



Shawn Davis, Chair
Bebe Kleinman, Vice Chair
Kristine Burrows
Dr. Mark Levine
Terrence Walker
Michelle Weinraub
Mark Mcmillan

Arapahoe County

Arapahoe County Board of Health

Agenda

Wednesday, June 18, 2025

Virtual - Microsoft Teams

3:00 PM

The public is welcome to attend the Board of Health meeting in the West Hearing Room or virtually on Teams.

[https://teams.microsoft.com/l/meetup-join/19%3ameeting_Yzc5ZWNiOGMtYzk1YS00YTYxLWIwYTtYTRIYWQwNzZlNzRm%40thread.v2/0?](https://teams.microsoft.com/l/meetup-join/19%3ameeting_Yzc5ZWNiOGMtYzk1YS00YTYxLWIwYTtYTRIYWQwNzZlNzRm%40thread.v2/0?context=%7b%22Tid%22%3a%2257d7b626-d71d-47f6-84c1-c43bda19ba16%22%2c%22Oid%22%3a%22c0695c0a-202a-41ae-9aa5-a71df8e21ec2%22%7d)

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

1. ***CALL TO ORDER**

2. ***APPROVAL OF MINUTES**

May Meeting Minutes

[25-353](#)

Attachments: [1. BOH_Meeting Minutes_20250521](#)

3. ***PUBLIC COMMENT**

Individuals are invited to speak to the Board of Health about any topic. To provide Public Comment, please contact the Board of Health Liaison (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**

6. ***STUDY SESSION**

6.a. Financial Update and Draft FY26 Budget

[25-354](#)

Attachments: [2. BOH_Q125 Financial Update June2025_FINAL - Copy](#)
[3. Funding Risks](#)

6.b. CHIP Update

[25-355](#)

Attachments: [4. FC_BOH CHIP Update June 2025](#)

6.c. Graywater Follow up**6.d. Measles Update****6.e. Director's Report**[25-356](#)**Attachments:** [5. BOH_Director's Report_2025 \(4\)](#)**7. EXECUTIVE SESSION AND COUNTY ATTORNEY LEGAL MEETING**

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 the Board of Health Liaison (aschmidt@arapahoegov.com) at least three (3) days prior to a meeting, should you require special accommodations.

*Items marked with an asterisk will be live streamed for public viewing.



Arapahoe County

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

Board Summary Report

File #: 25-353

Agenda Date: 6/18/2025

Agenda #:



Shawn Davis, Chair
Bebe Kleinman, Vice Chair
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Arapahoe County

Arapahoe County Board of Health

Meeting Minute Summaries

Wednesday, May 21, 2025
3:00 PM

Administration Building
5334 S. Prince St.
Littleton, CO 80120
West Hearing Room

The public is welcome to attend the Board of Health meeting in the West Hearing Room or virtually on Teams.

[https://teams.microsoft.com/l/meetup-join/19%3ameeting_Yzc5ZWNiOGMtYzk1YS00YTYxLWIwYtEtYTRIYWQwNzZlNzRm%40thread.v2/0?](https://teams.microsoft.com/l/meetup-join/19%3ameeting_Yzc5ZWNiOGMtYzk1YS00YTYxLWIwYtEtYTRIYWQwNzZlNzRm%40thread.v2/0?context=%7b%22Tid%22%3a%2257d7b626-d71d-47f6-84c1-c43bda19ba16%22%2c%22Oid%22%3a%22c0695c0a-202a-41ae-9aa5-a71df8e21ec2%22%7d)

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1. *CALL TO ORDER

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

2. *APPROVAL OF MINUTES

Attachments: [BOH ISS Meeting Minutes 20250416](#)
[BOH Meeting Minutes 20250418](#)

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

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

3. *PUBLIC COMMENT

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4. *BOARD OF HEALTH COMMENTS

5. *GENERAL BUSINESS ITEMS

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

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

59508 E. Commanche Way: Request for Variance from Table 6, Minimum Horizontal Distances, in Arapahoe County On-Site Wastewater Regulations

Attachments: [4. 2025.05_59508 E Commanche Wy_Final Draft PDF Packet_20250508_CGerken](#)

The Arapahoe County On-site Wastewater Regulations

<[https://arapahoe.legistar.com/View.ashx?](https://arapahoe.legistar.com/View.ashx?M=F&ID=11349378&GUID=6FF1CB3B-125C-4057-9C26-B998DBA347D9)

[M=F&ID=11349378&GUID=6FF1CB3B-125C-4057-9C26-B998DBA347D9](https://arapahoe.legistar.com/View.ashx?M=F&ID=11349378&GUID=6FF1CB3B-125C-4057-9C26-B998DBA347D9)> require a minimum 10-foot setback from property lines for OWTS sewer lines (Section 10.1). Sections 3.10 and 20.5 authorize the Board of Health to grant variances from this requirement when the following criteria are met: the variance is not injurious to public health, safety, or welfare; the variance will not adversely affect the environment; and the variance is justified by unique site conditions. In this case, the requested variance allows the installation of a compliant replacement OWTS, avoids demolition of an existing concrete structure, maintains required separation from wells, and reflects the acknowledgment and consent of the adjacent property owner.

Staff request the variance to reduce setbacks required in the Arapahoe County On-site Wastewater Regulation be considered by the Arapahoe County Board of Health.

6. *STUDY SESSION

Attachments: [BOH WIC Deep Dive May 2025](#)

Attachments: [6. BOH PPT Presentation - PH Move 5.2025](#)

Attachments: [7. BOH Director's Report 2025](#)

The Treasurer requests the Board of County Commissioners (“Board”) approve the financial institution and investment policy resolution accompanying this report, including the language granting the Treasurer broader authority to purchase debt securities meeting at least certain specified requirements under the Board of County Commissioners authority in C.R.S. §24-75-601.1(1)(a-b).

7. EXECUTIVE SESSION AND COUNTY ATTORNEY LEGAL MEETING

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).

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Board Summary Report

File #: 25-354

Agenda Date: 6/18/2025

Agenda #: 6.a.



ARAPAHOE COUNTY

Financial Update

Breanna Paderewski, Director of Finance and Administration

Agenda

- Federal Landscape
- CALPHO Policy Update
- FY25 1st Quarter Financials
- FY26 Preliminary Budget Review
- Funding Challenges

Federal Landscape – One Big Beautiful Bill Act

- Passed by House of Representatives May 22, now in the Senate
- How could this bill impact ACPH and the population we serve:
 - Ryan White – potential for either flat funding or a significant cut to HIV prevention funding
 - WIC/SNAP – potential for reduced funding
 - Bill includes cuts to federal spending which could strain the State's budget and how it funds programs like WIC
 - Bill proposes significant cuts to SNAP
 - Title X – potential for reduced funding
 - Medicaid work requirements
 - Immigration status restrictions
 - Changes to Medicaid eligibility requirements
 - Increased coverage loss for noncompliance with work requirements
 - Future challenges for states to fund their share of Medicaid
 - Extreme administrative burden for States

Federal Landscape- Executive Orders

Executive orders impacting policy and funding:

- DOGE federal funding cuts
 - Directs each agency head, in consultation with their DOGE Team Lead, to review all existing “covered contracts and grants”
 - Terminate or modify such to attain one of three aims:
 - Reduce federal spending
 - Reallocate spending to promote efficiency
 - Advance the policies of the Trump administration
- DEI/DEIA
 - End all federal government diversity, equity, inclusion and accessibility programs, policies and mandates
 - Terminate all federal positions related to DEI, DEIA, and environmental justice
 - Terminate DEIA-related contracts

CALPHO Policy Updates - Wins

Top 3 wins of the recent Colorado legislation:

- Protected local public health infrastructure funding
 - We were expecting a 5-10% reduction in funds
- Passed graduated retail food fee increases
 - 2026 – Maximum fee levels will increase by 25%
 - 2027 – Maximum fee levels will increase by an additional 17%
 - 2028 – Maximum fee levels will increase by an additional 20%
- Defeated Cottage Foods Act expansion
 - Would allow the sale of homemade foods requiring refrigeration
 - This posed a potential food safety risk

FY25 Quarterly Financials

1st Quarter High Level Summary

Revenue

- Collected 25.4% of Budget
- Total Revenue \$6.27m
- \$1.9m in County Contribution
- \$3.1m in Reimbursable Grant Revenue

Expense

- Expensed 26.55% of Budget
- Total Expenses \$6.6m
- Salary and Benefits Total \$5.6m, 84.4% of budget

