SMART Act Hearing

December 13, 2018

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Interim Executive Director







OverVIEW

- 1. Department overview
- 2. Department's 2018-19 Performance Plan will highlight:
 - Governor's Dashboard
 - Progress on all activities and measures
 - Process improvement (Lean)
- 3. Performance Management System
- 4. Improving customer service
- 5. Regulatory Agenda
- 6. Budget Request and Legislative Agenda
- 7. Suicide Prevention Commission

You have printed copies of:

- These slides
- 2018-19 Strategic Plan (Performance Plan)
- FY18 Annual Performance Evaluation
- Regulatory Agenda
- CO Health Service Corps
 Loan Repayment Program
 Advisory Council Report to
 the Governor and
 Legislature

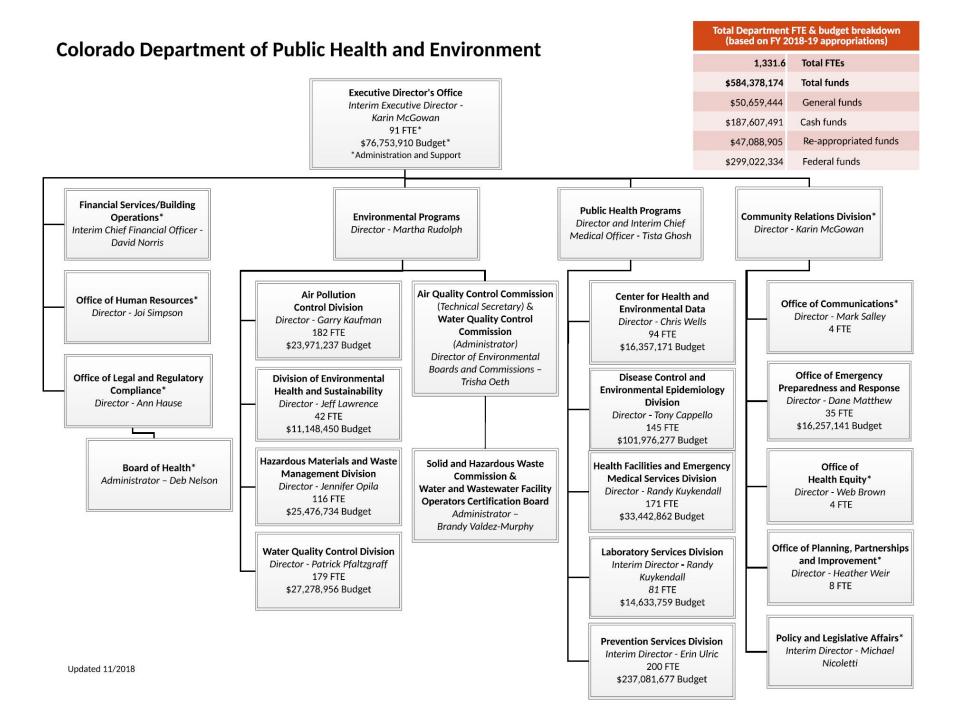
Our MISSION

Protect and improve the health of Colorado's people and the quality of its environment

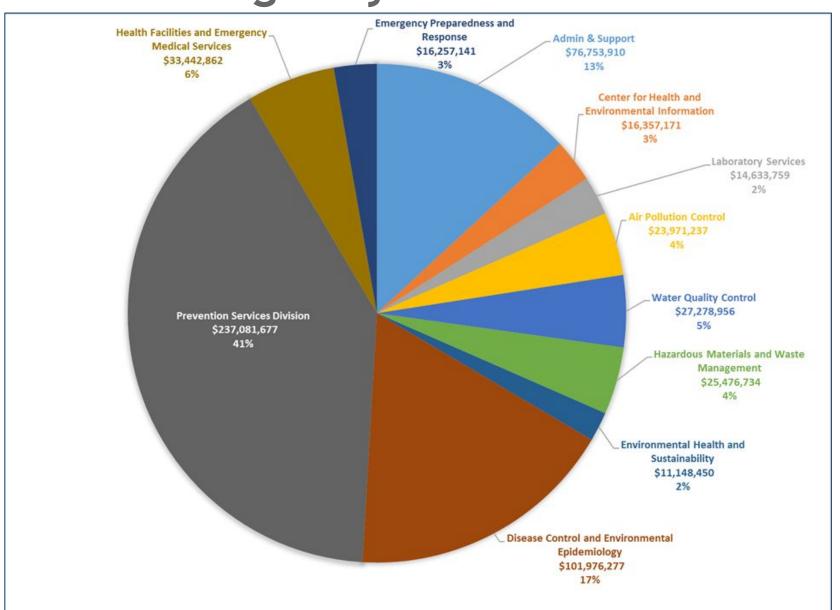
Our VISION

Colorado will be the healthiest state with the highest quality environment





CDPHE Budget by Division



OverVIEW

2018-19
Performance Plan





Our Strategic Plan Online Dashboard



Our GOALS



On Track

On Track to meet 2018 goal.

GOVERNOR'S DASHBOARD

The Governor's dashboard provides a summary of how we are doing across our five priorities that fulfill the vision of a truly Healthy Colorado across our people, our economy, our communities and our environment. At a glance you can view the status of each measure based on its indicator icon.

