

**COLORADO OFFICE OF  
PUBLIC GUARDIANSHIP  
PILOT PROJECT**



**SMART Act  
Performance Plan  
January 2023**

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## EXECUTIVE SUMMARY

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The State of Colorado is experiencing a growing population of indigent and at-risk adults who lack sufficient capacity to make decisions on their own behalf and who lack the assets or family support to secure a guardian. Too many of these extremely vulnerable individuals fail to secure stable housing or appropriate access to routine health care, mental health care, adequate nutrition, and other support services. They are more likely than the general population to find themselves homeless or in other unsafe housing and at greater risk for abuse and neglect. Similarly, they are also more likely to be caught in inappropriate, costly, and overly restrictive settings such as acute care hospitals, long term mental health facilities and law enforcement institutions.

The issue of unrepresented at-risk adults extends across the United States. The population in need is growing; yet no state has found a comprehensive solution to the challenge of providing for the best interests of these vulnerable citizens. In response, the Colorado Office of Public Guardianship Pilot Project (COPG) was established by the Colorado General Assembly to provide guardianship services for these indigent and incapacitated adults in the 2nd Judicial District and, in the process, to conduct a more comprehensive needs and feasibility assessment for a statewide public guardianship program.

As the pilot project reaches our three-year completion, the primary performance goals for 2023 are to continue providing essential services to our vulnerable clients as we complete the critical statutory requirement of presenting the final report to the Colorado General Assembly by January 1, 2023.

This report to the General Assembly provides definitions and key concepts in guardianship; an extensive summary of research on the national level regarding existing public guardianship programs and trends; a comprehensive needs assessment and projection for public guardianship in Colorado; a summary of the operational structure, process, services and findings of the pilot project; a detailed profile of the clients that have been served by the COPG along with both tangible and intangible outcomes; a review of lessons learned; and, detailed recommendations for consideration for future action by the General Assembly during the 2023 legislative session.

The 2023 COPG SMART Act Performance Plan outlines some of the key findings, recommendations and associated legislative agenda from the final report based on the success of the COPG Pilot Project.

The strong conclusion drawn from the COPG pilot project is that establishment of a permanent, statewide Office of Public Guardianship is feasible and justified based on need, cost savings, and potential cost avoidance. The following recommendations are made to the Colorado General Assembly.

**Recommendation #1:** Establish the OPG as an independent agency.

**Recommendation #2:** Expand the governing body to include a more diverse representation of stakeholders and the state.

**Recommendation #3:** Implement a three-year rollout plan for statewide expansion of the COPG.

**Recommendation #4:** Continue to operate via a centralized office with remote staff and satellite offices and infrastructure and ensure adequate human resources, information technology and legal support for operations.

**Recommendation #5:** Provide adequate infrastructure and flexibility to explore grants and innovative community and state agency partnerships and programs.

**Recommendation #6:** Establish COPG accountability and oversight via strong internal and external evaluative systems.

**Recommendation #7:** Complete a comprehensive cost-benefit analysis evaluation of the Colorado Office of Public Guardianship with adequate funding to contract with a third-party evaluator.

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## MISSION AND VALUES

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### MISSION STATEMENT

The Mission of the Colorado OPG (COPG) Pilot Project is to provide public guardianship services for indigent and incapacitated adults, within the targeted judicial districts, when other guardianship possibilities are exhausted. If Colorado adults lack willing and appropriate family or friends, resources to compensate a private guardian, and access to public service organizations that offer guardianship, the COPG Pilot Project provides public guardianship services to secure the health and safety of these individuals while safeguarding their individual rights and preserving their independence wherever possible.

### VALUE STATEMENTS

*Dignity:* At-risk adults are treated with individual dignity and respect.

*Self-determination:* The concerns and decisions of at-risk adults are, to the greatest extent possible, considered with the assistance to regain or develop capacities and participate in supported decision-making and person-centered planning.

*Access and Quality:* At-risk adults should receive timely access to appropriate services, consistent with best practice, to ensure personal safety and well-being.

*Collaboration:* The Colorado OPG Pilot Project actively seeks collaborative relationships with governmental and community stakeholders to maximize resources and support continuous improvement of policies and processes.

*Accountability and Transparency:* Outcomes of the Colorado OPG Pilot Program are defined, documented, and made available to the Colorado General Assembly and the public, as required by statute, accurately and on a timely basis.

### VISION STATEMENT

The Colorado OPG Pilot Project will serve at-risk adults, within the targeted judicial districts, with dignity and collaborate with stakeholders to assist in ensuring individuals receive appropriate public guardianship services. The COPG Pilot Project will educate stakeholders of the value and dignity of at-risk adults to consistently implement least restrictive alternatives and supportive decision-making to ensure the appropriate level of public guardianship is tailored on an individual basis.

## **AGENCY OVERVIEW**

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### **GOVERNING AUTHORITY**

The Colorado Office of Public Guardianship (OPG) is a public agency established by the Colorado General Assembly. The Director and the Governing Body have the decision-making authority to determine agency policy. The Director serves at the pleasure of the Governing Body pursuant to § 13-94-104(3), C.R.S. (2019).

Pursuant to § 13-94-104(1), C.R.S. (2017), the Colorado General Assembly created the Office of Public Guardianship within the Judicial Department.

The COPG is a pilot project initially operating in the Second Judicial District and subsequently the Seventh and Sixteenth Judicial Districts conditional upon securing additional funding effective until June 30, 2024, at which time the agency will either continue, discontinue, or be expanded by the General Assembly pursuant to § 13-94-111, C.R.S. (2019).

### **GOVERNING BODY**

The Colorado Office of Public Guardianship Commission is the Governing Body of the Colorado OPG.

Pursuant to § 13-94-104(1), C.R.S. (2017), the Colorado General Assembly created the Office of Public Guardianship Commission. The Commission is comprised of 5 members. Three of the members are appointed by the Colorado Supreme Court, of which two must be attorneys admitted to practice law in Colorado and one must be a resident of Colorado not admitted to practice law. The remaining two members are appointed by the Governor, one who must be an attorney admitted to practice law in this state and one who must be a resident of Colorado not admitted to practice law.

Pursuant to HB 19-1045, signed into law on May 30, 2019, effective on July 1, 2019, the Commission is charged with appointing the Director for the Office of Public Guardianship. The Director serves at the pleasure of the Commission pursuant to § 13-94-104(3), C.R.S. (2019).

### **ORGANIZATIONAL STRUCTURE**

The Colorado Office of Public Guardianship (OPG) operates at arms-length and functions independently from the Judicial Branch and other entities providing direct services and courts having direct decision-making authority.

The COPG operates separately from the services which many wards will need to access. This separation of powers ensures that guardians are not providing services by contract or directly so that no conflict of interest or potential conflict of interest to the possible detriment to the ward.

**STRUCTURAL OVERVIEW**



## **DUTIES AND SERVICES PROVIDED BY THE COPG PILOT PROJECT**

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The Colorado Office of Public Guardianship (OPG) shall provide guardianship services; gather data to help the general assembly determine the need for, and the feasibility of, a statewide office of public guardianship; and that the office is a pilot program, to be evaluated and then continued, discontinued, or expanded at the discretion of the general assembly in 2023.

### **DESCRIPTION OF GUARDIANSHIP SERVICES**

The COPG provides guardianship services to eligible incapacitated and indigent adults 21 years of age and older, within the targeted judicial district, who lack willing or appropriate family or friends, while implementing the least restrictive alternatives and person-centered planning.

A list of public guardianship services:

- Intake and initial client assessment
- Monthly face to face client visits
- Completing social history survey with clients
- Ongoing client case management
- Filing of Initial and Annual Court Reports
- Person-centered care and planning and development of Individualized Guardianship Plans
- Supported decision-making
- Client advocacy
- Assistance with locating appropriate level of housing/placement
- Assistance with establishing appropriate level of housing/placement for client experiencing homelessness
- Assistance securing needed medical care or equipment
- Assistance securing needed health care
- Assistance securing needed mental health care
- Regular communication with medical and healthcare providers
- Support at criminal court case hearings
- Communication with Prosecutors and Public Defenders
- Provide emotional support to clients
- Assist with de-escalation during a client's mental health crisis
- Assistance with securing and maintaining state and federal benefits
- Assistance with securing and maintaining Waiver benefits
- Assistance with securing and maintaining home and community-based benefits
- Involvement with End of Life Decisions and preparations
- Assistance with establishing or renewing client immigration status
- Working with clients in their native language
- Working with challenging families
- Enhancing client socialization
- Re-establishing client relationships with family and friends
- Establishment and coordination of services
- Re-establishing or enhancing religious affiliation



- Providing a safe space for clients to express themselves
- Serving as a fiduciary to the client
- Ensuring clients are safe from substantiated abusers/exploitation
- Modification of Guardianship
- Termination of Guardianship
- Establishing Successor Guardianship

Upon appointment, guardians complete Individualized Guardianship Plans (IGP) with each client. IGPs are reviewed bi-annually and modified if necessary. If a client’s condition is improving, the guardian can begin to take steps toward obtaining medical opinion to support modification or termination of guardianship.

## **REPORTING REQUIREMENTS § 13-94-105 (4) C.R.S**

1. On or before January 1, 2023, the Director shall submit to the judiciary committees of the senate and house of representatives, or to any successor committees, a report concerning the office.
2. The Report, at a minimum, must:
  - a. Quantify, to the extent possible, Colorado’s unmet need for public guardianship services for indigent and incapacitated adults;
  - b. Quantify, to the extent possible, the average annual cost of providing guardianship services to indigent and incapacitated adults;
  - c. Quantify, to the extent possible, the net cost or benefit, if any, to the state that may result from the provision of guardianship services to each indigent and incapacitated adult in each judicial district of the state;
  - d. Identify any notable efficiencies or obstacles that the office incurred in providing public guardianship services pursuant to statute;
  - e. Assess whether an independent statewide office of public guardianship or a nonprofit agency is preferable and feasible;
  - f. Analyze costs of and off-setting savings to the state from the delivery of public guardianship services;
  - g. Provide uniform and consistent data elements regarding service delivery in aggregate format that does not include any personal identifying information of any adult; and
  - h. Assess funding models and viable funding sources for an independent office of public guardianship or a nonprofit agency, including the possibility of funding with a statewide increase in probate court filing fees.
3. The Director, in consultation with the OPG Commission, shall develop a strategy for the discontinuation of the office in the event that the general assembly declines to continue or expand the office in 2023. The strategy must include consideration of how to meet the guardianship needs of adults who will no longer be able to receive guardianship services from the office. § 13-94-105 (5) C.R.S.

## COPG PERFORMANCE GOALS, OBJECTIVES, AND STRATEGIES

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At the end of 2022, the Colorado Office of Public Guardianship Pilot Project (COPG) received 316 referrals, with 93 of those referrals from outside of Denver County, so not eligible per limitations of the pilot. The Office has served a total of 102 guardianships, with 83 currently active. 19 referrals have been accepted but on hold due to the current caseload capacity. An additional 2 referrals are pending in court proceedings and 20 referrals are partial or incomplete status.

Of the 102 guardianships, 42 clients identified as female and 60 as male. Client ages at the time of appointment ranged from their 20s to their 90s, with a median age range of 60-75. Nearly half (45%) of clients have been over the age of 65. The most common primary diagnoses related to the client's loss of capacity are Alzheimer's disease, dementia disorder, or other neurocognitive disorder (33%), followed closely by mental illness or psychiatric conditions (29%). At the time of referral, 89% of clients had additional medical conditions, with 44% suffering from multiple medical conditions. Due to the medical fragility of so many COPG clients, as of January 2023, twenty guardianships have ended upon death of the client. Additional detailed demographics are included in the full 2023 COPG Final Report to the Legislature.