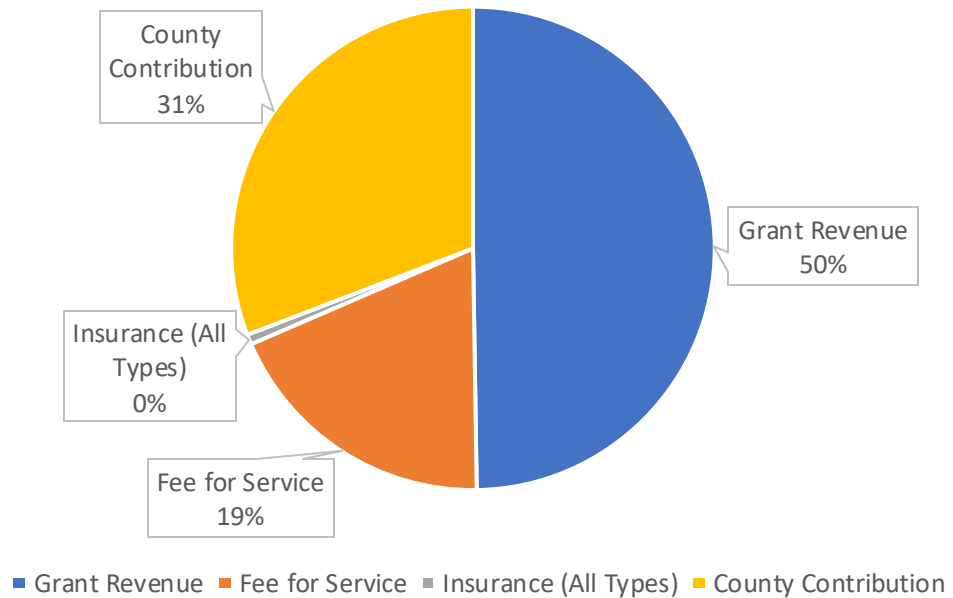
1Q25 Financial Summary

Commitment Item	FY 2025 Budget	1Q25 YTD Actuals	Budget % YTD (25% thru FY)
Revenue			
Fee for Service	\$ (1,961,040.00)	\$ (1,176,772.26)	60.01%
Medicaid, Insurance Reimbursement	\$ (362,204.00)	\$ (41,890.31)	11.57%
Federal Grant	\$ (7,607,428.00)	\$ (1,860,246.67)	24.45%
State Grant	\$ (6,804,215.00)	\$ (1,167,179.83)	17.15%
Other Grant	\$ (443,474.00)	\$ (93,536.17)	21.09%
County General Funds	\$ (7,732,724.00)	\$ (1,933,181.00)	25.00%
Investment Returns	\$ (85,000.00)	\$ -	0.00%
Total Revenue	\$ (24,996,085.00)	\$ (6,272,806.24)	25.10%
Expenditures			
Salaries	\$ 17,038,035.00	\$ 4,433,721.20	26.02%
Employee Benefits	\$ 4,694,151.00	\$ 1,167,507.78	24.87%
Supplies	\$ 738,884.00	\$ 188,500.65	25.51%
Services and Other	\$ 2,096,332.00	\$ 748,548.70	35.71%
Capital Outlay	\$ 59,959.00	\$ -	0.00%
Central Services	\$ 341,675.00	\$ 98,328.97	28.78%
Transfer Out	\$ 27,049.00	\$ -	0.00%
Total Expenditures	\$ 24,996,085.00	\$ 6,636,607.30	26.55%

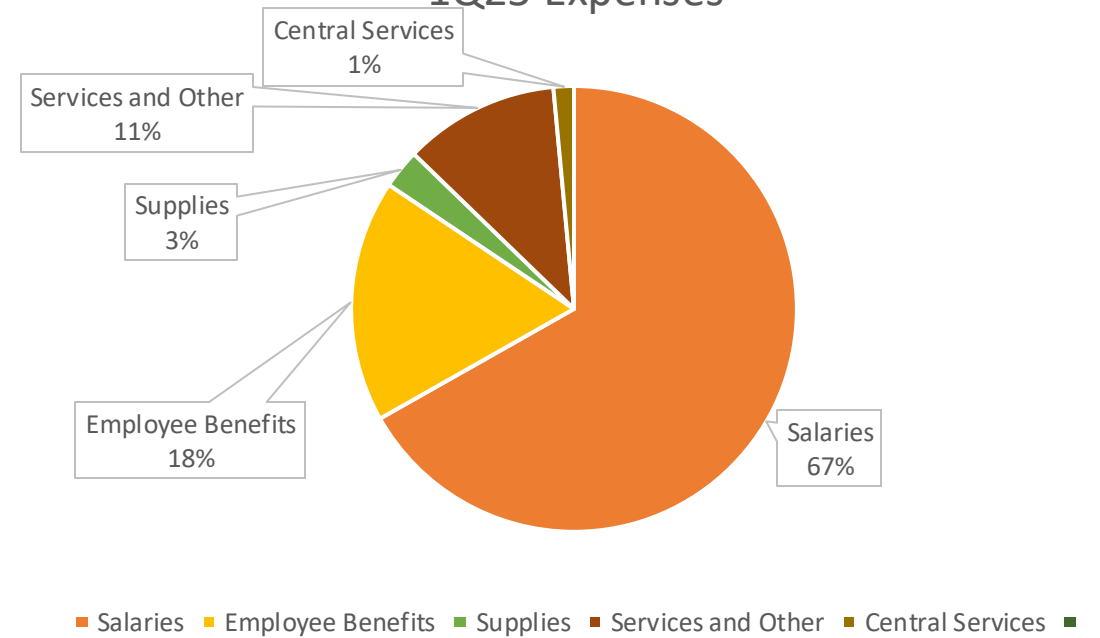


1Q25 Financial Summary

1Q25 Revenue



1Q25 Expenses





Overview FY2026 Budget

- Boards of Health are required to adopt an annual budget by September 1, per CRS 25-1-511(4)
- The Public Health Department's budget is part of Arapahoe County's overall budget, which must be approved by the Board of County Commissioners each December
- The new few slides will cover:
 - FY2026 Budget Package Asks
 - Preliminary FY2026 Revenue and Expenses
 - Timeline



Timeline

- June – BOH meeting: FY26 Budget review, no action needed
- July – Budget sub-committee meeting: review draft budget
- Aug – BOH meeting: adoption of FY26 Budget
- Sept – Sub-committee present budget to Executive Budget Committee
- Oct – BOCC receives proposed budget package
- Dec – BOCC adopts FY26 budget

FY2026 Budget Asks – Priority 1, WIC

- Purpose: Reduce the caseload per WIC Educator, eliminate extended wait times, and increase staff retention.
- Increase WIC capacity by 3 FTE over the next 3 years.
- The impact, if not funded, is that clients may go to another county if they are not able to get an appointment, which negatively impacts our funding formula.
 - Clients may also simply drop out of the program and go without essential services
- Budget ask for FY2026:
 - 1 FTE WIC Staff Member
 - \$124,934 in salary and benefits; ongoing

FY2026 Budget Asks – Priority 2, EH

- Purpose: Increase EH capacity to improve work distribution among Inspectors as the County grows; increase opportunities to conduct outreach and education programs; increase staff retention.
- 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.
- Budget ask for FY2026:
 - 1 FTE, Fund Industrial Hygienist (Healthy Building Specialist)
 - \$110,709 salary and benefits; ongoing

FY2026 Budget Asks – Priority 3, CHIP

- Purpose: Implementation of the CHIP and BOCC priority areas
 - Economic Mobility and Security (includes access to food, health care and housing)
 - Safety
- Grant funding is very limited or not available for food security, safety, and social connectedness efforts.
- If funded, staff will work on the following initiatives:
 - Food security: food banks improve nutritional quality and meet volume demand through collaborative buying, shared warehousing, transportation efficiencies, and other economies of scale
 - Population-level safety interventions to reduce injuries and deaths
- 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
- Budget ask for FY2026:
 - 2 new FTE
 - \$238,847 for salary and benefits; ongoing

FY2026 Budget Asks – Priority 4, EH LUBE

- Purpose: To advocate for and help shape the design of well-connected communities with a lens for community health and wellbeing, including:
 - Walkability, building and street design, drinking water supply, wastewater infrastructure, vector control plans, public transportation, etc.
- How a community is designed and built can significantly impact a person's mental wellbeing and physical health.
- A Land Use & Built Environment Specialist would promote healthy behaviors and ensure that health and environmental issues are routinely identified and addressed in planning and development.
- Budget ask for FY2026:
 - 1 FTE, Land Use & Built Environment Specialist
 - \$124,732 salary and benefits; ongoing

FY2026 Budget Asks – Priority 5, Access to Care

- Purpose: Increase access to care for underserved populations and communities with higher needs.
- Increasing access to care reduces the burden on the health system
 - Fewer ER visits
 - Chronic disease management
 - Decrease in uncompensated care
- This position could increase Medicaid reimbursement opportunities for public health
 - Especially important considering the uncertainty of federal grant funds
- Budget ask for FY2026:
 - 1 new FTE, Medicaid Enrollment Specialist
 - \$80,274 for salary and benefits; ongoing

Year over Year Comparison

Revenue	2023 Actuals	2024 Actuals	2025 Budget	FY2026 Projected Budget	\$ Difference: FY25 v FY26	% Difference: FY25 v FY26
Grant	\$ 15,914,439	\$ 15,718,745	\$ 14,411,643	\$ 13,091,022	\$ (1,320,621)	-9.2%
Fee for Service	\$ 1,831,200	\$ 2,132,615	\$ 2,323,244	\$ 2,626,644	\$ 303,400	13.1%
Misc Revenue*	\$ -	\$ 188,149	\$ 528,474	\$ 204,057	\$ (324,417)	-61.4%
Public Health Funds					\$ -	
On-Going	\$ 6,000,000	\$ 6,000,000	\$ 6,000,000	\$ 6,000,000	\$ -	0.0%
On-going due to merit/comp		\$ 110,884	\$ 843,381	\$ 1,092,854	\$ 249,473	29.6%
On-going budget asks		\$ 253,590	\$ 459,482	\$ 459,482	\$ -	0.0%
One Time	\$ 1,762,000	\$ 717,000	\$ 429,861		\$ (429,861)	
Public Health Funds Total	\$ 7,762,000	\$ 7,081,474	\$ 7,732,724	\$ 7,552,336	\$ (180,388)	-2.3%
Totals	\$ 25,507,639	\$ 25,120,983	\$ 24,996,085	\$ 23,474,059	\$ (1,702,414)	-6.8%
Expense						
Salaries	\$ 15,058,586	\$ 15,183,665	\$ 17,038,035	\$ 15,552,419	\$ (1,485,616)	-8.7%
Benefits	\$ 4,128,464	\$ 4,028,354	\$ 4,721,200	\$ 4,723,489	\$ 2,289	0.0%
Supplies	\$ 1,364,300	\$ 861,948	\$ 798,843	\$ 616,592	\$ (182,251)	-22.8%
Services	\$ 3,223,384	\$ 3,314,379	\$ 2,033,850	\$ 2,122,217	\$ 88,367	4.3%
Community Programs		\$ 56,571	\$ 62,482	\$ 9,790	\$ (52,692)	-84.3%
County Services	\$ 732,905	\$ 353,300	\$ 341,675	\$ 449,552	\$ 107,877	31.6%
Totals	\$ 24,507,639	\$ 23,798,217	\$ 24,996,085	\$ 23,474,059	\$ (1,522,026)	-6.1%