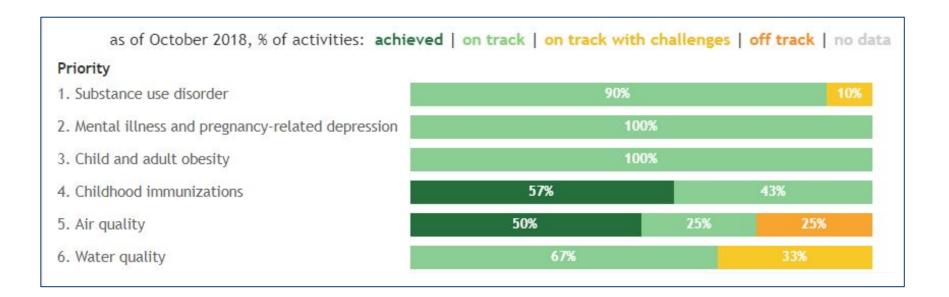
9

Work in Progress Some improvement but not enough to be on track. Also includes new metrics under development, or data not yet available. Needs Improvement
Needs improvement to meet 2018 goal.



Legend:

Goal 1: Implement the plans supporting health and environment priorities



Goal #1: Implement the plans supporting health and environment priorities

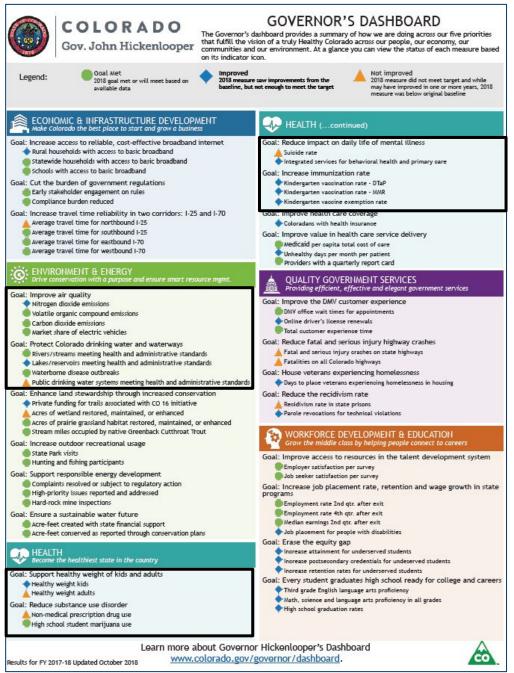
Goal #1 is aligned with the 6 areas on the Governor's Dashboard that CDPHE plays a lead role:

Environment and Energy:

- Improve air quality
- Protect Colorado's drinking water and waterways

Health:

- Support healthy weight of kids and adults
- Reduce substance use disorder
- Reduce impact on daily life of mental illness
- Increase immunization rate



Governor's Dashboard highlights: substance use disorder and air quality



HEALTH

Become the healthiest state in the country

Goal: Reduce substance use disorder

- Non-medical prescription drug use
- High school student marijuana use

ENVIRONMENT & ENERGY
Drive conservation with a purpose and ensure smart resource mgmt.

Goal: Improve air quality

- Nitrogen dioxide emissions
- Volatile organic compound emissions
- Carbon dioxide emissions
- Market share of electric vehicles

Substance use disorder: progress on activities



Goal 1: Implement the plans supporting health and environment priorities

as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

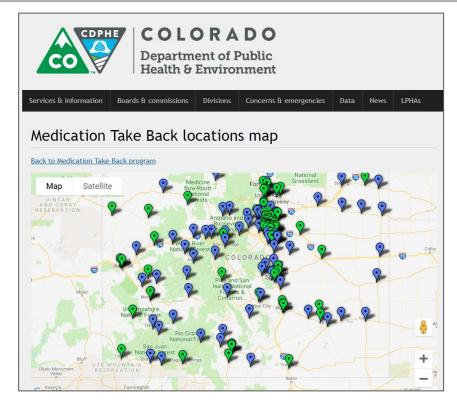
Priority

1. Substance use disorder 90% 10%

Strategy	Activity	Oct 2018
1a. Youth marijuana education and prevention campaigns	1a.1 Public Marijuana Education implementation	On Track
	1a.2 Trusted Adult Campaign	On Track
	1a.3 Youth Prevention Campaign	On Track
	1a.4 Support local integration of campaign messages in communities	On Track
1b. Targeted youth substance abuse prevention in schools	1b.1 Provide consultation to the Colorado Department of Education on the creation of the marijuana prevention resource bank (professional development, sharing effective curricula) to school districts	On Track
prevention in schools	1b.2 Provide regional trainings on positive youth development and evidence-based marijuana prevention programs, curricula, practices, and policies	On Track
1c. Community-based youth substance abuse prevention	1c.1 Support implementation of Communities That Care in more than 48 communities in Colorado	On Track

Substance use disorder: progress on activities

Strategy	Activity Oct	2018
1d. Reduce opioid misuse	1d.1 Increase uptake of clinical opioid prescribing guidelines	On Track
	1d.2 Implement the CDPHE medication take-back program	On Track with Challenges
	1d.3 Make the Prescription Drug Monitoring Program (PDMP) easier for providers to use and access	On Track



