



ARAPAHOE COUNTY

Arapahoe County

Arapahoe County Board of Health

Agenda

Wednesday, April 15, 2026

Bijou Room - Open Space

3:00 PM

1. CALL TO ORDER*

2. APPROVAL OF MINUTES*

2.a Business Meeting Minutes

March Meeting Minutes

[26-183](#)

Attachments: [BOH Meeting Minutes March26 April2026](#)
[BOH Meeting Minutes March26 Additional](#)
[Communication April2026](#)

3. PUBLIC COMMENT*

Individuals are invited to speak to the Board of Health about any topic. To provide Public Comment, please contact our substitute Board of Health Liaison, Hanna Banks (hbanks@arapahoegov.com) at least 30 minutes prior to the start of the respective board meeting. Speakers will be called in the order in which they signed up. Each person has a 3-minute time limit for comments, unless otherwise noted by the Chair. Individuals must state their name and address for the record prior to making remarks.

4. BOARD OF HEALTH COMMENTS*

5. GENERAL BUSINESS ITEMS*

No General Business Items

6. STUDY SESSION*

6.a CORE Metric Spotlight

WIC & BFPC Core Presentation

[26-184](#)

Attachments: [BOH StudySession CORE Spotlight WIC and BFPC April2026](#)

6.b Presentations

Environmental Health Fees Presentation [26-185](#)

Attachments: [BOH_Study_Session_Presentation_EH_Fees_April2026](#)
[BOH_Study_Session_Presentation_Fee_Change_Adoption](#)
[BSR_April2026](#)

6.d Legislative Update

Legislative Update - Will be updated April 15 [26-186](#)

Attachments: [BOH_Study_Session_Legislative_Update_April2026](#)

6.e Director's Report

April Director's Report [26-187](#)

Attachments: [BOH_Study_Session_Directors_Report_April2026](#)

7 EXECUTIVE SESSION

As required by law, specific agenda topics will be announced in open meeting prior to the commencement of the closed and confidential portion of this session. C.R.S. § 24-6-402(4)

8. ADJOURN*

Arapahoe County is committed to making its public meetings accessible to persons with all abilities. Please contact our substitute Board of Health Liaison, Hanna Banks (hbanks@arapahoegov.com) at least three (3) days prior to a meeting, should you require special accommodations



Arapahoe County

5334 South Prince Street
Littleton, CO 80120
303-795-4630
Relay Colorado 711

Board Summary Report

File #: 26-183

Agenda Date: 4/15/2026

Agenda #:

Arapahoe County

*Arapahoe County Public Health - Lima Building
6964 S. Lima St.
Centennial, CO 80112*



ARAPAHOE COUNTY

Meeting Minute Summaries

Wednesday, March 18, 2026

3:00 PM

Bijou Room - Open Space Building

Arapahoe County Board of Health

The public is welcome to attend the Board of Health meeting in the Bijou Room at 6934 S. Lima St. Centennial, CO 80112 or virtually on Teams using the following meeting information:

Meeting ID: 270 688 752 384 0

Passcode: qf3ir7EE

*The Board of Health agenda and materials can be viewed online at
<https://arapahoe.legistar.com/Calendar>.*

1. CALL TO ORDER*

Present Shawn Davis, Kristine Burrows, Mark Mcmillan, Bebe Kleinman, and Terrence Walker

Abs/Exc Michelle Weinraub, and Mark Levine

2. APPROVAL OF MINUTES*

2.a February Board of Health Minutes

Attachments: [BOH Meeting Minutes Feb26 March2026](#)

A motion was made by Burrows, seconded by Davis, that the February Minutes be approved. The motion carried by the following vote:

Aye: Davis, Burrows, Mcmillan, Kleinman, and Walker

3. PUBLIC COMMENT*

There were no members of the public present in-person or online to make public comment.

4. BOARD OF HEALTH COMMENTS*

5. GENERAL BUSINESS ITEMS*

5.a Onsite Wastewater Treatment System Hearing and Adoption

Proposed Revisions to the Arapahoe County On-Site Wastewater Treatment System (OWTS) Regulations: Hearing and Adoption

Attachments: [BOH General Business OWTS Presentation March2026](#)
[BOH General Business Arapahoe County On-site Wastewater Treatment System Regulations March2026](#)

A motion was made by Burrows and seconded by Kleinman to approve the adoption of the Arapahoe County Onsite Wastewater Treatment System Regulations as presented.

Aye: Davis, Burrows, Mcmillan, Kleinman, and Walker

6. STUDY SESSIONS*

6.a Presentations

Attachments: [BOH Study Session_Q4 Financial Update_March2026](#)

6.b Englewood Move Update

Attachments: [BOH Study Session Move Updates March2026](#)

6.c Legislative Update

Attachments: [BOH Study Session Legislative Update March2026](#)

6.d Director's Report

Attachments: [BOH Study Session Directors Report March2026](#)

7. EXECUTIVE SESSION

No executive session was held.

8. ADJOURN*

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arapahoeco.gov

Dear BOH directors and ACPH leadership team:

In my haste to give timely overdose information at our Board meeting, I gave some inaccurate data and want to correct that in this memo.

2024

Colorado-1603 overdose deaths with 964 related to any opioid analgesic.

Arapahoe County-194 overdose deaths with 130 deaths related to any opioid analgesic

Denver County- 396 overdose deaths with 275 deaths related to any opioid analgesic.

Age adjusted rates per 100,000 residents (better comparison data)

Colorado 15.73 any opioid analgesic overdose /100,000 population

Arapahoe 18.85 any opioid analgesic overdose /100,000 population

Denver 34.84 any opioid analgesic overdose /100,000 population

I have attached the searchable CDPHE website here if you want to dig deeper.

https://cohealthviz.dphe.state.co.us/t/HealthInformaticsPublic/views/Drug_Overdose_Dashboard_All_Years_No_Race_FINAL/Story1?embed=y&:iid=3&:isGuestRedirectFromVizportal=y

I apologize for any confusion.

Respectfully,
Chris



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Agenda #:



ARAPAHOE COUNTY



What is a Breastfeeding Peer Counselor?

- Have specialized training to provide personalized breastfeeding support by text, phone, or email
- Are available after hours, weekends, and holidays to provide 24/7 support
- Connect families with a breastfeeding expert or additional resources if needed



Story Time!



Our team of peer counselors connect with families during moments when compassionate support matters most.

I am so grateful. In those moments when I needed it most, and I didn't know what was happening to me or my baby, that informative message arrived, calming my mind and bringing me peace. Thank you so much. Keep up the good work. You are a key support during postpartum. You helped me and continue to help me immensely.

Beautiful support for such a stressful, uncertain experience, especially for first time moms. Thank you!

I'm very grateful for this type of program. It truly helped me psychologically to feel better with the tips and words of encouragement that [my peer counselor] shared with me.