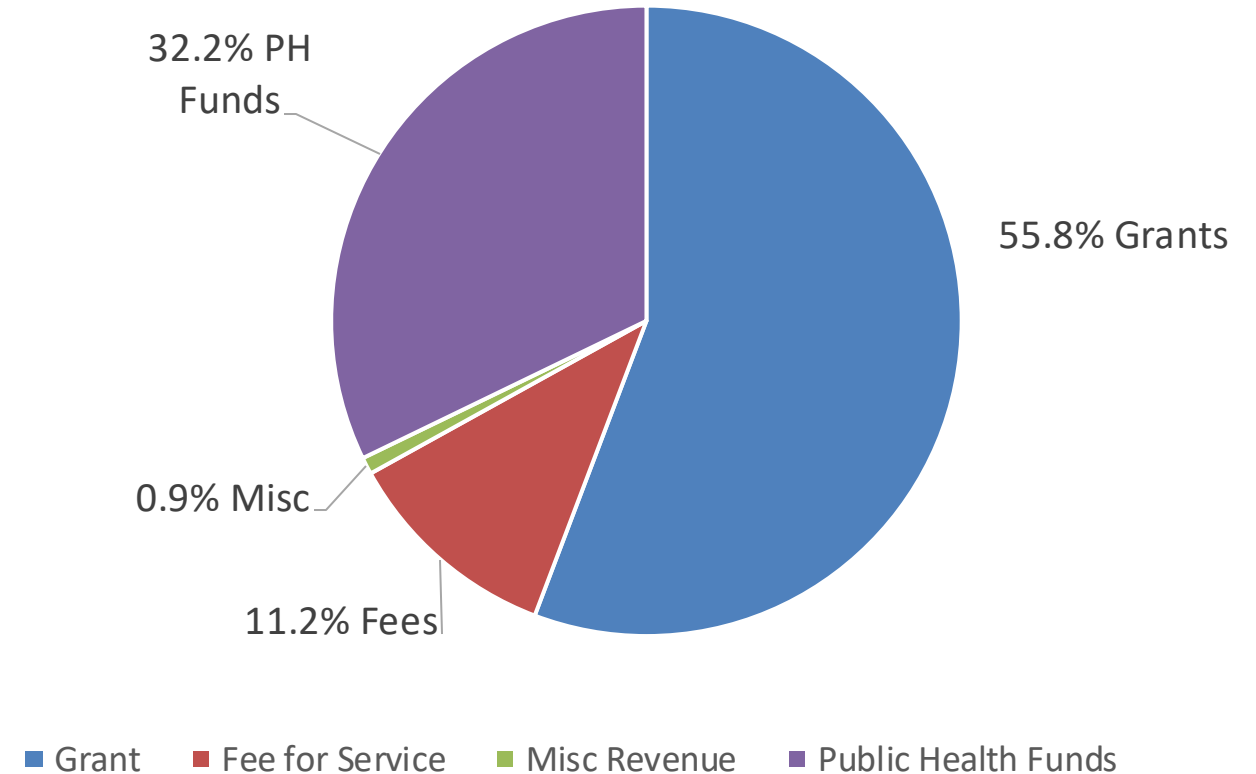


FY2026 – Financial Impact: Budget Asks

Revenue	FY2026 No Budget Asks	FY2026 w Budget Asks	\$ Difference
Grant	\$ 13,091,022	\$ 13,091,022	
Fee for Service	\$ 2,626,644	\$ 2,626,644	
Misc Revenue*	\$ 204,057	\$ 204,057	
Public Health Funds			
On-Going	\$ 6,000,000	\$ 6,000,000	
On-going due to merit	\$ 1,092,854	\$ 1,092,854	
On-going budget asks	\$ 459,482	\$ 1,143,967	\$ 684,485
One Time			
Public Health Funds Total	\$ 7,552,336	\$ 8,236,821	
Totals	\$ 23,474,059	\$ 24,158,544	\$ 684,485
Expense			
Salaries	\$ 15,552,419	\$ 16,082,898	\$ 530,479
Benefits	\$ 4,723,489	\$ 4,877,495	\$ 154,006
Supplies	\$ 616,592	\$ 616,592	
Services	\$ 2,122,217	\$ 2,122,217	
Community Programs	\$ 9,790	\$ 9,790	
County Services	\$ 449,552	\$ 449,552	
Budget Asks			
Totals	\$ 23,474,059	\$ 24,158,544	\$ 684,485

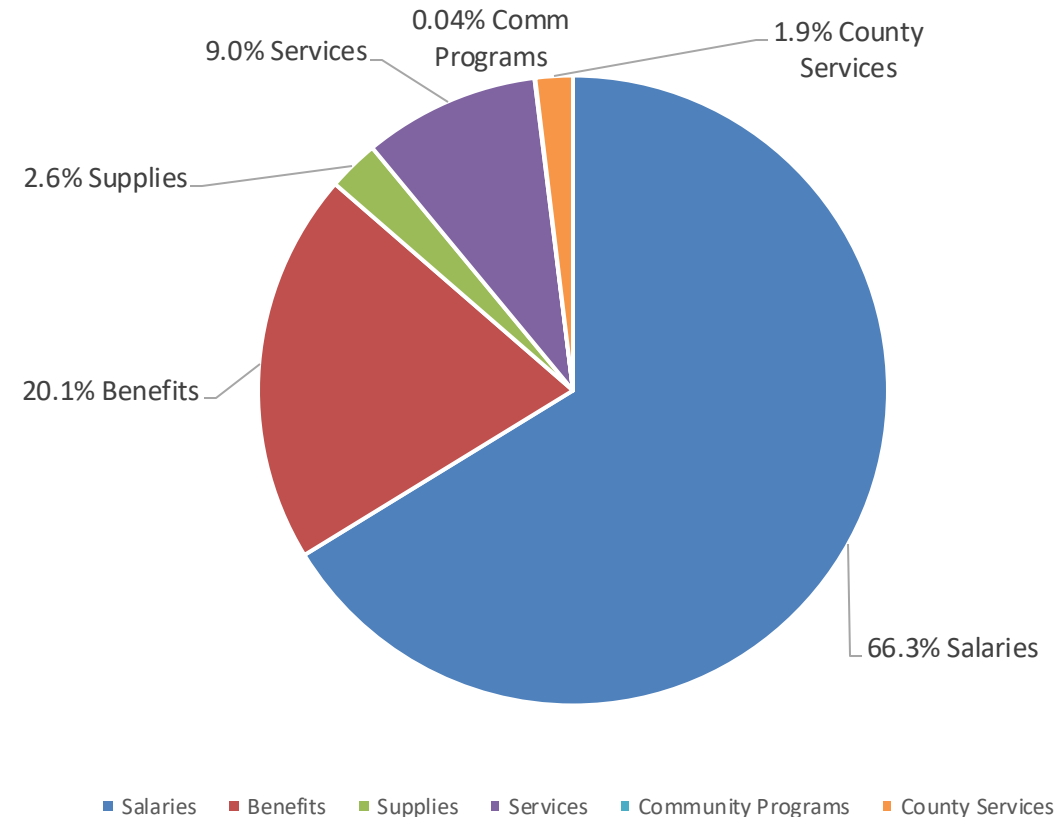
FY26 Budget – Projected Revenue

Revenue	\$ Totals	Overall Percentage	Grant %
Total Grant Revenue	\$ 13,091,022.00	55.8%	
Federal	\$ 5,847,651.00		44.7%
State	\$ 6,941,371.00		53.0%
Other	\$ 302,000.00		2.3%
Fee for Service	\$ 2,626,644.00	11.2%	
Misc Revenue	\$ 204,057.00	0.9%	
Public Health Funds	\$ 7,552,336.00	32.2%	
	\$ 23,474,059.00		



FY26 Budget – Projected Expenses

Expenses	\$ Totals	Overall Percentage
Salaries	\$ 15,552,419.00	66.3%
Benefits	\$ 4,723,489.00	20.1%
Supplies	\$ 616,592.00	2.6%
Services	\$ 2,122,217.00	9.0%
Community Programs	\$ 9,790.00	0.04%
County Services	\$ 449,552.00	1.9%
	\$ 23,474,059.00	



Funding Challenges for FY2026

- Ongoing instability of federal funding, particularly for immunizations, WIC, family planning, and disease surveillance
- Uncertainty in the face of the Colorado State budget shortfalls
- Difficulty developing a FY2026 budget amidst unclear grant funding opportunities
- Concern over DEI-related funding threats and executive orders impacting programs serving marginalized populations
- Overall staff anxiety around grant funding and program reductions (not a funding challenge, per se)

Questions

Generally Stable
Information that this funding could be a concern.
Actively watching/scenario planning. Waiting for NOA/Follow-up communication from Funder
Cuts or included on the CR.
Significant Cuts/Cut Entirely/Stop Work Orders Issued.

Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
	Capacity Building Federal Passthrough OPHP.	OPHP LPJA Workforce Infrastructure FY24 - Extended	FEDERAL	Total 5 Year Award - \$611k; ~\$122k per year. 2025 is year 3.		
	Funding provided for OPHP, previously referred to as the State Per Capita.	Local Planning and Support Dollars	STATE	\$ 1,520,891.00	\$ 1,512,079.00	(\$8,812.00)
Nutrition						
WIC	<p>WIC is The Special Supplemental Nutrition Program for Women, Infants and Children. WIC provides resources, knowledge and tools to help support income qualifying families. WIC does not ask or keep information about visa status or citizenship. All responses are kept confidential.</p> <p>WIC is free for moms, dads, grandparents, foster parents and all Colorado families who qualify. Many people do not realize they're eligible for WIC. Households with a low to medium income or who receive Medicaid, SNAP, TANF or FDPIR are income-eligible for WIC. Whether pregnant, already a mom or raising a child younger than 5, caregivers can get the right personalized support for their family. WIC's goal is to help keep pregnant and breastfeeding women and children younger than age 5 healthy.</p>	Women Infants and Children (WIC)	FEDERAL	\$ 2,540,685.00		

Generally Stable
Information that this funding could be a concern.
Actively watching/scenario planning. Waiting for NOA/Follow-up communication from Funder
Cuts or included on the CR.
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
WIC CIAO	To ultimately test the effectiveness of community outreach strategies in increasing WIC participation,	WIC Community Innovation and Outreach ("CIAO")	FEDERAL	\$ 158,100.00	\$ 158,100.00	
Breastfeeding Peer Counseling	The WIC Breastfeeding Peer Counselor Program is a peer-to-peer support program shown to improve breastfeeding initiation and duration rates. Peer counselors are experienced breastfeeding mothers who provide breastfeeding information and support to WIC families. They provide evidenced based information by phone, email or text outside usual WIC clinic hours in the evenings and weekends – when most parents have questions!	WIC Breastfeeding Peer Counseling (BFPC)	FEDERAL	\$ 168,177.00		
SNAP PEAs	To improve food access and to enroll WIC families into all eligible federal nutrition programs, WIC staff have been cross trained as SNAP PEAs or a SNAP Partner Engaging in Application Services. The SNAP PEAs assist families with completing applications and recertifications, helping to update information and upload necessary documents to facilitate the eligibility determination process through Human Services.	Hunger Free Colorado (HFC)/SNAP-Peas	FEDERAL	\$ 72,000.00		

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Significant Cuts/Cut Entirely/Stop Work Orders Issued.

Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Baby & Me Tobacco Free	The Baby and Me Tobacco Free Program (BMTFP) is a smoking cessation program for pregnant and post-partum women. The Nutrition Division promotes tobacco cessation by streamlining the process for referring pregnant women from the WIC Program and their partners to the BMTFP. The BMTFP offers free individually tailored telehealth cessation counseling sessions, carbon monoxide monitoring to verify smoking status and financial incentives for women who quit smoking during pregnancy and stay quit after delivery. Pregnant women attend four prenatal sessions, six postpartum sessions, and when they test smoke free, they can earn up to \$400 in incentives. An eligible partner (spouse, partner, family member) that lives with the woman can also join the program and when they test smoke free, they can earn an additional \$300 in incentives.	Baby & Me Tobacco Free	OTHER	\$ 20,000.00		
Partnerships, Planning, Community Health Promotion						
Harm Reduction Expansion	The ACPH Harm Reduction Grant Fund Expansion project will work to reduce overdose in Arapahoe County by implementing evidence-based harm reduction and recovery services programs.	Harm Reduction Expansion	FEDERAL	\$ 591,653.00		
Tobacco	The Tobacco Grant Program works to reduce initiation of tobacco use by children and youth, promote cessation of tobacco use among youth and adults, provide educational resources to community members and reduce exposure to secondhand smoke through evidence-based strategies. Funded through CDPHE per Colorado Revised Statute Section 25-3.5-804.	Tobacco - STEPP	STATE	\$ 588,836.00		

Generally Stable
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Significant Cuts/Cut Entirely/Stop Work Orders Issued.

Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Healthy Beverage	This regional partnership is focused on sugary drink education and policy strategies to reduce sugary drink consumption and reverse the upward trend of children at an unhealthy weight. This is accomplished by decreasing deceptive sugary drink marketing in public spaces and restaurants, decreasing the availability of harmful sugary drinks to children (especially children of color), and improving healthy norms and options for all families. In collaboration with other local public health departments and statewide advocates, ACPH staff will implement strategies in Arapahoe County that can reduce chronic disease and enable families and caregivers to make healthier beverage choices.	Healthy Beverage	STATE	\$ 97,200.00		

Generally Stable
Information that this funding could be a concern.
Actively watching/scenario planning. Waiting for NOA/Follow-up communication from Funder
Cuts or included on the CR.
Significant Cuts/Cut Entirely/Stop Work Orders Issued.

Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Nursing						
Nurse Family Partnership	An evidence-based community health program with 40+ years of significant improvements in the health and lives of 1st-time moms and their children living in poverty. Specially trained nurses regularly visit young, 1st-time moms-to-be from early pregnancy through the child's 2nd birthday. Grant funded, free to families.	Nurse Home Visitor Program (NHVP)	STATE	\$ 3,444,472.00	\$ 3,475,828.00	\$31,356.00
Sexual Health Clinic	Promotes sexual health for all ages and genders in Arapahoe County 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. Services partially supported by Federal Title X and CDPHE funds. Two clinic locations in Aurora and Englewood.	ReproCollab (Caring for Colorado)	STATE	\$ 100,000.00	\$ -	
		Sexual Health Ttl X/Family Planning	FEDERAL and STATE	\$ 626,783.00	\$ 499,890.00	(\$126,893.00)
		Sexual Health CPED/WWC	FEDERAL	\$ 18,210.00	\$ 14,715.00	(\$3,495.00)
		Sexual Health CPED/WWC		\$ 116,825.00	\$ 51,313.00	(\$65,512.00)
		Syphilis FDT - Field Delivery	OTHER	\$ 304,564.35	\$ 300,000.00	(\$4,564.35)

Generally Stable
Information that this funding could be a concern.
Actively watching/scenario planning. Waiting for NOA/Follow-up communication from Funder
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Harm Reduction	Arapahoe County harm reduction programs use 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 within our community. Services are offered at a fixed site sponsored by local non-profit, It Takes a Village, our mobile clinic "Prevention Point", and direct outreach from staff members on foot in the community.	HIV Prevent CHAPP	STATE	\$ 152,962.41	\$ 152,962.12	(\$0.29)
		Ryan White (RW Core & Support)	FEDERAL	\$ 100,656.00	\$45,295.20	(\$55,360.80)
		STI Prevention and Control	FEDERAL	\$ 46,950.00	\$ 46,950.00	\$0.00
		Arapahoe County Opioid Grant	OTHER	\$ 265,402.44		

Generally Stable
Information that this funding could be a concern.
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Immunizations	Routine childhood and adolescent immunizations as well as recommended immunizations for adults 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. The program offers a Tuberculosis (TB) skin test for a fee. The program works to educate individuals and families on disease prevention and improves access to immunizations by working directly with schools and community partners in Arapahoe County including partnering with Aurora Shots for Tots and Teens. Services supported through the Vaccines for Children (VFC) program. Working alongside the Communicable Disease Epidemiology Program, responds to clinical outbreak and disease response. Two clinic locations in Aurora and Englewood.	IMM CORE	FEDERAL and STATE	\$ 667,944.00		
		COVID-19 IMM4; PO fully executed contracts under nursing.	FEDERAL	\$ 847,922.88		
Maternal Child Health	ACPH's Maternal Child Health Program (MCH) works to implement strategies that have a population health impact, with a focus on children and youth with special health care needs (CYSHCN). ACPH MCH work is currently focused on improving access to supports, increasing social emotional well-being and reducing racial inequities for the MCH population across Arapahoe County. The MCH Program focuses on upstream work, to address the root cause of an issue. This is done through partner and community engagement, a collaborative process of working to address issues that affect the health and well-being of particular communities, which often involves prioritizing health equity. ACPH's MCH Program works in collaboration with Colorado Department of Public Health and Environment (CDPHE) Title V MCH Block Grant Program.	Maternal Child Health	FEDERAL and STATE	\$ 572,186.00		

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Family Connects	Colorado Access has a responsibility to increase access to health services and improve health outcomes for Health First CO Medicaid members, especially those most vulnerable or underserved.	Colorado Access	STATE	\$ 57,321.98		
		PHIDH-CDEC R-06	FEDERAL	\$ 63,000.00		
		Illuminate OMH	OTHER	\$ 10,000.00		
Regional Health Connectors	Regional Health Connectors (RHCs) improve health in Colorado by connecting the systems that keep us healthy – including primary care, public health, social services, and other community resources. They work at the systems level, rather than with individuals and families, to bridge connections and leverage community assets and resources to address needs. RHCs focus on changing systems by collaboratively improving health-related social needs, responding to emergent issues (such as the COVID-19 pandemic), and helping support or lead locally-tailored projects that address health issues and barriers in their communities. RHCs connect partners with available resources and support medical practices participating in transformation efforts by partnering with clinical quality improvement teams to help practices prepare for new models of care.	Regional Health Connections (RHC)	STATE	\$ 58,285.00		

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Child Fatality Prevention	In 2013, legislation was passed that required local public health agencies to establish a local, multidisciplinary child fatality review team. The Arapahoe County Child Fatality Review Team is responsible for conducting individual, case-specific review of deaths of children from 0-17 years of age occurring in Arapahoe County for the purpose of identifying prevention recommendations. The team reviews the following types of deaths: sudden unexpected infant deaths, unintentional injuries (e.g., drownings, falls, poisonings, fires), suicide, violence (e.g., homicide, firearm death), child abuse and neglect, motor vehicle and other transportation incidents, deaths due to undetermined causes, and any natural deaths with an indication of preventability.	Child Fatality Prevention System	STATE	\$ 21,250.00		
Nurse Liaison Program	Since 2012, the Nurse Liaison Program (NLP) has been partnering with Arapahoe County Department of Human Services to support children and families in Arapahoe County. The NLP is a nurse home visitor program that receives referrals, based on established criteria that varies across referring teams, from Child and Adult Protection Services teams and Colorado Works Program and contracted partners. The program is offered at no cost to individuals and families.	TANF	FEDERAL	\$ 229,134.36	\$ -	(\$229,134.36)
		Arapahoe County Child	FEDERAL	\$ 1,625,976.21	\$ 770,000.00	(\$855,976.21)
		Arapahoe County Adult	FEDERAL	\$ 173,795.52	\$ -	(\$173,795.52)

