

Arapahoe County Public Health Department Recommendations

March 29, 2022

Agenda

- How Did We Get Here?
- What's Informing Our Recommendation?
- A Vision for Arapahoe County Public Health
- Resources & Assets
- Funding
- Next Steps
- Questions

How Did We Get Here?

Background

- For more than 50 years, Adams, Arapahoe and Douglas counties partnered to provide public health services through a public health district
- In 2021, Douglas County, followed by Adams County, announced their intention to leave the district partnership
- With those departures, by law, the district ceases to exist January 1, 2023
- It is necessary for Arapahoe County to create a single county local public health agency, examining how best to serve the public health needs of residents and businesses
- Arapahoe County Public Health will be in place January 1, 2023

Process

- November 2021
 - Established internal project team
- December 2021
 - Arapahoe County letter to confirm single county local public health agency
 - Launch plan for determining public health services in Arapahoe County
- January March 2022
 - Learning sessions
 - Exploring structures
 - Defining and prioritizing services
 - Exploring current public health service implementation and early planning

Project Team and BOCC Actions and Activities

- Created guideposts for recommendations and decision-making
- Reviewed community health assessment early findings
- Implemented learning and discussion sessions with project team and BOCC
- Met with funders to discuss options for transition
- Engaged community through surveys, townhalls and individual conversations
- Explored Core Public Health Services with subject matter experts
- Explored organizational and governance structure options
- Assessed funding, staffing and infrastructure needs

Community Outreach

- Launched public health webpage on Arapahoe County site Dec. 2021
 - www.arapahoegov.com/health
- Developed "What is Public Health?" video
- Shared articles on health department creation process and preliminary Community Health Assessment
- Held five Conversations with Commissioners events regarding public health
- Conducted municipal/state partner town halls and guidepost survey
 - Presented at Aurora town hall
- Shared information, events with municipal partners for publication in their external communications
- Completed six weekly surveys to date

Timeline

We are here

1st Quarter

- Build a stronger understanding of the services provided by Tri-County Health.
- Review legal requirements and prioritize services to be provided by the health department.
- Gather feedback from residents on businesses on public health service needs.
- Begin to determine how best to provide public health services.

2nd Quarter

- Finalize how to provide the following services in the following broad categories:
 - Nursing and nutrition
 - Community health
 - Environmental health
 - Emergency preparedness and response
 - Planning and information management
- Continue gathering feedback from residents, businesses and other community partners
- Determine how the board of health will be administered

3rd Quarter

 Continue implementation work to complete transition to single-county model.

4th Quarter

 Go live, as appropriate, for the services outlined in the 2nd quarter.

What's Informing Our Recommendation?

Informing the Recommendations

- Guideposts established specifically for this process
- Existing Community Health Assessment
- Community outreach
- What is mandated?
- Colorado Core Public Health Services
- Other considerations

Guideposts for decision-making about public health services & structures



Protect community quality/well-being, by understanding and considering what our communities value, with an emphasis on the diversity across the County.



Be data centric in identifying needs the County can address.



Consider holistic and long-term financial implications in decision-making processes.



Strive for quality and excellence in everything that we do. Pursue opportunities and seek creative and innovative solutions to the challenges that face us.



Sustain and enhance the reach and impact of our efforts through collaboration with community partners.



Ensure systems and structures to hire, develop and retain employees to enhance their growth and opportunities.

Community Health Assessment—Early insights

Community Survey

- Financial security and economic opportunities
- Community connection and social support
- Healthy, accessible, and affordable food
- Safe, affordable housing
- Safety and security



Focus Groups

- COVID-19 pandemic
- Mental health
- Obesity and diabetes
- Environmental health, air quality, and climate change
- Drug and substance abuse

Preliminary Health Topics

- Social Connection and Health
- Economic Security and Health
- Health and Housing
- Mental Health
- Substance Use
- Access to Services
- COVID-19







Community Outreach Takeaways

- Access to services, mental health, and safe, stable affordable housing are most important to maintain a healthy community
- Impact of COVID on residents remains high (distress, lack of social connections)
- Survey respondents on most important services for Arapahoe County to provide
- Municipal partners are seeking a collaborative approach and continued partnership in department development and public health service delivery



The complex answer to "What is mandated?"

