

DOUGLAS COUNTY BOARD OF HEALTH THURSDAY, OCTOBER 3, 2024 AGENDA

Thursday, October 3, 2024

5:00 PM

Hearing Room

Disclaimer - This agenda is provided for informational purposes only and is subject to change.

Meetings Can Be Attended in Person or Remotely. See Instructions for Remote Participation at www.douglas.co.us/government/commissioners/meetings-and-agendas/

1. Call to Order

- a. Pledge of Allegiance
- b. Attorney Certification of Agenda
- c. Member Disclosure for Items on This Agenda

2. Consent Agenda

a. Review/Approve Minutes of June 13, 2024

Attachments: 06.13.2024 BOH Minutes

b. Review/Approve Financial Report through August 31, 2024

Attachments: Financial Report Through August 31

c. Review/Ratify Finance Committee Minutes and Actions from July 18, 2024

Attachments: 07.18.24 Finance Meeting Minutes

3. Regular Agenda

a. Executive Director Update
Michael Hill – Executive Director

Attachments: Executive Director Update

b. EPR and Disease Surveillance Division UpdateJon Surbeck – Division Manager (Written Report Only)

Attachments: EPR and Disease Surveillance Division Update

c. Environmental Health Division Update Skyler Sicard – Assistant Director (Written Report Only)

Attachments: Environmental Health Division Updates

d. Community Health Division Update
Laura Larson – Assistant Director (Written Report Only)

<u>Attachments</u>: <u>Community Health Division Update</u>

e. Early Childhood Council Update
Diane Smith – Early Childhood Council Executive Director (Written Report Only)

Attachments: DCECC Strategic Plan 2023-2026

f. Quarterly Financial Update
Janelle Vidanes – Accounting Supervisor (Written Report Only)

Attachments: Quarterly Financial Update

Action Items

g. Request for Board of Health Opinion on Natural Medicines
Michael Hill – Executive Director

<u>Attachments:</u> Board of County Commissioner Request for Input

h. Request to Change the Date of the December Board of Health Meeting Michael Hill – Executive Director

Attachments: Request to Reschedule December Board of Health Meeting

i. Review/Approve Funding Allocations from the State Received since the July Finance Committee Meeting

Michael Hill – Executive Director

Attachments: Request to Approve Acceptance of Funding Allocations from the

State Received after the July Finance Committee Meeting

j. Request to Approve 2024 Strategic Plan Update Chris Burnett – Quality Improvement Coordinator

Attachments: DCHD Strategic Plan Update - 2024

k. Request to Approve Creating a Lead Public Health Clerk Title and Adding a Registered Dietician

Michael Hill – Executive Director

Attachments: Request to Create a Lead Public Health Clerk Title and Add a

Registered Dietician

1. Review/Approve DCHD Proposed Budget for 2025

Michael Hill – Executive Director

Attachments: Request to Approve DCHD Draft Budget for 2025

- 4. Citizen Comments
- 5. Adjournment



MEETING DATE: October 3, 2024

ATTACHMENTS:

06.13.2024 BOH Minutes



DOUGLAS COUNTY BOARD OF HEALTH

THURSDAY, JUNE 13, 2024

MINUTES

Thursday, June 13, 2024

5:00 PM

Hearing Room

1. Call to Order

PRESENT Commissioner Lora Thomas

Commissioner George Teal Board Member Linda Fielding Board Member Douglas Benevento

EXCUSED Board Member Kim Muramoto

a. Pledge of Allegiance

b. Attorney Certification of Agenda

Chris Pratt, County Attorney's Office, said that all items on today's agenda have been reviewed by his office and they all meet legal approval.

c. Member Disclosure for Items on This Agenda

None.

2. Consent Agenda

Secretary Teal moved the Board approve the consent agenda items. This is Motion No. 024-007.

RESULT: ACCEPTED
MOVER: George Teal
SECONDER: Linda Fielding

AYES: Thomas, Teal, Fielding, Benevento

EXCUSED: Muramoto

a. Review/Approve Minutes of March 14, 2024 BoH Meeting

b. Review/Approve Financial Report through May 2024

Review/Approve Financial Report through May 2024

3. Regular Agenda

Information Only Items

a. Executive Director Update Michael Hill - Executive Director

Director Mike Hill, Health Department, addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Director Hill answered the question.

Secretary Teal asked a clarifying question.

Director Hill answered the question.

Vice Presdient Thomas commented on this Item.

Secretary Teal commented on this Item.

Board Member Fielding commented on this Item.

Director Hill commented on this Item.

President Benevento asked a clarifying question.

Director Hill commented answered the question.

President Benevento commented on this Item.

Director Hill commented on this Item.

President Benevento asked a clarifying question.

Director Hill answered the question.

b. EPR and Disease Surveillance Division Update Jon Surbeck - Division Manager (Written Report Only)

EPR and Disease Surveillance Division Update Jon Surbeck - Division Manager (Written Report Only)

c. Environmental Health Division Update Skyler Sicard - Environmental Health Supervisor (Written Report Only)

Environmental Health Division Update Skyler Sicard - Environmental Health Supervisor (Written Report Only)

d. Community Health Division Update Laura Larson - Assistant Director (Written Report Only)

Community Health Division Update Laura Larson - Assistant Director (Written Report Only)

e. Early Childhood Council Update Diane Smith - Early Childhood Council Executive Director (Written Report Only)

Early Childhood Council Update Diane Smith - Early Childhood Council Executive Director (Written Report Only)

f. Quarterly Financial Update Janelle Esposo - Accounting Supervisor (Written Report Only)

Quarterly Financial Update Janelle Esposo - Accounting Supervisor (Written Report Only)

g. COVID-19 Community After Action Report Daiko Abe - Integrated Solutions Consulting Corp. (Presentation)

Daiko Abe, Integrated Solutions Consulting Corp, addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Daiko Abe answered the question.

Secretary Teal commented on this Item.

Board Member Fielding commented on this Item.

Vice President Thomas commented on this Item.

John Fielding, Pinery, addressed the Board to provide public comment.

Fran Santagata, Roxbourough, addressed the Board to provide public comment.

h. DCHD Strategic Plan Update Chris Burnett - QI Coordinator (Presentation)

Chris Burnett, QI Coordinator, addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Chris answered the question.

Vice President Thomas asked a question.

Director Hill answered the question.

Action Items

i. Review/Approve acceptance of state funding allocations received since March 2024 Michael Hill - Executive Director

Director Hill addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Director Hill answered the question.

Vice President Thomas asked a clarifying question.

Director Hill answered the question.

Secretary Teal moved that the Board approve this Item. This is Motion No. 024-008.

RESULT: ACCEPTED
MOVER: George Teal
SECONDER: Linda Fielding

AYES: Thomas, Teal, Fielding, Benevento

EXCUSED: Muramoto

j. Review/Approve staff request to pursue Public Health Accreditation Chris Burnett - QI Coordinator

Chris Burnett, QI Coordinator, addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Director Hill answered the question.

Board Member Fielding commented on this Item.

Secretary Teal moved that the Board approve this Item. This is Motion No. 024-009.

RESULT: ACCEPTED
MOVER: George Teal
SECONDER: Linda Fielding

AYES: Thomas, Teal, Fielding, Benevento

EXCUSED: Muramoto

k. Review/Approve staff request to develop a partnership with NE Colorado Health Department for WIC Services Laura Larson - Assistant Director for Community Health

Laura Larson, Assistant Director of Community Health, addressed the Board to present on this Item.

President Benevento asked a clarifying question.

Laura answered the question.

President Benevento asked a clarifying question.

Laura answered the question.

President Benevento asked a clarifying question.

Laura answered the question.

Vice President Thomas commented on this Item.

Vice President Thomas moved that the Board approve this Item. This is Motion No. 024-010.

RESULT: ACCEPTED
MOVER: Lora Thomas
SECONDER: George Teal

AYES: Thomas, Teal, Fielding, Benevento

EXCUSED: Muramoto

4. Citizen Comments

John Fielding, Pinery, addressed the Board to provide public comment.

5. Adjournment

Secretary Teal moved that the Board adjourn.

Board Member Fielding provided a second to this motion.

This is Motion No. 024-011.



MEETING DATE: October 3, 2024

ATTACHMENTS:

Financial Report Through August 31

DOUGLAS COUNTY GOVERNMENT

Budget vs Actual Rpt(CONDENSED)

For the Eight Months Ending August 31, 2024

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Description	Prior Year Actual	Prior Year Budget	Current Year Actual	Current Year Encumbrance	Adopted Budget	Amended Budget	Current Year Available	% Remaining
00217 DOUGLAS COUNTY HEALTH DEPT	Actual	Buuget	Actual	Encumbrance		Budget	Available	Kemaning
300000 REVENUES	.00	.00	.00	.00	.00	.00	.00	.0
330000 INTERGOVERNMENTAL	.00	.00	.00	.00	.00	.00	.00	.0
331900 Other Federal Grants	(1,425,549.25)	(3,893,450.00)	(1,151,165.62)	.00	(1,862,851.00)	(2,199,452.00)	(1,048,286.38)	47.7
331960 ARPA Grants	.00	(59,346.00)	(473,706.67)	.00	.00	(43,445.00)	430,261.67	(990.4)
333900 Federal Reimbursement/CDPHE	(280,526.90)	.00	.00	.00	.00	.00	.00	.0
334600 Other State Grants	(530,260.07)	(1,770,477.00)	(850,548.75)	.00	(1,331,830.00)	(1,094,947.00)	(244,398.25)	22.3
336900 State Reimbursement/CDPHE	(626,606.00)	.00	(199,852.00)	.00	.00	(289,941.00)	(90,089.00)	31.1
330000 INTERGOVERNMENTAL	(2,862,942.22)	(5,723,273.00)	(2,675,273.04)	.00	(3,194,681.00)	(3,627,785.00)	(952,511.96)	26.3
330000 1112100 (211111211112	(2,002,912.22)	(3,723,273.00)	(2,073,273.01)	.00	(3,131,001.00)	(3,027,703.00)	(32,311,30)	20.5
340000 CHARGES FOR SERVICES	.00	.00	.00	.00	.00	.00	.00	.0
345100 VITAL RECORDS FEES	(149,109.40)	(75,000.00)	(188,127.00)	.00	(156,000.00)	(237,247.00)	(49,120.00)	20.7
345200 RESTAURANT INSPECTION FEES	(429,397.50)	(400,000.00)	(128,380.22)	.00	(331,000.00)	(331,000.00)	(202,619.78)	61.2
345210 CHILDCARE INSPECTION FEES	(23,866.25)	(40,000.00)	(8,692.50)	.00	(46,000.00)	(46,000.00)	(37,307.50)	81.1
345220 WASTEWATEER FEES	(209,238.00)	(236,100.00)	(126,823.00)	.00	(190,000.00)	(190,000.00)	(63,177.00)	33.3
345230 Body Art Inspection Fees	(9,400.00)	(40,000.00)	(4,655.00)	.00	(6,200.00)	(6,200.00)	(1,545.00)	24.9
345240 Land Use Fees	(9,165.00)	(50,000.00)	(2,430.00)	.00	(5,000.00)	(5,000.00)	(2,570.00)	51.4
345260 Solid and Hazardous Waste Fe	(355.00)	(5,000.00)	.00	.00	(3,500.00)	(3,500.00)	(3,500.00)	100.0
345270 Recreational Water Fees	(23,640.00)	.00	(1,370.00)	.00	.00	.00	1,370.00	(100.0)
340000 CHARGES FOR SERVICES	(854,171.15)	(846,100.00)	(460,477.72)	.00	(737,700.00)	(818,947.00)	(358,469.28)	43.8
350000 FINES & FORFEITS	.00	.00	.00	.00	.00	.00	.00	.0
350000 FINES & FORFEITS	.00	.00	.00	.00	.00	.00	.00	.0
360000 INTEREST ON INVESTMENTS	.00	.00	.00	.00	.00	.00	.00	.0
360000 INTEREST ON INVESTMENTS	.00	.00	.00	.00	.00	.00	.00	.0
270000 LLD ACCECCMENTS & CONTRIBUT	00	00	00	00	00	00	00	0
370000 L.I.D. ASSESSMENTS & CONTRIBUT	.00	.00	.00		.00	.00	.00	.0
370000 L.I.D. ASSESSMENTS & CONTRIBUT	.00	.00	.00	.00	.00	.00	.00	.0
380000 MISCELLANEOUS REVENUES	.00	.00	.00	.00	.00	.00	.00	.0

