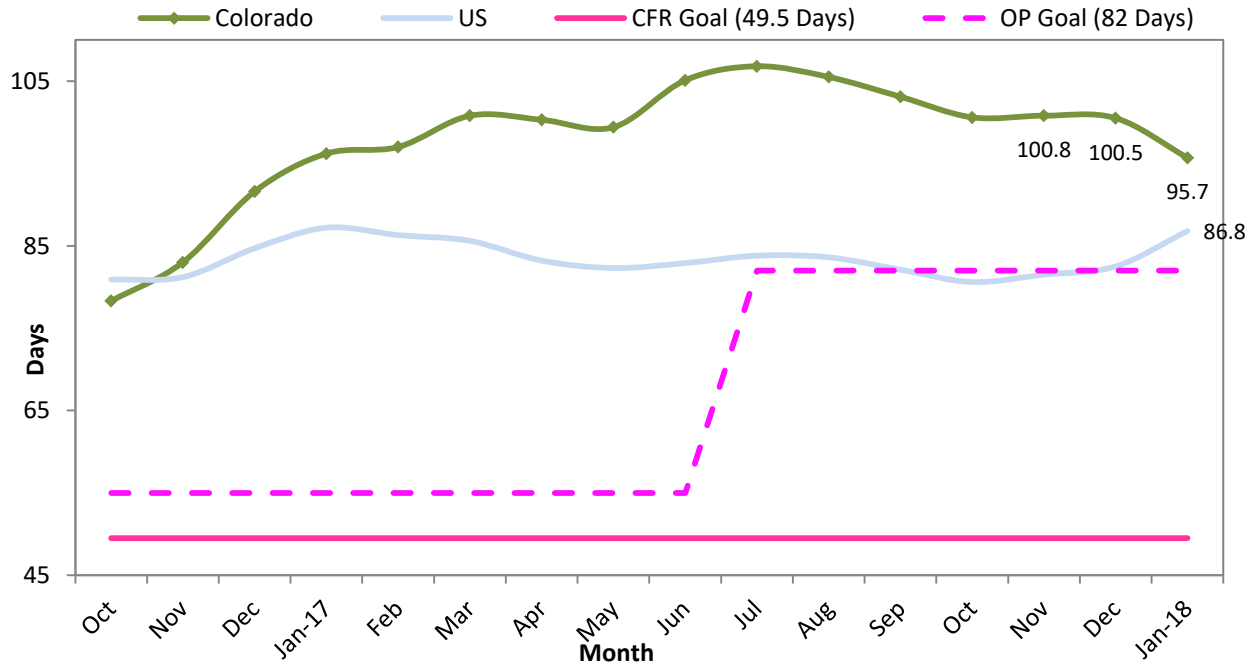
Disability Determination Services (DDS)

Measure: **Mean Number of Days to Process Initial Eligibility Decisions (Federal Measure)**

How it is measured: *Numerator:* Number of days to process initial eligibility decisions
Denominator: Number of initial applications processed; average monthly denominator: 3,026

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 improved within the quarter. The Division’s processing time decreased from 100.8 days in November 2017 to 95.7 days in January 2018.

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 added this goal to their measure for tracking purposes.

In July 2017 the Operational goal was adjusted from 55 days to 82 days.





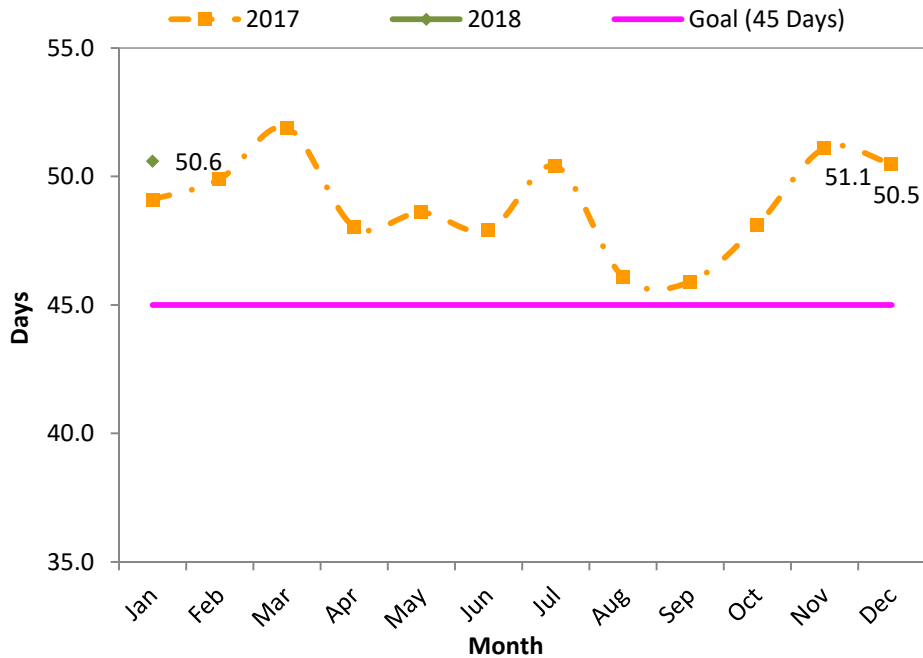
Disability Determination Services (DDS)

Measure: **Examiner Processing Time**

How it is measured: *Numerator:* Number of days (from assigned date to clearance date) to close disability claims
Denominator: Number of disability claims processed; average monthly denominator: 2,187

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

Goal: **↓45 Days**



Trend: Division performance varied within the quarter. The Division’s processing time improved from 51.1 days in November 2017 to 50.6 days in January 2018.



Disability Determination Services (DDS)

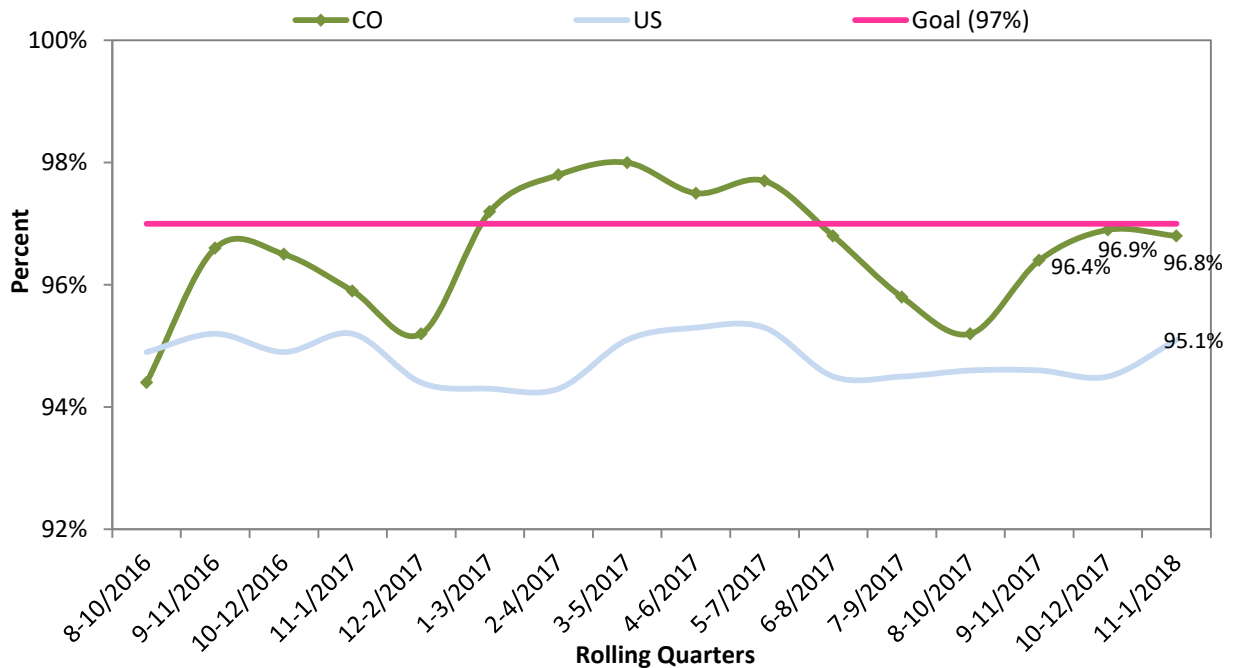
Measure: **Percentage of Accurate Initial Eligibility Decisions (Federal Measure)**

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: The percent of accurate initial decisions remained relatively stable throughout the quarter, ranging from 96.4% in November 2017 to 96.9% in December 2017. Performance did not meet the goal any month within the quarter.

Notes: This measure includes data from both the SSDI and SSI programs. Due to a small sample (approximately 50 cases per month) data are displayed utilizing a rolling three-month average. This allows for data to be represented more promptly and each data point to represent a meaningful sample size of at least 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 Regional Centers provide a number of services, including: 24-hour supervision, residential treatment, day programming, habilitation, medical treatment, training, behavioral interventions and short-term emergency/crisis support to the community system.

Director: Georgia Edson

Executive Summary

- *Rate of Physical Intervention by Regional Center*: Interdisciplinary teams at each center analyze reports to determine what preceded the physical intervention and which strategies may reduce future physical interventions. Holidays can be a time of particular sensitivity and heightened emotion for many; the improvements in performance this quarter are particularly noteworthy given the multiple holidays occurring November through January.

Measures

- [Rate of Physical Intervention by Regional Center](#)



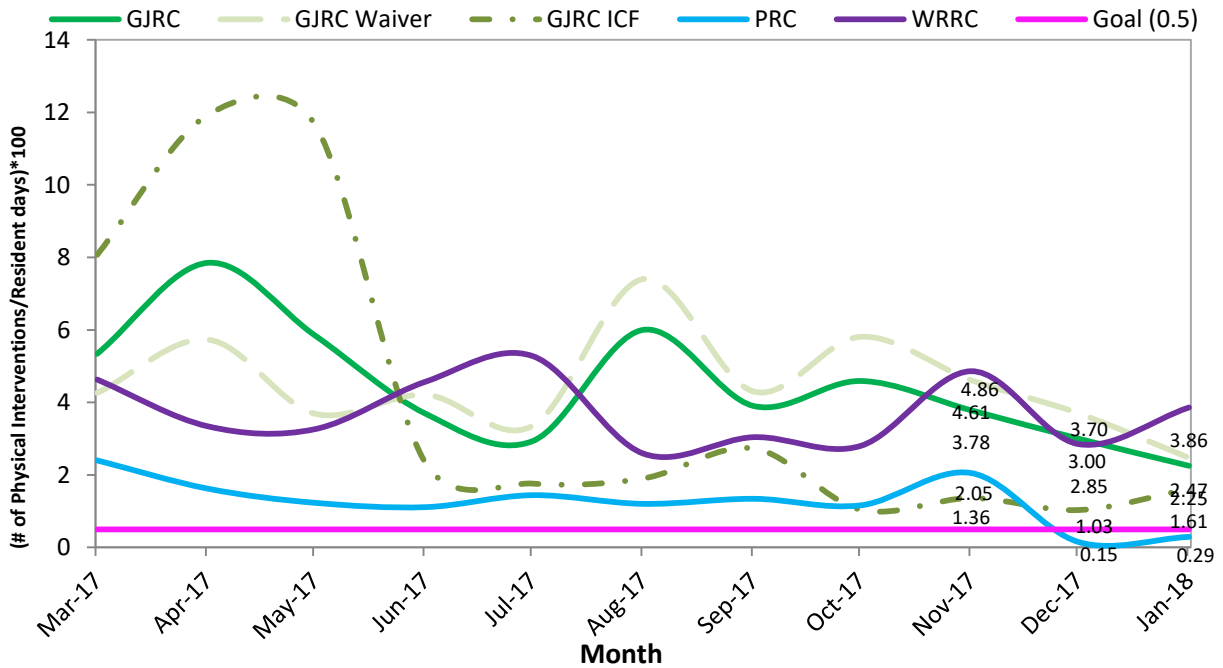
Division of Regional Center Operations (DRCO)

Measure: **Percent of Residents without Physical Intervention by Regional Center**

How it is measured: *Numerator:* Number of physical interventions
Denominator: Per 100 resident days; average monthly denominator: Grand Junction: 2,609, Grand Junction Waiver: 1,936, Grand Junction ICF: 673, Pueblo: 1,370, Wheat Ridge: 3,866

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

Goal: **↓0.5**



Trend: Performance in Pueblo improved and worsened in Wheat Ridge in the most recent quarter. In Grand Junction, performance improved in the Waiver program and worsened in Intermediate Care Facilities (ICF) program. Performance in January 2018 was as follows: Grand Junction at 2.25, Pueblo at 0.29, Wheat Ridge at 3.86. Pueblo achieved the 0.5 goal in the last two months of the most recent quarter.



