Denver Human Services
peak performance presentation

2014 Performance Review
2015 Innovation Planning
Partnering with our community to protect those in harm's way and help all people in need

**Assistance**
- cutting edge practice
- responsive customer service
- collaborative community partners

**Protection and Prevention**
- responsible financial management
- superior workforce development
2014 & 2015 Agency Direction
Objectives

Create an atmosphere that encourages a work/life balance by effectively managing workload

Leaders exemplify the attributes of the DHS leadership model

Strategies

Ensure leaders have and use the skills/tools needed to engage people and move them to action through direct communication, modeling and coaching

Leadership journey assessment and training modules

Goals

Voluntary Separation Rate: 6.5%

Positive responses on survey: 73%

Sponsor: Andrea Albo
Owner: OHR Lead
Process

Objectives

Leader Standard Work (LSW) is utilized
Operational Standard Work (OSW) is utilized

Strategies

Leader Standard Work training and mentoring
Operational Standard Work training, workshops and mentoring

Goals

Sponsor: Mitch McKee
Owner: Georgia Howard

100% All leaders are trained
2 Processes per division
Practice

Project: Data & Metric Infrastructure

Create and implement a data infrastructure to ensure that metrics and information are identified, documented, validated and utilized.

- Proactive to solutions - increased forward focus and use of predictive analytics.
- Proven and repeatable - processes and projects don’t come to a stop.
- Consumed and utilized by all levels of the organization.
- Consumed and utilized by all levels of the organization.

Goals

- Adhoc Data Requests: 10%
- State/Federal Quality Standards: 95%
- State/Federal Timeliness Standards: 95%

Sponsor: Jeff Holliday
Owner: Aaron Gabler
### Mission Level Metrics

#### Assistance

<table>
<thead>
<tr>
<th>Performance Measure:</th>
<th>Goal</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Timeliness:</strong> Percent of assistance program applications (excluding Child Support Services) that are processed within federal timeliness guidelines</td>
<td>&gt; 95% CDHS</td>
<td>88.5</td>
<td>91.5</td>
<td>93.6</td>
<td>95.3</td>
</tr>
<tr>
<td><strong>Outreach:</strong> Number of Denver residents receive SNAP (Food Assistance)</td>
<td></td>
<td>101,316</td>
<td>100,800</td>
<td>101,487</td>
<td>105,447</td>
</tr>
<tr>
<td>Number of Denver residents receive Medical Assistance</td>
<td></td>
<td>99,191</td>
<td>125,910</td>
<td>158,347</td>
<td>179,159</td>
</tr>
<tr>
<td><strong>Administrative Efficiency:</strong> Percent of administrative overhead to distribute assistance benefits to families and children</td>
<td>&lt; 19% DHS</td>
<td>20.2</td>
<td>19.1</td>
<td>18.2</td>
<td>17.2</td>
</tr>
<tr>
<td>Percent of owed court ordered child support obligations that were collected and distributed to families.</td>
<td>&gt; 66% CDHS</td>
<td>59.8</td>
<td>59.0</td>
<td>59.6</td>
<td>60.6</td>
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</tbody>
</table>

* projections based on Jan and Feb 2015
<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Goal</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prevention of Re-Abuse</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Percent of children who experienced founded abuse or</td>
<td>&gt;94.6% Fed</td>
<td>95.5</td>
<td>93.8</td>
<td>95.4</td>
<td>96.4</td>
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<tr>
<td>neglect did not experience repeat founded abuse or</td>
<td></td>
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<tr>
<td>neglect within 6 months</td>
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<td><strong>Family Preservation</strong></td>
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<td></td>
<td></td>
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<tr>
<td>Percent of children initially served in their own home</td>
<td>&gt;85% CDHS</td>
<td>72.7</td>
<td>70.3</td>
<td>69.0</td>
<td>70.0</td>
</tr>
<tr>
<td>were not placed outside the home anytime during case</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>involvement</td>
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<tr>
<td><strong>Responsiveness</strong></td>
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<td></td>
</tr>
<tr>
<td>Percent of alleged child victims were seen within</td>
<td>&gt;90% Fed</td>
<td>89.1</td>
<td>91.4</td>
<td>87.4</td>
<td>85.0</td>
</tr>
<tr>
<td>federal guidelines for initial response</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>**Percent of Adult Protection referrals were responded</td>
<td>&gt;85% DHS</td>
<td>88.1</td>
<td>98.8</td>
<td>99.0</td>
<td>99.5</td>
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<tr>
<td>to within 3 days</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td><strong>Well Being</strong></td>
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<td></td>
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<tr>
<td>Percent of children requiring monthly face-to-face</td>
<td>&gt;90% CDHS</td>
<td>90.9</td>
<td>93.4</td>
<td>91.4</td>
<td>93.0</td>
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<tr>
<td>contacts are seen as expected and documented according</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>to ARD guidelines</td>
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</tbody>
</table>

