

El Paso County Public Health (EPCPH) Director’s Report

To: The El Paso County Board of Health

From: DeAnn Ryberg, Interim Public Health Executive Director

Date: March 2026 (reflects activity through February)

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In the News

El Paso County Public Health (EPCPH) was featured in a variety of timely print news coverage stories in February, resulting in three stories totaling more than 1,000 in local viewership and \$25 in local earned media value.

- The February edition of the New Falcon Herald featured an article from EPCPH Medical Director Dr. Paul Mayer about American Heart Month. The article featured tips on keeping your heart healthy. The New Falcon Herald article can be accessed through the following link: [Love your heart this February](#)
- The Colorado College Catalyst reported about a student who approached a friendly squirrel and was bitten. The article noted that squirrels and other wildlife can spread disease and

that EPCPH monitors these threats. The Catalyst story can be accessed through the following link: [Campus Squirrel Becomes Threat to Student Safety](#)

- The Conversation reported on the dangers of radon and shared a video about testing your home for radon, which was produced by EPCPH. The Conversation story can be accessed through the following link: [Colorado has high levels of radon, which can cause lung cancer – here’s how to lower your risk](#)

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 Jan. 1, 2020, now requires state and local health departments in Colorado to ensure provision of seven Foundational Capabilities and five Foundational Services. More information can be found at the following link: [Colorado Local Public Health and Environmental Resources](#)

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.

2026 Budget Book Update

EPCPH’s Budget & Communications teams completed and submitted the 2026 Budget Book to the Government Finance Officers Association (GFOA). This year’s 166-page report focused on enhanced organization and clarity around GFOA criteria and was submitted ahead of schedule. The Budget Book is a rigorous process which reflects EPCPH’s commitment to excellence in accounting and budgeting principles; of note, EPCPH has received the award for Distinguished Budget for six consecutive years.

Point & Pay Update

EPCPH has been absorbing convenience fees associated with consumer credit and debit card transactions, resulting in an annual cost of approximately \$150,000. In an effort to be responsible stewards of taxpayer dollars and ensure funds are directed toward core public health services, EPCPH evaluated alternative payment processing options. As a result, the department will transition to a new payment processor through Point & Pay, which is used by several agencies across the county. The new processor will enable EPCPH to continue providing our customers with the ability to pay by credit or debit transaction; however, customers will be informed of the fee at the time of payment. This change will significantly reduce unnecessary expenditures, while maintaining convenient electronic payment options for the public. EPCPH will continue to offer the public the option of paying by check, cash or money order, none of which will incur fees.

Foundational Public Health Capabilities

Emergency Preparedness and Response

In February, EPCPH hosted the Medical Reserve Corps of El Paso County (MRCEPC) for a full-scale exercise designed to strengthen the MRC's ability to support public health operations during a measles outbreak response. Through the coordinated efforts of multiple EPCPH programs—including Immunizations, Clinical Services, and Communicable Disease—MRC volunteers participated in comprehensive, hands-on training activities. These activities included donning and doffing personal protective equipment (PPE), specimen collection, vaccine administration, and N95 respirator fit testing. Volunteers also received education on measles transmission, community impact, and public health response procedures. In addition, training addressed key administrative components of an activation, including liability considerations, documentation, and record-keeping. Exercises such as this strengthen partnerships with volunteers and enhance the community's readiness to respond effectively during public health emergencies.

The Emergency Preparedness and Response (EPR) program also facilitated an administrative preparedness tabletop exercise, the first of its kind conducted by EPCPH. The exercise brought together multiple county departments alongside EPCPH to discuss the administrative processes that support emergency response operations. The discussion focused on clarifying roles and responsibilities, identifying potential gaps, and strengthening the collective understanding of how local administrative functions integrate during a public health emergency. The exercise also provided an opportunity to discuss key support systems such as staffing, finance, procurement, and interdepartmental coordination that are essential to sustaining response operations over time.

