

County Year End Report Out FY 2024-25

Presented by: Kristina Sahagun



COLORADO

Department of Health Care
Policy & Financing

Agenda

- Opening Remarks - Kim Bimestefer
- Project Sharing - All Grant Participants
- Member Health
 - Lake County: Enhancing Health Outcomes in the Vulnerable Adult Population
 - Q&A
- Care Access
 - Weld County: Long-Term Care Coordination Case Manager
 - Q&A
- Customer Service
 - Denver County: Family & Adult Assistance Training
 - El Paso County: Call Center Staffing Pilot
 - Pitkin County: Trauma Competent Workplace
 - Q&A
- Final Remarks - Rachel Reiter



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Event Expectations

- Reminder:
 - 1 person from each of the funded counties must remain for the duration of the meeting per the contract
- This Year End Report Out meeting counts as your 4th quarter check-in
- Project Deliverables:
 - Due to HCPF no later than July 15, 2025
 - Should include - a Closeout or Continuity/Sustainability Plan
- Project Expenditures:
 - Entered into CFMS no later than July 10, 2025.
 - Expenses submitted after this date will not be reimbursed
- Presentation:
 - Broken out by each county who will navigate, combined presentation will be sent after the meeting and posted online.
- Meeting Space:
 - Zoom meeting - you have full control of your mic and video, please stay muted when not speaking.
- Questions:
 - Use Chat function for comments & questions in Zoom or raise hand during the Q&A session at the end of the meeting.



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2024-25 County Grant Program: Year End Report Out

June 11, 2025

Kim Bimestefer, Executive Director

Project Sharing

- Lake County - 5 minutes
 - Enhancing Health Outcomes in the Vulnerable Adult Population
- Weld County - 5 minutes
 - Long-Term Care Coordination Case Manager
- Denver County - 5 minutes
 - Family & Adult Assistance Training
- El Paso County - 5 minutes
 - Call Center Staffing Pilot
- Pitkin County - 2 minutes
 - Trauma Competent Workplace



Lake County

FY 24-25

Enhancing Health Outcomes in the
Vulnerable Adult Population



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Enhancing Health Outcomes in the Vulnerable Adult Population

While Establishing Lake DHS as a
Medicaid-Enrolled
Behavioral Health Agency

Lake County Department of Human Services

Laura Crews, Director

Anthony D'Abbracci, Deputy Director of APS & CW

Christin Logan, Deputy Director of Strategic Initiatives/Grant Manager

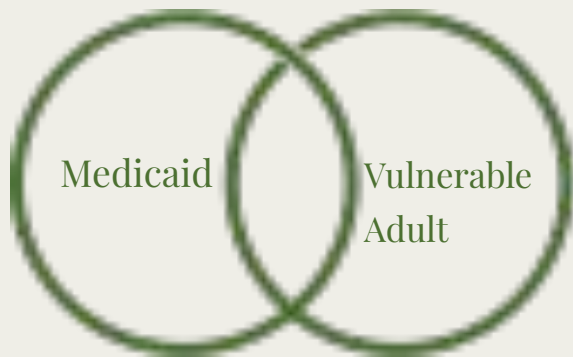


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Background:

- SFY 23/24 Vulnerable Adult pilot year
 - 27 served
- Issues persist in community
 - Housing
 - Lack of state/federal resources
 - Older homes, limited resources for repair
 - Rural = barrier to resources

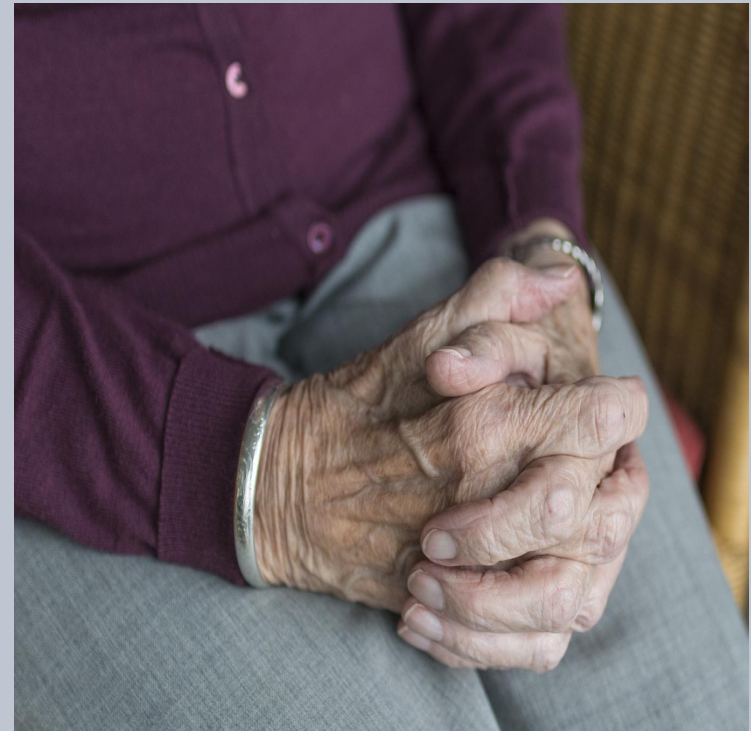


DEFINITION:

The case management team at LCDHS defines a vulnerable adult as, “someone who is 18 years of age or older, who is Medicaid enrolled or eligible, who is at-risk for being unable to provide or obtain services necessary for their health, safety, and welfare, and who are willing to participate in a voluntary program that may include intervention or prevention services.”

PROJECT OBJECTIVES

- Enhance case management services for the Vulnerable Adult community
- Medicaid Enrollment for Lake DHS services



METRICS

- Number of Vulnerable Adult Members served: 5
 - Higher level of care/nursing home: 2
 - In need of help with medical equipment: 3
 - High-needs case management: 2
- Number of Redetermination Members: 13
 - Lower levels of care/“one-off”
- Number of Lake DHS locations now Medicaid-enrolled with NPI numbers: 2

SUCCESSSES



Story Time **Harry**

- Medical issues, deafness made client resistant to services in the past
- Now more comfortable engaging with services, open to talk with medical professionals
- Continued follow up with Vulnerable Adult staff to help with explanation of diagnosis, treatments
- Coordination to help manage illness, medicines, transportation, follow-up appointments, etc.
- Differences between individualized case management needs within this population and others
- Addition of bilingual case aide



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CHALLENGES & LESSONS LEARNED

Vulnerable Adult:

- Changes in leadership and staffing - change of priority focus for case management leaders
- Changes in structuring of program (contractor roles, addition of bilingual case aide)
- If we don't have direct services and case management, challenging to complete the

THE MATH program

- 8 clients
- Wrap team staff \$146K (one 1.0 FTE and two .3 FTEs)
- \$1000 for clinician each month (x12 months)
- \$13,200 reimbursement rate (\$1100 per month) if participant on program 12 months
 - **Lake DHS would need 12 clients on program twelve months out of the year to break even**
 - (*Does not include indirect, billing, administrative costs, etc.)

