

## El Paso County Public Health Director’s Report

**To:** The El Paso County Board of Health

**From:** Susan Wheelan, M.B.A. Public Health Director

**Date:** August 2024 (reflects activity in July 2024)

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### In the News

- The launch of the new [Pikes Peak Rising 360 digital behavioral health resource](#), in tandem with the City’s Pikes Peak Rising Mental Health Initiative, garnered extensive media coverage following a press conference t in mid July. The launch garnered coverage across all four local media stations—[KOAA](#), [KKTV](#), [KRDO](#), and [Fox 21](#)—in addition to an [in-depth story in the Colorado Springs Gazette](#).
- EPCPH Executive Director Susan Wheelan was featured in the [July 31 edition of the Beyond the Dais podcast](#), where she discussed the key role of Public Health in the community, along with promoting the importance of behavioral health resources such as Pikes Peak 360.

### Agency Operations

In 2008, the Colorado Public Health Act required the State Board of Health to establish, by rule, the core public health services that each county and district public health agency must provide or assure as well as establish minimum quality standards for those public health services. A revised ruling ([6 CCR 1014-7](#)), effective January 1, 2020, now requires

state and local health departments in Colorado to ensure provision of seven Foundational Capabilities and five Foundational Services.



Image courtesy of the [Colorado Association of Local Public Health Officials](#).

El Paso County Public Health (EPCPH) fulfills its statutory requirement of providing these core public health services through the work of its divisions and programs. Activities supporting these services for the timeframe of this report follow.

- **Staffing Update**

The agency's turnover rate has fluctuated from 18.2 percent in 2019 to 31.6 percent in 2022. EPCPH turnover decreased to 23.4 percent in 2023 and is at 12.9 percent year-to-date in 2024. Turnover is measured by the number of separations per month divided by the average number of full-time employees (as verified by the Society for Human Resource Management). It does not account for internal employee movements such as promotions, transfers, retirements, county transfers, etc. The national turnover rate in 2022 in the Public Health sector was 46 percent according to the Public Health Workforce Interest and Needs Survey (PH WINS). National turnover rates are provided every two years and data for 2022 will be captured in the 2024 PH WINS.

### **Foundational Public Health Capabilities**

- **Assessment and Planning** On July 10, EPCPH launched an innovative new digital behavioral health platform with the goal of increasing access to early intervention behavioral health resources. The platform—[known as Pikes Peak Rising 360](#)—is a

pilot project which supports regional efforts to enhance the mental health and well-being of all El Paso County residents.

- Pikes Peak Rising 360 is an online, web-based platform which provides thousands of expert-vetted resources and scientifically validated assessments, all of which are adaptable to different learning styles. The platform is easily accessible, and with hundreds of topics and approaches all in one place and serves as a convenient one-stop shop for self-help resources. It is confidential, anonymous, and available 24/7.
- Pikes Peak Rising 360 is one of several strategies with a direct tie to the 2023 Community Health Assessment (CHA) which utilizes systematic, comprehensive data to describe the overall health of El Paso County communities. The 2023 CHA, released in May of this year, identified four key leading health areas:
  - Barriers to accessing health care
  - Suicide
  - Drug overdose
  - Housing stability
- With behavioral health as the overarching framework of the CHA, Pikes Peak Rising 360 represents one key strategy EPCPH is implementing to effectively combine actionable local data and community partnerships to quickly mobilize and expand access to vital mental health supports.
- Since launching on July 10, Pikes Peak Rising 360 has had 3,800 sessions (the number of times a user interacts with the website), who spent over five minutes on average on the site, with a total of 915 people who created accounts and 382 assessments taken.
- Since onboarding a new data analytics manager in late June, the Public Health Data & Analytics (PHDA) team has been spearheading numerous internal process improvements, such as the creation of an internal request form to streamline project requests and provide enhanced levels of support to programs throughout the agency. This included meeting with programs and divisions to assess data needs and identify ways the data team can support this work, along with establishing data liaisons to provide consistent points of contact.
- On July 29, PHDA attended a presentation from the State Demography Office, which featured economic and demographic conditions in El Paso County and its municipalities, how those conditions relate to state and national trends, and an explanation of the population forecast assumptions and expected outcomes.
- On July 23, the data analytics manager attended a training with the Adams County Health Department which gave an overview of public health data sources. Additionally, the data analytics manager met with population health epidemiologists from Denver, Larimer, and Arapahoe counties to establish relationships and explore potential future opportunities for peer learning groups.

