



CDHS PERFORMANCE PLAN

2022-2023

WE ARE THE PEOPLE WHO HELP PEOPLE



COLORADO
Department of Human Services



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Who We Are

2022-23 Performance Plan

The Colorado Department of Human Services (the Department) collaborates with partners in State and county governments, nonprofits, advocates, community residents, providers and many others to empower Coloradans to thrive through bold and innovative health and human services.

Specifically, the Department supports and/or provides care for:

- Colorado families who need assistance with food, cash, employment or energy assistance;
- Children, youth and adults at risk of abuse or neglect;
- Individuals with developmental disabilities;
- Pre-adjudicated and committed youth in trauma-responsive environments;
- Individuals with preventive behavioral health needs;
- Individuals who need treatment for mental illness, substance use issues and/or restoration services;
- Older adults and their families who need resources to care for themselves or their elderly parents;
- Colorado's veteran heroes and their spouses; and
- Deaf, hard-of-hearing, and Deafblind Coloradans.

The Department's staff is committed to providing the right services to the right people in the right setting at the right time.



Our Mission

Together, we empower Coloradans to thrive.



Our Motto

We are the people who help people.



Our Vision

To serve Coloradans through bold and innovative health and human services.



Our Values

As diverse individuals and members of a powerful statewide team, we share common qualities and beliefs that further our mission, inspire our community, and empower one another.

Our Values

We believe in a people-first approach:

To serve the people of Colorado, we develop a culture and work environment that creates an energized, inspired and healthy team capable of giving their best to Coloradans.

Balance creates quality of life:

We want our team to be resilient through a supportive workplace that values flexibility, health and wellness and employee engagement.

We hold ourselves accountable:

We take responsibility through our actions, programs, and results for the state of health and human services in Colorado.

Transparency matters:

We are open and honest with employees, our partners, the Coloradans we serve and the public.

We are ethical:

We abide by what is best for those we serve by doing what is right, not what is easy.

Collaboration helps us rise together:

We work together with all partners, employees, and those we serve to achieve the best outcomes for Coloradans.

What We Do

2022-23 Performance Plan

Overview

The Department is a complex organization with a variety of statutory responsibilities. The Department's FY 2022-23 appropriated operating budget, per the enacted HB 22-1329 Long Bill, is \$2,215,668,640 total funds includes \$1,1,037,249,411 in General Fund and 5,171.9 Full Time Equivalent (FTE) staff. In addition to managing State-funded programs, the Department also administers and provides oversight for a variety of federally funded programs. It is important to note the Office of Early Childhood is no longer included in the CDHS operating budget below, while the Behavioral Health Administration is included.

Additional information on the Department's management structure and individual programs is as follows.

Total FTE	5,171.9
General Fund	\$1,037,249,411
Cash funds	\$406,461,303
Reappropriated Funds	\$217,729,509
Federal funds	\$554,248,417
Total funds	\$2,215,688,640

Senior Executive Team

Senior Executive Team



Michelle Barnes

Executive Director



Clint Woodruff

Chief Financial Officer



Perry May

Deputy Executive Director
of Health Facilities



Anne-Marie Braga

Deputy Executive Director
of Community Partnerships



Kevin Neimond

Director of Policy and
Legislative Affairs

The Department's Senior Executive Team is composed of the Executive Director, four Deputy Executive Directors, and the Director of Legislative Affairs. The Deputy Executive Director team is tasked with executing

the vision and directives set forth by the Executive Director and providing senior leadership over the Department's five main programmatic offices.

Deputy Executive Director of Financial Services/Chief Financial Officer. The Chief Financial Officer (CFO) brings strategic focus to the Department's budget management processes. The CFO is responsible for the management and oversight of our \$2.2 billion budget and management of the Division of Budget and Policy, the Division of Accounting, and the Division of Contracts and Procurement.

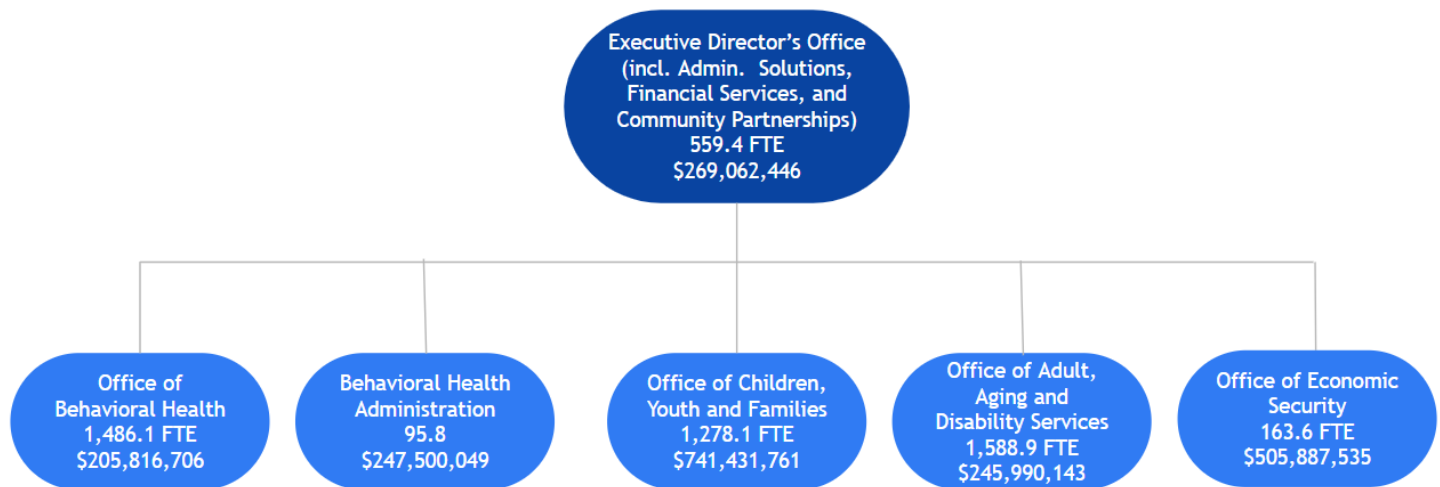
Deputy Executive Director of Health Facilities. The Deputy Executive Director of Health Facilities provides leadership and ensures coordination among all of the Department's 24/7 facilities, which includes the Division of Youth Services, Veterans Community Living Centers, Mental Health Institutes, Forensics, and Regional Centers.

Deputy Executive Director of Administrative Solutions. The Deputy Executive Director of Administrative Solutions is responsible for the management of the administrative functions of CDHS, including Human Resources, Facilities Management, Audit, Performance Management, Public Assistance Quality Assurance, Administrative Review Division, Direct Care Facilities Quality Assurance, Quality Assurance Youth Service, Business Innovation Technology and Security, Emergency Management, Project Management, Legal Affairs, and Quality Assurance.

Deputy Executive Director of Community Partnerships. The Deputy Executive Director of Community Partnerships builds strong relationships and provides strategic coordination to ensure the success of the whole person, whole family, whole community approach to human service delivery, while also overseeing external entities and agencies with whom the Department contracts. This role also provides senior leadership for the Office of Children, Youth and Families; Office of Economic Security; Aging and Adult Services Division; Community and Family Engagement; County and Client Services; and the Department's equity, diversity and inclusion work.