An unanticipated but notable achievement of the pilot project is the successful partnership with the Office of Behavioral Health (OBH) and Rocky Mountain Human Services to assist with the Colorado Olmstead Initiative. The OBH provided funding in 2021 and then additional funding in 2022 for a second COPG guardian to serve clients discharging from the Colorado Mental Health Institutes (CMHI) of Ft. Logan and Pueblo to the Denver County communities, leading to both less restrictive placements for clients as well as substantial cost savings to the State. This guardian was hired and trained in late 2022 and will be able to accept up to 12 OBH clients beginning in February 2023.

Due to the ongoing success of the COPG and the results of the survey, the JBC approved COPG's FY23 Budget Request for appropriation of its own Cash Fund to expand guardianship services in the 2<sup>nd</sup> Judicial District and enlarging the Pilot Program to the original scope of the Pilot Program to serve the 7<sup>th</sup> and 16<sup>th</sup> Judicial Districts. This allows an increase in client access to appropriate services as well.

The 2<sup>nd</sup> Judicial District guardian and the first Case Aid Manager were hired and trained in late 2022. This guardian will be able to accept clients beginning in February 2023. The Case Aid Manager has begun assisting staff and will begin assisting guardians in their duties beginning in February 2023.

A limitation the COPG faced in 2022 was related to Colorado's labor shortage. Despite the 2022 authorization to establish the pilot in the 7<sup>th</sup> and 16<sup>th</sup> Judicial Districts, efforts to fill those guardian positions were challenging. The 7<sup>th</sup> Judicial District guardian position was filled in late December 2022 while we still seek a qualified guardian for the 16<sup>th</sup> Judicial District position. Therefore, the Office was not able to fully assess best practices for delivery of public guardianship services in Colorado's rural and frontier areas.

Adding three additional guardians to serve the 2<sup>nd</sup>, 7<sup>th</sup>, and 16<sup>th</sup> Judicial Districts, the COPG will increase 2023 potential caseload capacity up to fifty clients.

## **Goal 1: Provide appropriate and quality public guardianship services within the targeted judicial district**

The Colorado OPG Pilot Project is committed to addressing the individual needs of eligible adults. The Colorado OPG Pilot Program will establish best practice standards to ensure it is meeting the needs of eligible adults.

**Objective 1.1:** Establish appropriate eligibility criteria in line with the Colorado OPG Pilot Project statutory mandates.

Strategy 1.1A: Formulate an intake, referral, and acceptance process that allows for confidential information sharing regarding referred individual's indigency, level and type of incapacity, that no other persons are available or appropriate to serve as guardian, and that the referred individual is not subject to a petition filed by a county Adult Protective Services.

Strategy 1.1B: Formulate a case acceptance policy in consideration of guardians' experience, training and complexity of referred case.

Strategy 1.1D: Formulate a Colorado OPG Pilot Project intake and referral narrative to educate clients, the public, providers, and stakeholders.

**Objective 1.2:** Alternatives to guardianship.

Strategy 1.2A: Formulate an intake and referral process that allows for the consideration of least restrictive alternatives to ensure that the Colorado OPG Pilot Project is serving eligible adults.

Strategy 1.2B: Formulate a Colorado OPG Pilot Project alternatives to guardianship narrative to educate clients, the public, providers, and stakeholders.

Strategy 1.2C: Promote alternatives to guardianships education, training and clinics to educate clients, the public, providers, and stakeholders.

**Objective 1.3:** Establish ethics and best practices standards for guardians and staff.

Strategy 1.3A: Establish and document minimum and preferred qualifications of guardians and staff and hire qualified guardians and staff.

Strategy 1.3B: Establish best practices standards, including a conflict-of-interest policy, in line with the National Guardianship Association standards.

Strategy 1.3C: Provide initial and ongoing training of standards to guardians and staff.

Strategy 1.3D: Formulate a Colorado OPG Pilot Project best practices and standards of practice narrative to educate clients, the public, providers, and stakeholders.

**Objective 1.4:** Assess the needs of the clients.

Strategy 1.4A: Obtain thorough court visitor investigator reports.

Strategy 1.4B: Obtain thorough clinical evaluations.

Strategy 1.4C: Identify appropriate assessments and train guardians to perform assessments.

Strategy 1.4D: Promote effective communication between guardians and clients.

Strategy 1.4E: Promote effective communication between guardians and service providers.

Strategy 1.4F: Formulate individualized client case plans.

Strategy 1.4G: Formulate a Colorado OPG Pilot Project narrative regarding the necessity of thorough reports and evaluations to assess client eligibility and ongoing and appropriate client needs to educate clients, the public, providers, and stakeholders.

Strategy 1.4H: Communicate the necessity for thorough reports and evaluations to clients, the public, providers, and stakeholders.

Strategy 1.4I: Promote quality education and training for court visitor investigators and clinicians.

**Objective 1.5:** Increase client access to appropriate services.

Strategy 1.5A: Formulate a Colorado OPG Pilot Project narrative regarding the need for appropriate services, including, but not limited to: housing, mental health services, medical services, and appropriate direct-care providers.

Strategy 1.5B: Identify, establish, and maintain relationships with direct-care providers and various stakeholders to collaborate on increasing client access to appropriate services.

Strategy 1.5C: Identify, establish, and maintain relationships with local, state, and federal governmental agencies to collaborate on increasing client access to appropriate services.

## Goal 1 Process and Metrics

### **Provide appropriate and quality public guardianship services within the targeted judicial district**

**Objective 1.1 - ONGOING:** Establish appropriate eligibility criteria in line with the Colorado OPG Pilot Project statutory mandates.

The Case Management System houses referral eligibility and additional data. An intake case acceptance process and criteria are established and maintained in accordance with the Colorado Public Guardianship Act, national best practices and Colorado OPG policies and procedures. Consideration of guardian experience and ability to provide quality services occurs with every referral and assignment. The Director and Staff Assistant review each referral for eligibility criteria. The Director and Staff Assistant will audit CMS and client files annually for quality assurance.

A streamlined referral option is available to gather data related to the need for public guardianship services outside of the targeted Judicial District.

An intake and referral narrative are available on the Colorado OPG website to educate clients, the public, providers, and stakeholders. The Director provides ongoing intake and referral narrative presentations to

various stakeholders across the state. The Director reports intake and referral data to the Colorado OPG Commission monthly. Director reports are available to the public on the Colorado OPG website.

The COPG requires referring parties to seek its approval for nomination as guardian prior to filing a petition. This allows the COPG to ensure that the client and the COPG meet the statutory criteria and eligibility mandates.

The COPG online referral system is incorporated into the Case Management System (CMS) and the website to allow for a seamless and confidential process. To assist with data gathering, a shorter streamlined referral process for non-Denver counties was also created.

Referring parties register for a secure account which allows them to create an unlimited number of referral applications, upload documents, update applications and apply. The CMS is designed to send automated email responses to keep referring parties updated when certain actions occur with the applications. The COPG website “Referral Process” and Referral Checklist” lists out the information the COPG collects during the referral process.

The Staff Assistant reviews applications for completeness and follows up with the referring party for the required information. Once complete the Director reviews for eligibility criteria:

1. An adult aged 21 and over.
2. Indigent, lack resources to compensate a private guardian and pay the costs and fees associated with an appointment proceeding.
  - Incapacitated.
  - No responsible family members or friends who are available and appropriate to serve as a guardian; and
  - Not subject to a petition for appointment of guardian filed by a county adult protective services unit or otherwise authorized by law.

**Referral Sources:**

Denver Health Hospital	Private Attorneys	Rose Medical Center
CMHI – Ft. Logan	Department of Corrections	St. Joseph Medical Center
CMHI – Pueblo	Private Guardians	Porter Hospital
Colorado Fund for People with Disabilities	Boulder County Attorney’s Office	Denver Forensic Collaborative
UC Health Hospital	Veteran’s Administration Guardianship Program	Various nursing homes facilities
Swedish Hospital	El Paso County APS	Nebraska Office of Public Guardian
Denver County Adult Protective Services (APS)	Colorado Cross-Disability Coalition	Alaska Office of Public Advocacy (Attorney for Public Guardian)
Rocky Mountain Human Services Momentum Program	Mental Health Center of Denver/WellPower	Innovage
Kindred Hospital System	Denver Health ACS Care Management	St. Mary’s Hospital, Grand Junction
Lutheran Family Services - LifeWork Aging Solutions	SkyRidge Medical Center	Mesa County Department of Human Services

Pueblo County APS	WellPower	Developmental Disabilities Resource Center
Developmental Pathways	Family members	Vivage
Weld County APS	-	-

Referrals are reviewed and accepted on a first-come, first-served basis. Prioritization was developed with the COPG Commission for Emergency Guardianship situations. In December 2021, a “Hold Status” was established as the Office reached caseload capacity to ensure the COPG could provide services should capacity open in the future and for data collection purposes.

A case assignment and weighting policy and procedure is established as per National Guardianship Association standards to assure that employees are able to effectively manage their cases and provide appropriate support for the individuals on their caseload. Appropriate case weighting provides enough support to assure that the individual under guardianship is regularly visited and has access to the most effective support and advocacy when it is needed. For the guardian-designees to have the information to make decisions in line with the client’s wishes, including complex informed medical decisions, they must have time available to spend with their clients to cultivate trusting relationships.

Guardians require vast knowledge and expertise of various services systems. Guardians serve and interact with clients with complex needs. Therefore, guardian-designees must know how to successfully communicate with individuals with various disabilities, cultures, and socio-economic backgrounds. Guardians then need to maneuver through intricate services systems: Medicaid, Waivers, Social Security, Behavioral Health systems, Mental Health systems, etc.

Guardians must also be trained in observing a client’s health and hygiene and signs of caretaker neglect or mistreatment. One of the most important aspects of a guardian-designees’ role is medical decision making. A guardian must be knowledgeable in the standards of medical decision making and medical procedures, standards, best practices, and ethics. It is imperative that guardians have ample opportunities to build trusting relationships with their clients to identify their wishes and desires for medical decision-making purposes.

The COPG Case Assignment and Weighting Procedure bears in mind that when considering the amount of work and involvement in the life of a person under guardianship differs depending on the type of service provided and the personal goals, needs and preferences of the individual. The weighting of cases is flexible and structured to allow for fairness of caseloads and for data-gathering purposes. A head count of case files is not usually a good indication of the actual work involved.

Many factors are considered, and all affect the difficulty of the caseload:

- Geography and amount of travel involved
- Language barriers and need for interpreter services
- Type of incapacity
- Placement type
- Multiple and complex medical conditions
- Money management services and/or oversight when client funds are discovered
- Number of professionals involved with the client’s care team
- Risk and safety level of the client

The COPG Case Assignment and Weighting Procedure allows for ongoing assessment. If a guardian-designee has a caseload with several heightened cases, these cases will be given greater “weight” which may impact the current capacity for the guardian to accept more cases at a certain time. If there is a mix of cases, the “weight” of the incoming case will be considered to determine if there is current capacity. If there are mostly cases where there are little to no imminent safety concerns, it is likely the pending cases will be accepted.