Medicaid-enrollment:

- No mental health providers in area
- \$1100 per month reimbursement rate per person
 - Changes are not viable for small, rural counties
 - Unable to staff for low caseload
 - Requires clinician supervision
 - Administrative burden
- Moving away from COACT model to NWIC



NEXT STEPS



- Approach other funding opportunities that will allow us to provide supportive services and cover the cost of ongoing case management
- Hiring a new Child Welfare/Adult Protective Services Intake Caseworker
- Opportunities to coordinate more with Senior Center

**UNSURE OF PROGRAM SUSTAINABILITY
GOING FORWARD**



QUESTIONS?



**For details or questions related to this project,
please reach out to Christin Logan:**
christin.logan@state.co.us



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Thank you!



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Weld County

FY 24-25

Long-Term Care Coordination Case Manager



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Long-Term Care Coordination Position

OVERVIEW

Helped members complete applications, gathered required documentation, and navigated the eligibility process.

Conducted outreach for redeterminations to receive missing documentation and signatures.

Ensured timely access to benefits, reduced delays, denials, coverage gaps, and terminations.

Optimized workload distribution and increased productivity by allowing existing employees to focus on case management and/or eligibility determinations.

Enhanced member and staff satisfaction through support, collaboration, and efficient processes.

PROJECT INITIATION

Start date:
8/1/2024

Assigned CMA:
Katrina Hocking

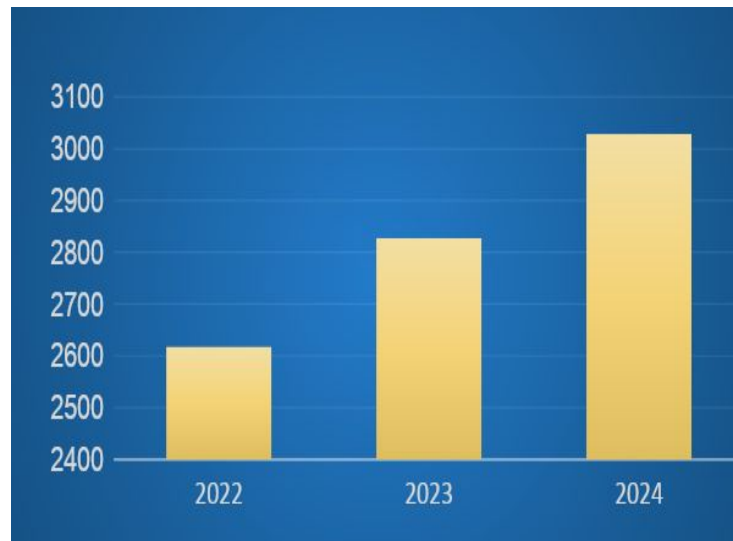
Collaboration:
OAA, Long-Term Care Financial, Adult Protection, CMA case managers, and Assistance Payments

System Programs:
CBMS, RRR Report, and the 60-day extension report

Type of assistance: Medicaid applications, Arbor, Verifications, and Redeterminations

