Department of Environmental Health
Peak Performance 2.0 Review
April 22, 2014
2013 Performance Review
2014 Innovation Planning
• Welcome and introductions (5 minutes)
• DEH Overview (15 minutes)
• Performance Management and Innovation (1 ¼ hours)
• Employee Engagement and Succession Planning (30 minutes)
• Accomplishments and Challenges (15 Minutes)
• Takeaways and next steps (15 minutes)
• Q&A (15 minutes)
Healthy Communities

- Healthy People
- Healthy Places
- Healthy Environment
- Healthy Pets
- Healthy Planet
Department of Environmental Health: Agency-Wide Values

- **Education and Prevention**
  - Public Health Education
  - Mass Communication
  - Community Outreach
  - Sharing Expertise

- **Great Place to Work**
  - Internal Communication
  - Employee Engagement
  - Staff Recognition
  - Teamwork

- **Professional Excellence**
  - Collaboration
  - Engagement
  - Agency Partnerships
  - Community Partnerships

- **Excellent Customer Service**
  - Timeliness
  - Accessibility
  - Efficient Processing
  - Cultural Competence
  - Consistent Regulation

- **Positive Community Outcomes**
  - Attaining Division Goals
  - Achieving Mayor’s Priorities
  - Effecting Social Change
  - Achieving Health Equity
Strategic Plan Overview

Mission: Building Healthy Communities

Goal 1.00: Healthy People
- Strategy 1: Improve Denver’s standing as a healthy city
- Strategy 3: Improve services to families by reducing autopsy reporting time to 30 days for most cases.

Goal 2.00: Healthy Places
- Strategy 1: Reduce the incidence of critical violations in regulated facilities
- Strategy 2: Provide exceptional customer complaint response

Goal 3.00: Healthy Environment
- Strategy 1: Improve Air Quality to Meet all National Standards
- Strategy 2: Improve Water Quality to be Fishable/Swimmable by 2020

Goal 4.00: Healthy Planet
- Strategy 1: Reduce per capita Greenhouse Gas Emissions to 1990 Levels by 2020
- Strategy 2: Improve resource conservation-reduce energy & water use and landfill waste
- Strategy 3: Implement and Certify Environmental Management System (EMS) in all City agencies

Goal 5.00: Healthy Pets
- Strategy 1: Increase shelter live release rates
- Strategy 2: Improve customer experience
- Strategy 3: Increase license compliance
PERFORMANCE MANAGEMENT AND INNOVATION
Legend – What do the symbols mean