### ***Referrals to the COPG at the end of 2022***

316: total number of referrals made to the COPG office including one referral from Nebraska.

83 active guardianships.

2: number of accepted clients that were pending court proceedings.

20: number of referrals in Partial Status. Partial Status: referrals that are incomplete so the COPG cannot determine if the client meets statutory eligibility criteria.

19: total number of accepted clients on Hold Status. Hold Status: status for referrals that have met statutory eligibility criteria and accepted by the COPG but cannot be served due to lack of caseload capacity. Hold Status includes OBH/CHMI-Ft. Logan/Pueblo referrals that are non-OBH/Momentum contract referrals.

### ***Inquiries***

The COPG Office and Director fields informal inquiries regarding potential referrals on a regular basis. Twenty-three inquiries have been received, including one from Texas and two from Alaska.

### ***OBH/Momentum Clients***

12 active guardianships (out of 12 maximum)

0: number of accepted clients that were pending court proceedings

3: Referrals for the new OBH guardian

### ***Declined Referrals***

Denver County (2<sup>nd</sup> Judicial District) referrals are declined for not meeting the statutory-based eligibility criteria. Once the COPG determines that a referral does not meet eligibility, we request that the referring party withdraw the referral. If not withdrawn, the referral will be declined.

A total of 123 referrals from all sources were declined.

A total of 61 Denver County referrals have been declined or withdrawn.

- 6 referrals were declined due to family being able to serve as guardian.
- 1 referral was declined due the alleged incapacitated person being a minor.

- 6 referrals were declined due to being an inappropriate referral and not meeting any of the statutory criteria.
- 4 referrals were declined due to COPG not having caseload capacity. This was early in 2021 before the Hold Status was in place.
- 24 referrals were declined due to being expired and/or incomplete after 90 days and several attempts by the COPG Office for additional information.

### ***Withdrawn Referrals***

Referrals may be withdrawn by the referring party for various reasons, such as the alleged incapacitated person regained capacity prior to the hearing upon the guardianship petition. There were five times that COPG requested further information and investigation that led to the referring party locating family or friends to serve as guardian. A total of twenty-two referrals were withdrawn by referring parties.

- 5 referrals were withdrawn due to family or friends willing, able and available to serve as guardian.
- 2 referrals were withdrawn due to the alleged incapacitated person living outside of Denver County.
- 7 referrals were withdrawn due to not meeting statutory eligibility criteria.
- 3 referrals were withdrawn due to being expired/incomplete.
- 2 referral was withdrawn due to the alleged incapacitated person passing away prior to the hearing upon the guardianship petition.
- 2 referrals were withdrawn due to the alleged incapacitated person regaining capacity.
- 1 referral was withdrawn due to COPG not having caseload capacity.

While the streamlined Non-Denver County referral option was available, it was difficult to inform all potential statewide referring parties of this available system. The goal of the streamlined referral system was to help inform the COPG of the counties most in need of public guardianship services to guide expansion. El Paso County (4<sup>th</sup> Judicial District) submitted the most referrals outside of Denver County.

93: total number of declined streamlined Non-Denver County Referrals

1. Adams County – 6
2. Alamosa County - 1
3. Arapahoe County – 15
4. Boulder County – 5
5. Broomfield County – 1
6. Crowley - 2
7. El Paso County – 18
8. Garfield County – 1
9. Gunnison County – 1
10. Huerfano County - 3
11. Jefferson County – 9
12. Lake County – 1
13. La Plata County – 2



- 14. Larimer County – 4
- 15. Las Animas County - 2
- 16. Mesa County – 1
- 17. Montrose County – 2
- 18. Otero County – 6
- 19. Pueblo County – 6
- 20. Weld County – 7

***Demographics of the COPG Populations Related to Current Trends***

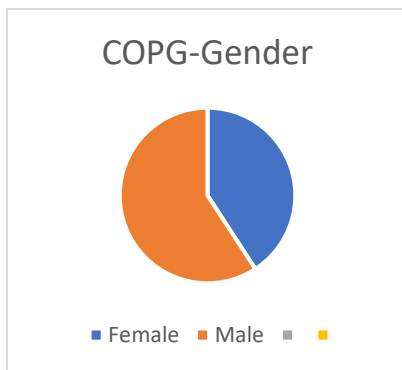
The 2023 COPG Final Report identified general trends and factors impacting the needs for public guardianship. The population of clients served by the COPG were highly consistent with most of the trends and the impacts of the aging population, mental illness and substance abuse, challenges of the IDD population and their caregivers, veterans and military-related service disabilities and the consequences of advances in medical treatment are all evident in the OPG population. Of the 102 clients the COPG has served:

- All but two were unlimited guardianships and two were emergency guardianships.
- 6% (6 clients) of COPG clients are military veterans. According to US Census Tracker 2021 data, Colorado’s Veterans population rate of 7.7% is twenty percent higher than the rate in the United States.<sup>i</sup>

***COPG Distribution of Gender Identities***

Figure 1. COPG Distribution of Gender Identities

While the COPG is inclusive and the CMS allows clients to self-identify as non-binary, transgender, and intersex, all clients identified themselves as male or female.



Female (42)	41%
Male (60)	59%

***COPG Distribution of Race and Ethnicity***

Figure 2. COPG Distribution of Race and Ethnicity

The COPG distribution of race and ethnicity seems to mirror the 2020 Colorado census data, except that the COPG served a higher population of clients that identify as Black alone and served a lower population of Hispanics.

White alone (59) 58%

Black alone (19) 19%

Hispanic (12) 12%

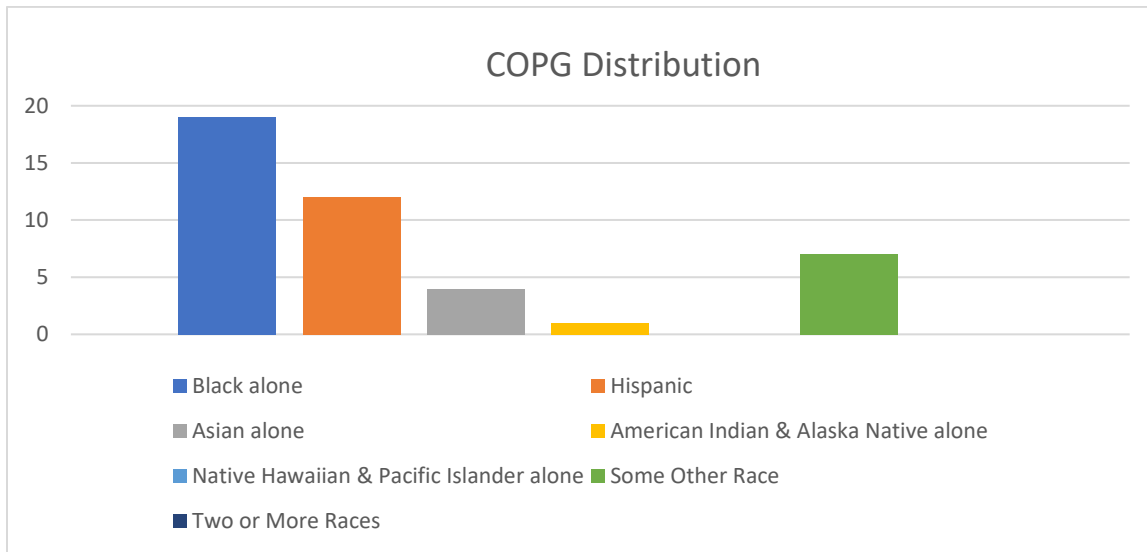
Asian alone (4) 4%

American Indian and Alaska Native alone (1) 1%

Native Hawaiian and Pacific Islander alone 0

Some Other Race (7) 7%

Two or More Races 0



2020 Colorado Census data:

White alone 61.6%

Black alone 12.4%

Hispanic 18.7%

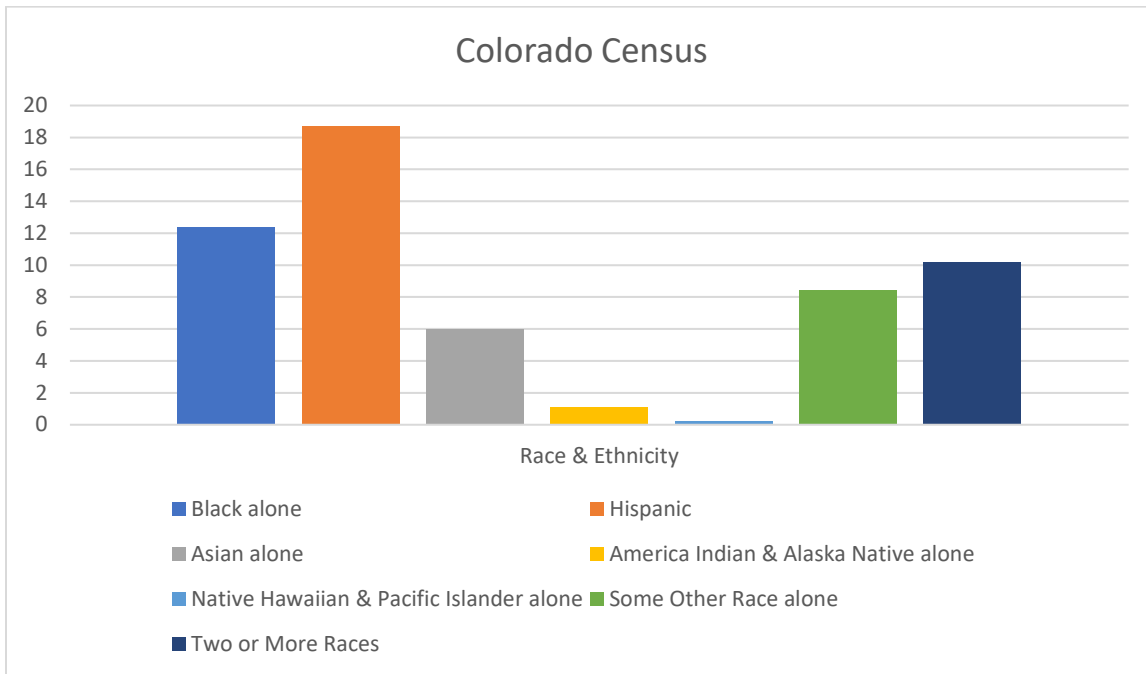
Asian alone 6%

America Indian and Alaska Native alone 1.1%

Native Hawaiian and Pacific Islander alone 0.2%

Some Other Race alone 8.4%

Two or More Races 10.2%



***COPG Client Age Distribution***

Figure 3. COPG Client Age Distribution

The majority of clients (37) served by COPG fall in the age range of 60 – 75.

45% (46) clients are over the age of 65.