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Health Protection and Response - Emergency Response and Preparedness						
Public Health Emergency Preparedness	Through planning, training, exercising, evaluation, and relationship building, the ACPH Emergency Preparedness and Response Program establishes the framework for how the department responds to and recovers from any incident impacting the county. ACPH, with the support of the EPR program, leads operations to mitigate the public health consequences of any incident impacting the county, coordinates the health and medical component of any emergency as requested by the county, and works closely with response and community partners to ensure the best possible outcomes during a disaster.	Public Health Emergency Preparedness (PHEP)	FEDERAL	\$ 533,747.00	\$ 528,717.00	(\$5,030.00)
Cities Readiness Initiative		Cities Readiness Initiative (OEPR/CRI)	FEDERAL	\$ 151,869.00	\$ 151,039.00	(\$830.00)

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Health Protection and Response - Communicable Disease						
Communicable Disease	The ACPH Communicable Disease Epidemiology Program (CDE) investigates infectious diseases that are considered reportable conditions in Colorado, as well as outbreaks. For outbreaks, we primarily work with schools, childcares, long-term care facilities, congregate living (i.e., Shelters), and jails. CDE provides prevention and education to individuals in the community and community partners to help reduce the spread of disease, disease burden, and prevent outbreaks. CDE also performs data analysis on communicable diseases in Arapahoe County to better understand disease burden, as well as, with outbreak data to help determine the cause of an outbreak.	Pertussis	FEDERAL	\$ 10,392.96		
		ELC 2.2 - Enhancing Detection Expansion (COVID)	FEDERAL	\$ 336,773.69		
Health Protection and Response - Environmental Health						

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
	<p>Early Childhood</p> <p>Child Care Program: Environmental Health staff inspects childcare centers annually. During health inspections, we ensure minimum health regulations are met and provide educational information. This helps to ensure children have a healthy environment to learn and grow in. Arapahoe County Public Health does not license childcare facilities. However, a passing health inspection is required by the Office of Early Childhood Colorado Department of Human Services for a childcare to receive a license or to remain in good standing.</p> <p>School Program: In 2024, ACPH will begin building a school inspection program, inspecting public, private, and charter schools for compliance with the State of Colorado's Rules and Regulations Governing Schools. These rules make sure schools are maintained and kept safe, and this is enforced through our inspections. These inspections cover the sanitary facilities, building operations, school equipment and supplies, food service, laboratory, industrial art, vocational hazards and on-site health service.</p> <p>Retail Food</p> <p>The retail food program oversees restaurant, mobile food vendor, and special event food vendor licensing. The program also includes the review of plans for new establishments, conducts routine regulatory inspections, provides education and training on food safety, and investigates related complaints. Prevention of foodborne illness is paramount to the program and inspections are risk-based focused and established by the Food and Drug Administration's Voluntary National Standards to provide consistency in nationwide application of the principles that support this mission. All licensed retail food establishments must operate under the Colorado Retail Food Establishment Rules and Regulations as set forth in the Colorado Revised Statutes under the Food Protection Act.</p>	DEHS - Retail Food and Child Care	STATE	\$ 95,000.00		

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
Environmental Health	<div>· Waste Tires: Through a contract with CDPHE, ACPH conducts inspections of waste tire facilities (retail tire shops) and waste tire haulers to ensure that waste tire facilities and haulers follow laws and regulations, preventing harmful practices and identifying illegal sites. By checking that tires are stored and disposed of safely, inspections protect public health and the environment from risks like fires, insect and rodent harborages, and pollution. Inspections also help CDPHE to take action against any illegal activities, ensuring that waste tires are managed properly to avoid negative impacts on communities and ecosystems.</div>	Waste Tire	STATE	\$ 13,985.00		
	<div>· Lowry Landfill Superfund Site: ACPH is contracted with the Lowry Trust to oversee activities at the Lowry Landfill Superfund site. ACPH helps to develop plans to communicate about the site, involve the public and stakeholders to ensure everyone understands how effective and safe the cleanup is. ACPH also keeps the community informed and engaged through outreach activities. ACPH reviews reports on how the site is being managed, attends technical meetings, and gives feedback on work plans. ACPH also conducts field visits to stay updated on progress and to share information with other agencies and the public. Additionally, ACPH annually samples the two closest private drinking water wells off site for nitrates, fluoride, total hardness, pH, specific conductance and 1,4-dioxane (NOT detected to date).</div>	Lowry	OTHER	\$ 210,000.00		

Generally Stable
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Program Name	Program Information	Grant Name	Federal or State Grant	FY 2025 Award	FY 2026 Award	Change in Funding
	Biosolids: Biosolids are a byproduct of wastewater treatment plants and contain both valuable nutrients for crop growth and soil conditioning materials. Beneficial use requires proper treatments and management to protect public health and the environment. ACPH acts as an agent for the Colorado Department of Public Health and Environment's Biosolids Management Program. The inspections serve to observe that the biosolids application is done in a manner to protect public health, reduce nuisance conditions and to prevent the discharge of pollutants into state waters.	Biosolids	STATE	\$ 3,600.00		
		Indoor Radon Grant	STATE	\$ 9,613.69		
		PFAS	STATE	\$ 9,941.00		



Arapahoe County

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

Board Summary Report

File #: 25-355

Agenda Date: 6/18/2025

Agenda #: 6.b.



Implementation of the Family Connects Model & CHIP Alignment

Community Health Improvement Plan Priorities



Priority Area	Goal Area	Objective	Strategy
Increase Economic Security and Mobility	5. Improve Access to Affordable Physical and Behavioral Care	By December 30, 2026, offer at least one home visit from a nurse and connection to community resources to families with a new baby through the Family Connects Model.	Increase realized access to community-based programs and services.



Connecting every family to a healthy future



3 Weeks In

Expect a visit around 3 weeks after birth



For All

Helping every family with a newborn



Registered Nurses

All nurses are highly skilled professionals

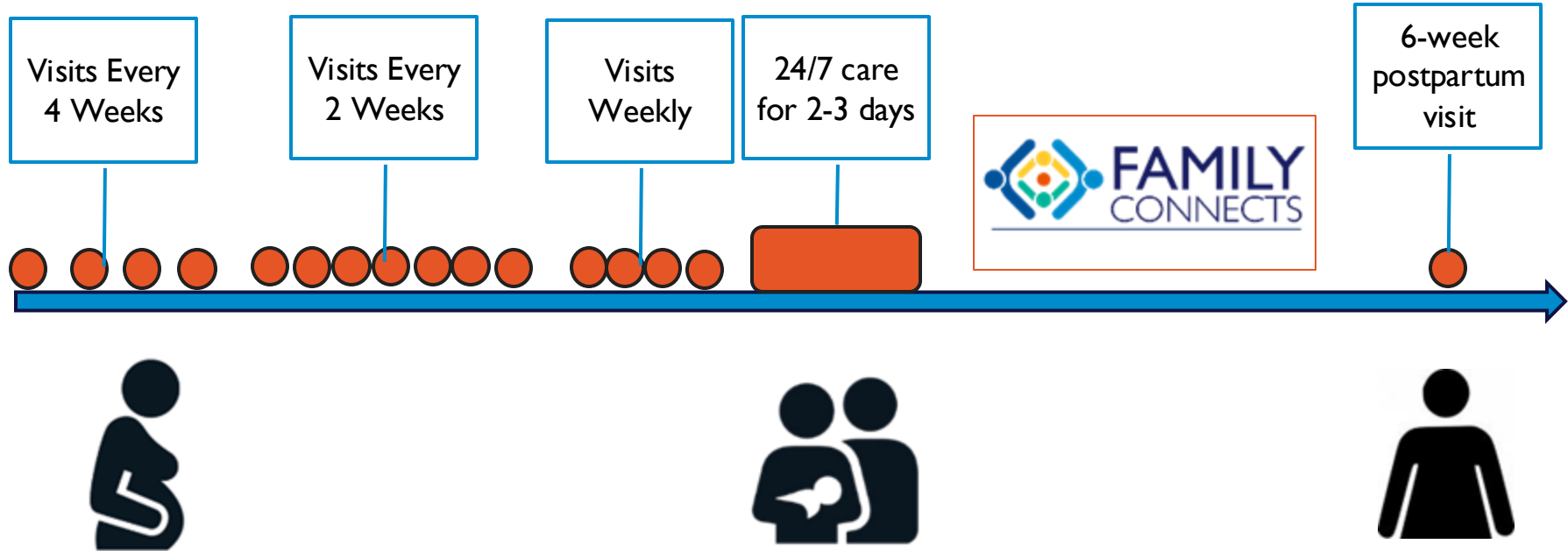


No Cost

As a parent, there is no additional cost to you



Family Connects Intervention



Why It Matters

Connection from the Start

All newborns deserve a warm and secure connection to family and community from the start. Too often, however, medical providers and community agencies aren't well aligned, creating gaps and possibly leading to poor health outcomes.

A Critical Period

No family should navigate this period of tremendous change alone. We connect newborn families to home-visiting nurses and community resources for critical postpartum support.

In Relationship

FC sites build relationships with local community agencies and providers to meet the needs of families with newborns.



REQUIRED ROLES



**Program
Admin**

**Michele
Ebendick**



**Community
Alignment
Specialist**

**Mikayla
Branz**



**Nurse
Supervisor**

**Rebecca
Rapport**



**Nurse
Home
Visitor**

**Kena
Pina**



**Medical
Director**

**FCI
Colorado**



**Program
Support
Specialist**

**TBD,
Funding
needed**

Home Visit Components

Support for Healthcare	Support for Caring for Infant	Support for a Safe Home	Support for Parent
Maternal Health (Physical assessment)	Childcare Plans	Household Safety and Material Supports	Parent Well-being (Assessment of support networks)
Infant Health (Physical assessment, feeding assessment, and lactation support)	Parent-Child Relationships	Family and Community Safety	Substance Use
Healthcare Plans	Management of Infant Crying	History with Parent Difficulties	Parent Emotional Support (Postpartum depression screening)



Community Alignment Domains



MODEL FIDELITY

Family Connects has **three primary Key Performance Indicators** that are used to demonstrate model fidelity.