- **Current metric meets or exceeds the goal or standard**
- **Current metric is within an order of magnitude of the goal or standard**
- **Current metric is outside of an order of magnitude of the goal or standard**
- **Current metric is trending positively from the last reporting period (making progress towards the goal or standard)**
- **Current metric is trending negatively from the last reporting period (moving away from the goal or standard)**
<table>
<thead>
<tr>
<th>Current Measure</th>
<th>Performance Measure</th>
<th>Progress</th>
<th>Last Measure 2012</th>
<th>Standard Set By</th>
<th>Goal/Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Rankings vs. Peer Counties...</td>
<td></td>
<td>8</td>
<td>County health data is collected by the Robert Wood Johnson Foundation for its Community Health rankings</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>▪ Premature deaths per 100,000</td>
<td></td>
<td>6</td>
<td><a href="http://www.countyhealthrankings.org">www.countyhealthrankings.org</a> and <a href="http://www.healthindicators.gov">www.healthindicators.gov</a> for CVS disease.</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>▪ Cardiovascular deaths per 100,000</td>
<td></td>
<td>6</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>▪ Poor physical Health days past 30 days</td>
<td></td>
<td>7</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>▪ Poor mental health days past 30 days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4176</td>
<td>Number of clients accessing HIV/AIDS Services</td>
<td></td>
<td>4195</td>
<td>Internal measure based on utilization rates</td>
<td>4230</td>
</tr>
<tr>
<td>1.67</td>
<td>Critical Violations per Inspection in Restaurants</td>
<td></td>
<td>1.64</td>
<td>This standard is set internally by the division of Public Health Inspections</td>
<td>1.5</td>
</tr>
<tr>
<td>85 (48% of days with data)</td>
<td>Visibility: Number of days rated “Good” or “Fair”</td>
<td></td>
<td>146 (67% of days with data)</td>
<td>State standard</td>
<td>68%</td>
</tr>
<tr>
<td>45%</td>
<td>Water Quality: Percent of streams safe for recreation</td>
<td></td>
<td>55%</td>
<td>2020 Sustainability goal. Compared to CO E. coli WQ standards</td>
<td>52%</td>
</tr>
<tr>
<td>91%</td>
<td>Shelter live release rates</td>
<td></td>
<td>84%</td>
<td>ACC</td>
<td>89%</td>
</tr>
<tr>
<td>36%</td>
<td>Percent difference in sheltered animals adopted</td>
<td></td>
<td>11%</td>
<td>ACC</td>
<td>26%</td>
</tr>
<tr>
<td>26%</td>
<td>Percent of animals reunited with owners</td>
<td></td>
<td>13%/25%</td>
<td>ACC</td>
<td>28%</td>
</tr>
<tr>
<td>19%</td>
<td>License compliance</td>
<td></td>
<td>19%</td>
<td>ACC</td>
<td>19%</td>
</tr>
<tr>
<td>11,227,478 kWh</td>
<td>Energy (Kwh) saved through EQ programs</td>
<td></td>
<td>13,500,000</td>
<td>EQ</td>
<td>9,600,000</td>
</tr>
<tr>
<td>80.1% (94.8%)</td>
<td>Percent of all Autopsy reports completed within 60 (90) days</td>
<td></td>
<td>76% (95%)</td>
<td>National Association of Medical Examiners and College of American Pathologists</td>
<td>50% within 30 days 90% within 60 days</td>
</tr>
</tbody>
</table>
The program will track and report on the following measures. Those in gray are being developed/baselined:

<table>
<thead>
<tr>
<th>Current measure 2013</th>
<th>Performance Measure</th>
<th>Progress</th>
<th>Last Measure 2012</th>
<th>Standard Set By</th>
<th>Goal / Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>31% of DPS students were overweight and obese in 2013</td>
<td>Percent of overweight/obese children</td>
<td>🟢</td>
<td>32% of DPS students were overweight and obese</td>
<td>Denver Community Health Improvement Plan</td>
<td>26% overweight &amp; obese</td>
</tr>
<tr>
<td>14%</td>
<td>Percent of Physical Inactivity</td>
<td>🟢</td>
<td>16%</td>
<td>County Health Rankings by The Robert Wood Johnson Foundation and <a href="http://www.healthindicators.gov">www.healthindicators.gov</a></td>
<td>15%</td>
</tr>
<tr>
<td>To be baselined</td>
<td>Routine Consideration of Health</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>To be baselined</td>
<td>Number or percent of CHIP HEAL deliverables completed in government domain</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>To be baselined</td>
<td>Stakeholder Engagement</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>To be baselined</td>
<td>Number of plans completed &amp; recommendations adopted &amp; implemented</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

- In 2014, the Community Health and Environmental Quality Divisions are due to complete 3 HIAs: 1) Elyria/Swansea (May 2014); 2) Globeville (May 2014); and 3) Westwood (Initiating latter part of 2014)
- Program Goals include: 1) Informing development and neighborhood planning; and 2) Help create healthier communities by addressing the root causes of prominent health problems
- A Program Administrator position was transferred from Environmental Quality to oversee the HIA Program in Spring 2014. Recruitment is underway.
Opportunity Analysis

Close to or Exceeding Goal

- HIV/AIDS Services Program
- Violations per inspection in the Food Inspection Program
- Animal Live Release Rate & Adoptions
- Health Impact Assessments
- Internal Facility Compliance
- OME Hard Copy Conversion to Electronic Medium
- Various JDIs
- Healthy Families/Healthy Homes Program Information Automation
- Autopsy Report Processing
- PHI Workload/Staffing Analysis
- Needle Exchange Program