DOUGLAS COUNTY GOVERNMENT

Budget vs Actual Rpt(CONDENSED)

For the Eight Months Ending August 31, 2024

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Description	Prior Year Actual	Prior Year Budget	Current Year Actual	Current Year Encumbrance	Adopted Budget	Amended Budget	Current Year Available	% Remaining
382900 Other Reimbursements	(24,291.62)	.00	(45,605.95)	.00	.00	(45,006.00)	599.95	(1.3)
383100 Grants - Private	.00	.00	(48,351.00)	.00	.00	.00	48,351.00	(100.0)
380000 MISCELLANEOUS REVENUES	(24,291.62)	.00	(93,956.95)	.00	.00	(45,006.00)	48,950.95	(108.8)
390000 OTHER FINANCING SOURCES	.00	.00	.00	.00	.00	.00	.00	.0
395100 Op Transfer-General Fund	(2,034,188.00)	(2,034,188.00)	(1,415,498.00)	.00	(2,123,247.00)	(2,123,247.00)	(707,749.00)	33.3
390000 OTHER FINANCING SOURCES	(2,034,188.00)	(2,034,188.00)	(1,415,498.00)	.00	(2,123,247.00)	(2,123,247.00)	(707,749.00)	33.3
300000 REVENUES	(5,775,592.99)	(8,603,561.00)	(4,645,205.71)	.00	(6,055,628.00)	(6,614,985.00)	(1,969,779.29)	29.8
400000 EXPENDITURES	.00	.00	.00	.00	.00	.00	.00	.0
410000 PERSONNEL SERVICES	.00	.00	.00	.00	.00	.00	.00	.0
411100 Salaries & Wages-Regular (FT	2,803,893.87	3,046,457.00	1,976,511.11	.00	3,208,809.00	3,665,165.00	1,688,653.89	46.1
411110 Payroll Accrual	29,816.23	.00	.00	.00	.00	.00	.00	.0
411230 Stipend	50,400.00	38,400.00	9,300.00	.00	7,800.00	7,800.00	(1,500.00)	(19.2)
411300 Salaries & Wages-Temporary	.00	.00	519.12	.00	.00	.00	(519.12)	(100.0)
411600 Merit Pool	13,836.64	174,964.00	61,338.71	.00	145,393.00	145,393.00	84,054.29	57.8
412100 Overtime/Straight - Reg.	646.07	.00	610.20	.00	.00	.00	(610.20)	(100.0)
412300 On-Call Pay	22,608.56	.00	9,099.44	.00	.00	.00	(9,099.44)	(100.0)
420100 Vacation Payout	13,441.92	.00	26,184.98	.00	.00	.00	(26,184.98)	(100.0)
430150 Medical Benefit	438,960.39	689,354.00	359,671.03	.00	633,278.00	633,278.00	273,606.97	43.2
430160 Dental Benefit	.00	12,384.00	.00	.00	10,526.00	10,526.00	10,526.00	100.0
430200 Social Security	219,216.11	232,018.00	157,644.07	.00	254,334.00	254,334.00	96,689.93	38.0
430300 Retirement	259,184.39	340,012.00	194,127.45	.00	370,618.00	370,618.00	176,490.55	47.6
430400 Fringe Benefits Pool	40,205.43	42,985.00	28,066.44	.00	46,442.00	46,442.00	18,375.56	39.6
432100 Contract Work/Temporary Agen	.00	243,608.00	122,447.78	.00	.00	10,000.00	(112,447.78)	(1,124.5)
410000 PERSONNEL SERVICES	3,892,209.61	4,820,182.00	2,945,520.33	.00	4,677,200.00	5,143,556.00	2,198,035.67	42.7
433000 SUPPLIES	.00	.00	.00	.00	.00	.00	.00	.0
433200 Office Supplies	16,547.78	30,220.00	22,376.50	.00	28,000.00	22,860.00	483.50	2.1
433210 Computer Supplies	575.88	.00	331.99	.00	.00	.00	(331.99)	(100.0)

DOUGLAS COUNTY GOVERNMENT

Budget vs Actual Rpt(CONDENSED)

For the Eight Months Ending August 31, 2024

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Description	Prior Year Actual	Prior Year Budget	Current Year Actual	Current Year Encumbrance	Adopted Budget	Amended Budget	Current Year Available	% Remaining
433220 Food & Beverage Supplies	137.80	.00	4.66	.00	.00	.00	(4.66)	(100.0)
433240 Office Equip. Accessories	1,388.18	.00	.00	.00	.00	.00	.00	.0
433400 Operating Supplies	12,942.87	55,994.00	5,461.40	.00	83,444.00	30,784.00	25,322.60	82.3
433410 Emergency Response Supplies	.00	.00	2,203.69	.00	.00	.00	(2,203.69)	(100.0)
433420 Employee Recognition Supplie	985.00	.00	.00	.00	.00	.00	.00	.0
433430 Community Program Supplies	341.20	.00	3,447.68	.00	.00	.00	(3,447.68)	(100.0)
433450 First Aid Supplies	8.27	.00	84.85	.00	.00	.00	(84.85)	(100.0)
433500 Clothing & Uniforms	1,485.71	474.00	1,028.78	.00	.00	300.00	(728.78)	(242.9)
436200 Equip. & Motor Vehicle Parts	138.90	.00	6,789.47	.00	.00	.00	(6,789.47)	(100.0)
433000 SUPPLIES	34,551.59	86,688.00	41,729.02	.00	111,444.00	53,944.00	12,214.98	22.6
438000 CONTROLLABLE ASSETS (C.A.)	.00	.00	.00	.00	.00	.00	.00	.0
438400 C.AFurniture/Office System	9,477.06	85,000.00	.00	.00	35,000.00	35,000.00	35,000.00	100.0
438500 C.AComputer-Related	2,998.00	3,001.00	.00	.00	.00	.00	.00	.0
438800 C.AOther Equipment	1,445.62	.00	.00	.00	.00	.00	.00	.0
438000 CONTROLLABLE ASSETS (C.A.)	13,920.68	88,001.00	.00	.00	35,000.00	35,000.00	35,000.00	100.0
439000 PURCHASED SERVICES	.00	.00	.00	.00	.00	.00	.00	.0
439200 Postage & Delivery Svc.	2,130.34	5,000.00	4,387.58	.00	5,500.00	5,500.00	1,112.42	20.2
440100 Printing/Copying/Reports	30,398.37	9,844.00	13,898.03	.00	27,352.00	14,052.00	153.97	1.1
440200 Newspaper Notices/Advertisin	.00	6,967.00	.00	.00	.00	.00	.00	.0
440300 Copier Charges	8,101.80	6,120.00	.00	.00	8,000.00	8,000.00	8,000.00	100.0
442350 Employee Phone Allowance	1,920.00	1,000.00	1,528.00	.00	1,000.00	1,000.00	(528.00)	(52.8)
442400 Telephone/Communications	328.48	5,156.00	.00	.00	500.00	500.00	500.00	100.0
442420 Cell Phone Service	23,575.64	12,700.00	12,226.77	.00	14,888.00	14,888.00	2,661.23	17.9
443100 Medical, Dental & Vet Servic	21,464.92	420.00	1,245.62	.00	2,500.00	2,500.00	1,254.38	50.2
443600 Other Professional Services	441,118.95	1,998,361.00	350,682.95	52,060.73	219,414.00	401,435.00	(1,308.68)	(.3)
443625 Employee Bi-Lingual Allowanc	2,450.00	.00	4,025.00	.00	.00	.00	(4,025.00)	(100.0)
444500 Software/Hardware Supp./Main	.00	.00	.50	.00	.00	.00	(.50)	(100.0)
444550 Software/Hardware Subscripti	.00	.00	1,035.19	.00	.00	.00	(1,035.19)	(100.0)
445200 Metro Area Meeting Expense	997.39	40,005.00	717.02	.00	10,150.00	11,950.00	11,232.98	94.0

DOUGLAS COUNTY GOVERNMENT

Budget vs Actual Rpt(CONDENSED)

For the Eight Months Ending August 31, 2024

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Description	Prior Year Actual	Prior Year Budget	Current Year Actual	Current Year Encumbrance	Adopted Budget	Amended Budget	Current Year Available	% Remaining
445300 Travel Expense	55,556.27	51,264.00	45,389.64	.00	62,618.00	92,609.00	47,219.36	51.0
445500 Catered Meal Service	2,378.66	.00	1,103.15	.00	.00	.00	(1,103.15)	(100.0)
446100 Conference, Seminar, Train Fe	34,176.70	21,500.00	33,177.73	.00	45,800.00	63,524.00	30,346.27	47.8
446300 Prof. Membership & Licenses	29,958.00	29,800.00	21,953.00	.00	33,500.00	33,500.00	11,547.00	34.5
446400 Books & Subscription	7,387.85	1,000.00	1,107.60	.00	5,500.00	6,168.00	5,060.40	82.0
446450 Conference Hosting Expenses	12.98	1,813.00	.00	.00	.00	.00	.00	.0
447500 Other Purchased Services	20,738.04	810,196.00	205,388.47	58,100.00	56,819.00	65,533.00	(197,955.47)	(302.1)
447570 Community Outreach	4,392.62	.00	31,949.21	.00	.00	.00	(31,949.21)	(100.0)
447900 Recruitment Costs	7,862.12	.00	126.00	.00	3,000.00	3,000.00	2,874.00	95.8
439000 PURCHASED SERVICES	694,949.13	3,001,146.00	729,941.46	110,160.73	496,541.00	724,159.00	(115,943.19)	(16.0)
448000 BUILDING MATERIALS	.00	.00	.00	.00	.00	.00	.00	.0
448000 BUILDING MATERIALS	.00	.00	.00	.00	.00	.00	.00	.0
449000 FIXED CHARGES	.00	.00	.00	.00	.00	.00	.00	.0
449055 Fuel Charges	6,380.84	3,000.00	2,377.61	.00	5,000.00	5,000.00	2,622.39	52.4
449056 Fleet Maintenance	8,468.98			.00		•	,	
	,	4,500.00	11,624.33		10,000.00	10,000.00	(1,624.33)	(16.2)
449057 Fleet Outside Repairs	2,391.20	500.00	422.03	.00	500.00	500.00	77.97 342.23	15.6
449058 Fleet Internal Labor	4,403.39	1,000.00	5,657.77	.00	6,000.00	6,000.00		5.7
449400 ISF-Liability & Prop Insuran	243,800.04	71,509.00	5,337.28	.00	8,006.00	8,006.00	2,668.72	33.3
450210 Electric	.00	.00	151.14		.00	.00	(151.14)	(100.0)
449000 FIXED CHARGES	265,444.45	80,509.00	25,570.16	.00	29,506.00	29,506.00	3,935.84	13.3
454000 DEBT SERVICE	.00	.00	.00	.00	.00	.00	.00	.0
454000 DEBT SERVICE	.00	.00	.00	.00	.00	.00	.00	.0
455000 GRANTS, CONTRIBUTIONS, INDEMNI	.00	.00	.00	.00	.00	.00	.00	.0
458300 Short Term Disability Claims	.00	.00	1,100.09	.00	.00	.00	(1,100.09)	(100.0)
459100 Errors & Omissions	.00	.00	56.00	.00	.00	.00	(56.00)	(100.0)
465100 Contributions - Misc.	.00	.00	131,037.35	.00	.00	.00	(131,037.35)	(100.0)
455000 GRANTS, CONTRIBUTIONS, INDEMNI	.00	.00	132,193.44	.00	.00	.00	(132,193.44)	(100.0)

DOUGLAS COUNTY GOVERNMENT

Budget vs Actual Rpt(CONDENSED)

For the Eight Months Ending August 31, 2024

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5

Description	Prior Year Actual	Prior Year Budget	Current Year Actual	Current Year Encumbrance	Adopted Budget	Amended Budget	Current Year Available	% Remaining
466000 INTERGOVERNMENTAL SUPPORT SVC.	.00	.00	.00	.00	.00	.00	.00	.0
466000 INTERGOVERNMENTAL SUPPORT SVC.	.00	.00	.00	.00	.00	.00	.00	.0
469000 INTERDEPARTMENTAL CHARGES	.00	.00	.00	.00	.00	.00	.00	.0
469210 Cost Allocation Plan	132,915.17	.00	99,759.04	.00	.00	.00	(99,759.04)	(100.0)
469000 INTERDEPARTMENTAL CHARGES	132,915.17	.00	99,759.04	.00	.00	.00	(99,759.04)	(100.0)
471000 CAPITAL OUTLAY	.00	.00	.00	.00	.00	.00	.00	.0
474100 Heavy Equipment	.00	.00	10,927.73	.00	.00	.00	(10,927.73)	(100.0)
474300 Cars, Vans, Pickups	.00	64,555.00	432,707.99	.00	.00	.00	(432,707.99)	(100.0)
474400 Furniture & Office Equipment	37,520.39	.00	.00	.00	.00	.00	.00	.0
471000 CAPITAL OUTLAY	37,520.39	64,555.00	443,635.72	.00	.00	.00	(443,635.72)	(100.0)
480000 CONTINGENCIES & RESERVES	.00	.00	.00	.00	.00	.00	.00	.0
483100 Miscellaneous Contingency	.00	500,000.00	.00	.00	300,000.00	300,000.00	300,000.00	100.0
480000 CONTINGENCIES & RESERVES	.00	500,000.00	.00	.00	300,000.00	300,000.00	300,000.00	100.0
400000 EXPENDITURES	5,071,511.02	8,641,081.00	4,418,349.17	110,160.73	5,649,691.00	6,286,165.00	1,757,655.10	28.0
00217 DOUGLAS COUNTY HEALTH DEPT	(704,081.97)	37,520.00	(226,856.54)	110,160.73	(405,937.00)	(328,820.00)	(212,124.19)	64.5



MEETING DATE: October 3, 2024

ATTACHMENTS:

07.18.24 Finance Meeting Minutes



DOUGLAS COUNTY BOARD OF HEALTH FINANCE COMMITTEE MEETING

Thursday, July 18, **202**4

MINUTES

Call to order by Katheryn Wille.