Director of Policy and Legislative Affairs. The Director of Policy and Legislative Affairs develops the Department's policy and legislative agenda in coordination with the Executive Director, Deputy Executive Directors, executive management team and legislative liaisons. This role is responsible for the coordination of relationships with the legislative branch, community stakeholders and counties. The Director of Policy and Legislative Affairs is responsible for the management of communications and Boards and Commissions.

Management Offices



Source: Long Bill (FY 2022-23 Appropriation as of June 1, 2022).

Beyond the Senior Executive Team and the Executive Director's Office, which includes the Administrative Solutions team, the Financial Services team, and the Community Partnerships team, the Department is split into four management offices, each led by an office director. The intent of these eight teams is to provide a leadership structure that enables and facilitates a cross-system approach to the human services programs in Colorado. These eight teams are:

1. Administrative Solutions
2. Community Partnerships
3. Financial Services
4. Behavioral Health Administration (new)
5. Office of Adult, Aging and Disability Services
6. Office of Behavioral Health
7. Office of Children, Youth and Families
8. Office of Economic Security

The Office of Early Childhood (OEC) is in the final stages of transitioning into a separate state department and will not be included in the CDHS FY 22-23 performance plan. OEC will submit a separate performance plan beginning in FY23. The Behavioral Health Administration (BHA) is also in transition, but will be included in the CDHS performance plan in FY 22-23 (i.e., this performance plan).



COLORADO
Administrative Solutions
Department of Human Services

Administrative Solutions (AS)

Administrative Solutions provides services that help program areas achieve their goals. It is responsible for a number of support functions to make our agency as efficient, effective and impactful as possible. Administrative Solutions comprises Human Resources, Facilities Management, Audit, Performance Management, Public Assistance Quality Assurance, Administrative Review Division, Direct Care Facilities Quality Assurance, Quality Assurance Youth Service, Business Innovation Technology and Security, Emergency Management, Project Management, Legal Affairs, and Quality Assurance.



COLORADO
Department of Human Services
Community Partnerships

Community Partnerships (CP)

Community Partnerships builds and strengthens internal and external partnerships, while being a cross-system catalyst for people-centered solutions to support individuals, families and community partners. Community Partnerships provides strategic coordination to ensure the success of the whole person, whole family, whole community approach to human service delivery, while also overseeing external entities and agencies with whom the Department contracts. Community Partnerships provides senior leadership for the Office of Children, Youth and Families; Office of Economic Security; Aging and Adult Services Division; Community and Family Engagement; County and Client Services; and the Department's Equity, Diversity and Inclusion initiative.



COLORADO
Financial Services
Department of Human Services

Financial Services (FS)

Financial Services is responsible for managing the Department's \$2.2 billion budget and an additional \$1.5 billion in Federal Pass-Through Dollars for direct benefits. Financial Services provides governance, oversight, training and education to the Department's programs as well as county partners. Financial Services oversees Budget and Policy, Accounting, Payroll, Contracts, and Procurement.



COLORADO
Office of Adult, Aging & Disability Services
Department of Human Services

Office of Adult, Aging and Disability Services (OAADS)

The Office of Adult, Aging and Disability Services (OAADS) serves Colorado seniors, veterans and those with disabilities through responsive and person-centered support. OAADS elevates adults towards independence to live their best lives THEIR way. Services are provided through the Division of Regional Centers, Veterans Community Living Centers, Aging and Adult Services; including Adult Protective Services and the State Unit on Aging; Disability Determination Services and Programs including Mindsource Brain Injury Network and the Colorado Commission for the Deaf, Hard of Hearing, and DeafBlind to insure Coloradans we serve live in the communities of their choice.



Office of Behavioral Health (OBH)

The Office of Behavioral Health provides oversight and leadership for policy development, service provision and coordination and monitoring for inpatient level of psychiatric care and forensic services across the State to include the operation of two Mental Health Institutes at Fort Logan and Pueblo and monitoring for those involved in the competency system.



Office of Children, Youth and Families (OCYF)

The Office of Children, Youth and Families (OCYF) is responsible for the coordination of quality and effective services for Colorado's most vulnerable children, youth and their families. OCYF houses three divisions, Division of Child Welfare, Division of Youth Services and the Division of Community Programs as well as Medical Oversight and Pay for Success. The Division of Community Programs includes the Colorado Sexual Health Initiative; the Domestic Violence Program; the Juvenile Parole Board; and the Tony Grampsas Youth Services Program. Additionally, legislative and finance staff are dedicated to advancing the policy and budgetary priorities of the office, and the communications team works to increase understanding of the office's impact and encourage Coloradans to become involved in strengthening families. Each team is uniquely organized and pursues defined goals to best collaborate with counties and community partners to empower people in Colorado to thrive.

Behavioral Health Administration

The Behavioral Health Administration (BHA) is a new entity housed within CDHS that is empowered to lead change, to publicly hold itself and its partners accountable, and to take advantage of every opportunity to ensure Coloradans feel a sense of improved quality of life when they intersect with our system. It is instrumental in achieving the vision to have a comprehensive, equitable, affordable, effective continuum of behavioral health services that meet the needs of all Coloradans in the right place, at the right time. To ensure the needs of Coloradans' are put first, the BHA will provide transparency and accountability for our behavioral health system.

Under the BHA, data will be streamlined across State agencies, payers, sectors, and providers to illustrate a comprehensive view of what is working and where gaps remain in the behavioral health system. The BHA will define what data and metrics are necessary to monitor the behavioral health system and ensure that it is high-quality and equitable. A core function of the BHA will be setting standards for behavioral health, clinical quality standards, and accountability metrics. Because many behavioral health programs, services, and supports will continue to be administered by other Colorado departments and agencies, the BHA will promulgate rules that outline the collaborative activities and tools that will be utilized to support these essential BHA functions. A phased approach that is grounded in a multi-stakeholder roadmap for measuring and improving quality in behavioral health care will ensure that Coloradans see improvements in the system. Although housed within CDHS, the Commissioner of the BHA reports to the Governor.



Office of Economic Security (OES)

The Office of Economic Security operates programs that provide income, employment, food and support services to those in need. Divisions include Child Support Services, Employment and Benefits, Food and Energy Assistance, and the Staff Development Center.

The Division of Child Support Services helps ensure children receive regular financial support from both parents and is committed to providing family-centered services that address barriers to consistent child support payments. The Employment and Benefits Division provides innovative programming that connects people to employment and benefits services that reduce poverty, increase stability, and improve well-being. Programs include Colorado Works (TANF), Adult Financial Programs, Colorado Employment First, ReHire Colorado, and Refugee Services. The purpose of The Food and Energy Assistance Division is to safeguard health and well-being by administering programs such as the Supplemental Nutrition Assistance Program (SNAP), Electronic Benefit Transfer (EBT) program, Pandemic Electronic Benefits Transfer (P-EBT), and Low-Income Energy Assistance Program (LEAP). In addition, the Division provides Food Distribution Programs (FDP) including The Emergency Food Assistance Program, the National School Lunch Program USDA Commodities, and Everyday Eats for older adults.

The Staff Development Center works to identify essential training needs and to establish, facilitate, and maintain competency-based training programs for staff working with families who are accessing medical and other types of public assistance.