Lower Priority

Mission Critical

Strong ROI Potential
Innovation Plan

Current Year
- DEH has 16 Black Belts, 7 (47%) have fulfilled “Meets Expectations” requirements
- DEH has trained 82 employees as Green belts
- DEH Management Team undergoing training through Executive Training Program

Completed Innovations

Public Health Inspections (PHI)
- Completed Workload/Staffing Analysis (see following slides)
- Revised construction approval process reducing license approval times from 5 days to 1 day

Office of the Medical Examiner (OME)
- Autopsy Process and Report Completion streamlined to meet goal of shortened turn-around time

Animal Care & Control (ACC)
- 46 Green Belts and 9 Black Belts (100% of ACC staff trained).
- 2 VSAs resulting in 4 RIEs. All 4 RIEs completed in less than one year. 2 JDIs completed. Total identified savings equals $499,888. Actualized savings equals $211,730.
- Key improvements include standard work on the animal intake process for each section of the shelter, the elimination of the behavior status backlog and standard work for the behavior status process, elimination of the administrative citation backlog and the creation of an administrative citation flow cell. 50% of ACC has participated in an RIE.

Executive Directors Office (EDO)
- Completed 4 JDIs in citation payment (2), citation appeals and IT data repository processes.
Innovation Plan

Environmental Quality (EQ)

- Environmental Capital Fund (ECF)
  - Seed Capital Fund was predecessor
  - Evaluated fund – projects, impact, effectiveness
  - Modified fund in 2013 to create ECF
    - Integrate with CIP
    - Multi-departmental selection team
    - Focus on environmental and city liability issue

EDO:

- Support Unit: Completed 4 JDIs (3 citation process related, 1 IT) and 1 project. Currently finalizing 3 additional JDIs in the Citation Appeals process (improve collections, citation database integrity, cash management)
- Communications Office: Completed re-design of Be Healthy Denver site, comprehensive re-design of DEH internet and intranet web-sites, risk/crisis communications plan and Social Media Audit and Social Media policy

Community Health (CH)

- Improved inventory control for office supplies
- Worked with Peak Performance to make mission, vision, and goals clearer

Long-term

- Centralize DEH Peak Performance Program in Executive Directors Office with focus on strategic innovation efforts
- Map all major DEH Value Streams
- Additional Black and Green Belts to be trained DEH-Wide
<table>
<thead>
<tr>
<th>Key SRA Recommendation</th>
<th>Implementation Status</th>
<th>Mission Level Metric Impact</th>
<th>Projected Savings</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extend shelter hours</td>
<td>✓</td>
<td>Returned To Owner (RTO), live release rates, increase percent adoption</td>
<td>Customer service enhancement</td>
<td>8.5% increase in revenue 36% increase in adoptions 1% increase in RTO</td>
</tr>
<tr>
<td>Increase Animal Control Officer (ACO)FTE</td>
<td>✓</td>
<td>License compliance</td>
<td>N/A</td>
<td>Used seasonal ACOs in 2013.</td>
</tr>
<tr>
<td>Increase on-call seasonal personnel</td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Did not have staff to use seasonal personnel in 2013. Using seasonal personnel in 2014.</td>
</tr>
<tr>
<td>Discontinue Pet Licensing</td>
<td></td>
<td>RTO, increase live release rates, license compliance</td>
<td>N/A</td>
<td>Licensing provides public health assurances and demonstrates value of pets. Program revamped to encourage compliance.</td>
</tr>
<tr>
<td>Compensation Adjustments</td>
<td>✓</td>
<td>N/A</td>
<td>N/A</td>
<td>OHR performed comprehensive classification study and positions were reallocated and adjusted.</td>
</tr>
<tr>
<td>Increase RTO in the field</td>
<td>✓</td>
<td>RTO, increase live release rate</td>
<td>$5,000 savings</td>
<td>RTO in field increased 9%.</td>
</tr>
</tbody>
</table>
### PHI Food Safety Program

#### Ideal Case

**Observations**
- In order to inspect all facilities on the desired frequency schedule, PHI would need an additional 5.19* FTE
- This includes 500 marijuana facilities added to workload

* The recommendation for 5.19 FTE is rounded up to 6.00 FTE to account for turnover, temporary events, etc...