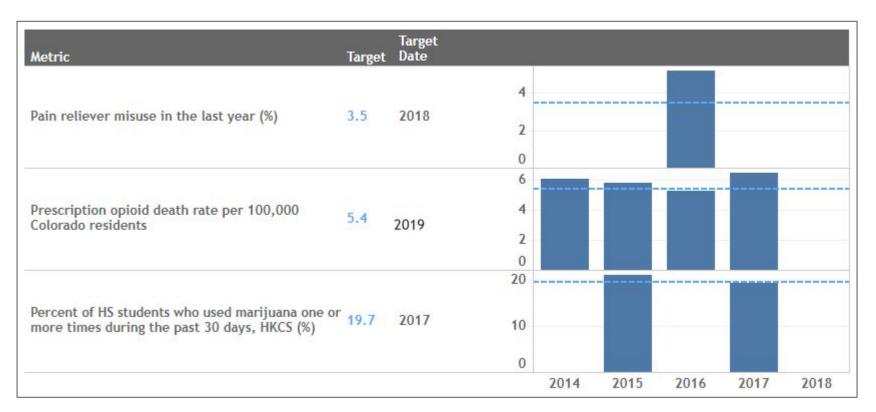


Substance use disorder: lead measures

Topic	Metric	Target	Target Date	9	
substance use disorder	PDMP Utilization Rates (as determined by percent of filled controlled substance prescriptions accompanied by a query of the prescription drug monitoring program database by a prescriber or delegate) (%)	40	2019	40 30 20 10 0	35
	Percent of counties with permanent household medication collection sites (%)	100	2019	100 50	88 91
	Number of coaching sessions (calls, webinars or in-person trainings) from CDPHE staff to the 47 communities funded to implement the CTC model with fidelity	85	2018	100 50 0	-98
	Total number of media impressions (views) of the Trusted Adult and Youth Prevention campaigns, across all media tactics	35,000,000	2018	30,000,000 20,000,000 10,000,000 0	34,995,158 13,877,899



Substance use disorder: outcome measures





Air Quality: progress on activities

<-- Back to all goals



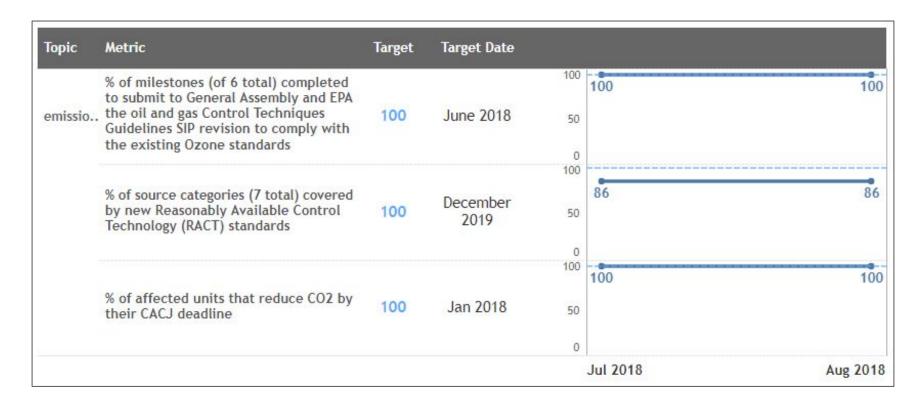
Goal 1: Implement the plans supporting health and environment priorities

% of activities: achieved | on track | on track with challenges | off track | no data 5. Air quality 50% 25% 25% Activity Oct 2018 Strategy 5. Ensure air quality is 5.1 Comply with federal ozone standard Off Track improved and protected by reducing pollution across Colorado 5.2 Develop Oil and Gas Reasonably Available Control Technology (RACT) State Achieved Implementation Plan (SIP) 5.3 Comply with sulfur dioxide emissions requirements Achieved 5.4 Reduce carbon dioxide emissions from the electric generating sector in Colorado. On Track

Date:

Oct 2017

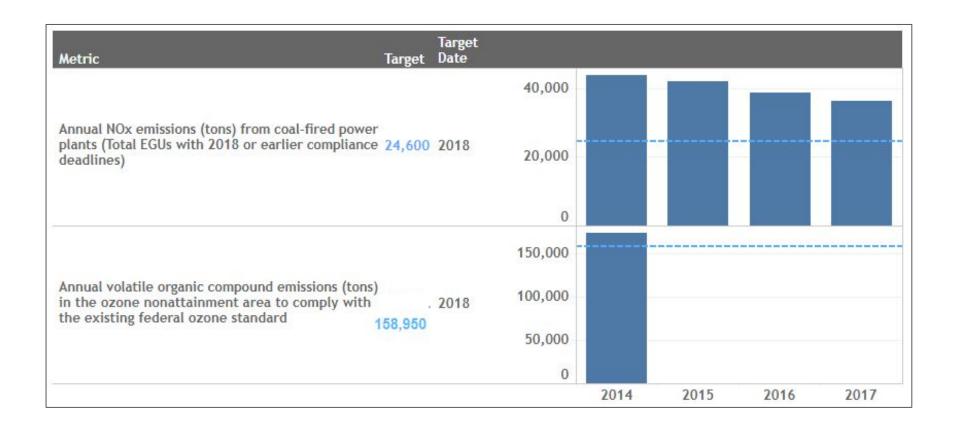
Air Quality: lead measures



Other accomplishments:

Air Quality Control Commission approved Colorado Low Emission Automobile Regulation in November, joining CA & 12 other states & DC in avoiding a rollback of federal vehicle emission standards.