Statewide Collaborations and Task Group Engagement

CDHS is engaged with statewide initiatives that aim to enhance service delivery, reduce program costs, and ultimately improve the lives of Coloradans. Members of the Department's leadership are currently involved in the following initiatives:

- Rural Outreach Cabinet
- IT Steering Committee
- Behavioral Health Task Force
- Education Cabinet Working Group
- Criminal Justice Cabinet Working Group
- Workforce Cabinet Working Group
- Reducing Homelessness Cabinet Working Group
- Health Cabinet Working Group

During SFY 2019-20, CDHS undertook a comprehensive strategic planning process. Based on feedback from thousands of survey responses and discussions with CDHS staff, stakeholders and partners, the strategic plan identifies key initiatives that align with our new mission, vision and values. The strategic plan, known as *Better Together*, outlines what CDHS will prioritize in 2020-23. In order to outline how CDHS will meet the objectives outlined in the *Better Together* plan, CDHS annually prepares a performance plan to outline the

goals and activities to be undertaken in the coming state fiscal year. The plan's format meets the requirements of Colorado's State Measurement for Accountable, Responsive, and Transparent (SMART) Government Act.

The *Better Together* Strategic Plan outlines the Department's 2020-23 strategic initiatives known as The 4 Keys*:



Key 1: Whole Person, Whole Family, Whole Community Approach

What is the ideal outcome? The Department provides a collaborative, multi-disciplinary health and human services approach to Coloradans. The Department's work is integrated and cross-systems collaboration is the norm.



Key 2: Efficient and Effective Processes

What is the ideal outcome? The Department is efficient with things and effective with people. The processes allow employees to efficiently and effectively complete work so they can focus on what matters: empowering Coloradans to thrive. Our employees are (1) excellent problem solvers, (2) improving continuously and (3) resilient.



Key 3: Leveraging Technology

What is the ideal outcome? CDHS leaders have the leverage and knowledge to support project oversight, strategic planning, risk management and overall ownership of the IT systems that support their programs and the Department has tools to make work easier and lead to better outcomes.



Key 4: Making CDHS A Great Place to Work

What is the ideal outcome? CDHS is an employer of choice. An employer of choice is an organization that offers great professional culture in an environment that attracts and retains the best employees. Features of the workplace environment at an employer of choice favor the well-being of employees and the clients they serve.

**To learn more about The 4 keys, please visit*

<https://www.colorado.gov/pacific/cdhs/better-together-strategic-plan>

Performance Management Strategy

CDHS implemented C-Stat in 2012, which analyzes performance in each department program using the most currently available data. C-Stat centralizes data from programs across the Department, automates data pulling where possible, and utilizes data visualization best practices and techniques. C-Stat allows divisions within CDHS to pinpoint performance areas of strength and those in need of improvement to improve outcomes geared toward enhancing the lives of the populations that CDHS serves and allowing for the best use of dollars spent.

Through bi-monthly meetings, analysis and inquiry, and the Theory of Change Model to enhance focus on meaningful metrics, CDHS determines which processes work well and which processes need improvement. By measuring the impact of day-to-day efforts, CDHS makes informed, collaborative decisions to align efforts and resources to affect positive change.

The following measures demonstrate some of the outcomes CDHS is tracking on a monthly basis. These measures are a subset of the larger universe of measures the Department will manage in FY 2022-23 that contribute to the goals and vision outlined in the Governor's Dashboard.

Pandemic Performance Management

The Performance Management Division established a new performance management function for all types of COVID relief funds. The Pandemic Performance Management work began in October 2021 which prompted the creation of a new team. PMD hired a new Pandemic Performance Supervisor and three new Pandemic Performance Analysts in early 2022. The team is tasked with enhancing and protecting the Department's vision, mission, and values by providing a risk-based and objective performance management strategy specific to pandemic-funded programs, and gaining insight to individual Offices within the Department.

The Pandemic Team actively coordinates and collaborates with the Office of Behavioral Health; Office of Early Childhood; Office of Economic Security; Office of Aging and Disability Services; and Children, Youth and Families. The team partners with the Chief Recovery Officer and office leadership to develop action plans for performance improvement and ensuring the success of initiatives to meet metric goals. The work involves utilizing in-depth knowledge of the program to:

- Implement performance management strategies for pandemic funded programs
- Provide technical assistance and data validation
- Collect, analyze and report performance data
- Identify areas in need of performance improvement efforts
- Facilitate programs to achieve their stated outcomes, goals and objectives

Pandemic Team goals include:

- Operationalize the pandemic performance management program
- Develop a proactive stakeholder engagement system
- Create a data visualization tool to inform and provide feedback on performance

The Pandemic Performance Management Team is actively coordinating to incorporate pandemic metrics and reporting into WIGs.

Goal and Metric Overview

2022-23 Performance Plan

SFY 2022-23 Cabinet Member Wildly Important Goals for CDHS

To emphasize and focus on specific areas related to The 4 Keys, the Department has developed performance measures in a few key areas that are measurable, accountable, responsive, and transparent. In FY 2022-23, the Department has the following Wildly Important Goals (WIGs):



1. **Reducing Homelessness:** CDHS will connect 75% of people who receive cash assistance through Employment and Benefits Division programs and self-identify as unhoused or are at risk of becoming unhoused to housing assistance and services through locally developed processes with the Continuums of Care by June 30, 2023. The following programs will be included:
 - a. Colorado Works serving families with low incomes,
 - b. Aid to the Needy Disabled (AND) program serving disabled individuals awaiting a determination for or receiving federal disability benefits, and
 - c. Old Age Pension (OAP) program serving individuals over 60 with low incomes.



2. **Talent Recruitment and Retention:** CDHS will decrease vacancies from 19.45% to 10.1% by June 30, 2023.



3. **Consent Decree:** Increase the number of pretrial detainees restored to competency by 15%, from 1,055 to 1,213, by June 30, 2023.

SFY 2022-23 Cabinet Member WIG #1



Colorado Department of Human Services Cross-Office effort Reducing Homelessness WIG

Why is it important?: Homelessness is a big issue in our state. Knowing that the homeless population has doubled in the metro area, CDHS is committed to taking a lead role in proactively identifying people at risk of experiencing homelessness and connecting them to the services they need. CDHS will increase our direct role in reducing homelessness inflow.

Strategies:

Performance Measure:

Cabinet Member WIG: CDHS will connect 75% of people who receive cash assistance through Employment and Benefits Division programs and self-identify as unhoused or are at risk of becoming unhoused to housing assistance and services through locally developed processes with the Continuums of Care by June 30, 2023. The following programs will be included:

- Colorado Works serving families with low incomes,
- Aid to the Needy Disabled (AND) program serving disabled individuals awaiting a determination for or receiving federal disability benefits, and
- Old Age Pension (OAP) program serving individuals over 60 with low incomes.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	75%
Actual:	TBD				

Lead Measure #1: Hire a full-time FTE focused on homelessness prevention to coordinate efforts across CDHS offices and other state agencies, and with counties and local partners by Sept 1, 2022.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	100%	n/a	n/a	n/a
Actual:	0%				

Lead Measure #2: Ensure that each identified county has a documented process and resources/staff for connecting clients to local housing assistance, and that each process was developed in close collaboration with housing partners

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	100%
Actual:	0%				

Lead Measure #3: Identify and document the levers of control available at CDHS to help facilitate connections between EBD programs and housing assistance

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	100%
Actual:	0%				

Lead Measure #4: Develop a strategic plan to scale to the entire state based on outcomes.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	100%
Actual:	0%				

SFY 2022-23 Cabinet Member WIG #2



Colorado Department of Human Services Department-wide effort Recruitment and Retention

Why is it important?: Over the past two years, CDHS has experienced staffing shortages as a result of heavy workloads, the COVID-19 pandemic, unprecedented competition for quality talent, and challenges in responding to changes in the labor market in what has been termed The Great Resignation. This shortage has impacted CDHS operations.