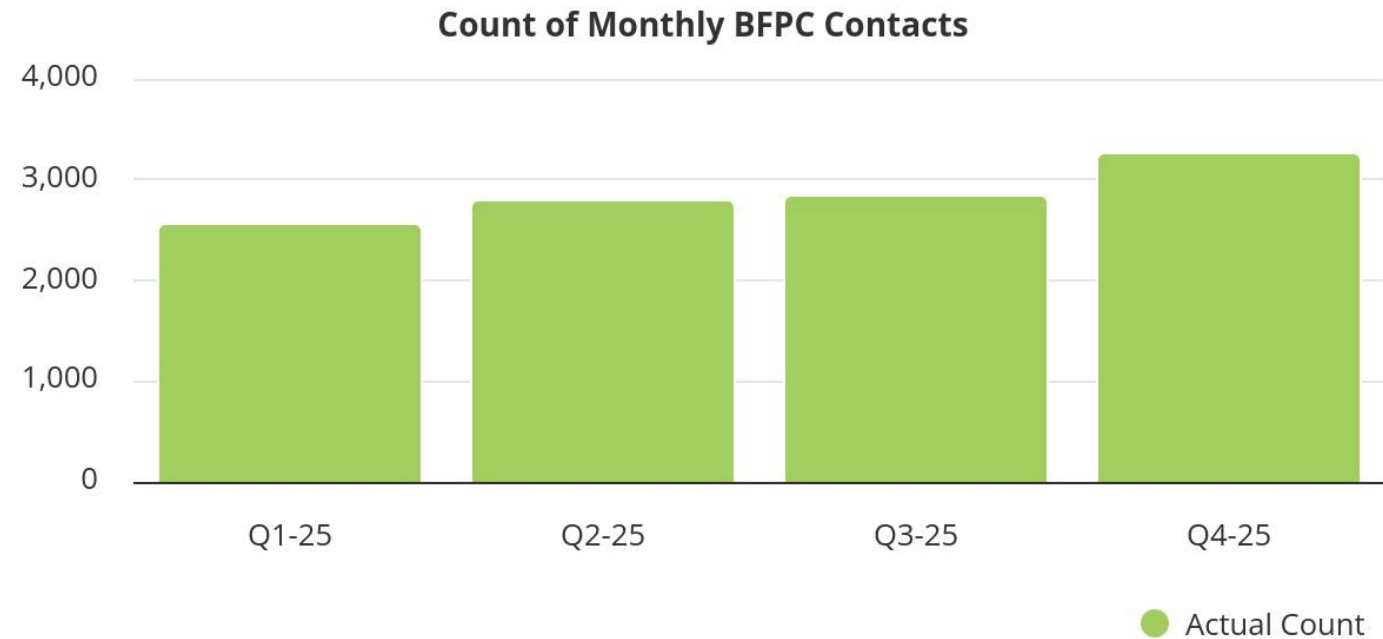
Metric Overview

This measure shows the number of breastfeeding support contacts completed by the ACPH BFPC program.

Breastfeeding is a major public health priority - it improves health outcomes, reduces healthcare costs, and addresses health inequities at the population level.

This effort improves breastfeeding self-efficacy and improves initiation and duration rates.

In 2025, the peer counselors completed 11,448 contacts with breastfeeding families.



Learning Opportunities

Challenge: Caseload has increased without the ability to hire new staff. The number of hours that the peer counselors work is limited by funding which limits capacity.

Action Taken: System-Only approach

Action Taken: Monthly Pump Follow Up Program

Challenge: Breastfeeding rates are influenced by many external factors beyond our control, including support in hospitals, at home, at work or school, in daycare settings, medical issues, and legislation.

Action Taken: Work with community partners (e.g., hospital lactation program networking meetings, Colorado Breastfeeding Coalition involvement)



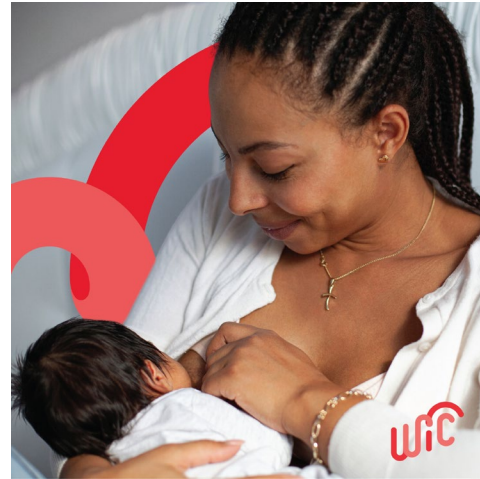


What is WIC?

WIC is The Special Supplemental Nutrition Program for Women, Infants, and Children.