Air Quality: outcome measures





as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

Priority

7. Data collection and dissemination

Strategy	Activity	Oct 2018
7. Modernize data collection and dissemination in order to better serve customers and partners	7.1 Modernize data collection & dissemination for departmental Operations	On Track
	7.2 Modernize data collection & dissemination for the Health Divisions	On Track
	7.3 Modernize data collection & dissemination for the Environmental Divisions	On Track
	7.4 Participate in the statewide resource and referral project in order to improve the coordination and connectivity of the data systems to ensure citizens are able to seamlessly find and access resources across the state	On Track
	7.5 Implement activities of the CDPHE Foundational Technology Framework in order to deliver projects and proactively plan for technology needs across the department	On Track with Challenges



Lead measures

Metric	Target	Target Date	
Number of Environmental Divisions technology projects completed in FY 2019	2	Jun 2019	1 1
Number of Environmental Divisions technology projects completed on budget in FY 2019	2	Jun 2019	1 1
Number of Environmental Divisions technology projects completed on time in FY 2019	2	Jun 2019	1 1
Number of Health Divisions technology projects completed in FY 2019	2	2019	2 2 1 0 0
Number of Health Divisions technology projects completed on budget in FY 2019	2	Jun 2019	2 2 1 0
Number of Health Divisions technology projects completed on time in FY 2019	2	Jun 2019	2 2 1 0
Number of Operations technology projects completed in FY 2019	2	Jun 2019	1 1
Number of Operations technology projects completed on budget in FY 2019	2	Jun 2019	1 1
Number of Operations technology projects completed on time in FY 2019	2	Jun 2019	1 1
			Jul 2018 Aug 2018 Sep 2018 Oct 2018 Nov 201



as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

Priority

8. Quality improvement

25%

75%

Strategy	Activity	Oct 2018
8. Implement quality improvement projects in order to better serve customers and engage partners	8.1 Continue to implement internal Business Process Improvement projects to address staff and customer pain points with current processes	Achieved
	8.2 Continue to implement external Business Process Improvement projects to better meet the needs of our Local Public Health Agency partners and ensure smooth working relationships are developed and maintained	
	8.3 Implement and evaluate the Innovation Mini-Grants that were funded for FY2018-19 to assess outcomes of the projects and also the feasibility of continued department funding of innovation mini-grants	On Track
	8.4 Optimize and automate administrative workflows (such as the Personnel Action Form) in order to save staff time and effort.	On Track

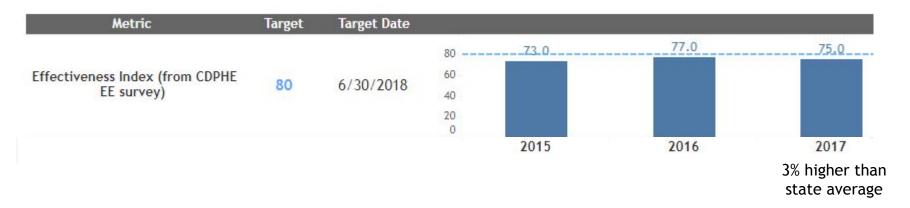


Lead measures

Metric	Target	Target Date	
% of the 53 Local Public Health Agencies that participate in the Business Process Improvement Summit (annual)	50	6/30/2019	30% in July 2018
Number of Business Process Improvement activities completed each quarter	8	6/30/2019	8 6 4 2 0
Number of forms and process automated	6	6/30/2019	6 4 2 0
Percent of Innovation Mini-Grants projects completed for FFY 18-19	100	Null	NOTE- these projects started 10/1/2018
			Jul 2018 Aug 2018 Sep 2018 Oct 2018 Nov 2018



Outcome measures



Effectiveness Index measured by the annual employee engagement survey questions:

- I am held accountable for achieving results.
- In my work group, we have effective processes that enable me to get my job done well.
- In my work group, we have the processes and systems to provide consistent customer or public service.
- My immediate supervisor makes it clear what is expected of me.
- The people I work with cooperate to get the job done.



Outcome measures



Efficiency Index measured by the annual employee engagement survey questions:

- Compared to one year ago, in my work group, we get work done more efficiently, with less waste of money or other resources.
- I feel encouraged to come up with new and better ways of doing things.
- I have sufficient training to do my job well.
- I have the authority I need to do my job effectively.
- In my work group, decisions are made at the appropriate level.
- In my work group, rules and regulations are useful guides for doing the right thing more than they are a barrier to efficiency.