Long-Term Care Numbers

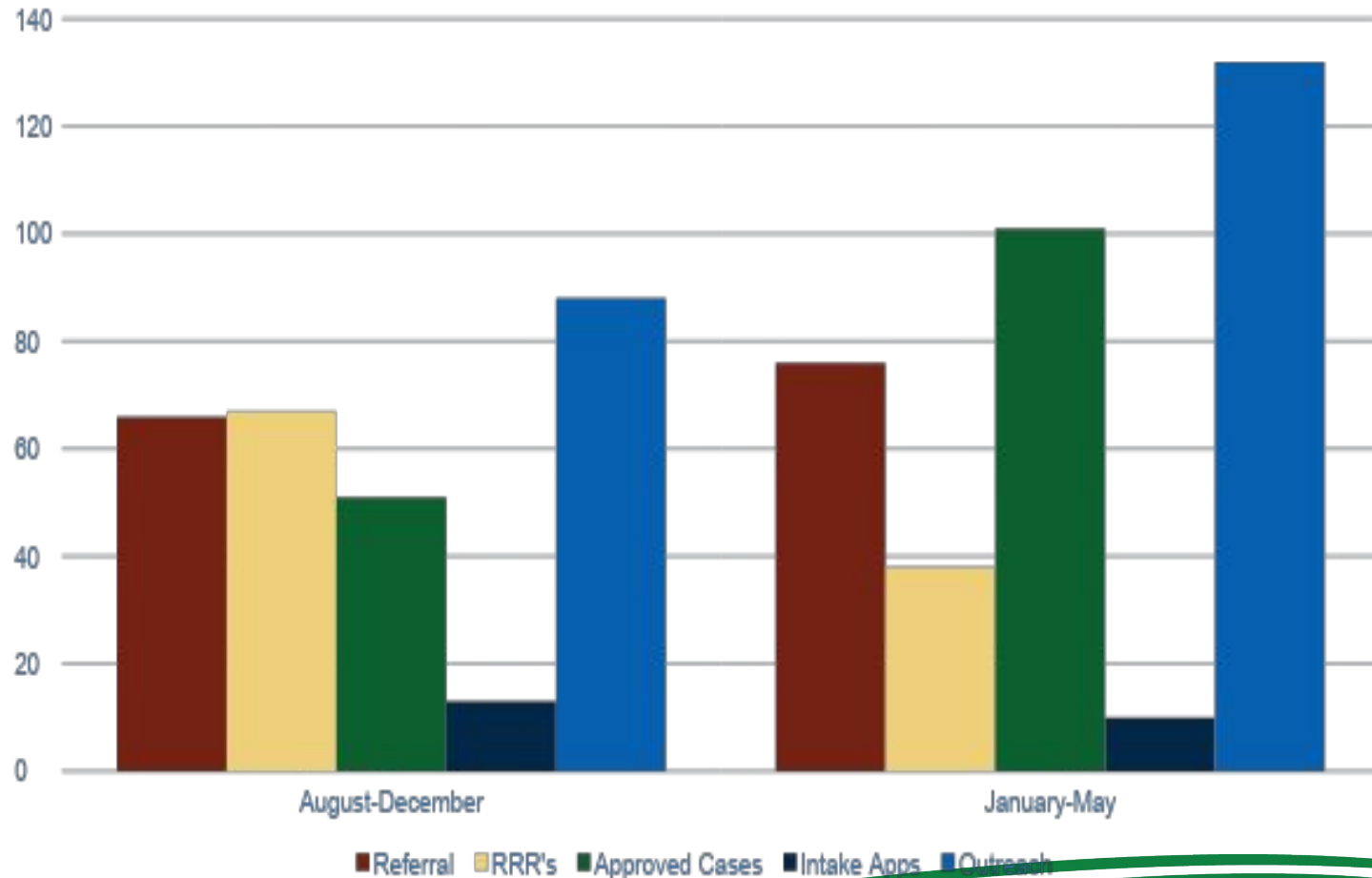
Long-Term Care Financial

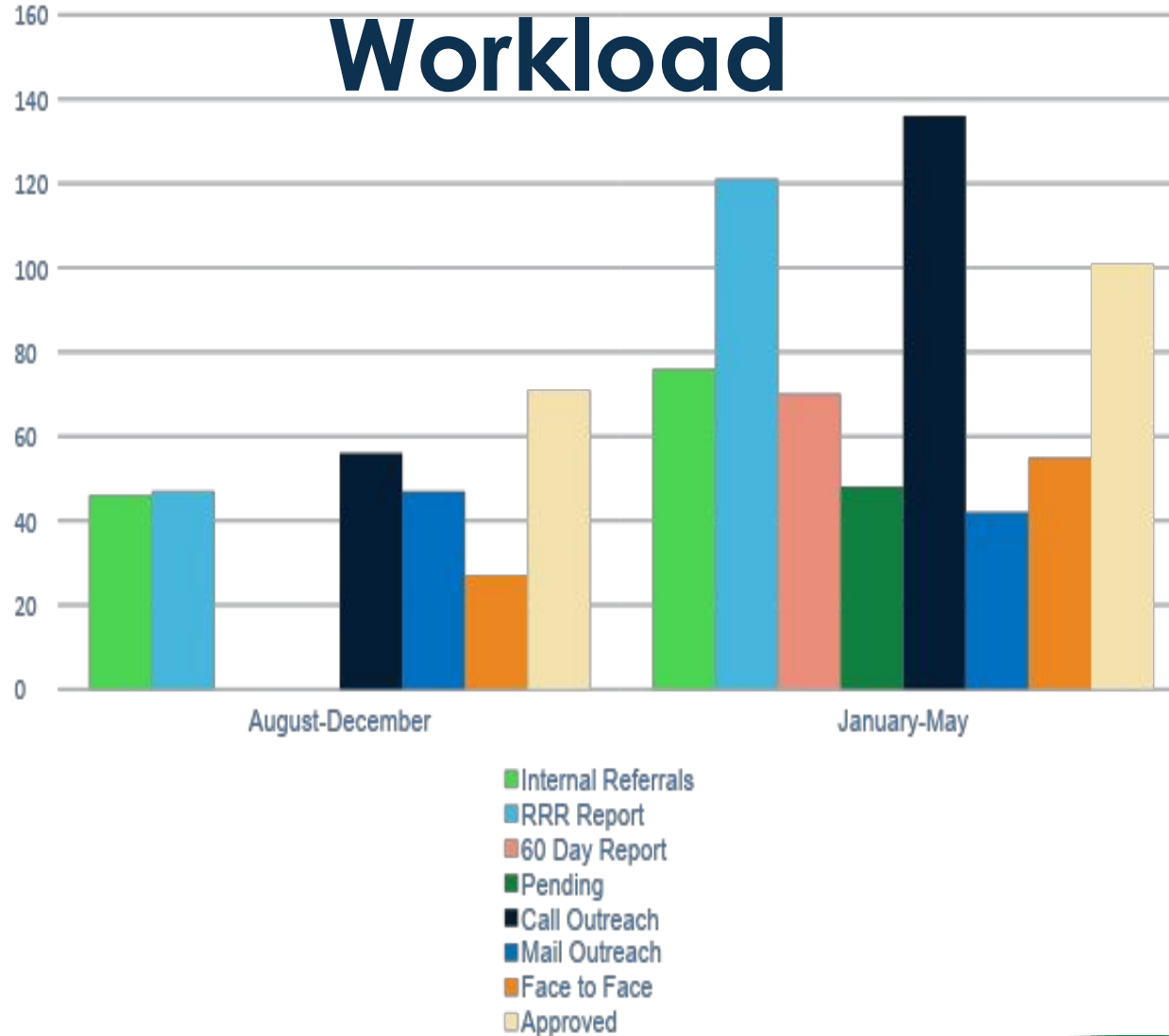


Case Management



Long-Term Care Coordination Numbers





CMA Survey Prior to the Position

Challenge to obtain proper verifications

- 48% stated somewhat challenging
- 29% stated very challenging
- 10% stated extremely challenging
- 12.5% stated little or not at all challenging

How often did a CM help a member during RRR or application

- 60% stated often
- 21% stated sometimes
- 12% stated always
- 7% stated never or rarely

CMA Final Survey

Did the CMA and member benefit from the program?

46% stated always

38% stated often

16% stated sometimes

Was there improvement with the RRR process and applications since launch of program?

84% stated they saw a significant improvement with the RRR process and applications

16% stated they saw a moderate improvement with the RRR process and applications

I believe this position was beneficial for both CMA and member:

92% stated the position was beneficial for both CMA and member

8% stated no impact as they were not familiar with the program as they are new case managers

Encounters and Impact

Father of Three

Referral from Long Term
Care Financial

Language barrier

Widowed

Unemployed

Child w/mental and
cognitive deficits

Limited knowledge of
resources

Adult Protection

Emergency assistance for
Medicaid due to health
issues

Cognitive deficits

Lack of supports during
the day

Economic stability

Preventing
institutionalization

Home Bound

Referral from Case
Management

Home bound

Visually impaired

No supports

Final Outcome

- Program provided stability and Medicaid coverage
- Families have assistance to navigate Application/Redetermination/Arbor process
- Help minimize the number of denials
- Provide case managers with assistance and streamlined communication
- Efficiencies
- Replicability
- Sustainability

Thank you!