21 – 30: Total 7

31 – 48: Total 13

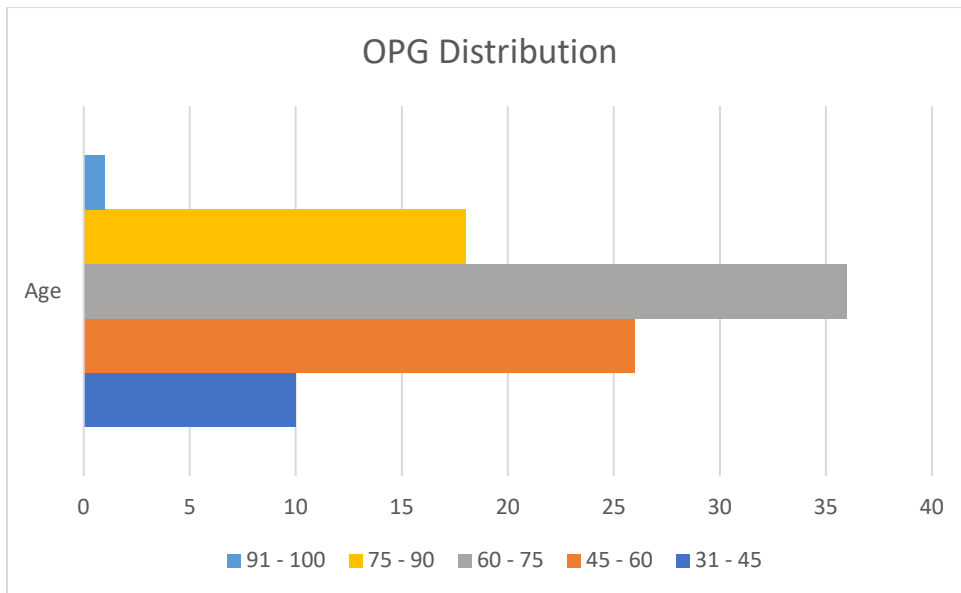
45 – 60: Total 26

60 – 76: Total 37

75 – 90: Total 18

91 – 100: Total 1

Total: 102



### ***Complex Medical Conditions of COPG Clients***

COPG clients suffer from longstanding, complex and often untreated medical conditions. 89% of COPG clients had medical conditions at the time of referral with 44% suffering from multiple medical conditions.

36% (37 clients) with significant co-morbid medical conditions such as hypertension, hyperlipidemia, thyroid disorders, vitamin deficiency, chronic obstructive pulmonary disorder (COPD), and gastro-esophageal reflux disorder (GERD).

### ***Incapacities of COPG Clients***

Figure 4. Incapacities of COPG Clients

33% (32 clients) with Alzheimer’s disease, dementia disorder, or other neurocognitive disorder.

29% (30 clients) with a mental illness or psychiatric condition as a primary diagnosis. The primary diagnosis has been deemed by a medical professional as the primary responsibility for the client’s incapacity.

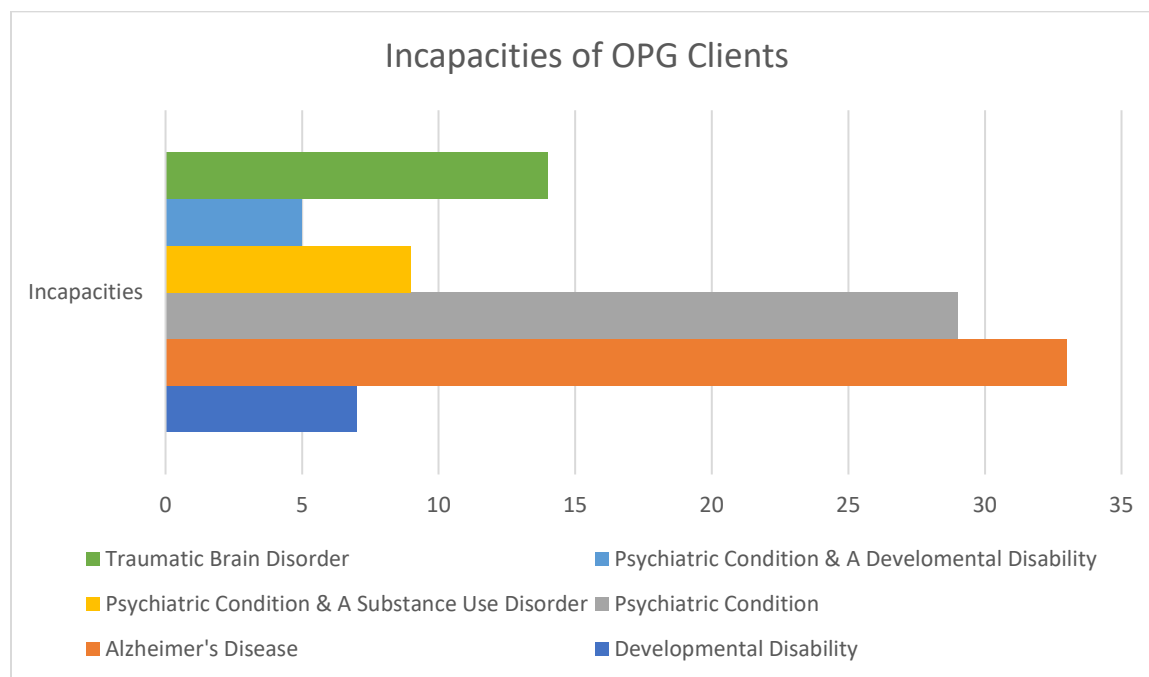
8% (9 clients) with a mental illness or psychiatric condition with a diagnosed substance use disorder.

7% (7 clients) with an I/DD diagnosis.

5% (5 clients) with an intellectual or developmental disability (I/DD) and a mental illness/psychiatric condition.

14% (14 clients) with traumatic brain disorder (TB).

5% (5 clients) with a history of strokes.



### ***Activities of Daily Living Needs of COPG Clients***

Seventy-three COPG clients need assistance with at least one activity of daily living (ADL) and 67 clients need assistance with two or more ADLs. Activities of daily living are used to describe the fundamental skills required to independently care for oneself. The major domains of ADLs are feeding, dressing, bathing, and walking. Measurement of an individual's ADL is important as these are predictors of admission to nursing homes, need for alternative living arrangements, hospitalization, and use of paid home care.<sup>ii</sup>

Below are the top six ranking of the ADLs that require the most assistance. Some clients may require assistance with multiple ADLs:

1. ADL Grooming 89%
2. ADL Eating/Drinking 75%
3. ADL Bathing 75%
4. ADL Dressing/Undressing 74%
5. ADL Transfer 70%
6. ADL Toileting 70%

### ***Instrumental Activities of Daily Living Needs of COPG Clients***

Ninety-three COPG clients need assistance with at least one Instrumental activities of daily living (iADLs) and 87 clients need assistance with two or more iADLs. Instrumental activities of daily living are activities that allow an individual to live independently in a community. The major domains of IADLs include cooking, cleaning, transportation, laundry, and managing finances. Occupational therapists commonly assess IADLs in the setting of rehab to determine the level of an individual's need for assistance and cognitive function.<sup>iii</sup>

Below are the top six ranking of the iADLs that require the most assistance. Some clients may require assistance with multiple iADLs:

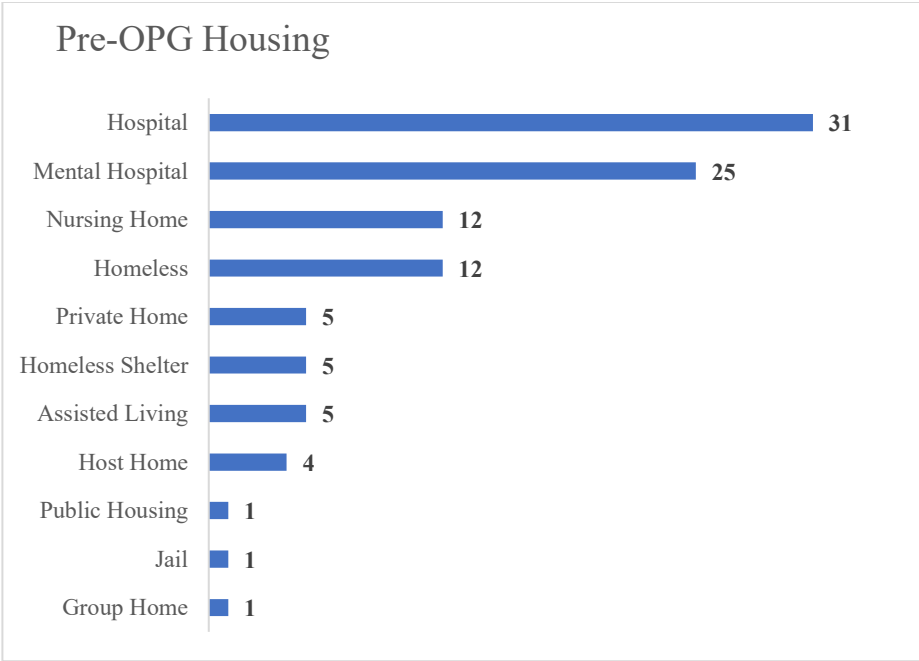
1. iADL Taking Medication 84%
2. iADL Preparing Meals 84%
3. iADL Shopping 83%
4. iADL Housecleaning and Laundry 82%
5. iADL Transportation 80%
6. iADL Communication 71%

### ***Housing/Placement of COPG Referrals and Clients***

Figure 5. Housing/Placement of COPG Referrals and Clients

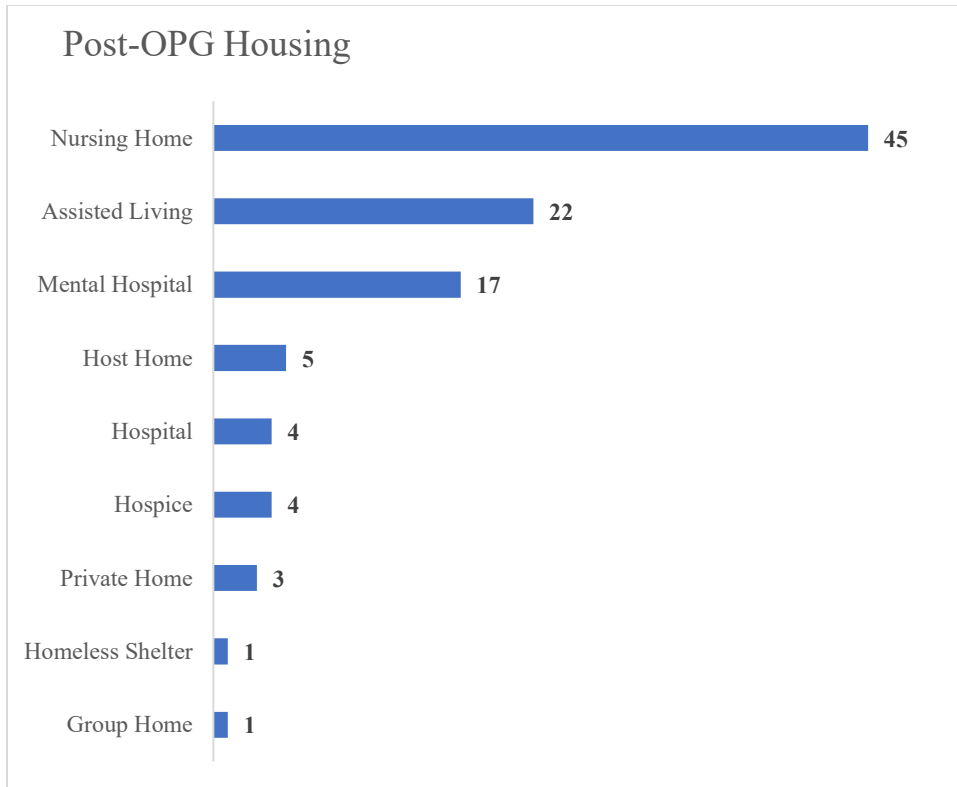
Potential clients (31) at the time of referrals were mostly placed at hospitals with the next population placed at the Colorado Mental Health Institutes (25).