- Explicitly mandated in state statute
- Mandated for CDPHE in state statute delegated to local public health
- Necessary to fulfill explicit mandate
- Explicitly allowed in state statute
- Approach is mandated in state statute
- Colorado Core Public Health Services Rule (6CCR 1014-07)





Colorado Core Public Health Services

FOUNDATIONAL CAPABILITIES

- A1. Assessment and Planning
- A2. Communications
- A₃. Policy Development and Support
- A4. Partnerships
- A₅. Operational Capabilities
 - (a) Leadership and Governance
 - (b) Human Resources
 - (c) Legal Services and Analysis
 - (d) Financial, Contract, Procurement, and Facilities
 - (e) Information Technology and Informatics
 - (f) Accountability, Performance Management and QI
- A6. Emergency Preparedness & Response
- A7. Health Equity & Social Determinants of Health

FOUNDATIONAL SERVICES

- B1. Communicable Disease
- B2. Environmental Public Health
- B3. Maternal, Child, Adolescent & Family Health
- B4. Chronic Disease, Injury Prevention and Behavioral Health Promotion
- B5. Access to and Linkage with Health Care

(6CCR 1014-07)



ARAPAHOE COUNTY

Other Considerations

- Current County structures
 - Business partner model
- Current County assets, functions and services
- Current public health services being provided in Arapahoe County
- Funding availability
- Technology review
- Competitiveness of public health grants
- Current and best practices of local public health agencies (CO and nationally)
- History and purpose of public health programming
- Emerging trends
- Current and potential partnerships









A Vision for the Arapahoe County Health Department

Opportunity Framework

 Building from the ground up, anchored in community, public health best practices, and interconnected with other county services

Outcome based - which aligns in our culture

 Fiscally-responsible - align with Board of County Commissioners values and strategic plan













Governance — Arapahoe County Board of Health

25-1-508. COUNTY OR DISTRICT BOARDS OF PUBLIC HEALTH

...Each county board of health shall consist of at least five members to be appointed by the board of county commissioners for five-year terms; except that the board of county commissioners shall stagger the terms of the initial appointments. Thereafter, full-term appointments shall be for five years...

- Recommend the establishment a Founding Board
- Five members, including two commissioners
- Empanel by summer 2022 to complete operational items associated with establishing health department prior to Jan 1, 2023
- Intent is to get department operational, then
 transition to a BOH with a wider variety of expertise
- April study sessions with BOCC to finalize Board of Health approach and timeline



Leadership — Arapahoe County Public Health

25-1-506. COUNTY OR DISTRICT PUBLIC HEALTH AGENCY

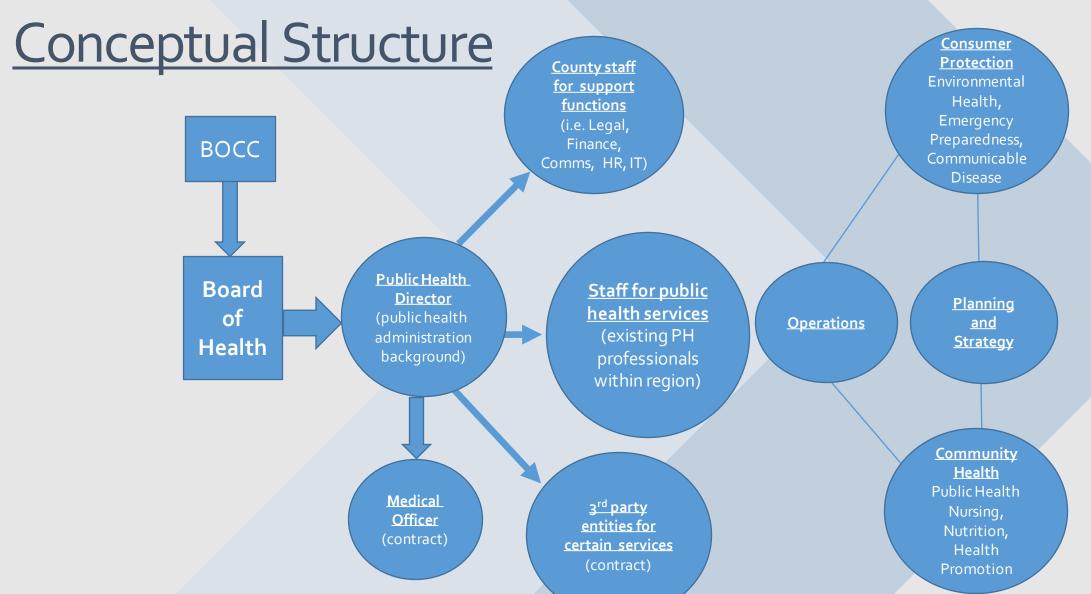
...To select a public health director to serve at the pleasure of the county or district board. The public health director shall possess such minimum qualifications as may be prescribed by the state board...If the public health director is not a physician, the county or district board shall employ or contract with at least one medical officer to advise the public health director on medical decisions...