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Number of Inspections IDEAL</th>
<th>Total Inspection Time (Hours) 2013</th>
<th>Number of Reinspections per assumptions</th>
<th>Total Reinspect Time (Hours) 2013</th>
<th>Total Hours 2013</th>
<th>FTE Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Facilities</td>
<td>6,207</td>
<td>9,800</td>
<td>3,861</td>
<td>2,718</td>
<td>12,825</td>
<td>18.19</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013 FTE</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Variance</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(5.19)</td>
</tr>
</tbody>
</table>

**Total Hours 2013**

**FTE Required**
**Observations**

- In 2013, PHI completed fewer inspections overall that what should have occurred given the frequency guidelines (21% under-inspected overall).*
- Low Low, Low, and Medium risk categories were over-inspected, while High risk has under-inspected by 48%. **
- PHI will work to smooth out the workload so inspection time is spent on the desired risk categories.

* Under-inspection can be partially attributed to staff vacancies.
** Slight variance is normal and attributable to complaint-driven inspections.

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Number of Inspections 2013</th>
<th>Number of Inspections that <em>should</em> have been done per frequency</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Facilities</td>
<td>4,102</td>
<td>5,221</td>
<td>1,119 under</td>
</tr>
<tr>
<td>Low Low Risk</td>
<td>60</td>
<td>29</td>
<td>31 over</td>
</tr>
<tr>
<td>Low Risk</td>
<td>1,304</td>
<td>951</td>
<td>353 over</td>
</tr>
<tr>
<td>Medium Risk</td>
<td>1,114</td>
<td>1,083</td>
<td>31 over</td>
</tr>
<tr>
<td>High Risk</td>
<td>1,624</td>
<td>3,158</td>
<td>1,534 under</td>
</tr>
</tbody>
</table>
Observations

- The cost of a food inspector is greater than the average revenue per FTE.
- 2013 Administrative Citation actual revenue was $544,510.*
- Each additional FTE is projected to generate an incremental increase in revenue of $40,000-$60,000.

* Ability to give administrative citations is calendar-based. Vacancies can impact coverage, and therefore revenue.
Innovation Tracking

Financial

- Soft $: In 9 months, ACC actualized $211,730 in soft savings through Peak innovations
- Soft $: $15,000 from EDO JDI's
- Soft $: Reduced wait times (PHI, ACC, OME, EQ, EDO) as a result of a 3 VSA’s, 4 RIE’s and JDI’s

Service Level Improvements

- Complaint response times in PHI are at record lows (average 2.1 days per complaint)
- The “Certificate of Occupancy” and license approval process was streamlined reducing license approval times by 80%
- Extended Shelter hours resulting in 36% increase in adoptions and 1% RTO at ACC
- ACC returned 9% more dogs in the field this year over last year.
- Significant improvement in OME customer satisfaction with prompt availability of completed autopsy reports
- Improved Denver Energy Challenge customer service outreach resulted in 94% of customers rating their energy advising experience as Good or Excellent; 73% rated their experience as Excellent
- Reduced wait time by 14% in Citation Appeal Process
- CH improved the number of days to reimburse contractors in the HIV area from 7 days to 4 days.

Human Development

- All DEH Supervisors and Managers received supervisory training; additional training is scheduled for 2014
- 12% of workforce trained as Lean Black Belts; 55% as Green Belts
- EQ Organizational changes were made in 2013 to better align EQ programs with mission priorities.
- Safety training (bite stick and mace) and laptop training for Animal Control Officers and compassion fatigue training for all ACC staff
## DEH Goals 2020

### Climate
- 80% reduction in GHG by 2050 (long term)
- Reduce GHG emissions to below 1990 levels by 2020 (short term)
- Integrated Climate Plan with goals and strategies out through at least 2020

### 2020 Goals
- Reduce GHG emissions to below 1990 levels

### Major DEH Efforts
- Climate Action Plan
- City Energy Project
- Denver Energy Challenge
- Certifiably Green Denver
- Climate Adaptation
- Denver 2030 District
- Sustainable Neighborhoods Program
- Green Fleets
- Commercial Waste

### Status
- On track to meet 2020 levels.
Measurements – quantitative and qualitative


Outputs: 7441 homes enrolled in DEC. 1401 businesses enrolled in CGD work. Funded over $530,000 in residential energy efficiency loans at an avg. of 3.5%. Selected by IMT for the CEP (staffing and $ awarded). Climate Action Plan underway. Adaptation Plan complete. Charging stations installed.

