



COLORADO DEPARTMENT OF HUMAN SERVICES

"People Who Help People"

FY 2012-13 STRATEGIC PLAN OVERVIEW

CDHS Mission Statement



OLD: Our mission is to design and deliver quality human services that improve the safety and independence of the people of Colorado. The Department is committed to the improvement of individual and family outcomes, cross-system integration, and community partnerships.

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









CDHS Overview



CDHS Administers and Supervises:

- All non-medical public assistance activities of the State assistance payments including: food assistance, child welfare services, child care services, rehabilitation programs, alcohol and drug treatment programs, programs for the aging.
- County departments of human services, Community Centered Boards, Mental Health Centers and Area Agencies on Aging.

CDHS Inspects and Licenses:

Child care facilities and facilities for the care and treatment of the state's dependent citizens who are mentally ill, developmentally disabled, or juvenile offenders.

CDHS Operates and Provides Funding:

- ➤ Two Mental Health Institutes, three Regional Centers for people with developmental disabilities, five Veterans Nursing Homes, and ten youth corrections facilities.
- Disability Determination Services, Refugee Services, Vocational Rehabilitation, and Food Distribution.
- For community-based services for indigent mentally ill people and people with developmental disabilities and contracts for the supervision and treatment of delinquent juveniles.

CDHS Strategy to Reduce Audit Recommendations In Process



- ➤ As of January 2011
 - 81 Recommendations in process
- ➤ As of June, 2011
 - 38 Recommendations in Process
- Full review of all recommendations and regular follow-up
- New management strategy to address audit recommendations



Strategic Plan Development

- ➤ Statewide outreach efforts led to nearly 1,000 individual stakeholders, partners, clients, employees and constituents to provide input to the plan.
- Community meetings held in Denver, Pueblo, Lamar, Fort Morgan, Durango, Grand Junction and Steamboat Springs.
- Periodic strategic plan updates were posted to the department's website with a continuous feedback loop.



Strategic Imperatives



To become the most effective 21st Century Human Services system, seven guiding principles were identified:

- Strengthen the safety net to support basic life necessities.
- Involve clients and consumers in decisions affecting their lives.
- Expand collaborative efforts with other state departments, counties, providers, consumers and staff.
- Streamline and simplify processes at all levels.
- Utilize outcome-focused data and research to guide quality improvement efforts.
- Communicate effectively and timely to keep consumers, partners and stakeholders informed.
- Enhance training opportunities and expedite hiring practices in support of our valued work force.



STRATEGIC INITIATIVES

- ➤ Integration of Office of Early Childhood Education
- Long-term Care Redesign
- Department-wide Streamlining Effort
- > Statewide Economic Security Alignment
- Comprehensive Child Welfare Outcome-Focused Strategy
- > "Stat" Strategy to Support Continuous Quality Improvement





C-Stat Strategy

- Starting in January 2012 CDHS will implement C-Stat to: collect timely data, increase transparency, conduct regular executive meetings to identify new performance measures, and support continuous quality improvement.
- C-Stat will require all CDHS departments to collect extensive, and timely statistical data from a variety of categories within their departments.
- C-Stat is not just a management tool, but a way to measure performance outcomes and hold ourselves accountable based on real time data.
- ➤ C-Stat will establish a monthly forum for CDHS Executive Management to engage each division focusing on improving outcomes and identifying areas of persistent challenge.
- > C-Stat will move CDHS from being process oriented to outcome oriented.

Proposed Integration of an Office of Early Childhood Education



- Consolidation of early childhood services with the intent of:
 - Improving kindergarten readiness and third grade reading.
 - Preventing child abuse and neglect.
 - Treating early-identified problems.
- Collaborating parties include:
 - Early Childhood Leadership Commission
 - Lieutenant Governor's Office
 - Department of Public Health and Environment
 - Department of Health Care Policy and Financing
 - Department of Education
 - Department of Human Services