* projections based on Jan and Feb 2015
Vital Signs

- 1012 employees

- Leave
- Overtime
- Net
- Claims

### Claims

<table>
<thead>
<tr>
<th>Year</th>
<th>Worker's Comp Claims</th>
<th>Worker's Comp Claims, Average Cost/Claim</th>
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</thead>
<tbody>
<tr>
<td>2011</td>
<td>84</td>
<td>$4,922</td>
</tr>
<tr>
<td>2012</td>
<td>75</td>
<td>$5,203</td>
</tr>
<tr>
<td>2013</td>
<td>76</td>
<td>$4,189</td>
</tr>
<tr>
<td>2014</td>
<td>69</td>
<td>$17,147</td>
</tr>
</tbody>
</table>
Today 79 employees are eligible to retire. By this time next year 124 will be eligible and 193 will be eligible in 5 years.
Driver Areas for Improvement

**Big Picture**
Understanding of how my work relates to the success of the City

**Appreciation, Worthwhile Labor**
Supervisor expresses praise and appreciation for a job well done

**Service Model**
DHS continues to improve service delivery to customers

Tactics

**Operational standard work**
**Leader standard work**
**All staff meetings - relay direction, goals, strategies**

**Viewmasters - Monthly awards**
**Supervisionary and Spotlight Award**
**Oscars - recognition for staff exemplifying values**
**Celebrations of Milestones - flow cells, division successes**

**One Denver - Assistance**
**360 Beta project - Protection and Prevention**
**Strengthen internal communications**
Employee Engagement

Internal Survey
Goal: 73% positive responses

Leaders' Ultimate Role:
Engagement

Quarter 1: 65%
Quarter 2: 60%
Quarter 3: 59%
Quarter 4: 61%
Resource Investment

Work with healthcare providers (including Denver Health) to ensure that 95% of Denver residents have access to primary medical care

Projected Contribution to Meeting 2020 Goal

As a result of ACA, Denver’s Medical Assistance caseload has growth month over month by 4% since October 2013

Key Assumptions

Before ACA approximately 108K people in Denver (1 in 5) lacked health insurance

Benchmarks and Status

Since ACA, 71K uninsured Denver residents gained access to health care through the expansion of Medicaid and Connect for Health Colorado insurance plans

DHS has built creative strategies to support the increases: DSD partnership, proactive outreach, geomapping, mobile unit
One Denver Customer Experience Assistance

Coordinated process improvement effort with DHS LEAN team, Colorado Department of Human Services and the Change and Innovation Agency to promote following tenants:

- Same Day Service
- One by one processing
- Real-time data
- Pull work

Non Custodial Parent Express Card

In June 2014 our Child Support team implemented a pilot approach to the walk-in payment process for non-custodial parents. By December, we issued 318 payment cards and decreased wait times by 91%.

91% Wait Time Reduction
Congregate Care Bed Day Reduction

DHS accounted for 45.5% of the statewide reduction of bed days for children in out of home placement.

Customer Experience
Protection and Prevention

360 Beta Teams

A paired team of staff including a lead worker, intake, ongoing and youth services workers that can provide the full array of services available to a child and family throughout the life of that family’s active case with the Department.

360

Denver
Big 10 Counties
Balance of the State

49.1%
45.5%

$927,000
IVE Waiver Funding

$813,555
91
Adult Protection Representative Payee Clients
State of the City

SNAP into Health

- Healthy living:
  - Farm stand
  - Food deserts

- Access to benefits:
  - Mobile unit
  - Kiosks
  - Out-stationed staff

SafeCare

- Collaborative partnerships:
  - Navigator trainings
  - Behavioral health navigator
  - Financial empowerment center
  - Career Online High School

71 referrals in 2014
SLIDE 1
Introduction of Peak Performance Steering Committee
Andrea Albo, Jeff Holliday, Mitch McGee, Michelle Harper, Georgia Howard, Aaron Gabler