Outcome measures

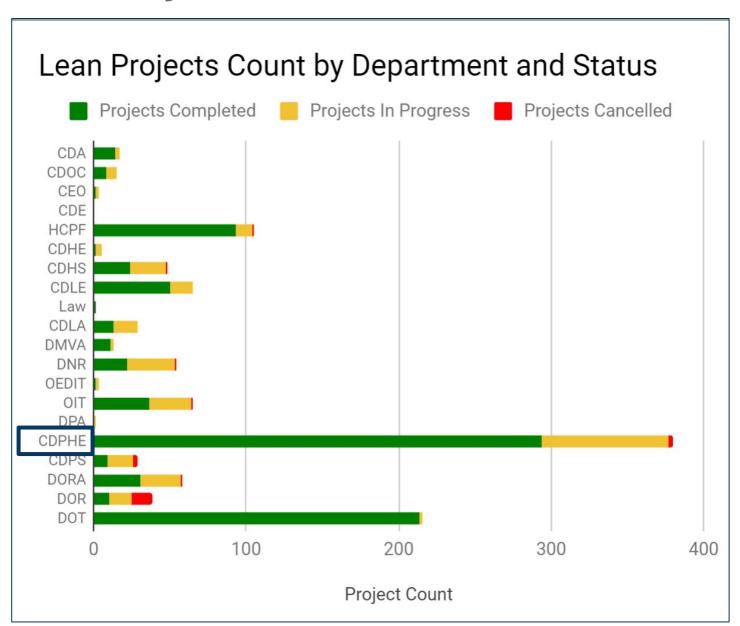


Elegance (customer service) Index measured by the annual employee engagement survey questions:

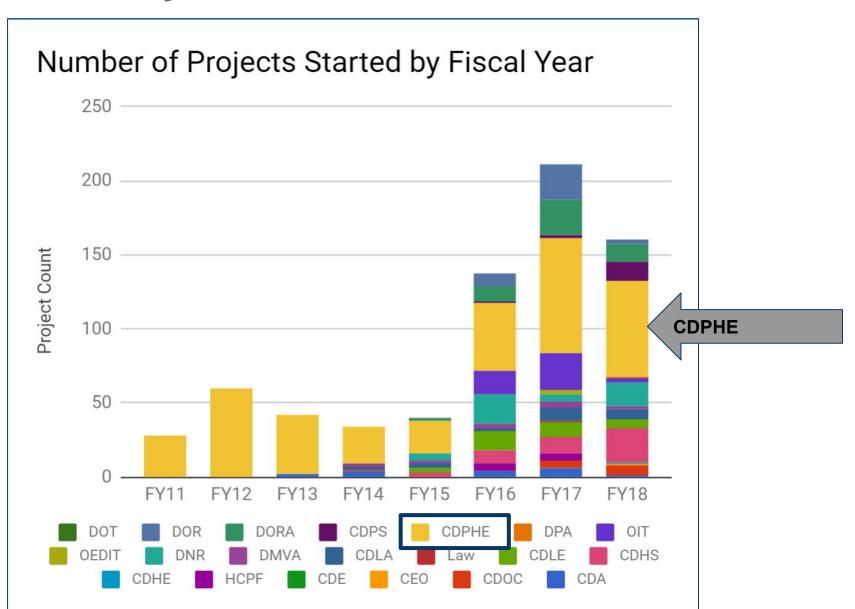
- Customer problems get corrected quickly.
- In my department/campus, we make it easy for citizens to use the services we offer (e.g., customer-friendly policies, procedures).
- In my work group, we are recognized for meeting our responsibilities.
- Our efforts to improve our customers' experience have been working.
- The work we do in my department is respected and valued by the public.
- We use customer feedback to make improvements to our processes.

More on Process Improvement (Lean)

Lean Projects Overview



Lean Projects Overview



Lean Program: Projects



Note regarding the 3 cancelled projects:

one was rolled into a subcommittee's work, one needed to be re-scoped as it was too large, and one was duplicating efforts of a similar project.

Lean Program: In-house Quality Improvement(QI)/Lean and Change Management Training

Training	Number trained (percent of CDPHE trained)	Details
Introduction to Quality Improvement/Lean (1.5 hours)	180 (14% of staff)	Class started in March 2017Optional classOffered every other month
Quality Improvement (QI) Lean Project Leader (2 day)	141 (11% of staff)	 Class started in April 2016 Geared for those interested in facilitating/leading improvement projects Optional class offered 4 times/year 7 (of 11) Divisions have more than 10% of their workforce trained to facilitate improvement projects.
Introduction to Change Management (2.5 hours)	68 (5% of staff)	 Class started March 2018 Optional class offered every other month
Leading Change for Supervisors/Managers (7 hours)	75 (25% of supervisors)	 Class started in September 2018 Required class for supervisors/managers as part of the Supervisory Certificate Program (which was updated in 2018).