Katheryn Wille, Finance Committee Board Member is present. Also attending are Michael Hill (Director of the Health Department), Jon Surbeck (Manager of EPR and Epidemiology), and Chris Pratt (County Attorney).

The committee reviewed and discussed the Funding Allocations from the State received since July.

Mrs. Wille moved that the committee approve the Funding Allocations from the State since July 2024.

Seconder: Doug Benevento

Ayes: Benevento, Wille.

This is Motion No. 001.



MEETING DATE: October 3, 2024

ATTACHMENTS:

Executive Director Update



Executive Director's Update - September 2024

Introduction:

The department continues to perform at a high level, serving the needs of the residents of Douglas County.

Executive Director Activities:

Participated in additional meetings of the Region 12 Opioid Council, to award first-year Opioid funding and begin to develop ideas for second-year funding.

Continue to participate in the Douglas County Homeless Initiative monthly meetings.

Participated in regular meetings of the Metro Denver Partnership for Health.

I attended the National Association of County and City Health Officials annual meeting in July, in Detroit.

Health Department staff continues to work with Human Services staff on a program to give new parents information to get children's lives off to a good start, the first focus being on safe sleep for infants.

Several staff attended the Public Health in the Rockies conference in Keystone in late September.

Our department continues to work with the two Advent Health hospitals in our county to try and perform our respective Community Health Assessment processes at the same time in order to increase effectiveness and reduce the frequency of asking our residents and partner organizations for data.

Infectious Disease Update:

COVID-19 cases have been a bit elevated over the summer but appear to be leveling off, Influenza and RSV cases also remain low at this time. We continue to recommend that all people eligible for vaccines receive them as their best protection against respiratory diseases, including COVID-19.

There is continuing national coverage of H5N1 (bird flu) being passed to people. There have been cases in Colorado associated with employees who work to cull poultry at farms identified with exposure to the disease. There have also been some 'hits' in wastewater systems in our county indicating the presence of Influenza A, H5. This indicates there may have been H5N1 present, most likely from wild birds or possibly from raw milk. No human exposures are known in Douglas County.

Future Plans:

The county appears to be close to agreeing on a lease for a building in Meridian that would house our department as well as other departments such as the Human Services and Community Justice Services.

I will be participating in the American Public Health Association annual conference in Minneapolis in October.

Health Administration Update:

Our Vital Records staff continue to produce a truly impressive amount of work. During the period of June through August, our Vital Records Office sold 3,536 Birth Certificates and 383 Death Certificates for total revenue of \$71,921.

We have formally announced our interest in accreditation to the Public Health Accreditation Board and paid the initial fee which will provide us with training opportunities and an assigned support person.



MEETING DATE: October 3, 2024

ATTACHMENTS:

EPR and Disease Surveillance Division Update

BOH, September 2024 EPI & EPR Updates:

The EPI Team has been very busy balancing a multitude of activities. These activities include:

- Outbreaks since the last BOH meeting:
 - We investigated 6 outbreaks in school, preschool, or childcare settings and 1 outbreak in a priority setting.
 - A statewide rabies investigation involving a rabies-positive puppy adopted from out of state required extensive and sensitive Epi engagement with families of adopted puppies and staff at an impacted veterinary clinic.

• Data:

 We collaborated with IT to resume the Communicable Disease Dashboard after integrating data from EpiTrax, the new statewide communicable disease surveillance system.

Disease Updates:

- o The West Nile season has been mild relative to last year.
- We have had a busy summer with rabies exposure assessments following human or pet contact with bats and raccoons.
- o In preparation for the upcoming respiratory season, we have updated vaccine recommendations for Flu, RSV, and COVID on our website.
- Website: We continue to update the website with monthly community health topics and routine updates to keep the content current and accurate.

Misc:

- Two Epi staff participated in an all-day Cross-Sector Wastewater Surveillance Workshop hosted by CDPHE.
- o 3 Epi staff are participating in Public Health in the Rockies Conference this month.
- 3 Epi staff will attend ICS 400 training, and 1 Epi will attend ICS 300 training in September.
- 3 EPI staff are sitting in an Infection Preventionist certification testing process. This is a very comprehensive and challenging program. Course content will assist the EPIs interact at a higher level with our hospital partners, while enhancing our ability to serve our constituents.

EPR significant activities include:

Deployments:

- Recent Front Range Wildland and Wildland Interface activity provided the opportunity for us to assist a number of other agencies in their time of need. Preexisting quality relationships enhanced our effectiveness, while also validating our training and exercise efforts.
- Since the last BOH meeting, we have used our department operations center, (DOC) four times to address necessary incidents or events.
- 2 specialists are attending National Incident Management System (NIMS) Incident Commander (IC) training.
- o 1 specialist attended Local Emergency Planning Commission Conference.
- 1 specialist has completed phase I of the State of Colorado's Emergency Manager Academy.
- o EPR and EPI staff have also spent a good deal of time providing material for accreditation.



MEETING DATE: October 3, 2024

ATTACHMENTS:

Environmental Health Division Updates



September 27, 2024

Agenda Item 3c Environmental Health Division Update

Introduction:

During the last quarter, Environmental Health (EH) has diligently worked to train 5 Environmental Health Specialists. The team is focused on training the newest hires in the various programs that are under EH purview. We continue to collaborate with CDPHE for training and the official signoffs needed for new inspectors to conduct independent inspections.

- 1 EH Specialist successfully completed Standardization in the Retail Food Program with CDPHE staff. This is required within the first 18 months of hire and again every 3 years. This is a rigorous process that ensures our inspectors are meeting the State's expectations for conducting inspections and maintaining consistency with other inspectors across Colorado. Two additional EH Specialists have been scheduled in the upcoming months.
- 2 EH Specialists have successfully been signed off to conduct independent inspections of retail food establishments. This allows them to be on their own for a period prior to undergoing standardization.
- 1 EH Specialist has been signed off to conduct independent inspections of childcare establishments.
- 1 EH Specialist has been signed off to issue OWTS permits, to conduct independent swimming pool inspections, and to inspect the Sedalia landfill.
- The Environmental Health Supervisor was promoted to the Assistant Director position and the Supervisor position has been filled by an internal candidate.
- 1 EH Specialist has decided to return to school to pursue their master's degree. 1 EH Specialist has transferred, and that position was posted externally. Interviews will occur in the upcoming month.

Summer was a very busy season for Environmental Health. The team connected with numerous Event Coordinators on 28 events around Douglas County that were selling food from June through August. We also conducted inspections at Parker Days, Renaissance Festival, 2024 Fair, and the PGA BMW Golf Tournament. Our largest special event this year had 42 food vendors! We also provided inspections for our residential summer camps to ensure health and sanitation standards were met in these settings. Seasonal pools also wrapped up for the season after receiving a visit from our EH Specialists to ensure that water quality standards were met and maintained.

Unless it is a newly established facility, everyone who holds an active health license has seen an inspector at this point. Newly established facilities are ones that have been newly built or those that have recently changed owners. These facilities are given time to start their operations (hiring, onboarding, training, etc.) before their first routine inspection occurs. During the first routine inspection, inspectors foster a working relationship with the operators and provide the necessary education regarding health and sanitation. We even identified a grocery store that had not been licensed in 12 years!

We continue to work to improve processes and procedures for our programs to ensure we are providing excellent service to our community. We are continuing to build partnerships with many different divisions within CDPHE, the FDA, and our surrounding counties by attending meetings and trainings. We also participate in various statewide EH program manager and director's meetings to ensure that we stay current and updated on trends and unique situations. We look forward to



continuing to improve and grow the depth and breadth of knowledge amongst our Environmental Health team throughout the rest of this year and the years to come.

Activities:

From June 4th through August 30th, Environmental Health has:

- Reviewed Special Event Coordinator Applications for 28 events
 - Our largest event had 42 food vendors consisting of both special event food vendor booths and mobile food trucks.
- Conducted 262 inspections of facilities:
 - 21 childcare facility inspections
 - 45 Recreational Water inspections
 - o 205 Retail Food Establishment inspections
 - 1 Waste Tire inspections
- Assisted restaurant owners and builders with 21 plan reviews
- Responded to 39 complaints
- Received 130 Transfer of Title Application permits
- Issued 147 permits:
 - Issued 85 OWTS Use Permits
 - Issued 38 New Installation OWTS permits
 - Issued 10 Major Repair OWTS permits
 - o Issued 14 Minor Repair OWTS permits
- Reviewed 16 Land Use referrals



MEETING DATE: October 3, 2024

ATTACHMENTS:

Community Health Division Update



Community Health Update – September 2024

Activities:

Community Support: DCHD partners with CDPHE to distribute Naloxone (Narcan) and Fentanyl
Test Strips to businesses, organizations, and individuals in the community that may be at risk for
opioid overdoses. Since January, we've distributed 2,250 Fentanyl Test Strips (FTS) and 225
Narcan kits to individuals and businesses in the community. A business partner sent an email in
August, when requesting additional FTS for his employees and shared the following testimonial
with DCHD which highlights the importance of this resource in the Douglas County community:

Thank you so much for your assistance in the past. We were able to distribute all tests to employees throughout a 3-month time frame. We now have a lot of new team members coming on board and want everyone to be safe.

I want to say it's very possible we saved some lives. I cannot legally ask anyone details, but I have had several employees directly advise they "turned something down because of the test results." This leads me to believe whatever it was tested positive for fentanyl. So, I couldn't be more satisfied with the help we're providing.

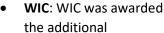
Regardless of it being opioids, or something else, the disease of addiction will always be present in our communities. Providing resources to "help" people suffering from this ailment is what I find to be so important. I cannot blame or judge individuals, since I know in many cases they do not want to use, every day is a struggle, and they certainly do not want to die. Utilizing testing strips can at least allow certain people to test for an extremely dangerous substance and prevent intake of whatever it is.

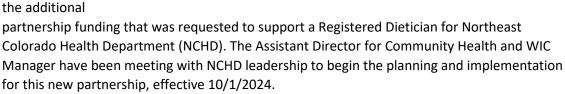
I do not believe we are fighting addiction but helping those "struggling" with addiction. I can only hope that they seek help and/or realize that the street supply of illegal substances can be "extremely" dangerous and tests such as this can prove that. Whether it saves someone's life or leads them to the greater understanding that the vast majority of illegal narcotics are now tainted/cut with fentanyl is my goal when providing tests for employees.

• **Clinical Services:** Multiple DCHD staff attended the Epidemiology & Prevention of Vaccine-Preventable Diseases in Denver on June 5th and 6th, which was supported through core immunization grant funding. This course provided an in-depth understanding of vaccines and the most up-to-date information on vaccine availability and recommendations.

