



ADAMS COUNTY
HEALTH DEPARTMENT

Annual Report 2024

Calendar Year Ending on December 31, 2024

Published July 2025



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Letter from the Executive Director

Dear Adams County Community Residents,

As the Executive Director of the Adams County Health Department (ACHD), I am honored to present our 2024 Annual Report. This year marked an important chapter in our growth as a health department, building upon the foundation laid in 2023 and working diligently to improve our community's health and wellbeing through increased reach, effectiveness, and impact of our programs and partnerships.

The progress we achieved this year would not have been possible without the dedication of our staff, the support of Adams County government, and the collaboration of our valued, broad network of community partners and community leaders. Together, we continue to work toward our vision of a community-led county where everyone has the opportunity to be healthy, valued, safe, and thriving.

In 2024 ACHD advanced public health efforts across a wide range of areas, focusing on operational excellence, community outreach and engagement, mental and behavioral health, and increased access to services. Below are some highlights of our key accomplishments:

1. Implementation of the 2024-2026 Strategic Plan: This year, ACHD operationalized our strategic plan, focusing on five priority areas: partnering to address social determinants of health, workforce development, community-driven environmental health initiatives, data and technology, and business excellence. These goals have shaped our work and strengthened our ability to serve the community effectively.
2. Launch of the Community Health Improvement Plan (CHIP): Partnering with the Adams County Thriving Communities Collective, ACHD completed the development of the 2025-2029 CHIP, focusing on three goal areas identified by the community: Access to Care, Economic Security, and Housing. This plan represents a collective effort to address the challenges impacting Adams County residents. [Link to CHIP external page.](#)
3. Behavioral Health Investments: ACHD distributed over \$7 million in American Rescue Plan Act (ARPA) funds to expand access to behavioral health services, reduce stigma, and support community programs addressing mental health and substance use. [Link to Behavioral Health external page.](#)
4. Environmental Health: ACHD tackled complex challenges such as air and water quality supported by separate grants. The water quality grant supported the distribution of 400 water filters and opened the doors for greater dialogue and building community trust of local water supplies. New initiatives included the implementation of the Secure Transport Licensing and Permitting Program and the addition of funds from the Colorado Department of Public Health and Environment (CDPHE) to support childhood blood lead prevention efforts.
5. Expansion of Community Engagement and Access: ACHD strengthened its outreach through [seven office locations](#) and supported over 220 community events, including health fairs, clinic support, and providing community trainings.

As we look ahead to 2025, we are committed to deepening our focus on improving health outcomes for all, strengthening community partnerships, and fostering resilience across Adams County. ACHD will continue to prioritize community-centered approaches to addressing the challenges and opportunities ahead.

I extend my heartfelt gratitude to the residents of Adams County, as well as our staff, partners, and stakeholders for their unwavering support and collaboration. Together, we will create a healthier, stronger, and fairer community for all.

Thank you for your attention, and I invite you to explore this report to learn more about accomplishments and future initiatives.

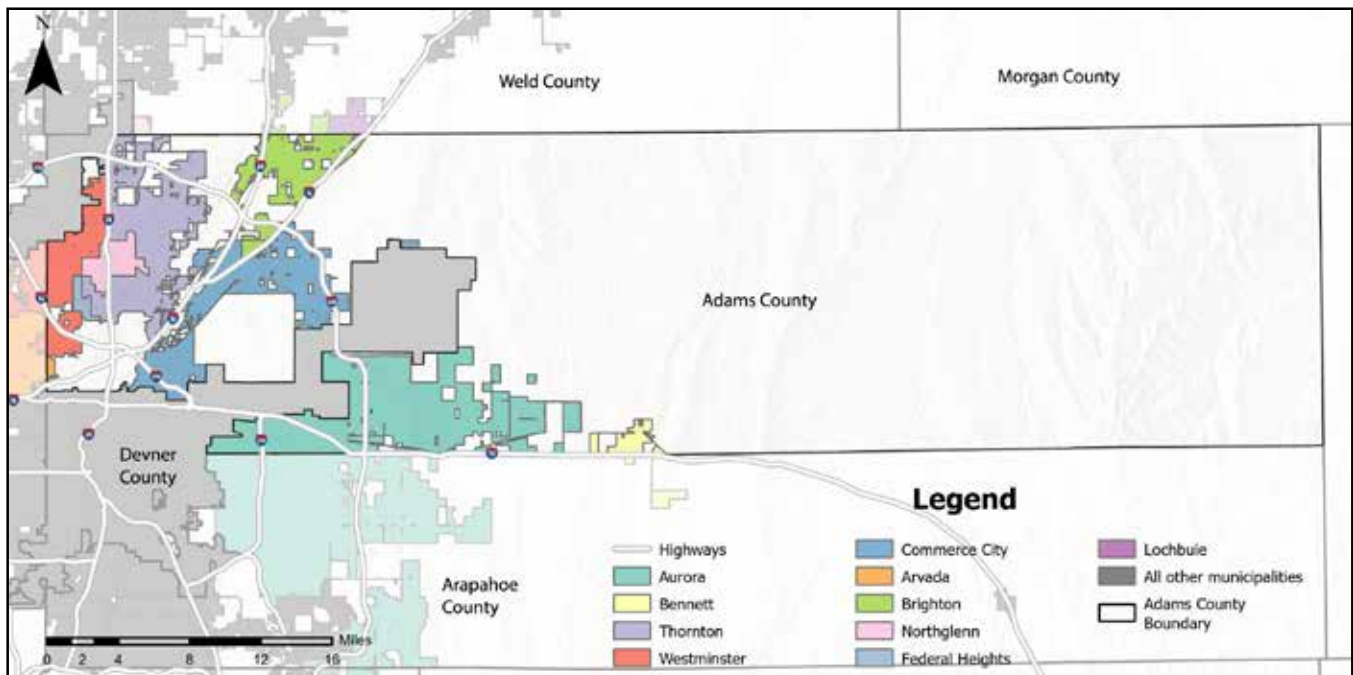
Sincerely,



Kelly Weidenbach, DrPH, MPH
Executive Director
Adams County Health Department

Introduction

Executive Summary • Core Public Health Services • Board of Health • People and Culture
• Finance • Office Locations • Adams County Health Department's True North • Strategic
Planning • CHIP



Municipalities of Adams County Adams County are in the northeastern part of the Denver metropolitan area, serving a population of over 533,000 residents and sprawling across almost 1,200 square miles. Our county is notably diverse, comprising approximately 46% White non-Hispanic, 42% Hispanic (of any race), 6% Asian, and 5% Black residents. Compared to the broader metropolitan region, Adams County stands out with a sizable 9.7% non-U.S. citizen population and 11.7% of residents lacking fluency in English. Median household income hovers just above \$91,000 a year, with approximately 9% of residents living below the poverty line. Educational statistics reveal over 15% of the county population have not completed high school, while only 28% possess a bachelor's degree or higher.

As a result of the dissolution of the Tri-County Health Department (TCHD), Adams County Health Department (ACHD) officially launched in January 2023 as the county's first-ever, single-county-focused local public health agency. ACHD is responsible for promoting and protecting the health of all residents in Adams County through a variety of programs and services and believes the successful pursuit of public health requires an understanding of community and a shared future.