State Veterans Community Living Centers

Summary

Description

Colorado operates four State Veterans Community Living Centers (SVCLCs): 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, which 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, (i.e., those whose children died while serving in the Armed Forces). The SVCLCs offer:

- 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, and
- 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 an Acquired Catheter*: Focusing on this measure helps to decrease potential infections. Each Center's leadership conducts targeted reviews from a multi-disciplinary approach to address catheter usage, prevention, and resident choice.
- *Fall Rate*: Due to varied performance, Executive Management continues to review SVCLC performance for the following factors: the location of the fall, the severity of the fall, falls per shift, and residents who had more than one fall during the month. A more thorough examination of falls data provides a better understanding of how and why the falls occurred, and helps to focus future strategies.
- *Prevalence of Weight Loss*: Performance continues to improve throughout the centers. The Division has identified the following reasons for their sustained improvement: increased use and communication with dietitians through various meetings, targeted communication with the residents and their families, increasing food variety as well as offering fortified and supplemental nutrition.

Measures

- [Percent of Residents without an Acquired Catheter](#)
- [Fall Rate](#)
- [Prevalence of Weight Loss](#)



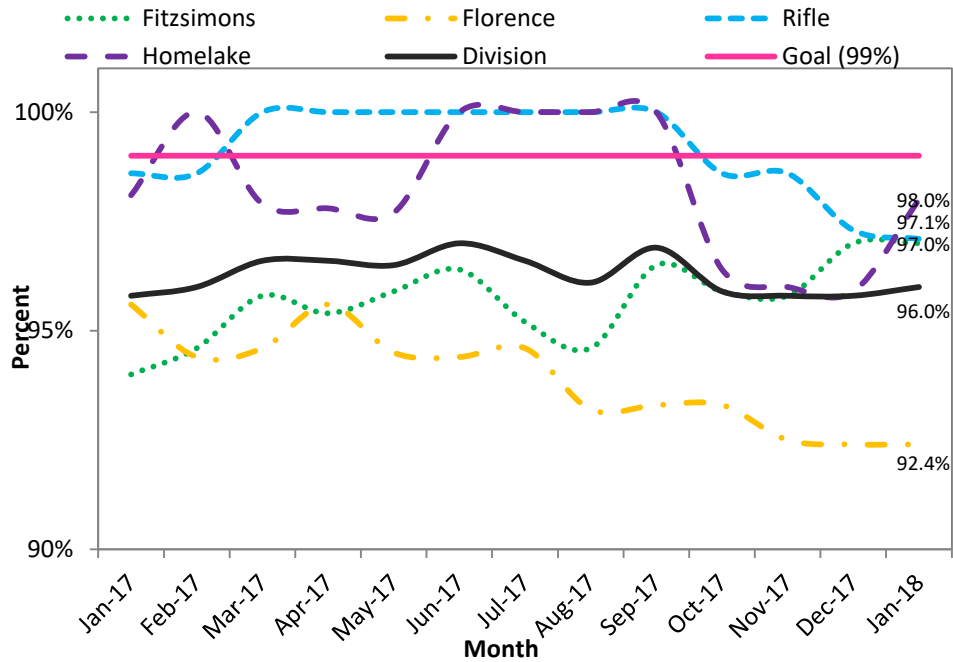
State Veterans Community Living Centers (SVCLC)

Measure: **Percent of Residents without an Acquired Catheter**

How it is measured: *Numerator:* Number of residents without an acquired catheter
Denominator: Average Daily Census: Fitzsimons: 167, Florence: 92, Rifle: 71, Homelake: 50, Division: 380

Why this matters: Increasing the number of residents without an acquired catheter demonstrates that Community Living Centers are providing appropriate, safe, and quality care.

Goal: **↑99%**



Trend: Performance improved by the end of the quarter in Fitzsimons (green line) and Homelake (purple line) and declined by the end of the quarter in Florence (yellow line) and Rifle (blue line). In January 2018, no center was meeting the 99% goal.



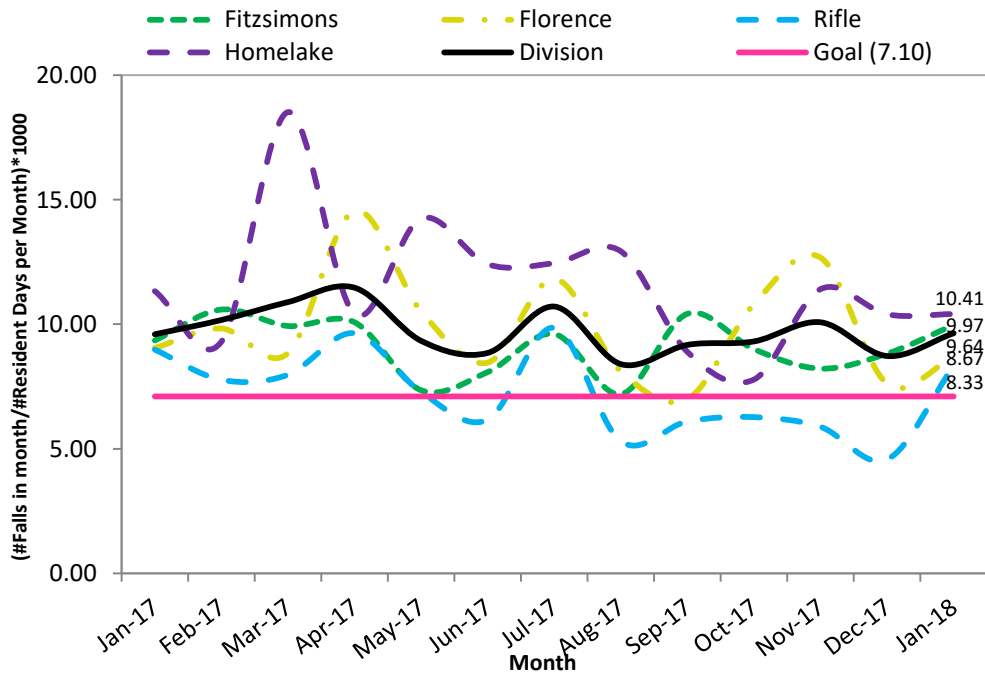
State Veterans Community Living Centers (SVCLC)

Measure: **Fall Rate**

How it is measured: *Numerator:* Number of falls
Denominator: Per 1,000 resident days. Average resident days by month: Fitzsimons: 5,035, Florence: 2,801, Rifle: 2,147, Homelake: 1,551, Division: 11,534

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: Compared to the end of the previous quarter (October 2017), performance improved by the end of this quarter in Florence and worsened in Fitzsimons, Rifle, and Homelake. Rifle was below the 7.10 goal the first two months within the quarter. In January 2018, no center was meeting the 7.10 goal.



State Veterans Community Living Centers (SVCLC)

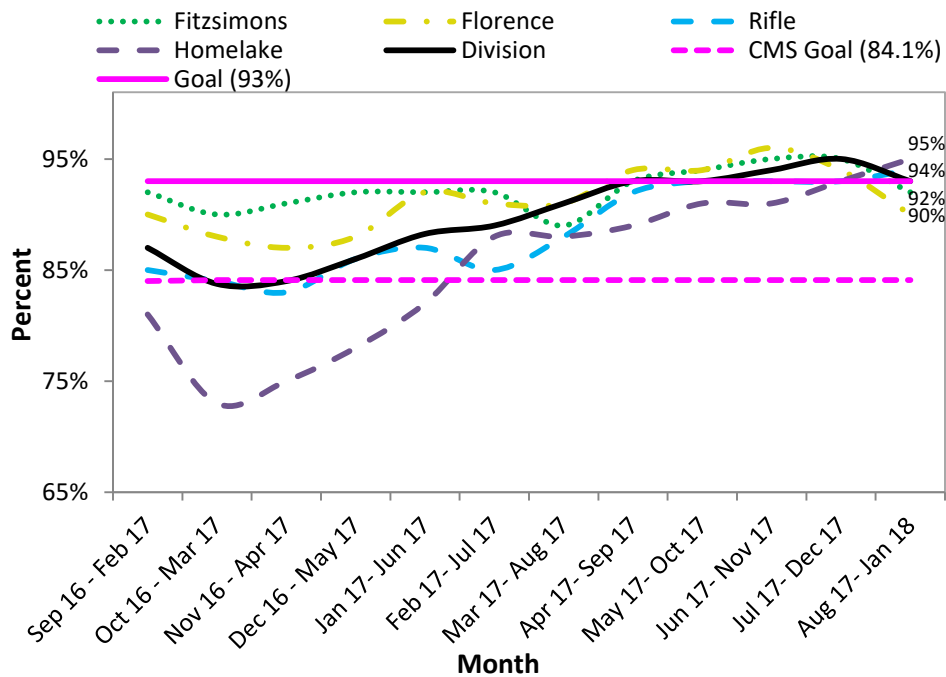
Measure: **Prevalence of Weight Loss**

How it is measured: *Numerator:* Number of residents with a recent Minimum Data Set (MDS) assessment and without a weight loss of 5% or more in the last month or a loss of 10% or more in the last six months.

Denominator: Number of residents with a recent MDS assessment. Average residents available for an assessment within six months by month: Fitzsimons: 169, Florence: 111, Rifle: 83, Homelake: 67, Division: 108

Why this matters: Community Living Center residents have the right to receive safe, high-quality care, evidenced by maintaining their weight.

Goal: **↑84.1% (CMS Goal)**



Trend: In the current quarter, performance improved in both Rifle (blue line) and Homelake (purple line) and declined in both Fitzsimons (green line) and Florence (yellow line). In January 2018 all centers were exceeding the 84.1% CMS goal, but only Rifle and Homelake were meeting the 93% SVCLC goal.



Office of Early Childhood

Description

The Office of Early Childhood 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 and the Division of Community and Family Support.