## Communications

- EPCPH was featured in television and print news coverage of several emerging topics in July, including the launch of Pikes Peak Rising 360, back-to-school vaccines, and tips to support youth as they begin a new school year.
- To support the launch of Pikes Peak Rising 360:
  - The Office of Communication (OoC) worked closely with partners to plan a large-scale press conference which included more than 50 local community and behavioral health partners who attended the event to show their support and excitement for this new, one-of-a-kind resource. Speakers included:
    - Colorado Springs Mayor Yemi Mobolade
    - Colorado Springs' First Lady Abbey Mobolade
    - EPCPH Executive Director Susan Wheelan
    - El Paso County Commissioner and Board of Health Member Cami Bremer
    - University of Colorado Colorado Springs Helen and Arthur E. Johnson Beth-EL College of Nursing and Health and Sciences Dean and Professor Kevin Laudner
    - UCCS Lyda Hill Institute for Resilience Executive Director Dr. Chip Benight.
  - On July 10, the OoC disseminated a [news release](#) highlighting what the platform is, why it's important, and how it supports residents with mental health and self-help resources.
  - Public Health Planner Maggie Youkhana joined Colorado Springs First Lady Abbey Mobolade on the [Behind the Springs podcast](#) to promote the launch of Pikes Peak Rising 360 and how residents can access it.

## **Policy Development and Support**

The Public Health Infrastructure (PHIG) grant from the U.S. Centers for Disease Control and Prevention (CDC) approved a third year of Foundational Capabilities funding designed to address emergent needs as it relates to Public Health systems, structures, and workforce. This funding is in addition to the five-year infrastructure grant, also awarded from the CDC.

## **Emergency Preparedness and Response**

A member of the Emergency Preparedness and Response (EPR) team served as an evaluator for Children's Hospital's Mass Casualty Incident (MCI) Functional Exercise. The exercise aimed to test their MCI plan, incident command activation, incident action plan

creation, patient reunification, movement, and tracking procedures. This role allowed EPCPH's EPR team to enhance the partnership with Children's Hospital and other key partners in the South Central Region (SCR).

A member of the EPR team reapplied and was selected to serve as a National Reviewer for the National Association of County and City Health Officials (NACCHO) Project Public Health Ready process. This important role, selected from applicants nationwide, will greatly benefit the EPR team by offering valuable insights into the application submission process and keeping the team informed about the latest requirements and standards.

Team members participated in the South Central Region (SCR) Hospital Huddle, organized by the South Central Healthcare Coalition (SCHCC). This meeting, which includes hospital emergency managers, Regional Emergency Medical and Trauma Advisory Council (RETAC), and Public Health representatives, serves to provide organizational updates, discuss planning processes, and facilitate information sharing across the SCR. This month's agenda covered recent staff changes, EPCPH hospital tours, the SCHCC Statement of Work (SOW), active shooter and bomb threat facility go-bags, and the transition from WebEOC to Veoci, an emergency management software system.

The EPR team participated in the Pikes Peak Region Multi-Agency Coordination Group (MAC) meeting, which is instrumental in enhancing collaboration, coordination, communication, and resource sharing among various partners in the region. In the July meeting, key topics included updates to the Integrated Preparedness Plan (IPP), PPROEM planning efforts, a review of Veo, and other relevant agency updates.

### **Social Determinants of Health**

Nurse-Family Partnership (NFP) helped to address some of the social determinants of health for their clients enrolled in their program by providing 55 referrals on behalf of 37 families. These referrals were to housing assistance, mental health treatment, Medicaid, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), child care, dental services, lactation support, and Women, Infants and Children (WIC).

### **Foundational Public Health Services**

## **Communicable Disease Prevention, Investigation and Control (**

Communicable Disease epidemiologists were invited to share El Paso County infectious disease trends and concerns at a meeting of the CommonSpirit infection prevention team.

EPCPH's Immunization (IZ) program conducted several outreach vaccination clinics in July at the Harrison D2 back-to-school event and the El Paso County Criminal Justice Center, meeting community members where they are at in order to help prevent disease while helping address health equity.

## **Maternal, Child, Adolescent and Family Health**

Maternal and Child Health (MCH) provided professional development opportunities to EPCPH staff through the "MCH Lunch and Learn Series." The series consisted of three trainings related to trauma, resilience and caregiver well-being. The goal of the training series was to provide information and education that will support those who work with children, youth, and families. Approximately 24 staff attended the series.