Long-Term Services and Supports Redesign Goals to Achieve Sustainability



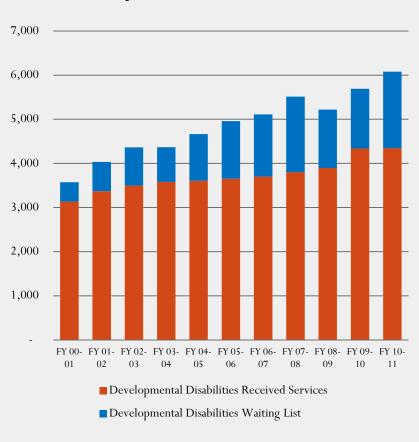
- Reduce the wait list for services for the developmentally disabled
- > Strengthen outreach, prevention and system navigation
- Reduce fragmentation for clients and providers
- > Improve consistency in rules, regulations and communications
- Consolidate all HCBS Medicaid Waiver Programs and Health Programs under one department
- Build upon the strong service infrastructure
- Build Seamless Continuum of Care
- Increase efficiency and effectiveness to avoid cost overruns resulting from federally-required change to fee-for-service billing.

FY 2012-13 Budget Request: \$4,877,540 for program costs to provide services for 173 people with developmental disabilities to address high demand and access to services.

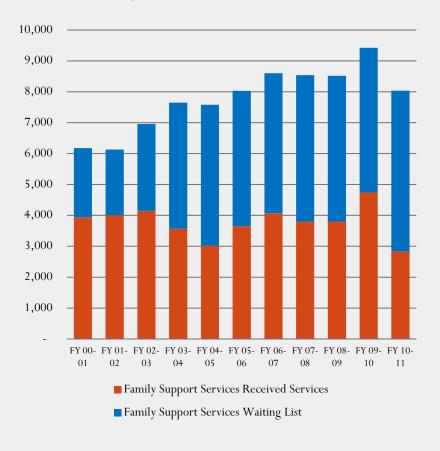


Waiver Services and Waitlists

Developmental Disabilities



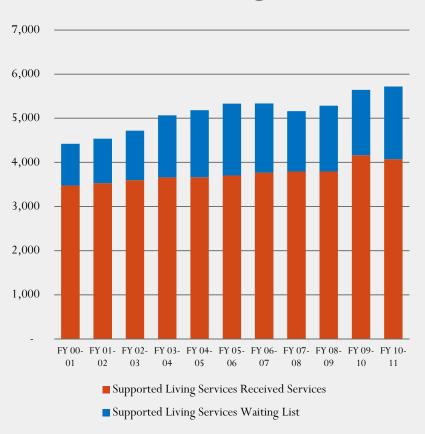
Family Support Services



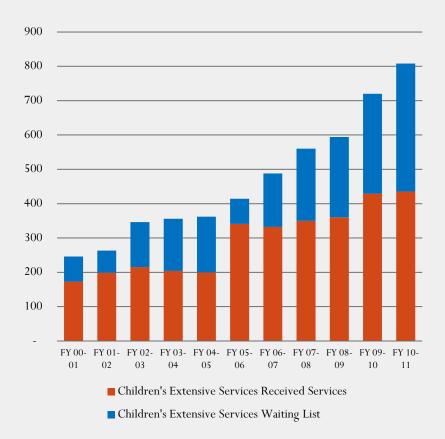


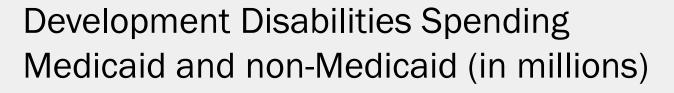
Waiver Services and Waitlists

Supportive Living Services

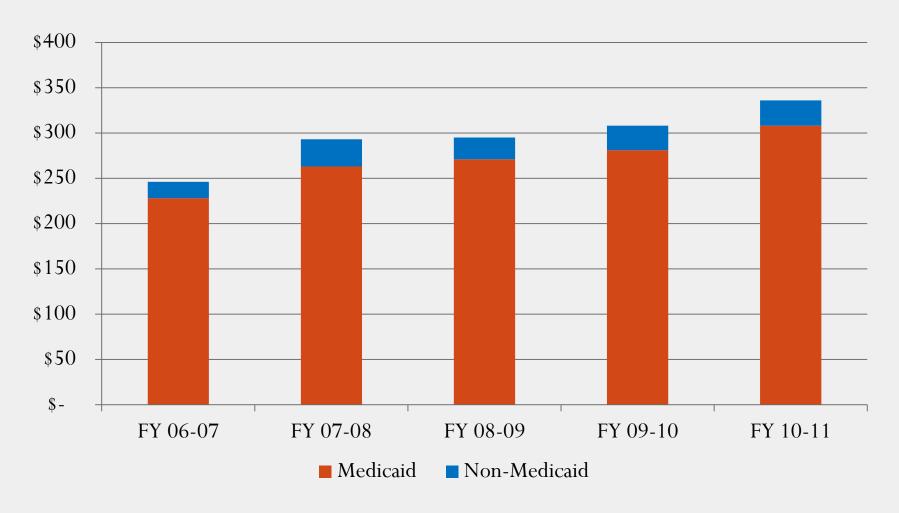


Children's Extensive Services









Department - Wide Streamlining Effort

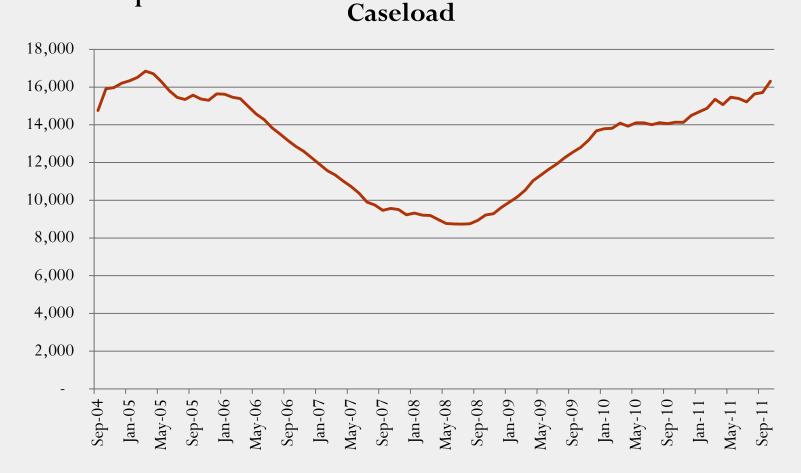


- Comprehensive review of more than 4,300 rules.
- Repeal of 850 rules (20%).
- \triangleright Amendment of 2,000 rules (49%).
- ➤ Alignment of rules with those of Department of Public Health and Environment and Health Care Policy and Financing.
- ➤ Review of policies Agency letters.