Foundational Public Health Services

Communicable Disease Prevention, Investigation and Control

During February, the Communicable Disease (CD) program continued its efforts to support community education and strengthen partnerships with healthcare providers. The program began offering a Rabies Refresher training to local hospitals and urgent care providers to ensure clinicians are familiar with current guidance on rabies exposure assessments and post-exposure prophylaxis recommendations. Staff also partnered with Manitou Springs High School, presenting to health classes on the role of epidemiology and public health in preventing and controlling infectious diseases. The program also continues to monitor seasonal respiratory disease trends. Influenza activity in the United States has likely peaked, with Influenza A levels continuing to decline, while

Influenza B activity is beginning to increase. This is typical for this point in the respiratory virus season. Respiratory Syncytial Virus (RSV) activity began later than usual this year and has not yet peaked. While RSV season typically runs from October through March, disease activity did not begin increasing until mid-November 2025. The link to the respiratory disease dashboard can be found below the table in [Appendix E](#).

Maternal, Child, Adolescent and Family Health

Maternal and Child Health (MCH) provided five trainings on healthy childhood development to nearly 150 personnel from youth-serving organizations such as Colorado Springs School District 11, Harrison School District 2, the Boys and Girls Club, and Cultural Office of the Pikes Peak Region. Each training provided an overview of Adverse Childhood Experiences (ACEs) and education on strategies for improving healthy childhood outcomes. Staff administered a post-survey and received 68 responses:

- 100% of participants stated they strongly agreed or agreed that the content of the training was useful and applicable to their job/situation.
- 100% of participants stated they are willing or very willing to use the information presented in their job or situation.
- *“Great job! Really interesting and important information and very engaging.”*
- *“One of the BEST PDs I've had in years!!! GRATEFUL.”*
- *“This was a very informative and helpful training. It shifted my perspective and I will carry this with me into my day-to-day life at school.”*

Nurse-Family Partnership (NFP) helped to connect enrolled clients to care by providing nearly 60 referrals on behalf of over 50 families. These referrals were to housing assistance, mental health treatment, childbirth education, Medicaid, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), child care, dental services, primary medical care, smoking cessation treatment, lactation support, and Women, Infants, and Children (WIC).

Chronic Disease, Injury Prevention and Behavioral Health Promotion

The Clinical Services division presented a proposed Diabetes Prevention Program (DPP) to El Paso County (EPC) leadership to highlight the value of investing in prevention-focused health strategies for the county workforce. The presentation outlined the evidence-based DPP model, the health and cost implications of diabetes and prediabetes, and the opportunity to support employees in making sustainable lifestyle changes that reduce risk for Type II diabetes. This discussion helped build awareness of the program and generated support for exploring implementation of DPP with partners in Human Resources.

TEPP and Fountain Valley-Communities That Care (FV-CTC) engaged families at Carmel Community School's Family Night in Harrison School District 2 to increase awareness of prevention resources and strengthening connections between parents, caregivers, and available public health supports. TEPP further expanded outreach through participation in a District 49 staff wellness event, enhancing educators' access to prevention and cessation resources that support healthier school environments and improve connections to services for students and their families. Collectively, these outreach efforts reached more than 250 parents, caregivers, and school staff across both events.

Injury and Violence Prevention (IVP) co-facilitated a safe sleep education session with NFP and Children's Hospital Colorado for the Pikes Peak Library District's prenatal parenting series. IVP shared local data on rates of and risk factors for sleep-related infant death as well as evidence-based strategies to create a safe sleep environment. Parents and caregivers also had the opportunity to ask questions about safety best practices and learn risk reduction methods for their individual circumstances.

IVP hosted an impaired driving data walk at the Fort Carson Soldier Readiness Center on Feb. 24. This outreach effort was an opportunity to engage with Fort Carson soldiers and staff about the impact of impaired driving and get community member input on the prevention strategies that would be most effective. After reviewing local impaired driving data, participants voted to promote designated driver incentives, increasing legal consequences, improving public transportation, and developing media campaigns as the top prevention strategies for the Fort Carson community. Most participants reported that their motivation for driving safely and sober was their family. Additional responses included:

- *"Not jeopardizing my future"*
- *"My first sergeant"*
- *"A care and concern for all of humanity"*
- *"Fear of insurance going up"*
- *"A promise made to God"*
- *"To see my next meal"*

Youth Suicide Prevention (YSP) was invited to Miami-Yoder school district to share information with middle and high school students regarding suicide prevention resources including 988 and Safe-2-Tell, in addition to highlighting the collaborative efforts of the Youth Suicide Prevention workgroup. This is also part of the strategy to expand suicide prevention efforts throughout EPC.