Cumulative annual kWh saved: 28,100,000

Cumulative annual therms saved: 927,510

Cumulative annual $ savings by residents and businesses: $3,445,365

Certified 111
Upgraded 808
Assessed 1198
Enrolled 1401

Homes with 15% or greater savings

2285 Homes Upgraded
6019 Homes Enrolled
7441

4/14/2014
Customer Experience Improvement Update

**PHI**
- The “Certificate of Occupancy” and license approval process was streamlined, reducing license approval times by 80%.
- Complaint response policies were revised achieving record low complaint response time of 2.1 days.

**ACC**
- Extended shelter hours, resulting in 36% increase in adoptions and 1% redemptions.
- Animal behavior status RIE eliminated rollover in the behavioral status evaluation process (previously at an average of 40% rollover).
- Percent of animals returned post adoption was 5.8% in 2013 and is .03% in 2014 (since the implementation of the behavior status RIE and the pre-adoption survey used to better match families with pets).
- Administrative citation RIE eliminated the 12 day backlog of administrative citations in its first 30 days.

**OME**
- Autopsy Report Process streamlined resulting in an increased percentage of reports completed within 60 days.

**EQ**
- Improved Denver Energy Challenge customer service outreach resulted in 94% of customers rating their energy advising experience as Good or Excellent; 73% rated their experience as Excellent.

**EDO**
- 90% of submitted appeals are processed by Judicial Assistant’s (JA’s) within 1 business day (76% in 2012), 97% are processed within 3 days (92% in 2012).
- 92% of appeals received were approved (85% in 2012).
- 85% of Recommended decisions received from Administrative Hearing Officer’s processed/issued by JA’s within 1 day (62% in 2012), 97 % are processed within 3 days (79% in 2012).
- Communications Staff and Technology Services completed comprehensive Web DEH portal redesign to remove and update outdated content and convert “calls to clicks.”

**CH**
- HIV Resources improved its rate of invoice payment to service providers from 7 to 4 days.

EMPLOYEE ENGAGEMENT AND SUCCESSION PLANNING
<table>
<thead>
<tr>
<th>Pulse Question</th>
<th>2013 Results</th>
<th>2014 Results</th>
<th>Difference</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understand how the work I do relates to my Division’s goals and priorities</td>
<td>81.1%</td>
<td>87.9%</td>
<td>6.8%</td>
<td>8.4%</td>
</tr>
<tr>
<td>My work assignments give me the opportunity to do good and meaningful work</td>
<td>83.0%</td>
<td>86.2%</td>
<td>3.2%</td>
<td>3.9%</td>
</tr>
<tr>
<td>I understand clearly what is expected of me at work</td>
<td>83.1%</td>
<td>84.3%</td>
<td>1.2%</td>
<td>.014%</td>
</tr>
<tr>
<td>My supervisor is interested in my well being and supports my efforts to maintain healthy Work-life</td>
<td>74.5%</td>
<td>83.5%</td>
<td>9.0%</td>
<td>12.1%</td>
</tr>
<tr>
<td>In the past 12 months, I have developed and grown at work</td>
<td>74.2%</td>
<td>75.8%</td>
<td>1.6%</td>
<td>2.2%</td>
</tr>
<tr>
<td>I have the resources and support I need to succeed</td>
<td>66.7%</td>
<td>72.0%</td>
<td>5.3%</td>
<td>7.9%</td>
</tr>
<tr>
<td>Teamwork and collaboration are promoted at work</td>
<td>57.8%</td>
<td>71.3%</td>
<td>13.5%</td>
<td>23.4%</td>
</tr>
<tr>
<td>I have input into decisions that affect my work and I feel that my input is valued</td>
<td>65.5%</td>
<td>68.1%</td>
<td>2.6%</td>
<td>4.0%</td>
</tr>
<tr>
<td>My division does a good job communicating information that affects me</td>
<td>55.6%</td>
<td>66.4%</td>
<td>10.8%</td>
<td>19.4%</td>
</tr>
<tr>
<td>I am recognized for my efforts at work</td>
<td>53.3%</td>
<td>66.4%</td>
<td>13.1%</td>
<td>24.6%</td>
</tr>
<tr>
<td>My supervisor gives me timely feedback on my job performance</td>
<td>51.7%</td>
<td>59.1%</td>
<td>7.4%</td>
<td>14.3%</td>
</tr>
<tr>
<td>There is a positive climate at work</td>
<td>52.2%</td>
<td>58.6%</td>
<td>6.4%</td>
<td>12.3%</td>
</tr>
</tbody>
</table>
Survey Results
- Denver Employee Survey: **82%** response rate (Nearing dept goal of 85% - City response rate: **63%**)
- DEH Pulse Survey: **85%** response rate (Total responses increased by 31 employees (from 97 to 128 responses, a 32% increase)
- Engagement Index: DEH index **increased** from 2011 survey: 12.3 to 13.7 but below City-wide rate of 15.1
- Actively disengaged score decreased to -5.4% (from -8.9%)