- Coordination of audits and case review processes impacting counties and sub-recipients.
- ➤ Alignment with REAL Colorado.

Colorado Works/TANF Caseload



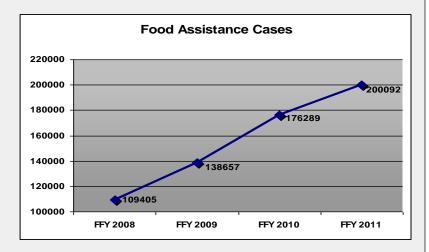
The number of families receiving Basic Cash Assistance is at its highest level since April 2005



Economic Security Key Caseload Measures



- Food Assistance cases have increased by 83% since FFY 2008:
 - FFY 2008 average 109,405 households
 - FFY 2009 average 138,657 households
 - FFY 2010 average 176,289 households
 - FFY 2011 average 200,092 households (est)



- TANF Basic Cash Assistance caseloads have increased by 76% from July 2008 to June 2011:
 - July 2008 8,733 cases
 - June 2011 15,393 cases
- Low Income Energy Assistance caseloads are projected to drop in response to federal funding reductions:
 - SFY 2010-11 125,097 cases
 - SFY 2011-12 113,501 cases (projected)

Collaborative Efforts to Achieve Economic Security



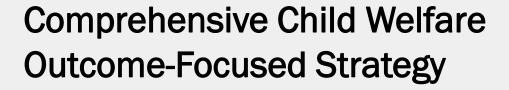
In alignment with Governor's Economic Development Plan, the Colorado Blueprint:

- Department of Human Services
- Labor and Employment
- ➤ Office of Economic Development and International Trade
- Higher Education
- Effective use of resources
- Avoidance of duplication of effort
- Refocusing on employment in a new economy

Legislative Initiative:

• SB 12-042 Concerning bringing certain statutory provisions related to child support into compliance with federal law.

FY 2012-13 Budget Request: \$6,282,522 Reduction in Temporary Assistance for Needy Families (TANF) to address structural deficit.