- Department of Health Care Policy and Financing (HCPF)
- Board of County Commissioners
- DHS Leadership and various programs

Contact

Jill Colavolpe – Deputy Division
Director

Colavojx@weld.gov

Becky Schweer - CMA Supervisor

Schweerx@weld.gov

Katrina Hocking - Long-Term
Coordination Case Manager

Khocking@weld.gov

Denver County

FY 24-25

Family & Adult Assistance Training



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Project Sharing – Denver County (Talking Points)

- Denver County conducted a combination all-staff recognition, EDI and program training event on 4/22/25
 - Lunch and Networking
 - Earth Day Theme
 - EDI Training
 - EDI metric components were not quantifiable
 - Pre and Post Employee Engagement Survey
 - Overall Favorability 2024: 74% (5% higher than the City)
 - Overall Favorability 2025: 72%
 - Monthly Budget Unit Training
 - Kahoot Total Correct Answers 83%
 - Pre-test Results: 60%
 - Post-test Results: 80%

County Grants Year-End Report Out - Denver

Wednesday, June 11, 2025
Christian Maddy



Today's Agenda



Event Summary/Agenda

Recognition

Equity, Diversity and Inclusion Training
and Metrics

Program Training and Metrics

Budget and Finance

Event Summary/Agenda – 4/22/25

Topic	Time
Sign in and Lunch	12:00 – 12:40
Opening Remarks – Renee' Newton HCPF Introduction – Michael Lamp	12:40 – 12:45
EDI In Human Services – Consuelo Hernandez and Manny Gonzalez (Introduction - Sharmin Hicks)	12:45 – 1:45
Survey and Break (Facilitation – Christian Maddy)	1:45 – 2:00
Medical Assistance Training Loretta Leichtle, Lori Cooper, Keisha Givner, Maria Cruz, Marina Duran Vega, Travis Avila, Edgar Olivas, Worth Byrd (Introduction Sharmin Hicks)	2:00 – 3:30
Closing Remarks – Michael Lamp	3:30

Recognition



Event – Insights and Lessons Learned

Insights

- Sign in sheets on the table is much more efficient than at the front door
- Earth Day theme and give aways were well received
 - Succulent Plants

Lessons Learned

- Improve the ratio of meals and align with preferences
- Better communication of the start time as some staff arrived too early
- Better communication around seating arrangements
 - We had plenty of room, however, some folks wanted to sit together

Equity, Diversity and Inclusion Training and Metrics

Learning Objectives

- Establish common language related to Equity, Diversity & Inclusion
- Discuss the relevance of EDI concepts in FAAD work
- Engage in personal reflection to support inclusive practices



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Key Concepts & Common Language

- **Equity:** The condition achieved when one's identity no longer factors into how one fares in life, or when race and other social identities can no longer predict life outcomes
- **Diversity:** All the ways in which people differ, including all the different identity characteristics
- **Inclusion:** Involving traditionally excluded groups in ways that share power and opportunity



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What is Trauma-Informed Care

- Safety – Ensuring physical and emotional safety for clients and staff
- Trustworthiness & Transparency – Clear communication and consistent practices
- Empowerment, Voice, & Choice – Centering customer autonomy and dignity
- Peer Support – Valuing lived experience and building relational connection
- Collaboration & Mutuality – Leveling power dynamics where possible
- Cultural, Historical, & Social Awareness – Understanding the impact of identity, systems, and lived experiences

Why it matters: Many DHS customers experience systemic, generational, or acute trauma. A trauma-informed approach recognizes these experiences and helps reduce re-traumatization.



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Empathy as a Daily Practice

Empathy Is:

- Ability to understand and feel *with* someone—without judgement.
- A core component of trauma-informed service.
- Foundation of dignity-centered communication.

Empathy in Action:

- Listening for what's underneath the words.
- Validating frustration or fear without taking it personally.
- Treating every customer interaction as a chance to restore trust in the system.



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What Does Trauma-Informed Care Look Like in FAAD?

In Client –Facing:

- Tone: Calm, respectful, and empathetic communication.
- De-escalation over defensiveness: “How can I support you?” vs. “There’s nothing I can do.”
- Offering choice: “Would you prefer a call back or to hold?”
- Clarity is care: Explaining next steps with compassion builds trust.

In Internal Culture:

- Creating space for debriefing after hard interactions.
- Normalizing breaks and boundary-setting.
- Practicing grace with colleagues. Embracing curiosity rather than assumptions.

It's not just about how we serve customers—it's also about how we show up for each other.



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Social Identities

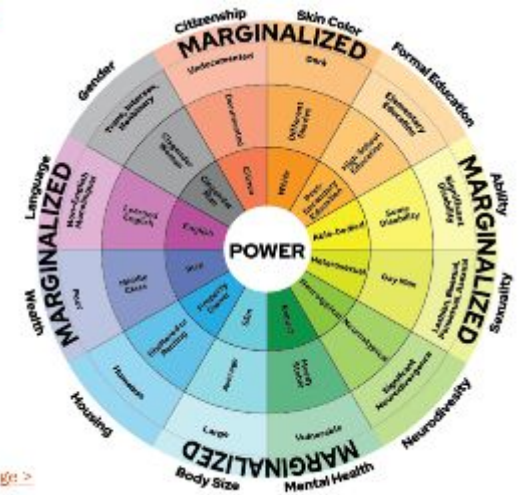
- Differ from personal identities
- Influenced by how society categorizes people
- Influence the experiences we have
- Affect opportunities and choices



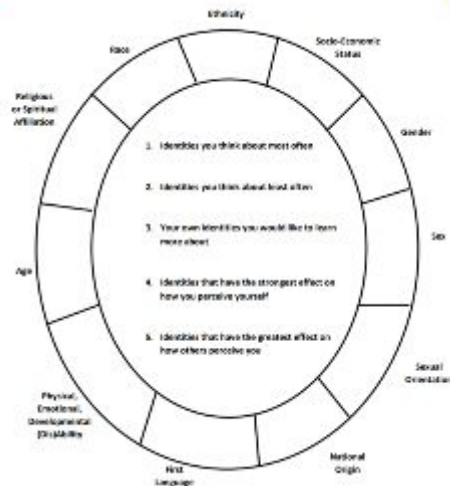
Which identities...

- Do you think about most often?
- Do you think about least often?
- Have the strongest effect on how you perceive others?
- Have the strongest effect on others perceive you?

