

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: April 2026 (reflects activity through March)

Table of Contents

In the News.....	1
Agency Operations	2
Appendix A: Environmental Health Activity	7
Appendix B: Water Systems Testing	8
Appendix C: Immunizations Program Vaccines Administered	8
Appendix D: Nurse-Family Partnership Client Visits	9
Appendix E: Disease Prevention and Control.....	9
Appendix F: Reproductive Health Clinic	12
Appendix G: Tuberculosis Program	13
Definitions of Foundational Terms.....	13

In the News

El Paso County Public Health (EPCPH) was featured in a variety of timely television and print news coverage stories in March, resulting in three stories totaling over 28,600 in local viewership and more than \$1,000 in local earned media value.

- The March edition of the New Falcon Herald featured an article from EPCPH Medical Director Dr. Paul Mayer about caring for your kidneys during National Kidney Month. The New Falcon Herald article can be accessed through the following link: [Take time to consider your kidney health](#)
- KKTV reported that EPCPH is addressing cases of mpox locally and is providing mpox vaccines. The KKTV story can be accessed through the following link: [EPCPH reports local mpox cases](#)

- KRDO’s recent Restaurant Roundup reported on a cockroach infestation at a local establishment. KRDO reached out to EPCPH to answer questions about inspections for this report. The story can be accessed through the following link: [Cockroach Wars at Colorado Springs plaza: ‘they moved in and it was Armageddon,’ says manager](#)

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.

Foundational Public Health Capabilities

Partnerships



Clinical Services Division supported the El Paso County Coroner’s Office by providing fit testing for staff in coordination with Risk Management. Fit testing is conducted to ensure that N95 respirators form a proper seal on the wearer’s face, allowing the equipment to effectively protect against airborne particles and potential exposures in the workplace. In addition to conducting fit testing, the team delivered respiratory protection education and shared established protocols to support the Coroner’s Office, strengthening safe and compliant workplace practices across the County.

Women, Infants, and Children (WIC) expanded their current partnership and formal agreement with Peak Vista Health Centers. WIC’s co-location decreases barriers for current and potential WIC participants. The updated agreement will allow EPCPH to store anthropometric equipment (height and weight measurement tools and scales) on-site, reducing travel and logistical time to each mobile clinic day. With this added efficiency, WIC can expand clinic hours and allow educators to dedicate their full day to serving participants. New participants can enroll in WIC after learning about the program through their healthcare provider.

Organizational Competencies

The Public Health Data & Analytics (PHDA) program completed an internal performance dashboard for the Environmental Health division. By displaying inspection data from multiple programs, it standardizes how programs and activities are evaluated, quickly summarizing the division's monthly and annual outputs, and increasing transparency and accountability.

PHDA represented the local public health perspective at a Data Modernization Data Professionals Development Workgroup facilitated by the State. The workgroup will convene for six months to identify strategies and resources that the State can invest in to support local agencies in maintaining and expanding the data skills of their staff in support of faster, more accurate, data-driven decision making.

Emergency Preparedness and Response

Emergency Preparedness and Response (EPR) participated in the Mass Violence Recovery Plan tabletop exercise, facilitated by the Pikes Peak Regional Office of Emergency Management (PPEM). EPR has been an integral partner in this initiative, serving on the planning team and helping develop the plan from the ground up. The exercise brought together nearly 50 participants from close to 20 agencies and focused on how partners will collectively support community recovery in the aftermath of a mass violence event. Initiated following the Club Q shooting, this work continues to strengthen regional readiness and coordinated recovery capabilities for future incidents.

Members of EPCPH's Clinical Services and Communicable Disease programs received the 2025 El Paso County Innovation Award for the Measles Titer Testing project. A titer is a blood test that measures the concentration of specific antibodies, including immunity to diseases like measles, mumps, rubella, or hepatitis. In 2025, while engaged in the measles response, team members designed and implemented off-site measles titer clinics. This approach was not previously utilized in Colorado for measles response. Within a compressed response timeline, the team developed new response protocols, established clinic workflows, negotiated reduced laboratory pricing, and amended an existing contract to provide titers at no cost to the community.

Titer clinics allow people who are immune to measles (but may not have a record of immunization) to return to their normal activities as soon as possible. This initiative demonstrated significant innovation, operational impact, and cost savings for residents while reflecting the County's core values. This innovative strategy, along with the accompanying protocols, has since been shared with local public health agencies statewide to strengthen overall outbreak readiness.