Once appointed, COPG establishing appropriate housing/placement is a primary goal. COPG clients placed in the hospital was reduced to five and COPG was able to place 9 CMHI clients in less restrictive placements in the community.



Hospital	31
Mental Hospital	25
Homeless	12
Nursing Home	12
Assisted Living	5
Homeless Shelter	5
Private Home	5
Host Home	4
Group Home	1
Jail	1
Public Housing	1
Hospital	31
<b>Total</b>	<b>102*</b>

*\*Four clients included in these tabulations were recently appointed resided in CMHI.*



#### **Housing After OPG**

Nursing Home	45
Assisted Living	22
Mental Hospital	17
Host Home	5
Hospice	4
Hospital	4
Private Home	3
Group Home	1
Homeless Shelter	1
Nursing Home	45
Assisted Living	22
<b>Total</b>	<b>102*</b>

*\*Four clients included in these tabulations were recently appointed resided in CMHI.*

Additional Demographic Information (Marital Status, Education Attainment, Income Types, Annual Income) is available in Appendix X. COPG Client Demographic Information



### ***Mortality in the OPG Client Population***

Over the course of the pilot project, from April 2020 to November 2022, the COGP experienced the deaths of twenty (20) clients. Of these clients eleven (11) were male and nine (9) were female. The median age at death was 69, the average age was 70 and the ages ranged from 47 to 93.

According to the CDC, the top five causes of death among people 65 and older are heart disease, cancer, COVID-19, stroke, and dementia. Deaths among COPG clients are consistent with these national statistics. Per death certificates, the most common causes of death were cardiac and/or respiratory disease (6), end stage dementias and chronic brain disorders (5) and cancer (2), with multiple co-morbid conditions being present in the majority of clients. It is notable that the COPG did not experience any deaths directly attributable to COVID-19.

In 2018, 51.8% (129 million) of civilian, noninstitutionalized adults had been diagnosed with at least one of ten chronic medical conditions. Among people 65 and older, the incidence of one or more chronic conditions rises to 87.6%. At highest risk were persons with no insurance, on public insurance or living in rural areas. The conditions studied included arthritis, cancer, chronic obstructive pulmonary disease, coronary heart disease, asthma, diabetes, hepatitis, hypertension, stroke, and weak/failing kidneys (Boersma, et al, 2018). It should be noted that dementias and mental illnesses were not considered in this particular study despite being among the top ten chronic diseases in the 65+ population. All of these conditions are associated with higher rates of death.

Also consistent with this national data, 80% of OPG clients had medical conditions at the time of referral, with 50% suffering from multiple medical conditions. Most of those medical conditions were chronic. A majority of clients experience chronic medical conditions in combination with behavioral or mental health diagnoses, resulting in high medical complexity. Examples of co-morbid conditions among individual deaths included dementia and other chronic cerebrovascular disease, congestive heart failure, diabetes, traumatic brain injury, hypertension and chronic alcohol abuse.<sup>iv</sup>

*Look I mean the reason that the OPG is necessary for these difficult populations is because it's not mental health or Dementia or Huntington's or DD. It's a combination, it's always a comorbidity and there's almost always some type of physical illness or physical issue on top of that. Either through extreme exposure due to homelessness or to drug use or alcohol or just a mismanagement of their needs. So they just didn't know how to do that and the system is so bifurcated there's no way that these people can get help if they wanted to get help without someone helping them, and they don't often have the capacity to either ask for it or to understand it's helpful. So they'll reject a lot, and so a guardian is absolutely necessary to lace the system together and to make sure that we're looking at both sides of the equation and not just mental health or just old age.*

--Interview Participant, Attorney in Denver County

**Objective 1.2 - ONGOING:** Alternatives to guardianship.

The Director and Staff Assistant complete a full review of referrals, which includes ensuring that the referral meets all statutory requirements and the necessity of guardianship. Review includes a showing that least restrictive alternatives (alternatives to guardianship) have been attempted and been ineffective. The Director and Staff Assistant will audit CMS and client files annually for quality assurance.

A Guardianship and Alternatives to Guardianship narrative is available on the Colorado OPG website to educate clients, the public, providers, and stakeholders. The Director provides ongoing Guardianship and Alternatives to Guardianship narrative presentations to various stakeholders across the state. Once the Office is permanent, the Director will add surveys or evaluations for attendees to provide feedback and evaluate the effectiveness of the narrative. The Director will report attendee feedback data to the Colorado OPG Commission as requested through Goal 3.

The COPG policies and procedures include using least restrictive means and person-centered planning disciplines such as Supported Decision Making as discussed in Objective 1.4.

**Objective 1.3 - ONGOING:** Establish ethics and best practices standards for COPG guardians and staff.

The Colorado OPG procedures and policies include ethics, conflict of interest, and best practices for guardians and staff in accordance with the Colorado Public Guardianship Act, national best practices, COPG policies and procedures, state and federal law, and Judicial Department as required by statute.

Minimum and preferred qualifications were established to hire COPG staff. All Colorado OPG policies and procedures are available on the COPG website to educate clients, the public, providers, and stakeholders.

The COPG Director with CDHS to include the COPG as an approved employer to the Colorado Adult Protective Services check statute. Prior to employment with the COPG, guardians and staff that work with clients must pass a CAPs check.

Colorado OPG policies and procedures adopt and incorporate national agency standards, best practices, state and federal law, and ethics and principles of the National Guardianship Association.

Colorado OPG will seek client input through an internal evaluation, as well as seek external input from other stakeholders such as funding and referring agencies, courts, the Colorado OPG Commission, and/or family members.

The Director, Deputy Director and Staff Assistant regularly request internal feedback from staff and will hold annual meetings and trainings for program evaluation and staff feedback.

Staff completes continuous trainings related to State mandated trainings, available services, compassion fatigue, communicating and interacting with clients, cultural competency, fiduciary best practices, National Guardianship Association annual conference, and training for Certified Guardianship Certification National Certified Guardian.

**Total number of trainings attended by Staff.**

2022	In-house/New employee trainings/NGA Annual Conference; 23
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Colorado OPG policy states that the Director, Deputy Director and guardians will be Certified Guardianship Certification National Certified Guardians within two years of employment. COPG policy states that the Director and Deputy Director will be Certified Guardianship Certification National Master Guardians within five years of employment. There are specific requirements to be eligible to test for CGC certification. There are specific annual requirements to maintain CGC certification.

No. Staff Required to be CGC Certified on 2022	No. of Staff CGC National Certified in 2022
5	4

The Director conducts annual staff performance reviews. The Director reports data related to Objective 1.3 to the Colorado OPG Commission monthly and as requested through the Annual Director Staff Performance Review. Director reports are available to the public on the Colorado OPG website.

**Objective 1.4 - ONGOING:** Assess the needs of the clients.

As part of the referral process, the Colorado OPG requests, receives, and reviews medical documentation, clinical evaluations, and assessments. During the court appointment process, the COPG receives, and reviews Court Visitor Reports and additional medical documentation provided by the parties. The designated guardian meets with the alleged incapacitated person prior to the hearing on appointment.

COPG policy and procedure require monthly face to face client visits and detail guardian assessments of the client, including, but not limited, hygiene, signs for abuse/neglect/exploitation/mistreatment, ADLs, iADLs, behaviors, medical care and treatment, placement, capacity, and safety. When necessary, guardians will seek an ethics consultation. Guardians complete CDHS mandatory reporting training of adult mistreatment.

Guardians are trained to evaluate all information received and evaluate the client’s need for updated clinical evaluations and assessments. Colorado OPG policies and procedures include detailed outlines of how to gather information and assess client needs on an initial and ongoing basis. Colorado OPG policies and procedures include using least restrictive means and person-centered planning disciplines. While an individual may be under guardianship, this does not necessarily mean that an individual has no ability to make decisions. Colorado law requires a guardian to delegate certain responsibilities of decisions to the ward. The COPG supports and implements alternatives to guardianship, such as Supported Decision Making, when appropriate.

Guardians create and maintain Individualized Guardianship Plans (IGP) as per best practice. IGP are updated monthly and reviewed every six-months by the Director, Deputy Director and guardians. IGPs address all client services and goals and are created with the input of the client and service providers.

COPG policy and procedure require assessment for client change in capacity, meaning if the client seems to regain capacity, the policy requires that the guardian seek an assessment or evaluation from a medical professional to help determine if a modification or termination of guardianship is appropriate.

Guardians file Initial and Annual Court Reports to the Probate or District Court as required by law. These reports coincide with the IGP and assess the client’s needs, care plan, residence, and visitation by the guardian. Colorado OPG policies and procedures include detailed outlines of how to gather information and assess client needs for the Reports. The Director reviews the Reports before filing with the court. The Deputy Director and Staff Assistant will audit CMS and client files annually for quality assurance.

The Director, Deputy Director and Staff Assistant will audit CMS and client files annually for quality assurance. The Director reports data related to Objective 1.4 to the Colorado OPG Commission monthly and as requested through the Annual Director Staff Performance Review.

As part of the 2023 COPG Final Report the Office contracted with a third party to conduct a qualitative study of COPG guardians, clients, client family/friends and providers. Highlights of the qualitative study are included in Goal 3. Full results are included in the 2023 COPG Final Report to the Legislature. Once the Office becomes permanent, the Colorado OPG Board will partner with a disability group to create a person-centered survey to seek ongoing evaluation of the COPG services.

The COPG supports and promotes thorough and quality education and training for court visitor investigators.

The Director communicates the necessity for thorough clinical reports and evaluations through presentations to clients, the public, providers, and stakeholders. The Director is a member of the Denver Forensic Collaborative and Colorado Guardianship Association and is assisting with the Department of Corrections Guardianship Committee. Through these organizations and committee we discuss the lack of standardized clinical capacity evaluations and evaluations, especially for clients that are indigent.

**Objective 1.5 - ONGOING:** Increase client access to appropriate services.

Strategy 1.5A: Formulate a Colorado OPG Pilot Project narrative regarding the need for appropriate services, including, but not limited to: housing, mental health services, medical services, and appropriate direct-care providers.

Strategy 1.5B: Identify, establish, and maintain relationships with direct-care providers and various stakeholders to collaborate on increasing client access to appropriate services.

Strategy 1.5C: Identify, establish, and maintain relationships with local, state, and federal governmental agencies to collaborate on increasing client access to appropriate services.

An in-depth trend analysis of the 2023 OPG Final Report revealed a number of nationally recognized trends driving the need for public guardianship including an aging population with increased longevity, growing awareness of mental illness and intellectual and developmental disabilities, military service-related disabilities, and the consequences of advances in medical treatment. These overarching trends are closely interrelated with several other trends in the areas of housing insecurity, health care, law enforcement, criminal justice, mistreatment and neglect, and involuntary mental health treatment. The limited or lack of availability of appropriate services in these areas is a continuous obstacle that COPG guardians encounter and impacts client's access and goals.

The Director provides ongoing narrative presentations regarding these trends and needs for appropriate services, including, but not limited to housing, mental health services, medical services, and appropriate direct-care providers to educate to various stakeholders across the state. Once the Office is permanent, the Director will add surveys or evaluations for attendees to provide feedback and evaluate the effectiveness of the narrative. The Director reports data related to Objective 1.5 to the Colorado OPG Commission monthly and as requested through the Annual Director Staff Performance Review. Director reports are available to the public on the COPG website.