[Wheel of Power & Privilege >](#)



Exploring Your Own Identity

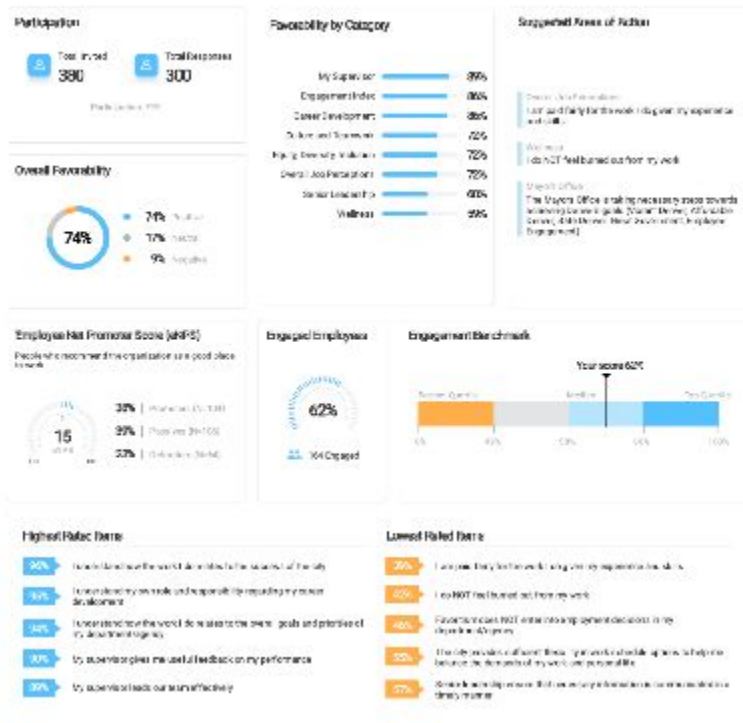


Equality vs. Equity



Metrics – Employee Engagement Survey 2024

Dashboard



Summary:

Participation Rate: 78%

FAAD Favorability: 74%

City Favorability: 68%

Most Favorable Topic: My Supervisor

Least Favorable Topic: Pay

Metrics – Employee Engagement Survey 2025

Responses Overview

Active

4/30/25, 8:02 AM

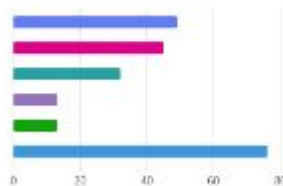
Microsoft Forms



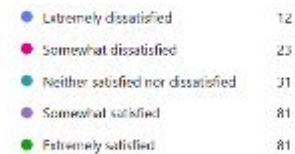
1. What is your job role?



2. How long have you been in the organization?



3. Overall, how satisfied are you with your current employer?



Summary:

Participation Rate: 58%

FAAD Favorability: 72%

Most Favorable Topic: Career Development

Least Favorable Topic: Pay

Comparative Employee Engagement Survey Data

Data Point	2024	2025	Δ
Participation	78%	58%	↓ 20%
Favorability	74%	72%	↓ 2%
Highest Favorability	My Supervisor	Career Development	Δ
Lowest Favorability	Pay	Pay	=

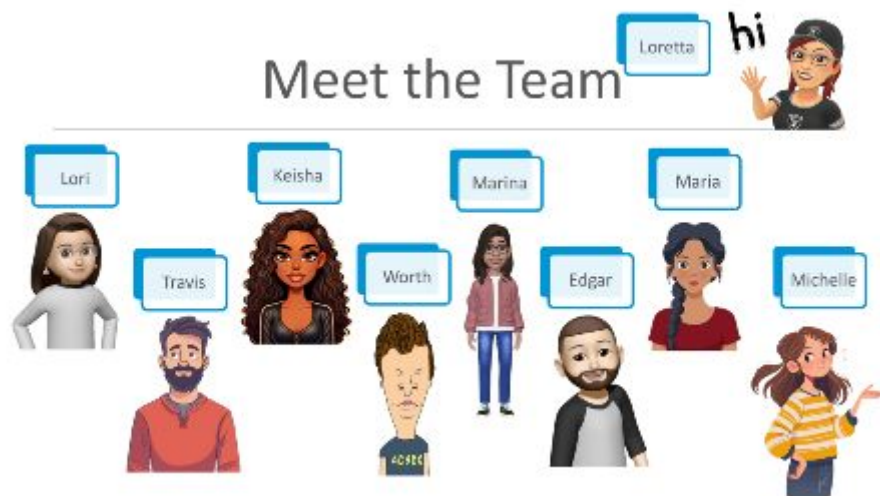
Metrics – Insights

- FAAD generally receives higher favorability scores than the rest of the City and other divisions in our department
- This may be attributable to our culture of learning leadership model
 - Focus on relationships, psychological safety and results
- Pay continues to be a concern for many of our staff, with the high cost of living in the metropolitan area being cited as a contributing factor
- We have a strong leadership team with good communication
- Staff understand how their role and individual contributions support the department's overall success

Metrics – Lessons Learned

- Establish EDI metric measurables early in the process
 - Our stated deliverable was too vague
 - Pre and post measurement tools will be required outside of the city's employment engagement survey
- Create better alignment between the division's abbreviated employment engagement survey and the city
 - While we cannot duplicate the city's survey, we can improve the alignment between the two tools
 - For example, more closely align questions regarding the direct supervisor's favorability
- Institute incentives for participation in the abbreviated division survey, similar to the city's survey

Program Training and Metrics



Summary

- 400 Participants
- 40 Tables with 10 staff per table
- Each table combined as a team
- 22 Questions

Example Question



Next

0

Which MBU scenarios will we be reviewing?

- Married Couple with family
- Pregnancy
- Single Parent
- Multi-Generational
- Common Law with Adopted Child



Single Dad

Worth



Keisha



Maria



Twin's mom who
lives in NY

Dad Worth lives with his twin daughters, Keisha and Maria (16 years old). He files taxes and will claim only Keisha as his dependent.

Maria is being claimed by her non-custodial mother who lives in New York with her new spouse.


84

What will Maria's MBU be?

Skip

Single Dad

Maria



Dad Worth lives with his twin daughters, Keisha and Maria (16 years old). He files taxes and will claim only Keisha as his dependent.

Maria is being claimed by her non-custodial mother who lives in New York with her new spouse.