Foundational Public Health Services

Communicable Disease Prevention, Investigation and Control

Communicable Disease (CD) strengthened military public health partnerships this month through coordination with Peterson Space Force Base Public Health, providing training on EPCPH CD response processes and coordination pathways. In addition, three abstracts highlighting EPCPH's work during the 2025 measles response were accepted for presentation at the Council of State and Territorial Epidemiologists (CSTE) national conference in June, reinforcing the agency's leadership in CD response.

Maternal, Child, Adolescent and Family Health

Nurse-Family Partnership (NFP) helped to connect enrolled clients to care by providing nearly 65 referrals on behalf of more than 40 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 WIC.

CDPHE conducted a biennial WIC grant program monitoring visit in March. This included record reviews, onsite observations, and assessment of adherence to grant policies. The CDPHE nutrition consultant described the review as a successful visit and commented on the welcoming environment, positive culture, and high regard for the clients participating in the WIC program.

Chronic Disease, Injury Prevention and Behavioral Health Promotion

On March 7, Fountain Valley Communities That Care (FVCTC) hosted a community resource fair at Public Health South, helping families access youth programs, parent resources, health services, and community support. The event connected attendees with nearly 80 local organizations and provided meaningful engagement through hands-on activities. Vendors reported that the fair strengthened collaboration across Southern EPC, creating new partnership opportunities. Several EPCPH programs, including Injury and Violence Prevention (IVP), Maternal and Child Health (MCH), Tobacco Education and Prevention Partnership (TEPP), and WIC highlighted the wide range of services available for infants, children, youth, and families, increasing awareness of public health resources in the community. Additionally, FVCTC and Solid Rock Community Development Corporation distributed food bags to families, addressing immediate needs and reducing barriers to support.

FV-CTC, IVP, and TEPP programs provided a collaborative presentation about EPCPH's substance misuse prevention resources to the Fort Carson Alcohol & Substance Abuse Program and Family Advocacy Program on March 17. The presentation highlighted the variety of initiatives and resources that EPCPH offers for impaired driving prevention, smoking and vaping cessation and prevention, and overdose and prescription medication misuse prevention. As a result of this

presentation, Fort Carson staff requested additional training on smoking and vaping cessation resources.

IVP presented the success of the EPC Safe Sleep Initiative at the Colorado Infant Safe Sleep Partnership on March 16. This presentation highlighted the innovative outreach and education efforts established through this initiative such as a safe sleep station in the EPC Vital Records Office, a safe sleep environment referral program for EPCPH clients, a partnership with CommonSpirit St. Francis Hospital, and the many community partners and medical providers who have received safe sleep trainings. Several attendees remarked how this initiative has inspired safe sleep efforts in their communities such as Arapahoe County establishing a safe sleep station in their vital records office and the Colorado Perinatal Care Quality Collaborative using EPCPH's safe sleep materials in trainings with birth hospitals across the state.

TEPP received and responded to three Colorado Clean Indoor Air Act complaints within EPC. These complaints were received from residents in multi-unit housing settings. Education, materials, and resources were provided to the tenants and property management.

TEPP reached more than 380 students across EPC through presentations at schools and community events. TEPP educated youth on the health risks of nicotine use, addiction, and practical strategies for refusing substances. At the Boys and Girls Club of the Pikes Peak Region, staff engaged with youth about strengthening early prevention efforts. TEPP also presented to ninth-grade students at Banning Lewis Preparatory Academy and participated in Ellicott High School's Wellness Showcase, reaching students through a presentation and interactive activities, as well as providing additional opportunities for students to ask questions and access resources.

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:

- Hosting a clinic day at University of Colorado Colorado Springs (UCCS) that included a sexually transmitted infection (STI) screening event, where more than 20 individuals participated in screening services, as well as offering long-acting reversible contraception (LARC) services, expanding access to preventive care within a campus setting.
- 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 in collaboration with CJC nursing staff, where nearly 30 individuals participated in screening services, demonstrating continued engagement and interest in preventive care services.