Strategies: Recruitment and retention strategies include improving the employee experience and the culture of CDHS by developing career paths for our employees through leadership training; automated staffing tools; equity, diversity and inclusion programs; wellness resources and targeted employer branding to attract top talent and improve the candidate experience. The Department is excited to engage every employee in this effort through the development of new programs, engagement surveys and listening tours.

Performance measure: HR calculates vacancy data by pulling from HRDW (Human Resources Data Warehouse), HR's original report tool to extract data from CPPS, which is maintained by DPA. Vacant positions are only included if a post-and-fill PAF has been created for the position within a 9-month period of the position being vacant

Cabinet Member WIG: CDHS will decrease vacancies from 19.45% to 10.1% by June 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	10.1%
Actual:	19.45%				

Lead Measure #1: Increase staff retention by 10%, from 71.42% to 78.56% by June 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	78.56%
Actual:	71.42%				

Lead Measure #2: Increase new hires by 10% from 1,820 to 2,002 by June 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	2,002
Actual:	1,820				

SFY 2022-23 Cabinet Member WIG #3



Colorado Department of Human Services Office of Behavioral Health (OBH) Consent Decree

Why is it important?: Currently there are almost 350 Coloradans waiting for competency and restoration services beyond the timeframes set in the consent decree. By coming into compliance with the consent decree, this will increase the number of individuals we can serve each year.

Strategies: In order to remove Coloradans from the waitlist, OBH wants to maintain a high rate of full beds providing inpatient restoration services at Colorado Mental Health Institute at Pueblo (CMHIP) and Colorado Mental Health Institute at Fort Logan (CMHIFL), as well as private hospital beds contracted with OBH. OBH will also improve staffing at CMHIs by increasing the percentage of filled positions at CMHIP and the 2 new units at CMHIFL.

Performance measure: The data source is the Admission to Discharge time frame collected via BEHR and Legacy Cube.

Cabinet Member WIG: Increase the number of pretrial detainees restored to competency by 15%, from 1,055 to 1,213, by June 30, 2023.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	1,213
Actual:	1,055				

Lead Measure #1: Reduce Length of Stay (LoS) from 143 to 120 days by June 30, 2023.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	120
Actual:	143				

Lead Measure #2: Complete 44 state-constructed beds at Ft. Logan by August of 2022, and complete 16 additional at Ft Logan by December 1st, 2024 to serve the forensic population. Adding these 60 will allow CDHS to serve 120 more people per year in an inpatient setting by July 2023.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	TBD	TBD	TBD	60
Actual:	0				

Lead Measure #3: Reopen 2 of the 3.5 units currently closed at CMHIP. First unit by 12/1/22, second unit by 6/1/23.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	0	1	1	2
Actual:	0				

Lead Measure #4: Launch pre-restoration services from 0 to 8 significant jails by June 30, 2023.

INCREASE	SFY22 Actual	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	2	4	6	8
Actual:	0				

Other FY 2022-23 Strategic Performance Indicators



Key 1: Whole Person, Whole Family, Whole Community Approach

Office of Adult, Aging and Disability Services

1. Veterans Community Living Centers — Decrease the average number of medications per resident to 14 or less division-wide.

Why is it important?: The issue of polypharmacy and inappropriate medication use in post-acute and long-term care has been an ongoing concern, with many nursing home residents taking 15 or more drugs. Decreasing polypharmacy rates among residents will lead to better quality of life, fewer falls and adverse drug effects, and decreased hospitalizations and medication errors.

INCREASE	SFY20	SFY21	SFY22	SFY23
Goal:	n/a	n/a	14 or less	14 or less
Actual:	n/a	n/a	17.3 *	n/a

**Includes data from July 2021-May 2022.*

Office of Economic Security

1. Employment and Benefits Division — Increase the percent of Colorado Works participants who enter employment from 32.8% to 35% by June 30, 2022.

There will be a methodology change to this measure in FY23. The goal of this change is to more accurately report Colorado Works employment activities to provide a clearer picture of county and statewide progress on this measure.

Why is it important?: Becoming employed is an important milestone for a Colorado Works participant seeking to maintain stable and high quality employment. Research indicates that having limited work experience is a barrier to employment, so helping Colorado Works clients make a connection to employment in any form can be a step toward more meaningful, sustainable, and higher wage employment. This measure assesses the Division's performance in implementing strategies to connect our Colorado Works workforce to the employment opportunities in their communities.

INCREASE	SFY20	SFY21	SFY22	SFY23
Goal:	40.0%	37.0%	35.0%	TBD
Actual:	36.2%	32.8%	30.9%*	

*Includes data from July 2021-March 2022

2. Food and Energy Assistance Division — Increase the number of Supplemental Nutrition Assistance Program applications submitted through outreach partners from 25,665 to 29,211 by September 30, 2022.

Why is it important?: Approximately 1 in 3 Coloradans struggle with hunger, not always having enough money to buy food, and therefore, may struggle in school, experience poor health outcomes, or have difficulty sustaining employment. SNAP helps people afford food, providing eligible individuals with an average benefit per case of \$253.99 in food support. However, the benefit is underutilized with only 76% participation statewide. Conducting SNAP outreach is important so that those who are eligible to participate are able to leverage all available food resources. Research suggests that SNAP outreach substantially increases SNAP enrollment, especially when this outreach includes application assistance (200% increase relative to a control group in one study) and that this increase is primarily enrollment that would NOT have otherwise occurred (i.e., it is net new enrollment, NOT enrollment that would have happened anyway).

INCREASE	FFY20	FFY21	FFY22	FFY23
Goal:	17,764	22,380	29,211	TBD
Actual:	17,839	31,965	21,764*	

*Includes data from October 2021-April 2022



Key 2: Efficient and Effective Processes

Process Improvement

As this is a new initiative, strategies are forthcoming. Plans are being drafted that will link the strategic plan and operations together to guide continuous improvement as we work to make CDHS offices' goals a reality. The Process Improvement Program design will be focused on integrating process improvement into CDHS's culture from both a grassroots and leadership-down approach. The process improvement framework will provide various tools and resources that will support CDHS in various ways — from very structured SOLVE events to adhoc improvement applications.

Why is it important?: Time-intensive, confusing and inefficient processes inhibit excellence and mitigate mission-critical services at CDHS. Streamlined processes lead to better understanding, consistency and employee engagement. The absence of consistent processes and practices across the Department creates misalignment and redundancy. This key initiative is about ***building a culture of excellence***.

This initiative is an opportunity to demonstrate a commitment to investing in our workforce, prioritizing continuous improvement, and creating space to innovate. Achieving our goals in this area will set CDHS up for success and ensure the Department is always moving forward.