One-on-One
Tailored Nutrition
Counseling



Breastfeeding
Support



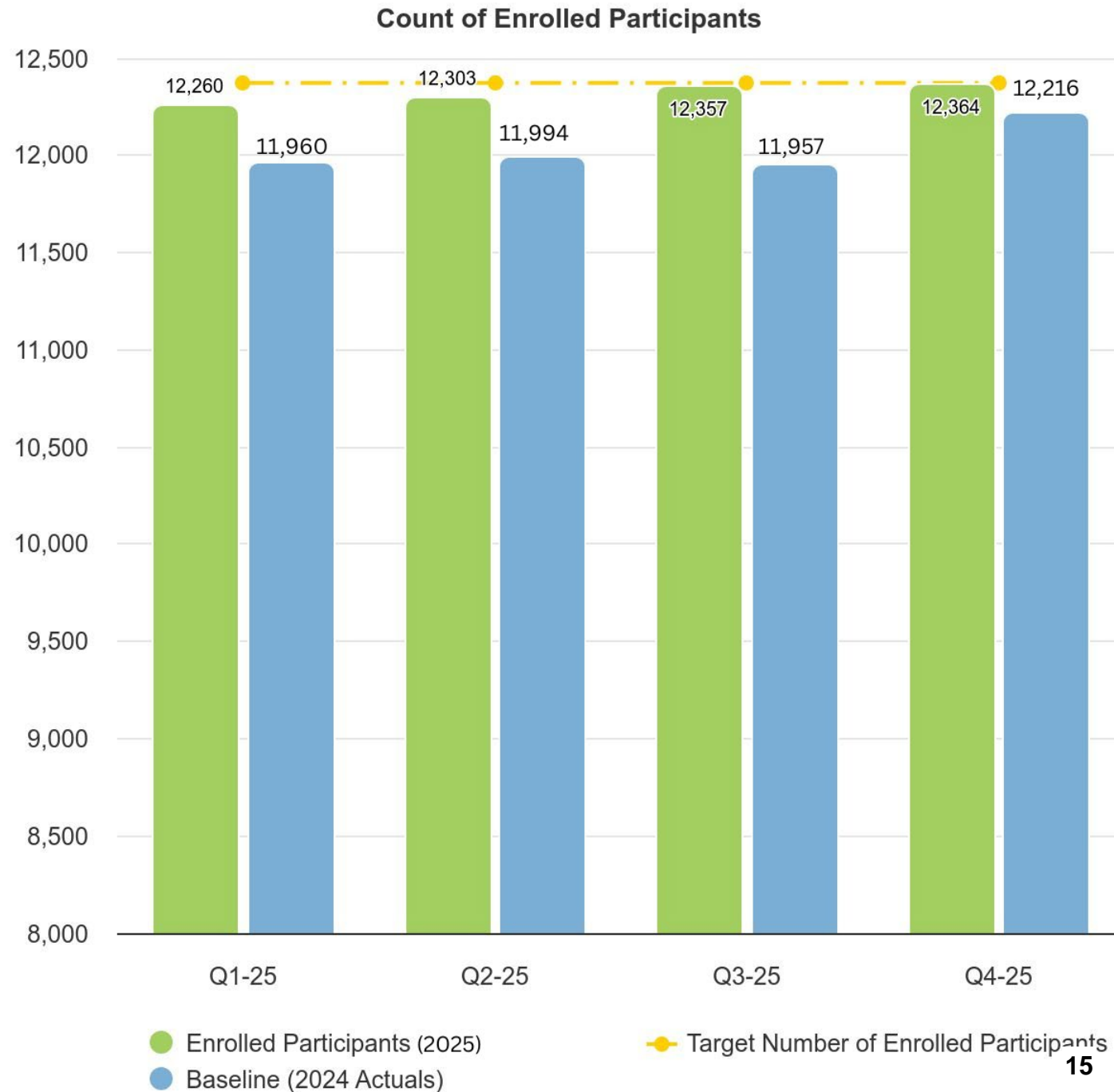
Access to
Healthy Food



Referrals to Health
& Community
Services

Metric Overview

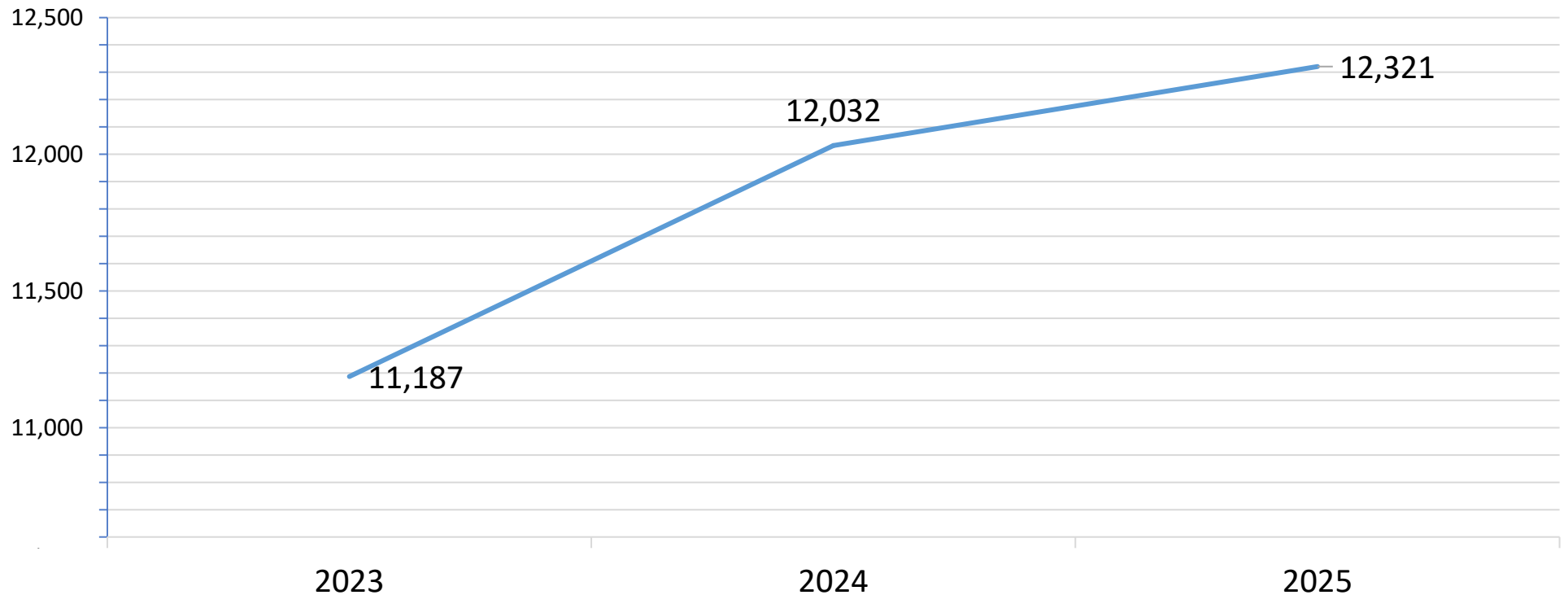
- This measure shows the **Average Monthly Number of Enrolled Participants** per quarter on WIC.
 - Caseload is increasing
 - Target is to maintain caseload
- This measure is tracked to monitor:
 - Staffing workload and capacity.
 - Current and projected funding needs.
 - External policy, economic and community influences.



Metric Overview

- This measure shows the Annual Average Number of Enrolled Participants in 2023-2025.
 - Sharp increase in 2023
 - Slower increases in 2024 and 2025

Annual Average Number of Enrolled Participants
2023-2025



Learning Opportunities

Challenge: Caseload is growing yearly with budget constraints, unable to hire additional staff to support the increase in participants.

Action Taken: Request additional funding from state and local sources.

- **Challenges:** There is a limited amount of money to be distributed among programs.

Action Taken: Explore additional income streams from grants, Medicaid billing, and other sources.

- **Challenges:** Additional workload is often tied to grants and other funding sources.

Action Taken: Expand the use of online WIChealth.org appointments, where families complete self-paced nutrition education lessons instead of an appointment with WIC Staff.



WIChealth.org Success!

The use of **WIChealth.org** has allowed us to serve our growing caseload. It is funded by Colorado WIC so there is no cost to our Program.

WIChealth.org has freed up clinic schedules, so we can see other participants, and families like the convenience and variety of lessons offered.

In 2024:

- **5,923** appointments diverted to WIChealth.org.
- **1,481** staffing hours saved.
- Value of staff time saved was **\$71,413.82!**

In **2025** even more appointments were diverted and more time was saved.