ACHD focuses on a wide range of public health issues, including social determinants of health, disease prevention and control, maternal and child health, mental and behavioral health, food access, and environmental health. The

department also works closely with community partners to address specific health concerns and to improve overall health outcomes for residents.

ACHD provides a variety of clinical services either at low- or no-cost to the community, including immunizations; chronic disease prevention; Women, Infants and Children (WIC); nurse home visits for mothers, infants, and families; and increased testing for HIV and hepatitis C. In addition, ACHD provides sexual health services such as family planning and sexually transmitted infection (STI) treatment and testing services.

Adams County is extremely diverse in geography and community demographics, which includes being a majority-minority county with 42% of its population being Hispanic/Latino. Additionally, 11% of residents report having no health insurance. The county is also marked by its distribution between rural and urban populations, with 63,366 individuals residing in rural areas and 460,173 in urban settings. In response to this diversity, the health department is committed to addressing determinants of health that not only promote good health but also aim to reduce inequities affecting these diverse populations.

Executive Summary

The 2024 ACHD Annual Report outlines the department's continued progress in safeguarding and improving the health and well-being of Adams County residents. ACHD's mission is driven by a commitment to improving health outcomes for all Adams County residents. The department operates under its 2024-2026 Strategic Plan, ensuring a unified approach across six functional divisions: Environmental Health, Epidemiology and Data Science, Strategic Health Initiatives, Nutrition and Family Health, Performance and Business Excellence, and Public Health Nursing. Key highlights from the year include:

- » **Leadership and Strategic Direction:** The Office of the Executive Director continued to provide strong strategic leadership, working alongside the Board of Health, the Board of County Commissioners, Adams County government, and community partners. In 2024, ACHD implemented the first year of its 2024-2026 Strategic Plan, focusing on social determinants of health, community partnerships, workforce development, community-driven environmental health impacts, data and technology, and business excellence. These efforts were supported by more than 200 employees working to deliver impactful public health programs and services.
- » **Epidemiology and Data Science:** The Epidemiology and Data Science division advanced ACHD's capacity to respond to health incidents and monitor public health trends. The Health Data and Geographic Information Systems (GIS) team provided critical data assistance by handling nearly 300 data requests and forging partnerships with the Adams County Sheriff's Office and the 17th Judicial District Attorney's Office. The division also launched innovative data systems that enable timely, data-informed decisions and improved programmatic efficiency, freeing up more time to serve clients while creating a public data site for essential health information. Together with public health emergency preparedness initiatives, these efforts strengthened ACHD's ability to address both immediate and long-term public health needs.
- » **Environmental Health:** The Environmental Health division focused on protecting the community from communicable diseases and harmful environmental conditions. Key accomplishments included strengthening partnerships with several community-based organizations through existing grants and routine programmatic work, expanding air and water quality monitoring, and enhancing oversight of solid and hazardous waste sites.
- » **Strategic Health Initiatives:** In collaboration with the Adams County Thriving Communities Collective, the department completed the development of the 2025-2029 Community Health Improvement Plan (CHIP), focusing on Access to Care, Economic Security, and Housing as the top priority areas. Through all of this work, community members, including young people, have been meaningfully engaged to ensure community-driven solutions to addressing system-level issues impacting community health. [Link to CHIP external page.](#)
- » **Nutrition and Family Health:** In 2024, the division expanded its efforts to support family and community well-being through programs such as the Supplemental Nutrition Program for Women, Infants, and Children (WIC), which served 8% more clients than in 2023. The Supplemental Nutrition Assistance Program (SNAP) Outreach program saw a 66% increase in clients compared to 2023. Additionally, participation in diabetes education classes grew by nearly 96%, further supporting chronic disease prevention. By emphasizing nutrition education, breastfeeding support, and preventive care, the division has made a measurable impact on health outcomes in Adams County.
- » **Performance and Business Excellence:** The Performance and Business Excellence (PBE) division continued to support ACHD's infrastructure and strategic goals by focusing on quality improvement and operational excellence. PBE staff helped the department function efficiently and work well with partners across the county by working as trusted financial stewards, maintaining safe facilities, and developing practical systems that support ACHD's overall effectiveness.

As ACHD enters its third year, the department remains focused on its mission to promote community health and wellbeing, build community resilience, and address the most pressing public health challenges in Adams County. This

report serves as a testament to the collective efforts of ACHD's staff, partners, and community members in creating a healthier and more vibrant future.

Core Public Health Services



As a Colorado local public health agency (LPHA), ACHD structured itself to align to the Core Public Health Services and Minimum Quality Standards for Public Services as they are defined by the Colorado Board of Health.

History and Context

The **Colorado Public Health Act of 2008** updated the Colorado Revised Statutes (§§ **C.R.S. 25-1-501 – 25-1-521**) with modern standards for public health organizations in the state, establishing a baseline of quality service county and district public health agencies must provide.

As a result of the Public Health Act, the Colorado Revised Statutes outline two categories of services LPHAs must adhere to (**C.R.S. §25-1-502**): Core Public Health Services and Essential Public Health Services. These services must be defined by the State Board of Health. Per statute, the Colorado Board of Health is also required to develop qualifications for local public health directors and medical officers, as well as criteria for local public health plans (**C.R.S. §25-1-503**).

The Colorado Board of Health, directed by the above statutes, enacted key regulations (**6 CCR 1014-1 – 6 CCR 1014-10**) for public health agencies in the state to define Core Public Health Services, Essential Public Health Services, and Minimum Quality Standards.

Core Public Health Services

Core Public Health Services (**6 CCR 1014-7**), as defined by the Colorado Board of Health, were originally adopted in 2011. However, these were further revised in 2018 to more closely reflect the Foundational Public Health Services outlined by the Public Health Accreditation Board (PHAB). The most recent regulation, which was adopted in 2020,

defines the two elements that comprise Core Public Health Services:

- *Foundational Capabilities*, which LPHAs must build capacity for and leverage effectively. This also includes *Organizational Competencies* the agency must exhibit.
- *Foundational Public Health Services*, which LPHAs must provide to their communities.

Key Takeaway

ACHD has established its Foundational Capabilities and provides the Foundational Public Health Services outlined. Well into its second year of operation, the agency continues to strengthen its capacity to demonstrate these capabilities and provide a robust roster of public health services to the Adams County community that includes, and expands upon, the foundational public health services.

Essential Public Health Services

Essential Public Health Services (**6 CCR 1014-9**), as defined by the Colorado Board of Health, were adopted in 2013. The regulation also contained a critical list of Minimum Quality Standards for Public Health Services. LPHAs must meet these minimum standards to ensure continuous improvement, demonstrate accountability, and raise public health capacity. Both the Essential Public Health Services and Minimum Quality Standards share common DNA with PHAB's 10 domains for accreditation.

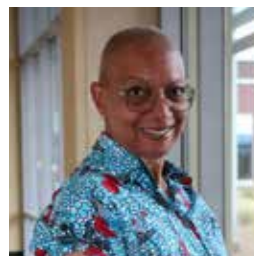
Key Takeaway

ACHD provides the Essential Public Health Services outlined in the regulation and surpassed the Minimum Quality Standards.