FY 2022-23 Process Improvement Initiatives	Results
Contracting and Procurement Vendor Management Maturity Assessment	TBD- In Progress, assessment developed
Veterans Community Living Center at Fitzsimons Staffing Retention Root Cause Analysis	TBD - In Progress
Veterans Community Living Center at Florence Nursing Staff Flexible Scheduling	TBD - In Progress
eClearance Process Mapping and Opportunity Identification Project	TBD- In Progress- Purpose is to develop a SIPOC (Suppliers, Inputs, Process, Outputs, and Customers) for all HR PAFs to identify areas of waste. The eClearance product owner will continue to develop on any areas of improvement as they see fit.
FY 2021-22 Process Improvement Initiatives	Results

Meeting Lean Up Initiative	Leaned up meetings at CDHS, reduced frequency, length and attendees. Identified over \$500k in wages saved and 11,000 hours.
Option #2 and Option #3 County HP Computer Reconciliation Process Map	This consult helped reconcile unreturned County HP devices from Option #2 and Option #3 counties for both CBMS and CYF programs. Improved number and timeliness of computers returned. Reductions in HP fees.
Grant Process Mapping	Helped the Governor's Office Operations team map out the grant process.
Boards and Commissions Process Map	CDHS Boards and Commissions Process Mapping, this can be used as a baseline to measure future improvements.
CBMS Process Map	Develop a process map of the CBMS systems input (from ideation through printing of correspondence).
Jabber Deskphone Replacement	Implementing Jabber will not only save CDHS an estimated \$13,000 per month, but also allows for flexibility and business continuity.
24/7 Facility Hiring RPIE	TBD - In Progress. A lean effort was completed in March which included over 90 improvement opportunities. Those efforts are being addressed and are in progress.
HP Lease Process Improvement	Completed two improvement efforts that addressed the CDHS process and County processes. Clarified the roles and responsibilities between staff and state agency partners as well as established standard operating procedures.
Employment First State Plan Lean Process	TBD - In Progress
Veterans Community Living Center at Rifle Admissions Process	Completed a current and future state map in order to prepare the incumbent Admissions Director during onboarding. Instituting improvement efforts and data collection systems to track results. Goal is to have all admissions error free by the end of FY23.
Veterans Community Living Center Physician Statement of Work Crosswalk	Standardized the required qualifications, duties, and reimbursement rates across all the VCLC facilities.
Homelake Domiciliary Program Service Analysis	Reviewed the services provided by skilled staff and needs of the residents. Reduced the hours of operation and integrated more effectively with the

	skilled nursing facility.
Veterans Community Living Center Nurse Position Description Crosswalk	Standardized the job duties, on-call status, and staff authority across each Nurse classification.

Office of Adult, Aging and Disability Services

1. Disability Determination Services —Decrease statewide, the time a case remains in DDS custody from case assignment to clearance (closure) to 55 days or less.

Why is it important?: Examiner processing time demonstrates how long a case remains in DDS custody, from assignment to DDS to completion. This measure highlights the timeliness of day-to-day operations which impacts customer satisfaction and employee training needs.

INCREASE	SFY20	SFY21	SFY22	SFY23
Goal:	<= 45 or below	<= 55 or below	<= 55 or below	<= 55 or below
Actual:	41.8	43.5	59.5*	n/a

*Data represents performance for July 2021 - April 2022.

Office of Economic Security

1. Food and Energy Assistance Division — Maintain the percent of Supplemental Nutrition Assistance Program benefit appeal decisions completed timely in the month at 100.0% through September 30, 2022.

Why is it important?: SNAP households are entitled to fair hearings to dispute, or confirm, that the local county office has made a correct determination of SNAP eligibility. Federal SNAP regulations for fair hearings require that the household's concern be heard before an impartial judge and be decided in no more than 60 days. While participating in the fair hearing process, SNAP households may be awaiting corrected benefits, reinstated benefits, or a redetermination of household eligibility; as a result, adherence to the 60-day timeframe is crucial, as delays in the timeframe may directly result in food insecurity and Program churn. Furthermore, SNAP appeals are a marker of recipient trust, or lack thereof, in the action taken by the county. By providing speedy resolution to their dispute we are able to reintroduce trust into the equation for recipients who may be wary of the process and its outcomes.

INCREASE	FFY20	FFY21	FFY22	FFY23
Goal:	100.0%	100.0%	100.0%	100.0%
Actual:	52.1%	88.1%	90.4%*	

*This report includes data from October 2020-April 2021.



Key 3: Leveraging Technology

In order to set up the Department for success in Key 3: Leveraging Technology, in three years, CDHS needs to “own” the risk of ineffective technology, as well as inherent risk when systems are not in compliance with security standards. As technology owners, CDHS leaders should understand and plan for information technology (IT) costs and enhance data literacy so that IT systems yield the necessary business outcomes.

Over the course of SFY 2020-21, CDHS introduced the Business Innovation, Technology, and Security (BITS) team that would lead CDHS IT Innovation and Security as well as IT and Strategic Business projects into the future. With this shift, priorities identified in last year's performance plan are no longer relevant and the BITS team has identified new priorities and strategies to achieve success in Key 3: Leveraging Technology.

As the new BITS team exits the Storming phase of team development and enters into Norming, much work has been done in establishing the team's Mission, Vision and Values. With this work completed, BITS intends to put forward a plan to staff a serious technology division that will truly take ownership of CDHS technology.

For the SFY 2022-23 Performance Plan, BITS has identified a priority to continue work on increasing the accountability and ownership of IT initiatives at CDHS.

BITS has selected the following areas as focus areas for this priority:

- Data Governance and Data Management
- Technology Staffing and Organizational Structure
- Specialized Expertise Consultants & Technical Administration
- Technology Financial Administration

BITS continues to focus on building out Key Performance Indicators (KPIs) and outcome measures for these priorities over the course of SFY 2022-23.

Why is it important?: Effective information technology (IT) is essential to delivering value in almost every service. Technology helps manage and improve business processes and provides meaningful data to inform decisions. Additionally, health outcomes can be improved when the right technology is leveraged at the right time. When technology hinders, all aspects of the business suffer, from customer service to employee morale to leadership decision-making.

Across the Department, offices have highlighted outdated and cumbersome technology, the need for various systems to connect across services, data security concerns, as well as systems enhancements and projects coming in late and/or over budget. Additionally, department leaders are unable to easily access program data in order to make educated, evidence-informed decisions in a timely manner.



Key 4: Making CDHS A Great Place to Work

In order to set up the Department for success in Key 4: Making CDHS a Great Place Work, CDHS has developed a comprehensive multi-year plan that includes: improving the employee experience with improved communication, access to wellness resources, and formalized onboarding and offboarding tools; investing in leadership development; improving culture through equity, diversity and inclusion efforts; developing career paths for our employees through professional development opportunities; attracting top talent with improved marketing and community partnerships; improving the candidate experience; and ensuring adequate staffing. The Department is excited to engage every employee in this effort through the development of new programs, engagement surveys and listening tours.

During SFY 2020-21, CDHS prioritized Key 4: Making CDHS A Great Place to Work by making employee engagement a Cabinet Members WIG, improving the percentage of hired CDHS staff who have an onboarding plan, developing wellness resources, implementing a new text tool to improve communication, and increasing the number of staff who completed the Outward Mindset training.

For SFY 2021-22, CDHS is continuing to move forward on a number of initiatives, although they will not be tracked in a measure format. Below are key areas of focus for Key 4: Making CDHS A Great Place to Work.

Equity Diversity and Inclusion:

CDHS is dedicated to Equity, Diversity, and Inclusion (EDI) and has robust action plans in place to enhance EDI-focused efforts, create a shift in employee culture towards inclusive hiring, performance review and career pathing practices to retain current employees and increase the diversity of our workforce at all levels. For example, we have a dedicated group of employees participating in our EDI Subcommittee, the Belonging Project which works to educate CDHS staff members and ensure that CDHS is a place for all our staff to be included, and a “Continuing the Conversation” newsletter series to share the voices and experiences of all CDHS staff including leadership.