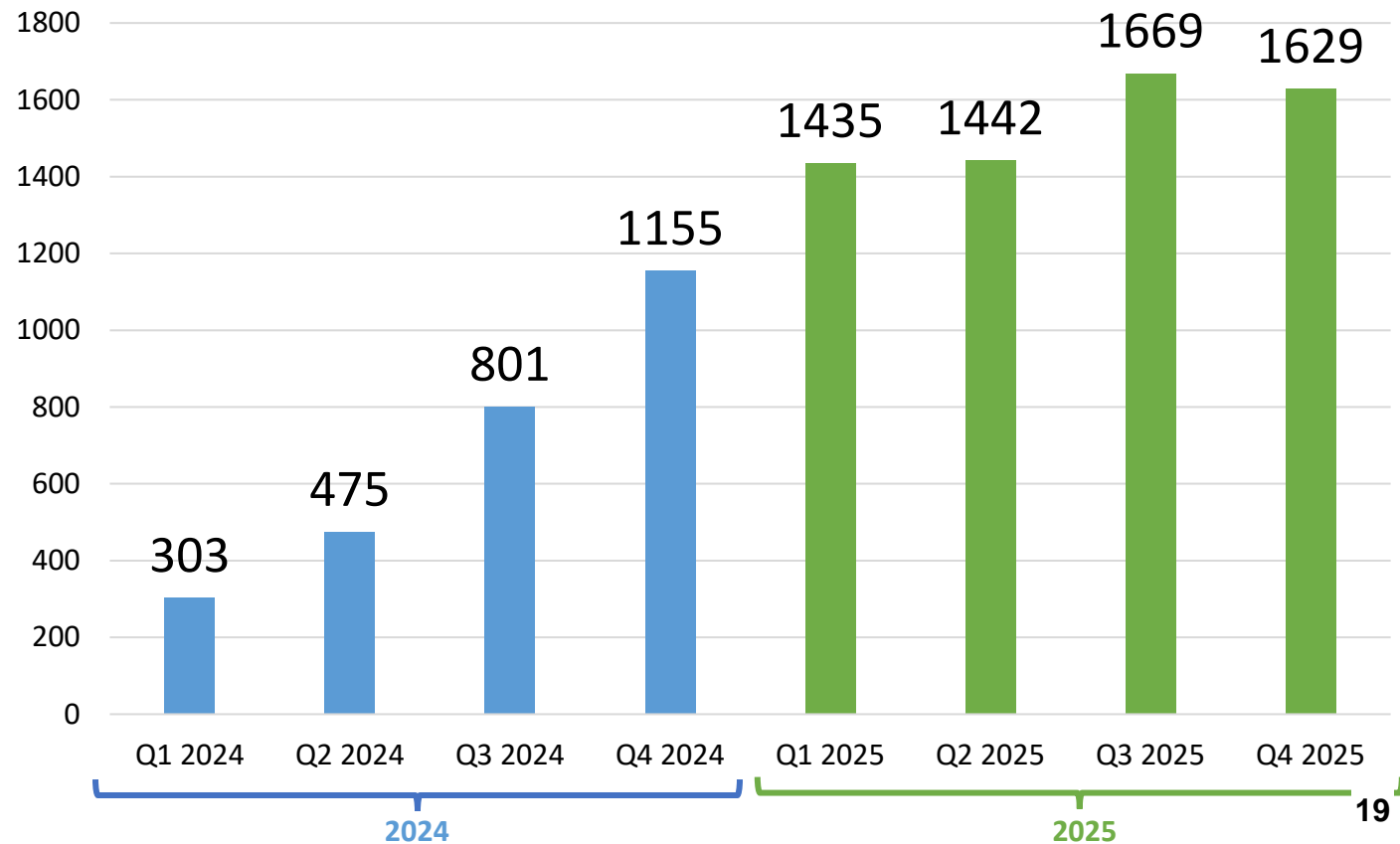
Metric Overview

This measure shows the count of **WIChealth.org Accounts** in 2024 and 2025.

- Steadily increasing

This measure is used to monitor our WIChealth.org enrollment progress.

WIChealth.org Accounts – 2024 & 2025



WIC STRONG



2026 Path Forward

Continue to provide quality services to WIC Families

- **Action Taken:** Continue expansion of online WIChealth.org appointments. Action Team created to refine clinic processes.
- **New Action Taken:** Medicaid billing for IBCLC (International Board Certified Lactation Consultant) services in 2026.
- **Action Taken:** Create a One Note document of text messages by topic for quick access by peer counselors to save time.



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Board Summary Report

File #: 26-185

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ARAPAHOE COUNTY



Environmental Health Fees for Board of Health Adoption

April 2026

Kristin Byer, Business Operations Manager
Division of Health Protection and Response
Arapahoe County Public Health

Agenda

- Environmental Health (EH) Fees by Relevant Statute
- History of Fees at Arapahoe County and in the Environmental Health Programs
- Survey Results - Community Priorities
- Review Proposed Fees for BOH Adoption
- Next Steps
- Questions

Environmental Health Fees Set by State Statute



- Statutory Authority: 25-4-1607 and 25-4-1611.5 (Food Protection Act)
- These statutes refer to only Retail Food Establishments
 - Licenses, plan review application/inspections fees, civil penalties
- 25-4-1607.5 – Process to review/revise statewide fees
 - CDPHE, local health agencies, retail food industry
 - Statutorily required to meet at least once every three years
 - Most recent fee increase approved in 2025 with phased effective dates.
 - ~25% in 2026
 - ~17% in 2027
 - ~20% in 2028
- Arapahoe County Board of Health cannot amend fees set by state statute.

Environmental Health Fees Set by Board of Health



- BOH Statutory Authority: C.R.S. 25-1-508 (5)(j): “To provide environmental health services and to assess fees to offset the **actual, direct cost of such services**; except that no fee for a service shall be assessed against any person who has already paid a fee to the state or federal government for the service, and except that the only fee that shall be charged for annual retail food establishment inspections shall be the fee set forth in section 25-4-1607”
- This statute applies to fees for programs such as Body Art, Child Care, Swimming Pools, and hourly services.

Environmental Health Fees Set by Board of Health



- BOH Statutory Authority: C.R.S. 25-10-107 (1): “A local board of health may set fees for permits. The permit fees may be no greater than required to offset the **actual indirect and direct costs** of the local public health agency’s services. With respect to any permit, the local board of health shall set the fee for the permit so as to recover, as nearly as can be practically established, the costs associated with that permit...”
- This statute is specific to Onsite Wastewater Treatment Systems

History of ACPH's Environmental Health Fees

- As a new Public Health organization, we made a recommendation to adopt the fees from Tri-County Health Department in December 2022.
 - Fees at Tri-County were last updated in 2019.
 - The Consumer Price Index Denver-Aurora-Lakewood region has increased 22.39% between December 2019 and February 2026.
- The Board adopted the recommended fees and ACPH has been charging these same EH fees since operations began in January 2023.
- ACPH has conducted a cost / fee review based on data gathered at Arapahoe County Public Health.
- Based on this review, we are presenting potential fee adjustments for the Board of Health to consider for adoption.

Approach to Fees

ACPH process when recommending fees to the Board of Health:

1. Calculate the cost to deliver services in alignment with statutory guidance.
2. Costs are reviewed considering the ACPH approach to fees.
3. The results of this review support recommendations for fee changes (if needed).
4. Fees, including recommended fee changes, are submitted to the Board of Health for review, discussion, and approval. The review and approval discussions are hosted in a public forum.

Calculations for Cost to Deliver Services

- Use of standard tool to calculate program costs in accordance with the appropriate statutes (see sample data below)
- 3-year average to smooth year to year fluctuations

Program Name: EXAMPLE		
Fee Type: Annual Inspection		
Year: 20XX		
1	Program Cost from Financial Statement	\$ 27,781.80
2	Other Fee (Cost Recovery) Revenues: Penalty, Plan Review, Assessment, Change of Owner, Education, Misc.	\$ (965.00)
3	Net Costs	\$ 26,816.80
4	Total Units (i.e, Facilities, Permits)	80
5	Per Unit Cost - 2025 Actual	\$ 335.21
6	Per Unit Cost - 2024 Actual	\$ 301.26
7	Per Unit Cost - 2023 Actual	\$ 285.13
8	3-year Mean Per Unit Cost	\$ 307.20
9	Current Fee	\$ 285.00
10	Difference 3-year Mean Per Unit Cost/Current Fee	\$ 22.20

Community Feedback



Get To Know Public Health: Helping Schools And Child Care



Community Connection:

Get To Know Us; Take Our New Survey

Arapahoe County Public Health is hard at work behind the scenes in almost every aspect of your daily life. From making sure public pools are safe to swim in and food trucks are serving up safe food, to ensuring that schools and child care centers are following guidance that ensures clean and healthy learning spaces. Now is your chance to help us get a sense of what matters to you most! Take a brief moment to fill out our environmental health focused survey and let us know which programs you deem most essential to helping our community thrive and stay healthy.