DCHD hosted three vaccine events, in partnership with STRIDE Community Health Center and CDPHE during June – August 2024. A total of 63 individuals (including three adults) were vaccinated and 128 vaccine doses were administered.

> At the end of July, members of the Health Families Partnership and representatives from Sky Ridge Medical Center came together at the **Human Services** Conference Center to assemble the bags that will be provided to birthing families in the County. A sample of the bag that will be distributed will be made available during the BOH meeting.





Through July 2024, WIC has served a total of 2,317 unduplicated individuals. 8% of participants are pregnant individuals, 15% are postpartum individuals, 21% are infants under the age of 12 months, and 56% are children under the age of 5 years. 85% of enrolled families are currently participating in Medicaid and 27% also participate in SNAP.



August was National
Breastfeeding Month (with
the first week of August
celebrating World
Breastfeeding Week) and
provided an opportunity for
the WIC team to share
information on promoting and
supporting breastfeeding
families through the
celebration of cultures,
communities, and the
importance of a strong
nutritional foundation. WIC's
Lead WIC Educator put



together bulletin board at both the Castle Rock and Lone Tree Health Department locations to highlight fun facts about breastfeeding and support families in their breastfeeding journeys.

• **Community Partner Highlights:** The Community Health team participated in the following community presentations and events from June 2024 – August 2024:

Date	Event	Location
6/5/2024	Senior Life Expo - Booth	Castle Rock
6/7/2024	SECOR Cares Resource Table	Parker
	Elizabash – Booth with Elbert County Public Health	
6/8/2024	(Tobacco Prevention)	Elizabeth
6/10/2024	Immunization Clinic with STRIDE CHC	Castle Rock
6/11/2024	WIC and Manna Care	Highlands Ranch
6/14 – 6/15/2024	Parker Days - Booth	Parker
6/18/2024	Douglas County Health Alliance – MCH Presentation	Castle Rock
6/27/2024	Fall Prevention Presentation	Lone Tree
	Elbert Days with Elbert County Public Health (Tobacco	
7/6/2024	Prevention)	Elbert
7/6/2024	7 th Annual Vet Fest – Booth	Castle Rock
7/13/2024	Rock Your Wellness Health & Wellness Fair – Booth	Highlands Ranch
7/18/2024	SECOR Cares Resource Table	Parker
7/30/2024	Douglas County Strive to Thrive – Booth	Parker
7/31/2024	Immunization Clinic with STRIDE CHC	Castle Rock
	Elbert County Fair – Booth with Elbert County Public	
8/2 - 8/3/2024	Health (Tobacco Prevention)	Kiowa
8/3/2024	Lone Tree PD Open House – Booth	Lone Tree
8/4/2024	Douglas County PrideFest	Parker
8/16/2024	SECOR Cares Resource Table	Parker
8/20/2024	Immunization Clinic with CDPHE	Lone Tree



MEETING DATE: October 3, 2024

ATTACHMENTS:

DCECC Strategic Plan 2023-2026



Douglas County Early Childhood Council Strategic Plan 2023-2026

(Updated August 2024)

DCECC Vision

We strive to ensure all Douglas County families and early learning professionals have an awareness of and equitable access to high quality early childhood services, systems, and supports.

DCECC Mission

The mission of Douglas County Early Childhood Council is to promote the development of the whole child, birth to five, by fostering collaboration with families and providers. We are dedicated to providing awareness and access to high quality resources and supports; and utilizing community partnerships to ensure every child has a nurturing and responsive early childhood experience.

DCECC Values

- **Family and Provider Partnerships** We actively seek to partner with families and providers to benefit young children.
- Integrity We consistently hold ourselves accountable to our mission and vision.
- **Collaboration** We collaborate with each other and our stakeholders to achieve shared goals.
- **Inclusion** We embrace the inclusion of all families in early childhood care and education regardless of background, identity and circumstance.
- Equity We believe in providing equitable access to early childhood opportunities and resources

• **Communication** - We communicate information and resources to increase families' understanding of chld development and parenting.

Strategic Focus Areas

DCECC's Board has identified three focus areas under which goals and activities have been developed:

- 1. Ongoing Support of Existing Programs and Services
- 2. Expanding Connections with Families and Community partners
- 3. Organizational Development and Performance.

Goal 1: Strengthen existing programs and services in order to promote high quality programming for families and children with a focus on promoting school readiness.

Activity	Measurement	Progress
1.1 Monitor and increase the number of programs with an active MOU for CSQI (Colorado Shines Quality Improvement) Services	 Increase the number of programs at Level 2 or higher from a baseline of 51 programs at Level 2 and 67 programs at Levels 3-5 by 10% per year Decrease number of existing programs at Level 1 by 10% per year from a baseline of 109 Increase MOUs for CSQI from baseline of 83 by 10% per year Increase coaching hours from a baseline of 2594 by 10% per year 	 Level 2 increased from 51 to 61 Level 3-5 remained at 67 Level 1 programs decreased to 104 MOUs 70 - the state ran out of funding partway through the year and could not grant all MOU requests Total coaching hours 1,754.5 CSQI coaching hours 1144 LENA coaching hours 360 EQIT Coaching hours 164 E & E Coaching hours 86.5 Several factors impacted coaching hours. In FY23, we directed coaches to charge 2 hours of coaching for

		every hour of face to face CSQI coaching to cover the additional costs related to coaching such as travel time, emails, report writing, etc. In FY 24, we significantly increased the hourly rate for CSQI coaching to account for the additional costs so they could charge one hour for each hour of face to face coaching. Our reported CSQI coaching hours for FY23 were 2250. The actual face to face coaching hours were 1125. Therefore, total coaching hours for FY 23 were really 1,469 hours. A 10% increase would be an additional 147 hours. We increased coaching by 285.5 hours.
1.2 Improve implementation of Universal Pre-Kindergarten (UPK) by enhancing support for current providers and parents to maintain baseline number of providers and increase number of participating programs through education and outreach	 Maintain and/or increase number of participating programs from baseline of 133 Provide a minimum of 2 information sessions for providers and for parents between Nov. and Jan. each year Offer bi-weekly virtual office hours from Jan. thru June 	 Increased UPK participating programs to 149 UPK Providers received weekly email updates and 3 virtual meetings Offered 7 virtual meetings for parents to understand UPK Office hours were reduced due to lack of need - provided 8 times between October and June
1.3 Engage interested programs to participate in LENA (Language ENvironment	Maintain and/or increase number of classes participating from baseline of 8	Increased participation to 16 classes

Analysis) to increase awareness of language interactions with young children		
1.4 Expand understanding of working with Infants and Toddlers through EQIT (Expanding Quality for Infants and Toddlers) classes	 Continue to offer 4 classes per year Maintain and/or increase number of graduates from baseline of 60 	 4 classes offered 79 students successfully completed class
1.5 Support programs with identified facility improvement needs	Monitor use of Emerging & Expanding or capital improvement grant funds	 6 E & E grants approved and funded 5 E & E grants on hold - do not specifically support infant and toddler spots

Goal 2: Expand support for and connections with families and other community organizations in order to identify gaps in services, eliminate redundancies and ensure families have the opportunity to expand their understanding of effective parenting skills and resources

Activity	Measurement	Progress
2.1 Develop a calendar of classes for parents to be offered virtually or in person based on	Calendar of classes with at least 2 classes offered per month	Sept. 2 classes - 9 and 60 parents Oct. 5 classes - 15, 8, 9, 0, 14 parents

feedback from parent survey data gathered in 2022 and maintain on website	Year 1 – monitor the number of parents attending classes Year 2 and 3 – increase number of parents attending	Nov. 3 classes - 12, 0, 95 parents No classes offered in December Jan. 2 classes - 7 and 15 parents Feb. 4 classes - 6, 9, 0, 45 parents Mar. 2 classes - 15 and 14 parents Apr. 4 classes - 0, 6, 7, 3 parents May 2 classes - 20 and 40 One class in June was the second half of a May class with 40 attending.
2.2 Lead Advocates for Families - a coalition of service providers in Douglas County that support families (Current members: Douglas County Health Department, Douglas County Human Services, Advocates for Children CASA, Developmental Pathways, Douglas County School District, Family Resource Center of Douglas County, YANA)	Strategic plan of this group to be developed in Fall 2023 will identify ways this collaboration will support families with young children in Douglas County	Link to Organizational Information
2.3 Attend community events to share information about child development, Universal Pre-K and classes offered by DCECC and increase visibility of Council	Attend at least 3 community events per year	Strive to Thrive - July YANA Fitfest - August FCCH Conference - September South Metro Chamber Panel Presentation - November Strong Mamas Thriving Babies - March, April The Hive Open House - March Rally for Kids - April Baby Shower Castle Rock Adventist - April Mom-mosas for Mamas - May
2.4 Present at least one back-to-school	Date of meeting and number of parents	Getting Ready for Kindergarten - November

presentation to prepare parents of children entering kindergarten	participating	9th - 12 parents Preparing for my child's transition to kindergarten with an IEP - November 15th - 7 parents
2.5 Drive traffic to website by providing links to resources and supports for parents	Increase number of "hits" to website	FY 23 Unique Visitors 10,310 Total Visits 15,806 FY24 Unique Visitors 17,819 Total Visits 27,438
2.6 Partner with Douglas County School District and Developmental Pathways to inform families of supports for early intervention needs by distributing information about screening events hosted by DCSD and including information about early intervention on the website	DCSD flyers distributed Gather data on attendance at screening events	A total of 20 children were screened during the DCSD community screening dates.

Goal 3: Improve organizational functioning by strengthening relationships and understanding within the Executive Council

Activity	Measurement	Progress
3.1 Reaffirm/refresh the vision and mission of the DCECC in order to reflect the current priorities of the Council	Updated vision and mission by January 2024	Updated. <u>Link</u> to new document.

3.2 Establish committees and encourage all members to participate in at least one committee Current committees: • Parenting Committee • Stakeholder Meeting Planning Committee • Vision/Mission Update Committee • Budget/Grant Committee	 Committees Established by September of each year Agendas and Minutes Membership recorded 	 Parenting Committee met 8/16/23, 10/25/23, 11/29/23 and 5/9/24 Vision/Mision Update Committee met 11/16/23 and 5/9/24 Budget Committee met 11/13/23 Stakeholder Meeting Planning Committee met 10/23/23
3.3 a Year 1 - Investigate opportunities to increase funding to support Council priorities through outside grant funders and/or fund raising	 Committee formed by September 2023 Opportunities identified by May 2024 	The Budget Committee met in November and decided to postpone actively seeking additional funds until Vision, Mission and Goals were updated.
3.3 b Year 2 & 3 – Increase funding year over year	Amount of funding increase	Not Started
3.4 Provide opportunities for team building and active engagement during DCECC executive council meetings in order to develop into a high functioning team.	Agenda/minutes of DCECC executive council meetings	Link to Agenda/Minutes Folder



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MEETING DATE: October 3, 2024

ATTACHMENTS:

Quarterly Financial Update



Financial Update - September 2024

Our financial statements reflect accrual-based accounting principles, where revenues and expenses are recorded when they are earned or incurred, regardless of when cash is received or paid.

The Douglas County Health Department has 27.9% of its expenditure budget left for the year, with total spending at \$4,528,509.90, resulting in a variance of \$1,757,655.10 from a budget of \$6,286,165.00.

For revenue, 29.8% of the budgeted amount remains to be billed or reimbursed, with \$4,645,205.71 received so far from the total budgeted revenue of \$6,614,985.00.



www.douglas.co.us

MEETING DATE: October 3, 2024

ATTACHMENTS:

Board of County Commissioner Request for Input



Memorandum

DATE: AUGUST 26, 2024

TO: DOUGLAS COUNTY BOARD OF HEALTH

FROM: DEPARTMENT OF COMMUNITY DEVELOPMENT

SUBJECT: BOARD OF COUNTY COMMISSIONERS REQUEST FOR INPUT

REQUEST

During a recent Work Session, the Board of County Commissioners had a discussion regarding pending implementation of licensure procedures for Natural Medicine facilities at the State level. During the discussion, Commissioners expressed interest in hearing from the Board of Health if there is therapeutic benefit of this type of treatment, and if the Board of Health has any input on potential impacts the Natural Medicine industry may have on the community.

The Work Session Agenda Item is attached for reference.