Lean Project Results: Fiscal Year End Accruals

Project (Disease Control and Environmental Epidemiology Division)

- Large scale project: 12 staff on project team
- The problem: The Operations Branch in DCEED identified an opportunity to make their accruals process more efficient and accurate. By utilizing historical data, DCEED has also reduced the burden on community partners.
- The results:

Metric	FY 2017 Accruals (Before)	FY 2018 Accruals (After)	Percent Change	Estimated savings
Number of CORE documents	1408	170	88% reduction	\$3,000
Staff time & Admin. burden on partners	73 hours	49 hours	33% reduction	
Stewardship - Accrual accuracy	\$150K Over Accrued	\$108K Under Accrued	60% of appropriations more accurate	

Lean Project Results: Health Facilities and EMS Division - Survey Backbone Lean Project

- Large scale project: 31 staff on project team, impacted 119 staff
- The problem: waste in survey information flow (variation, rework)
- The results:
 - created one standard way to request surveys (had 11 different ways in the beginning)
 - eliminated rework of re-labeling folders (estimated staff time savings of \$10,800/year in this change alone)
 - developed electronic survey tools (across all programs)

Metric	July 2016 (BEFORE)	May 2018 (AFTER)	Percent Change	Estimated savings (staff time savings)
# of survey folder handoffs through the process	13	2	85% fewer handoffs	\$12,420/year
Avg. percent accuracy of survey shell creation	60%	100%	40% improvement	
Avg. percent accuracy of survey folders (all types)	68%	100%	32% improvement	

Lean Project Results: Tank Truck Applications and Response (Air Pollution Control Division)

- Large scale project: 5 staff on project team, 3000+ stakeholders impacted.
- The problem: Numerous errors in data collection, duplication of information collected and stored, time to process certifications, follow-up time to gather correct information. Time to send recertifications.

The results:

Metric	September 2017 (BEFORE)	September 2018 (AFTER)	Change
Error rate on applications	33% of apps had errors	0%	33% reduction
Time to process applications	15 minutes per app	3 minutes per app	5 times faster
Time to receive recertification letter	14-21 days	1 day (or next business day)	95% faster



Goal 3: Improve employee engagement

as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

Priority

9. Employee engagement 20%

Strategy	Activity	Nov 2018
9a. Support career growth	9a.1 Educate staff on department resources for career development and supervisors on their role in promoting career growth with their staff	On Track
	9a.2 Pilot Individual Career Development Plan and develop measures to determine effectiveness	On Track
	9a.3 Review supervisor competency requirements and add a requirement to address supervisor accountability for career development to ensure staff are being supported with career growth	On Track
	9a.4 Create a policy and continue the pilot with two divisions (OEPR & DEHS) regarding Rule 318E (competency based pay increases)	On Track
	9a.5 Create CDPHE's Workforce Development Plan (a Public Health Accreditation Board standard) that will highlight the updated Professional Development Training program and state competencies	On Track



Goal 3: Improve employee engagement

Strategy	Activity	Nov 2018
9b. Collect more meaningful employee engagement data.	9b.1 Create, pilot, evaluate exit survey and stay survey data and implement across the department	Achieved
	9b.2 Initiate a short survey to use with new employees in order to gain better understand what made them accept a position with the department	Achieved
	9b.3 Create metrics that measure change in workforce diversity	On Track
9c. Recognize employees who exemplify CDPHE's mission and vision	9c.1 Conduct the "I am CDPHE" campaign with employees in order to increase recognition for the work and workforce within the department	Achieved
	9c.2 Publicize employee of the month recognition to all campus locations	On Track
	9c.3 Evaluate the use of the Rewards and Recognition intranet site in conjunction with employee council	On Track
	9c.4 Encourage employees to recognize their peers and recognize staff members who are using the recognition system	On Track



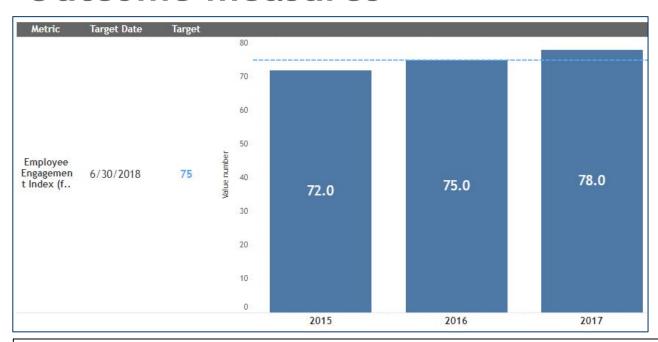
Goal 3: Improve employee engagement

Strategy	Activity	Nov 2018
9d. Engage employees through ongoing planning, promotion and implementation of CDPHE Worksite Wellness.	9d.1 Increase onsite worksite wellness opportunities (e.g., oral health, immunizations, healthy eating and active living, tobacco control and cessation, cancer prevention, mom-buddy program)	On Track
	9d.2 Maintain active and ongoing participation of Wellness Advisory Board	On Track
	9d.3 Implement the Mental Health in the Workplace work plan	On Track



Goal 3: Improve employee engagement

Outcome measures



10% higher than state average

Engagement Index measured by the annual employee engagement survey questions:

- I am proud to say that I am an employee of the State of Colorado.
- I would recommend the State of Colorado as a good place to work.
- My immediate supervisor treats me with respect.
- My work gives me a feeling of personal accomplishment.
- Working for the State of Colorado inspires me to put forth my best effort.
- I am seriously considering leaving the State of Colorado within the next 12 months.



