#### 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:** September 2024 (reflects activity in August 2024)

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#### In the News

- El Paso County Public Health (EPCPH) was featured in extensive media coverage of West Nile virus during August, in response to the first human case of West Nile virus in El Paso County for 2024. This timely topic led to coverage across all four local TV news stations, in addition to an article in the Gazette. Media stories featured information and education regarding what the disease is, how it spreads, and most importantly, how to practice prevention.
- The August edition of the <u>New Falcon Herald</u> featured an article from EPCPH Co-Medical Director Dr. Paul with tips to support youth in a safe and healthy return to a new school year.

# **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.

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 16.9 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 Aug. 15, several members of the Strategic Initiatives and Communications teams attended the City of Colorado Springs' Homelessness Response Plan Community Meeting, where the City presented the draft plan and solicited feedback from the public. The senior public health planner is collaborating with the City and the Healthy Community Collaborative (HCC) to identify and refine

- objectives in the Community Health Improvement Plan (CHIP) in regard to housing stability. Note, EPCPH is not the lead agency in addressing housing, which is why the partnerships and input from the City and HCC are imperative in identifying appropriate objectives.
- The Public Health Data & Analytics (PHDA) team is finalizing updates to the suicide and overdose dashboards to reflect 2023 data; updates should be available in the near future.

#### Communications

 EPCPH was featured in television and print news coverage of several emerging topics in August, including behavioral health, heat safety, West Nile virus, and COVID-19. The TV news coverage resulted in nearly 217,000 in local viewership and nearly \$14,500 in earned media value.

## **Organizational Competencies**

#### **Emergency Preparedness and Response**

The Emergency Preparedness and Response (EPR) team facilitated the quarterly Emergency Services Function 8 (ESF-8) meeting at the Pikes Peak Regional Office of Emergency Management (PPROEM). During this meeting, EPCPH's public health planner introduced the Pikes Peak Rising 360 behavioral health platform and its applications in emergency response. This session was a valuable opportunity to share a pertinent resource with our partners.

An emergency management specialist attended the first week of the National Emergency Management Basic Academy. This academy provides a comprehensive training experience, covering fundamental systems, concepts, and practices of modern emergency management. The skills and connections gained will significantly enhance EPCPH's response capabilities.

#### Social Determinants of Health

Nurse-Family Partnership (NFP) helped to address the social determinants of health for their clients enrolled in their program by providing 26 referrals on behalf of 19 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).

The Immunizations (IZ) program conducted several outreach vaccination clinics in August including the El Paso County Criminal Justice Center and Atlas Preparatory School's Ponte La Mochila event. These clinics are a key strategy in meeting community members where they are at in order to help prevent disease while helping address health equity.

#### **Foundational Public Health Services**

#### Communicable Disease Prevention, Investigation and Control

Team members from the Environmental Health Retail Food program and Communicable Disease program participated in a tabletop exercise related to foodborne illness (FBI) investigations and response activities. The goal of this exercise was to improve cross-program collaboration and communication by better defining roles, responsibilities and expectations related to FBI.

Communicable disease staff participated in a large-scale response to two puppies infected with rabies identified in Douglas County. Due to exposures which occurred at a rescue event, many counties, including El Paso County, mobilized quickly to identify potentially exposed animals and assure that care takers and owners received appropriate guidance and education regarding the exposed animals.

El Paso County began work under the Epidemiology and Laboratory Capacity 2.2 grant. This funding will support data infrastructure, staff training and outbreak response.

With the return to the classroom, many schools are experiencing an increase in respiratory disease transmission, including COVID-19 and pertussis. A recent edition of <a href="What's Going Around: A Communicable Disease Report">What's Going Around: A Communicable Disease Report</a> features information on COVID-19 and back-to-school guidance.

Team members from the Tuberculosis program attended a specialized in-service training through collaboration with the University of Colorado Colorado Springs, Beth-El College of Nursing on the proper use and care of a medical device being used by a current patient in the program to assure safe medication administration. This training demonstrates the agency's commitment to upholding best practices and clinical excellence within the Clinical Services Division and providing the best care for residents of El Paso County.

Maternal, Child, Adolescent and Family Health Maternal and Child Health (MCH) provided a social and emotional well-being training to 35 staff from Colorado Springs School District 11 Tesla Middle and High Schools. This training teaches concepts for improving healthy childhood outcomes through safe, supportive, nurturing relationships and environments. MCH also provided a training to Edison School District (54JI) K-12 staff and Falcon School District 49 Banning Lewis Ranch Academy Elementary staff with approximately 70 individuals in attendance.

MCH facilitated a Community Voice Collaborative (CVC) meeting with 30 participants. The meetings provide a space to discuss topics on access to care for children and youth with special health care needs. The CVC meetings provide an opportunity for the community to engage with one another and increase community involvement.

MCH attended a back-to-school event for Big Brothers Big Sisters of Colorado Springs. MCH staff also participated in a bilingual back-to-school resource fair hosted by Viva

Resource Foundation, Atlas Preparatory School, and University of Colorado Colorado Springs Pre-Collegiate Program. Staff provided information on EPCPH's services including resource navigation at each event. MCH connected with 140 individuals, provided back to school supplies, and provided 31 hygiene kit bags.