## **Chronic Disease, Injury Prevention and Behavioral Health Promotion**

Tobacco Education and Prevention Partnership (TEPP) was a sponsor of the El Paso County Fair and promoted El Paso County Public Health as well as TobaccoFreeCO's Clear the Air campaign. Messages from the Clear the Air campaign were used at the fair to raise awareness about the dangers of secondhand smoke exposure. This sponsorship was a great opportunity for TEPP to reach rural El Paso County residents and promote tobacco and secondhand smoke prevention messaging. Sponsorship advertisements included electronic monitors, arena signage, social media spotlights, and logos on all fair materials. Additionally, TEPP partnered with Care Coordination, Injury and Violence Prevention, and NFP to further promote EPCPH programs.

**Access to and Linkage with Healthcare** MCH and Care Coordination staff attended the Tri-Lakes Cares school supply event on July 26. This was a back-to-school event for families who reside in northern El Paso County. Staff provided information about services and programs offered at EPCPH and connected with 31 individuals and provided 25 hygiene kits.

MCH and Injury and Violence Prevention Planner attended the Pikes Peak United Way Community Block Party on July 20. This event was a neighborhood gathering at the Family Success Center. While families enjoyed connection and fun, EPCPH team members provided valuable information about resource navigation services and injury prevention services. Staff connected with 75 individuals and provided 50 hygiene kits.

The Women, Infants, and Children (WIC) program attended Calhan Summer Fest. WIC staff promoted the WIC mobile clinic in Calhan and spoke with families about accessibility to the program in the rural portion of the county.

Care Coordination YTD 2024 (January 1, 2024–July 30, 2024)	
Referrals	758
Children and Youth with Special Health Care Needs specific referrals	111
Outreach (emails, tours, meetings, conferences, presentations and trainings)	47
Events	11
Narcan kits distributed	35
Care packages distributed	42

and organized through the City of Colorado Springs with support from many community partners and a steering committee. This year Colorado Springs had a record level of general participation, corporate champions, and breakfast station locations. Our EPCPH breakfast station had approximately 96 cyclist participate in our station.

## Appendix A: Environmental Health Activity

Environment Health Activity	2024 As of 7/31/2024	2023 Total	2022 Total
Air Quality Construction Permits	68	136	163
Air Quality Open Burn Permits	20	51	19
Air Quality Complaints	19	23	38
Animal Bites Reported	751	1091	877
Body Art Routine Inspections	77	112	86
Body Art Follow-up Inspections	1	7	8
Body Art Complaints	12	31	22
Child Care Regular Inspections	131	202	138
Child Care Follow-up Inspections	8	6	15
Child Care Complaints	12	20	8
Child Care High Risk Field Consults	20	12	18
Land-Use Planning Review	136	204	232
Onsite Wastewater Treatment System (OWTS) Pumper Truck Inspections	59	77	85
OWTS Final Inspections	265	551	576
OWTS Partial Inspections	79	227	235
OWTS Application Design Reviews	212	490	558
OWTS Design Revision Requests	38	120	221
OWTS Design Revision (add) Requests	6	63	0
OWTS New Permit Applications	108	232	351
OWTS Repair Permit Applications	138	266	276
OWTS Modification Permit Applications	7	19	15
OWTS Acceptance Doc for Title Transfer	443	731	866
OWTS Soil and Site Evaluations	163	376	425
OWTS Complaints	19	30	27
OWTS O&M Systems	64	116	65
Recreational Water Safety Inspections	223	313	295
Recreational Water Follow-up Inspections	14	22	17
Recreational Water Complaints	8	14	9
Retail Food Establishment (RFE) Regular Inspections	1555	2481	1908
RFE Re-Inspections	147	315	171
RFE Complaint Investigations	274	517	391
RFE Plan Reviews	180	210	193
School Safety Regular Inspections	16	24	13
School Safety Complaints	7	15	4



School Safety Self-Certification Audits	45	45	15
School Safety Self-Certifications Returned	1	327	332
Waste Tire Facilities Regular Inspections	68	140	115
Waste Tire Follow-up Inspections	0	0	1

## Appendix B: Water Systems Testing

2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>Totals</b>	572	531	694	663	836	789	846	773	735	668	728	554

2024	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Public Water Systems	348	340	353	321	466	368	388					
Private Wells	299	267	289	378	364	334	398					
<b>Totals</b>	647	607	642	699	830	702	786					

## Appendix C: Immunizations Program Vaccines Administered

2023 Month	Non-COVID Vaccines	COVID Vaccine Administered in Clinic/Distributed (Long-Term Care Facilities and Operation House Call)	COVID Vaccine Administered by EPCPH Mobile Team
January	502	115	14
February	592	89	0*
March	878	150	8
April	956	119	0*
May	930	140	0*
June	1119	163	0*
July	856	65	0*
August	948	73	0*
September	766	24	0*
October	878	205	47
November	731	192	13
December	607	131	18

As we return to routine operations, COVID vaccinations will no longer be separate categories.