Board of Health



Dr. Sheela Mahnke
Term: 2022–Present
President



Dr. Dierdre Gilliam
Term: 2022–Present
Vice-President



Brett Keiling
Term: 2022–Present



Jeremiah Lindemann
Term: 2022–Present



Dr. Lisa Winkler
Term: 2022–Present

Established in August 2022, the Adams County Board of Health is the governing body of ACHD, whose jurisdiction extends over all incorporated and unincorporated areas of Adams County. The Adams County Board of Health is comprised of five members, all residents of Adams County. Board members are appointed by the Adams County Board of County Commissioners (BOCC) and serve five-year terms. In their appointments, the BOCC prioritizes representation across various backgrounds, geographical locations, community partner organizations, and life experiences. The Board of Health is responsible for hiring, evaluating, and advising ACHD's Executive Director, developing and promoting the public policies needed to secure the conditions necessary for a healthy community, reviewing and approving the local public health plan developed by the department, and issuing orders and adopting rules and regulations necessary for the proper exercise of the powers and duties vested or imposed upon the department or board.

In today's public health system, the leadership role of boards of health makes them an essential link between public health services and a healthy community. The ACHD Board of Health has played a vital role in the development of ACHD as the local public health agency for Adams County, ACHD's Strategic Plan, and ACHD's Community Health Improvement Plan (CHIP).

[Link to Board of Health website.](#)

People and Culture

ACHD's People and Culture services are provided by Adams County Government.

Metrics

Indicator	2023		2024	
	Counts	Percents	Counts	Percents
Total number of full-time employees (FTEs)	219	-	217	-
Full-time	191.5	87.6%	186	86%
Part-time	-	-	12	6%
Project designated	6	2.7%	6	3%
Temporary	21.5	9.8%	13	6%
Total number of open positions filled	3	-	52	-
Employees who enrolled in county health benefits	145	80.56%	168	84%
Employees who waived county health benefits	35	19.44%	32	16%

Finance

Actual Revenue

Sources	2023	2024
Federal	\$8,857,009.89	\$8,580,610.92
State	\$3,197,845.81	\$4,322,787.28
County Contribution (General Fund)	\$10,272,773.00	\$12,309,490.00
Other Grants and Contracts	\$1,105,619.92	\$1,736,138.60
Medicaid	\$120,596.46	\$147,969.10
Fees and Other Revenue	\$6,835,342.72	\$2,357,593.88
Yearly Total	\$30,389,187.80	\$29,454,589.78

Actual Expenses

Sources	2023	2024
Salaries, wages, and benefits	\$16,728,034.14	\$21,930,751.53
Operating Costs	\$11,193,939.85	\$5,895,147.28
Yearly Total	\$27,921,973.99	\$27,825,898.81

Note: Operating expenses in 2023 were significantly higher due to one-time start-up costs during ACHD's first year of operations.

ACHD receives revenue to fund operations from a variety of sources, which are listed below:

- » **General Funds:** These are the funds provided by Adams County Government.
- » **County Program Specific Funds:** Funds provided by Adams County Government for specific programs.
- » **Grants/Contracts:** Funding from state or federal governments, foundations, or other organizations for specific programs and services.
- » **Fees:** Fees collected while performing specific public health services (e.g., restaurant inspections, clinical services) for community members or private businesses.
- » **Donations:** Voluntary collections from clients seen for public health clinical services, used to help offset clinic expenses.
- » **State Funds and Federal-Pass Through Funds:** Funds received from Colorado Department of Public Health and Environment (CDPHE) and other state agencies. This includes state planning and support for public health services as well as program-specific funding for programs in various ACHD divisions.
- » **Federal Funds:** Funds received directly from the federal government.
- » **Medicaid Reimbursement:** These funds are received for providing direct services to qualified clients.
- » **Use of Fund Balance:** Operational funding provided by the ACHD Fund Balance for capital improvement purposes (e.g., facility renovations, information technology updates, and other capital replacements).
- » **In-Kind Support:** Non-cash support that can take the form of provided supplies, services, or rent.

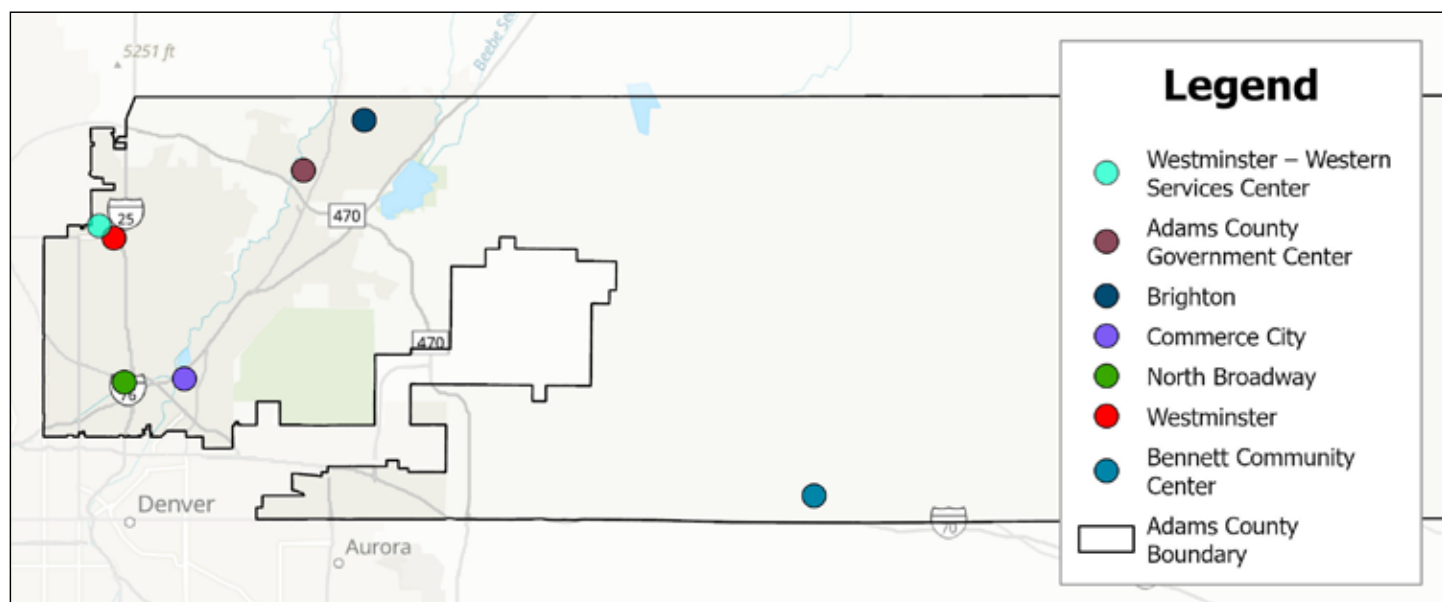
Office Locations

Funding/Revenue Source(s): General Funds

Year Ending FTE: 0

Year Ending Budget: \$885,000

ACHD currently has seven offices throughout Adams County, three of which are owned by Adams County. The Bennett Community Center is a community site coordinated through a memorandum of understanding. ACHD leases the remaining three locations: Brighton, Westminster, and North Broadway. The leasing of locations requires ACHD to negotiate the leases and pay rent out of available funding. [Link to ACHD office Locations.](#)