MCH hosted and facilitated a viewing of the documentary titled, "Unseen, How We're Failing Parent Caregivers & Why It Matters," reaching caregivers who have a child with a special health care need and community partners. This documentary gives an unfiltered, honest glimpse into the lives of caregivers, bringing awareness to the stress and burnout for those raising a child with special health care needs. In addition, the team provided a screening to EPCPH staff, along with education on how they can support families by understanding the importance of caregiver well-being, identify the signs and symptoms of caregiver fatigue, and understand how to best support families who experience caregiver fatigue.

August is National Breastfeeding Month and EPCPH's Women, Infants and Children (WIC) program celebrated clients on their breastfeeding journey. WIC's International Board Certified Lactation Consultant (IBCLC) and Supervisor provided Nurse-Family Partnership (NFP) a training on new evidence-based practices on flange fitting. This information assists in providing consistent support to clients utilizing a breast pump.

WIC participated in the Widefield School District Backpack Bash to provide the community with WIC and food resource information.

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

The injury & violence prevention planner (IVPP) was awarded a scholarship from Safe Kids Worldwide to attend an Infant Safe Sleep Summit in Baltimore this October which will allow the IVPP to gain information from safe sleep experts across the US to work towards reducing sudden unexpected infant deaths (SUIDs) in our community.

The IVPP assisted with the Calhan School District Safety Day on Aug. 30 where she helped community partners from Children's Hospital Colorado give away 215 free bike helmets by individually fitting each child to ensure the helmet was properly adjusted based on national safety standards.

The Tobacco Education and Prevention Partnership (TEPP) presented to the Eastern Alliance, which is based out of Calhan and consists of about 15 community members and representatives from service agencies. The presentation featured information about the overall burden of tobacco and nicotine use in El Paso County and provided an overview of free cessation resources.

TEPP presented tobacco and nicotine use prevention information and resources to 37 elementary, middle and high school teachers and administrators in Falcon School District 49 to equip them with the most current prevention and intervention resources available.

The Communities That Care (CTC) team supported two school districts, Fountain Fort Carson School District 8 and Widefield School District 3 with their annual community events. These events included the Fountain Community Celebration: Backpack Bash 2024 and Widefield Backpack Bash to support students and families with the provision of backpacks and school supplies needed for a great beginning to the school year.

In alignment with the agency's 2023 – 2027 Community Health Assessment (CHA), barriers to accessing health care remains a pressing public health need, especially accessing mental health care services and resources. EPCPH's public health planner continued to support and expand access to the recently launched Pikes Peak Rising 360 behavioral health platform. As part of this initiative, EPCPH is partnering with more than 40 local behavioral health organizations and key community leaders to expand access to behavioral and mental health resources, while combatting the stigma often associated with mental health. To support these efforts, the public health planner has presented nearly 50 demonstrations to partners in the community.

#### Snapshot of the impacts of Pikes Peak Rising 360

As of Sept. 12, a little over two months since the launch, nearly 3,000 people have used the platform to access self-help mental health resources and assessments.

Item	Details Metric				
Site Visits	The number of times the site was visited 2,958				
Assessments	The number of assessments taken	638			
Top Assessments	The top 3 most common assessment taken:  1. Are Your "Off Days" a Sign of Depression  2. Mental Health Check-In  3. Are Your "Worry Days" a Sign of Anxiety				
Top Topics	The top 5 most visited topics:  1. Depression 2. Anxiety 3. Flourishing or Languishing 4. Stress 5. Self Care				

Additional	•	For every individual accessing the platform, 23 percent take an assessment
Highlights		Of the device type used, 57 percent use a mobile device and
		42 percent use a desktop
	•	Word of mouth has been greatest source of accessing the
		platform
	•	Spanish speaking users have accessed this platform

#### Narcan education and outreach

The public health planner also supports Narcan education and distribution, with the goal of reducing fatal overdoses due to opioid use in El Paso County. This initiative reduces opioid fatalities by providing Naloxone (Narcan nasal spray) and educational information to individuals at risk of opioid use. This allows for an individual in a position to assist others at risk of opioid overdose to administer timely treatment of opioid overdose and prevent death.

EPCPH accessed its first order of Narcan from the state in February 2024. Since then, over 2,000 Narcan kits have been distributed to community members and partners serving those impacted by opioid use and misuse. More than 50 staff have been trained in Narcan administration and distribution. With every distribution, individuals receive Narcan user guides and opioid prevention resources. Community organizations requesting Narcan kits receive additional handouts including opioid prevention resources, training resources, and state resources.

#### Narcan state restrictions

New changes with accessing free Narcan were issued by the Colorado Department of Public Health and Environment (CDPHE) in July of this year. The state's free supply has become less available and a prioritization plan with new restrictions on entities who can request naloxone from CDPHE's supply has been instated.

CDPHE will continue to supply local public health agencies and organizations with Narcan; however, there are new restrictions with a 500 Narcan kit cap which can be requested on a quarterly basis per year. This is a barrier with EPCPH's recent supply of 500 Narcan kits having been fully depleted in two months due to increased community awareness of Narcan and its life-saving impact.