Share your thoughts with us on which environmental public health programs matter to you most! Take our 2-minute [survey](#) and let us know if programs like these are important to you.

Proposed Fee Changes

Environmental Health Fee Type	Unit of Activity	Current Fee	Proposed Fee 2027	Proposed Fee 2028	Proposed Fee 2029	Authority
Body Art - License / Annual Inspection	Annual - Per License	\$345	\$380	\$380	\$380	25-1-508
Child Care - Inspection - Partial Day (≤ 4 hours)	Per Inspection	\$190	\$255	\$255	\$255	25-1-508
Child Care - Inspection - Full Day (between 4 and 24 hours)	Per Inspection	\$255	\$255	\$255	\$255	25-1-508
Environmental Health Hourly Services*	Per Hour	\$60	\$65	\$65	\$65	25-1-508
Healthy Building	Per Hour	New Program	\$65	\$65	\$65	25-1-508
Plan Review Application - All Facility Types Except Food and Recreational Water (2-hour minimum)	Per Plan Review	\$120	\$130	\$130	\$130	25-1-508
Retail Food - Special Event Vendor License - <i>Application received >10 days before event</i> (New/Renewal)	Annual - Per License	\$165	\$175	\$175	\$175	25-4-1607
Retail Food - Special Event Vendor License - <i>Application received ≤10 days before event</i> (New/Renewal)	Annual - Per License	\$165	\$225	\$225	\$225	25-4-1607
Retail Food - Special Event Inspection (per inspector)	Per Hour	\$60	\$65	\$65	\$65	25-1-508
Retail Food - Education, 2 Hour In-Service Training	Per Training	\$120	\$130	\$130	\$130	25-1-508

*Hourly fees apply to Environmental Health Program services such as consulting, training, environmental record reviews, and similar.

Proposed Fee Changes (Continued)

Environmental Health Fee Type	Unit of Activity	Current Fee	Proposed Fee 2027	Proposed Fee 2028	Proposed Fee 2029	Authority
Recreational Water (Pool / Spa / Spray Pad) - Inspection	Per Filtration System	\$175	\$210	\$245	\$280	25-1-508
Plan Review - Recreational Water (2-hour minimum)	Per Body of Water	\$120	\$130	\$130	\$130	25-1-508
On-Site Waste Water - New Permit	Per Permit*	\$1,120	\$1,520	\$1,920	\$2,320	25-10-107
On-Site Waste Water - Major Repair or Expansion Permit	Per Permit*	\$740	\$825	\$825	\$825	25-10-107
On-Site Waste Water - Minor Repair Permit	Per Permit*	\$415	\$420	\$420	\$420	25-10-107
On-Site Waste Water - Transfer of Title/ Use Permit/ Use Permit - Higher Level (Renewal)	Per Permit	\$85	\$105	\$105	\$105	25-10-107
On-Site Waste Water - Re-Inspection	Per Inspection	\$120	\$130	\$130	\$130	25-10-107
On-Site Waste Water - Plan Review per additional hour (> 1 hour)	Hourly Per Plan Review	\$60	\$65	\$65	\$65	25-10-107
On-Site Waste Water - Installers' & Cleaners' License (New/Renewal)	Annual - Per License	\$35	\$30	\$30	\$30	25-10-109
Land Use Plan Review - Level One (2.5 hours)	Per Plan Review	\$150	\$175	\$175	\$175	25-1-508
Land Use Plan Review - Level Two (3.5 hours)	Per Plan Review	\$210	\$245	\$245	\$245	25-1-508
Land Use Plan Review - Level Three (6 hours)	Per Plan Review	\$360	\$420	\$420	\$420	25-1-508
Land Use Plan Review - Level Four (12.5 hours)	Per Plan Review	\$750	\$875	\$875	\$875	25-1-508

*Includes \$23 authorized by section C.R.S 25-10-107

Fees Without Proposed Changes

These fees were either calculated to be the same or lacked sufficient data to be calculated.

Environmental Health Fee Type	Unit of Activity	Current Fee	Authority
Methamphetamine	Per Case	\$310	25-1-508
On-Site Waste Water - Permit Renewal (New/Repair)	Per Permit	\$50	25-10-107
On-Site Waste Water - Variance Request (New/Repair Permit)	Hourly	\$70	25-10-107
Retail Food - Plan Review Special Event Application (02-15 Vendors)	Per Application	\$100	25-4-1607
Retail Food - Plan Review Special Event Application (16+ Vendors)	Per Application	\$200	25-4-1607
Septic - Civil Penalty	Penalty Fee Per Day	\$50	25-10-113(1)(a)

Fee Comparisons with Other Counties*

Program	Unit Type	ACPH (Current)	ACPH (Proposed)	Douglas	Jefferson	Adams	Weld	Boulder	El Paso
All Programs	Hourly Fee	\$60	\$65	\$60	\$85	\$80	\$100	\$156	\$62
Body Art	License	\$345	\$380	\$355	\$170	\$350	\$350	\$353	\$475
Child Care	Partial Day ≤ 4	\$190	\$255	\$175	\$170	\$255	\$200	\$170	\$275
Child Care	Full Day > 4 hours or > 24 hour	\$255	\$255	\$240	\$170	\$255	\$350	\$285	\$366
Retail Food - Special Events	Special Event License	\$165	\$175/\$225	\$135	\$145 / \$175	\$165	\$150	N/A	\$248-\$298
Rec Water - Pools	Per filtration system	\$175	\$210, \$245, \$280	\$180	\$170	\$210	N/A	N/A	\$131
OWTS	New	\$1,120	\$1520, \$1920, \$2320	\$1,060	\$1,523	\$1,156	\$1,500	\$3,023	\$961
OWTS	Major Repair / Expansion	\$740	\$825	\$695	\$773	\$775	\$1,100	\$1,823	\$891
OWTS	Minor Repair	\$415	\$420	\$390	\$773	\$450	\$250	\$1,223	\$554
OWTS	Use / Transfer of Title	\$85	\$105	\$65	\$120	\$150	\$200	\$500	\$368
OWTS Professionals - Installers	License	\$35	\$30	\$40	New: \$50 Renewal: \$25	\$35	New: \$75 Renewal: \$50	\$100	Fees are every 2 years; New: \$152 Renewal: \$110
OWTS Professionals - Cleaners	License	\$35	\$30	\$40	New: \$30 Renewal:15	\$35	New: \$75 Renewal: \$50	\$100	\$232

*Comparisons are approximate as different counties structure fees differently. For example, ACPH structures Child Care fees by duration of care while other counties use number of children, complexity of care, etc.