- > Adolescent Behavioral Health Continuum of Care
- Colorado Practice Model
- Casey Family Programs and Annie E. Casey Foundation
- Right-sizing the Division of Youth Corrections

Legislative Initiatives:

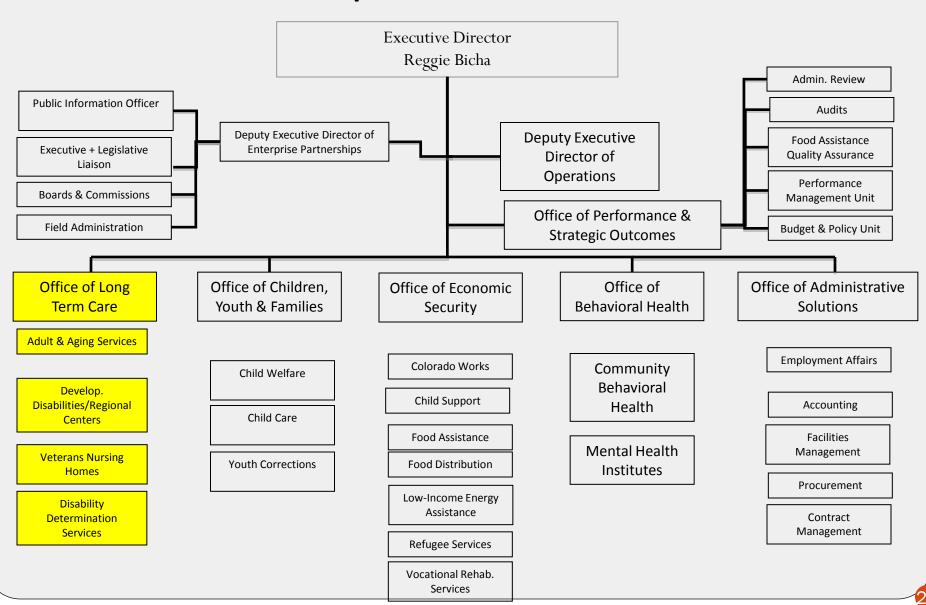
- SB 12-066 Concerning expanding those persons eligible as guardians in the guardianship assistance program to include persons ascribed by the family as having a family-like relationship with the child.
- SB 12-033 Concerning adding near fatalities to the responsibilities of the department of human services child fatality review team.

Strategic Plans and Performance Measures





Colorado Department of Human Services



Long-Term Care Goal and Strategies



Goal: To assist the elderly and people with developmental disabilities to reach their maximum potential through increased independence, productivity and integration within the community.

Strategy No. 1: The Colorado Department of Human Services (CDHS) rules specify that supported employment is the primary option for all persons receiving Day Habilitation Services and Supports. Supported employment is employment in a variety of settings in which the participants interact with non-disabled individuals, other than those providing services to them, to the same extent that individuals employed in comparable positions would interact.

➤ Of the adults with developmental disabilities in the community enrolled in day services, increase the percentage that have supported employment by 3.7% from FY 2009-10 to FY 2012-13, from 21.5% to 25.2%

Long-Term Care (continued)

