



ARAPAHOE COUNTY



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Public Health Levels of Service

Board of County Commissioners

May 20, 2025, 2:00PM



Setting the Stage

- 70% of revenue for Public Health is grants, contracts, and fees
 - Receive \$7M (30% of total revenue) in federal pass-through funds
 - The requests from Public Health are based on current state of funding
 - "Have Tos" focus on building capacity for understaffed programs critical to promoting and protecting health
 - "Shoulds" focus on areas we need to build capacity and grant funds are not available
 - "Could's" are things that expand outreach and impact, but not mandated
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Purpose: *Arapahoe County Public Health protects and promotes equity, health, and well-being in our community through evidence-based interventions, education, advocacy, and policy development.*

Arapahoe County Public Health is focused on preventing disease or injury:

- Focused on groups and communities, not individuals
- Uses policy and environmental change

Successful programs:

- Prevent disease
 - Promote health
 - Protect the environment
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Current Service Levels and Resources

Environmental Health (EH)

- Environmental programs, such as retail food, childcare and school inspections are contractually and mandated programs. This includes licensing, inspections, plan reviews for retail food establishments and provides technical assistance to help open businesses.
 - EH conducts investigations of resident complaints, outbreaks, and environmental hazards. They also provide community education, engagement and partnerships.
 - The program has 16 retail food/body art inspectors, 4 inspectors for schools and childcare, and 2 inspectors for water quality.
 - There are over 2800 retail food establishments that require annual inspections; we are behind by about 600 inspections.
 - Revenue includes \$90K from State Health, as well as fees and public health fund.
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Current Service Levels and Resources

WIC (Women, Infant, Children Supplemental Food Program)

- WIC provides resources, knowledge and tools to help support income qualifying families.
 - WIC's goal is to improve health outcomes for pregnant and breastfeeding women and children younger than age 5.
 - The program is currently fully funded; federal pass through, \$2.5M.
 - Funding was reduced in FY25 by \$100K.
 - Caseload has increased 15% since January 2023, while staffing has remained level. For the first time since opening, clients are scheduled 3-4 weeks out for appointments.
 - WIC Educators' caseloads are double the recommended practice.
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Current Service Levels and Resources

Immunization Program

- Provides routine childhood and adolescent immunizations, as well as recommended immunizations for adults.
 - Vaccinations are offered at low or no cost for those without insurance or services may be billed to Medicaid. Immunizations for adults are available while funds last.
 - ACPH recently received a NACCHO Promising Practice Award for our mobile outreach efforts.
 - Total revenue: \$800K; Federal pass-thru funds, \$350K; State, \$450K; Public health fund, \$1.1M
 - Receives additional revenue from billing Medicaid.
 - Received a NACCHO Promising Practice for mobile vaccine outreach.
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Current Service Levels and Resources

Sexual Health Clinic

- Promotes sexual health for all ages and genders by offering family planning services, STI and HIV testing, and cervical and breast cancer screening.
 - Services are offered on an income-based sliding scale or billed to Medicaid.
 - Federal pass-thru funding, known as Title X, makes up \$620K of revenue, the remaining comes from fees, Medicaid billing, other funds from CDPHE, and the public health fund.
 - The Program recently received a NACCHO Promising Practice Award for its Syphilis Field Delivered Treatment work.
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Current Service Levels and Resources

Harm Reduction

- Harm reduction is an evidenced-based approach that aims to reduce health and social harms associated with substance use while also preventing opioid overdose and HIV/Hepatitis C transmission.
 - Services are offered at a fixed site sponsored by local non-profit, our mobile clinic “Prevention Point”, and direct street outreach.
 - The program has 6 Health Educators and reached over 1,800 people and distributed over 75,000 harm reduction resources including tests and various kits, including a total of 4,449 Naloxone kits in 2024.
 - \$1.2M revenue comes from 6 different funding sources including federal, state, and local.
 - FY26 - received a reduction of \$50K (25% of stable funding) for Harm Reduction.
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Current Service Levels and Resources