The Office of Early Childhood continues to work with many partners, including parents, schools, child care providers, Community Centered Boards, 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 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

Division of Early Care and Learning

Summary

Description

The Division of Early Care and Learning (DECL) is the state's lead agency in planning and implementing public child care policy. The Division is responsible for licensing and monitoring 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

- *Continuity of Child Care for Children Utilizing CCCAP Child Care Subsidy:* Family-level disruptions to CCCAP benefits occur when a family loses their authorization to receive CCCAP subsidies, but the child care facility they attend continues to serve children through CCCAP. Over the last quarter, these family-level disruptions have accounted for 91.4% of disruptions to the CCCAP benefit experienced by families. With this in mind, OEC is working to support improvements to continuity of care by leveraging quality assurance (QA) and county monitoring efforts to identify inappropriate case closures within current rule. OEC is also working with stakeholders to address potential rule changes that may further support continuity.
- *Increased Facility Engagement with the Colorado Shines Quality Rating and Improvement System (QRIS):* QRIS coordinators participate in a monthly call with each Early Childhood Council (ECC) with program engagement as a topic of discussion. This includes reviewing current engagement levels, discussing efforts to increase engagement, and understanding local engagement challenges.
- *Colorado Child Care Assistance Program Income Accuracy Rate:* In order to continue to improve performance for this measure, the Division and the QA team have met regularly to identify the most common errors and generate next steps to mitigate these errors. To do this, the Division and QA have initiated steps to begin the Q-Fit process. This process brings together program staff, county staff, and QA staff to address the most common errors by reviewing current rules, policy, and procedures at the county level and how they may contribute to these errors.

Measures

- [Continuity of Child Care for Children Utilizing CCCAP Child Care Subsidy](#)
- [Increased Facility Engagement with the Colorado Shines Quality Rating and Improvement System \(QRIS\)](#)
- [Colorado Child Care Assistance Program Income Verification Accuracy Rate](#)
- [Colorado Child Care Assistance Program Eligibility Activity Accuracy Rate](#)



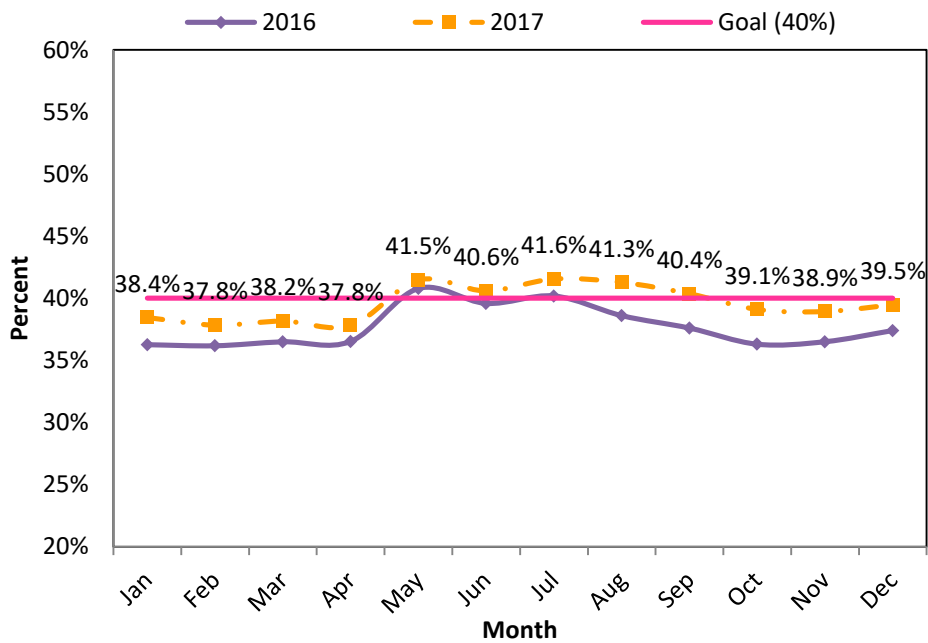
Division of Early Care and Learning (DECL)

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

How it is measured: *Numerator:* All children under 5 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 4 years old who utilized CCCAP at least once 12 months prior to the reporting month; average monthly denominator: 7,669

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 38.9% to 39.5%. The goal was not met in this quarter. The trend in 2017 continues to closely follow the 2016 trend.





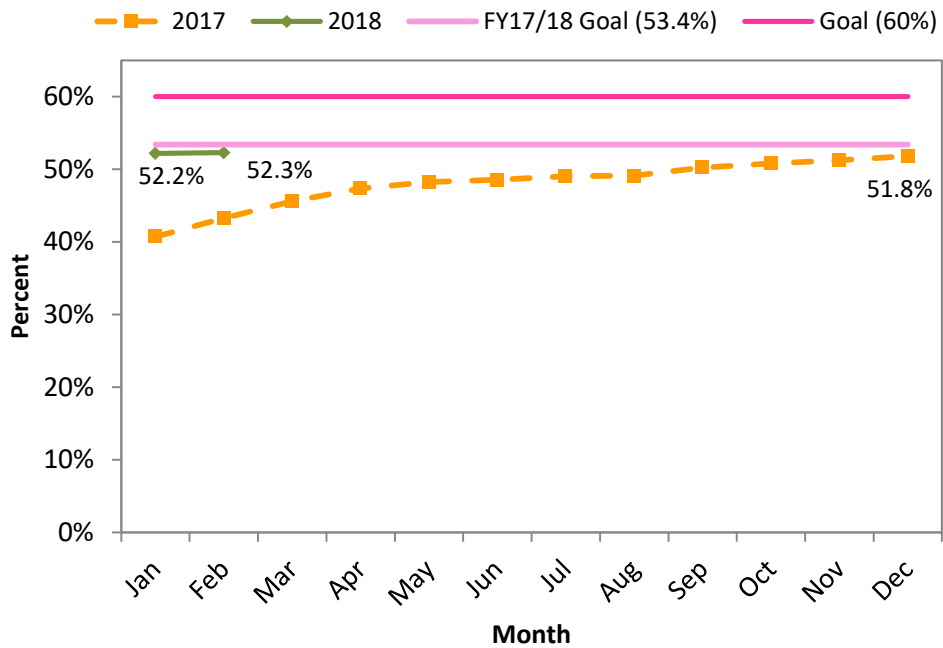
Division of Early Care and Learning (DECL)

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: 4,087

Why this matters: Expanding the number of facilities that 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: For almost two years the Division’s performance has demonstrated consistent improvement each month. The goal has not been met.



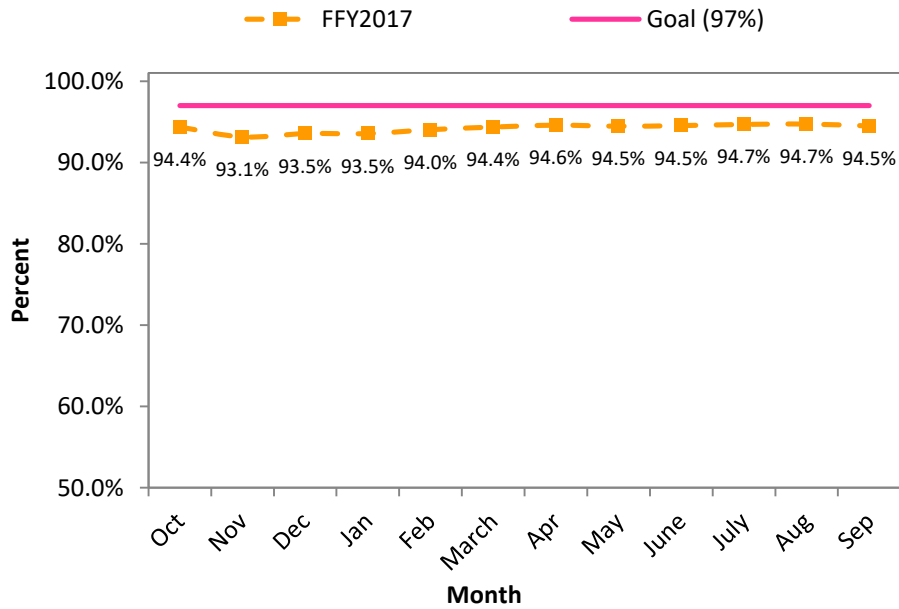
Division of Early Care and Learning (DECL)

Measure: **Colorado Child Care Assistance Program Income Verification Accuracy Rate**

How it is measured: *Numerator:* Number of Income Verification Elements without a found error
Denominator: Total number of Income Verification Elements reviewed; cumulative denominator: 1,488

Why this matters: With a finite amount of money available to families across Colorado seeking subsidized child care, it is important to be accurate through the eligibility process to ensure the right families are enrolled and the amount of dollars allocated are correct.

Goal: **↑ 97%**



Trend: The Division’s performance in the most recent quarter ranged from 94.5% to 94.7%. The goal has not been met.



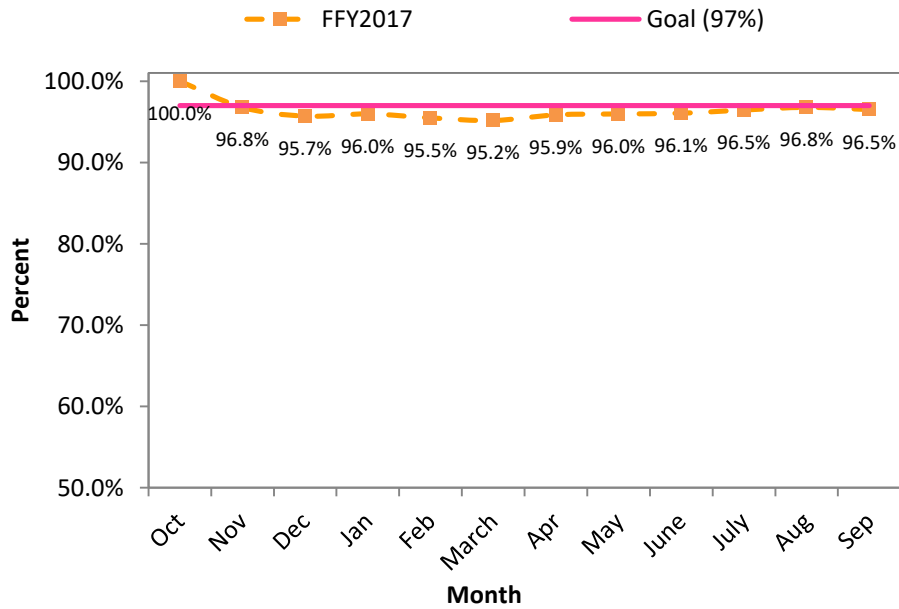
Division of Early Care and Learning (DECL)

Measure: **Colorado Child Care Assistance Program Eligibility Activity Accuracy Rate**

How it is measured: *Numerator:* Number of Eligibility Activity Elements without a found error
Denominator: Total number of Eligibility Activity elements reviewed; cumulative denominator: 372

Why this matters: With a finite amount of money available to families across Colorado seeking subsidized child care, it is important to be accurate through the eligibility process to ensure the right families are enrolled.

Goal: **↑ 97%**



Trend: The Division’s performance in the most recent quarter ranged from 96.5% to 96.8%. The goal was not met in this quarter.

Division of Community and Family Support (DCFS)

Summary

Description

The Division of Community and Family Support (DCFS) 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:* In C-Stat, DCFS presented data to show the percent of children referred to EI that still have an open Child Welfare case. The data presented showed referrals with ongoing Child Welfare cases complete EI eligibility, on average, 51% of the time. In order to improve performance for this measure, DCFS will focus on these ongoing Child Welfare Cases and work with the Child Welfare Division to determine potential steps to increase the completion rate of EI eligibility determinations.
- *Home Instruction for Parents of Preschool Youngsters (HIPPY): Percent of Families Who Received All Expected Visits/Packets in the Month:* In the last quarter, DCFS has been trying to determine the relationship between enrollment dates and completion of the program. It was determined that families who enroll after January can still get the full dosage of visits, but on average receive fewer visits than those families who enroll earlier in the year. In order to improve performance, DCFS will continue to work to understand why families disengage from the program and review current policy.
- *Healthy Steps (HS): Percent of Families Who Received One or More Visits in the Past Month:* Over the last quarter, the Performance Management Division conducted a Data Integrity project on this measure to ensure practices related to data presented in C-Stat are valid and reliable. It was observed during this process that Healthy Steps Specialists were in need of a tool to determine which families on their caseload were in need of a future visit, but had not yet scheduled an appointment. In order to fill this capability gap, DCFS and the state intermediary, Assuring Better Child Health & Development (ABCD), worked together to design a new tool that will be added to the current Healthy Steps system.