Survey Recommendations - Denver Employee Survey
- Help Employees link their work to the “bigger picture”
- Nurture employee recognition and appreciation efforts
- Cultivate inclusivity in the team dynamics
- Equip employees with materials, training, preparation, technology
- Develop Leadership skills
- Conduct Stay Interviews to reduce turnover

Response
- Establishment of new mid-year performance review, to occur this summer, to supplement annual PEPR reviews
- Continued training for supervisors, with an emphasis on providing employee feedback
- Individual development assessment and leadership training for division directors
- Continued improvements in departmental communications through the DEHWEB page, quarterly meetings and other tools
- Created “On-the-Spot” award program to recognize employee achievements
DEH Employees Eligible for Retirement
2014 through 2019

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>% Workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>13</td>
<td>9%</td>
</tr>
<tr>
<td>2015</td>
<td>18</td>
<td>12%</td>
</tr>
<tr>
<td>2016</td>
<td>24</td>
<td>16%</td>
</tr>
<tr>
<td>2017</td>
<td>30</td>
<td>20%</td>
</tr>
<tr>
<td>2018</td>
<td>37</td>
<td>25%</td>
</tr>
<tr>
<td>2019</td>
<td>45</td>
<td>30%</td>
</tr>
</tbody>
</table>
DEH Retirement Eligibility
By Division
2014 Through 2019
ACCOMPLISHMENTS AND CHALLENGES
Accomplishments: Progress on Minority and Women Owned Business

- DEH has fully implemented requirements of Executive Order (EO) 101 and is in position to further achieve Administration goals
- DEH staff attended Denver Small Business Office (DSBO) Ordinance and EO 101 Training
- EO distributed to DEH division personnel
- DSBO Ordinance and EO 101 Training material provided to DEH staff not able to attend formal training
- DEH solicitations include EO 101 Form/solicitation clause for needed general services (e.g., Office Equipment, Graphic Services, Asbestos/Lead/Mold Abatement Services, Translation Services) and construction efforts
Accomplishments

- Accomplishment: 7 of 14 mission-level metrics trending up
- Accomplishment: 7 of 14 mission-level goals reached
- Accomplishment: Launched an internal process improvement effort focused on three value streams (2-ACC, 1-PHI)
- Discussed with Peak Performance staff and scheduled formal training for DEH Division Directors
- Accomplishment: PHI - Reduced wait time by 80% for “Certificate of Occupancy” and license approvals process
- Accomplishment: OME – Reduced wait time by 4% in autopsy report process
- Accomplishment: EDO – Reduced wait time by 14% in citation appeals process
- Accomplishment: EDO – Improved websites (re-designs, contents) increased positive marketing of Department programs, goals and objectives
- Accomplishment: Employee engagement response rate (from the city employee survey) increased to 82% (compared with City response rate of 63%)
- Accomplishment: CH - Reduced HIV/AIDS service providers wait time for reimbursement checks
- Accomplishment: EQ - Climate Adaptation Plan released. Updating Climate Action Plan – completion Fall 2014. (Climate goal)
- Accomplishment: EQ - 1087 facility inspections; 98% compliance rate with environmental regulations.
Accomplishments