Timeline & Next Steps



Apr 2026

- Present Board of Health (BOH) with requested fee changes

May 2026

- Address feedback and follow up questions

June 2026

- Seek BOH Approval for New Fees

Jan 1, 2027

- Effective Date of Adjusted Fees





6964 S. Lima Street
Centennial, CO 80112
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To: Board of Health

Through: Jennifer Ludwig, Public Health Director, Public Health

Prepared By: Kristin Byer, Business Operations Manager, Health Protection and Response

Presenter: Kristin Byer, Business Operations Manager, Health Protection and Response

Subject: Proposed Fee Changes for Adoption– Study Session

Purpose and Request:

This study session will provide an overview of:

- The history of fees governed by the Arapahoe County Board of Health
- The methodology used to calculate the cost of delivering services
- Community feedback on the environmental health services they consider most impactful
- Recommended fee adjustments for the Board’s consideration for adoption in June 2026

Background and Discussion: When Arapahoe County Public Health (ACPH) was established in January 2023, we did not yet have sufficient data to calculate the cost of delivering services. As a result, the Board of Health adopted the existing fee structure from the prior organization, Tri-County Health Department, who provided public health services to Arapahoe County. These fees were last updated in 2019, as staff typically responsible for conducting fee reviews were reassigned to support response to the COVID-19 pandemic.

After three years of operation as a single county health department at Arapahoe County, ACPH has sufficient data to assess the cost of service delivery. We completed this review in accordance with statutory guidance and analyzed the gap between current fees and actual costs. Based on this analysis, we developed recommended fee adjustments for services where costs exceed current fees.

Fiscal Impact: ACPH proposes an effective date of January 1, 2027 for the fee changes. Most fees are structured to remain unchanged for three years. For fees requiring larger increases, a phased approach over three years is recommended to minimize immediate impact. Based on 2025 service volumes, the estimated incremental revenue is:



2027: \$36,924

2028: \$57,574

2029: \$78,224

Alternatives: No Board action is requested during this study session.

At the June 2026 public hearing, the Board of Health may:

- Adopt all proposed fee changes
- Adopt select fee changes while leaving others unchanged
- Decline to adopt any fee changes

Staff Recommendation:

ACPH staff recommend that the Board of Health:

- Review the information presented
- Provide feedback and request additional information as needed
- Consider the proposed fee adjustments for formal adoption at the June 2026 public hearing



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Board Summary Report

File #: 26-186

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Place Holder



Arapahoe County

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Board Summary Report

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April Director's Report



ARAPAHOE COUNTY
PUBLIC HEALTH

Public Health Director's Report
Prepared by: Jennifer Ludwig
Date Prepared: April 7, 2026
Dates Covered: March 11 – April 7, 2026

Mission Moments

Improving Mobile Food Truck Review Process

New mobile food truck operators must complete a Plan Review to ensure their setup and equipment meet regulatory requirements. This process requires submitting detailed information and resolving any issues before a license is issued.

The average timeline has improved significantly—from about 2 months to approximately 3 weeks in 2026—due to several process improvements:

- a. Clearer application materials: Reduced jargon and improved descriptions to better guide operators
- b. Greater accessibility: Applications available online and on paper, in English and Spanish; support staff can directly converse with operators in English, Spanish, and Russian
- c. Pre-application and inspection checklists: Provided in English and Spanish to help operators submit complete applications and understand inspection expectations
- d. Customer-focused support: Inspectors guide and educate operators throughout the process, helping them navigate requirements
- e. Hands-on assistance: When operators pick up an application in person our Business Support staff offer to walk through applications. This provides an opportunity to call out items we often see not completed correctly. This helps operators avoid common mistakes
- f. Online scheduling: Operators can self-schedule inspections, reducing delays

These improvements are making a real impact. One recent applicant received in-person support in Spanish, submitted a complete application with no follow-up needed, and passed inspection on the first attempt—going from application to license in just 5 business days.

Resource Finder Collaboration

A cross divisional collaborative win! The ACPH Resource Finder is officially up and running. Through a cross-division collaboration, eight staff members across four divisions verified information for 482 organizations and over 1,000 programs in the community that provide services our clients may need, from food and shelter to lactation support and affordable providers. We are now moving into the “maintenance” phase, during which we will confirm service information every six months to ensure our referrals remain accurate. This work is also reflected in ACPH core measures, highlighting a successful cross-division effort that benefits both staff and clients. **This initiative aligns with the ACPH Community Health Improvement Plan goal of increasing economic wellbeing.**

B. Community Health Improvement Plan (CHIP) Headlines

You can find more details on these CHIP headlines in the Program Updates section.

1. Collaborative effort launched to inform future chronic disease prevention and control initiatives
2. Supporting development of Englewood's Age-Friendly Action Plan
3. Popular ACPH Baby Café efforts enhanced with new grant funding
4. ACPH economic wellbeing work highlighted at Advent Health Annual Public Meeting
5. Funding continuation enables efforts to strengthen the healthcare workforce
6. Community partners trained as tax ambassadors through metro collaboration
7. Thousands reached with critical tax filing information for minimal cost using new tech tool
8. Arapahoe County leads the state in tax filings receiving the Family Affordability Tax Credit
9. Childhood immunizations increased among Burmese and Rohingya-speaking residents and others through language interpretation, mobile clinics, and community partnerships

C. Events and Engagement Opportunities

Spotlight on upcoming events:

- May 1, Senior Resource Fair at May Farms in Byers
- May 2, Southeast Aurora Islamic Center Health Fair in Centennial
- May 16, Soccer City with Iron Sharp in Aurora

Please reach out to [Grace Soulen](#) or visit our [Community Engagement Event Request Form](#) to suggest upcoming outreach opportunities. **This initiative aligns with CHIP objectives that advance community engagement.**

D. Program Updates

Administration

- 1) National Public Health Week is celebrated annually the first week of April to recognize the contributions of public health professionals. To mark the occasion, the Arapahoe County Board of Commissioners proclaimed April 6-12, 2026 as National Public Health Week and called on residents to recognize the value of public health, celebrate those who dedicate their work to keeping our community healthy, and commit to taking action toward a healthier future for all.
- 2) Arapahoe County was selected as one of just 12 counties nationwide for the highly competitive Public Health Leadership Academy, an inaugural program led by NACo, in partnership with the de Beaumont Foundation. The effort brings together ACPH, led by Jennifer Ludwig and Commissioner Warren-Gully, working together to align county leadership and public health strategies. Included in

this initiative are virtual learning, technical assistance, and an in-person convening in Washington, D.C., where participants engage with national leaders and peers. Through the program, the county will develop a data-driven public health action plan and strengthen cross-sector collaboration to address priority issues and improve community health outcomes.

- 3) ACPH had the opportunity to take a tour of Kazmira Therapeutics, a company supporting pharmacist-compounded cannabinoid formulations within licensed pharmacy and clinical evaluation frameworks. ACPH does not have regulatory authority, but Kazmira Therapeutics is in our jurisdiction.
- 4) Senator Hickenlooper will be meeting with Denver-metro public health leadership on April 8. More information can be shared after the meeting occurs.
- 5) ACPH coordinated Verbal Judo training for approximately 95% of ACPH staff. The opportunity was made possible by funding from Emergency Preparedness and Response and coordinated by staff from across multiple divisions and programs.