Care Coordination YTD 2024 (January 1, 2024-Aug 31, 2024)					
Referrals	1049				
Children and Youth with Special	155				
Health Care Needs specific referrals					

Outreach (emails, tours, meetings,	51
conferences, presentations and	
trainings)	
Events	17
Narcan kits distributed	35
Care packages distributed	63

Appendix A: Environmental Health Activity

	2024 As of	2023	2022
Environment Health Activity	8/31/202	Total	Total
	4		
Air Quality Construction Permits	81	136	163
Air Quality Open Burn Permits	21	51	19
Air Quality Complaints	25	23	38
Animal Bites Reported	906	1091	877
Body Art Routine Inspections	85	112	86
Body Art Follow-up Inspections	1	7	8
Body Art Complaints	13	31	22
Child Care Regular Inspections	143	202	138
Child Care Follow-up Inspections	8	6	15
Child Care Complaints	16	20	8
Child Care High Risk Field Consults	30	12	18
Land-Use Planning Review	164	204	232
Onsite Wastewater Treatment System (OWTS) Pumper Truck Inspections	71	77	85
OWTS Final Inspections	304	551	576
OWTS Partial Inspections	88	227	235
OWTS Application Design Reviews	252	490	558
OWTS Design Revision Requests	39	120	221
OWTS Design Revision (add) Requests	7	63	0
OWTS New Permit Applications	127	232	351
OWTS Repair Permit Applications	175	266	276
OWTS Modification Permit Applications	8	19	15
OWTS Acceptance Doc for Title Transfer	504	731	866
OWTS Soil and Site Evaluations	197	376	425
OWTS Complaints	23	30	27
OWTS O&M Systems	71	116	65
Recreational Water Safety Inspections	233	313	295
Recreational Water Follow-up Inspections	14	22	17
Recreational Water Complaints	11	14	9
Retail Food Establishment (RFE) Regular Inspections	1756	2481	1908
RFE Re-Inspections	168	315	171
RFE Complaint Investigations	317	517	391
RFE Plan Reviews	220	210	193
School Safety Routine Inspections	16	24	13
School Safety Complaints	8	15	4

School Safety Self-Certification Audits	45	45	15
School Safety Self-Certifications Returned	1	327	332
Waste Tire Facilities Regular Inspections	80	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
Totals	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	370				
Private Wells	299	267	289	378	364	334	398	308				
Totals	647	607	642	699	830	702	786	678				

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	879	18
September		
October		
November		
December		

<sup>\*</sup>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	236
September	213	
October	231	
November	230	
December	188	

Appendix E: Disease Prevention and Control

Appendix E. Disease Preve		2024		
		As of		
Category	Disease	8/31/2024	2023	2022
Food/Waterborne Diseases	Discuse	0,02,2024		LULL
1 Joan Water Borne Biseases	Campylobacter	126	189	118
		18	42	25
	Cryptosporidium			
	Cyclosporiasis	27	8	10
	Giardia	49	68	47
	Hepatitis A	1	2	3
	Legionellosis	6	19	11
	Salmonella	82	89	54
	Shigella	38	46	57
	Shiga Toxin-			
	producing E. coli			
	(STEC)	36	59	42
	Vibriosis	9	9	7
Food/Waterborne Diseases Totals		392	531	373
Healthcare Associated Infections				
	Carbapenem-			
	Resistant			
	Acinetobacter			
	baumannii (CRAB)	2	0	1
	Carbapenem Non-			
	susceptible			
	Enterobacteriaceae	40	<b>50</b>	47
	(CRE)	42	58	47
	Carbapenem-			
	Resistant Pseudomonas			
	Aeruginosa (CRPA)	34	45	43
Healthcare Associated Infections	Actugitiosu (CRPA)	34	40	43
Totals		78	103	91
		13	100	<u> </u>
Vaccine Preventable Diseases				
	Haemophilus			
	influenzae (H. flu)	8	18	14
	Measles	0	0	0
	Meningococcal			
	Disease	0	1	0

	Mumps	1	2	3
	Pertussis	49	24	29
	Rubella	0	0	0
	Varicella	16	33	21
Vaccine Preventable Diseases				
Totals		74	78	67
Respiratory Diseases				
	Hospitalized COVID-			
	19	516	1,091	2,847
	Hospitalized			
	Influenza*	377	266	529
	Hospitalized RSV	326	161	24
Respiratory Disease Total		1,219	1,518	3,400

<sup>\*</sup>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	Complaint Received	EH Foodborne Illness
Month	Regarding Foodborne Illness	Investigation

January	1	0
February	3	1
March	22	2
April	23	2
Мау	20	0
June	18	1
July	16	0
August	18	1
September		
October		
November		
December		

Table 3 – Annual rabies control activities

Year	Rabid animals total	Animal type
2024	5	Bats
2023	2	Bats
2022	4	Bats

2024	Rabies			PEP
Month	Related Calls	Animals Tested	<b>Positive Results</b>	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	41	13	4	8
September				
October				
November				
December				

# 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	129
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	2/4	3	11
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.