Measures

- [Child Abuse Protection and Treatment Act \(CAPTA\) Referrals to Early Intervention \(EI\) 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 Expected Healthy Steps Visits that Occurred in the Past Month](#)
- [Colorado Community Response \(CCR\): Percent of Families with Positive Movement on the Economic Self-Reliance Scale](#)
- [Home Instruction for Parents of Preschool Youngsters \(HIPPY\): Percent of Families Who Received All Expected Visits/Packets in the Month](#)

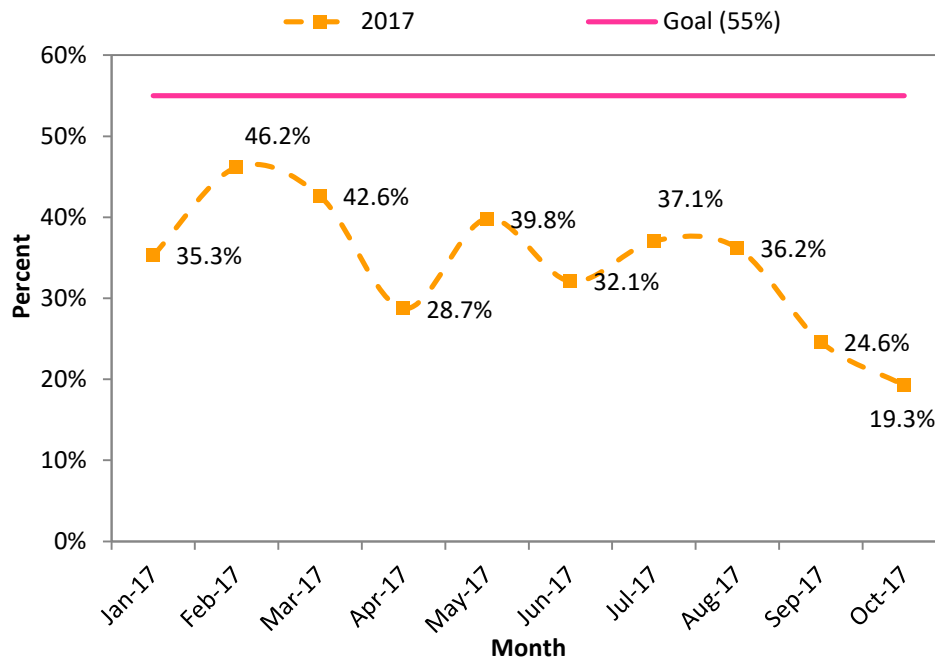
Division of Community and Family Support (DCFS)

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: 141

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 19.3% to 36.2%. The goal was not met.

Notes: The four month reporting lag allows for children and families to move through the Early Intervention eligibility process. Data for this measure is updated each month to include cases that were previously in a pending status. This potentially changes past data points, but also provides a more accurate picture of the Division’s performance.



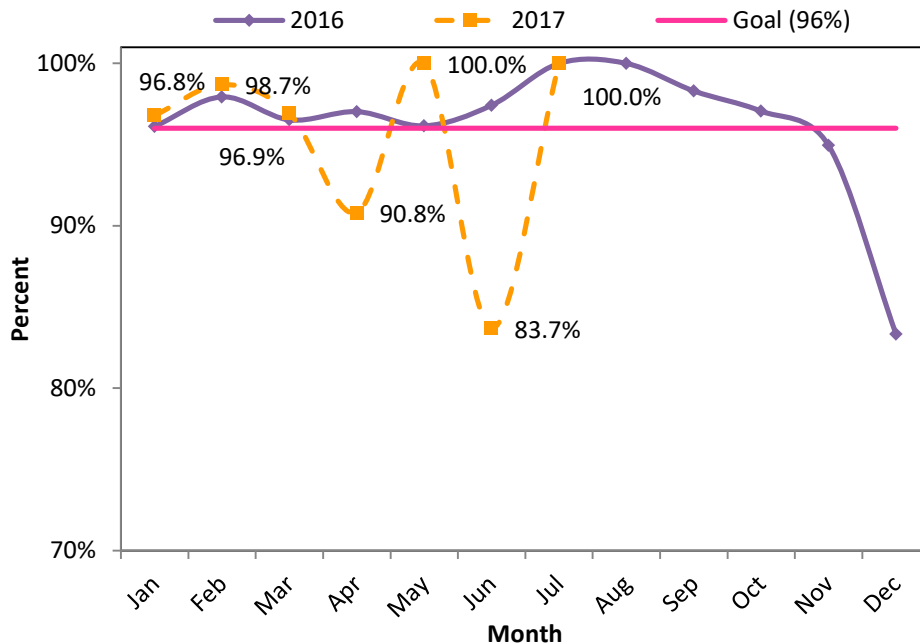
Division of Community and Family Support (DCFS)

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: 28

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 those 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 83.7% to 100%. The goal was met two out of three months this quarter.

Note: This measure has a six month lag due to performance being measured six months after the completion of CCR services.





Division of Community and Family Support (DCFS)

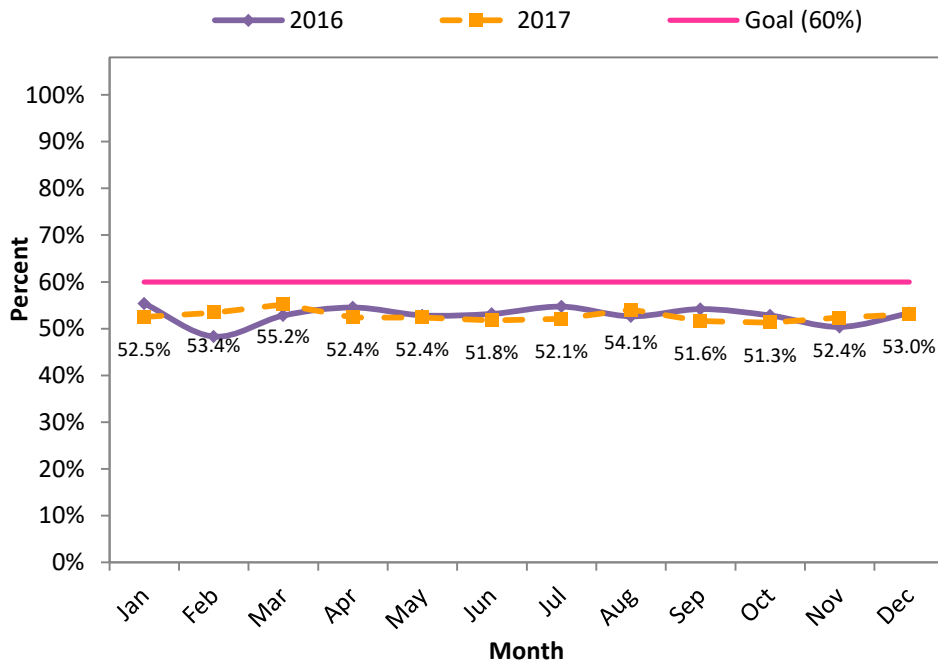
Measure: **Achieved Individualized Outcomes in Early Intervention**

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: 1,681

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 helps families to assist their children with special needs to develop to their full potential and possibly decrease or prevent the need for specialized care later during school age years.

Goal: **↑ 60%**



Trend: Performance in the most recent quarter ranged from 51.3% to 53.0%. The goal was not met in this quarter. Performance continues to align with 2016 performance.





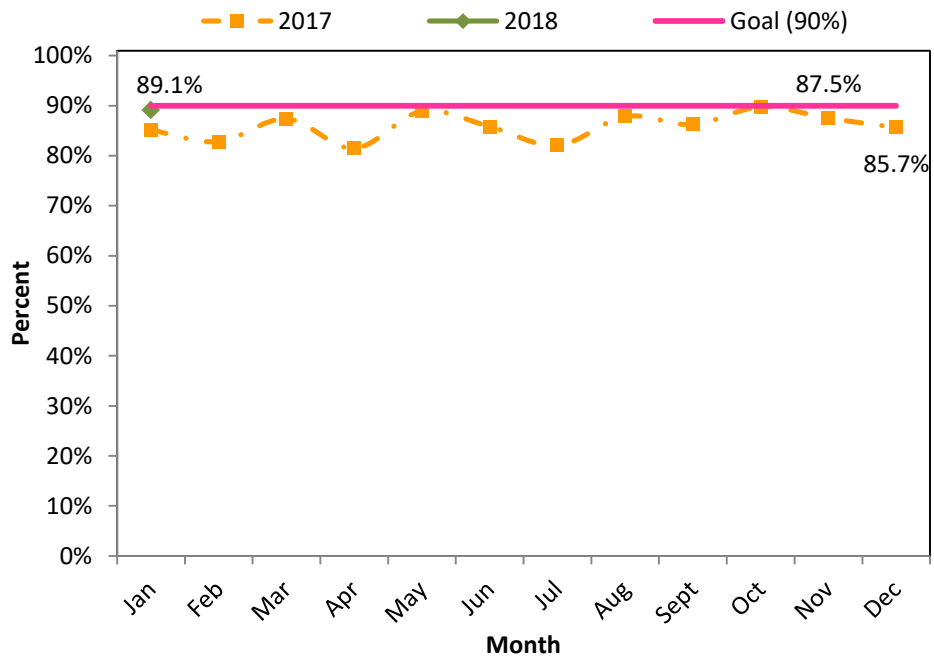
Division of Community and Family Support (DCFS)

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: 991

Why this matters: 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 evidenced-based resources to parents increases engagement with their children’s education and their children’s likelihood of success.

Goal: **↑ 90%**



Trend: The Division’s performance in the most recent quarter ranged from 85.7% to 89.1%. The goal was not met in this quarter.



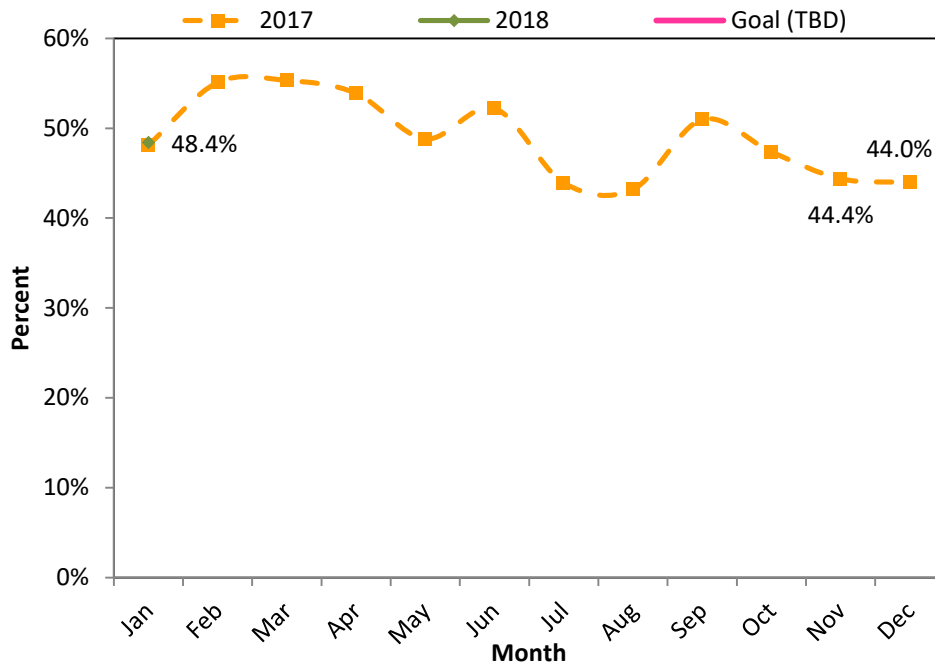
Division of Community and Family Support (DCFS)

Measure: **Healthy Steps (HS): Percent of Expected Healthy Steps Visits that Occurred in the Past Month**

How it is measured: *Numerator:* Number of expected visits that occurred in the past month.
Denominator: Number of expected visits in the past month for children enrolled in Healthy Steps; average monthly denominator: 380

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 44.0% to 48.0%. A goal has not been determined.