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Answers

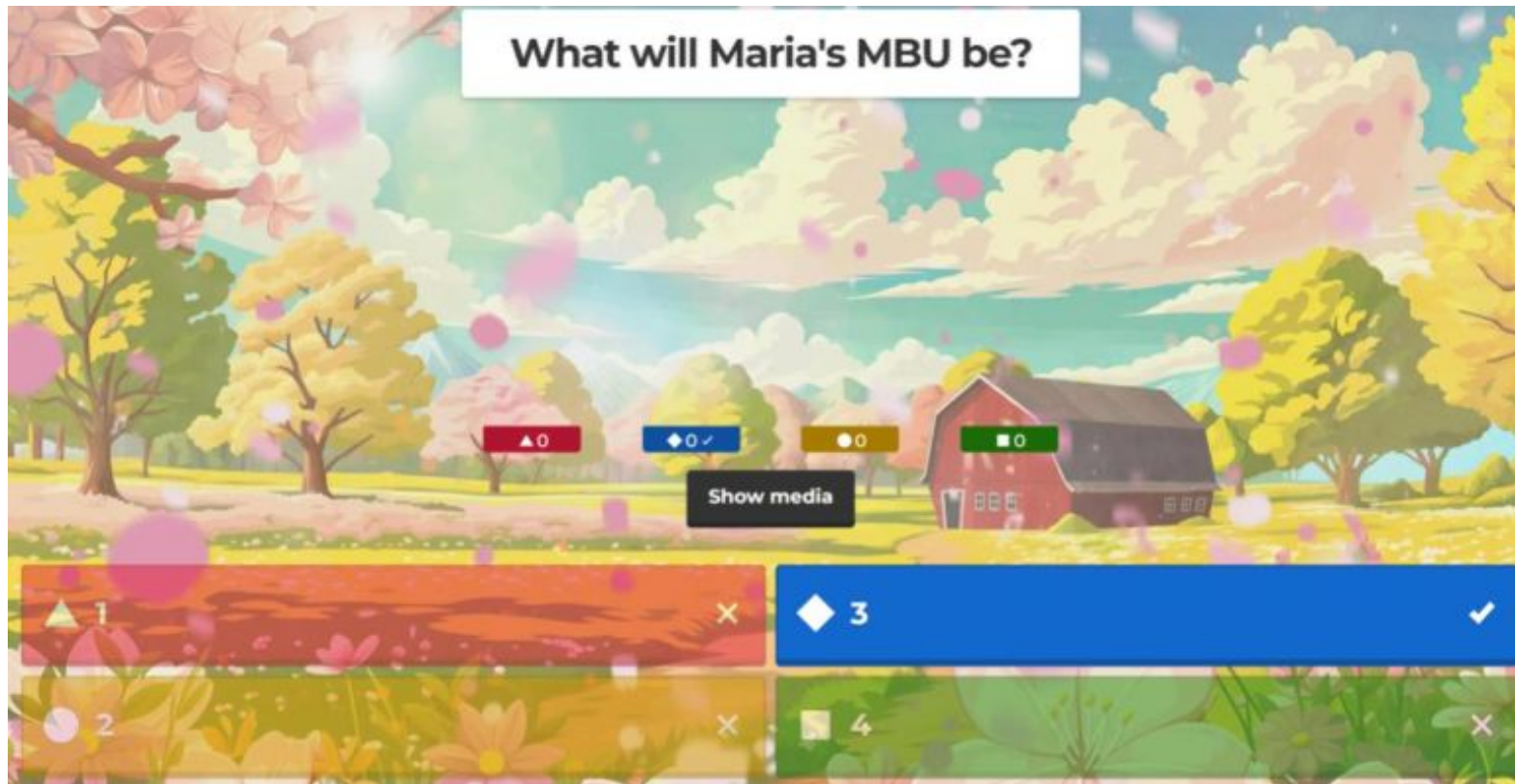
▲ 1

◆ 3

● 2

■ 4

48




85

Which exception applies to Maria?

Skip

Single Dad

Maria



Dad Worth lives with his twin daughters, Keisha and Maria (16 years old). He files taxes and will claim only Keisha as his dependent.

Maria is being claimed by her non-custodial mother who lives in New York with her new spouse.

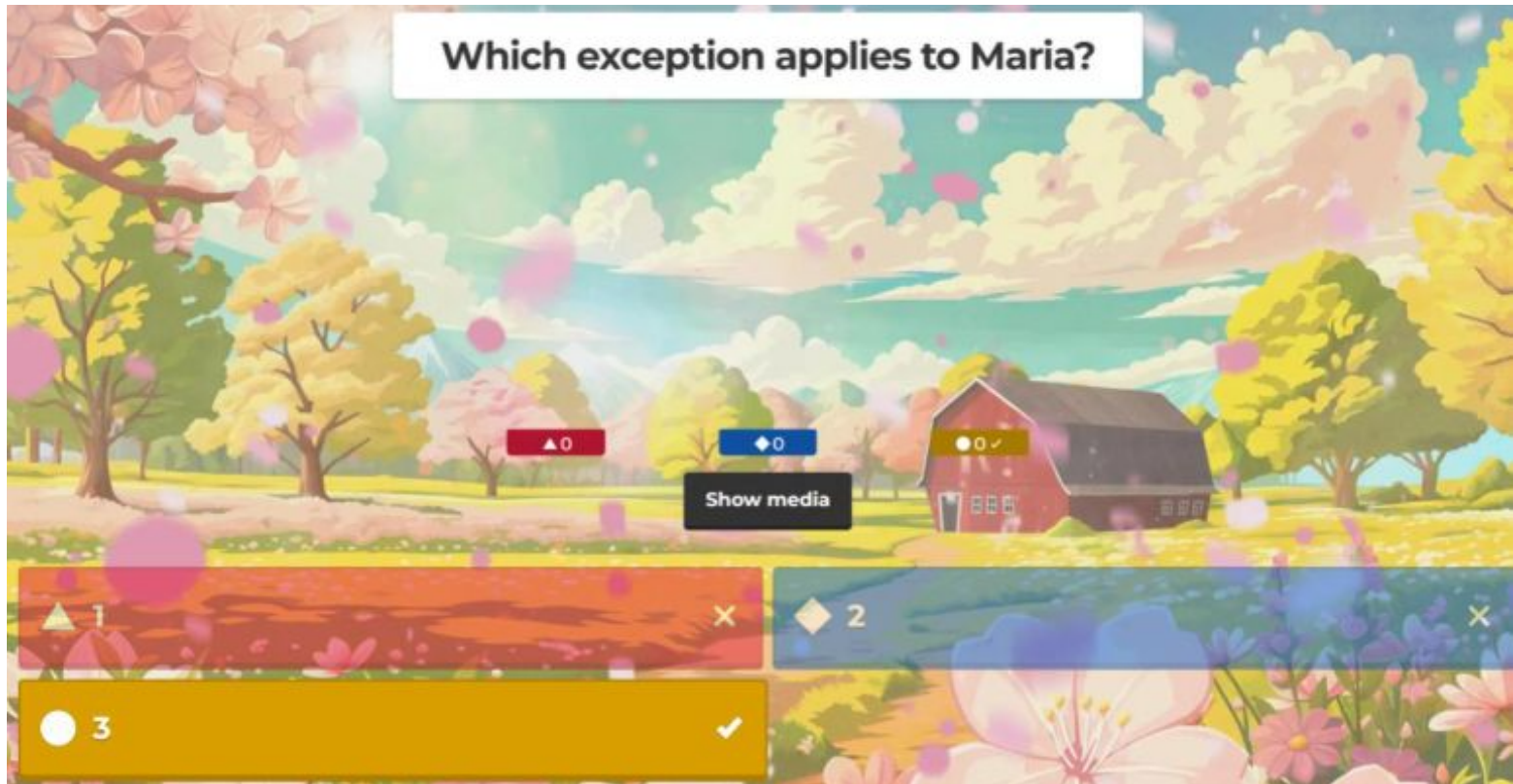
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Answers