SLIDE 2 – STRATEGIC PLAN OVERVIEW
The two primary DHS goals are Assistance and Protection & Prevention. Everything we do is aimed at improving performance in these areas. We do this through five strategies that cut across both goals: Our innovations run across all five strategies
1. Cutting edge practice: an example is Lean business process improvement efforts over the last 3 years.
2. Responsive Customer Service: same day: VOICES
3. Collaborate with Community Partners: tactic example is the work with the State or partnerships with other city agencies OED, DSD, DPL
4. Responsible Financial management: tactic example is a balanced budget and healthy fund balance
5. Workforce Development: tactic example is the DHS Leadership Model or the Ascend Leadership Academy

Each strategy has identified tactics to support positive movement in reaching the strategic goal

SLIDE 3 - 2014-15 AGENCY DIRECTION
People.Process.Practice
We are continuing the 2014 theme with key objectives and strategies in each category.

SLIDE 4 – PEOPLE
This year each category has a designated Executive Sponsor and Process Owner to ensure that we stay on track and are leading by example.

We’ve learned, through our LEAN work that supervisors and managers do not always have the skill set to manage change and innovation. As we work towards creating the workplace that encourages work/life balance we want to help build the skills needed by supervisors and managers. The third cohort of our Leadership Development just began and includes an assessment and associated training.

We’re also focusing on coaching this year and are rolling out training and skill building sessions with mentoring that will equip leaders to respond as they build skills and support personal development and support staff development.

GOALS – 6.5% voluntary separation rate; 73% positive responses on our quarterly survey which I’ll discuss later in the presentation.
The DHS voluntary separation rate is 11.4 as compared to the Citywide rate 6.5%. In our discussions with OHR and what we’ve observed we know that while many come to DHS to help people – they find the training and complexity of programs overwhelming and chose not to stay. Others complete training and are wooed away by other counties and sometimes the State. And as we work to change the culture, to promote accountability, some make the decision to seek opportunities elsewhere. Finally, our work is not easy. Our caseloads in some areas continues to increase and we believe that burnout also results in people leaving the agency.

SLIDE 5 – PROCESS
We’re expanding Leader and Operational Standard Work across the department and are committed to ensuring that new staff is equipped as they begin their careers. LSW is a 4 day workshop supported by mentoring by a LEAN facilitator. Operational Standard Work topics are chosen by the division and are completed in a 4 day workshop with support from the LEAN team.

Goals – train all leaders; complete 2 processes per division this year

SLIDE 6 – PRACTICE
Our data work will identify the pertinent data needed across the agency and provide the infrastructure to produce the right reports, support analysis to identify trends and drive decision making for changes and improvement. We want to implement an infrastructure that is proven and repeatable, used across all levels of the organization and helps look forward as well as capture data in time and past performance.

GOALS - We hope to reduce the adhoc data requests to 10% and maintain our timeliness and qualitative measures.

SLIDE 7 – ASSISTANCE MISSION LEVEL OUTCOME METRICS
Timeliness – Goal is to complete 95% of applications on a timely basis as defined by federal guidelines. This goal has been impacted by the Affordable Care Act as well as the launch of One Denver, which I’ll talk about later. We’ve seen a 42% increase in medical assistance since Oct. 13 (approximately 2500 applications/month).

Outreach - We’ve modified the original outreach metrics to show numbers served which is more representative of what we’re seeing in growth.

Administrative Efficiency – We’ve made some progress on this goal.
Child Support Collection – The State increased this goal in January – from 61% to 66%, which is a stretch goal. Child Support’s current caseload is 25-26,000 active cases. We’ve seen some progress as we’ve had a leadership change and an OSW event that looked at a set of cases that historically, were hard to collect. Revisiting these cases has seen an increase in collections of $500,000 over the last several months.
SLIDE 8 – PROTECTION AND PREVENTION MISSION LEVEL OUTCOME METRICS:

We’ve made positive strides in the prevention of re-abuse as seen here – (strategies include engaging families more actively around preventative work.)

Family preservation: Try to keep child in the family while treatment is provided. This metric is currently undergoing changes in the way it is being calculated at the state level. The primary reason for this is because it relies on counting children after their case has closed. That means the result is more an indicator of historical practice than current. So, this metric tells us a lot about how we were practicing nearly a year and a half ago, but little about how current process improvements may be influencing practice.