Adams County Government Center

4430 S. Adams County Pkwy.

Brighton, CO 80601

Services provided: Administrative services

Bennett Community Center

1100 W. Colfax Ave.

Bennett, CO 80102

Services provided: WIC, Harm Reduction, Sexual Health

Brighton

30 S. 20th Ave., Suites F and G

Brighton, CO 80601

Services provided: WIC

Commerce City

7190 Colorado Blvd., Suites 170 and 200

Commerce City, CO 80022

Services provided: Vital Records, WIC, Environmental Health, Nurse Support Program, Health Enrollment

North Broadway

7000 Broadway, Suite 400

Denver, CO 80221

Services provided: WIC, Sexual Health, Diabetes Education

Westminster

1401 W. 122nd Ave., Suite 200

Westminster, CO 80234

Services provided: WIC, Immunizations, Sexual Health, Nurse-Family Partnership

Westminster – Western Services Center

12200 Pecos St.

Westminster, CO 80234

Services Provided: Harm Reduction

Adams County Health Department's True North

On November 21, 2024, the Board of Health adopted Resolution No. 2024-004, approving the Adams County Health Department's Vision, Purpose, and Values Statements for an additional calendar year.

ACHD Values



Belonging

We are committed to ensuring everyone feels a sense of belonging by promoting diversity, equity, inclusion, and accessibility (DEIA).



Courage

We demonstrate courage by embracing innovation and facing challenges despite risks, fear of adversity, or uncertainty.



Community Leadership

We welcome and honor the voice of our community, their engagement, and self-determination in shaping the direction of our work.



Collaboration

We embrace and leverage collective strengths, diverse perspectives, talents, and resources with internal and external stakeholders to be more effective and achieve common goals.



Justice

We are dedicated to ensuring fairness, equity, and anti-racism in all actions and decisions, and upholding and protecting the rights and well-being of all individuals within the community.

Vision Statement

A community-led county where everyone has the opportunity to be healthy, valued, safe, and thriving.

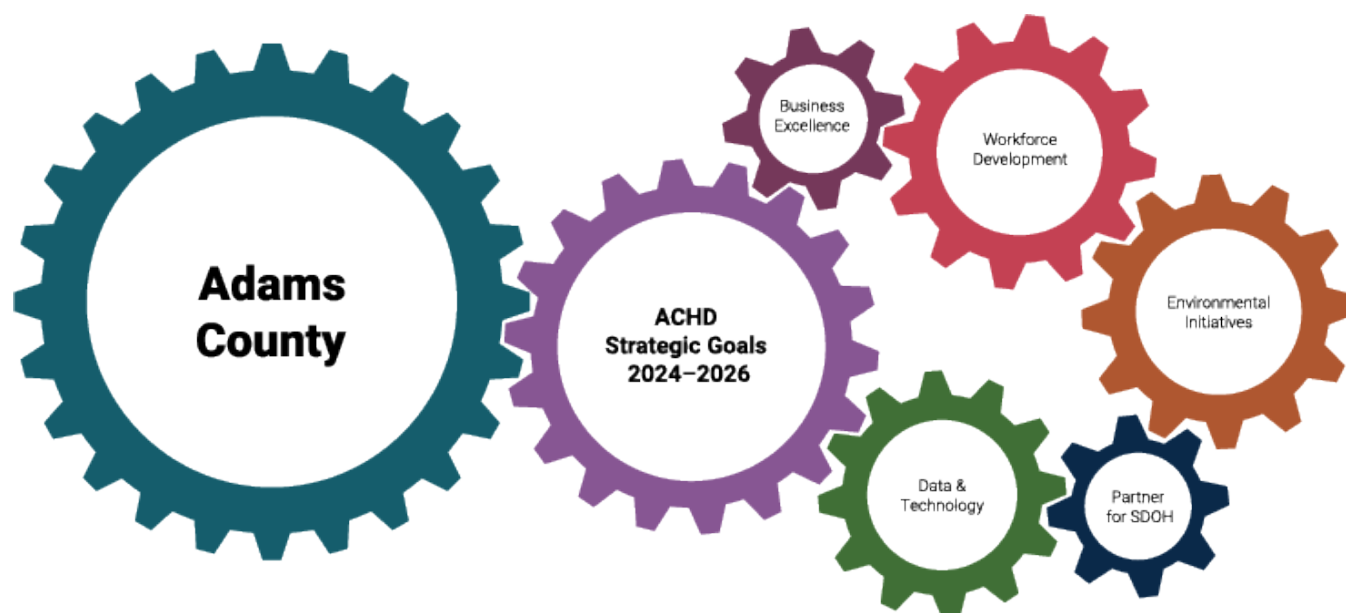
Mission Statement

To responsibly serve the Adams County community with integrity and innovation.

Purpose Statement

The purpose of the Adams County Health Department is to safeguard and improve our community's health and well-being.

Strategic Planning



The ACHD 2024–2026 Plan was approved by the Adams County Board of Health on December 21, 2023, marking the beginning of a transformative phase for the department. Throughout 2024, the focus has been on implementing the plan and aligning efforts across all divisions to ensure cohesive execution. Monthly goal reviews with the Board of Health have provided a platform for accountability, progress tracking, and alignment with organizational priorities.

In 2023, ACHD identified five strategic goals to guide its operations over the next three years. The Performance Management and Quality Improvement (PMQI) team facilitated the development of these goals by leading a well-rounded core team of directors, managers, and front-line staff through a comprehensive four-day strategic planning workshop. The workshop included presentations from 25 major programs and areas, including the Community Health Improvement Plan (CHIP).

Emerging from this process, five strategic goals have been prioritized to advance ACHD’s vision and purpose: 1) Partnerships to Enhance Social Determinants of Health (SDOH), 2) Workforce Development, 3) Community-Led Environmental Health Initiatives, 4) Data and Technology, and 5) Business Excellence.

Each goal is championed by two division directors and supported by cross-divisional teams who have developed detailed objectives, tactics, and actions. Metrics are in place to monitor progress and ensure measurable and sustainable outcomes, with an emphasis on continuous improvement throughout the plan’s implementation.

CHIP

The inaugural [2025–2029 Adams County Community Health Improvement Plan \(CHIP\)](#) was created in partnership with county colleagues, community partners, and the Adams County Thriving Communities collective. Required of all Colorado Local Public Health Agencies, the CHIP ensures a coordinated public health response to the community's identified health priorities.

The CHIP aligns efforts countywide under three priority areas identified by community partners and approved by the Board of Health in January 2024: Access to Care, Economic Security, and Housing. The plan was presented to the Board of Health for final approval on February 20, 2025, and a resolution was passed on March 20, 2025, with implementation scheduled to begin shortly thereafter.

ACHD recognizes the significant contributions of individuals and organizations in the development of this plan. Their collaboration has driven a commitment to higher standards, broader engagement, and ambitious goal setting. The CHIP reflects the strength and value of these partnerships.