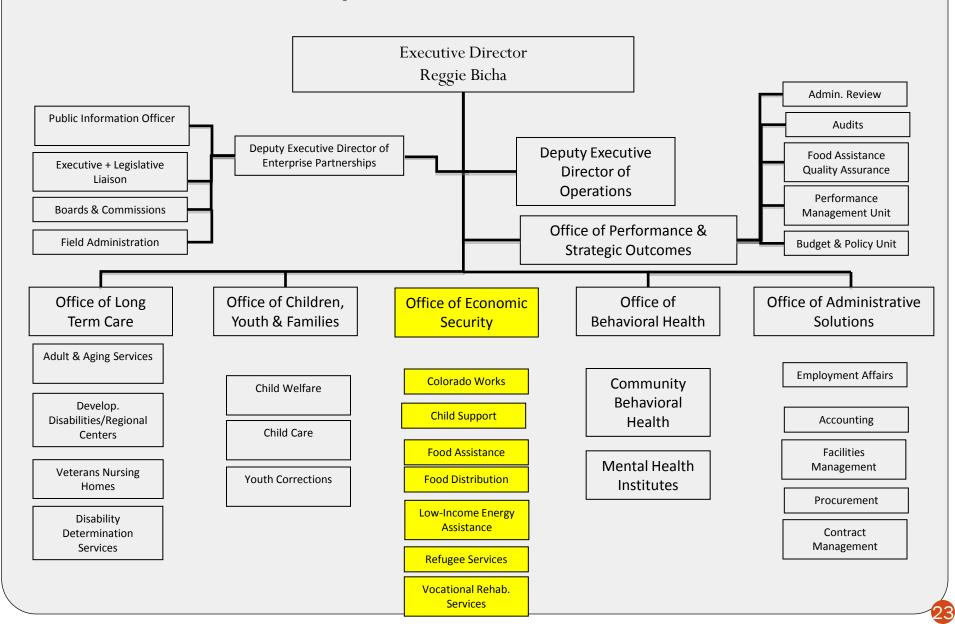


- **Strategy No. 2:** Young children will have the enhanced capacity to improve their competencies and talents. As outcome data becomes available, the professionals providing early intervention services adjust their intervention methods and strategies according to each child's individual level of progress. The Colorado Department of Human Services (CDHS) develops new training programs to improve local providers' understanding of how outcome data for each child can be used to help achieve individual developmental goals.
- Maintain or increase the percentage of infants and toddlers participating in early intervention services who improve their acquisition and use of knowledge and skills (motor, cognition, speech, language, etc.) to the FY2010-11 rate of 98%.





Colorado Department of Human Services



Economic Security Goal and Strategies

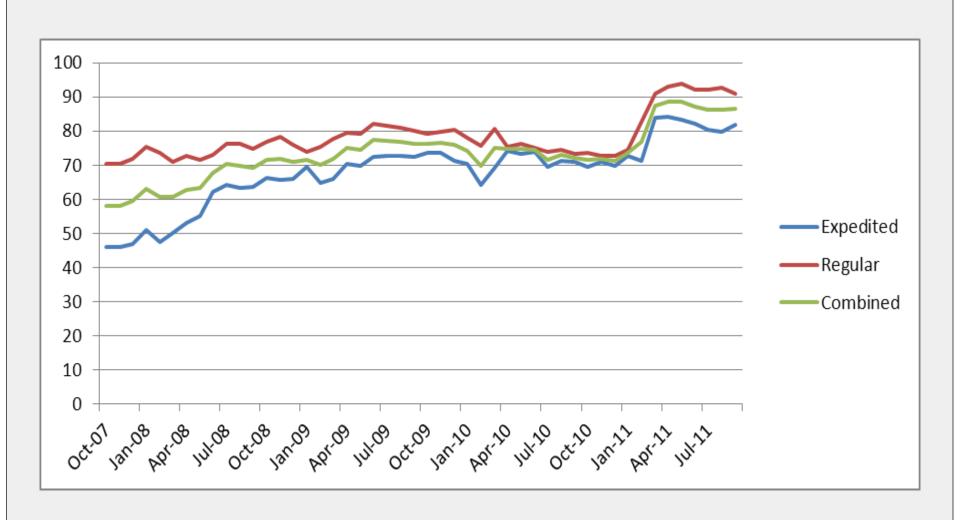


Goal: To improve the lives of the families we serve by helping them to achieve economic security.

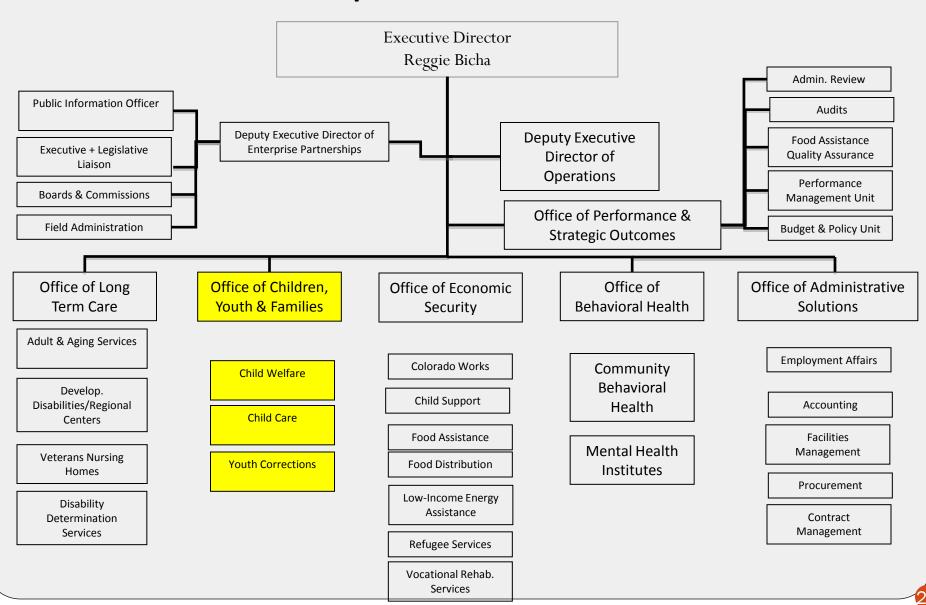
- **Strategy No. 1**: Improve the timeliness of approving, distributing and maintaining Food Assistance benefits.
- By July 2012, achieve a 95% timely processing of regular Food Assistance applications.
- By July 2012, achieve a 95% timely processing of expedited Food Assistance applications.
- By September 2012, improve by 25% the timely processing of Food Assistance re-determination applications.
- **Strategy No. 2**: Increase by 3% the percentage of people enrolled in the Colorado Works Program that have employment earnings.
- The percentage of Colorado Works participants eligible to be working that are receiving employment earnings will increase by 3%.
- **Strategy No. 3**: To increase efficiency of delivery benefits, Low Income Energy Assistance Program (LEAP) will develop an on-line access to its application system within two years.
- The number of eligible households receiving energy assistance will increase by 5%.