2024 Month	Total Vaccines Administered	Vaccines Administered by the Mobile Team*
January	720	33
February	852	123
March	670	28
April	674	35

May	693	20
June	726	10
July	738	29
August		
September		
October		
November		
December		

\*Number of vaccines administered by mobile team included in total vaccines administered column

## Appendix D: Nurse-Family Partnership Client Visits

Month	2023 # of Client Visits	2024 # of Client Visits
January	237	241
February	213	252
March	254	241
April	220	272
May	222	221
June	245	229
July	186	267
August	215	
September	213	
October	231	
November	230	
December	188	

## Appendix E: Disease Prevention and Control

Category	Disease	2024 As of 7/31/2024	2023	2022
<b>Food/Waterborne Diseases</b>				
	Campylobacter	107	189	118
	Cryptosporidium	12	42	25
	Cyclosporiasis	14	8	10
	Giardia	37	68	47
	Hepatitis A	1	2	3
	Legionellosis	2	19	11
	Salmonella	67	89	54
	Shigella	33	46	57
	Shiga Toxin-producing E. coli (STEC)	31	59	42
	Vibriosis	8	9	7
<b>Food/Waterborne Diseases Totals</b>		<b>312</b>	<b>531</b>	<b>373</b>
<b>Healthcare Associated Infections</b>				
	Carbapenem-Resistant Acinetobacter baumannii (CRAB)	1	0	1
	Carbapenem Non-susceptible Enterobacteriaceae (CRE)	38	58	47
	Carbapenem-Resistant Pseudomonas Aeruginosa (CRPA)	30	45	43
<b>Healthcare Associated Infections Totals</b>		<b>69</b>	<b>103</b>	<b>91</b>
<b>Vaccine Preventable Diseases</b>				
	Haemophilus influenzae (H. flu)	8	18	14

	Measles	0	0	0
	Meningococcal Disease	0	1	0
	Mumps	1	2	3
	Pertussis	42	24	29
	Rubella	0	0	0
	Varicella	14	33	21
<b>Vaccine Preventable Diseases Totals</b>		<b>65</b>	<b>78</b>	<b>67</b>
<b>Respiratory Diseases</b>				
	Hospitalized COVID-19	<b>452</b>	<b>1,091</b>	<b>2,847</b>
	Hospitalized Influenza*	<b>377</b>	<b>266</b>	<b>529</b>
	Hospitalized RSV	<b>325</b>	<b>161</b>	<b>24</b>
<b>Respiratory Disease Total</b>		<b>1,154</b>	<b>1,518</b>	<b>3,400</b>

\*Flu Seasons:

- October 3, 2021- May 21, 2022; 188
- October 2, 2022- May 20, 2023; 399
- October 1, 2023-May 18, 2024; 547

Table 2 – Foodborne illness complaints received at El Paso County Public Health in March

2023 Month	Complaint Received Regarding Foodborne Illness	EH Foodborne Illness Investigation
January	5	1
February	9	2
March	8	1
April	5	4
May	14	3
June	10	2
July	3	1
August	9	1
September	16	0
October	12	2
November	7	0
December	4	2

2024 Month	Complaint Received Regarding Foodborne Illness	EH Foodborne Illness Investigation
January	1	0
February	3	1
March	22	2
April	23	2
May	20	0
June	18	1
July	16	0
August		
September		
October		
November		
December		

Table 3 – Annual rabies control activities

Year	Rabid animals total	Animal type
2024	1	Bat
2023	2	Bats
2022	4	Bats

2024 Month	Rabies Related Calls	Animals Tested	Positive Results	PEP Recommendations
January	12	1	0	0
February	20	4	0	1
March	20	2	0	2
April	32	6	0	3
May	44	7	1	7
June	31	3	0	12
July	56	11	0	12
August				
September				
October				
November				

December				
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## Appendix F: Reproductive Health Clinic