▲ 1

◆ 2

● 3



Claimed by a Non-custodial Parent

Metric Data

Data Point	Pre-Test	Post Test	Δ
Knowledge Testing	60%	80%	↑ 20%

Kahoot Results

- Kahoot Total Correct Answers 83%
 - 6 Tables had perfect scores
 - 9 Tables had only one incorrect answer

Metrics – Insights

- The combination of the “fun factor” and competitive nature of the Kahoot game was very popular and ensured a very high level of participation
 - All tables participated and were engaged
- Training is beneficial as indicated by the large increase in post-test results
- (Personal Insight from Christian) Monthly Budget Unit determinations are difficult, however, most staff in Denver do not agree

Metrics – Lessons Learned

- While Kahoot is fun and engaging, conversations about the content and answers created high level of ambient noise during the activity when there are 400 participants
 - Strong ground rules will be required before another similar activity
- A mixture of merited and non-merited staff participating likely lowered the overall number of correct answers
 - However, non-merited staff were engaged and interested as the activity directly impacted their ability to perform in their supportive roles

Budget and Finance

Budget: \$10,000.00

Expenses:

\$17.96	King Soopers - Supplies
\$5,323.19	Jason's Deli - Lunch
\$359.69	Amazon – Small Recognition Gifts*/Table Decorations
\$58.80	Amazon – Snacks
\$540.00	Amazon – Centerpieces/Take Away Recognition Gifts*
\$2613.65	Venue Rental
Total Cost:	\$8913.29**

*Gifts included: Succulent Plants, Small Inflatable Globes and Themed Stickers

**Still working on the Final Settlement



Thank you!

El Paso County

FY 24-25

Call Center Staffing Pilot



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Call Center Staffing Pilot

Background and Grant Request

By piloting the contracting of call center functions, we aimed to offload duties that non-merit-based staff can perform, so that the staff that are eligibility trained and operating our Medicaid-only call center (MA CSL) were moved to performing higher-level eligibility functions. We anticipated this would allow us to continue to meet the customer service expectations for an average speed to answer while concurrently dedicating more staff time to processing cases, all while maintaining excellent customer service and reducing backlog.

Goals

- ✓ Average Speed to Answer (ASA) of less than 20 minutes
- ✓ Increased Output of HCPF Related Eligibility
- ✓ Backlog Reduction



Staffing the MA CSL – Tier 1

- TEKsystems – familiar with staffing public assistance agencies and call centers
- Four Customer Service Representatives (CSR), non-merit, 50% bilingual in Spanish, all with established customer service phone skills
- Quick start! The contract was signed on 09/10/2024 and four contract staff started on 09/23/2024.
- The contracted CSR were added to the DHS Main Customer Service Line (DHS CSL) team and modeled that team's business process for answering calls and submitting tickets.
- Each CSR was independently answering calls within three days of starting, using desk aids and resources for HCPF-related information only.
- EPC uses a "ticket" process for back-office work that needs more attention:
 - Renewals and Applications received, but not processed
 - New changes to the household
 - Questions about correspondence and eligibility



Back Office Expectations – Tier 2

- Eligibility Specialists (merit) review the "tickets" and review each case.
- A follow-up call to the client is made within 24 hours to give updates or a resolution.

Outreach Calls

During low call volume time, contracted staff called clients who

- ✓ Had missing paperwork that may cause a break in HCPF benefits**
- ✓ Had future Renewals after the LTSS lock-in period**
- ✓ Submitted a Disability Application but did not identify the program they were requesting, for both LTSS and Non-LTSS cases**



1512 outreach calls



1105 clients contacted



73% success rate in reaching clients

ASA SUCCESS



MA CSL Average Speed to Answer	
July 2024	17:28
October 2024	9:23
January 2025	5:56
March 2025	8:10

Lessons Learned

- ✓ Using a staffing agency that had experience with call centers and public assistance agencies led to hiring competent staff with experience that easily learned the position.
- ✓ Contracts take time! We experienced delays in the initial contract negotiations, but also there were delays due to key requirements in the contract being overlooked that should not have been.
 - ✓ Due to the delays in establishing the contract, we are underspent by $\frac{1}{4}$ of the grant amount.
- ✓ Entering into a contract for a call center may be more cost effective when you factor in the cost of benefits for a full-time employee.

Next Steps

- ➡ The last day for the contracted CSR is June 13, 2025. The MA CSL will be handled by the DHS CSL starting June 16, 2025.
- ➡ We anticipate continued success with our ASA goal of less than 15 minutes for the 25-26 year.
- ➡ We anticipate continued success with our backlog reduction.

Questions?

Please reach out with questions,
or for more information and resources:

LisaRedmond@elpasoco.com or
YeseniaTorres@elpasoco.com



EL PASO COUNTY
Department of Human Services

Thank you!

Pitkin County

FY 24-25

Trauma Competent Workplace



Pitkin County Human Services Trauma Informed Organization

HCPF County Grant
Year-End Report Out

Practice



Overview of the Project

- Employee and customer satisfaction were identified as a top priorities following changes that occurred internally, as well as changes in workforce in the wake of Covid-19.
- Increases in customer complaints and staff turnover were main concerns to be addressed.
- These concerns aligned with the HCPF Strategic Pillars to Operationalize Excellence and Customer Service, as well as address Employee Satisfaction and Equity, Diversity, Inclusion and Accessibility.