The Director, Deputy Director, guardians and staff attend various trainings and presentations of service providers. The Director invites various service providers to train and present to COPG staff. The Director

attends various service providers and agency stakeholder meetings which leads to better access to appropriate services. The Director provides ongoing presentations to educate various clients, the public, providers, and stakeholders across the state which leads to better access to appropriate services. The Director reports data related to Objective 1.5 to the Colorado OPG Commission monthly and as requested through the Annual Director Staff Performance Review. Director reports are available to the public on the Colorado OPG website.

Increasing client access to appropriate services via Strategies 1.5B and C are assessed in COPG established stakeholder relationships and stakeholder feedback in Objective 1.1.

**Total number of public outreach and education by the Director to educate various clients, the public, providers, and stakeholders across the state, including a number of ongoing stakeholder meetings.**

2022	145
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The Director has established and maintained relationships with direct-care providers and local, state, and federal governmental agencies to collaborate on increasing client access to appropriate services. Of note are: Vivage, Denver Health, Department of Corrections, Denver District Court, Office of Behavioral Health and WellPower.

Colorado OPG policy established a Stakeholder Engagement Plan to ensure stakeholder input and feedback. A goal of the SAP is to have a diverse membership that represents the distinct populations served by the OPG. One purpose of expansion is to increase the SAP applicant pool to expand the diversity of members. During 2022, the Colorado OPG completed the process of creating a Stakeholder Advisory Panel (SAP) and sought applicants. Due to a lack of statewide diversity, SAP recruitment will begin once the Office is permanent.

Interested individuals can elect to receive a Colorado OPG email communication. This communication provides monthly notice of the Colorado OPG Commission meetings. Once the Office is permanent, it will be a tool for program updates, SAP recruitment, etc.

## **GOAL 2: Complete data collection and present the final report and recommendations to the General Assembly in 2023**

**Objective 2.1:** Quantify, to the extent possible, Colorado’s unmet need for public guardianship services for indigent and incapacitated adults.

**Objective 2.2:** Quantify, to the extent possible, the average annual cost of providing guardianship services to indigent and incapacitated adults.

**Objective 2.3:** Quantify, to the extent possible, the net cost or benefit, if any, to the state that may result from the provision of guardianship services to each indigent and incapacitated adult in each judicial district of the state.

**Objective 2.4:** Identify any notable efficiencies and obstacles that the office incurred in providing public guardianship services.

**Objective 2.5:** Assess whether an independent statewide office of public guardianship or a nonprofit agency is preferable and feasible.

**Objective 2.6:** Analyze costs of off-setting savings to the state from the delivery of public guardianship services.

**Objective 2.7:** Provide uniform and consistent data elements regarding service delivery in an aggregate format that does not include any personal identifying information of any adult.

**Objective 2.8:** Assess funding models and viable funding sources for an independent office of public guardianship or a nonprofit agency, including the possibility of funding with a statewide increase in probate court filing fees.

### **Goal 2 Process and Metrics**

#### **Complete data collection and present the final report and recommendations to the General Assembly in 2023**

##### **Objectives 2.1 – 2.8 – COMPLETE.**

The 2023 Colorado OPG Report to the Legislature outlines the results of Objectives 2.1 through 2.8 and makes seven recommendations including establishing the Colorado OPG as an independent agency and implementing a three-year roll out plan for statewide expansion.

A statewide needs assessment was conducted via statistical analysis, survey, interviews and focus groups. The statistical analysis conservatively estimates an unmet statewide need of between 2,754 and 3,736 individuals. Survey and interview data revealed substantial agreement among a wide range of stakeholders regarding the need for a statewide program of public guardianship. In a survey of 250 individuals representing all 22 Judicial Districts, nearly 90% of participants indicated that there was a High or Extremely High need for guardianship (89%) and public guardianship (88%) in the communities where they serve. Subsequent in-depth interviews and focus groups also strongly supported this finding. Finally,

and most importantly, qualitative interviews with clients, family members and care providers identify the need and report improvements in quality of life for clients being served in the pilot project.

COPG services have had an initial cost savings and cost-avoidance savings to the State of almost \$3 million from moving 9 clients from CMHI Ft. Logan and Pueblo to appropriate housing in the community; moving 15 clients experiencing homelessness to appropriate housing; and obtaining pre-paid burial arrangements for 10 clients. Additional cost avoidance savings are hard to quantify but include reduced 911 calls, emergency department visits and hospitalizations.

While the legislative mandate of the COPG was to quantify the net cost or benefit to the state that may result from the provision of guardianship services, it cannot be denied that the COPG provides immeasurable intangible benefits which translate to improved quality of life of COPG clients. The 2023 COPG Final Report identifies several case studies of different COPG clients and specific quality of improvement benefits.

One example, is the guardian assisting with re-establishing a client's relationship with his culture and daughter. Mr. Q is 69 years old and was living in a nursing home at the time of his OPG appointment. He suffers from dementia with a BIMS score that indicates severe cognitive and memory impairment. He was referred to the OPG by his court-appointed guardian ad litem. The client was refusing much needed dental care and health care. Although Mr. Q has an adult daughter, there was no known contact information for her as they were not in contact with each other for many years.

Mr. Q is Native American, and the public guardian completed some history and genealogy research that helped the client re-learn and re-establish some of his Native American history. Most importantly, she located his daughter in another state. The guardian reached out to the daughter to determine if the daughter was willing to resume contact with her father. After a few months, both she and Mr. Q agreed.

Mr. Q and his daughter have had phone contact for a few months now. Mr. Q's demeanor has positively changed, and he seems "younger" & happier. He has also now agreed to much overdue dental care, has gained weight, and is doing well.

The COPG guardians make great daily impacts in the lives of their clients. These impacts cannot be measured and must be considered given great weight when deliberating the effectiveness and performance of the COPG.

A number of serious barriers, challenges and limitations were encountered during the pilot project, and are detailed in the full report. The most pressing challenges were related to the COVID-19 pandemic and among the many barriers faced were delays in court proceedings, access to clients for guardian visitation, and appropriate placements in the context of crisis standards of care. Unfortunately, some of these challenges continue with the ongoing pandemic. Another key limitation is related to Colorado's labor shortage. For example, despite 2022 authorization to establish the pilot in the 7th and 16th Judicial Districts, efforts to fill those guardian positions have challenging with the COPG filling the 7<sup>th</sup> Judicial District guardian position late in December 2022. Therefore, the Office was not able to fully assess best practices for delivery of public guardianship services in Colorado's rural areas. However, limitations of the pilot project were offset by numerous opportunities that encompass a variety of partnerships, innovative expansion of services, and community education.

The strong conclusion drawn from the COPG pilot project is that establishment of a permanent, statewide Office of Public Guardianship is feasible and justified based on need, cost savings, and potential cost

avoidance. The COPG will introduce 2023 legislation in line with the following recommendations made to the Colorado General Assembly.

**Recommendation #1:** Establish the OPG as an independent agency.

**Recommendation #2:** Expand the governing body to include a more diverse representation of stakeholders and the state.

**Recommendation #3:** Implement a three-year rollout plan for statewide expansion of the COPG.

**Recommendation #4:** Continue to operate via a centralized office with remote staff and satellite offices and infrastructure and ensure adequate human resources, information technology and legal support for operations.

**Recommendation #5:** Provide adequate infrastructure and flexibility to explore grants and innovative community and state agency partnerships and programs.

**Recommendation #6:** Establish COPG accountability and oversight via strong internal and external evaluative systems.

**Recommendation #7:** Complete a comprehensive cost-benefit analysis evaluation of the Colorado Office of Public Guardianship with adequate funding to contract with a third-party evaluator.

### **GOAL 3: ACCOUNTABILITY**

The Colorado OPG Pilot Project mandates are defined, will be documented, and made available to the public, as appropriate, and to the General Assembly, as required by statute.

**Objective 3.1:** Establish Colorado OPG Pilot Project performance standards.

Strategy 3.1A: Establish performance standards of the Colorado OPG Pilot Project and staff, including a disciplinary action policy.

Strategy 3.1B: Conduct annual performance reviews of staff.

**Objective 3.2:** Formulate a complaint policy to address and respond to complaints against the Colorado OPG Pilot Project.

Strategy 3.2A: Establish a complaint policy to allow for multiple methods of filing a complaint.

Strategy 3.2B: Perform investigations and sanction.

Strategy 3.2C: Formulate a Colorado OPG Pilot Project narrative regarding the complaint policy to educate clients, the public, providers, and stakeholders.

**Objective 3.3:** Improved organizational performance.

Strategy 3.3A: Formulate a uniform system of data collection.

Strategy 3.3B: Develop and maintain a critical incident policy and procedure.



Strategy 3.3D: Develop and maintain a guardianship case management system.

Strategy 3.3E: Formulate realistic performance measures.

Strategy 3.3F: Formulate a review policy of Colorado OPG Pilot Project operating policies.

Strategy 3.3G: Balance confidentiality and public access.

Strategy 3.3H: Achieve and report results of the OPG Pilot Project.

Strategy 3.3I: Ongoing guardian training including, but not limited to: compassion fatigue, communicating and interacting with clients, and cultural competency.

**Objective 3.4:** Colorado OPG Commission Financial and Program oversight.

Strategy 3.4A: Establish Colorado OPG Commission Financial and Program oversight policies.

Strategy 3.4B: Establish performance standards of the Colorado OPG Director, including a disciplinary action policy.

Strategy 3.4C: Conduct annual performance reviews of Director.

## Goal 3 Process and Metrics

### Accountability

**Objective 3.1 - ONGOING:** Establish Colorado OPG Pilot Project performance standards.

Colorado OPG policies and procedures adopted the National Guardianship Association's best practices and standards, Colorado Probate statutes and best practices, state and federal law, and the Public Guardianship Act requirements.

The Colorado OPG follows the Judicial Department Personnel policies as required per statute. The Colorado OPG policies and procedures include standards and best practices related to guardian services. Guardians are evaluated and supervised on a weekly basis. The Director conducts staff Annual Performance Reviews. The Colorado OPG Commission conducts Director Annual Performance Reviews. Colorado OPG policies and procedures are available on the Colorado OPG website. The Director reports information related to Objective 3.1 to the Colorado OPG Commission monthly and as requested. Director reports are available to the public on the Colorado OPG website.

**Objective 3.2 - COMPLETE:** Formulate a complaint policy to address and respond to complaints against the Colorado OPG Pilot Program.

A two-tiered formal complaint process and policy are established and available on the Colorado OPG website. Complaints fall into two categories: 1. Complaints against guardians/staff and 2. Complaints against the Director/Office. Complaint 1 category is first reviewed by the Director and if not fully resolved, the Commission then reviews. Complaint 2 category is automatically reviewed by the Commission. Tier 1 complaints are reported by the Director to the Colorado OPG Commission monthly.

In 2022, the Director received 1 Tier 1 complaint against a guardian and 2 Tier 1 complaints against a different guardian.

The complaint process is provided to clients and service providers through packets upon initial appointment and meetings. OPG policy is to provide the complaint process to clients and service providers at any point there is a concern or complaint voiced.

The Director provides the complaint policy narrative and website location during every Colorado OPF Pilot Project presentation.

**Objective 3.3 - ONGOING:** Improved organizational performance.

The Case Management System (CMS) is a uniform system of data collection and allows for guardianship case management as well. The Case Management System allows for reporting of information and data on a confidential basis. The Director, with assistance from the Colorado OPG Commission, is formulating realistic performance measures.