Goal 4: Promote health equity and environmental justice

as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

Priority

10. Health equity and environmental justice

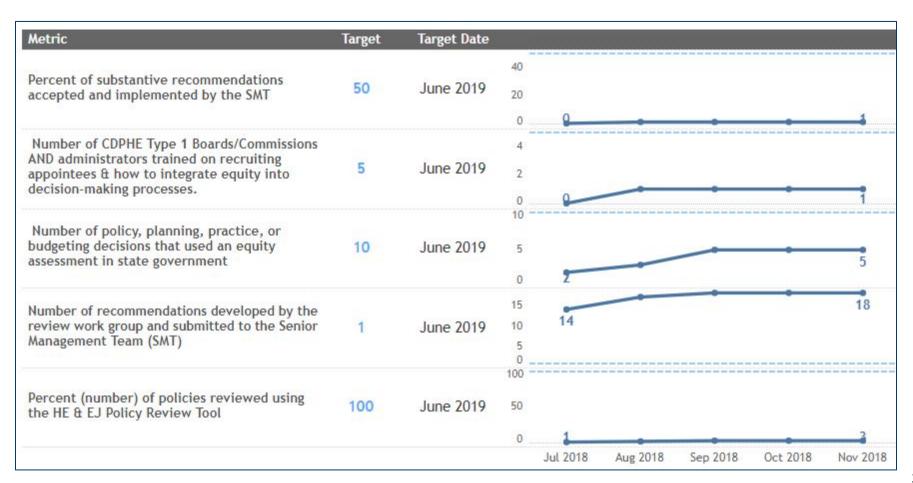
100%

Strategy	Activity	Oct 2018
10. Ensure policies, practices and programs are not inadvertently promoting inequities with customers, partners or beneficiaries.	10.1 Develop an equity checklist for Boards/Commissions to use at the start of rule making processes	On Track
	10.2 Train CDPHE Type 1 Boards/Commissions administrators on recruiting appointees	On Track
	10.3 Train all Type 1 Boards/Commissions to integrate equity into decision-making processes	On Track
	10.4 Each division identifies two policies, practices, rules or programs to undergo an equity assessment	On Track
	10.5 CDPHE's internal policies (including revisions and updates) are evaluated and recommendations provided to the Senior Management Team to ensure health equity and environmental justice principles are upheld	On Track
	10.6 Invest in equity training for department leadership	On Track



Goal 4: Promote health equity and environmental justice

Lead measures





Goal 4: Promote health equity and environmental justice

Outcome measures





Goal 5: Prepare for and respond to all emerging issues

as of October 2018, % of activities: achieved | on track | on track with challenges | off track | no data

Priority

11. Emerging issues

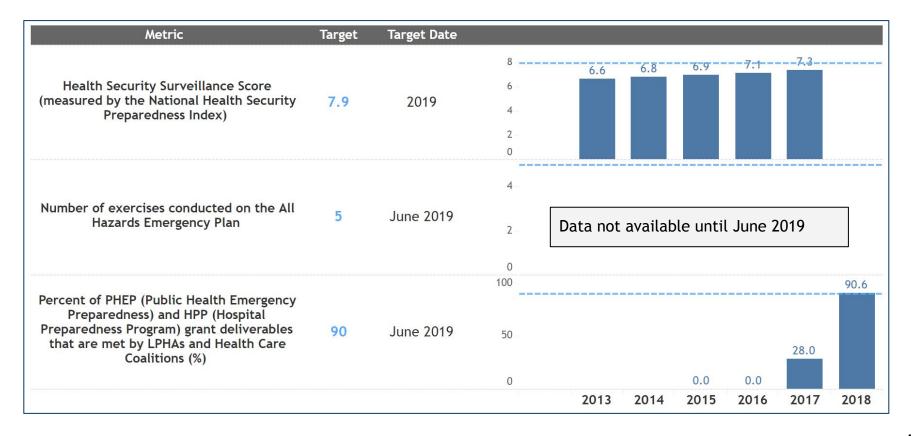
100%

Strategy	Activity	Oct 2018
11a. Assure sustainability of foundational elements, including personnel and infrastructure, to detect, prepare and respond to emerging issues.	11a.1 Develop new data systems and policies to detect and respond to emerging issues	On Track
		On Track
	11a.3 Exercise the department All Hazards Emergency Plan	On Track
	11a.4 Standardize methods and criteria used to identify and characterize an outbreak or epidemic in Colorado based on recognized national or international definitions	On Track
	11a.5 Launch statewide communicable disease outbreak database- merged with 11a.1	On Track
11b. Respond to current emerging issues.	11b.1 Prioritize emerging issues by developing a statewide threat and hazard identification risk assessment	On Track



Goal 5: Prepare for and respond to all emerging issues

Outcome measures



Our Performance Management System

- Department-wide efforts around performance management
 - Every division/office has a dashboard
 - Updating databases and systems to collect meaningful information
 - Visualizing data to more easily see how we are doing
 - Utilize Tableau software as standard reporting tool

- Monthly Performance Reporting Forums (started in 8/2017)
 - Receive updates on Strategic Plan and Division/Office Performance (review data/trends on dashboards)
 - Leadership learns about what's working and not working across the department

Our Customer Service

- Customer Service Policy (in place since 2014)
 - Consider the impact on and perspective of customers with all projects/programs
 - Staff members are empowered to resolve customer complaints
- Staff have the training, tools and skills needed
- Timely response to emails and phone calls ("must-answer lines")
- Collect and analyze customer feedback
 - Over 200 different mechanisms used to gather feedback across the department