2022

- Tenured Director retired and new leadership emerged
- Reorganization including 2 deputies and the removal of supervisor
- Storming and identification of moral concerns
- Increases in customer complaints



2023

- Re-engaged with Alia to propose Scope of Work to address moral and customer concerns
- HCPF Grant awarded and began work 07/2023
- Director went on maternity leave while leadership continued to work with Alia through coaching between 08/2023-11/2023

2024

- Loss of Deputy Director and opportunity to assess and reorganize
- In service Learning Labs in January 2024, with management team; and in April 2024 with All Staff
- Applied for 2nd year of HCPF grant to address moral through a trauma responsive lens which was awarded 6/1/2024-7/1/2025

2025

- Began Trauma Responsive training in January of 2025, and monthly through June of
- Final retreat scheduled week of June 9, 2025
- Sustainability plan to braid concepts in Strategic Plan in Employee Wellness.





Project Proposal

‘When managers and co-workers treat each other with respect and kindness, the workplace can be a safe and restorative place for people’

-Nicole B. Mason, Esq., Personal Development Executive

12 Months (07/2024-06/2025)

Training/Workshops (Virtual)

- ❖ Space for teams to explore and apply new concepts. Topics included:
 - Shame, Blame, and the Trauma Train
 - Regulating Your Organizational Nervous System
 - Supporting the Community

Leadership Labs (In Person and Virtual)

Trauma Competency Labs (Virtual)

Leadership and Staff Coaching (Virtual)

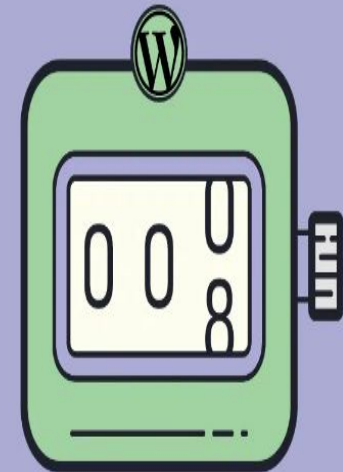


Measurables

- ❖ Pre/post surveys
 - Increase in staff satisfaction
 - Increase in Health First members satisfaction

Categories of measurement and expected benchmarks:

- Participants will have a 20% greater understanding of the impacts of trauma
- Department will see a 20% increase in staff treatment of customers
- Staff Engagement: 20% increase
- Institutional Trust: 20% increase
- Overall Employee Satisfaction: 15% increase
- Customer Engagement: 20% increase
- Customer/Member Satisfaction: 15% increase





Outcomes

Results of the Staff Surveys:

	How satisfied are you with your overall job at Pitkin County Human Services?	Rate the level of support you receive from your supervisors and colleagues.	How satisfied are you with the opportunities for career advancement and professional development provided by Pitkin County Human Services?	Rate your satisfaction with the work-life balance offered by Pitkin County Human Services.	How satisfied are you with the communication channels within Pitkin County Human Services?	Rate the level of recognition and appreciation you receive for your work at Pitkin County Human Services.	How satisfied are you with the resources and tools provided to perform your job effectively?	Rate the level of job security you feel at Pitkin County Human Services.	How satisfied are you with the organizational culture and values of Pitkin County Human Services?	How well do you feel that Pitkin County Human Services manages change?	What is your understanding of the impacts of trauma on our work?	How well do you trust your colleagues and leaders to be open and vulnerable?	I have learned tools and skills to manage my own reactions and biases when feeling dysregulated at work with coworkers or clients.
April 2024 (V.1)	3.71	3.94	3.35	4.12	3.47	3.47	3.71	4.24	3.65	2.88			
June 2024 (V.2)	4.25	4.38	4.13	4.50	3.50	3.63	4.00	4.50	4.13	3.13			
October 2024 (V.3)	4.22	4.50	4.00	4.50	3.58	3.67	4.17	4.50	4.08	3.00	3.50	3.83	3.75



Outcomes

Results of the Customer Surveys:

	In your experience, how satisfied have you been with the services provided by the Pitkin County Department of Human Services ?	Please rate the responsiveness of the Pitkin County Department of Human Services to your inquiries or requests.	How satisfied are you with the level of customer service you received during your interactions with the Pitkin County Department of Human Services?	Rate the knowledge and expertise of the staff at the Pitkin County Department of Human Services .	How satisfied are you with the accessibility of information provided by the Pitkin County Department of Human Services?	Please rate the ease of navigating through the services offered by the Pitkin County Department of Human Services.	How satisfied are you with the overall quality of the services provided by the Pitkin County Department of Human Services?	Rate the timelines of the services provided by the Pitkin County Department of Human Services.	Please rate the professionalism of the staff at the Pitkin County Department of Human Services.	How likely are you to recommend the services of the Pitkin County Department of Human Services to others?
Apr-24	4.28	4.19	4.16	4.23	4.13	3.70	4.06	4.00	4.16	4.13
Jun-24	4.41	4.36	4.22	4.38	4.27	4.04	4.37	4.32	4.38	4.32
Jan-25	3.30	3.26	3.35	3.35	3.26	3.39	3.3	3.35	3.70	3.30



Lessons Learned

Pitkin County Employees:

- Not everyone is ready to do this work.
- The word 'trauma' was in and of itself, activating for some. The language of a Trauma Responsive Workplace was changed to a Person Centered Workplace
- It was often hard to connect staff's work life separate from personal life with this type of work.
- Communication continues to be integral to trust and engagement

Health First Customers:

- ★ Organizational change may have implications on customer satisfaction
- ★ Unclear if a trauma responsive organization improves experience for clients. Awaiting final survey results.



Recommendations

- Co-creating a work plan for ongoing support through the 'storms' anticipated in the next 3-4 years.
- Continued staff and customer surveys to monitor improvement/issues.
- Implement change management practices to reduce dysregulation during organizational change.
- Awaiting final scores from surveys to glean additional recommendations/action steps.



Next Steps

- ❖ Thread the trauma responsive care into the strategic plan goal of Encouraging a Supported Workforce
- ❖ Train leadership with change management theory and a tool box to manage organizational change.
- ❖ Onboarding orientation will now include training and an introduction to how this work is part of the strategic plan.

We have a leadership responsibility
to become trauma-informed and to
create a trauma-informed workplace.

Thank You



Closing Remarks



Contact Info

HCPF_CountyRelations@state.co.us
or

Submit your question at
<https://hcpfccc.my.salesforce-sites.com/HCPFCountyRelations>



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Department of Health Care
Policy & Financing

Thank you!