Food Assistance Timely Processing



Colorado Department of Human Services



Children, Youth and Families Goal and Strategies



Goal: To ensure Colorado's children and youth have the opportunity to thrive in safe, nurturing and stable families in their communities.

- **Strategy No. 1**: Improve the quality of the safety assessments completed in response to reports of suspected child maltreatment. The United States Department of Health and Human Services, Administration for Children and Families, has set substantial compliance at 95%, which states are to incrementally achieve through negotiations associated with their performance improvement plan.
- The percentage of time the safety assessment process is completed accurately, in accordance with State Rules as found in Staff Manual Volume 7, will increase by 7% from SFY 2010-11 to SFY 2012-13, from 46% to 53%.
- **Strategy No. 2**: Involve families and youth in the Interagency Oversight Groups, which are the groups that oversee the Collaborative Management Programs (24-1.9 C.R.S) operating in some of the county departments. Family voice and choice in case planning is highly correlated with positive case outcomes.
- Decrease by 12.3 days the average number of days per year (length of stay) a child (13-21 years of age) in care stays in out-of-home placement from FFY 2009-10 to FFY 2012-13, from 225.1 to 212.8 days

Children, Youth and Families (continued)



Strategy No. 3: Collaboratively design, develop, implement, and evaluate a state and countywide consensus-based child welfare best practice model by June 2015. The model will improve child and family outcomes. This strategy includes not only county input, but also other key stakeholder input, including other state agencies, service providers, children, families, etc.

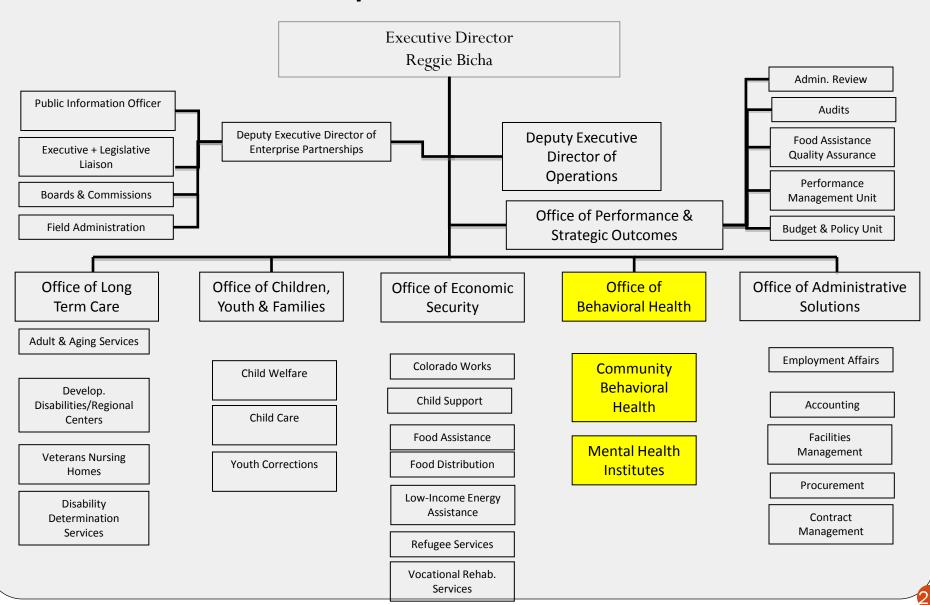
A compliance rate of 82.1%, representing a 0.6% increase, will be achieved for the CFSR (Child and Family Services Review) Safety Measure associated with protecting children and preventing removal or re-entry.