Appendix A: Environmental Health Activity

Environmental Health	March 2026	2026 Total	2025 Total
Air Quality Construction Activity Permits	13	28	109
Air Quality Open Burn Permits	0	0	30
Air Quality Complaints	2	6	41
Animal Bites Reported	102	272	1424
Body Art Routine Inspections	11	29	133
Body Art Follow-up Inspections	0	0	4
Body Art Complaints	1	6	33
Child Care Routine Inspections	15	48	231
Child Care Follow-up Inspections	0	0	3
Child Care Complaints	0	2	10
Child Care Outbreak Investigations	3	4	14
Child Care High Risk Field Consults	0	0	58
Land-Use Planning Review	35	98	332
OWTS Pumper Truck Inspections	7	42	96
OWTS Final Inspections	43	118	499
OWTS Partial Inspections	14	42	73
OWTS Application Design Reviews	50	74	535
OWTS Design Revision Reviews	123	15	129
OWTS Design Revision Reviews (add)	6	15	24
OWTS New Permit Applications	21	55	247
OWTS Repair Permit Applications	14	49	280
OWTS Modification Permit Applications	4	8	21
OWTS Acceptance Doc for Title Transfer	76	203	785
OWTS Soil and Site Evaluations	47	107	401
OWTS Complaints	2	7	22
OWTS O&M Systems	15	30	73
Recreational Water Safety Inspections	15	42	337
Recreational Water Follow-up Inspections	3	4	16
Recreational Water Complaints	1	1	13
RFE Routine Inspections	279	758	2,969
RFE Re-Inspections	18	77	267
RFE Complaint Investigations	42	32	663
RFE Inspections Resulting in Closure	4	12	71
RFE Plan Reviews	24	70	279
RFE Pre-Operational Inspections	48	122	553
Foodborne illness EH investigations	1	5	18
School Routine Inspections	0	6	30

School Complaints	1	5	20
School Self-Certification Audits	18	43	50
School Self-Certifications Returned	0	0	350
Waste Tire Facilities Routine Inspections	13	36	150
Waste Tire Complaints	2	2	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	298									
Private Wells	284	325	471									
Totals	610	612	769									

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	672
April	910	
May	832	
June	847	
July	911	
August	738	
September	730	
October	960	
November	721	
December	737	

Table 4 Appendix C: 2025 and 2026 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	242
April	226	
May	229	
June	226	
July	239	
August	222	
September	239	
October	251	
November	185	
December	254	

Table 5 Appendix D: 2025 and 2026 Nurse-Family Partnership Client Visits

Appendix E: Disease Prevention and Control

Category	Disease	2026	2025
Food/Waterborne Diseases			
	Campylobacter	58	213
	Cryptosporidium	153	28
	Cyclosporiasis	0	22
	Giardia	11	47
	Hepatitis A	0	2
	Legionellosis	0	20
	Salmonella	16	126
	Shigella	7	44
	Shiga Toxin-producing E. coli (STEC)	18	52
	Vibriosis	0	16
Food/Waterborne Diseases Totals		263	570
Health care Associated Infections			
	Carbapenem-Resistant Acinetobacter baumannii (CRAB)	0	1
	Carbapenem Non-susceptible Enterobacteriaceae (CRE)	21	86

	Carbapenem-Resistant Pseudomonas Aeruginosa (CRPA)	12	48
Health care Associated Infections Totals		33	135
Vaccine Preventable Diseases			
	Haemophilus influenzae (H. flu)	6	15
	Measles	0	4
	Meningococcal Disease	0	2
	Mpox	5	2
	Mumps	0	1
	Pertussis	20	92
	Rubella	0	0
	Varicella	1	33
Vaccine Preventable Diseases Totals		32	149
Respiratory Diseases			
	Hospitalized COVID-19	129	502
	Hospitalized Influenza*	370	885
	Hospitalized RSV	422	519
Respiratory Disease Total		921	1,906

Table 6 Appendix E: 2025 and 2026 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; 712*

Foodborne Illness Complaints Received at EPCPH

2026 Month	Complaint Received Regarding Foodborne Illness	EH Foodborne Illness Investigation
January	14	0
February	31	4
March	19	1
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 2025 and 2026 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	19	6	0	3
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	125
April	147	
May	128	
June	138	
July	154	
August	135	
September	158	
October	135	
November	115	
December	132	

Table 11 Appendix F: 2025 and 2026 Reproductive Health Clinic Visits

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	4/12	1	10
April			
May			
June			
July			
August			
September			
October			
November			
December			
Totals	4/14	1	23

Table 12 Appendix G: Tuberculosis Program

*Represents the total number of active TB and LTBI patients under treatment during 2026, 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.