Partnerships, Planning and Community Health Promotion

1) Chronic Disease Community Health Assessment

The Community Health Promotion team kicked off a grant-funded process to assess factors associated with chronic disease in Arapahoe County, including social determinants, risk and protective factors, root causes and health outcomes in addition to community capacity. Please stay tuned for more information as the project steering team finalizes plans for inviting input through focus groups and survey participation. The final report, scheduled for August, is intended to guide efforts slated for non-competitive grant funding through CDPHE. **This initiative will help inform new and/or existing CHIP efforts upon completion in Q3 of 2026.**

2) Englewood Age-Friendly Action Plan

Melissa has been invited to participate in the next phase of Englewood's Age-Friendly Action Planning as a community partner, joining two working sessions focused on identifying strategic priorities for the future and outlining initial action steps. The group is intentionally designed to represent different roles, experiences, and community connections to ensure a well-rounded and inclusive planning process. Sessions are planned for May and June. **This initiative aligns with CHIP objectives that advance age-friendly practices.**

Nutrition Division

- 1) Nutrition received a grant for \$1,000 from the Human Milk Feeding Supportive Funding grant through the Colorado Breastfeeding Coalition and La Leche League of Mountain Plains. The funding will help support our Baby Cafe efforts to help educate, advocate and collaborate to reduce barriers and support families to achieve their breastfeeding goals. The funds will be used to enhance attendance at the Baby Café and create a more breastfeeding-friendly environment. By increasing participation, we aim to generate revenue through Medicaid reimbursement for lactation support services, which will help sustain and expand the Baby Café. We will purchase items requested by attendees to improve both the environment and the support offered. Additionally, we will update our promotional materials to highlight the availability of new IBCLC support. **This effort is included in our CHIP as a key strategy for advancing economic wellbeing and community safety, including social connections.**

- 2) Nutrition Programs by the Numbers for February 2026
 - a. WIC Clients Enrolled: 12,094
 - b. WIC Benefits Utilized at Arapahoe County WIC Authorized Grocery Stores: \$916,048
 - c. Number of WIC Appointments Seen: 4,612
 - d. Number of Calls Handled through Call Centers: 4,607
 - e. Number of Breastfeeding Peer Counselor Contacts: 1,043
 - f. Number of Breastfeeding Class Attendees: 14
 - g. Number of Mom/Baby Pairs at Baby Cafe: 21
 - h. Number of SNAP Applications Assisted: 41, benefiting 133 household members

Community Health Nursing Division

- 1) Maternal Child Health & Regional Health Connector
 - a. The Career Paths into Healthcare Program contract has been extended an additional 12 months beyond the original 6-month contract. This extension will allow for the Regional Health Connector to continue to work on the program. The Career Paths into Healthcare Program (CPHP) is a 5-year initiative led by the University of Colorado School of Medicine (CUSOM) Department of Family Medicine (DFM) to strengthen Colorado's healthcare workforce, not just providers, but the full range of roles that make clinics, hospitals, and community health programs work. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing.**
 - b. The Regional Health Connector presented at the Advent Health Annual Public Meeting on the Economic Mobility strategies that that ACPH is implementing including our nurse home visitation programs, WIC, and our concrete resources and supports work. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing.**
 - c. The MCH team received data on the Family Affordability Tax Credit (FATC) by county for tax year 2024 (filed in 2025). Among Colorado's 64 counties, Arapahoe County had the highest number of returns in which families received the FATC. A total of 44,290 households in Arapahoe County received the credit, resulting in \$126,332,000 returned to local families. Statewide, 320,490 FATC returns were filed, with \$865,929,000 refunded to Coloradans. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing**
 - d. The MCH team identified a new outreach strategy with great success. The team used a digital flyer management system called PeachJar for school outreach. A tax outreach flyer was distributed to 49 schools in Aurora Public Schools. The flyer ran for four weeks at a cost of \$625. To date, it has been delivered 34,503 times, with 25,777 unique deliveries, resulting in 13,367 unique impressions. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing.**
 - e. Arapahoe MCH, in collaboration with the Jefferson County and Adams County Health Departments, sent 5 community partners to the Colorado Fiscal Institute's 6-week Tax

Ambassador Program. By training individuals from trusted community-based organizations who understand tax codes, Colorado's fiscal constraints, and the tax filing process, we ensure there are knowledgeable advocates who are able to support the community in navigating tax filing. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing.**

2) Immunizations

- a. In March, the Immunization program administered 766 immunizations.
- b. Mobile clinics were held in conjunction with schools in Cherry Creek and Aurora Public Schools. Also, a mobile clinic was held for a new partner, the Aurora Housing Authority. 1A funding was utilized to provide in-person interpretation at a school clinic for families who speak Burmese and Rohingya – an invaluable resource for improving communication at busy clinics where phone interpretation is challenging. **This effort is included in our CHIP as a key strategy for advancing Economic Wellbeing through increased access to health care.**
- c. [SB26-032](#) Promoting Immunization Access was signed into law. This bill extends protections for Colorado providers administering vaccines on evidence-based schedules such as the American Academy of Pediatrics. ACPH supported this bill through CALPHO, the Commissioners Office, direct testimony from the CMO, and participation in a state-wide coalition – Colorado Chooses Vaccines.
- d. CDC released [data for children born in 2021-22](#) showing that while most people do vaccinate their children, slight decreases in childhood vaccine rates continue. These decreases were most notable for flu vaccine. Children living in poverty and those who are eligible for the [Vaccines for Children Program](#) (VFC) had the lowest vaccination rates – demonstrating the continued need for VFC program access and clinics like at ACPH that serve children in need of a medical home and without insurance.

3) Sexual Health

- a. The Sexual Health and Harm Reduction teams participated in a special Communicating Across Differences DIVE workshop on March 2. Together, our team developed a set of team Rights and Responsibilities to ensure that we center equity and respect in all of our interactions with each other and the community.
- b. The Sexual Health and Harm Reduction program participated in the first in a series of Emergency Preparedness trainings to better prepare for their roles in case of a public health emergency.
- c. In response to a cluster of five mpox cases identified in Colorado Springs, the sexual health clinic has revised mpox protocols and retrained staff on testing and management of mpox in the event of an outbreak. One of the Colorado Springs cases was an Arapahoe County resident.
- d. In future Director's Reports, the Sexual Health program will provide an update on communicable disease trends in Arapahoe County related to sexual health. Below is a summary of trends from recent years, including February 2026 preliminary data. *Please note that 2026 data may be incomplete and will be updated in subsequent reports.