Colorado Department of Human Services

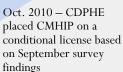


Mental Health Institutes - Path to Improvement

June 2011 – CMS placed CMHIP on a track for termination of Medicare and Medicaid reimbursement based on survey findings related to staffing and documentation Nov. 2011 – CMHIP returns to full certification status with CMS

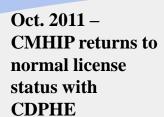
Jan. 2011 – JBC approves supplemental request to close unit and redeploy staff and also add 22.8 FTE new nursing staff







Feb. 2011 – CMHIP meets survey finding requirements and reestablishes CMS certification



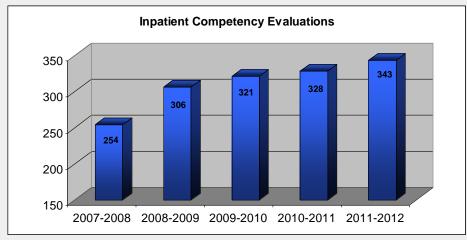
Behavioral Health Key Caseload Measures



• The number of inpatient competency evaluations has increased by 35% over the past five

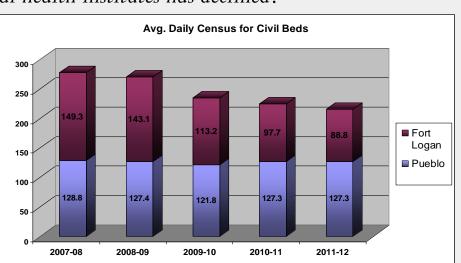
years:

- SFY 2007-08 254 evaluations
- SFY 2008-09 306 evaluations
- SFY 2009-10 321 evaluations
- SFY 2010-11 328 evaluations
- SFY 2011-12 343 evaluations (est)



The average daily census for civil beds at the mental health institutes has declined:

		<u>Pueblo</u>	Ft. Logan	<u>Total</u>
•	SFY 2007-08	128.8	149.3	278.1
•	SFY 2008-09	127.4	143.1	270.5
•	SFY 2009-10	121.8	113.2	235.0
•	SFY 2010-11	127.3	97.7	225.0
•	SFY 2011-12	127.3	88.8	216.1



Behavioral Health Goal and Strategies



Goal: To promote quality and effective behavioral health practices to strengthen the health, resiliency and recovery of Coloradoans.

- Strategy No. 1: The Colorado Mental Health Institute at Pueblo (CMHIP) provides inpatient and outpatient services to patients ordered to CMHIP for evaluation of competency to stand trial, restoration to competency, and individuals found not guilty by reason of insanity. Currently, the length of time from when a patient is ordered to CMHIP for evaluation to the time that the patient is admitted to CMHIP is 27 days. The Office of Behavioral Health, Division, and CMHIP staff will work with the State Judicial Department, Office of the Public Defender, Colorado Sheriff's Association, and the Colorado District Attorney's Council to reduce the time interval to less than 24 days, with no patient's interval being more than 28 days for any patient, no later than January 1, 2013.
- The interval from the time a patient is ordered to under a competency evaluation to the time the patient is admitted to CMHIP for the evaluation will be less than 24 days.

FY 2012-13 Budget Request: \$75,000 to complete a feasibility study for an electronic health records and new pharmacy system.