The COPG developed a Client Visitation Tracking System (CVTS) that is integrated into the CMS. The CVTS allows for a point in time GPS site verification system. The CVTS is a secondary CMS verification of a client visit.

Guardians as well as the Director and Deputy Director are on-call 24/7 and track all client actions and data in the CMS. This allows any COPG member to act swiftly on behalf of a COPG if an emergency arises.

The Deputy Director completes monthly random site visits to observe guardian client visits, meet with clients, facility staff and providers to monitor guardians and client access to services. The Deputy Director reports monthly site visits to the Director.

The Colorado OPG Pilot Project developed a Critical Incident Policy and Procedure that is maintained through the CMS. The Director and Deputy Director review critical incidents immediately with the guardian as part of regular case management supervision. The Critical Incident Policy and Procedure requires the Colorado OPG Commission Chair and Commission to be notified of certain critical incidents immediately or by a set schedule as determined by the Commission.

The Case Assignment and Weighting Procedure was developed to ensure that guardians are able to effectively manage their clients and provide appropriate support for each client. Case assignment and weighting can be fluid and change throughout a client's time under guardianship.

A Stakeholder Engagement Plan was formulated to assist in improving organizational performance. As this is a pilot project, basic performance measures include reaching caseload capacity, ensuring quality, ethical, and non-discriminatory public guardianship services. Review of these measures will be through internal review, Colorado OPG Commission review, client and provider surveys, and quarterly public meetings. A Stakeholder Advisory Panel will be developed once the Office is permanent and members will serve to provide feedback on the Colorado OPG's performance.

Reviews of Colorado OPG policies and procedures are continual as the pilot program grows, but an annual review by the Director, Colorado OPG Commission, and Stakeholder Advisory Panel will be scheduled.

Once the Office is permanent, the Colorado OPG will seek an independent third party who is clinically knowledgeable in guardianship services to perform a biennial external program evaluation. Where the

program has outside programmatic assessments conducted periodically by a funding entity or other governmental unit, that program audit may be used to meet this requirement. Those interacting with certain policies and procedures will be responsible for evaluating their consistency with practices of the OPG. When an inconsistency is found, it will be noted, discussed by the staff, and adjusted per compliance with model practice and ethics as identified by the National Guardianship Association. Within five years of beginning operation, the Colorado OPG will solicit an external evaluation from a peer Office of Public Guardian from another state who operates under the judicial branch and/or from the National Guardianship Association. Thereafter, the Director will arrange for an external program audit by an objective third-party on a biennial basis as long as funding is available.

The COPG and guardians are both legally and ethically bound to maintain client confidentiality. The COPG is guided by the NGA standards, Colorado Public Guardianship Act, national best practices, COPG policies and procedures, state and federal law, and Judicial Department as required by statute.

The COPG is committed to transparency, improvement, and providing the best public guardianship services to vulnerable Coloradans and will provide aggregate data and facts while protecting individual client privacy and personal identifiable information (PII) and as guided by legal standards.

COPG policies, reports, hearing materials are available to the public on the Colorado OPG website and appropriate State websites as required by law.

The Director reports results of the Colorado OPG monthly to the Colorado OPG Commission and public members. The Director reports are available to the public on the Colorado OPG website.

As referenced in Objective 1.4 The COPG contracted with a third party to conduct a qualitative study of COPG guardians, clients, client family/friends and providers. Highlights of the qualitative study are included here.

There were ultimately 20 individuals who took part in this portion of the research study. Including eight clients, four COPG guardians, four family and friends of clients being served by the COPG, and four affiliated providers working directly with COPG clients. After conducting the qualitative analysis several key themes emerged:

- Several individuals, including affiliate providers, family/friends and guardians spoke about the tremendous need for guardianship services.

*Having a guardian specifically in the facilities that I'm at are really important because a lot of them are unable to be their own decision-makers. Specifically, with COPG, I know a few years back they had openings, they could take more clients. For my two facilities that I work in, that was huge. We were able to get some folks who really, really needed someone looking out for their best interests – we were able to get them on the caseload with COPG. It's been a great partnership with them so far. Sometimes cumbersome, only just because there's a lotta paperwork, but overall, very favorable.”*

—Ellie—Affiliate Provider

- The COPG has improved the quality of life for clients.

*These people have no families, no support systems. They don't necessarily want you involved in their lives. Then once they realize that you're advocating on their behalf and you're really there for them, it's very special and it's very important.*

—Amanda—Family/Friend

- Discussions also covered what life was like for clients before the COPG, and how those without guardians find themselves in inappropriate living environments:

*I think I could go and try to work, but right now I have some really serious health issues going on so it's probably a blessing that I'm on disability and in this situation. I feel blessed that I'm not out on the streets and homeless.—*

Carol—Client

*I was in transitional housing, and she helped me find a place to stay, an apartment. And I was in the apartment for years.*

—Lauriette—Client

- Participants also expressed appreciation that the COPG helps clients navigate complicated situations and that guardians are attentive to the needs of the clients.

*Well, thinking about [my guardian], she's a real good lady. She comes visiting and makes sure everything's good. If the things I need, she'll help get. Things are going well. And the money's set up. And if I wanna get money, I can get money, and et cetera.*

—Nancy—Client

- Several participants in this portion of the study also discussed how the need for guardianship far exceeds the number of guardians that are currently available which can lead to some frustrations.

*I would love for them to grow and take more. We always need guardians. Even if we saturated and we were able to match a guardian – or a client to every guardian, then we could even lower their case numbers. Gosh, the amount of clients they have, it makes it really difficult sometimes. Especially if one client is in the hospital or really having a changing condition and the guardian has to be super available for that, that pulls away from their other clients. We need more, always more. It's like social workers and mental health. We just need more of it. There's no cap. Just give us more.*

—Ellie—Affiliate Provider

*I'm not sure what [my family/friend's guardian] caseload is. They try to follow up with things, but they may \ have a dozen clients, I don't know how busy they are, they have been responding, but I just wish that perhaps there'd been a little more attention to [my friend/family member] when she was in the throes of losing ambulatory abilities and falling, and all that.*

—Frank—Friend/Family

- Participants also expressed appreciation for the guardianship service:

*It's terrific. It is just marvelous. She's a sweetheart. [Guardian name] 's a sweetheart. We get along just fine. I don't cause any problems. She's [my guardian] like a guardian angel, she's like a real guardian angel.*

—Lauriette—Client

- Some clients did express a concern about their ability to connect with family being difficult under a guardianship:

*Just that I'm used to my own guardianship and stuff and everything and saying and doing what I do on my own. And I have children – I have one child here, and I got grandchildren and stuff and everything. And just – like, having a guardian is undercutting my time with them.*

—Albert—Client

- There were also discussions about the misconceptions of the role of a guardian:

*I wish that most people really understood – like I said, that they understood guardianships and the importance of it. A lot of people think that conservators and guardians are the same thing and they're not. I think people just really need to be more educated about how the importance is, and it's just very needed. I wish people understood how much it truly is needed and how many people are really out there without advocacy and without – that are older and that are really poor, have really poor judgment.*

—Amanda—Family/Friend

- Finally, participants recognized the potential cost savings that could arise from the COPG:

*Our patients struggle with longstanding psychiatric illness, substance abuse, trauma. They oftentimes lack insight into those issues and, without a guardian, wouldn't consent to the level of care that is needed to help keep them out of the emergency rooms, out of the hospitals, and in the community. It works especially well when we can work together and get to that – signing them in*

*and – that helps the nursing homes feel supported, and so we can get patients out of the hospital faster.*

—Kanga—Affiliate Provider

*A lot of these folks, if you look at kind of state money versus federal money, they don't have the capacity to respond to the 8 million questions that government programs ask, like Social Security or Medicaid. If there isn't someone doing that for them, and if they don't have family, there has to be a guardian; if someone isn't doing that for them, they're going to fall off of these programs. So like they'll fall off of SSI, then they don't have anything to eat. Then they're at the food banks, or then they get evicted, and now they can't find housing again because they have an addiction. Then they can't really stay in the shelter because they have all these medical needs. So not taking care of folks is costly unless you're going to just say, 'Let them die'*

—Amanda—Family/Friend

## **Summary**

The findings from this piece of the research study confirm many of the thoughts that were expressed at other data collection points. Those individuals directly involved in the COPG frequently discussed the need for the COPG and the benefits the program has on the lives of individuals involved in the program. It was not uncommon for clients to express appreciation for participation in the program, while simultaneously having reservations on the limitations to their freedoms. This was not a wholly unexpected outcome as many are used to making decisions on their own behalf and struggle with the adjustment. There were many stories about the difficult living situations experienced by those individuals prior to being matched with a guardian, with many experiencing homelessness prior to being placed in stabilized housing with the assistance of a guardian. The findings of these interviews further demonstrate the need for the COPG, and the potential benefits associated with its expansion.

### **Objective 3.4 - ONGOING:** Colorado OPG Commission Financial and Program oversight.

The Colorado OPG Commission developed Director personnel policies, program an financial oversight policy, oversight policy, and other policies. The Colorado OPG Commission conducts Director Annual Performance Reviews. Colorado OPG Commission policies are available on the Colorado OPG website. The Director reports to the Colorado OPG Commission monthly. Commission polices and Director reports are available to the public on the Colorado OPG website.

## GOAL 4: ADEQUATE FUNDING

To ensure successful expansion of the Colorado OPG Pilot Project, it is imperative to identify multiple avenues of funding.

**Objective 4.1:** Assess and maintain annual budgets.

**Objective 4.2:** Identify and develop funding and several funding streams.

Strategy 4.2A: Develop a fundraising plan, including, but not limited to: the solicitation and acceptance of gifts, grants, and donations pursuant to C.R.S. section 13-94-108(3).

Strategy 4.2B: Submit legislative budget requests, including continuance of probate and other civil case filing fees as a revenue source with the potential for legislative increases in filing fees.

Strategy 4.2C: Identify and apply for grants.

Strategy 4.2D: Consult, or contract, for comprehensive research, data-gathering, analyzing and cost-benefit analysis of the Colorado OPG Pilot Project and its potential expansion.

### Goal 4 Process and Metrics

#### Adequate Funding

**Objective 4.1 - ONGOING:** Assess and maintain annual budgets.

The Director, with assistance of the State Court Administrator's Office Budget Manager's Office, maintains and reports annual and monthly budgets to the Colorado OPG Commission. The Director annually reports to the Joint Budget Committee about legislative budget requests and continuance of probate and civil case filing fees as a revenue source.

**Objective 4.2 - ONGOING:** Develop several funding streams.

The Director is working with other State of Colorado agencies and stakeholders for revenue funding streams and grants such as the Department of Corrections and Denver District Court.

As noted previously, the Office of Behavioral Health provided funding in 2021 and 2022 for dedicated COPG guardians to serve clients discharging from the Colorado Mental Health Institutes (CMHI) of Ft. Logan and Pueblo to the Denver County communities, leading to both less restrictive placements for clients as well as substantial cost savings to the State.

Currently, the Director is exploring similar funding opportunities with a local hospital system.

The Director reports information related to Goal 4 to the Colorado OPG Commission. The Director reports are available to the public on the Colorado OPG website.

## **GOAL 5: DEVELOP A STRATEGY FOR DISCONTINUATION OF THE OPG PILOT PROGRAM IN CONSULTATION WITH THE COMMISSION**

Pursuant to statute, the Director will work with the Commission to develop a strategy if the General Assembly chooses to discontinue the Colorado OPG Pilot Program.