Responsiveness: Referral & Assessment activity follows a seasonal pattern. We typically see an uptick in activity in the Spring and Fall in conjunction with the beginning and end of school sessions. This metric is also significantly impacted by staffing patterns. In 2014 the Child Welfare Division replaced 16 caseworkers and 3 supervisors, all in the area that oversees assessments. The Child Welfare Division went into the Fall, historically its busiest time; with its highest vacancy factor of the year, with 7 vacancies.

Adult protection changes -mandatory reporting began last year and we’ve seen a 15% increase in referrals and are performing well.

Well Being: Administrative Review of out of home kids (federal requirements). This is a quantitative and qualitative metric and documentation is part of what drives this measure.

SLIDE 9 – VITAL SIGNS:

DHS has 1012 employees which equates to approximately 2.1 million work hours available in a year. One of the factors not included in the charts is training.

Assistance training hours –

- A new worker goes through 256 hours of new worker training (or 8 weeks – during training weeks Fridays are spent with supervisors), which begins as a foundations training of system navigation and food assistance policy track.
- In order to complete the remaining cash and medical program policy and system trainings, additional training hours are required. Depending on the program combination this could mean an additional range of 344-408 additional training hours added to follow the new worker training track.
- All training tracks are designed to offer on the job application in between trainings to allow the employee an opportunity to exercise their new knowledge under intensive shadowing by trainers and lead workers. Full program and system proficiency takes place by a 12 – 18 month timeframe.

Protection and Prevention training

108 hours in the State training academy; 40 hours annual training required

Total hours not worked is approximately 8% of available hours. We have used overtime, time-limited staff and creative funding to manage caseload as well as meet some of our metrics (timeliness).

Claims – largest area of claims is “overexertion”, followed by “slip-trip-falls”. We’ve had some success by getting early ergonomic assessments done before pain warrants a claim. Our Safety Officer is working hard on educating staff on preventative measures. We’ve also focused on snow and ice clearing efforts to impact the number of “slip-trip-falls” we’ve seen in previous years. The spike in 2014 is a result of a single claim involving a car accident.

SLIDE 10 – VITAL SIGNS:

We’ve included retirements as one of the vital signs to watch at DHS.

Eligible: 124 employees eligible for retirement in the next year (between now and March 2016 – 79 of those can retire now). That number goes up to 193 in the next five years; OHR tells me that generally, people leave about 2 years after they become eligible.

We are working on succession planning in a couple of different ways:

- We’ve developed and launched the DHS Leadership model that includes an assessment and modules of training. The third cohort for that training begins this month.
- The DHS Leadership Model includes 6 performance factors and performance descriptions. Organizational Leadership and Navigation; Standards and Values; Collaborative Partnerships; Workforce Development; Critical Evaluation, Process & Project Management. The pillars of the model are used in recruiting, workforce development and succession planning.

Ascend Leadership Academy: Launched in 2012 - internal leadership program focused on fostering leadership development among its employees. The purpose of Ascend Leadership Academy is to build strong leaders who will then make great contributions to DHS and the Denver community. The program consists of 12 workshops that take place twice a month for 2 hours and a graduation ceremony. We’ve graduated 3 classes of 64 employees.

SLIDE 11 – EMPLOYEE ENGAGEMENT

DHS had a 4.9 point increase in engagement in 2013

Our tactic to drive employee engagement was the implementation of LEAN in 2012. Drivers for Improvement:

Big picture – understanding my role and how my work relates to the success of the City OSW, leadership development; increased communication in all staff meetings

Appreciation – praise and recognition
- View masters; monthly awards; Oscars, division level celebrations; 5281 awards

Service model – continuous improvement
- One Denver; 360 teams; LSW, OSW
NCP payment card – created by one of our Black Belt supervisors. Child Support Services team created and implemented the new kinship support services for kids and families.

DHS applied to the State to participate in the IVE Waiver funding – using federal funds to provide additional family engagement and share lessons learned.

Innovation happens at all levels of the organization and we are highlighting two in the assistance area. One Denver – implemented as a result of our work with the Change and Innovation Agency, a contractor brought in by the State to work with counties on business process improvements. This model includes same day service, requires staff to pull work and process one-by one instead of work assigned to staff. As you can see, our transaction and average handle time is going down, pointing to efficiencies in service delivery.

DHS applied to the State to participate in the IVE Waiver funding – using federal funds to provide additional family engagement and share lessons learned.

The NCP payment card – created by one of our Black Belt supervisors. Child Support Services team created and implemented the new process which means our customers have a more positive experience in providing financial support for kids and families. The new process also builds engagement with our staff and supports the child support program goals.