Total Cases in Arapahoe County	Chlamydia	Gonorrhea	Syphilis	Congenital Syphilis	HIV	Hepatitis C
2024	3,014	812	443	9	69	98
2025	2,839	676	336	7	69	90
January 2026	210	55	13	0	5	0
February 2026	199	35	4	1	2	0
2026 total to date	409	90	17	1	7	0

4) Harm Reduction

- a. On March 6, the Harm Reduction team advocated at the Colorado State Capitol for Harm Reduction and HIV Prevention programs in our community. We networked with other Harm Reduction advocates and spoke with Senator Mike Weissman at length about the high demand for our services and need to increase and sustain funding to continue meeting the need.
- b. Our new Care Coordinator, Dametria, started on March 9. She brings a wealth of experience in HIV and STI testing, follow up and case management. We are delighted to have her on the team.
- c. The Harm Reduction Program (HRP) received approval to begin having volunteer support at our It Takes a Village fixed site. Since January 2026, volunteers have supported kit making efforts in the office. Established volunteers will now have the option to support fixed site services by helping make bags for participants during drop in.
- d. Staff completed their final coaching call for the Systems Analysis Improvement Approach study with UC San Diego and Drexel University for HIV testing in Syringe Service Programs. The study provided coaching calls and support for increasing and improving HIV testing efforts within our syringe service program between March 2025-March 2026. We’ll continue submitting data for the next 6-months.
- e. HRP and PPCHP staff and leadership participated in a kick-off call for the Overdose Fatality and Prevention Response group. This is part of the planning period for implementing a program, and funded by CDC through the Overdose Data to Action grant.

Health Protection and Response (HPR) Division (Environmental Health, Communicable Disease Epidemiology and Emergency Preparedness and Response Programs)

1) HPR Division Administration

a. Qualtrics National Conference Presentation

Julie presented in late March at [X4: The Qualtrics Experience Management Summit](#) conference in Seattle. Julie's round table session was part of the government track (for city, county, state, tribal, and federal government staff) and titled "Streamlining public service: The digital forms revolution", focusing on the work she, Kristin, and HPR's Environmental Health programs have conducted to transfer burdensome paper applications into streamlined online applications. This has allowed public health to not only save staff time and printing costs, it has also increased our data efficiency. The session was attended by 65 people and feedback included "This session was the most applicable session I participated in throughout this conference!" and "It was so good to be able to talk about the forms I need to make digital and to be able to talk to others to see how/if they've done it. The session facilitator even gave me tips! This was probably one of my favorite sessions just to be able to brainstorm and talk!"

2) Environmental Health (EH) Programs

a. Consumer Protection Programs

I. Three Environmental Health Specialists (Lasata, Johnny, and Michael) in the Consumer Protection Program offered four separate food safety training classes during the month of March to students at the Cherry Creek Innovation Campus (CCIC). The training covered the principles of basic food safety and provided a good opportunity to further strengthen ACPH's strong working relationship with the Cherry Creek School District.

II. On 4/1/2026, members of the Retail Food Special Events Team offered a free webinar designed primarily for Special Event Coordinators and open to Special Event food operators. The webinar provided a clear overview of the regulatory requirements for operating food booths at temporary special event, including application submission timelines, permitting procedures, and documentation expectations. Participants also gained detailed guidance on booth setup requirements, handwashing stations, temperature control, cross-contamination prevention, and more.

b. Early Childhood and Environmental Protection Programs

I. The Early Childhood Program continues to make significant progress in strengthening the school inspection program over a relatively short period of time. This includes establishing and deepening partnerships with school districts, improving communication, and creating space for ongoing dialogue.

Staff have maintained a collaborative approach, engaging districts through discussion sessions, listening to operational realities, and working to find a balance

between district needs and public health responsibilities. This approach allows the team to build trust while continuing to advance the program that is both practical and protective of public health.

Cherry Creek School District teachers recently shared appreciation for the resources and checklists provided by our staff ahead of inspections to understand the expectations and prepare.

- II. The Water Quality Program led a webinar on 3/3/2026, titled, "Pool Water Quality and Maintenance: To Swim or Not to Swim?" The training provided Pool professionals an opportunity for participants to increase their understanding of recreational water risks, including waterborne illnesses. The training also explored ways to mitigate risks and improve pool, spa, and other regulated bodies of water in which our community recreates. Pool professionals working for recreation districts, child care centers, country clubs, high schools, hotels, swim schools, and mall splash pads in Arapahoe County attended the training. Our team explored pool operation best practices and regulation requirements for pools and spas in Arapahoe County. We also discussed the health inspection process and its relationship to safeguarding public health. An evaluation survey was sent to attendees to identify additional topics about which the community would like to learn more, and to allow us to strengthen our ongoing training efforts.

We are also partnering with South Suburban Parks and Recreation District (SSPRD) to host a similarly focused in-person training for SSPRD staff and anyone else interested in attending on 5/21/2026.

3) Emergency Preparedness and Response (EPR) Program

- a. As part of our ongoing effort to increase inclusivity in emergency preparedness and response activities, the EPR program hosted training in March available for all ACPH staff titled 'Neurodiversity and Inclusive Emergency Preparedness.' The course was facilitated by the Executive Director of the Colorado Neurodiversity Chamber of Congress and walked staff through the fundamentals of understanding neurodiversity, communication strategies, identifying barriers, and identifying tools to support both staff and community members during emergencies. Participants in the class identified opportunities to improve daily operations at ACPH as well as strategies for improving our work with the public when the county is impacted by a disaster.

4) Communicable Disease Epidemiology (CDE) Program

- a. *Updates to Epidemic and Communicable Disease Control Regulations:* Effective 3/17/2026, the Colorado State Board of Health approved amendments to [6 CCR 1009-1: Epidemic and Communicable Disease Control](#) regulations. These revisions are intended to clarify disease reporting responsibilities, including reporting roles, methods, and timelines, and to promote the use of electronic reporting systems. The primary update included a transition from a

single reportable conditions poster to two distinct reporting resources by reporter type and outlined which institutions are considered designated reporters.

- I. [Communicable diseases and conditions that must be reported by laboratories](#)
- II. [Communicable diseases and conditions that must be reported by health care providers, health care facilities, veterinarians, and additional reporters](#)

ACPH shared a Health Alert Network (HAN) notification on [3/23/2026](#) with healthcare providers and health and community organizations to provide notification of these changes. Additional communication messaging was shared with schools and childcare providers to clarify reporting requirements and included the new reportable conditions posters.

- b. *Summer Preparedness*: In preparation for the 2026 summer season, the Communicable Disease Epidemiology Program, Environmental Health Program, and the Emergency Preparedness and Response Program are partnering with County Communications to launch another summer-long safety campaign covering topics such as rabies, West Nile virus, plague, extreme heat, food safety, and more. The campaign will feature content on social media as well as in the County Line newsletter. We also include information on the website about [10 Ways to Prevent Rabies and Other Diseases this Spring and Summer](#) in an effort to share preventive education with the public who visit our website.
- c. *Rabies*: Rabies is a preventable disease spread through direct contact, such as a bite or scratch, with the saliva or brain/nervous system tissue of an animal that is sick with rabies. Most rabies cases are found in wild animals like raccoons, skunks, bats, foxes, and coyotes. Rabies is regularly found in Colorado wildlife. While reports of rabid animals can occur throughout the year, most reports occur between March and September. In 2025, 69 animals (65 bats; 4 skunks) tested positive for rabies in Colorado, including four bats in Arapahoe County. As of 4/1/2026, two rabies positive skunks have been reported in Colorado (Jefferson County) in 2026. The Communicable Disease Epidemiology Program conducts in-depth rabies risk exposure assessments for humans and domestic animals following an encounter with wildlife. If a wild animal is unable to be tested for rabies following an encounter with a human, rabies post-exposure prophylaxis (PEP) vaccinations may be recommended to prevent possible infection.