- ACC
  - A dedicated partnership with the Peak Academy resulted in 6 Lean events
  - 100% of staff trained (Green and Black Belt)
  - Elimination of behavior status backlog (previously at 40%)
  - Elimination of the administrative citation backlog (previously at 12 days)
  - Standard work on the animal intake process for every section of the shelter
  - Creation of the ACO customer information card resulting in a 21% reduction of administrative citation calls to 311 and a 20% reduction in calls anonymous calls to ACOs from 311
  - ACC staff hosted 3 gemba walks, taught 3 green belt trainings, presented to 3 black belt cohorts
  - Appeared in a Governing Magazine feature.
  - In 2014, ACC staff will present a national and regional conference about the Peak Academy/ACC partnership
• Challenge: The need to establish centralized DEH Peak Performance Program linked to organization’s strategic plan, goals and objectives to pursue Peak Performance improvements in multiple division sections.

• Challenge: Implementation of enterprise software for Healthy Families/Healthy Homes program to include efficient management of IT development resources and timely completion of the project. Expected completion: September 30, 2014.

• Challenge: Send existing and new staff to Green Belt Training

• Challenge: Increase the number of trained Black Belts in DEH Divisions
TAKEAWAYS AND NEXT STEPS
Next Steps: CFO performance budget kickoff in **July 2014**

**Innovation underway:**

**EQ**
**Goal: Healthy Planet**
**Strategy 2: Improve resource conservation-reduce energy & water use and landfill waste**

**Certifiably Green Denver**
- Establishing process work flow; standardizing work outputs
- Systematically tracking outcome and output metrics

**PHI**
**Goal: Healthy Places**
**Strategy 2: Provide exceptional customer complaint response**
- Working with Excise and Licenses (E&L) to implement a system for commercial food service licenses. Process will no longer split between the two agencies
- Implementing additional customer service policies and parameters to minimize complaint response times to include reports and metrics to measure performance
- Developing an electronic inspection system for Healthy Families/Healthy Homes to electronically capture inspection reports (remotely) resulting in improved reporting process, increased processing time and decreased inspectors mileage and drive time.

**OME**
**Goal: Healthy People**
**Strategy 3: Maintain Denver’s NAME Accreditation for the Office of the Medical Examiner**
- Significantly decrease the autopsy report completion time to optimize customer service:
  1) allow more rapid closure for families
  2) completion of investigations by law enforcement and
  3) make important epidemiological data available for public health initiatives

**CH**
**Goal: Healthy People**
**Strategy 1: Improve Denver’s standing as a healthy city**
- Work with Excise and License to implement tobacco ordinance change and develop enforcement program
ACC
Goal: Healthy Pets

Strategy 1: Increase Shelter Live Release Rates
• Maintain a 90% live release rate
  – At the 90 day follow-up, the behavior status RIE resulted in 40% of animals rolled over for status evaluation to 0%, quality of behavioral evaluations from 33% poor to 8% poor, average number of animals staying past 30 days went from 67 to 14, animals returned post adoption went from 5.8% to .03%.

Strategy 2: Improve customer experience
• Increase community outreach and education
  – Animal intake RIE resulted in geo-coding implemented throughout the shelter. Geo-coding helps ACC target areas for outreach and education. At the 90 day follow-up, the ACO customer information card RIE resulted in standardized, customer friendly information for outreach and a 21% reduction in 311 calls related to the administrative citation process.
• More efficiency in the office section
  – In less than 30 days, the administrative citation RIE resulted in a flow cell for processing citations and the elimination of the administrative citation backlog. (previously at 12 days).
• Training
  – Customer Service training division-wide to orient all staff to customer service goals, internally and externally
  – Animal Handling training division-wide to increase safety and animal awareness among staff
QUESTIONS