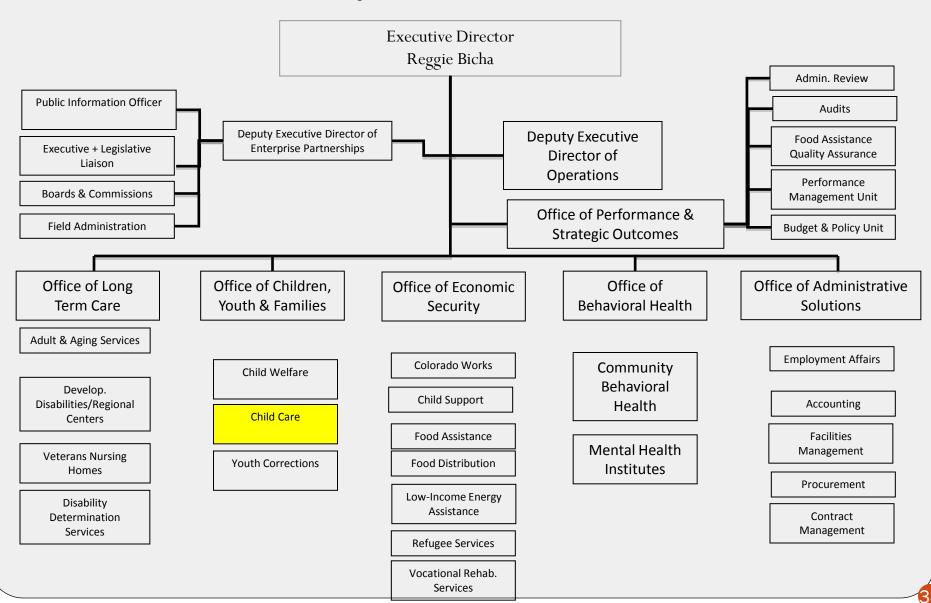
Behavioral Health (continued)



Strategy No. 2: The Division will develop a web-based, data dashboard that illustrates accurate and timely statewide behavioral health treatment information. The behavioral health data dashboard will be designed for both internal and external stakeholders in a user-friendly format to track trends and drive programmatic and policy decision-making. The data dashboard will be built in several phases: Phase 1 will include improved provider information and make standard behavioral health screening tools available to external stakeholders; Phase 2 will publish statewide demographic data on consumers (non-identifying data) receiving substance use treatment services; and Phase 3 will include statewide data on the performance of substance use disorder treatment agencies. The dashboard will encourage engagement in behavioral health services and making informed choices regarding the selection of providers.

▶ By providing consumers and stakeholders with tools and agency performance indicators, DBH will increase referrals into treatment by self, family or other health care providers by 2% each year, during FY 2011-12 to FY 2012-13, from 7,155 to 7,298.

Colorado Department of Human Services



Operational Efficiencies



Goal: To develop and implement efficiency measures that maximize the resources of the Department and its partners.

Strategy No. 1: The Department of Human Services and Department of Health Care Policy and Financing conduct case reviews of county departments of human services. The programs that are reviewed include Food Assistance, Medicaid, Colorado Works, LEAP, Adult Protection, Adult Financial, and Child Support Enforcement. There currently is no coordination between programs and departments in the conducting of the reviews, which causes additional workload to counties' operations. Neither is there any exchange of information between the programs following their reviews which, if in place, would allow for common observations occurring across programs to be noted and addressed. To address this, the two state departments will establish a Case Review Oversight Committee to reduce the total number of cases reviewed by conducting multiple program reviews of single cases; developing common review strategies; and regularly reporting out on findings.

The total number of cases reviewed while still meeting audit sampling requirements will be reduced by 5%.

Division of Child Care (continued)



Strategy No. 2: The Division of Child Care will analyze the cause for requests for Appeals/Waivers for stringency, and through training and rules reduction, reduce the number of such requests by 5% annually. Appeal information will be collected quarterly and will be reviewed by the Appeal Panel and the Division's Management Team. The team will develop strategies, report out findings, and adhere to the Department's Rule Reduction Plan.

The total number of Appeals / Waivers requested will be reduced by 5% through rule change or rule reduction.

Division of Child Care (continued)



Strategy No. 3: The Division of Child Care implemented a new automated statewide case management and payroll system (CHATS) as of April 30, 2011. In the ongoing maintenance, support, and new development work of CHATS, the Division will need to prioritize the helpdesk tickets and change requests that are generated by State and county end users in order to fully maximize the Office of Information Technology support staff to the system. To address this, the Division will form a CHATS Change Management Task Group consisting of county members appointed by county directors and State representation of CCCAP, Colorado Works, Criminal Background Check Unit, and IT staff.

CHATS Helpdesk tickets and Change Request will be reduced by 20%.







Reggie Bicha, Executive Director

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