**Objective 5.1:** Develop a wind-down procedure in consultation with the Colorado OPG Commission that includes continuation of services until appropriate successor guardians are appointed.

**Objective 5.2:** Identify, establish, and maintain relationships with various stakeholders to collaborate on available client resources.

**Objective 5.3:** Promote education for various stakeholders and identify volunteer and private guardians willing to provide successor guardianship services if the Colorado OPG Pilot Project is discontinued.

**Objective 5.4:** Identify appropriate successor guardians.

### **Goal 5 Process and Metrics**

#### **Develop a Strategy for Discontinuation of the OPG Pilot Project in consultation with the Commission**

##### **Objectives 5.1 - 5.4 – ONGOING**

A strategy for discontinuation has been developed as required by § 13-94-105 (5) C.R.S. The 2023 Colorado OPG Report to the Legislature outlines the strategy and timeline. Of note, the Report identifies the lack of available guardians and the need for at least a three-year discontinuation strategy.

The current legislation wind down period is through June 30, 2024. If the Pilot Project is not continued during the 2023 legislative session, the Pilot Project will institute the following Discontinuation Plan as early as June 2023 to ensure that current COPG clients are successfully and safely transferred to appropriate successor guardians. § 13-94-111 C.R.S.:

- (1) This article 94 is repealed, effective June 30, 2024. Prior to such repeal, the general assembly, after reviewing the report submitted by the director pursuant to section § 13-94-105 (4), shall consider whether to enact legislation to continue, discontinue, or expand the office.
- (2) If the general assembly has adjourned the legislative session beginning in January of 2023 sine die without enacting legislation to continue or expand the office, the office shall notify the joint budget committee that the office will not be continued and that court fees may be reduced by the amount deposited to the office of public guardianship cash fund, implement its discontinuation plan developed pursuant to section § 13-94-105, and wind up its affairs prior to the repeal of this article 94.

#### ***Budget Requests and Corresponding Legislation***

If the Pilot Project is not continued, a FY 23-24 Budget Request, with corresponding legislation, will be introduced to maintain the current FTE through FY23-24, FY24-25, and FY25-26. The budget request will be to maintain the current Cash Fund system, for the purposes of maintaining the current guardianship services until successor guardianships are finalized for all COPG clients and to allow for the current administrative staff to continue in their current roles.



In order for the Pilot Project to transfer COPG clients to successor guardians, successor guardians will need to be identified and be willing to serve, petitions for guardianships will need to be filed, hearings to appoint the successor guardians will need to be held, Letters of Guardianship will need to be issued by the Court, and then the COPG will need to transfer funds to the successor guardian for the guardianship. The successor guardian process will include considerations of the suitability of the client and successor guardian as well as the appropriateness of the successor guardian to meet the Court standards. The COPG will not accept new referrals as soon it is determined that the program is not renewed.

The need for at least three years to wind down the Pilot Project is required because there is a lack of guardians across Colorado, as this report highlights. We anticipate that it will take several months to years to not only locate guardians, but to also vet and train successor guardians, and to complete the process of appointing successor guardians.

The Pilot Project will need legal representation for filing Petitions for Successor Guardianship. It is likely that COPG will need the Attorney General's Office to file Petitions for Successor Guardian. The COPG annually pays the Attorney General Office for legal representation. In the alternative, the OPG will need to contract with outside counsel at an additional cost.

The Pilot Project will be responsible for ensuring that all OPG clients are successfully and safely transferred to appropriate successor guardians. A one-time fund transfer, amount to be determined per client, will be transferred to the successor guardian/grantee after Letters of Guardianship are issued by the Court.

#### ***Discontinuation Plan Projected Timeline***

- I. Proposal and Call for Successor Guardians to stakeholders, guardians, and guardianship agencies – August 1, 2023
- II. Initial Application deadline for Successor Guardians – September 30, 2023
- III. Ongoing fund transfer to Successor Guardians occurs upon issuance of Letters of Guardianship
- IV. Continuous stakeholder outreach and limited activities for Successor Guardians

#### ***Staff Reductions and Capital Items Return***

As successor guardianships are finalized, remaining clients will be transferred to single guardians. Public Guardians will be laid off as public guardianship services decrease. Case transfers and reductions will depend on the location of the remaining clients.

As successor guardianships are finalized and public guardianship services decrease, Administrative Staff will be laid off in this order: Case Management Aid, Staff Assistant, Deputy Director, and Director.

As staff is laid off, Administrators will secure access to the Case Management System, email, cell phone, etc. Staff is expected to return all client files and documentation to the OPG Office, as well as, capital items and hardware, such as laptops, cell phones, printers, office keys, badges, etc.

The Director will request a Memorandum of Understanding with the State Court Administrators' Office for Judicial Department assistance from Human Resources and other necessary departments.

### ***Consideration of Early Termination of Contractual Obligations and Associated Costs or Fees***

The Pilot Project's only current ongoing contractual obligation is its rental agreement which is renewed every October. There is a \$1,900.00 security retainer as an early termination fee.

Current service agreements are invoiced monthly for costs and services incurred and there are no early termination fees.

Costs are subject to change if/when new contractual obligation or service agreement occurs. Should contracts or service agreements need to be renewed or newly established due to the ongoing need to provide public guardianship services, consideration and advice from the Commission will occur.

A final step of the wind down is for the Director to ensure all property and materials of the Pilot Project are retained as per the Pilot Program's retention policies or returned to the Judicial Department. This includes the Case Management System, case files, emails, hardware, and remaining fleet cars.

Additionally, the Director, with the Judicial Accounting Department, will reconcile financial matters as required.

### ***Communication Plan***

The Director will continue monthly reports to the Commission and include reporting on the status of the Discontinuation Plan. The Director will continue to submit annual Budget Requests to the Joint Budget Committee and reports to the Legislature as required by law.

The COPG electronic newsletter will be distributed regularly and with status updates.

The COPG website will be updated regularly and with status updates.

If necessary, the COPG will conduct periodic in-person and virtual Q&A Sessions regarding the Discontinuation Plan and wind-down process.

Continuous stakeholder outreach and limited activities will continue as needed in efforts to identify and locate Successor Guardians.

Once the Pilot Project is completely closed, a final communication to the Commission, Joint Budget Committee, stakeholders, and media, if necessary, will occur.

### **Summary**

While the Strategy for Discontinuation provides a method should the COPG Pilot Project not be continued, it is imperative to be aware that the COPG exists due to the current lack of available guardians for indigent and incapacitated adults. This plan highlights the success and need of the Pilot Project. Should the project not be continued, there should be great consideration and flexibility given to a discontinuation strategy that focuses on the vulnerability, safety, and needs of the clients.

## FINANCIAL FORECAST

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The Colorado OPG Pilot Project requested a continuation budget appropriation based on its success in the 2<sup>nd</sup> Judicial District and to focus on providing services in the rural and frontier counties of the 7<sup>th</sup> and 16<sup>th</sup> Judicial Districts. HB 19-1045 allows for fees charged in relation to probate and other civil case filings. This funding source has allowed the Colorado OPG to not request budget increases for Fiscal Years 2021 and 2022 and 2023.

Findings from the 2023 Colorado OPG Report to the Legislature demonstrate that OPG services have had an initial cost savings and cost-avoidance savings to the State of almost \$3 million from:

- Moving 9 clients from CMHI Ft. Logan and Pueblo to appropriate housing in the community and
- Moving 15 clients experiencing homelessness to appropriate housing
- Obtaining pre-paid burial arrangements for 10 clients

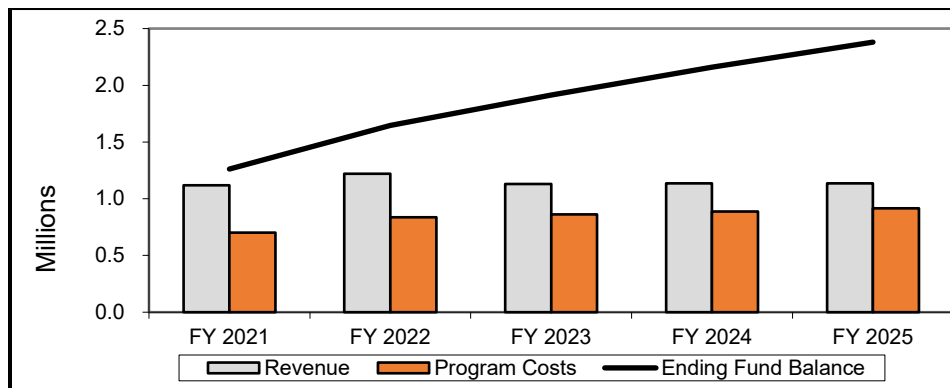
Additional cost avoidance savings are hard to quantify but the Colorado OPG Pilot Project can demonstrate that public guardianship services results in reduced 911 calls, emergency department visits and hospitalizations for Colorado OPG clients.

Recommendations from the 2023 Colorado OPG Report to the Legislature include the implementation of a three-year rollout plan for statewide expansion of the COPG with an anticipated ongoing budget request of \$4.5 million. As identified in Goal 4 the Colorado OPG will seek other avenues of ongoing funding.

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**Office of Public Guardianship Cash Fund #OPGF\***

<b>Revenue and Expenditure Trend Information</b>					
	Actual FY 2021	Actual FY 2022	Projected FY 2023	Projected FY 2024	Projected FY 2025
<b><i>Beginning Fund Balance</i></b>	<u>845,723</u>	<u>1,261,765</u>	<u>1,645,409</u>	<u>1,913,186</u>	<u>2,160,097</u>
<b>Revenue</b>	1,117,987	1,220,753	1,130,000	1,135,000	1,135,000
<b>Program Costs</b>	701,945	837,109	862,223	888,089	914,732
<b>Ending Fund Balance</b>	<b>1,261,765</b>	<b>1,645,409</b>	<b>1,913,186</b>	<b>2,160,097</b>	<b>2,380,365</b>
<i>Fund Balance as a % of Expenditures</i>	<i>n/a</i>	<i>n/a</i>	228.5%	250.5%	268.0%
Reserve increase/(decrease)	416,042	383,644	267,777	246,911	220,268



**CONCLUSION**

The Colorado Office of Public Guardianship Pilot Project (COPG) has successfully served 102 clients initially in the 2<sup>nd</sup> Judicial District and has exceeded expectations as evidenced by the need for additional Public Guardians in the 2<sup>nd</sup> Judicial District. The COPG must continue not only to further evaluate the statewide need and analysis in to the rural and frontier areas, but for the vulnerable and at-risk Coloradans that are not being served otherwise.

The Colorado OPG Pilot Program strives to provide quality public guardianship services to incapacitated and indigent adults and will continue to review and improve its policies and procedures to effectively expand its services statewide.

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<sup>i</sup> Ref: **Citation:** U.S. Census Bureau (2021). *American Community Survey 1-year estimates*. Retrieved from *Census Reporter Profile page for Colorado* <<http://censusreporter.org/profiles/04000US08-colorado/>>

<sup>ii</sup> <https://www.ncbi.nlm.nih.gov/books/NBK470404/>

<sup>iii</sup> <https://www.ncbi.nlm.nih.gov/books/NBK553126/>

<sup>iv</sup> Boersma, P., Black, L. I., & Ward, B. W. (2020). Peer reviewed: prevalence of multiple chronic conditions among US adults, 2018. *Preventing chronic disease, 17*.