Ambitious Customer Service Goal:

Medical Marijuana Registry (MMR)

Results of improvement project (paper \rightarrow online applications):

Days to process MMR applications:

2013-14

<u>2015-16</u> <u>2017-18</u>

30-90

6-30

1(online), 29(paper)

30 TIMES FASTER

Ambitious Customer Service Goal: Medical Marijuana Registry (MMR)

Customer inquiries are responded to within 1-3 days

Touchpoints of the MMR application (between applicant and MMR staff):

2013-14

2015-16

2017-18

37-52

12-23

2-10

Now there are 20 times FEWER touchpoints →

CUSTOMERS & STAFF

Customer Service: Medical Marijuana Registry

- Other customer service improvements:
 - Launch of internal call center
 - Improved email response times
 - Walk-in customer service window
- Website improvements -
 - More user friendly layout
 - Improved customer resources
- System enhancements Jan April 2018
 - Further automation
 - Additional security features
 - Improved end-user experience



2019-2020 budget request Decision Items (1/3)

R1: Family planning services increase

→ \$1.02M GF ongoing to expand existing state investment in proven strategy to reduce unintended pregnancy and abortion. Estimated to serve additional 2,537 clients out of estimated 48,457 women still in need of subsidized contraceptive services statewide

R2: Public health transformation--supporting local communities

⇒ \$208k GF annually on average over 3 years to conduct a statewide survey to assess core
public health services being delivered; identify gaps and determine recommendations for
the most effective and efficient delivery system for the state, including urban, rural and
frontier counties' diverse needs.

R3: Laboratory spending authority

→ \$169K total funds (GF/CF) to cover increasing laboratory costs for critical testing services such as food contaminants, rabies, Zika virus, HIV and others. Funds include instruments, supplies, software, reagents, equipment and proficiency testing.

R4: Local public health electronic medical records

→ \$838k GF one-time for maintenance and support for the newly launched electronic medical records system developed for local public health agencies (LPHA). Costs also include expansion to several new LPHA's across the state to maximize impact and create a long-term sustainability plan for continued maintenance beyond FY 19-20.

48

2019-2020 Decision Items (2/3)

R5: Tableau for data transparency

→ \$85k RF (indirect cost recoveries) ongoing for annual server license fees for Tableau, the department's data visualization software. This tool is used extensively by the department both internally and externally as a tool for transparency and clarity in data analysis.

R6: Equity training

→ \$104k GF in 19-20 and \$109k in 20-21 & 21-22 for a 3-year pilot to build capacity around advancing equity in state programs, policies, budgets and services supported by the Office of Health Equity. This funding would support staff efforts to build capacity to develop curriculum and provide training and coaching around the state at all agencies.

R7: Tribal Liaison

→ \$82k GF ongoing for .5 FTE to act as a liaison to Indian tribes when interfacing with one of 11 CDPHE divisions from emergency preparedness to solid waste management to women and infant health. Building trust, respect, inclusion and increasing communication with the tribes is critical to health outcomes in those communities.

R8: Assisted Living Residence program spending authority

→ \$648k CF to align spending authority levels with fee revenue set by Board of Health and stakeholders to hire additional survey staff to inspect assisted living residences and ensure health and safety of residents.

49

2019-2020 <u>Decision Items (3/3)</u>

R9: 1% provider rate increase

→ \$93k total funds for 1% statewide provider rate increase which includes local public health agencies

R10: Restore pesticides general fund allocation

→ \$84k GF to correct inadvertent decrease in funding in 2017 (technical)

R11: Trauma system

→ Net zero request to ensure maintenance of the state trauma registry system

2019 Legislative Priorities

- 1. Update definition of tobacco products to include nicotine products
- 2. Retail licensure of tobacco/nicotine retailers
- 3. Update Solid Waste Act to ensure health and safety protections are equitable at solid waste sites across the state
- 4. Obsolete statutes cleanup (Statutory Revision Committee)

Suicide Prevention Commission (recommendation highlights)

Zero Suicide within healthcare systems

- -To date, all 17 of Colorado's community mental health centers have been trained in the framework, as well as 11 other health care entities. The Office of Suicide Prevention (OSP) facilitates monthly learning collaborative calls to share best practices and implementation strategies.
- -Three OSP community grantees were awarded five years of funding for *Zero Suicide* through June 2022.
- -The OSP is leveraging federal grant funding to saturate *Zero Suicide* efforts in 5 priority counties.

Empower Primary Care practices in addressing suicide risk through patient care

- -The OSP funded an update of a best practice Suicide Prevention Toolkit for Primary Care Practices.
- -In May 2018, the updated Primary Care Toolkit was featured and distributed in two break-out sessions of a State Innovation Model (SIM) Learning Collaborative conference with 80+ attendees. Training webinars on the toolkit will be held in late 2018. The OSP has distributed over 350 toolkits to practices throughout Colorado to date.
- -The OSP continues to align with the State Innovation Model to support upstream prevention, including a partnership to produce Man Therapy materials for primary care settings. ⁵

Questions?