Additionally, C-Stat recently created and implemented the EDI Equity Analysis tool to integrate a data-informed process to center equity in practice. This work was piloted with Disability Determination Services. Through C-Stat, Executive Leadership and programmatic staff are developing processes with the intended outcome of providing more equitable and inclusive programming in the communities where we serve. Additional metrics are currently being curated, with the assistance from Performance Management staff, to reflect all areas of impact within the CDHS Action Plan from leadership development to how our employees interact with community partners.

We know that one of the best ways to increase diverse perspectives and experience is by hiring team members that are more reflective of the populations served and we have made it a top priority to integrate industry best practices into our recruitment and hiring practices.

Career Pathing:

The Career Pathing program provides employees the ability to chart a career development path and explore the diverse opportunities within CDHS. We take a holistic approach to empower employees to design individualized action plans using meaningful, inclusive and accessible development activities.

Utilizing a people first approach, supervisors and employees learn the necessary tools to have transparent conversations around growth and development to increase retention and engagement. The program provides: career consultation, innovative training on Stay Interviews, giving supervisors the tools to conduct proactive discussions with team members around their experience and create action plans to reduce turnover. Currently, succession planning training and resources for supervisors have been created and will be launched in June 2022 to increase internal promotional opportunities.

Onboarding and Offboarding:

In reviewing the 4 Key CDHS Initiatives it was discovered that a need existed for a better and more consistent onboarding process for new employees throughout CDHS. CDHS set a wildly important goal that 20% of new employees have an onboarding plan. With further research, we concluded that at least 80% of new employees now have some sort of onboarding plan. This was an exciting discovery but we knew that we then wanted to incorporate best practices and consistency across the organization. Without a consistent onboarding process a program has a higher risk of losing great talent- something that goes against CDHS Key Initiative # 4- Making CDHS a Great Place to Work. The Onboarding Committee was formed to create a one-stop shop for programs in need of onboarding tips, tools and guidance. With information from different programs and resources the Onboarding Committee created the Onboarding Toolbox. This is a toolbox that programs, specifically supervisors, can turn to for onboarding information such as:

- The Importance of a Buddy System
- Best Practices for Successful 1-on-1's
- Onboarding New Employees: Guide for Success (a guide to walk through the employees first year within the organization)

Equally important to the onboarding of a new employee is the off-boarding of an employee. CDHS recognizes the off-boarding process should also be done consistently and with many considerations. We value the future of the exit-ing employee and want to ensure that we are being good stewards of the resources the State provides. This includes the proper disposition and allocation of employee access and information when a State employee transfers divisions or decides to retire. The Off-boarding Toolbox was created to provide exactly this type of information to help guide both Supervisors and employees through these processes and includes:

- Email templates to use when offboarding an employee
- An easy to follow guide to make exit interviews count
- An exit interview template
- A checklist for supervisors to ensure the successful off-boarding of an employee that takes into consideration the different types of separations and more

And with the recently created Employee Resource Toolbox our employees will feel supported from Onboarding, Offboarding and every step in between. The New Employee Resources Toolbox has information based on the most Frequently Asked Questions employees ask their programs and are resourced from the CDHS Intranet and placed in a "One Stop Shop" for *all* employees. It includes quick links and information on:

- Employee Benefits and PERA retirement
- Career Pathing
- A CDHS acronym dictionary that is a living document that anyone can update
- Different committees and projects that can help anyone feel that they belong and more

All employees at CDHS should feel valued and supported through each and every step of their journey with us. It is our goal that by creating the Onboarding and Offboarding Toolboxes as well as the Employee Resources Toolbox and continuing to place in them updated and useful tools for our programs to use, we will continue to make CDHS a Great Place to Work, now and for the future.

Wellness:

The past few years in the pandemic environment have been tough for employees, especially those who work at our 24/7 facilities. Recognizing the need to better support our employees, we:

- Created an intranet page with robust resources on wellness
- Began offering three new open enrollment courses on emotional intelligence, resilience, and self care in times of stress.
- Created a 'month of resilience' with weekly challenges for employees to improve their resilience.

Outward Mindset:

During SFY 2020-21, the Department exceeded the goal of training 274 staff in Outward Mindset in order to improve organizational performance and create transformational change for the clients we serve. During the year, more than 400 staff completed Outward Mindset training, with 90% of those staff being leaders with direct reports. Moving forward, CDHS plans to expand programming around Outward Mindset, including:

- Continuing outward mindset training with the intention of 50% of leaders with direct reports completing the training.
- Developing refresher content around Outward Mindset for folks across the Department
- Developing a new training that focuses on how to hire individuals with an Outward Mindset
- Developing a new training that focuses on giving both praise and criticism from an Outward Mindset.

Why is it important?: Highly engaged teams are passionate about their work, accomplish more than other groups and consistently deliver the best outcomes. Typically, the more engaged and loyal employees are to an organization, the better the organization performs. Focusing on hiring the best talent, improving staff engagement and ultimately creating less turnover lead to better service outcomes.

Feedback assessments and surveys reveal that the Department needs to do more to help employees feel more valued and empowered. Leveraging data into current retention and engagement rates, there is a clear opportunity to impact CDHS initiatives through a department-wide focus on making CDHS a **great place to work**.

FY 2021-22

Performance Summary

The Department conducted a department-wide strategic planning process which led to new strategic initiatives known as The 4 Keys. The Department is taking this opportunity to align the metrics outlined in this Performance Plan with The 4 Keys. Therefore, CDHS is moving forward with new Wildly Important Goals, as outlined above.

FY 2021-22 Wildly Important Goals Summary

1. **Cabinet Member WIG:** CDHS will operationalize the Behavioral Health Administration (BHA) per HB 21-1097 by June 30, 2024, with 20% complete by June 30, 2022. The BHA will lead, promote and administer Colorado's behavioral health priorities, a key step in the State's 2020 Blueprint to create "a comprehensive, equitable, effective continuum of behavioral health services that meets the needs of all Coloradans in the right place at the right time to achieve whole person health and wellbeing."

INCREASE	SFY20 Actual	SFY21 Actual	Q1 SFY22	Q1 - Q2 SFY22	Q1 - Q3 SFY22	Q1 - Q4 SFY22
Goal:	n/a	n/a	20%	20%	20%	20%
Actual:	n/a	n/a	4.8%	10.2%	14.0%	17.0%*

*Data represents performance for July 2021 - May 2022.

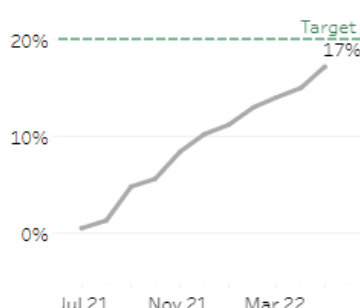
Operationalize the Behavioral Health Administration

Average Daily Out of Home Population

Increase Child Care Capacity

Wildly Important Goal:

CDHS will operationalize the Behavioral Health Administration (BHA) per HB 21-1097 by June 30, 2024, with 20% complete by June 30, 2022. The BHA will lead, promote and administer Colorado's behavioral health priorities, a key step in the State's 2020 Blueprint to create "a comprehensive, equitable, effective continuum of behavioral health services that meets the needs of all Coloradans in the right place at the right time to achieve whole person health and wellbeing."