Population Reach: $\geq 60\%$ of the eligible population must complete an Integrated Home Visit (IHV) or Virtual Visit (Modified Integrated Home Visit)



Average Age of Infant at IHV: $\geq 70\%$ of infants are 14-34 days old at the time of the integrated home visit.



Referral Connection Rate: $\geq 50\%$ of all nurse referrals related to a support score of 3 or higher resulting in a successful connection

Program Evidence

- Families had 44% lower rates of Child Protective Services investigations for suspected child abuse or neglect through child age 2; 39% lower investigation rates through child age 5.
- Out of 630 home visits by Family Connects in Colorado nurses, 2 referrals were made to Child Protective Services (0.003%)
- Positive impact on access to community resources for families
 - At 6 months:
 - Decreases maternal anxiety disorder by 34% and closes race disparity gap by 89%
 - At 60 months:
 - Decreases emergency medical care by 33% and closes race disparity by 14%
 - Decreases child abuse investigations by 39% and closes race disparity by 28%
- In a replication randomized controlled trial, there were even better outcomes in decreasing child abuse investigations by 44% and a 57% reduction in race disparity.
- 95% of families indicate support needs following a hospital discharge.



Source: <https://familyconnects.org/wp-content/uploads/2023/01/v2-FCI-Model-Overview-of-Evidence-2021.pdf>

Family Connects Colorado Implementation Structure

National Model Purveyor



State Intermediary & Colorado Admin Home



Initial Implementation Sites

Eagle County
Public Health

Boulder County
Public Health
(Joint Site with
Broomfield HHS)

Jefferson County
Public Health

Public Health
Institute at
Denver Health

Expansion Sites

Mesa County
Public Health

Arapahoe County
Public Health

Weld County
Public Health
(Pending / TBD)

Great Expectations
- Garfield & Pitkin
(Structure TBD)

Adams County
Public Health
(Structure TBD)



Family Connects Colorado Participating Hospitals



Aspen Valley Hospital
Avista Hospital
Boulder Community Foothills Hospital
Denver Health Medical Center
Good Samaritan Medical Center
Longmont United Hospital
Longs Peak Hospital
Lutheran Medical Center
Vail Health
Valley View Hospital
Mesa County - TBD (1 or 2 hospitals)

ACPH Year I Catchment Area (Eligibility):

Arapahoe County residents who birth at Denver Health*
~850 births a year, ~510 home visits a year

*Current NFP clients are not eligible for FC

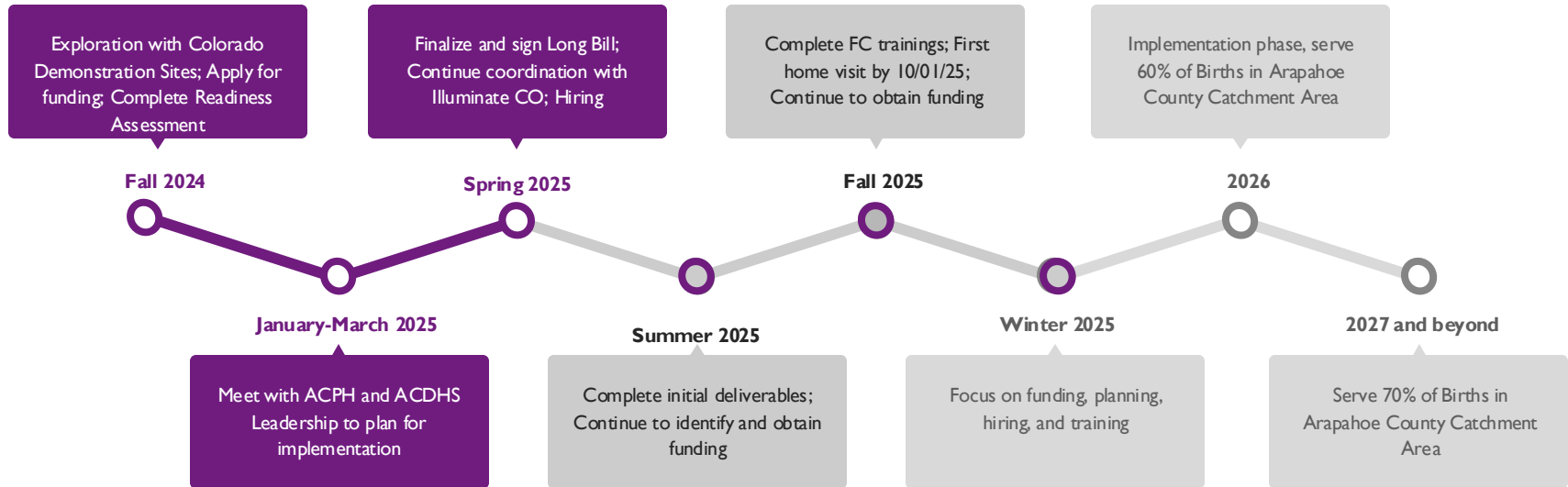


Funding Sources

- ACPH MCH Title V Block Grant
- Public Health Institute at Denver Health subcontract for CDEC R-06 funds
- Illuminate Colorado subcontract for Office of Minority Health funds
- Colorado Access Community Giving grant
- *In progress: Health First Colorado Medicaid Reimbursement*



Family Connects at ACPH Timeline



ACPH CHIP Alignment

- Screening, Resource & Referral
- Upstream changes to improve social and emotional wellbeing of families
- Increase awareness of tax credits
- Partner with Regional Accountable Entity
- Advocate for policy change to improve access to care
- Improve safety resources and partnerships
- Address food insecurity



BOH Call to Action

- Identify funding opportunities
- Support hospital connections, especially with OB/GYN
- Share training opportunities for nurse home visitors
- Identify organizations that support families for our Provider Directory

Thank you!





Arapahoe County

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Board Summary Report

File #: 25-356

Agenda Date: 6/18/2025

Agenda #: 6.e.

Mission Moments

Exceptional Delivery of Services

1. Introducing Kit's Closet

The Harm Reduction Program (HRP) team noticed a significant need amongst our program participants for clothing, especially seasonal gear (i.e., winter jackets, warm weather items, etc.). Many of our participants experiencing homelessness regularly wear torn, dirty, and inadequate clothing for the season, so to try to meet this need, the team began regularly donating clothing from their own closets. While this was a good, temporary workaround, many participants were limited on sizes and styles, which left them, especially men, with no other access to clothes. Luckily the team was able to secure some space in a storage room – now referred to as **Kit's Closet** - to start accepting donations from Public Health staff, friends, and family. With these donations and support, the HRP team can now regularly stock their clothing rack for program participants to access much needed items.

Kit's Closet is named in honor of one of our Harm Reduction Health Educators, Kit Matzke, who will soon be leaving us to begin an exciting new chapter in medical school. Kit has been a compassionate advocate for harm reduction clients and a strong example of service and care. Along with her fellow teammates in the Harm Reduction program, Kit worked hard to make this donation closet a reality. Naming the donation closet in Kit's honor is a small way we can celebrate her impact to Arapahoe County Public Health and continue her legacy of kindness and generosity.

2. Shout out to Altura WIC from Laura Backhaus, WIC Supervisor

"I want to give a big shout out to Altura. I have received several compliments over the last few months from out of state transfers! Client's often say they didn't feel supported by their previous program, and are relieved to be on WIC in CO because our staff are so kind, and they feel genuinely seen as a whole person here in Aurora. ACPH WIC is one of the biggest programs in CO, and we still deliver small town quality customer service, education and counseling. Thank you for your continued compassion to our community, it makes all the difference."

Innovation and Process Improvement

Consumer Protection Mapping Tool: Consumer Protection field staff are collectively responsible for inspecting the approximately 2,400 restaurants in Arapahoe County. Beginning June 2, Consumer Protection field staff were individually assigned their own inspection areas. To help ensure fair distribution, inspection areas were created taking into consideration not only the number of facilities in each area but also the type. Future growth was also considered when mapping inspection areas.

Assigning staff to designated areas hinges directly on having access to the proper mapping tools. Without interactive maps to track and assign facilities, assign complaints and view inspection areas, this type of improvement would not be possible. To design and build the necessary mapping tools, Consumer

Protection relied directly on the knowledge and expertise of Data Scientist, James Swank in the Partnerships, Planning and Community Health Promotion Division (PPCHP). Starting from scratch, James successfully developed three separate mapping applications, one that allows leadership to track and assign new facilities, another that allows field staff to view all areas and the facilities in those areas and finally, a third map that allow Business Support to assign complaints to designated staff.

This success of this project can be attributed to both effective collaboration across divisions as well as innovate thinking and design know-how. The mapping tools were a necessary first step allowing for the realization of inspections areas. Inspection areas, in turn, will enhance staff efficiency while promoting greater organization, familiarity and accountability. Importantly, assigned inspection areas will also facilitate rapport and build trust with operators, which goes hand in hand with gaining compliance.