Community Health Improvement Plan (CHIP) Implementation

- Public Health Agencies are required to adopt a CHIP every 5 years, following the development of a Community Health Assessment.
 - ACPH has recently adopted these priorities: Economic Mobility and Security (includes access to food, health care, and housing), and Safety.
 - We lack capacity to fully work in the space of food security, housing, and safety.
 - Grant funding has been limited or non-existent.
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“Have-to” - WIC

- Increase WIC capacity by 3 FTE over the next 3 years.
 - \$251K for salary and benefits, over the next 3 years; ongoing expense
 - Funding these positions would reduce the caseload per WIC Educator, eliminate extended wait times, and decrease the risk of burnout.
 - The impact if not funded is that clients may go to another county if they aren't able to get an appointment, which negatively impacts our funding formula.
 - Priority 1
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“Have-to” - Environmental Health

- Continue to increase Inspector capacity
 - \$465K over the next 3 years, salary and benefits; ongoing
 - 1 FTE FY26; 2 FTE FY27; 2 FTE FY28
 - Fund Industrial Hygienist (Healthy Building Specialist)
 - \$150K salary and benefits; ongoing
 - Increasing capacity improves distribution of work among Inspectors as the County grows; more opportunities to conduct outreach and education programs.
 - ACPH has the FTE for Healthy Building Specialist, but not the funds. EH responds to over 700 complaints/year. This position will build much needed capacity to work with municipalities and respond to housing and building concerns.
 - If not funded, we risk employee burnout, inability to keep up with growth, and ability to provide the basic requirement for inspections.
 - Priority 2
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“Should”- Harm Reduction

- Harm Reduction Outreach Sustainability
 - \$100K for salary and benefits; ongoing
 - 1 FTE (not adding new FTE)
 - Ensures continuity in programming and outreach efforts are maintained.
 - If not funded, we will have to reduce street outreach, training, and school-based education, STI testing, and Narcan distribution. We risk seeing an increase in overdose deaths and a decrease in STI detection/treatment.
 - Priority 1
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“Should”- Community Health Improvement Plan

- Implementation of the CHIP and BOCC priority areas
 - \$230K for salary and benefits; ongoing
 - 2 new FTE
 - Grant funding is very limited or not available for food security, safety, and social connectedness efforts.
 - If funded:
 - Food banks improve nutritional quality and meet volume demand through collaborative buying, shared warehousing, transportation efficiencies, and other economies of scale
 - Injuries and deaths are reduced through population-level safety interventions
 - Social connections among residents increase, reducing polarization and improving physical and mental health
 - If not funded, we may need to modify or eliminate goals and objectives in CHIP, which would result in a reduced impact on community health outcomes
 - Priority 2
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“Should”- Land Use & Built Environment

- Implementation of the CHIP and BOCC priority areas
 - \$130K for salary and benefits; ongoing
 - 1 new FTE
 - How a community is designed and built can significantly impact a person's mental wellbeing and physical health.
 - A Land Use & Built Environment Specialist can advocate for and help shape the design of well-connected communities with health in mind.
 - This position would promote healthy behaviors and ensure that health and environmental issues are routinely identified and addressed, in planning and development.
 - Priority 3
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“Could”- Immunization Program

- Support operations in the Child and Adult Immunization Program.
 - Would create opportunity to purchase private stock vaccine, which has less restrictions and would provide greater reach.
 - \$253K for the purchase of vaccine, ongoing
 - Priority 1
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“Could” – Sexual Health