Accomplishments

- Transitioned the Adams County Community Health Improvement Coalition into the Adams County Thriving Communities Collaborative (ACTCC) in January 2024 to guide, lead, and create the Community Health Improvement Plan (CHIP).
- Completed Phase 6 of the Colorado Health Assessment and Planning System (CHAPS) in December 2024, which involved creating the Community Health Impact Plan (CHIP) to fulfill state law requirements for local public health agencies.
- Guided the Adams County Thriving Communities Collective (ACTCC) through an iterative process of information collection and synthesis, prioritization, and thoughtful discussion in over 40 meetings throughout 2024.
- Continued to build and grow relationships with over 40 organizations and more than 70 individuals throughout Adams County in 2024 by identifying shared priorities and aligning efforts for greater collective impact, including collaborations with three county departments: Community Safety and Well-Being, Department of Human Services, and Community and Economic Development, as well as the new Office of Strategic Partnerships and Resilient Communities (SPARC).

“We were able to add additional partners and set goals based on the plans that we had. I enjoy being part of the ACTCC and the workgroups because we have a goal of helping residents of Adams County. I enjoy the collaboration with other agencies as well.”

– ACTCC member

“I liked the collaboration among like-minded professionals, but with different viewpoints based on community needs and experiences with both successful and unsuccessful approaches to the work.”

– ACTCC member

Office of the Executive Director

Executive Directors • Medical Director • Communications

Executive Directors

Funding/Revenue Source(s): General Funds

Year Ending FTE: 3

Year Ending Budget: \$1,061,660

The Executive Director and Deputy Executive Director are responsible for providing strategic leadership to the entire Department by working with the Board of Health, the Board of County Commissioners, County Leadership, the Public Health Leadership Team, staff, and community leaders to establish agency goals, strategies, plans, and policies. They oversee ACHD's six functional divisions: Environmental Health, Epidemiology and Data Science, Health Equity and Strategic Initiatives, Nutrition and Family Health, Performance and Business Excellence, and Public Health Nursing. The authority of the Executive Director is specified in Colorado State Statute 6 CCR 1014-6, and includes to administer and enforce public health laws, orders, rules and standards; exercise all powers and duties conferred and imposed upon agencies not expressly delegated to a county board; hold hearings, administer oaths, subpoena witnesses, and take testimony in all matters relating to the exercise and performance of his or her powers and duties; act as the local registrar of vital statistics; direct resources needed to carry out the county health plan; maintain records and serve as secretary of the Board of Health ensuring public notice of all meetings; and act as the custodian of all properties and records for the agency. The Executive Assistant to the Board of Health sits under this office, as well.

Medical Director

Funding/Revenue Source(s): General Funds

Year Ending FTE: 1

Year Ending Budget: \$195,773

At ACHD, one physician serves in the role of Medical Officer and Medical Epidemiologist. This position serves to meet state requirements that every local public health agency in Colorado have a Medical Officer who supports local and statewide efforts to advance health promotion and advise public health responses, make medical decisions in public health programs, and maintain agency-specific clinical nursing protocols. In the role of a Medical Epidemiologist, the ACHD physician consults with programs throughout the agency seeking expertise in epidemiological analyses, clinical aspects of disease, interpretation of data and research studies, disease investigations, and outbreak response. Additionally, this position oversees the development and implementation of epidemiology-based studies for the agency on a wide variety of public health topics. ACHD's Medical Epidemiologist is a critical resource to staff throughout any communicable disease response by providing infectious disease medical expertise across a multitude of topics. This position serves as a key liaison with the U.S. Centers for Disease Control and Prevention (CDC) and other valuable national committees during a response, while also providing ACHD emergency response staff with up-to-date guidance to support investigations, outbreak response, data presentation and interpretation, and public communication.

Accomplishments

- Responded to a sustained statewide increase in congenital syphilis by collaborating with the Public Health Policy and Public Affairs Senior Advisor to support the successful passage of House Bill 24-1456 (sponsored by Adams County House Representative Julia Marvin) and revisions to State Board of Health Rule 6 CCR 1009-01, mandating increased pregnancy screening for syphilis.
- Trained communicable disease and emergency response staff on responding to measles cases and outbreaks, ensuring systematic, thorough, effective, and nationally aligned investigations and disease control measures.
- Supported several investigations of suspected and confirmed infectious tuberculosis (TB) cases at Adams County Detention Center and the Aurora ICE Processing Center. Ensured timely and thorough TB case and contact investigations, bridged communication with facility leadership and the Denver TB Clinic, and ensured compliance with public health requirements and established disease control protocols.
- Collaborated with the Denver Health TB Clinic to improve TB case reporting and the timeliness of communication. Coordinated investigations in high-risk settings such as correctional facilities.

Communications

Funding/Revenue Source(s): General Funds

Year Ending FTE: 4

Year Ending Budget: \$400,000

At the beginning of 2024, the Communications program had 2 full-time employees (FTEs). By the end of the year, the program hired 2 additional external temporary positions.

The Office of Communications works to promote healthy behaviors and reduce public health risks through clear, relevant, and meaningful communication that resonates among ACHD's various audiences. The Communications team works with ACHD divisions to develop strategic communications plans, including marketing of ACHD programs and services, graphic design and production of collateral materials and reports, adherence to brand standards, media relations assistance and media monitoring, social media strategy and posts, and oversight of the ACHD website and Intranet. The Communications team also works closely with regional partners, such as cities and counties, schools, community partners, and state and federal government to align and share public health messages aimed at the communities ACHD serves.

Metrics

Indicator	2023	2024
Communications project requests completed	127	345
Total website unique visits	23,139	18,279
Total website pageviews	87,645	51,069
Facebook unique people reached	-	112,000
Instagram unique people reached	-	1,900

Accomplishments

- Established a more effective project management system to organize the hundreds of projects developed by the Communications team for all ACHD divisions and programs.
- Collaborated with the marketing firm Agency of Record to develop a memorable and engaging brand identity for select ACHD divisions and programs, reinforcing Adams County's role as a trusted public health partner.
- Expanded marketing initiatives to include out-of-home placements, paid social media advertising, and direct mail campaigns to increase ACHD's visibility and reach.

Epidemiology and Data Science

Communicable Disease Epidemiology • Public Health Emergency Preparedness and Response Program • Health Data and Geographic Information Systems



Division Administration

Funding/Revenue Source(s): Federal and General Funds

Year Ending FTE: 2

Year Ending Budget: \$439,461

The Epidemiology and Data Science (EDS) Division tackles critical public health issues through a multi-pronged strategy. The Health Data and GIS Program analyzes public health data by considering how communities, cultures, and the environment impact population health. This program also assists in developing web-based tools to support health department workflows and modernize program data processes. The Communicable Disease Epidemiology program is dedicated to safeguarding public health by identifying, managing, and preventing infectious diseases. The team partners with local organizations to investigate diseases and outbreaks, tailoring their response to each community's specific needs. The Public Health Emergency Preparedness and Response Program (EPR) focuses on bolstering public health safety and community resiliency in preparation for and responding to various natural or human-made threats. The team builds partnerships with regional organizations to coordinate emergency responses and strengthen community safety. The division as a whole works to support the initial development and implementation of the health department's strategic plan goal: Data and Technology, focusing on modernizing the use of data across the health department through improving systems, developing workflow applications, and improving staff data capacity.