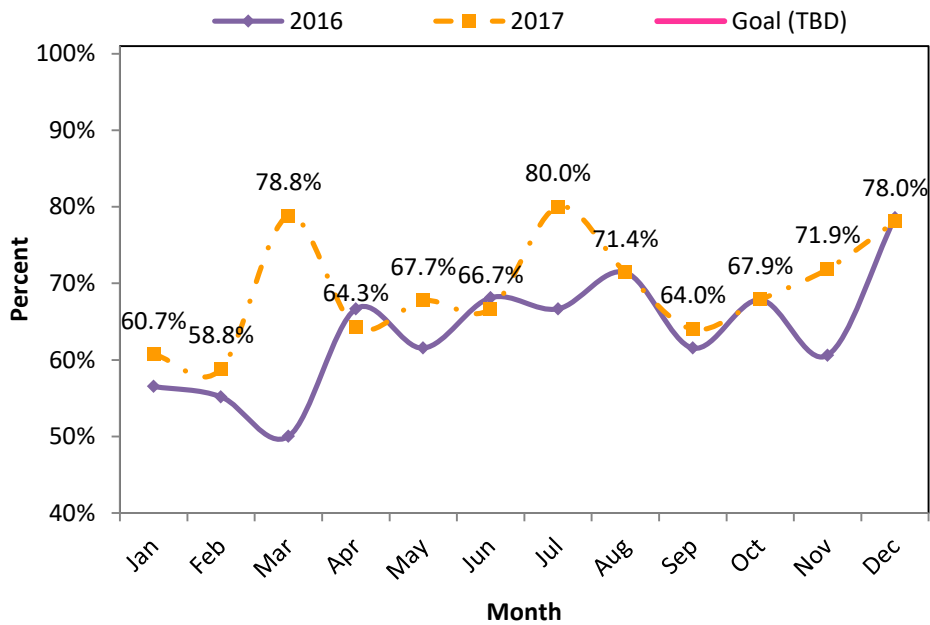
Division of Community and Family Support (DCFS)

Measure: **Colorado Community Response (CCR): Percent of Families with Positive Movement on the Economic Self-Reliance Scale**

How it is measured: *Numerator:* Number of families showing positive movement between entry and exit scores on the Economic Self Reliance scale from the Colorado Family Support Assessment v2.0 (CFSA v2.0)
Denominator: Number of families who exited the CCR program in the given month with a matching entry and exit CFSA v2.0; average monthly denominator: 30

Why this matters: Economic self-reliance refers to an individual being able to supply their own needs without external assistance. Understanding the impact CCR has on increasing a family’s economic self-reliance allows the program to potentially adjust their services to be more impactful.

Goal: **↑ To be determined**



Trend: The Division’s performance in the most recent quarter ranged from 67.9% to 78.0%. A goal has not been determined.



Division of Community and Family Support (DCFS)

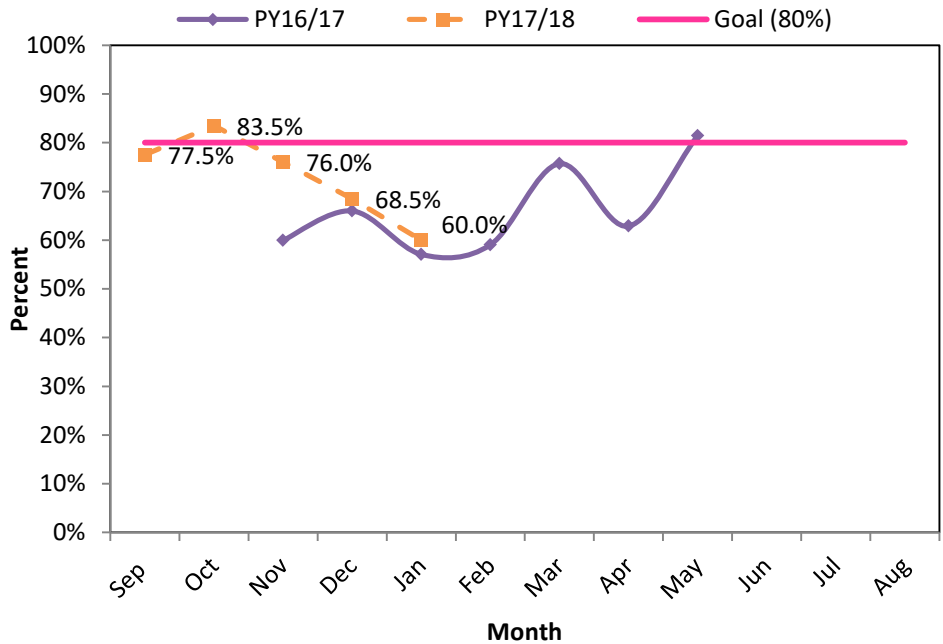
Measure: **Home Instruction for Parents of Preschool Youngsters (HIPPY): Percent of Families Who Received All Expected Visits/Packets in the Month**

How it is measured: *Numerator:* Number of families who received all expected visits/packets within the month

Denominator: Number of families enrolled for the entire month; average monthly denominator: 341

Why this matters: Home Visitors provide weekly home visits to parents to encourage their involvement in their local schools and communities, while empowering and training them to act as the primary educator for their children. This maximizes a child’s chances at a successful early school experience. Monthly group meetings provide an opportunity for families to build social capital by meeting other families in their community and discover potential resources to meet their specific needs.

Goal: **↑ To be determined**



Trend: The Division’s performance in the most recent quarter ranged from 60.0% to 76.0%. The goal was not met in this quarter.



Office of Economic Security

Description

The Office of Economic Security (OES) administers programs that provide financial, employment, energy, and nutritional supports to Coloradans. The Office of Economic Security consists of three divisions: the Child Support Services Division; the Employment and Benefits Division, which includes Colorado Works/Temporary Assistance for Needy Families, the Colorado Refugee Services Program, and Adult Financial Programs; and the Food and Energy Assistance Division, which includes the Food Assistance/Supplemental Nutritional Assistance Program, the Low-Income Energy Assistance Program, and Food Distribution Programs.

Director: Ki'i Powell

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

- *Percent of Current Child Support Collected:* The Division has continued its work on a two-generation (2Gen) initiative that promotes a more service-oriented approach to child support. Phase I piloted an assessment tool that identifies barriers to a parent's ability to pay child support. The University of Northern Colorado used Phase I assessment data to test a predictive analytics tool that allows counties to target client barriers that are most predictive of non-payment. Phase II is underway and provides case managers in participating counties with family-centered skills and supports the creation of community partnerships that provide needed services to clients.
- *Percent of Current Cases with No Payment:* As a strategy to make improvements on this measure, the Division implemented a call-a-thon project with the 10 largest counties. Through this effort, counties received training on how to conduct the call-a-thon, as well as soft skills training on effective communication with clients. The 10 participating counties were split into two groups with five participating in the first round and five in the second round. Round one was conducted in January and February. The result was an additional \$390,138 collected for families. Round two will take place in March and April.

Measures

- [Percent of Current Child Support Collected](#)
- [Percent of Cases with an Arrears Payment](#)
- [Percent of Current Cases with No Payment](#)



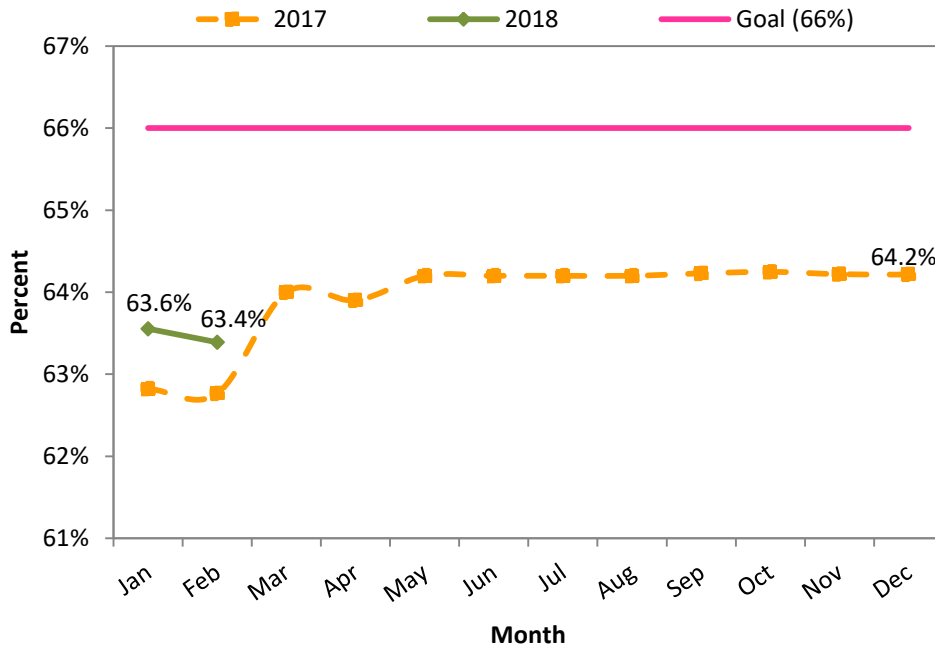
Child Support Services (CSS)

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 February 2018: \$66,746,956

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

Goal: **↑66%**



Trend: The Division’s performance in the most recent quarter ranged from 63.4% to 64.2%.



Child Support Services (CSS)

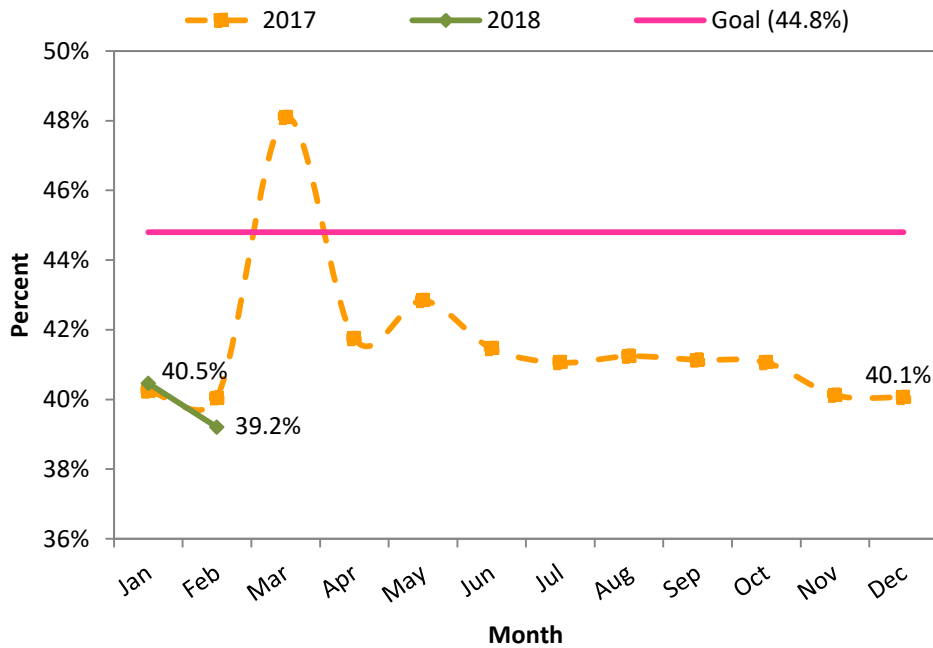
Measure: **Percent of Cases with an Arrears Payment**

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

Denominator: Number of cases with arrears owed in the month; average monthly denominator: 104,523

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

Goal: **↑44.8%**



Trend: The Division’s performance in the most recent quarter ranged from 39.2% to 40.5%.