- Board of Health to select public health director exceeding minimum qualifications (6 CCR 1014-6)
- Contract with a qualified medical officer with public health expertise





















Services Needed – Initial Recommendation

Services	Why
Environmental Health (Restaurants, Child Care Facilities, Body Art, Water/Wastewater)	Mandated (communicable disease control)
Communicable Disease Surveillance & Control	Mandated
Emergency Preparedness & Response	Community need
Community Health & Prevention (Tobacco education & prevention, behavioral health, primary prevention programs customized to County)	Community need
Vital Records	Mandated

Services	Why
Public Health Nursing (Regional Nurse Family Partnership (NFP), Nurse Visits)	Community need
Harm Reduction (HIV/Hep C testing, Syringe Access Services, Naloxone, Mobile Outreach)	Community need
Immunizations	Mandated (school children)
Child Fatality Case Review	Mandated
Maternal Child Health	Community need
Nutrition program for Women, Infants, Children (WIC)	Community need
Family Planning (STI/HIV testing, contraception, education)	Community need











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County-level

✓ Department-level

✓ Primary role

☑ Secondary role





Leveraging Partnerships

- Colorado Department of Public Health and Environment
- STRIDE Community Health Center for Senior Dental Services
- Regional Nurse-Family Partnership
- Medical Officer, Medical Billing, Pharmeceutical Support
- We would continue to do things we do as a county, but opportunity to look at work through a public health lens, integrating best practices
 - Opportunity to co-locate PH services with existing county services
- Social Determinants of Health as an underlying foundation















People & Assets

Human Resources

- Building an organization focused on consumer protection with a strong community health and prevention focus and a culture of public health nursing
- Otowi Group's Phase 1 report identified 170 200 FTEs would be needed
 - Anticipate at least half would be funded by grants and other sources
- There are skilled and well-trained public health professionals, with deep relationships in our community, who are currently working within our geographic area we want to keep those individuals and/or relationships





Not providing a PERA retirement benefit





Systems and Assets

- Systems will need to be acquired or developed to perform key public health functions. These include, but are not limited to:
 - Environmental Health Management Systems
 - Health Record System—Electronic Health Records
 - Disease tracking
- Hardware and Software will be needed for staff to perform duties. These include, but are not limited to:
 - Standard devices and system applications
 - Public health devices and health system applications











Systems and Assets

- Explore retaining existing County facilities for service delivery
- Identify if and how assets currently being used in Arapahoe County can be leveraged and used. These include, but are not limited to:
 - Computers
 - Office equipment
 - Medical equipment
 - Network equipment
- Transfer of existing data must be negotiated and managed. These include, but are not limited to:
 - Health Records
 - Permitting data









Funding

Available Funding

- County budget for 2022 intentionally set aside \$1.5 million in the operating budget anticipating this transition and an increase in costs
- \$5.2 million currently budgeted for public health services/TCHD for this year
- Many programs funded entirely or in part from CDPHE or other funding sources with some via allocations and some will need to be applied for by County
 - Information about available funding and how to access it is coming in weekly.



Available Funding

- More work is needed to match funding sources with programs and costs and continuing discussions with funding partners
- Important to differentiate one-time costs from ongoing/operating expenses
- Looking at using ARPA and fund balance for one-time needs
- Intent is to minimize the impact to the County budget while providing important public health services for the residents and businesses of Arapahoe County







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Q2 Activities

- April 2022
 - Implementation timeline developed and initiated
 - Potential staff education and identification
 - RFPs for Medical Director, EMR, pharmacy, insurance
 - BOH process initiated
- May 2022
 - BOH selection process
 - Budget finalized
 - Potential staff identification
 - Funding secured and clearly understood
- June 2022
 - BOH selected and empaneled
 - Director named

Community Outreach

- Telephone town hall on March 30
- Outreach to community populations who use public health services in Arapahoe County - planned and initiated
- Ongoing weekly e-surveys
- Community engagement planned throughout 2022
 - In-person town halls in 2nd and 3rd quarters
 - Telephone town hall in 4th quarter
 - Meetings with municipal partners, school districts, business community
- Employment information for current District public health employees





Questions

Are You Comfortable Moving Forward?