Communicable Disease Epidemiology

Funding/Revenue Source(s): Federal, State, and General Funds

Year Ending FTE: 6

Year Ending Budget: \$727,222

At the beginning of 2024, the Communicable Disease Epidemiology program had 5 FTEs. By the end of the year, staffing increased to 6 FTEs due to an increase in external funding. All changes were approved through the formal BOH and BOCC processes.

The Communicable Disease Epidemiology program focuses on preventing the spread of infectious diseases and minimizing public health risks associated with reportable conditions transmitted through food, water, people, and animals. Its epidemiologists carry out continuous surveillance to detect new and emerging diseases, trends, and outbreaks. They investigate a wide range of diseases, including vaccine-preventable, gastrointestinal, and zoonotic diseases, aiming to identify exposure risks, vulnerable populations, and strategies to prevent transmission. The team quickly identifies outbreaks and implements containment strategies to prevent further spread. The program provides education and technical advice on disease prevention and control to partners and the public.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Suspect or confirmed outbreaks investigated	206*	74	23	33	40	170*
Reportable disease investigations	398	77	106	132	106	421
Animal bites reported	501	119	142	172	142	575
Rabies exposure investigations	127	10	39	56	46	151

* 2023 includes 110 (1 flu, 109 COVID) investigated by CDPHE; 2024 includes 57 (4 RSV/flu, 53 COVID) investigated by CDPHE.

From August 1, 2023, to July 31, 2024, the Communicable Disease Epidemiology program used COVID-19-specific funding from the ELC 2.1 grant (through CDPHE) to support a combination of existing and temporary staff. The grant partially funded five permanent FTEs whose COVID-19 responsibilities comprised only part of their broader roles. It also fully funded eight temporary, project-specific FTEs dedicated to COVID-19 response and recovery efforts. The temporary roles included community health workers, a communicable disease epidemiologist, data analysts, resource coordination staff, and partner support positions. When funding ended, on July 31st, permanent staff integrated their COVID-related responsibilities into their regular duties. Six temporary positions were concluded as planned, while two positions continued into 2025 through a limited grant extension to support ongoing transition activities.

Accomplishments

- Investigated an outbreak of Legionellosis (Legionnaire's disease) associated with a mobile home park. The investigation involved notifying approximately 750 homes through written communication and in-person events, operating a public hotline, and coordinating with park management, legal counsel, and the ACHD Environmental Health Water Team for environmental sampling and mitigation planning. The team collaborated with mobile home park management

and immediately initiated the following actions upon identifying the outbreak:

- Notified residents about the outbreak investigation
- Opened a call center and held an in-person resident meeting to provide real-time information and support
- Presented outbreak details and public health response at the city council meeting of the affected jurisdiction
- Ensured water sampling, testing, and disinfection of potential sources were completed
- Strengthened rabies prevention efforts by working with Riverdale Animal Shelter and the CDPHE Laboratory Services to streamline specimen testing. As a result, pets and families received timely results and recommendations, while the time spent on investigations was reduced.
- Trained 47 animal control professionals from 9 municipalities serving Adams County on rabies prevention and control, that enhanced partnerships and improved processes with the ACHD Communicable Disease team.
- Participated in a multi-state response with federal, state, and local public health agencies to investigate botulism associated with cosmetic procedures. The collaboration led to the identification and removal of an unlicensed product from the U.S. market.

Public Health Emergency Preparedness and Response Program

Funding/Revenue Source(s): Federal Funds

Year Ending FTE: 3.5

Year Ending Budget: \$464,813

The Public Health Emergency Preparedness and Response Program (EPR) Program focuses on bolstering public health security by safeguarding against and responding to various natural or human-made threats. This program is pivotal in maintaining emergency operations and continuity plans, ensuring a seamless response to incidents affecting Adams County. EPR regularly conducts drills and real-world responses, emphasizing ongoing enhancements based on strict federal and state evaluations. The program collaborates with regional partners, including emergency services, fire departments, law enforcement, and several interagency committees and work groups to foster a unified response framework across multiple counties in the Denver Metropolitan Area. EPR routinely collaborates with the Adams County Office of Emergency Management (OEM), meeting monthly to coordinate on preparedness activities, response initiatives, and ongoing projects. The two programs actively participate in each other's training sessions and exercises, exchanging strategies to strengthen coordination and mutual support during emergencies. Together, EPR and OEM refine emergency response plans, define clear roles and responsibilities, and eliminate overlap to streamline emergency coordination.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
CDPHE spill reports shared with the Adams County Office of Emergency Management	60	19	35	26	31	111
Public Health Incident Management Team (PHIMT) trainings completed	2	0	1	1	3	5
Partner training and exercise attended/participated	-	3	9	5	3	20

Accomplishments

- Participated in over ten preparedness events in partnership with the Adams County Office of Emergency Management to educate the community on responding to natural and human-caused disasters.
- Developed and executed the department's Continuity of Operations Plan to maintain essential functions and services during adversity or displacement from office locations; secured approval from the Public Health Leadership Team on June 20, 2024.
- Created a new Public Health Emergency Preparedness Grant Resiliency Plan on April 13, 2024. The plan was incorporated into the ACHD Responder Health and Safety Plan to protect workforce health and support partner first responders during adversity.
- Finalized the new Adams County Strategic National Stockpile Distribution Plan on May 6, 2024. Exercised and tested the plan during a May 3, 2024, workshop—the department's first test of a portion of the Medical Countermeasures Plan—and gathered insights from jurisdictional

emergency managers, hospitals, county staff, law enforcement, and public health partners to strengthen the plan.

- Developed the Mass Fatalities Management Plan in collaboration with the Adams County Coroner's Office on November 19, 2024. Identified and documented health and medical resources the department could provide during mass fatality incidents exceeding the coroner's surge capacity.
- Partnered with emergency managers from Adams County and the City of Aurora to test coordinated response capabilities for protecting life, health, and safety.
- Devised a recruitment strategy in coordination with the Rocky Mountain Medical Reserve Corps to increase Adams County participants in the CDPHE Volunteer Mobilizer program on October 10, 2024.

Health Data and Geographic Information Systems

Funding/Revenue Source(s): Local (Opioid) and General Funds

Year Ending FTE: 5

Year Ending Budget: \$710,519

At the beginning of 2024, the Health Data and GIS program had 5 FTEs. By the end of the year, staffing increased to 6 FTEs due to an FTE transfer from the Environmental Health Division.

The Health Data and Geographic Information Systems (GIS) Program analyzes public health data by considering how communities, cultures, and the environment impact population health. The team collects, manages, and analyzes health, demographic, and community data to clearly communicate the factors that shape public health. Using GIS, statistical modeling, community engagement, and creative data dissemination, this program provides a forward-thinking approach to health data analysis.

The Health Data and GIS Program collaborates with various entities, including other ACHD programs, elected officials, and the public, aiming to enhance awareness of the community's health status and the factors influencing it. The team builds meaningful stories around health outcomes using a variety of data sources and community input, incorporating both health and non-health datasets to paint a clear picture of community health concerns.