Child Support Services (CSS)

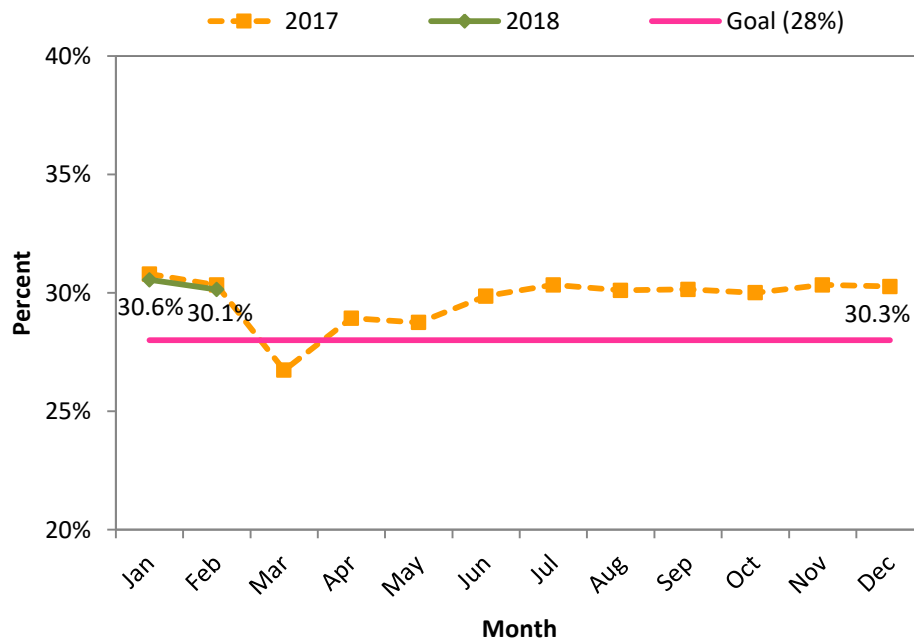
Measure: **Percent of Current Cases with No Payment**

How it is measured: *Numerator:* Cases with no payment in the month, excluding Department of Corrections (DOC) cases and those with a Social Security Administration claim

Denominator: Number of cases where a Monthly Support Order (MSO) is owed; average monthly denominator: 91,098

Why this matters: Reducing the number of cases with no payments increases the economic security of families.

Goal: **↓28%**



Trend: The Division's performance in the most recent quarter ranged from 30.6% to 30.1%.

Employment and Benefits Division

Summary

Description:

The Employment and Benefits Division administers the State's cash assistance programs for families and older adults, as well as the Colorado Refugee Services Program. Adult Financial has programs that encompass several types of assistance that provide financial support for adults with low income or with disabilities and includes the following programs: Aid to the Needy and Disabled and Aid to the Blind, Old Age Pension, Home Care Allowance, Adult Foster Care, Burial Assistance, and Repatriation. A second program, Colorado Works, is federally known as Temporary Assistance for Needy Families (TANF). Colorado Works provides 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 ongoing 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 through county human service offices across the state. The Colorado Refugee Services Program (CRSP) ensures effective resettlement of officially designated refugees and promotes 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

- *Colorado Works and Adult Financial Payment Accuracy Rates:* The Employment and Benefits Division continues to provide extensive training and technical assistance to counties to improve payment accuracy rates. The Division also recently transitioned to a regional model that will allow State staff to work more closely with counties in researching error cases and providing additional guidance when needed.
- *Colorado Works All-Family Work Participation Rate (WPR):* The Division continues to implement key strategies for improving performance on WPR. These include report development, in-person county meetings, providing statewide training and technical assistance, and communicating data-entry requirements to county staff.
- *Colorado Refugee Services Program (CRSP):* Refugee arrivals have slowed considerably over the past six months. The program is working with contractors to focus on re-engaging current clients who may benefit from a job upgrade or additional skills training.

Measures

- [Adult Financial Payment Accuracy Rate](#)
- [Colorado Works Payment Accuracy Rate](#)
- [Colorado Works Entered Employment](#)
- [Colorado Works All-Family Work Participation Rate](#)
- [Entered employmentColorado Refugee Services Program Entered Employment](#)
- [Colorado Refugee Services Program 90-Day Employment Retention](#)



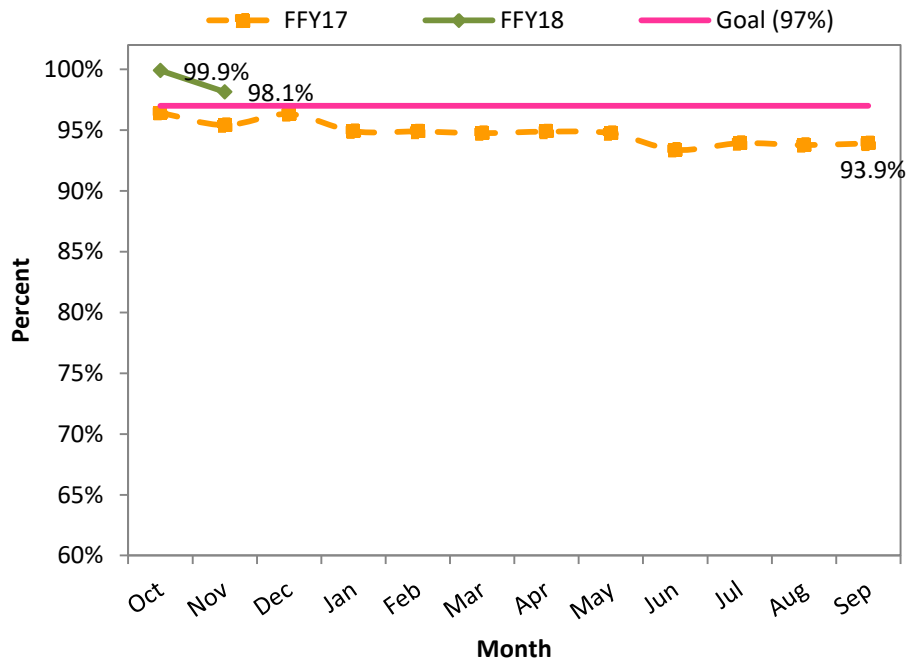
Employment and Benefits Division: Adult Financial (AF)

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: \$17,679

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 93.9% to 99.9% and met the goal in October and November 2017.

Notes: The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.



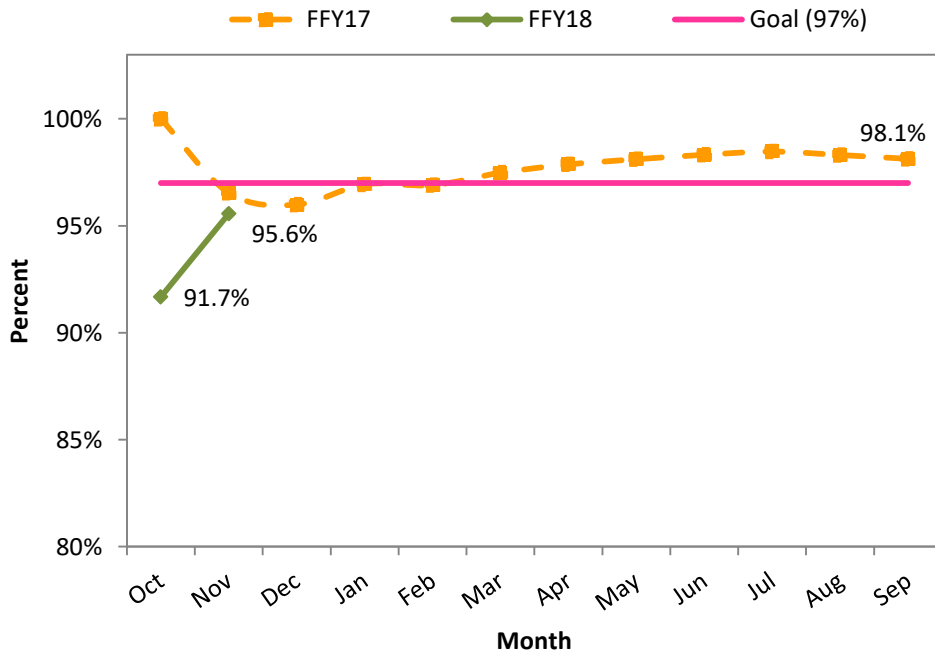
Employment and Benefits Division: Colorado Works (CW)

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: \$27,081

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 fell below the goal for the first time in seven months.

Notes: The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.



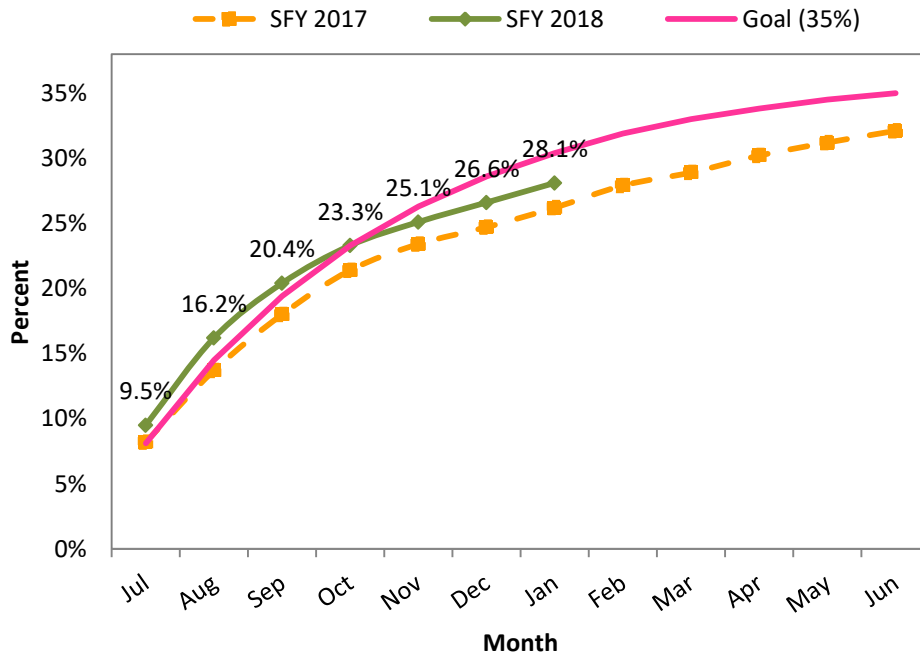
Employment and Benefits Division: Colorado Works (CW)

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: 21,977

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

Goal: **↑35%**



Trend: The entered employment rate for SFY 2018 did not meet the pro-rated goal each month this quarter.