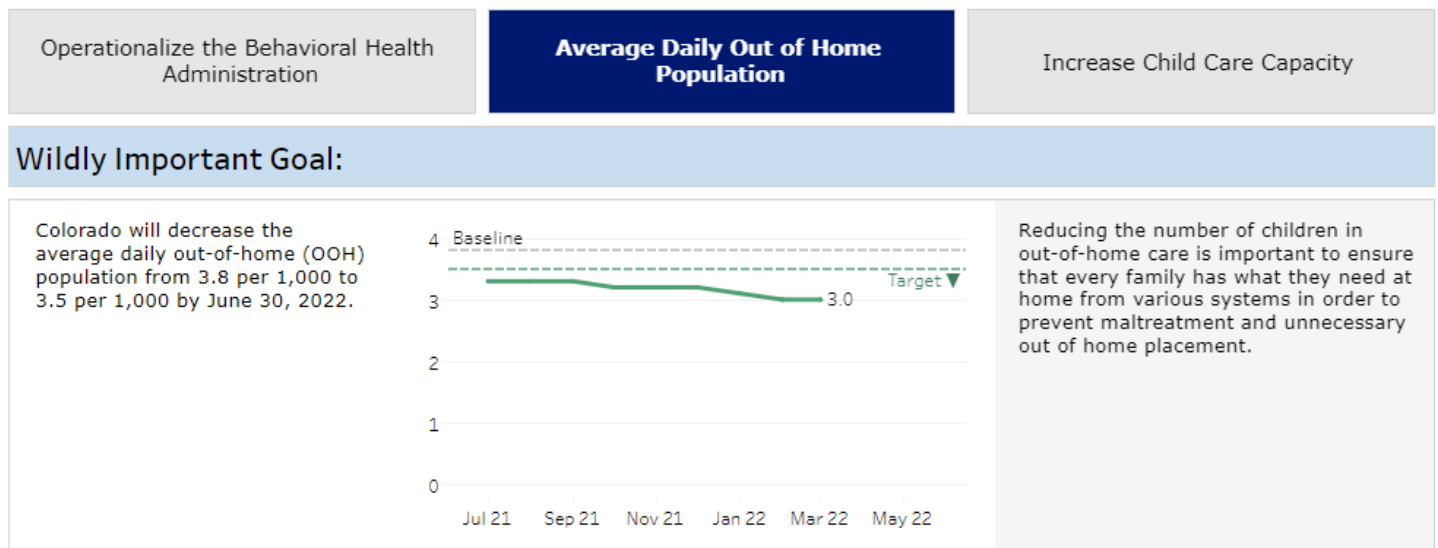


Successful completion of this goal will be the formation of a dedicated BHA to ensure a standard of high quality, integrated, people-first behavioral health care that's accessible to all Coloradans by July 1, 2024. Pursuant to HB 21-1097, the BHA will lead and promote the State's behavioral health priorities; provide the infrastructure needed to deliver on the 19 reform recommendations prioritized in the 2020 Blueprint; and be responsible for responding to the evolving needs of Colorado communities. This legislation also requires the State to make a recommendation of the BHA's permanent home by November 1, 2024.

2. **Cabinet Member WIG:** Colorado will decrease the average daily out-of-home (OOH) from 3.8 per 1,000 to 3.5 per 1,000 by June 30, 2022.

INCREASE	CY20	SFY21	Q1 SFY22	Q1 - Q2 SFY22	Q1 - Q3 SFY22	Q1 - Q4 SFY22
Goal:	<=3.8	<=3.8	<=3.5	<=3.5	<=3.5	<=3.5
Actual:	3.8	3.5	3.3	3.2	3.0*	N/A

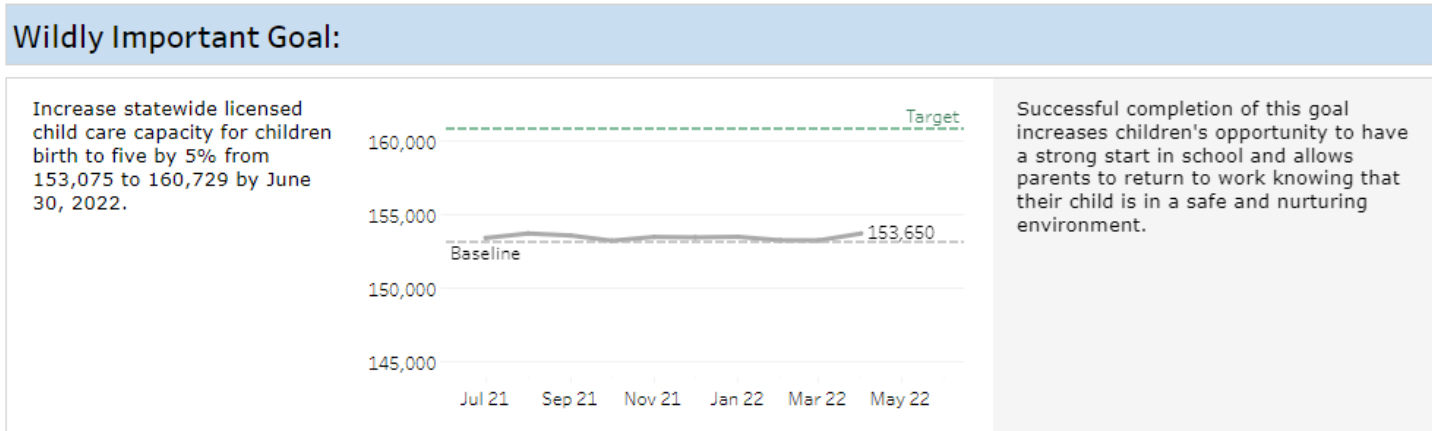
*Data represents performance for July 2021 - March 2022.



3. **Cabinet Member WIG:** Increase statewide licensed child care capacity for ages birth to five by 5% from 153,075 to 160,729 by June 30, 2022.

INCREASE	SFY20 Actual	SFY21 Actual	Q1 SFY22	Q1 - Q2 SFY22	Q1 - Q3 SFY22	Q1 - Q4 SFY22
Goal:	n/a	n/a	154,988	156,902	158,815	160,729
Actual:	n/a	153,075	153,516	153,385	153,182	154,250

*Data represents performance for May 2022.



Goal and Metric Overview

Behavioral Health Administration

SFY 2022-23 Cabinet Member Wildly Important Goals for the Behavioral Health Administration (BHA)

To emphasize and focus on specific areas highlighted in BHA legislation, the BHA has developed performance measures that are measurable, accountable, responsive, and transparent. In FY 2022-23, the BHA has the following Wildly Important Goals (WIG):

-
- Operationalize the Behavioral Health Administration:**
 - Part 1: Release BHA strategic plan, including vision, mission, values, and prioritized key actions through 2024, by January 31, 2023.
 - Part 2: BHA will work with counties to assess behavioral health system gaps by region; will monitor progress on promulgation of rules aimed at improving behavioral health service delivery; and will track progress and begin reporting on meeting regional behavioral health service needs,

starting in FY24.



2. **Improve Behavioral Health Access:** Implement access to care methodology for the safety net system and publicly report on baseline access metrics by June 30, 2023.



3. **Workforce Development:**
 - a. Part 1: Develop recommended strategies to address the behavioral health workforce shortage by September 1, 2022.
 - b. Part 2: To be finalized based on recommendations in the report.