The team develops custom applications that streamline data collection and integrate smoothly with existing workflows across the health department.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total data requests received from ACHD programs and staff	278	92	62	49	88	291
Web-based applications developed (includes web applications,	206	50	57	48	81	236
Surveys/data collection tools created	141	10	58	26	28	122

Accomplishments

- Launched the Harm Reduction Data System on July 1, 2024, reducing redundant data entry by integrating with the state health department's system and enabling real-time tracking of testing, encounters, supplies distributed, and community events. By December 2024, the system documented 972 unique clients and significantly enhanced program reach and operational efficiency by freeing up staff time for direct client care.
- Launched several public-facing projects throughout 2024 to expand access to critical health data. Delivered key products such as fact sheets on local population and behavioral health, story maps highlighting community demographics, and dedicated websites and apps covering mental health, substance use, healthy aging, and community well-being.
- Created real-time data feeds on healthy farmers markets, rabies cases, and community events through a public-facing data site, providing community members, stakeholders, and policymakers with timely, transparent information to support informed decision-making.
- Developed and launched the ACHD Central Referral System in September 2024, initially

integrating workflows for four ACHD programs as a pilot project to streamline internal referral communications, reduce back-door channels and follow-up losses, and capture referral data for ongoing monitoring. By December 2024, the system supported 163 cases and laid a solid foundation for expansion for coordination with more internal programs.

Environmental Health

Retail Food Program • Vector Surveillance • Body Art Inspections • Solid and Hazardous Waste (Rocky Mountain Arsenal and Landfills) • Water Quality • School Inspections • Childcare Inspections • Industrial Hygiene, Healthy Housing, Lead and Radon • Air Quality (Love My Air) • Business Support and Environmental Health Informatics



Division Administration

Funding/Revenue Source(s): General Funds

Year Ending FTE: 2

Year Ending Budget: \$388,760

The Environmental Health (EH) division works to prevent communicable diseases and address environmental conditions that threaten public health. Programs include Retail Food Inspections, Child Care and School Inspections, Swimming Pool and Spa Inspections, Onsite Wastewater Treatment Systems (Septic) Permitting, Body Art Inspections, Vector Surveillance, Healthy Homes/Indoor Air Quality, Solid Waste Landfill Inspections, and Water Quality. The division provides various services, including routine inspections and permitting, complaint investigation, education, consultation, and work on regional issues, such as air quality through community air monitoring.

Retail Food Program

Funding/Revenue Source(s): State Grant, Inspection Fees, General Funds

Year Ending FTE: 14

Year Ending Budget: \$1,828,434

The Retail Food program aims to prevent foodborne illnesses originating from food prepared in licensed retail food establishments. Services provided to licensed facilities include risk-based inspections, review and approval of plans for new or extensively remodeled facilities, opening inspections and license approvals, response to complaints and investigations of foodborne illnesses, food safety education for restaurant, mobile food, and special event operators, enforcement actions against facilities failing to meet safe food handling requirements, and assessment of damage to retail food establishments from disasters, such as fires or floods, to ensure a safe food supply. This program aims to enhance food safety through collaboration with state and local partners by standardizing food program data.

The Retail Food program also utilizes the FDA's nine Voluntary National Standards (VNS) to enhance the services provided to the public. These standards help health department agencies improve retail food safety by encouraging the use of proven risk-reduction strategies, highlighting areas needing improvement, and supporting resource allocation and innovation.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Retail food establishment inspections (all inspection purposes)	1,491	638	599	560	644	2,441
Routine inspections	-	430	425	397	500	1,752
Re-inspections	-	33	46	51	31	161
Opening/pre-operations	-	169	124	89	111	493
Mobile retail food establishment licenses issued	271	86	76	23	8	193
Retail food establishment plan reviews approved	105	11	34	26	23	94

Accomplishments

- Secured the Self-Assessment of the 9 Food and Drug Administration (FDA) Voluntary National Standards (SA-9) and developed a Comprehensive Strategic Improvement Plan (CSIP) under the National Environmental Health Association (NEHA)–U.S. Food and Drug Administration (FDA) Retail Flexible Funding Model (RFFM) Grant Program, resulting in an FDA-approved \$24,500 grant for the 2024 project period to enhance local food safety systems.
- Completed and submitted a self-assessment of all nine FDA Voluntary National Retail Food Regulatory Program Standards in August 2024, supporting national uniformity in retail food safety oversight and promoting improved consumer health protections.
- Collaborated with the CDPHE, Centers for Disease Control and Prevention (CDC), and FDA to conduct on-site investigations of Adams County vape, smoke, and tobacco shops during the national Diamond Shroomz Brand product recall, helping mitigate public exposure to products linked to severe illness and adverse health effects.

Vector Surveillance

Funding/Revenue Source(s): General Funds

Year Ending FTE: 1

Year Ending Budget: \$77,922

The Vector Surveillance program reduces the risk of exposure to potentially fatal vector-borne diseases. In Adams County, diseases like arboviral encephalitis (including West Nile virus), plague, hantavirus, and tularemia are endemic. Due to the unpredictable nature of outbreaks, continuous surveillance of mosquito breeding sites is essential. The program conducts monitoring for diseases such as Western Equine Encephalitis, St. Louis Encephalitis, and West Nile virus through various means, including mosquito and human surveillance, alongside mosquito testing, and also conducts investigations of prairie dog die-off to monitor plague presence. Services include environmental surveillance for arboviruses, mosquito trapping, identification and testing, animal specimen testing, public education and outreach, investigation of prairie dog colony complaints, hantavirus educational investigations, and flea collection for plague testing.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Number of complaints investigated	36	4	8	8	17	37

Accomplishments

- Conducted weekly mosquito trapping to collect mosquitoes and submit them for West Nile virus testing at the Colorado State Laboratory.
- Coordinated data sharing with Vector Disease Control International (VDCI) during summer 2024 to support targeted mosquito control treatments, reducing the transmission risk of West Nile virus in the community.
- Distributed West Nile virus educational materials to community partners for use at local summer events and provided free insect repellent at health department offices in August 2024, enhancing public awareness and promoting preventative health measures.

Body Art Inspections

Funding/Revenue Source(s): Inspection Fees, General Funds

Year Ending FTE: 1

Year Ending Budget: \$126,220

The Body Art Inspection Program aims to eliminate or minimize disease-related risks associated with body art procedures and protect consumers using licensed body art facilities in Adams County. Body art includes techniques such as body piercing, tattooing, branding, sculpting, and scarification. The program conducts annual health inspections, inspects new and transferred facilities, maintains records, investigates complaints and outbreaks, provides public and stakeholder education and engagement, and enforcement as necessary.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Number of facilities inspected	37	5	9	12	17	43
Routine inspections	-	5	8	12	15	40
Re-inspections	-	0	1	0	1	2
Number of complaints	0	3	1	2	1	7
Number of openings and plan reviews	10	0	0	0	1	1

Accomplishments

- Conducted 43 body art facility inspections in 2024, including 40 routine and 2 re-inspections, which helped to ensure operational compliance and reduced disease-related risks for body art clients across Adams County.

Solid and Hazardous Waste (Rocky Mountain Arsenal and Landfills)

Funding/Revenue Source(s): Inspection Fees, General Funds

Year Ending FTE: 2

Year Ending Budget: \$240,878

The Solid and Hazardous Waste program, including the Rocky Mountain Arsenal (RMA) program, is dedicated to managing the impacts of solid and hazardous wastes on human health and the environment.