A. Program Updates

Partnerships, Planning and Community Health Promotion

1) Community Engagement

- a. Recently completed events included:
 - i. Village Institute Cultural Festival
 - ii. Safe Zone events with Compound for Compassion (part of a series)
 - iii. Colorado Access Maternal Health Resource Fair
 - iv. Town of Bennett Summer Event
 - v. Juneteenth in Five Points
 - vi. City of Littleton Meet, Greet, and Eat with City Council event (part of a series)
- b. Upcoming community events include but are not limited to:
 - i. El Grupo Vida Youth Conference and Resource Fair
 - ii. Safe Zone events with Compound for Compassion (part of a series)
 - iii. AC Thriving Community Fair
 - iv. City of Littleton Meet, Greet, and Eat with City Council event (part of a series)
 - v. Doctor's Care Back-to-School Fair
 - vi. We Are Aurora National Night Out at Fletcher Plaza
 - vii. Iron Sharp Back-to School event

Please reach out to [Grace Soulen](#) or visit the [Community Engagement Event Request Form](#) to join or suggest upcoming community event opportunities. **These efforts align with the ACPH Community Health Improvement Plan (CHIP) objective to advance community engagement across CHIP priority areas.**

2) Community Pulse Survey – *Customer Experience & Engagement Program*

- a. This month, ACPH launched a new Qualtrics-based communication tool designed to increase our ability to connect directly with community members. On a consistent basis, participants will receive an email with brief, accessible public health messaging that has been informed through media monitoring. This approach will help enable the crafting of timely messages that reflect the interests and language most currently being used across social media channels. In addition to providing information, each email will include a brief question. Responses will be provided to ACPH program staff to help inform our efforts. The inaugural

distribution list included 398 individuals who indicated interest in hearing from us via prior outreach mechanisms like the Community Health Assessment Survey and the Customer Experience Survey. To sign up, [click here](#). **This effort aligns with the ACPH Community Health Improvement Plan (CHIP) objective to advance community engagement across CHIP priority areas.**

3) Social Connection

- a. ACPH co-hosted a meeting with AdventHealth on May 29, where approximately 30 participants from state and local agencies and community-based organizations came together to learn about the hospital system's prior year community benefits activities. As part of the agenda, ACPH organized a presentation from Summit Cove Consulting to help stimulate understanding and discussion on improving social connections by highlighting findings from a literature review and series of key informant interviews of Colorado stakeholders recently completed in partnership with the Colorado Department of Public Health and Environment. **This effort aligns with the ACPH Community Health Improvement Plan (CHIP) objective to advance community safety.**

4) Healthy Aging

- a. Over 30 ACPH staff participated in the May 22 in-person training, Reframing Aging, provided at no cost by Board of Health member Kristine Burrows in coordination with Healthy Aging Coordinator, Melissa Smith. In follow up, participating staff will carry forward lessons learned on recognizing and challenging stereotypes, reinforcing the importance of diversity, and practicing age-inclusive strategies to improve outcomes across the agency. **This effort aligns with the ACPH Community Health Improvement Plan (CHIP) objective to advance healthy aging.**

5) Mentoring Upcoming Public Health Leaders

- a. This summer, the Community Health Promotion team will host a practicum student from the Colorado School of Public Health (CSPH) Master of Public Health program. CHP invests time hosting students knowing that our agency and community benefit from the energy and strengths of the next generation of public health leaders. It also is an opportunity for ACPH staff to show future leaders what it is to protect and improve public health in local communities through authentic engagement, collaboration, and equity advancement. ACPH appreciates the opportunity to partner with CSPH staff and help ensure students experience critical roles and functions reflecting 21st century public health core competencies.

Nutrition Division

1) Division Impact and Reach

- a. In April 2025, WIC had 12,285 clients enrolled in the WIC Program and completed 5,182 client appointments.
- b. In April 2025, the Breastfeeding Peer Counselors had a caseload of 1,444 WIC Clients and made contact with 958 pregnant and breastfeeding mothers.
- c. The Food Resource Navigators have assisted 159 WIC clients with SNAP Application assistance January – April 2025.
- d. Through April 2025, the Regional Breastfeeding Class (serving Adams, Arapahoe, Douglas, Boulder and Broomfield) had 122 attendees.
- e. The Baby Cafe has had 42 attendees through January – April 2025.

2) WIC Partnership with Children's Health Clinic

- a. The WIC Program has partnered with Children's Health Clinic (CHC) since its opening to receive referrals and serve their patients either remotely or at our Altura Plaza WIC clinic. This spring, a formal MOU was finalized with CHC to provide funding for a 0.5 FTE WIC

Coordinator to be embedded on-site within their Resource Connect Clinic. This collaboration aims to better integrate WIC services into CHC's operations, making it easier for providers to refer patients directly for WIC support. A new staff member has been hired for this role and will begin training at the end of June, with full implementation expected in August.

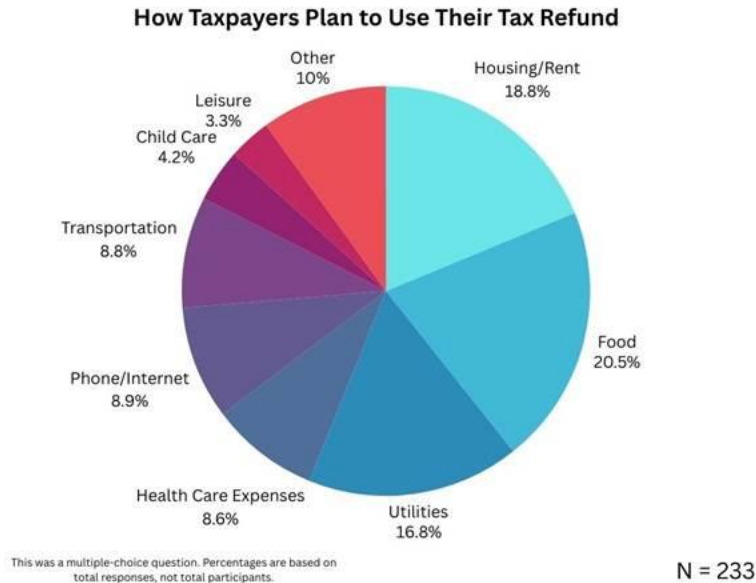
Community Health Nursing Division

1) Maternal and Child Health Program

- a. The MCH program started the Installation phase of Family Connects after completing orientation. This means we are training home visiting nurses, developing our electronic health record, and building a tailored community resource directory in preparation for the Implementation phase. Later this summer, we will start home visits for any family with a new baby living in Arapahoe County and born at Denver Health. The MCH team continues to seek sustainable funding for Family Connects to expand the program to more hospitals. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to Improve Access to Affordable Physical and Behavioral Healthcare.**
- b. ACPH was awarded a \$2,500 grant from the E-470 Transportation Safety Foundation to extend our pilot project with the Children's Hospital Colorado Safety Store. This funding allows direct service programs, including WIC and nurse home visitation, to order safe, appropriate car seats delivered to clients at no charge. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to advance Economic Security and Mobility and improve Community Safety.**
- c. ACPH was approved for A Precious Child's Fill a Backpack program and Builders for Babies Diaper Drive. We're awaiting the final numbers for both of them, but they represent exciting joint-program efforts to support our families getting concrete resources. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to advance Economic Security and Mobility.**
- d. The MCH team hosted a Volunteer Income Tax Assistance (VITA) site at the Centerpointe building, offering free tax preparation services to community members. This initiative was conducted in partnership with the Adams County Health Department's MCH team, who provided IRS-certified tax preparers. Tax services were offered at no cost on the following dates: February 14, February 28, March 14, March 28, and April 11.

The team helped file 57 tax returns for community members, resulting in a total refund amount of \$133,972 returned to Arapahoe County residents. A total of 79 individuals and couples signed in during our service days, meaning we provided guidance and resources to many, whether or not they ultimately filed with us.

The pie chart below illustrates responses to a survey question asking taxpayers how they plan to use their refunds. Housing, food, and utilities were among the most common uses. The results shown reflect responses from all of our VITA sites—Adams, Commerce City, Jefferson and Arapahoe.



Across all four tax locations in Arapahoe, Jefferson, and Adams counties, we helped return \$1,292,689 in tax refunds to 561 families and individuals. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to advance Economic Security and Mobility.**

2) Child Fatality Prevention Systems

- a. MCH staff member Rebecca Rapport presented about the Arapahoe County Child Fatality Prevention System (CFPS) reviews at the County's Not One More Child meeting on April 30. The presentation included an overview of the review process, data and findings from the last 10 years, current prevention efforts led by ACPH, and a panel of Arapahoe County representatives who participate in the review team. **CFPS aligns with the ACPH Community Health Improvement Plan (CHIP) goal to Increase Community Safety.**
- b. ACPH was awarded \$10,000 from the Colorado Department of Public Health and Environment to prevent firearm and unintentional injuries. Funding is from the Centers for Disease Control & Prevention and must be spent and distributed by the end of July. ACPH used data from our fatality review process, staff feedback, and the CHIP Safety priority to purchase firearm security devices, safety supplies, and educational materials. Items will be distributed to internal programs for ACPH clients, community partner organizations serving youth and families, and at outreach events throughout the summer. The purchase included cable gun locks, gun lock boxes, outlet covers, cabinet locks, reflective vests, infant sleep sacks, safe sleep education board books in English and Spanish, and educational magnets about Graduated Drivers Licensing laws and consequences in English and Spanish developed by a youth advisory group. See below for examples of the magnets. **CFPS aligns with the ACPH Community Health Improvement Plan (CHIP) goal to Increase Community Safety.**

Leyes de Colorado sobre licencias de conducir para graduados (GDL por sus siglas en inglés) para conductores menores de 18 años

Restricciones

Multa

No utilizar el teléfono celular mientras conduzca

1 punto: \$50 por la primera infracción, \$100 por la segunda infracción, más un recargo de \$7

Los conductores con permisos de aprendizaje deben estar bajo la supervisión de un adulto mayor de 21 años de edad

3 puntos: \$70, más un recargo de \$11








Durante los primeros 6 meses de licencia de conducir: No se permiten pasajeros menores de 21 años

2 puntos: de 8 a 24 horas de servicio comunitario, \$50 por la primera infracción, \$100 por la segunda infracción, \$150 por la tercera infracción, más un recargo de \$17

De 6 meses a 1 año de licencia de conducir: Se permite un pasajero menor de 21 años

Durante el primer año de licencia de conducir: No se permite conducir entre las 12:00 AM y las 5:00 AM