Table 1 – Reproductive Health Clinic Client Visits

Month	2023 # of Client Visits	2024 # of Client Visits
January	122	195
February	109	181
March	187	141
April	193	184
May	161	172
June	198	191
July	147	189
August	225	
September	164	
October	170	
November	152	
December	153	

## Appendix G: Tuberculosis Program

2024 Month	TB Cases Active/Latent	TB Rule Outs in Partnership with Community Providers	TB Direct Consultation to Community Providers
January	5/10	3	4
February	4/7	4	8
March	2/6	1	2
April	1/4	0	7
May	0/1	0	6
June	0/4	1	2
July	0/4	6	5
August			
September			
October			
November			
December			





## Definitions of Foundational Terms

### **Foundational Public Health Capabilities**

**Assessment and Planning**- Colorado's governmental public health system will apply the principles and skilled practice of epidemiology, laboratory investigation, surveillance and program evaluation to support planning, policy and decision making in Colorado.

**Communications** - Colorado's governmental public health system will be a trusted source of clear, consistent, accurate and timely health and environmental information.

**Policy Development and Support** - Colorado's governmental public health system will inform and implement policies to meet the community's changing health needs. Public health policies will aim to eliminate health disparities, reduce death and disability, and improve environmental quality and health outcomes for all people in Colorado.

**Partnerships** - Colorado's governmental public health system will create, convene, and support strategic partnerships, engage community members and cross-sectoral partners, agencies, and organizations to achieve public health goals.

**Organizational Competencies** – No official definition from CDPHE but this section will be used to report on QI, accreditation, finance/budget, governance, awards, etc.

**Emergency Preparedness and Response** - Colorado's governmental public health system, in coordination with federal, state and local agencies and public and private sector partners, will have the capability and capacity to prepare for, respond to, and recover from emergencies with health, environmental and medical impacts.

**Social Determinants of Health** - Colorado's governmental public health system will intentionally focus on improving systems and institutions that exacerbate health disparities so that all people and communities in Colorado can achieve the highest level of health possible. Governmental public health will have the requisite skills, competencies, and capacities to play an essential role in creating comprehensive strategies needed to address health inequities, and social and environmental determinants of health.

### **Foundational Public Health Services**

**Communicable Disease Prevention, Investigation and Control** - Colorado's governmental public health system will carry out state and locally coordinated surveillance, disease investigation, laboratory testing, and prevention and control strategies to monitor and reduce the incidence and transmission of communicable diseases. Programs will target illnesses that are vaccine-preventable, zoonotic, vector-borne, respiratory, food- or water-borne, bloodborne, healthcare associated, and sexually transmitted as well as emerging threats. Communicable Disease Control will collaborate with national, state, and local partners to ensure mandates and guidelines are met and timely, actionable information is provided to the public and to health professionals.

**Environmental Public Health** - Colorado's governmental public health system will use evidence-informed practices to understand the cause and effect relationships between environmental changes and ecological and human health impacts, to protect, promote, and enhance the health of the community and environment. Agencies will participate in the protection and improvement of air quality, water, land, and food safety by identifying, investigating, and responding to community environmental health concerns, reducing current and emerging environmental health risks, preventing communicable diseases, and sustaining the environment in a coordinated manner with agencies at the federal, state, and local levels as well as industry stakeholders and the public.

**Maternal, Child, Adolescent and Family Health** - Colorado's governmental public health system will develop, implement and evaluate state-wide, regional and local strategies related to maternal, child, adolescent and family health to increase health and wellbeing, reduce adverse health outcomes and advance health equity across the life course. Strategies may include but are not limited to identifying and providing information, promoting evidence-informed and multi-generational approaches, identifying community assets, advocating for needed initiatives, and convening partners.

**Chronic Disease, Injury Prevention and Behavioral Health Promotion** - Colorado's governmental public health system focuses on common risk and protective factors that affect social, emotional and physical health and safety. To prevent chronic disease and injuries and promote behavioral health, Colorado's governmental public health system will use policy, systems and environmental change strategies to comprehensively address the root causes of poor health outcomes and advance health equity. Priority areas include, but are not limited to, nutrition, physical activity, oral health, access to care and disease management, injury prevention, violence prevention, suicide prevention, mental health and substance use (including tobacco, alcohol and other substances).

**Access to and Linkage with Healthcare** - All Coloradans should be connected with and have access to needed personal health care services that include primary care, maternal and child health care, oral health care, specialty care, and mental health care. All Coloradans should be connected with and have access to needed personal health care services that include primary care, maternal and child health care, oral health care, specialty care, and mental health care.