ATTACHMENT

August 12, 2024, Work Session Agenda Item – Natural Medicine Facility Regulation



Agenda Item

DATE: August 12, 2024

TO: DOUGLAS COUNTY BOARD OF COUNTY COMMISSIONERS

THROUGH: DOUGLAS J. DEBORD, COUNTY MANAGER

FROM: TERENCE T. QUINN, AICP, DIRECTOR OF COMMUNITY DEVELOPMENT

CC: MARCCO HIGHAM, PLANNER

LAUREN PULVER, PLANNING SUPERVISOR

MICHAEL CAIRY, ZONING COMPLIANCE MANAGER

KATI CARTER, AICP, ASSISTANT DIRECTOR OF PLANNING RESOURCES STEVEN E. KOSTER, AICP, ASSISTANT DIRECTOR OF PLANNING SERVICES

SUBJECT: NATURAL MEDICINE FACILITY REGULATION

SUMMARY

Staff is assessing Senate Bill 23-290, Natural Medicine Regulation and Legalization, and the rulemaking process as it relates to local control by the County. The bill explicitly limits the County's ability to prohibit these uses outright. It does enable the County to regulate time, place, and manner of the operation of natural medicine related facilities.

The Colorado Department of Revenue (DOR) will begin accepting license applications no later than December 31, 2024. The licensing of Natural Medicine Healing Centers and related businesses are subject to applicable zoning laws as directed by the Board of County Commissioners (Board). Therefore, existing Douglas County Zoning Resolution (DCZR) regulations may be applied to the time, place, and manner by which Healing Centers and cultivation, manufacturing, or testing activities are established and operated in the County.

The DCZR currently includes use categories that may be applied to the Natural Medicine related uses in such a manner that Healing Centers would be allowed in the Business and Commercial Zone Districts. Uses related to cultivation, manufacturing, or testing would be allowed in the General Industrial and Light Industrial Zone Districts. Additional State requirements, like minimum separation distances, would still be required.

BACKGROUND

No later than December 31, 2024, DOR will begin regulating and controlling the licensure of natural medicine. This involves the cultivation, manufacturing, testing, storing, distribution, and dispensing of natural medicine.

Until June 1, 2026, the term "natural medicine" includes psilocybin and psilocin. A recommendation from the Natural Medicine Advisory Board may add the following remaining substances to the regulatory term after June 1, 2026:

- Dimethyltryptamine, or DMT
- Ibogaine
- Mescaline

Five classes of licenses are provided in the bill which include:

- Natural Medicine Healing Center
- Natural Medicine Cultivation Facility
- Natural Medicine Product Manufacturer
- Natural Medicine Testing Facility
- Any other business license determined necessary by the state licensing authority

The bill does not permit local jurisdictions to adopt regulations deemed unreasonable or in conflict with it, regulations prohibiting the transportation of natural medicine on public roads by licensed personnel, or regulations prohibiting state licensed facilitators from providing natural medicine services.

State regulations impose a distance requirement of 1,000 feet for a Healing Center license from a childcare center, preschool, elementary, middle, junior, or high school; or a residential childcare facility. However, local jurisdictions may vary the distance requirement or eliminate one or more of these types of schools or facilities from this requirement.

JURISDICTION REGULATIONS

Staff has reviewed information concerning natural medicine regulation from neighboring jurisdictions including Arapahoe County, the City of Boulder, the City and County of Denver, the Town of Castle Rock, and the Town of Parker.

Currently, the Town of Parker (Parker) is the only neighboring jurisdiction to adopt natural medicine regulations beyond the regulations imposed by the State. The Parker regulations separate uses by permitting Natural Medicine Healing Centers in the Business District and Commercial Zone Districts. The cultivation, manufacturing, and testing uses are allowed in the Light Industrial Zone District. The ordinance restricts the operating hours of natural medicine businesses to 8 a.m. to 5 p.m. Monday through Friday, requires screening the interior views of these businesses, and the mitigation of odors emitted by natural medicine businesses to a level undetectable beyond property boundaries. Parker regulations also require a 1,000 foot separation distance from residential areas for all natural medicine related facilities.

The Town of Castle Rock (Castle Rock) has proposed similar regulations to Parker but is considering restricting all natural medicine related businesses, including Healing Centers,

to the I-1 Light Industrial and I-2 General Industrial Zone Districts within their municipal code. Castle Rock also extended the 1,000 ft. distance requirement to residential areas. A second reading of the proposed ordinance amending Castle Rock's municipal code is scheduled for August 20, 2024.

The City of Boulder (Boulder) discussed the bill and a potential approach to local zoning regulations on August 1, 2024. Boulder is considering the same distance requirements adopted by Parker but regulating operational hours for Healing Centers has not been considered at this point. Boulder is proposing to regulate Natural Medicine Healing Centers as a medical office use and to allow cultivation, manufacturing, and testing uses in all industrial, Business-Commercial (BCS), and Mixed-Use 4 (MU4) zone districts.

Arapahoe County has only been restrictive insofar as permitting natural medicine business uses in specified zone districts through a business licensure process. At this point, no additional restrictions have been identified. It is not clear when the Arapahoe County Commissioners will consider the proposed regulations.

The City and County of Denver (Denver) has concluded its meetings with the Natural Medicine Work Group (NMWG) convened to advise Denver's Department of Excise and Licenses. The NMWG has discussed decreasing the state distance requirement due to the existing density of uses, is considering a Public Needs and Desires Hearing as required of retail marijuana and beer licenses, and is considering allowing the co-location of natural medicine businesses with existing similar use licenses. No additional information was available regarding what may result from this advisory review process.

NEXT STEPS

Staff is prepared to discuss how the DCZR applies to these uses and possible next steps with the Board.



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MEETING DATE: October 3, 2024

ATTACHMENTS:

Request to Reschedule December Board of Health Meeting



Request to change the date of the December Board of Health Meeting

The county will be holding an event on December 12th that would conflict with your board's normally scheduled meeting. County staff have requested that we change the date of that Board of Health meeting.

Staff recommends that your board approve changing the date of your December meeting to December 5th at 5:00pm.



www.douglas.co.us

MEETING DATE: October 3, 2024

ATTACHMENTS:

Request to Approve Acceptance of Funding Allocations from the State Received after the July Finance Committee Meeting



Request to Approve DCHD Acceptance of funding allocations from the state received after the July Finance Committee Meeting

Staff recommends that your board approve our acceptance of funding for state programs beginning on October 1, 2024. The total funding for this request is \$1,497,548.



STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Women, Infants and Children (WIC)

Contract Number: 2025*0239

Contract Period: 10/01/24 - 09/30/25

Funding amount: \$523,657

SUMMARY: This project serves to benefit the health division of the Colorado

Department of Public Health and Environment (CDPHE) through the implementation of the federally funded Special Supplemental Nutrition Program for Women, Infants and Children (WIC) program established through the United States Department of Agriculture (USDA) Food and Nutrition Services (FNS). The program provides federal grants to states for supplemental foods, health care referrals, and nutrition education for

income-eligible pregnant, breastfeeding, and non-breastfeeding

postpartum women, and to infants and children up to age 5 who are found

to be at nutritional risk

RECOMMENDED

ACTION:

Request that the Board approve acceptance of the FY 2025 Women,

Infants and Children (WIC) program.

STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: OPHP Preventative Block Grant Rapid Funding

Funding Period: August 2024 - September 2024

Funding amount: \$10,000

SUMMARY:

The Healthy Families Partnership of Douglas County (HFP) began as a simple initiative by a County Commissioner who wanted every new birthing family in the County to receive a sleep sack when they discharge from the hospital. The work began as a partnership between Douglas County Health Department and Douglas County Department of Human Services but quickly morphed into a partnership of community-based, subject matter experts who collaborated on a sustainable effort to promote maternal, child and family health, through the promotion of existing and new resource and services. This project has already begun with funding through the Health Department and CDPHE's Maternal Child Health Program (printing of educational materials); however, the ongoing cost of sleep sacks requires additional funding support. Ideally, Douglas County Health Department hopes to see great success in the 6-month pilot that will support the sustainment of this partnership and the accessibility of grant dollars and other general fund dollars from the County moving forward. The Health Department has a large shipment of sleep sacks that will be arriving in September and funds through this mini grant will support some of the costs incurred.

RECOMMENDED Request that the Board approve acceptance of 10,000 funding from **ACTION:**

OPHP Preventative Block Grant



STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Buell Foundation

Grant ID: 7933

Contract Period: 09/01/2024 – 08/31/2025

Funding amount: \$45,000

SUMMARY: These funds are allocated towards compensating contractors for their

contributions to the construction of infrastructure within the Douglas County Early Childhood Council. Their roles encompass planning, organizing, budgeting, accounting, and coordinating events for coaches

within the organization.

RECOMMENDED Request that the Board approve acceptance of the Buell Foundation

ACTION: Grant Award



STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: CO Early Childhood Coaches Professional Development GAE Fund

Contract Period: 7/01/23-6/30/24

Funding amount: \$20,000

SUMMARY: This grant funds ongoing professional development for our early

childhood coaches including required training to renew their

certificates, attendance at conferences, reflective supervision for both the coach and the supervisor and any other training opportunities that arise that will increase their effectiveness in supporting early childhood

programs.

RECOMMENDED

ACTION:

Request that the Board approve acceptance of the FY 2024 CO Early

Childhood Coaches Professional Development GAE Fund



STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: CO Early Childhood Coaches Professional Development GAE Fund

Contract Period: 7/01/24-6/30/25

Funding amount: \$20,000

SUMMARY: This grant funds ongoing professional development for our early

childhood coaches including required training to renew their

certificates, attendance at conferences, reflective supervision for both the coach and the supervisor and any other training opportunities that arise that will increase their effectiveness in supporting early childhood

programs.

RECOMMENDED

ACTION:

Request that the Board approve acceptance of the FY 2025 CO Early

Childhood Coaches Professional Development GAE Fund

STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Early Childhood Council EQIT GAE Funding Award

Contract Number: GAE QAAA 2024 - 0172

Contract Period: 7/01/23-6/30/24

Funding amount at transition: \$63,373

SUMMARY: Douglas County Health Department shall be the fiscal agent for Douglas

County Early Childhood Council. The Expanding Quality for Infant/Toddler Care (EQIT) is divided into two accounts. Expanding Quality in Infant

Toddler Care (EQIT) – in the amount of \$627,000 is subject to

appropriated funds The QI-GAE and EQIT-GAE shall be split among other

Early Childhood Council (ECC) vendors. This Statement of Work

encompasses the priorities in three grant areas: Early Childhood Council Systems Building (SB) Grant, Colorado Shines Quality Improvement (CSQI) Supports Grant and the Expanding Quality for Infant/Toddler Care (EQIT).

EQIT

A. Collaborate with key stakeholders and systems partners, specific to

infants, toddlers, and their caregivers

B. Maintain fidelity Implementation of Evidence-based, Infant Toddler

Specific Training

C. Maintain fidelity implementation of Evidence-based, Infant Toddler

Specific Coaching

RECOMMENDED

ACTION:

Request that the Board approve acceptance of the FY 2024 EQIT GAE

funding award.

STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Early Childhood Council EQIT GAE Funding Award

Contract Number: GAE QAAA 2025 - 153

Contract Period: 7/01/24-6/30/25

Funding amount: \$80,590

SUMMARY: Douglas County Health Department shall be the fiscal agent for Douglas

County Early Childhood Council. The Expanding Quality for Infant/Toddler Care (EQIT) is divided into two accounts. Expanding Quality in Infant

Toddler Care (EQIT) – in the amount of \$627,000 is subject to

appropriated funds The QI-GAE and EQIT-GAE shall be split among other

Early Childhood Council (ECC) vendors. This Statement of Work

encompasses the priorities in three grant areas: Early Childhood Council Systems Building (SB) Grant, Colorado Shines Quality Improvement (CSQI) Supports Grant and the Expanding Quality for Infant/Toddler Care (EQIT).

EQIT

A. Collaborate with key stakeholders and systems partners, specific to

infants, toddlers, and their caregivers

B. Maintain fidelity Implementation of Evidence-based, Infant Toddler

Specific Training

C. Maintain fidelity implementation of Evidence-based, Infant Toddler

Specific Coaching

RECOMMENDED

ACTION:

Request that the Board approve acceptance of the FY 2025 EQIT GAE

funding award.



STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: E&E Emerging and Expanding GAE Funding

Contract Number: QAAA 2023*2675

Contract Period: 06/01/2024 - 12/30/26

Funding amount at transition: \$239,358

SUMMARY: House Bill 20B-1002 Emergency Relief Grant Programs authorized the

> Emerging and Expanding childcare grant program. General Accounting Encumbrance (GAE) Emerging and Expanding Child Care Grant Program (EECCG) pursuant to HB20B-1002 and Senate Bill 22-213 Emergency Relief Grant Programs shall be used to expand access and availability of licensed childcare throughout the state. An award from the grant may be used for costs associated with expanding an open and operating childcare center or family childcare home. Eligible entities

also include family, friends, or neighbors who provide license-exempt childcare, but are actively obtaining a license through the Colorado Department of Early Childhood Licensing and Administration Unit.

Request that the Board approve acceptance of the FY 2024 E&E

RECOMMENDED

Emerging and Expanding Child Care GAE Funding. **ACTION:**

STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Early Childhood Council CSQI GAE Funding

Contract Number: QAAA 2024-0172

Contract Period: 7/01/23-6/30/24

Funding amount at transition: \$266,313

SUMMARY: The Douglas County Health shall be the fiscal agent for Douglas

County Early Childhood Council. Statutorily Early Childhood Councils (ECC) support the effective delivery of early childhood services in the areas of early care and education, family support, mental health, and health. ECCs increase and sustain the quality, accessibility, capacity, and affordability of early childhood services for children and their parents. ECCs provide local level supports for licensed programs required to participate in Colorado Shines by offering technical assistance and quality improvement supports to programs pursuing

higher quality levels.

RECOMMENDED Request that the Board approve acceptance of the FY 2024 CSQI

ACTION: General Accounting Encumbrance (GAE) funding award.

ACTION: General Accounting Encumbrance (GAE) lunding award

STAFF PERSON

RESPONSIBLE: Michael Hill, Director, Public Health

DESCRIPTION: Early Childhood Council CSQI GAE Funding

Contract Number: QAAA 2025*0153

Contract Period: 7/01/24-6/30/25

Funding amount: \$230,164

SUMMARY: The Douglas County Health shall be the fiscal agent for Douglas

County Early Childhood Council. Statutorily Early Childhood Councils (ECC) support the effective delivery of early childhood services in the areas of early care and education, family support, mental health, and health. ECCs increase and sustain the quality, accessibility, capacity, and affordability of early childhood services for children and their parents. ECCs provide local level supports for licensed programs required to participate in Colorado Shines by offering technical assistance and quality improvement supports to programs pursuing

higher quality levels.

RECOMMENDED Request that the Board approve acceptance of the FY 2025 CSQI

ACTION: General Accounting Encumbrance (GAE) funding award.



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MEETING DATE: October 3, 2024

ATTACHMENTS:

DCHD Strategic Plan Update - 2024

2023-2026 STRATEGIC PLAN





Adopted July 14, 2023 Revised August 6, 2024

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STRATEGIC PLANNING PARTICIPANTS

Thank you to the following leaders for your guidance in developing Douglas County Health Department's (DCHD) 2023-2026 Strategic Plan:

- Chris Burnett Douglas County Health Department, Quality Improvement
- Coordinator Laura Ciancone Douglas County Mental Health Initiative
- Maggie Cooper Douglas County Mental Health Initiative, Community Response Team
- Linda Fielding, MD Douglas County Board of Health
- Caitlin Gappa Douglas County Health Department, Environmental Health *
- Michael Hill Douglas County Health Department, Executive Director
- Wendy Holmes Douglas County Communication and Public Affairs
- Kristin Kolstedt Douglas County Human Resources
- Laura Larson Douglas County Health Department, Community Health
- Laura Kesner Douglas County Information Technology
- Dan Makelky Douglas County Human Services
- Steve Montanez Douglas County Health Department, Administration*
- Kim Muramoto, RN Douglas County Board of Health
- Ruby Richards Douglas County Human Services
- Greg Smith, DO Douglas County Health Department, Medical Officer
- Jon Surbeck Douglas County Health Department, EPR & Disease Control
- Katheryn Wille Douglas County Board of Health Alternate
- Richard Miura Douglas County Health Department, Performance Mgmt. Specialist**

^{*} These individuals are no longer present

^{**} These individuals have been added

LETTER FROM DIRECTOR HILL

I am proud to present the first strategic plan for Douglas County Health Department. This plan will guide the work of our department through 2026.

Douglas County Health Department (DCHD) started to work for our community in 2022, providing its first services to the public on June 1, 2022. Throughout that year, we hired a great team and fully built-out the department. We worked closely with our elected and appointed leaders to build the kind of public health department that Douglas County needs and deserves.

This plan will guide the work of our staff as we further develop our organization and get ready to serve the community for the longer term. This plan represents our efforts to refine the department and the systems we initially created and to build a solid foundation for our future.

I'm grateful to the members of our strategic planning committee, our Board of Health, and the Douglas County Board of County Commissioners for their support for our department and for this plan. We cannot do our work alone and we look forward to the continued support of our community and our many partner agencies.

Sincerely,

Michael Hill, MPH, MPA, FACHE Executive Director



DOUGLAS COUNTY HEALTH DEPARTMENT VISION, MISSION, AND VALUES

Vision

Douglas County residents have access to opportunities for achieving their healthiest possible lives.

Mission

We provide education and evidence-based services to improve health in Douglas County.

Values

- 1. Collaboration We partner to achieve shared goals.
- 2. Education We provide accurate, reliable data and information.
- 3.Inclusiveness We value our communities' diverse perspectives and experiences.
- 4. Professionalism We provide the highest quality public health services.
- 5. Responsiveness We strive to meet and adapt to our communities' evolving needs in a timely manner.
- 6.**Transparency** We are open and honest with one another, our partners, and our communities.













2023-2026 STRATEGIC PLAN

Background

Douglas County Health Department's (DCHD) strategic plan is a road map to ensure we meet the needs identified in our 2021-2026 Public Health Improvement Plan. It defines and clarifies what we aim to achieve, how we will accomplish these goals, and how we will know we are successful. Our goals in this strategic plan align with our values, and its outcomes and objectives reinforce accountability to our staff, partners, and most importantly, our community. Our strategic plan helps DCHD staff prioritize their work and understand how to allocate resources. It is a guiding tool that does not replace core activities or grants already underway; instead, the plan informs and complements program work plans and helps to direct department activities.

Creating the Plan

In spring 2023, DCHD leadership and county partners convened four times to develop a strategic plan based on our 2021-2026 Community Health Assessment (CHA) and Public Health Improvement Plan (PHIP). The group started by developing an organizational mission, vision, and values. They identified principles, beliefs, and underlying assumptions to guide DCHD in articulating how we want to conduct ourselves and treat others. The group then discussed how Douglas County and its residents would benefit from our department's work, and how we would like to accomplish this work. These exercises resulted in DCHD's vision, mission, and values. Next, the group refined intended goals and outcomes identified in each of the PHIP's priority areas: Behavioral Health Promotion & Prevention, Disease Management & Prevention, and Injury Prevention. The group identified a fourth priority area focused on improving internal workforce efforts. Participants also completed a strengths, weaknesses, opportunities, and threats (SWOT) analysis to ensure proposed goals and objectives fit within and were responsive to DCHD's internal and external environments (see Table 1). Lastly, the group developed time-bound and measurable objectives and outcomes for each goal.

Table 1: Summary DCHD SWOT Analysis

STRENGTHS

- Dedicated and fully staffed team and workgroups
- · Strong county infrastructure
- Supportive Board of Health and County Commissioners
- Proactive growth mindset DCHD follows the national guidelines of the 10 essential focuses of public health.
- Internal partnerships across the county departments
- Existing technology (data dashboard and reporting)
- Positive and engaging public messaging/information
- Accreditation process
- Strong partnerships and opportunities for collaboration with community, businesses, state, coalitions, other county agencies*
- Strong Parks and Recreation Department*
- Communications *

WEAKNESSES

- Small organization
- Flat organizational structure
- · Competing political and ideological
- priorities
- Staff bandwidth, turnover
- Develop new employees to ensure all training needs are met.*
- Stigma and discrimination facing those with health challenges who live in the 'healthiest community'
- Staff is split into several locations.*

OPPORTUNITIES

- Greater involvement with peer organizations in the metro area
- · Regional Health Connectors
- UniteUs and other referral platforms
- · Community engagement and interest
- Communication campaigns
- Partner data, such as Colorado
- Department of Transportation and Healthy Kids Colorado Survey data
- Community connections such as county fair or senior centers
- Legislation
- Staff compensation
- Community planning efforts, surveys
- Existing public education
- · Grant funding
- Proximity of trauma centers/programs
- Trainings
- Relationships with schools*
- Increase coordination with partners to enforce public health orders.*

THREATS

- Unknown future funding situation
- · Changing public heath laws
- · Decision-makers
- Providers' time, capacity, and training, including with electronic screening
- Public opinion, lack of trust
- Economy, including cost of living, housing, and food
- Population growth, congestion, and increased development
- Changes in driving practices
- Increase in use of intoxicants and with anxiety/depression
- · Lack of public understanding
- Aging population
- Lack of low-cost transportation
- Beliefs around substance misuse and harm reduction strategies
- Missing administrative champions
- Data completeness

^{*} This point was revised on 8/6/2024

Behavioral Health Promotion & Prevention

Goal 1 Establish and sustain an alliance among mental and physical health providers serving Douglas County.

Objectives	Outcomes	
By December 31, 2023, build connections with North Central Healthcare Coalition (NCHC), Regional Health Connectors (RHCs), and physician groups.	Documented meeting dates, attendance, notes, action items.	
By March 30, 2024, establish a working group of key stakeholders, including NCHC and RHCs, to engage health care leadership.		
By March 30, 2025, complete a baseline assessment of primary care practices in Douglas County and develop a plan to increase and monitor the proportion of primary care practices serving Douglas County that routinely screen for behavioral health (mental health and substance use) issues.	Assessment, final report, and logic model that outlines shared strategies to increase the proportion of primary care practices serving Douglas County that routinely screen for behavioral health (mental health and substance use) issues.	
By December 31, 2025, implement shared strategy to increase the proportion of PCPs who routinely screen for behavioral health (mental health and substance use) issues.	Five primary care practices have agreed to implement and/or update their behavioral health screening and referral practices as a standard practice.	

Behavioral Health Promotion & Prevention

Goal 2

Develop, disseminate, and evaluate appropriate, consistent framing and language for mental health promotion and stigma reduction.

Objectives	Outcomes
By February 29, 2024, engage new and non- traditional partners to co-create a communication working group with Douglas County Mental Health Initiative (DCMHI).	Documented meeting dates, attendance, notes, action items.
By September 30, 2025, assess community culture, successful marketing campaigns, data from past marketing efforts, and existing media training practices, and select existing messaging and/or develop the messages based on research.	Messages identified and/or created.
By September 30, 2025, create a communications delivery strategy, including information that addresses public safety questions around mental health and substance use conditions.	Create joint social marketing and communication plan focused on awareness and attitude change.
By December 31, 2025, begin implementing strategies that create a common language across sectors for talking about issues and systems related to mental health and substance use.	80% of communications working group members share co-created and selected messaging each month.
By December 31, 2025, create an evaluation plan with clear metrics to measure messaging reach and engagement.	Impression and engagement report; 30,000 messaging impressions each month.

^{*} This point was revised on 8/6/2024

Disease Management & Prevention

Goal 1 Build DCHD's ability to monitor, detect, and respond to outbreaks or trends in infectious diseases.

Objectives	Outcomes
By December 31, 2023, identify needed skills and training for public health staff.	Create list of required trainings for staff (new and existing).
By December 31, 2024, staff successfully complete skills-appropriate training.	80% of staff complete identified trainings.
By Dec 31, 2025, train and integrate EPR, epidemiologists, and EH for coordinated, effective incident response.*	Improved effective response time for outbreaks and increased communication.*

^{*} This point was revised on 8/6/2024

Disease Management & Prevention

Goal 2

Increase public awareness of and trust for DCHD-supported chronic disease education and prevention resources.

Objectives	Outcomes
By December 31, 2024, appropriate DCHD staff will attend at least three outreach events per year.*	Ch and EPI partner to inform the public about disease prevention and education.*
By December 31, 2024, identify and implement additional strategies that promote DCHD's disease education and prevention content and publicly available data.*	Increase public health data dashboard/website use by 5%. Increase public information releases by 25%.
By June 30, 2025, utilize database (see Internal Processes, Goal 2, Objective 1) to connect with partners who can share, distribute, and contribute to public messaging.	Increase partners who share messaging by 5%.