ARAPAHOE COUNTY
PUBLIC HEALTH

 Colorado Graduated Driver Licensing (GDL) Laws for Drivers Under 18	
Restriction	Penalty
 No cell phone use while driving	1 pt: \$50 for 1st offense, \$100 for 2nd offense, + \$7 surcharge
 Drivers with instruction permits must have a 21+ year old supervisor	3 pts: \$70 + \$11 surcharge
 <u>First 6 months of driver's license:</u> No passengers under 21 years old	2 pts: 8-24 hrs of community service, \$50 for 1st offense, \$100 for 2nd offense, \$150 for 3rd offense, + \$17 surcharge
 <u>6 months-1 year of driver's license:</u> 1 passenger under 21 years old	
 <u>First year of driver's license:</u> No driving between 12 am and 5 am	
 ARAPAHOE COUNTY PUBLIC HEALTH	

3) Regional Health Connector

- Arapahoe County Public Health is coordinating the RTD Transportation Assistance Grant across Public Health, Human Services and Community Resources. Arapahoe County Government has received 1,382 standard 10-ride ticket books to distribute between now and the end of 2025. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to advance Economic Security and Mobility.**
- Arapahoe County Public Health is serving as a liaison for the Metro Denver Partnership for Health (MDPH) Behavioral Health Community Ambassador Program. We are supporting two community-based organizations with getting Let's Talk and other mental health stigma reduction messaging out to the communities they serve. ACPH staff created and provided a Behavioral Health Systems and Resources 101 training for the Village Exchange Center cultural navigators. **This initiative aligns with the ACPH Community Health Improvement Plan (CHIP) goal to Improve Access to Affordable Physical and Behavioral Healthcare.**

- c. Arapahoe County Public Health has launched the Collaborative Resource Hub, a space in which staff can share information about Social Determinant of Health Resources across our teams. The Hub initially launched to a group of 20 staff for testing and is now active across all staff. The goal of the Hub is to improve access to resources for community members. **This initiative aligns with all of the ACPH Community Health Improvement Plan (CHIP) goal areas.**

4) Immunizations

- a. The IZ program is scheduled to hold 7 mobile clinics in May/June. One recent success with mobile vaccination was holding a 3-clinic series (3 mobile clinics within one week) with a middle school in Aurora:
 - i. Nurses obtained parental consent over the phone and vaccinated students during the school day.
 - ii. Over three days, IZ staff vaccinated 62 students with 264 vaccines. Breakdown of languages served: 50 Spanish, 4 Burmese, 3 Nepali, 3 English, 1 Karen, 1 Rohingya.
- b. Currently providing Measles outbreak support while activated with the public health response team. IZ staff held a PEP clinic on 5/28, conducted contact tracing on 81 contacts to date, and are currently conducting home visits to collect nose swabs and urine specimens for suspect cases.

5) Sexual Health

- a. On May 20, Sexual Health had a very successful clinical site visit with CDPHE Title X staff, who reviewed our clinical protocols and charting practices and observed several patients visits. We passed in all areas, with a recommendation to chart our adolescent education and confidentiality practices in more detail.
- b. Sexual Health had 321 clinical encounters in Altura and Englewood in May for birth control, emergency contraception, pregnancy testing and counseling, cervical cancer screening, and STI testing and treatment.
- c. Sexual Health continues to expand Syphilis STI testing and treatment outreach to the Arapahoe Detention Center, It Takes a Village and Prevention Point. In May, three people were treated for syphilis at the Detention Center, two people were treated on Prevention Point, and five were treated through syphilis FDT, including two pregnant patients.
- d. Christine Doidge, Sexual Health Nurse Supervisor, and Elicia Chacon, Harm Reduction Supervisor, were invited to share their expertise and best practices at a NACCHO convening in Atlanta, Georgia on Syndemic approaches to STIs, Viral Hepatitis, HIV and opioid overdose. **These initiatives align with the ACPH Community Health Improvement Plan (CHIP) goal to Improve Access to Affordable Physical and Behavioral Healthcare**

6) Harm Reduction

- a. HRP had a record number of syringe access encounters in May, with approximately 508 encounters. These encounters included syringe access and disposal, naloxone (Narcan®) distribution, and referrals.
- b. In collaboration with the ACPH Sexual Health program, the HRP launched rapid gonorrhea and chlamydia testing and treatment on the Prevention Point mobile unit. In the first 2 weeks, the nurses treated five people for syphilis and gonorrhea. The teams are working closely to improve the workflow and efficiency of the program.
- c. HRP staff attended the Perinatal Substance Use Disorder Conference in Avon, CO. They learned about the different work occurring to support pregnant people who use drugs, and those in recovery. Additionally, the team connected with different providers to share

resources about Recovery Coach Doula's, on-demand resources and peer support with PROSPER, and more.

- d. HRP collaborated with the Young People in Recovery group for a presentation and discussion on CO's Good Samaritan Law that protects people who respond to an overdose event.
- e. HRP kicked off Pride month with partners from local HIV Prevention and treatment providers at the PARTY (PrEP, Access, Referrals, and Treatment for Youth). **These initiatives align with the ACPH Community Health Improvement Plan (CHIP) goal to Improve Access to Affordable Physical and Behavioral Healthcare and Increase Community Safety.**

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

1) Environmental Health (EH) Programs

- a. Staff from the EH Water Quality Program and Early Childhood and Schools Program developed a water safety lesson plan and delivered it at Orchard Valley Learning Center on May 21, 2025, one of six childcare centers in Arapahoe County with a seasonal swimming pool. Over the course of three months, the program staff collaborated to develop an original and engaging story about a young girl named *Swimming Sue*, who models safe swimming behavior. To support diverse early childhood learning styles, the teams created props and incorporated interactive hand motions to bring the story to life and reinforce key safety concepts.

Children were engaged and entertained along with the public health and safety information delivered, and staff expressed positive sentiments, including this survey response reflecting on the interaction: "This lesson not only held the children's attention, but it really explained all of the important health and safety tips they need right before they get ready to use the pool. It was fun and informative for the children and the teachers"

- b. Mosquito Surveillance season officially kicked off on 6/9/25. On a weekly basis and typically through early September, mosquito traps will be set at four established sites throughout Arapahoe County: two in Centennial, one in Littleton, and one in Aurora. All four of these trap sites are located near high residential areas. Two new trap locations were identified this season with the help of the Highline Canal Conservancy group and selected both because of their close proximity to residential areas and because staff believe they will produce higher yields of mosquitos for testing. Mosquito surveillance in Arapahoe County helps mitigate mosquito-borne diseases by monitoring mosquito populations, identifying species, and detecting diseases, enabling targeted control measures, outreach, and education. This proactive approach helps limit the spread of diseases like West Nile virus and reduces the impact of mosquito-borne illness.
- c. With the summer season comes a significant increase in the amount of "Special Events". Growing in popularity, Special Events include a wide range of short-term celebrations and festivals as well as farmers markets, most all of which include "Temporary Food Vendors". Temporary Food Vendors offer a wide variety of prepared foods, and all are required to obtain a license specific to the county in which they operate. In addition, event coordinators are required to submit an application specific to their event. To give pace with the high demand of the season, the EH Consumer Protection staff are very busy processing both

coordinator and vendor applications, as well as conducting periodic field inspections to ensure operators adhere to food safety standards.

- d. The EH Consumer Protection program welcomed our two newest Environmental Health Specialists, Alex Holmes and Bailey Reeves on 6/9/25. Both Alex and Bailey are recent graduates from Colorado State University with degrees in Environmental Health. With the addition of Alex and Bailey, Consumer Protection is now staffed with 16 full-time Environmental Health Specialists and one full-time Plan Review Specialist.

2) Emergency Preparedness and Response (EPR) Program

- a. **Community Engagement:** The EPR program has connected with the City of Englewood to participate in their Neighborhood Nights community event series. This series supports the community by providing an opportunity to engage with their public services and getting to know their neighbors. Household preparedness is amplified when we connect with our neighborhoods and communities. This is especially important to support our neighbors with access and functional needs.
- b. **Extreme Heat Exercise:** The EPR Program participated in an Extreme Heat Tabletop Exercise (TTX) hosted by CDPHE. The exercise provided an opportunity to learn from other jurisdictions, explore cross-jurisdictional coordination strategies for preparing and responding to consequences, and clarify public health's role in responding to extreme heat events.
- c. **PHIRST Activation:** ACPH activated the Public Health Incident Response and Support Team (PHIRST) to facilitate and support the ongoing measles response. This activation has highlighted the strength of cross-program coordination and continues to provide a valuable opportunity to test and reinforce the PHIRST's training and capabilities in a real-world response.
- d. **NCR/UASI TEPW:** The EPR program attended the North Central Region (NCR) and Urban Area Security Initiative (UASI) Training and Exercise Planning Workshop (TEPW). During this workshop stakeholders from around the region gathered to plan and coordinate training and exercise initiatives to enhance emergency preparedness at a regional level. Each organization assesses its capabilities, threats, and hazards to contribute to the regional TEPW.
- e. **Partnership Development:** The EPR program met with the newly hired Director of Safety at Swedish Medical Center to begin establishing a collaborative relationship. During the meeting EPR introduced the EPR program highlighting opportunities for mutual support both during day-to-day operations and emergency response situations. The discussion focused on identifying areas for coordination and future collaboration to enhance overall safety and preparedness for Arapahoe County Residents.

B. Social Media and Communications

Denver Post article highlighting our mobile immunization work (and efforts of other LPHAs) posted 5/27/2025, with an interview by **Kaitlin Wolff, Nurse Manager of the Immunizations Program in Community Health Nursing.**

<https://www.denverpost.com/2025/05/25/measles-outbreak-cases-colorado-texas-vaccine/?share=m2pevkoarvvnvsepK5umI>

Renee Lenthe, Nurse Supervisor of the Sexual Health Program in Community Health Nursing, was selected as a Denver Regional Nightengale Award nominee. She did not win but was the finalist for the Excellence in Nursing Award for Community Health Nursing.