SFY 2022-23 Behavioral Health Administration Cabinet Member WIG #1



Behavioral Health Administration Operationalize the Behavioral Health Administration

Why is it important?: Pre-COVID, three Coloradans died by suicide each day. The Colorado Crisis Line, the state's behavioral health hotline, has seen a more than 30% increase in total call and text volume during the pandemic. Although an estimated 1 million Coloradans have a behavioral health condition, Colorado ranks in the bottom half of states in access to care and has one of the highest suicide rates in the nation. Deaths from drug overdose also reached an all-time high in 2020, according to the Colorado Department of Public Health and Environment. House Bill 21-1097 required CDHS to submit a plan to create the BHA, including the integration or alignment with Medicaid and private insurance, by November 2021. House Bill 22-1278 establishes the functions of the BHA, including setting standards for accessibility and quality of safety net services, as well as accountability for providers. The Bill also outlines that the BHA will enter into formal agreements with State agencies for shared strategy, solutioning, data sharing and, where appropriate, the use of universal contract provisions for providers. The BHA is a new entity housed within CDHS but expected to operate as independently as possible while still relying on CDHS for administrative support. BH21-1097

requires the state to consider the BHA's permanent home, whether that is within CDHS or elsewhere, and make a recommendation by November 2024.

The BHA is taking a multi-year phased approach to establishing the BHA. The BHA will be 20% operational as of July 1st, 2022. Successful completion of this goal will be the continued operationalization of the BHA by June 30th, 2023 to achieve the vision of behavioral health services in Colorado that are accessible, meaningful, and trusted.

For more information about the Blueprint for Reform, please visit www.cdhs.colorado.gov/behavioral-health-reform.

Strategies for success: Strategies include establishing a strong footprint of internal and external engagement to support the ongoing change management process; continued execution of a communications plan; developing and executing a project implementation plan, and ongoing hiring for priority positions. Activities to advance these strategies include the Commissioner's statewide tour with external stakeholders; support for leadership development; frequent communication with internal and external stakeholders through print and media; a public-facing dashboard tracking BHA's progress in implementing the Governor's Behavioral Health Task Force's (BHTF) 19 priorities; and ongoing strategic meetings with the BHA's most essential partners, including CDHS and HCPF..

Performance Measure: Percentage completion will be tracked through strategies identified upon completion of the comprehensive implementation plan that is scheduled to be completed by June 30, 2023. There will be five lead measures to inform total progress towards the WIG.

Cabinet Member's WIG: Part 1: Release BHA strategic plan, including vision, mission, values, and prioritized key actions through 2024, by January 31, 2023. Part 2: BHA will work with counties to assess behavioral health system gaps by region; will monitor progress on promulgation of rules aimed at improving behavioral health service delivery; and will track progress and begin reporting on meeting regional behavioral health service needs, starting in FY24.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23	SFY 24	SFY25
Goal:	20%	TBD	TBD	TBD	50%	100%	TBD
Actual:	20%						

Lead Measure #1: Launch Advisory council by Oct 1, 2022.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	100%	n/a	n/a	n/a

Actual:	n/a				
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Lead Measure #2: Release BHA strategic plan, including vision, mission, values, and prioritized key actions through 2024, and a criminal justice work plan by June 30, 2023 to further prevention, promotion, treatment and recovery, and equity for Coloradans.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	25%	50%	75%	100.0%
Actual:	n/a				

Lead Measure #3: Publish online care directory by August 31, 2022.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	100.0%	n/a	n/a	n/a
Actual:	n/a				

Lead Measure #4: Launch the Cabinet interagency governance council by October 1, 2022.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	50.0%	100.0%	n/a	n/a
Actual:	n/a				

Lead Measure #5: Develop BHE rules, standards and licensure changes by April, 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	20%	40%	70.0%	100.0%
Actual:	n/a				

SFY 2022-23 Behavioral Health Administration Cabinet Member WIG #2



Behavioral Health Administration Improve Behavioral Health Access

Why is it important?: This WIG is directly aligned with the BHTF’s goal of improving access to equitable behavioral healthcare. Timely access to equitable care is expected to improve wellbeing for marginalized communities and those experiencing geographic disparities in accessing behavioral healthcare. Access to care was identified as the #1 concern of stakeholders during the 2-year engagement process of the BHTF. There is currently no existing state model for accurately assessing access to behavioral health services.

Strategies for success: A newly established framework will measures access to care across three domains: (1) Provider availability and accessibility (potential access); (2) Utilization of mental health and substance use care among all Coloradans (realized access and access-related outcomes); and (3) Coloradan perceptions and experiences (based on self-reported data to provide insights about foregone or delayed care and provider-consumer interactions).

Performance measure: According to research by HMA, no state has developed a sure mechanism of measuring access to behavioral health care across all payers. Each domain identified under “Strategies for Success” has a measure of access to care across four levels of care delivery, from the individual and family perspective to the provider, network, and state perspective. Assessment of access to care at each level of care delivery will help the state identify where the challenges exist to develop targeted solutions.

Cabinet Member WIG: Implement access to care methodology for safety net system and publicly report on baseline access metrics by June 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23	SFY 24	SFY 25
Goal:	n/a	TBD	TBD	TBD	50%	100%	TBD
Actual:	0%						

SFY 2022-23 Behavioral Health Administration Cabinet Member WIG #3



Behavioral Health Administration Workforce Development

Why is it important?: Supporting a diverse, culturally responsive workforce will improve engagement of all Coloradans, and especially marginalized populations, in behavioral healthcare. Reduced access to behavioral health services is inextricably linked to dire workforce shortages that have plagued our state, and the nation. According to a 2018 report, CO had 22 psychiatric workers per 100,000 residents; and more than 2.5 million Coloradans — nearly 40% of the population — live in an area with a shortage of behavioral health workers.

Strategies for success: BHA to create and implement a behavioral health-care provider workforce plan by September 1, 2022. The plan must include recruitment methods to increase and diversify the behavioral health workforce; prepare future provider workforce for public sector service; recruit residents of health professional shortage areas; create career advancement opportunities; and expand the peer professional workforce. DORA will make recommendations to extend credentialing requirements and address licensing challenges. The BHA to standardize workforce requirements and increase utilization of unlicensed providers; reduce administrative burden; and establish evidence-based treatment and criminal justice training curriculum and certification. The FY23 WIG focuses on workforce recruitment. The FY24 WIG will focus on workforce training and expansion.

Performance measure: Successful completion of this goal will prepare a behavioral health workforce to provide culturally appropriate services that meet the needs of Coloradans from diverse backgrounds. Priority populations/topics include training on justice-involved individuals, individuals with disabilities, trauma-informed care, and Native American health. This WIG addresses stakeholder concerns about the lack of a culturally competent behavioral health workforce, ranked 3rd highest behind access to care and lack of timely services, in the state's 2020 Blueprint to Behavioral Health Reform.

Cabinet Member WIG: Part 1: Develop recommended strategies to address the behavioral health workforce shortage by September 1, 2022. Part 2: To be finalized based on recommendations in the report.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23	SFY24	SFY 25
Goal: 100%	n/a	20%	30%	40%	50%	100%	TBD
Actual: n/a	0%						

Lead Measure #1: Hire BHA Workforce Development Officer by August 31, 2022.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal: 100%	n/a	100%	n/a	n/a	n/a
Actual: n/a	0%				

Lead Measure #2: Complete BHA Workforce Development Plan by Sep 1, 2022.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	100%	n/a	n/a	n/a
Actual:	0%				

Lead Measure #3 : Launch BHA Learning Management System by June 30, 2023.

INCREASE	SFY22	Q1 SFY23	Q1 - Q2 SFY23	Q1 - Q3 SFY23	Q1 - Q4 SFY23
Goal:	n/a	25%	50%	75%	100.0%
Actual:	0%				