Notes: The state fiscal year begins July 1st, resetting the cumulative measurement.



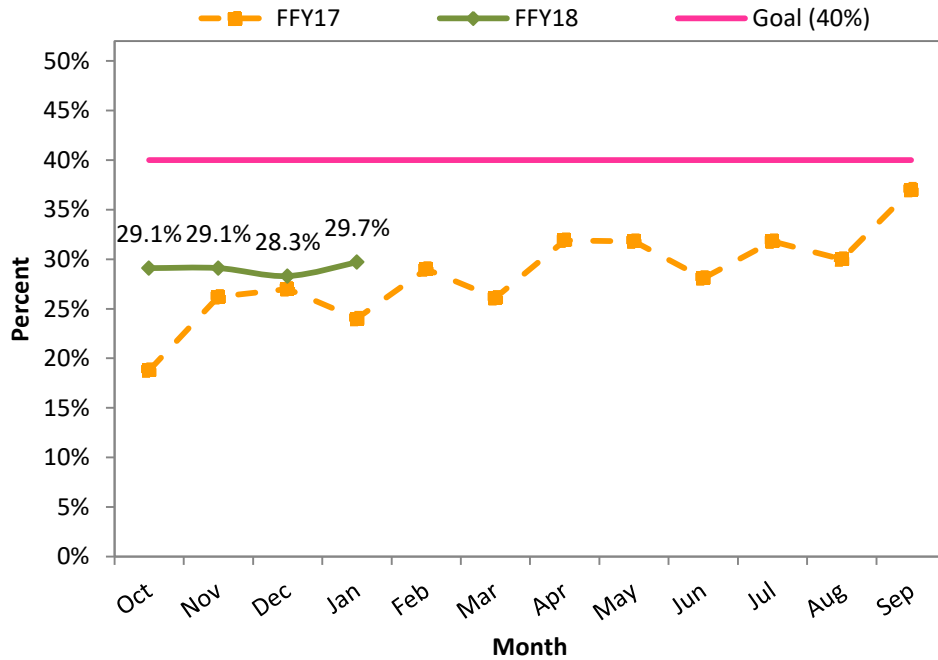
Employment and Benefits Division: Colorado Works (CW)

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

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: 7,973.69

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 28.3% to 29.7% and remains above the previous year’s performance.

Notes: The Work Participation Rate 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.



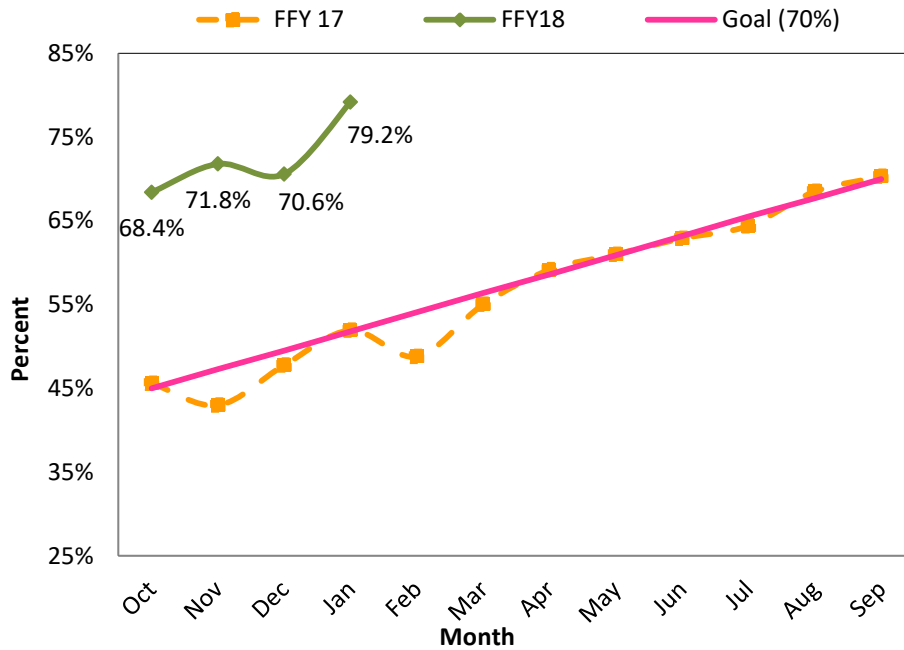
Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

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

How it is measured: *Numerator:* Cumulative number of individuals newly entering employment through the month
Denominator: Cumulative number of individuals receiving employment services through the month; cumulative denominator (FFY18): 149

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

Goal: **↑70%**



Trend: The Division’s performance in the most recent quarter ranged from 70.6% to 79.2% and remains above the previous year’s performance.

Notes: The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.



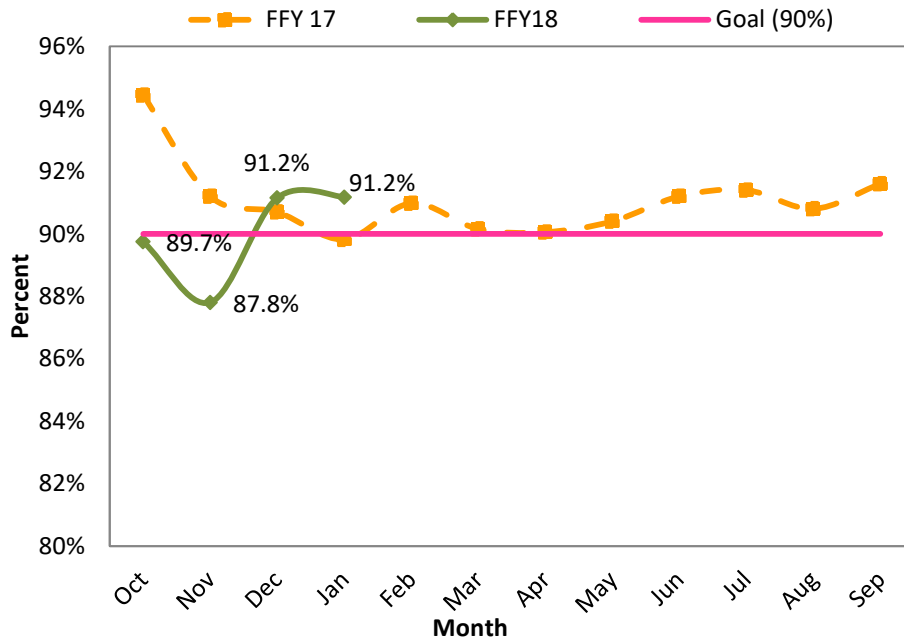
Employment and Benefits Division: Colorado Refugee Services Program (CRSP)

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 federal fiscal year to date; cumulative denominator: 136

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

Goal: **↑90%**



Trend: The Division’s performance in the most recent quarter ranged from 87.8% to 91.2% and met the goal for two months.

Notes: The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.

Food and Energy Assistance

Summary

Description

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

Director: Lena Wilson

Executive Summary

- *Payment Error Rate (PER):* The Division has multiple efforts underway to improve accuracy rates, including database improvements, training, and technical supports for counties. Several metro and rural area counties participated in recent CDHS Performance and Partnership Exchange (PPE) workshops where best practices were presented and discussed. These workshops were also an opportunity to discuss common challenges and to problem solve with county peers.
- *Claim Rate:* The State's claim rate continues to show substantial improvements in the most recent quarter due to the Division's targeted county outreach by the Division. Additional statewide technical assistance and training are also being implemented to continue improvements.
- *Number of New SNAP Enrollees and Enrollment Rate:* The Division continues to work closely with state outreach partners to ensure success in achieving their SNAP enrollment goals. The Division is also involved in developing several new community partnerships across the state that support this effort.

Measures

- [Food Assistance Case and Procedural Error Rate](#)
- [Food Assistance Payment Error Rate](#)
- [Food Assistance Claim Rate](#)
- [Food Assistance Impact Estimate](#)
- [Number of New SNAP Enrollees](#)
- [New SNAP Enrollee Enrollment Rate](#)



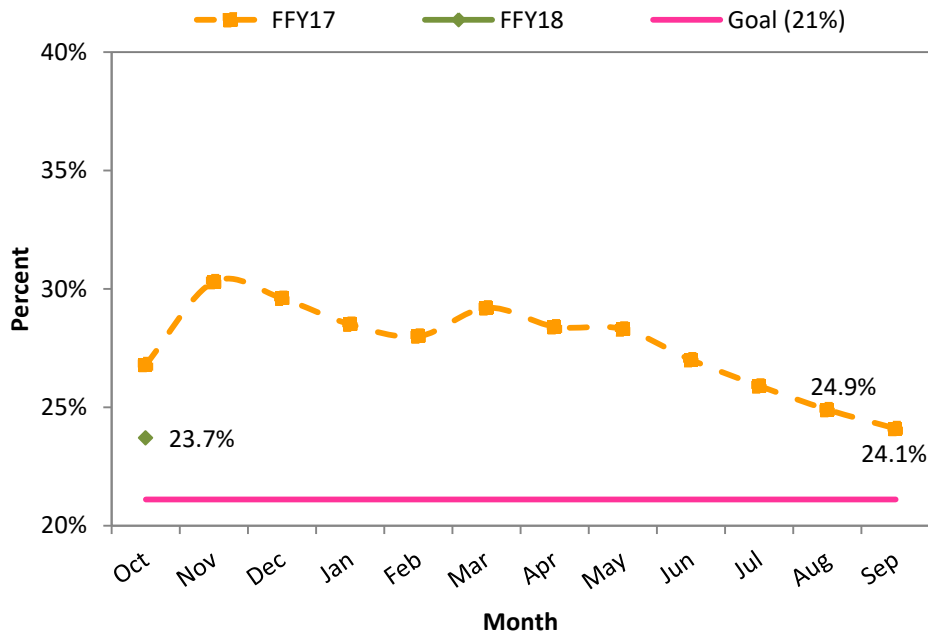
Food and Energy Assistance: Food Assistance (FA)

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: 59

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 24.9% to 23.7%. The goal was not met.

Notes: A case and procedural error can occur anytime an adverse action is taken against a participant (e.g., benefits are terminated or denied). Data runs in arrears, as the sample must be taken from completed months, and the Quality Assurance Division has 115 days to complete necessary review elements before reporting a final decision. This is a federal measure compiled by Quality Assurance staff within CDHS. The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.





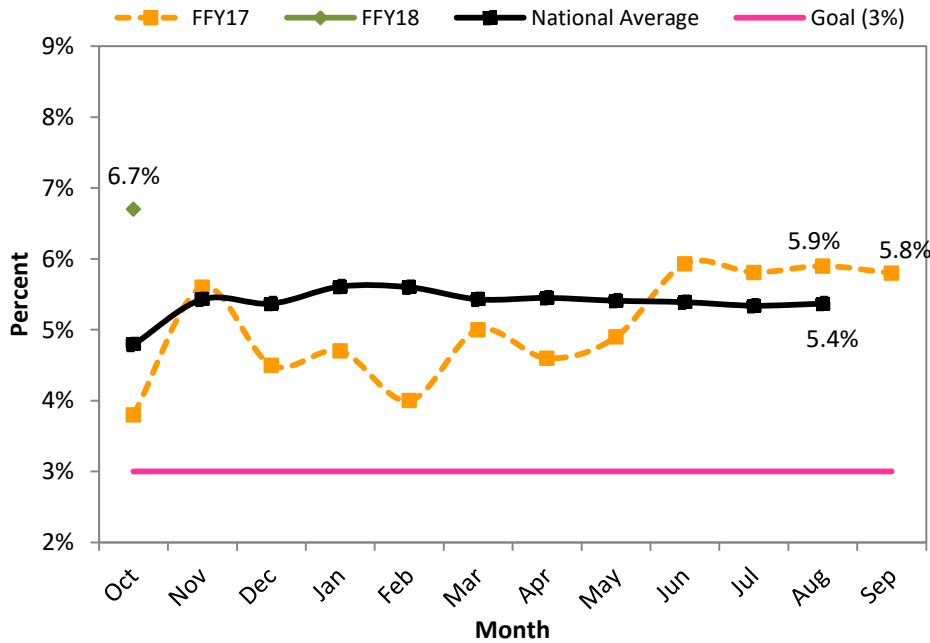
Food and Energy Assistance: Food Assistance (FA)

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: \$14,182

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 ranged from 6.7% to 5.8%. The goal was not met.