^{*} This point was revised on 8/6/2024

Injury Prevention

Goal 1 Compile meaningful data and information to analyze the impact of injury in Douglas County.

Objectives	Outcomes
By December 31, 2023, conduct an environmental scan to identify data partners, collate existing data sources, and note missing data to analyze the full impact of injury (motor vehicle injuries, falls in older adults, substance misuse and overdose, and attempted and completed suicides) in Douglas County.	Environmental scan complete, including list of community needs and data collection partners.
By June 30, 2024, combine, analyze, and summarize existing injury data and create an action plan to identify if and how to gather missing data as well as utilize data to inform community activities.	Action plan created.
By December 31, 2025, publish data and publicize the impact to communities.	Data published and readily available for public use on digital education resource hub. DCHD staff use and share data during community meetings and community-facing activities.

^{*} This point was revised on 8/6/2024

Injury Prevention

Goal 2 Collaborate with DCMHI to enhance and sustain injury prevention efforts.

Objectives	Outcomes
By December 31, 2023, appropriate DCHD staff actively participate in DCMHI and support the development of its Suicide Prevention Committee.	Designated staff attend and participate in all DCMHI activities.
By June 30, 2025*, DCHD and DCMHI partners identify funding sources for suicide prevention and substance misuse to achieve shared priorities.	Short-term and long-term funding sources identified.
By December 31, 2025, create collaborative, sustainable prevention approaches that respond to community needs as identified by data.	At least one shared activity to prevent suicide among impacted populations is implemented.

^{*} This point was revised on 8/6/2024

2023-2026 GOALS & OBJECTIVES

Internal Processes

Goal 1

Create a workforce development plan for all DCHD employees to increase retention and identify opportunities for professional growth and career pathways.

Objectives	Outcomes		
By December 31, 2023, utilize existing resources and data available from the Colorado Public Health Workforce Collaborative to create a project plan using best practices and aligned with statewide efforts.	Workforce development plan complete.		
By December 31, 2024, administer and analyze a workforce development assessment and create an action plan to address the findings.	Assessment and action plan complete.		
By December 31, 2025, implement the workforce development action plan.	As measured by existing Douglas County employee surveys, a majority of DCHD employees report feeling valued, properly awarded, and committed to future of organization; report that DCHD is a great place to work.		

2023-2026 GOALS & OBJECTIVES

Internal Processes

Goal 2

Establish and maintain relationships with internal and external partners to advance the goals and objectives of the DCHD strategic plan.

Objectives	Outcomes		
By December 31, 2023, create a tool (database or information system) and process to identify existing or potential partners.	Organizations and partners identified through an agreed-upon tool and process.		
By December 31, 2024, build and implement an action plan for all DCHD staff that fosters internal and external partnerships.	Staff share updates on their assigned organizations in the existing tool according to the action plan.		
By December 31, 2025, establish a system to monitor how partners are being engaged in and connected to all DCHD services.	Organizations report feeling valued and understand DCHD's commitment to partnership.		

Goal 3 Establish and maintain Quality Improvement (QI), Performance Management (PM) and Financial Control Systems.

Objectives	Outcomes		
By December 31, 2023, create plans and systems to monitor QI, PM, and financial performance.	DCHD staff report that there is a continuous QI culture across all divisions. DCHD regularly monitors		
By December 31, 2024, provide quarterly reports to the Board of Health regarding QI, PM, and financial performance.	reports on its performance and financial systems as it enacts the strategic plan.		

NEXT STEPS

We will use this strategic plan to create an annual agency work plan that will detail the specific activities needed to accomplish the goals, objectives, and outcomes. Work plans may include additional information about populations served, community partners, evaluation processes, funding, communications needs, and training and quality improvement activities. Whenever possible, we will align our agency work plan with existing program work plans.

We will also develop a transparent process for monitoring progress internally and with our partners and county residents. We will revisit our strategic plan annually and make updates as needed to reflect our accomplishments and to respond to our communities' needs.



REVISIONS

On August 6, 2024 original members who helped create the strategic plan met for proposed changes to the current strategic plan.

SWOT Analysis: Page 6

Strengths:

Moved from Opportunity the following bullet points to Strengths:

Strong partnerships and opportunities for collaboration with community, businesses, state, coalitions, other county agencies (Within the past year, since the Strategic Plan was developed, Community Health has established and strengthened approximately 75 partnerships within the community. EPI/EPR have strengthened partnerships with all emergency response teams within the county, and EPI is reaching out to various community partners, including local hospitals and veterinary clinics. Environmental Health has inspected all licensed establishments within the county.)

Strong Parks and Recreation Department (Douglas County has a strong open space and parks system, it gives the residents within the county opportunity to get outdoors and enjoy nature. Douglas County has a strong youth sports focus which leads to healthier children)

Current:

• Foundation of public health work, especially in behavioral health. We eliminated, "especially in behavioral health".

Revised:

• DCHD follows the national guidelines of the 10 essential focuses of public health.

(DCHD follows the national guidelines of the 10 essentials focuses of public health not just behavioral health.)

Moved "Communication Needs" from Weakness to a Strength. Remove the word needs. (We have a strong relationship with our communications team, which is highly experienced, skilled, and professional in their work. The Community Health team also has participated in 65+ event YTD which entails communicating directly with both the public and our partners.)

Weaknesses:

Removed first bullet point since we are no longer a new Health Department.

New health department building new policies and procedures

Change bullet point about new workforce to cover new employees based on turnover.

Current:

New workforce with training needs (current)

Revised:

• Develop new employees to ensure all training needs are met.

Removed bullet point

communication needs

(DCHD gets outstanding support from our communication team therefore we feel it is not a weakness and should be moved to strength)

Moved Bullet point about relationships with schools to Opportunity section (Relationships with the schools have developed into a strong relationship and currently are not considered a Weakness and can be moved to Opportunity. We want to continue to focus on building that relationship in the future)

Removed bullet point

• Concerns about data accuracy with health department transition

(We are no longer in transition from Tri-County. We need to focus on the accuracy of existing new data and reacting to that.)

Removed bullet

• Accuracy of patient self-reported behavioral health electronic screenings.

(Due to not conducting clinical screening, we are not receiving any self-reported behavioral health electronic screenings.)

Added weakness:

• Staff is split into several locations.

Opportunities:

Removed bullet point

Telemedicine.

(We do not use telemedicine, as we offer no clinical services. This is not a focus of the Health Department and will not be in the future.)

Added bullet point:

• Increase coordination with partners to enforce public health orders.

Threats:

Removed bullet

• Reactive vs. proactive mindset

(DCHD has conducted several EPR/EPI training sessions to ensure proactive responses in any situation. Community Health will soon be conducting a joint information campaign with Douglas County Sherriff's Office and surrounding law enforcement agencies to have a county wide focus on gun safety and injury prevention.)

Behavioral Health Promotion & Prevention: Page 8 Goal 2

The partnership with the Mental Health Initiative is progressing well. However, due to the complexity of the tasks, the goal dates need to be adjusted. While substantial progress has been made, it is necessary to extend the deadlines.

Current Objective 2:

By September 30, 2024, assess community culture, successful marketing campaigns, data from past marketing efforts, and existing media training practices, and select existing messaging and/or develop the messages based on research.

Revised Objective 2:

By September 30, 2025, assess community culture, successful marketing campaigns, data from past marketing efforts, and existing media training practices, and select existing messaging and/or develop the messages based on research.

Current Objective 3:

By September 30, 2024, create a communications delivery strategy, including information that addresses public safety questions around mental health and substance use conditions.

Revised Objective 3:

By September 30, 2025, create a communications delivery strategy, including information that addresses public safety questions around mental health and substance use conditions.

Current Objective 4:

By January 31, 2025, begin implementing strategies that create a common language across sectors for talking about issues and systems related to mental health and substance use.

Revised Objective 4:

By December 31, 2025, begin implementing strategies that create a common language across sectors for talking about issues and systems related to mental health and substance use.

Current Objective 5:

By January 31, 2025, create an evaluation plan with clear metrics to measure messaging reach and engagement.

Revised Objective 5:

By December 31, 2025, create an evaluation plan with clear metrics to measure messaging reach and engagement.

Disease Management & Prevention: Page 9

Goal 1

Current Objective 3:

By Dec 31, 2025, train and integrate EPR, epidemiologists, and EH for coordinated, effective incident response. Outcomes: Improved effective response time for outbreaks and increased communication. (Include Environmental Health due to their integral role in responding to several incidents that have occurred within the year. Therefore, we want to include them in appropriate EPI/EPR trainings.)

Revised Objective 3:

By Dec 31, 2025, train and integrate EPR, epidemiologists, and EH for coordinated, effective incident response.

Disease Management & Prevention: Page 10

Goal 2

Current Objective 1

By December 31, 2024, appropriate DCHD staff will attend at least three outreach events per quarter.

We would like to update this to include the work that Community Health is currently doing. Previously this was included to refer to a grant which DCHD no longer has which was for EPI. It was a requirement for that grant. DCHD feels that the EPI team is better utilized in the office working directly to identify and track infections within the county. As of August 1st, the Community Health team has YTD has attended 65+ events within the community.

Revised Objective 1:

By December 31, 2024, appropriate DCHD staff will attend at least three outreach events per year. Outcome: Ch and EPI partner to inform the public about disease prevention and education.

Current Objective 2. By December 31, 2024, identify and implement additional strategies that promote DCHD's chronic disease education and prevention content and publicly available data. Removed the word "chronic" from the objective, we investigate all diseases. Revised Objective 2: By December 31, 2024, identify and implement additional strategies that promote DCHD's disease education and prevention content and publicly available data.

Injury Prevention: Page 11

Goal 1

Through the fatality review, in conjunction with other county partners and using data from the coroner's report, a new focus was identified. This has led to a strategic partnership with the Douglas County Sheriff's Office and local community law enforcement agencies to implement a countywide gun safety program. Since a gun safety campaign has not been conducted in the county in the last five years, there is a clear need for this initiative. Given the scale of the project, additional time will be required for planning, implementation, and completion. As a result, we are adjusting the dates for several deliverables to accommodate this new focus.

Current Objective 3:

By December 31, 2024, publish data and publicize the impact to communities.

Revised Objective 3:

By December 31, 2025, publish data and publicize the impact to communities.

Injury Prevention: Page 12

Goal 2

Current Objective 2:

By June 30, 2024, DCHD and DCMHI partners identify funding sources for suicide prevention and substance misuse to achieve shared priorities.

Revised Objective 2:

By June 30, 2025, DCHD and DCMHI partners identify funding sources for suicide prevention and substance misuse to achieve shared priorities.

Current Objective 3:

By December 31, 2024, create collaborative, sustainable prevention approaches that respond to community needs as identified by data.

Revised Objective 3:

By December 31, 2025, create collaborative, sustainable prevention approaches that respond to community needs as identified by data.