Access to and Linkage with Health Care

Clinical Services increased access to education, preventive services, and informed, patient-driven health decisions by delivering care and outreach in community and institutional settings. These efforts focused on reducing barriers to services, increasing awareness of available programs, and supporting individuals in making informed choices about their health through accessible, community-based events, and partnerships.

Key activities included:

- Participating in the Springs Rescue Mission Health Fair to provide health education and connect community members with EPCPH services and resources.
- Supporting the annual Springs Rescue Mission Health Screening Day alongside community partners, including Silver Sneakers, Hey 719, CU Anschutz medical students, and other EPCPH programs to expand access to health screenings and service information.
- Engaging in a Jail-Based Learning Collaborative with other local public health agencies to share practices and strengthen sexually transmitted infection (STI) screening efforts within detention center settings.
- Partnering with The LaunchPad, a transitional housing program for young adults ages 18 to 24, to conduct an STI screening event and provide reproductive health education and available services.
- Delivering an STI education presentation within the Criminal Justice Center (CJC) male housing unit to increase awareness of STI prevention and inform individuals about upcoming screening opportunities.
- Conducting an STI screening event within a male housing unit at the CJC, more than 30 individuals participated in screening services.

Appendix A: Environmental Health Activity

Environmental Health	Feb 2026	2026 Total	2025 Total
Air Quality Construction Activity Permits	6	15	109
Air Quality Open Burn Permits	0	0	30
Air Quality Complaints	3	4	41
Animal Bites Reported	102	186	1424
Body Art Routine Inspections	12	18	133
Body Art Follow-up Inspections	0	0	4
Body Art Complaints	4	5	33
Child Care Routine Inspections	21	33	231
Child Care Follow-up Inspections	0	0	3
Child Care Complaints	1	2	10
Child Care Outbreak Investigations	1	1	14
Child Care High Risk Field Consults	0	0	58
Land-Use Planning Review	31	63	332
OWTS Pumper Truck Inspections	20	35	96
OWTS Final Inspections	38	76	499
OWTS Partial Inspections	13	27	73
OWTS Application Design Reviews	35	74	535
OWTS Design Revision Reviews	6	15	129
OWTS Design Revision Reviews (add)	3	12	24
OWTS New Permit Applications	21	34	247
OWTS Repair Permit Applications	24	41	280
OWTS Modification Permit Applications	1	4	21
OWTS Acceptance Doc for Title Transfer	69	127	785
OWTS Soil and Site Evaluations	26	60	401
OWTS Complaints	1	5	22
OWTS O&M Systems	12	21	73
Recreational Water Safety Inspections	11	16	337
Recreational Water Follow-up Inspections	0	1	16
Recreational Water Complaints	0	0	13
RFE Routine Inspections	217	479	2,969
RFE Re-Inspections	21	59	267
RFE Complaint Investigations	50	32	663
RFE Inspections Resulting in Closure	5	3	71
RFE Plan Reviews	25	30	279
RFE Pre-Operational Inspections	34	73	553
Foodborne illness EH investigations	3	1	18
School Routine Inspections	4	6	30

School Complaints	4	4	20
School Self-Certification Audits	12	25	50
School Self-Certifications Returned	0	0	350
Waste Tire Facilities Routine Inspections	7	18	150
Waste Tire Complaints	0	0	2

Table 1 Appendix A: Environmental Health Activity

Appendix B: Water Systems Testing

2025	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Public Water Systems	334	286	307	306	356	344	394	348	318	317	283	297
Private Wells	303	294	338	390	408	409	392	370	427	338	293	311
Totals	637	580	645	696	764	753	786	719	745	655	576	608

Table 2 Appendix B: 2025 Water Systems Testing

2026	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Public Water Systems	326	287										
Private Wells	284	325										
Totals	610	612										

Table 3 Appendix B: 2026 Water Systems Testing

Appendix C: Immunizations Program Vaccines Administered

Month	2025 Total Vaccines Administered	2026 Total Vaccines Administered
January	1020	818
February	870	629
March	796	
April	910	
May	832	
June	847	
July	911	
August	738	
September	730	
October	960	
November	721	
December	737	