Notes: The Payment Error Rate (PER) is a federal measure of misauthorized payments above an allowable threshold (\$37 as of 2017). The National Average data runs two months further in arrears than state data.

CDHS Quality Assurance staff compiles the data for this measure. The federal fiscal year begins each year on October 1st, resetting the cumulative measurement.

The graph of this measure will no longer show the combined error rate trend line, which included errors below the federal threshold of \$37. Instead, the PER national average data will be shown.





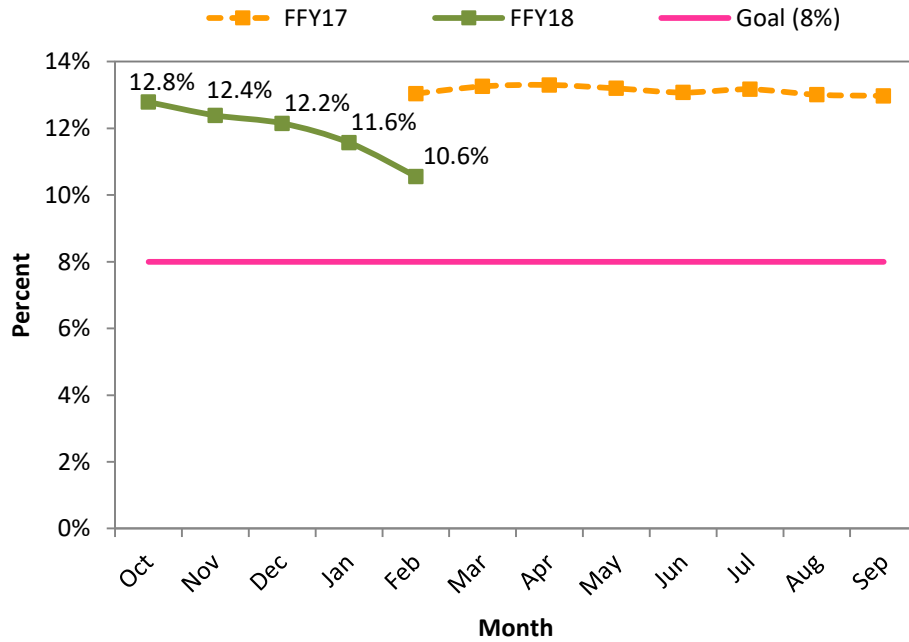
Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance Claim Rate**

How it is measured: *Numerator:* Number of open and active SNAP claims
Denominator: Number of open SNAP cases; average monthly denominator: 227,187

Why this matters: Reducing the number of Food Assistance claims requires accurate processing of applications, which ensures that Coloradans receive the appropriate level of benefits and also eliminates the related claims processing rework by counties.

Goal: **↓ 8%**



Trend: The Division’s performance in the most recent quarter improved from 12.2% in January to 10.6% in March.

Notes: This is a new measure as of May 2017, with data reported retroactively to February 2017.



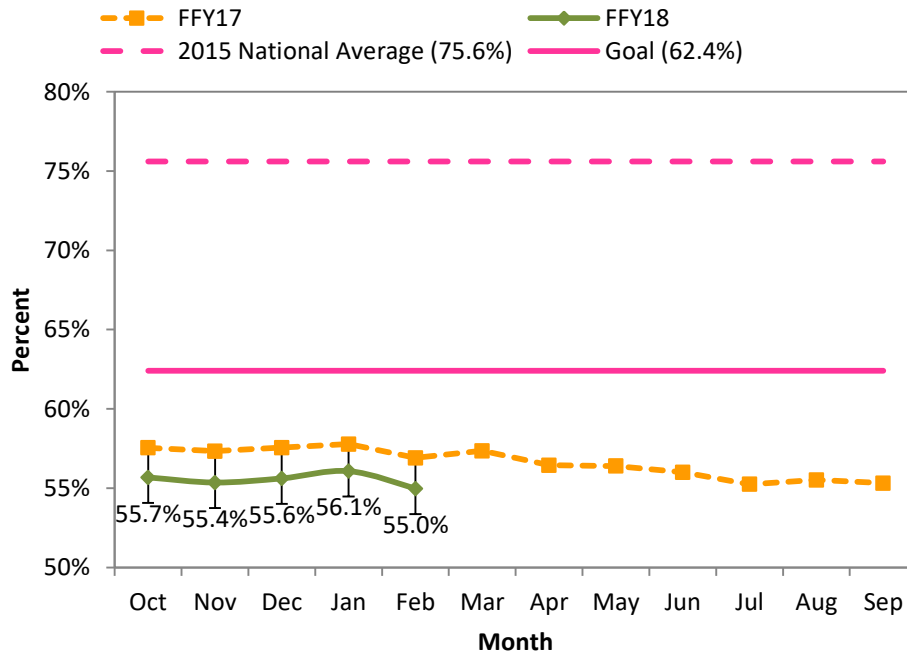
Food and Energy Assistance: Food Assistance (FA)

Measure: **Food Assistance Impact Estimate**

How it is measured: *Numerator:* Number of clients receiving SNAP benefits in the month
Denominator: Number of Coloradans below 125% of the federal poverty level in 2016; denominator: 811,177

Why this matters: Increases in the impact estimate will improve food security in Colorado, an important social determinant of health.

Goal: **↑ 62.4%**



Trend: In the most recent quarter performance ranged from 55.0% to 56.1%.

Notes: The numerator reflects the current caseload data. The denominator is based on the 2016 American Community Survey conducted by the U.S. Census Bureau, as this is the most recent poverty estimate available.

The graph shows a margin of error of +/- 1.6%.



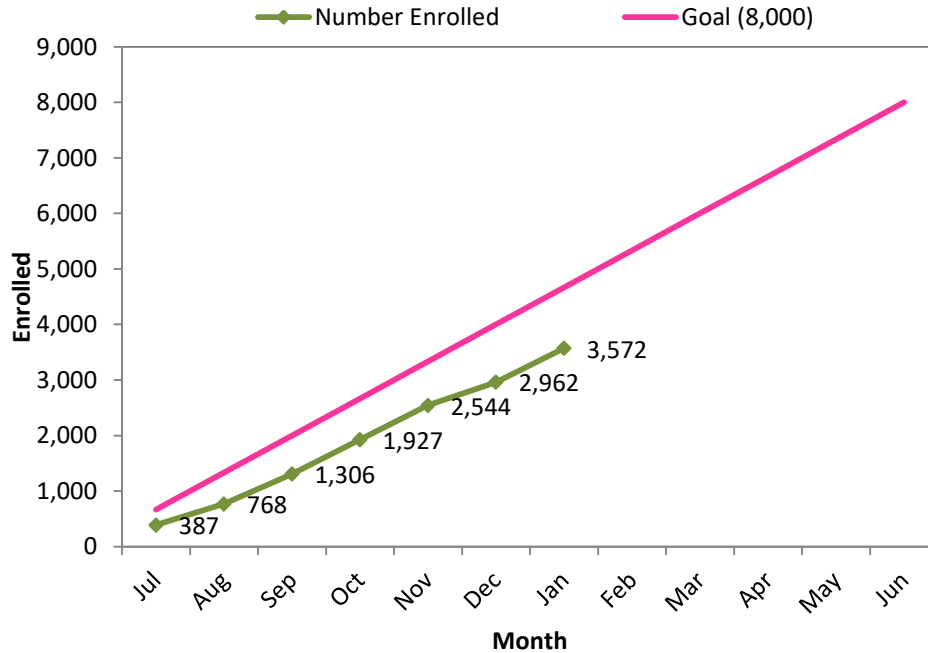
Food and Energy Assistance: Food Assistance (FA)

Measure: **Number of New SNAP Enrollees**

How it is measured: *Description of Measure:* The total number of new SNAP enrollees from outreach partners (cumulative): 3,572

Why this matters: Increases in the number of eligible enrollees will improve food security in Colorado, an important social determinant of health.

Goal: 8,000



Trend: Performance in the most recent quarter is below the pro-rated goal. The goal in January 2018 was 4,669 enrollees and there were 3,572 enrolled.

Notes: The goal line adds 666.7 enrollees each month (8,000 divided by 12 months).



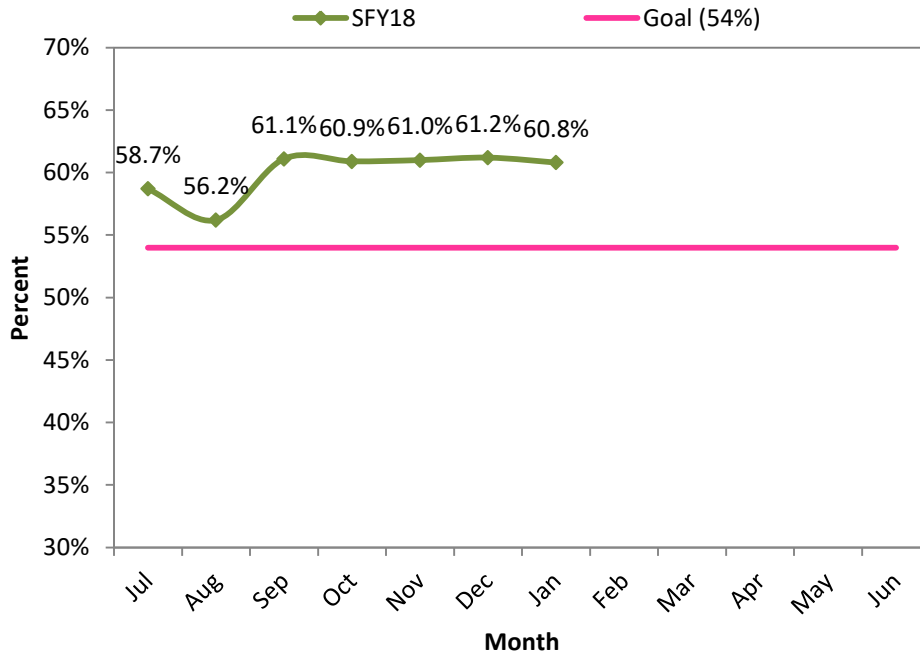
Food and Energy Assistance: Food Assistance (FA)

Measure: **New SNAP Enrollee Enrollment Rate**

How it is measured: *Numerator:* Cumulative number of applications from outreach partners that were approved
Denominator: Cumulative number of applications submitted by outreach partners; average monthly denominator: 2,815

Why this matters: Improvement in the enrollment rate results in workload reductions for county staff by limiting the number of ineligible applications being processed.

Goal: **↑ 54%**



Trend: The Division’s performance in the most recent quarter was above the goal and ranged from 60.8% to 61.2%.