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MEETING DATE: October 3, 2024

ATTACHMENTS:

Request to Create a Lead Public Health Clerk Title and Add a Registered Dietician

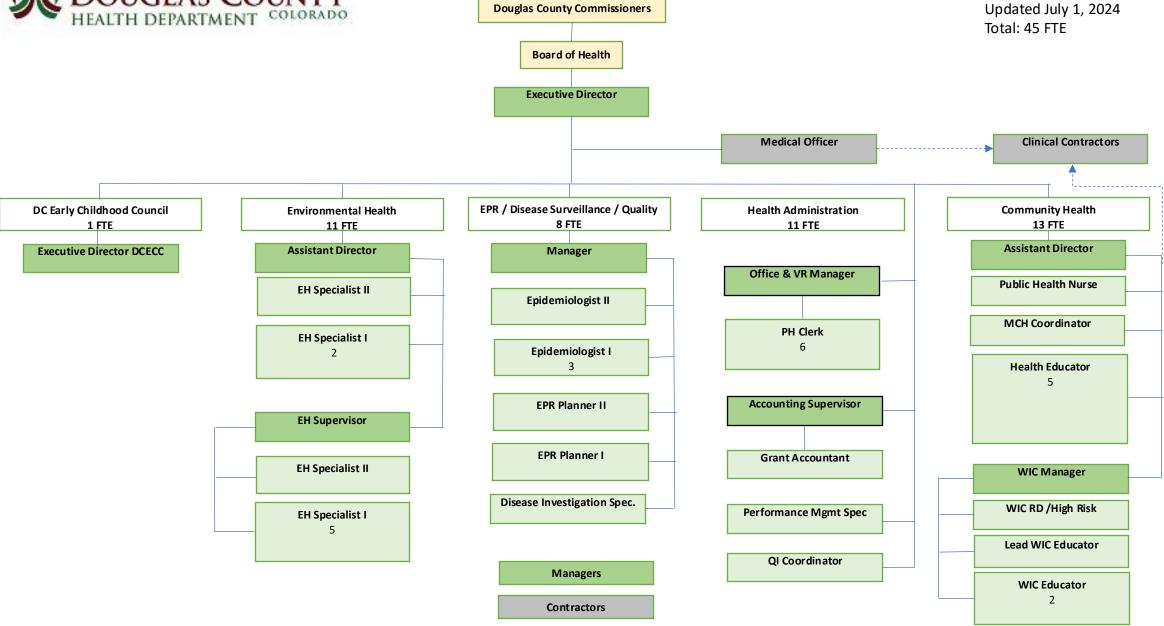


Request to Create a Lead Public Health Clerk Title and to Add a Registered Dietician Position

Staff requests that your board approve creating one new title to our organization and adding a second Registered Dietician to our WIC program.

As our Vital Records program has grown way beyond our original expectations, we feel that it is time to create a lead position to maintain training and procedures in the Vital Records office as well as assisting with overall clerical duties of the department. This request would change the title of one Public Health Clerk position to Lead Public Health Clerk with no additional FTE being requested at this time.

At your board's June meeting, you approved DCHD entering into a partnership with Northeast Colorado Health Department for WIC services (pending state approval of the funding). That funding was approved, and acceptance of the funding appeared in an earlier item this evening. We are requesting to add one additional Registered Dietician to perform this work, this will take our total FTE in the department from 45 to 46.



11 FTE

Assistant Director

EH Specialist II

EH Specialist I

EH Supervisor

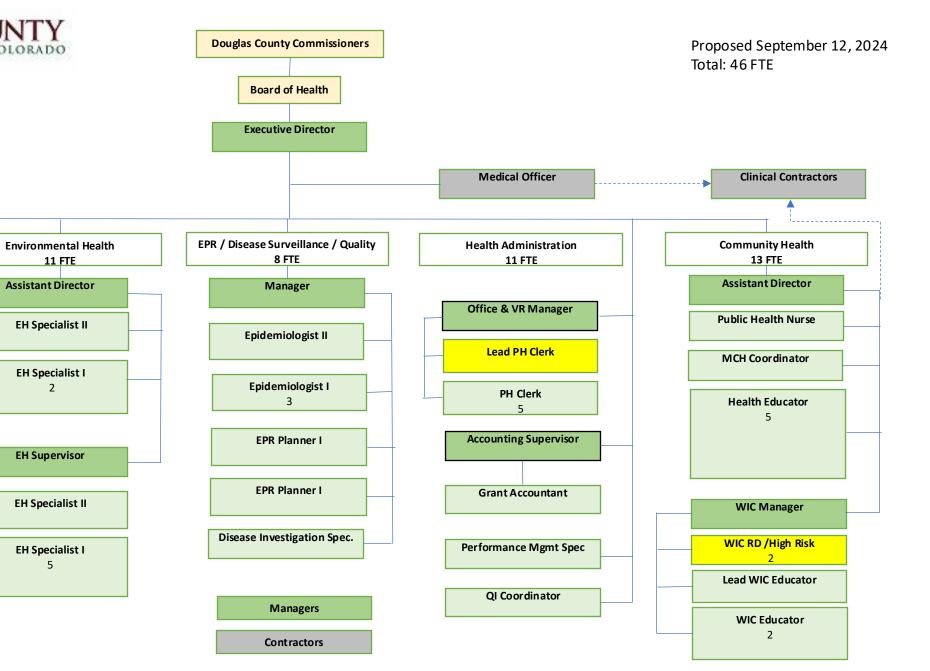
EH Specialist II

EH Specialist I 5

DC Early Childhood Council

1 FTE

Executive Director DCECC





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MEETING DATE: October 3, 2024

ATTACHMENTS:

Request to Approve DCHD Draft Budget for 2025



Request to Approve DCHD Draft Budget for 2025

Staff recommends that your board approve the attached draft budget for DCHD for 2025. This budget includes funding allocations from the state that were approved by the Board of Health earlier this year, along with the revenues your committee was asked to accept in a previous agenda item.

Since county salaries for 2025, and benefit costs are not certain at this time, total personnel costs entered are estimates that we received from the county budget office. The bottom-line budget should remain the same unless the Board of County Commissioners approve salary increases that are substantially different from what the budget office estimated.

The funding ask from the county remains about the same as last year. Of note is the fact that any continued salary increases by the county may result in our having to ask for more county funds in future budgets.

The budget spreadsheet is a bit large, and the font got small when converted to a PDF, you may need to zoom in on various areas of the sheet to see the details.

	HEALTH DEPARTMENT ADMIN 46100	EMERGENCY PREP/DISEASE CONTROL 46200	ENVIRONMENTAL HEALTH SERVICES 46300	COMMUNITY HEALTH SERVICES 46400	DC EARLY CHILDHOOD 46500	FUND 217
300000 REVENUES	(1,258,967.83)		(524,420.64)	(113,227.74)	=	(2,123,247.00)
331900 Other Federal Grants	(102,153.00)		-	(272,462.00)	(374,556.00)	(1,328,479.18)
331960 ARPA Grants	(,,	(=:=,====,		(=: =, :==:=:,	(43,445.00)	(43,445.00)
334600 Other State Grants	_	_	(84,000.00)	(1,228,584.00)	(309.190.00)	(1,621,774.00)
336900 State Reimbursement/CDPHE	(888,049.00)	-	-	-	-	(888,049.00)
345100 Vital Record Fees	(349,000.00)	≘	=	=	-	(349,000.00)
345200 Restaurant Inspection Fees	-	-	(373,536.00)	-	=	(373,536.00)
345210 Childcare Inspection Fees	-	-	(50,600.00)	-	-	(50,600.00)
345220 Wastewater Fees	-	-	(179,335.00)	-	-	(179,335.00)
345230 Body Art Inspection Fees	-	-	(6,025.00)	=	-	(6,025.00)
345240 Land Use Fees	=	=	(800.00)	=	-	(800.00)
345260 Solid and Hazardous Waste Fees	-	-	(4,700.00)	-	=	(4,700.00)
345270 Recreational Water Fees	-	-	-	-		(45.000.00)
382900 Other Reimbursements 383100 Grants - Private	-	-	-	-	(45,000.00)	(45,000.00) (45,000.00)
330000 INTERGOVERNMENTAL	(2.500.450.03)	(005.020.07)	(4.222.446.64)	(4.644.272.74)	(45,000.00)	
395100 Op Transfer-General Fund	(2,598,169.83)	(805,938.97)	(1,223,416.64)	(1,614,273.74)	(817,191.00)	(7,058,990.18)
300000 REVENUES TOTAL	(2,598,169.83)	(805,938.97)	(1,223,416.64)	(1,614,273.74)	(817,191.00)	(7,058,990.18)
411100 Salaries & Wages-Regular (FT)	2,024,883.83		1,126,446.64	1,178,693.74	122,298.00	5,038,972.18
411110 Payroll Accrual	2,024,003.03	360,043.37	1,120,440.04	1,170,055.74	-	3,030,372,120
411230 Stipend	-	-	- -	-	=	-
411600 Merit Pool	_	-	-	-	-	=
412100 Overtime/Straight - Reg.	_	-	=	-	-	=
420100 Vacation Payout	-	_	-	-	-	-
430150 Medical Benefit	-	-	-	-	-	-
430160 Dental Benefit	-	-	-	-	-	-
430200 Social Security	-	-	-	-	-	-
430300 Retirement	-	=	=	=	=	=
430400 Fringe Benefits Pool	-	=	=	=	=	=
432100 Contract Work/Temporary Agency					178,181.90	178,181.90
410000 PERSONNEL SERVICES	2,024,883.83	586,649.97	1,126,446.64	1,178,693.74	300,479.90	5,217,154.08
433200 Office Supplies	25,000.00	3,000.00	1,200.00	2,302.00	4,880.00	36,382.00
433210 Computer Supplies	-	-	-	-	=	=
433220 Food & Beverage Supplies	500.00		-	-	=	500.00
433400 Operating Supplies	=	3,060.00	=	=	=	3,060.00
433420 Employee Recognition Supplies	5,000.00	=	=	=	-	5,000.00
433430 Community Program Supplies	-	-	-	7,775.00	-	7,775.00
433450 First Aid Supplies		-	-	-	-	
433500 Clothing & Uniforms 433510 PPE Personal Protection Equip	2,300.00		-	-	-	2,300.00 2,500.00
433000 SUPPLIES	32,800.00	2,500.00 8,560.00	1,200.00	10,077.00	4,880.00	57,517.00
438400 C.AFurniture/Office Systems	32,800.00	8,300.00	1,200.00	10,077.00	4,880.00	37,317.00
438000 CONTROLLABLE ASSETS (C.A.)						
439200 Postage & Delivery Svc.	9,000.00		_		=	9,000.00
440100 Printing/Copying/Reports	3,750.00		_	6,750.00	-	10,500.00
440300 Copier Charges	-	=	=	-	-	
442350 Employee Phone Allowance	1,200.00	_	-	_	-	1,200.00
442400 Telephone/Communications	,	_	-	3,462.00	-	3,462.00
442420 Cell Phone Service	3,350.00	1,560.00	10,000.00	2,604.00	-	17,514.00
443100 Medical, Dental & Vet Services	-,	5,000.00	800.00	820.00	=	6,620.00
443600 Other Professional Services	89,350.00		7,500.00	266,579.00	276,874.00	730,303.00
445200 Metro Area Meeting Expense	-	1,800.00	-	3,700.00	-	5,500.00
445300 Travel Expense	41,940.00	26,143.00	10,000.00	14,704.50	=	92,787.50
445500 Catered Meal Service	3,600.00		=	=	=	3,600.00
446100 Conference, Seminar, Train Fees	12,000.00	16,080.00	12,000.00	12,993.00	250.00	53,323.00
446300 Prof. Membership & Licenses	30,000.00	2,000.00	1,500.00	5,000.00	-	38,500.00
446400 Books & Subscription	1,500.00	-	100.00	100.00	-	1,700.00
474300 Cars, Vans, Pickup	-	-	-	-	-	=
447500 Other Purchased Services	-	7,668.00	-	750.00	184,596.00	193,014.00
447570 Community Outreach	25,000.00	-	-	35,400.00	-	60,400.00
447900 Recruitment Costs	-	<u>-</u>	3,000.00	<u> </u>	-	3,000.00
439000 PURCHASED SERVICES	220,690.00	150,251.00	44,900.00	352,862.50	461,720.00	1,230,423.50
449055 Fuel Charges	-	3,333.00	6,000.00	=	=	9,333.00
449056 Fleet Maintenance	-	12,778.00	23,000.00	=	-	35,778.00
449057 Fleet Outside Repairs	-	556.00	1,000.00	=	-	1,556.00
449058 Fleet Internal Labor	-	6,667.00	12,000.00	_		18,667.00
444000 REPAIR & MAINTENANCE SERVICES	40.700.00	23,334.00	42,000.00	-	-	65,334.00
449400 ISF-Liability & Prop Insurance 469210 Cost Allocation Plan	10,700.00	37.144.00	- 8.870.00	72.640.50	50,111.10	10,700.00 177,861.60
449000 FIXED CHARGES	19,796.00	37,144.00 37,144.00	8,870.00 8,870.00	72,640.50	50,111.10	188,561.60
483100 Miscellaneous Contingency	300,000.00		8,870.00	72,040.30	30,111.10	300,000.00
403100 Miscellaneous Contingency	300,000.00	-	=	-	- -	300,000.00
400000 EXPENDITURES	2,598,169.83	805,938.97	1,223,416.64	1,614,273.74	817,191.00	7,058,990.18
		222,230.37	_,,			.,,
46100 DC HEALTH DEPT ADMIN	(0.00)	0.00		0.00	-	0.00
	()					

Health Department -V1- SFY2025awards 9/27/2024

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