Table 4 Appendix C: 2025 Immunizations Program Vaccines Administered

Appendix D: Nurse-Family Partnership Client Visits

Month	2025 # of Client Visits	2026 # of Client Visits
January	264	229
February	253	223
March	210	
April	226	
May	229	
June	226	
July	239	
August	222	
September	239	
October	251	
November	185	
December	254	

Table 5 Appendix D: Nurse-Family Partnership Client Visits

Appendix E: Disease Prevention and Control

Category	Disease	2026	2025
Food/Waterborne Diseases			
	Campylobacter	34	213
	Cryptosporidium	103	28
	Cyclosporiasis	0	22
	Giardia	5	47
	Hepatitis A	0	2
	Legionellosis	0	20
	Salmonella	12	126
	Shigella	5	44
	Shiga Toxin-producing E. coli (STEC)	11	52
	Vibriosis	0	15
Food/Waterborne Diseases Totals		170	569
Health care Associated Infections			
	Carbapenem-Resistant Acinetobacter baumannii (CRAB)	0	1
	Carbapenem Non-susceptible Enterobacteriaceae (CRE)	12	86
	Carbapenem-Resistant Pseudomonas Aeruginosa (CRPA)	8	48

Health care Associated Infections Totals		20	135
Vaccine Preventable Diseases			
	Haemophilus influenzae (H. flu)	1	16
	Measles	0	4
	Meningococcal Disease	0	2
	Mumps	0	2
	Pertussis	13	94
	Rubella	0	0
	Varicella	1	33
Vaccine Preventable Diseases Totals		15	151
Respiratory Diseases			
	Hospitalized COVID-19	102	497
	Hospitalized Influenza*	285	853
	Hospitalized RSV	243	514
Respiratory Disease Total		630	1,864

Table 6 Appendix E: Disease Prevention and Control

Link to EPCPH Respiratory Disease Dashboard: <https://www.elpasocountyhealth.org/infectious-diseases-public-health-response/infectious-diseases-2/influenza-flu/>

**Flu Seasons:*

- *October 1, 2023-May 18, 2024; 547*
- *September 29, 2024- May 17, 2025; 611*
- *September 28, 2025- May 23, 2026; 599*

Foodborne Illness Complaints Received at EPCPH

2026 Month	Complaint Received Regarding Foodborne Illness	EH Foodborne Illness Investigation
January	14	0
February	31	4
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

Table 7 – 2026 Foodborne Illness Complaints Received

2025 Month	Complaint Received Regarding Foodborne Illness	EH Foodborne Illness Investigation
January	40	2
February	17	0
March	29	1
April	21	0
May	35	3
June	18	2
July	22	0
August	22	0
September	19	0
October	14	0
November	21	1
December	19	1

Table 8 – 2025 Foodborne Illness Complaints Received

Annual Rabies Control Activities

Year	Rabid animals total	Animal type
2026	0	N/A
2025	5	Bats

Table 9 - Annual Rabies Control Activities

2026 Month	Rabies Related Calls	Animals Tested	Positive Results	PEP Recommendations
January	18	0	0	2
February	19	1	0	0
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				

Table 10 - 2026 Rabies Control Activities

Appendix F: Reproductive Health Clinic

Reproductive Health Clinic Client Visits

Month	2025 # of Client Visits	2026 # of Client Visits
January	170	120
February	127	130
March	159	
April	147	
May	128	
June	138	
July	154	
August	135	
September	158	
October	135	
November	115	
December	132	

Table 11 - Appendix F: Reproductive Health Clinic

Appendix G: Tuberculosis Program

2026 Month	TB Cases Active/Latent	TB Rule Outs in Partnership with Community Providers	TB Direct Consultation to Community Providers
January	2/12	0	5
February	2/11	0	8
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
Totals			

Table 12 Appendix G: Tuberculosis Program

*Represents the total number of active TB and LTBI patients under treatment during 2025, regardless of when treatment began.

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 statewide, regional and local strategies related to maternal, child, adolescent and family health to increase health and well-being, 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.