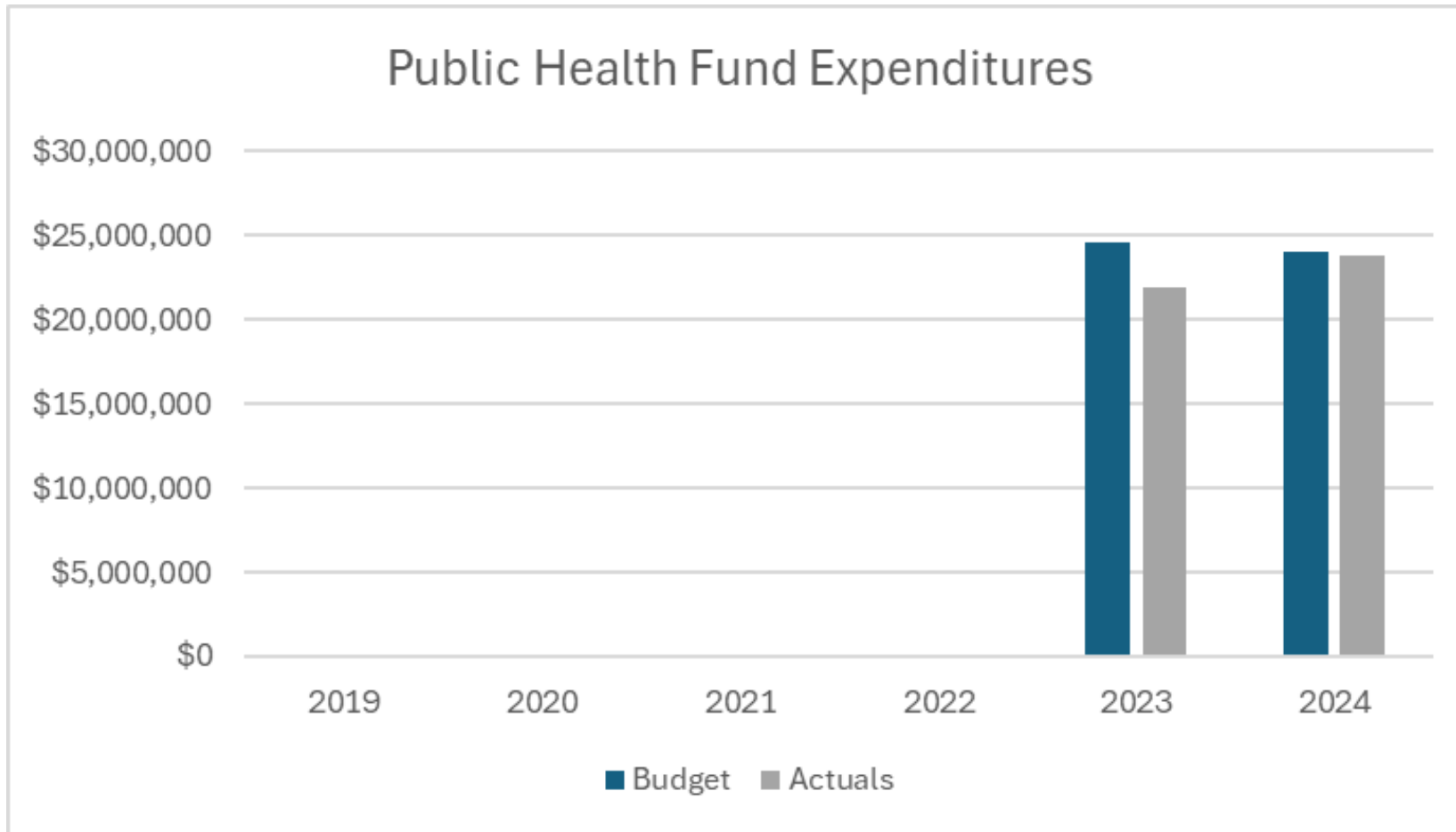
- Sexual Health Clinic - Operations
 - \$250K for clinic supplies, ongoing
 - Provides funding to purchase and provide various forms of birth control without restrictions of Title X (Federal funding)
 - These funds would provide ACPH the ability to increase level of service to community by providing low-cost/no-cost sexual health services.
 - Priority 2
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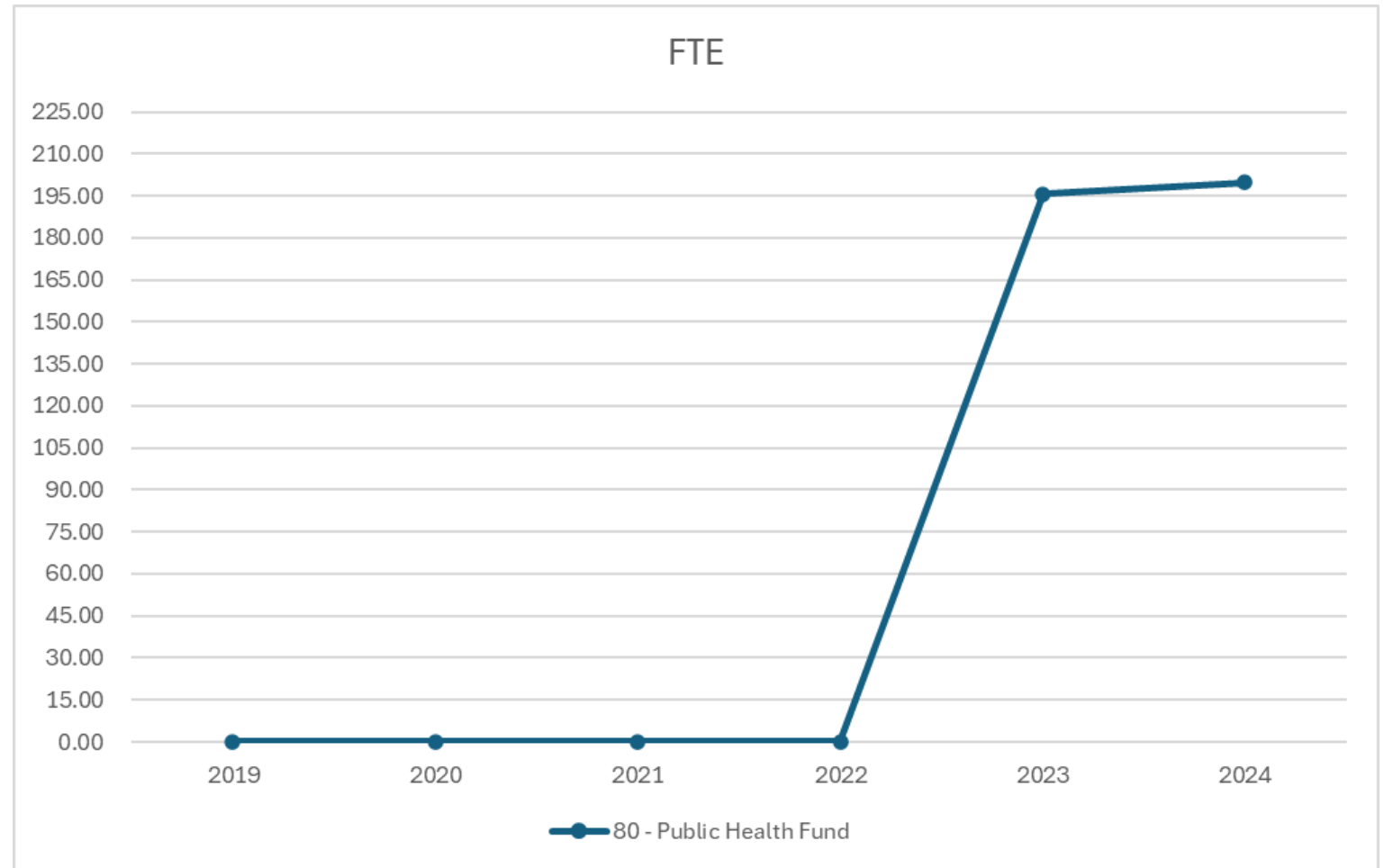
“Could” – CHIP, Access to Care

- Create Medicaid Enrollment Specialist position
 - \$65K for salary and benefits; ongoing
 - This position would increase access to care for communities with higher needs and underserved populations.
 - Increasing access to care reduces the burden on the health system (fewer ER visits; chronic disease management; decrease in uncompensated care).
 - Could increase Medicaid reimbursement opportunities for public health.
 - Priority 3
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Public Health Historical Look 2019-2024



Public Health Historical Look 2019 -2024





Areas of Opportunity

- Increase capacity in the areas of Environmental Health, access to affordable and nutritious food, healthy housing, and implementing the Community Health Improvement Plan.
 - This also creates the opportunity to have more flexibility with how, when and where we provide vaccinations, as well as providing sexual health services.
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Challenges/Concerns

- The unknown budget and restructure changes at the federal and state levels make it extremely difficult to plan and budget, considering 70% of our revenue comes from state and federal sources.
 - How we disperse County allocations (public health fund) will greatly depend on funding received through our state partners.
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