SLIDE 13 – CUSTOMER EXPERIENCE

Focus of the state is to reduce the number of kids in congregate care settings because we know kids do better if they can stay at home are with kin. We increased our family engagement with VOICES meetings to identify lower level solutions and also increased kinship activities by actively seeking other relatives to care for kids.

360 Beta Teams: a supervisor oversees a team of: 1 lead worker, 2 intake (Assessment) workers, 2 ongoing workers, and 2 youth services workers. A Paired Team is capable of providing the full array of services available to a child and family throughout the life of that family’s active case with the Department, as opposed to a traditional model where services are compartmentalized and require multiple hand-offs as the family progresses through different phases of its case.

Advantages:

Among its many advantages, including staff development (cross-training), and less hand offs (the family has only one supervisor to call); each team will be responsible for all types of cases that enter the system. Because of this, we can track high-performing teams and share lessons learned.

DHS applied to the State to participate in the IVE Waiver funding – using federal funds to provide additional family engagement and kinship support services for kids and families.

Denver is one of 18 counties providing representative payee services. A rep payee is an individual or organization appointed by the Social Security Administration to receive Social Security and/or SSI benefits for someone who cannot manage or direct someone else to manage his or her own money. These services are prevention and protection service for those who could be at risk for neglect and exploitation. Total dollars managed in 2014 for those 91 clients = 813,555.

SLIDE 13 – SUSTAINABILITY

Of the 2020 sustainability goals, DHS directly impacts the health goal of working with healthcare providers to ensure that 95% of Denver residents have access to primary medical care. You may have seen the press release that went out this week indicating that 94% of Denver residents have health insurance. The five year goal was close to being met by the end of the second year of open enrollment. We’ve seen an average 4% caseload growth/month since implementation of the ACA (equates to a 2.0% growth in number of clients/month). We will also take on approximately 20,000 additional medical cases this year as cases are transitioned from Maximus (3rd party vendor with the State) to our department.

In 2012, DHS developed a comprehensive initiative, that we’ve branded SNAP Into Health, aimed at developing a wrap around service approach to the Denver community. SNAP Into Health unites DHS programs with a variety of community resources that strive to build long-term self-sufficiency for individuals the communities that need it the most. The vision is to focus on building strategic tools that support three key areas: promoting healthy living, improving access to services, and strengthening our collaborative partnerships. Over the past few years, we have seen lots of positive impacts in big ways in how we serve our community through SNAP Into Health. Some highlights within each key area include:

- Healthy living: promoting access to healthy foods by way of our seasonal Farm Stand we implemented in 2014 in partnership with the Denver Botanic Gardens. Provides onsite access at our office (a current food desert area) for our community to purchase a variety of fresh foods using their SNAP benefits or other methods of payment. We are expanding this program at all 3 of our locations this year.
- Improving access to enrollment: in partnership with City GIS team, we’ve geo-mapped and prioritized Denver’s top five zip codes for our eligible but not enrolled (EBNE) populations in our food and medical assistance programs. Proactive and strategic outreach occurs through our mobile unit, in partnership with Hunger Free CO; kiosks strategically placed in EBNE zip codes where navigator training has occurred, and building onsite enrollment at partner sites to include the two Denver City jails.
- Collaborative partnerships – We trained 1,268 navigators across 192 community partner organizations since 2012. Beyond
what DHS can provide, we have inventoried other organizations that offer resources to compliment and supplement the needs of our community. These include: shelter, food pantries, nutrition education, counseling services, and job training.

- We have also built in an onsite role of a Behavioral Health Navigator committed 100% to DPL, intended to serve as a resource to address the unique needs of behavioral health and substance abuse issues that often arise.
- We also serve as a hub site for the DOSP Financial Empowerment Center that offers free financial literacy one-on-one sessions aimed at building tools that can aid in long-term self-sufficiency for our customers and staff.
- A key partnership strategy we’d like to highlight is the work we’ve engaged in with DPL leadership. In January, Denver launched the Career On-line High School Diploma Program including a partnership between DHS, DPL and OED. This program will provide a unique opportunity to individuals who are seeking to complete a HS diploma in lieu of a GED – making them more marketable to gaining meaningful employment and earning higher wages.
- Partnership with Jefferson County and Savio to implement the SafeCare program which provides services to families to prevent them from entering the child welfare system. If we receive a referral that doesn’t meet the definition of abuse or neglect and we have concerns about children in that referral we can refer them to SafeCare for in-home, skills training that targets child health, home safety and parent-child interaction.