Local health departments are authorized by Colorado law to assist in compliance activities for solid waste sites. The program oversees solid waste disposal sites to ensure these facilities are properly constructed and operated to protect public health and the environment. The program provides a variety of services, including investigating solid and hazardous waste complaints, monitoring construction and operational activities at solid and hazardous waste disposal sites, serving as a community liaison to responsible parties and regulatory agencies for solid and hazardous waste sites, responding to spills and emergencies involving hazardous materials to support local fire and law enforcement agencies 24/7, and inspecting waste tire generators.

The RMA oversight program is included in the broader Solid and Hazardous Waste Program. The RMA program protects the community from environmental risks linked to past waste disposal activities and current operations at the Rocky Mountain Arsenal. Off-post groundwater quality is monitored to verify that there is no public risk through private well water consumption and that RMA cleanup efforts continue to be effective. On-post remediation oversight is provided, consistent with the provisions of the Certificate of Designation issued by Adams County on Sept. 29, 1997, and by specific agreements ACHD has with Adams County and the Department of the Army. Services conducted include sampling and analyzing water from selected private wells in the RMA off-post study area for contaminants, oversight of completed on-site waste disposal areas, caps and covers, acting as liaison with affected communities in Adams County concerning RMA-related issues and the responsible parties (U.S. Army and Shell Oil Co.), and providing oversight of RMA remediation and monitoring activities.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Monthly inspections at Tower Landfill	12	3	3	3	3	12
Annual inspections at CSI, East Regional, and Clean Harbors Deer Trail Landfills	3	0	1	1	0	2
Inspections during linear construction at Tower Landfill	2	0	0	1	3	4

Accomplishments

- Inspected Tower Landfill operations monthly as part of the agreements with Commerce City. No significant issues were noted during the inspections.
- Conducted annual inspections of the East Regional and Conservation Services, Inc. (CSI) landfills in partnership with the CDPHE and the Adams County Community and Economic Development Department to ensure proper landfill operations, protect groundwater from leachate contamination, and monitor air quality, ensuring public health and environmental safety for surrounding communities.

- Sought compliance with environmental regulations and maintained open communication with landfill operators, providing residents with timely updates on activities that could impact their neighborhoods.
- Reviewed two separate repair plans for liner damage at the Clean Harbors Deer Trail landfill caused by erosion and heavy equipment, ensuring that proper remediation practices were followed and that hazardous waste containment met stringent safety standards to protect land, water, and air quality.
- Sampled private wells impacted by historical underground plume contamination throughout fiscal year 2024 in collaboration with the US Army, ensuring the continued safety of drinking and irrigation water and reassuring residents that proactive environmental monitoring was in place to detect and address potential threats early.

Water Quality

Funding/Revenue Source(s): Inspection Fees, General Funds

Year Ending FTE: 3

Year Ending Budget: \$373,119

The Water Program protects public health by monitoring water quality, septic systems, and recreational waters to prevent disease transmission. The program involves several aspects of water supply and quality, including but not limited to drinking water, private well water, reclaimed water, greywater, storm water, and emerging contaminants such as per- and polyfluoroalkyl substances (PFAS). The program tackles broader water-related issues by responding to complaints, investigating disease outbreaks like Legionella, supporting responses to contamination incidents such as sanitary sewer overflows or hazardous material spills, participating in watershed meetings, and collaborating on emerging contaminant research.

The Onsite Wastewater Treatment System (OWTS) program ensures wastewater from homes and businesses not serviced by a public sewer is adequately treated to prevent surface and groundwater contamination. Services include permitting and inspection of all new and repaired OWTS, issuing use permits for existing systems after completed inspections by qualified wastewater professionals, investigating malfunctioning systems, consulting with planning departments, homeowners, engineers, and installers, and training and licensing of OWTS contractors and cleaners.

Recreational water features at aquatic venues and swim beaches have long been recognized as an efficient medium for the transmission of communicable diseases and are also subject to a variety of accidents/injuries. The program conducts several services for recreational waters, including biannual inspections of all public and semi-public swimming pools, spray pads, and spas; investigating citizen complaints and concerns; reviewing plans and conducting opening inspections for newly constructed or remodeled pools, spray pads, and spas; and Legionella and other water-related disease outbreak investigations.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Number of OWTS permits issued	374	84	107	102	114	407
OWTS/septic system complaints investigated	7	4	3	0	1	8
Spill complaints investigated	53	6	11	10	8	35
Number of recreational water facility inspections completed (all)	262	45	71	88	53	257
Routine	-	36	42	20	0	98
Re-inspections	-	4	10	7	11	32
Second Inspections - Chemical	-	0	5	45	40	90
Recreational water facility ordered closures	40	5	10	9	10	34

Accomplishments

- Secured \$147,890 in grant funding from CDPHE, in partnership with the community-based organizations Groundwork Denver and Womxn From The Mountain, to rebuild public trust in drinking water systems in underserved areas of Commerce City and Thornton. Funding supported public outreach, PFAS education, and distribution of filters that improved water taste, odor, and safety.
- Responded to a major Legionella outbreak at a mobile home park in Adams County in partnership with the Communicable Disease Epidemiology (CDE) program. Over a year, ACHD staff conducted water sampling, monitored water pressure events, oversaw hydrant flushing and pool/spa cleanings, and engaged directly with residents to educate and address concerns. No additional illnesses were reported, and staff participated in resident-focused community events to reinforce prevention and communication efforts.
- Developed a new digital property record search tool and after-hours call log system and resolved all outstanding high-priority OWTS renewable use permits. These innovations streamlined data access across multiple record types, reduced response times, and increased efficiency in delivering timely and accurate information to the public.

School Inspections

Funding/Revenue Source(s): General Funds

Year Ending FTE: 2

Year Ending Budget: \$231,900

The School Health Inspection Program ensures a safe learning environment for students by conducting routine inspections to identify, educate, and address potential health and safety hazards within all public, private, and parochial schools for grades K-12 within Adams County. The program performs routine school health inspections as well as inspections for school cafeterias, licensed childcare programs, and pools. School health inspections are conducted every three years for low-risk areas, such as health service rooms, general classrooms, and recreational rooms, and annually for high-risk areas, such as science labs, art rooms, and vocational classrooms.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Routine inspections	-	-	-	7	28	35
Follow-up inspections	-	-	-	13	28	41
Complaints	-	-	3	12	1	16

Accomplishments

- Delivered introductory trainings through a webinar series to Adams County school staff on March 6 and April 10, 2024, covering chemical management, chemical safety, and disease prevention measures related to school health inspections. This training equipped school personnel with practical knowledge to maintain safer learning environments and supported compliance with public health standards.

"I really enjoy working with [Adams County's School & Childcare Inspection Team] and how they always make sure to provide education."

– Jan Ritner, The Academy of Charter Schools Before & After Care Program Supervisor.

Childcare Inspections

Funding/Revenue Source(s): Inspection Fees, General Funds

Year Ending FTE: 1

Year Ending Budget: \$95,883

The Childcare Inspection Program aims to safeguard the health and well-being of children by preventing the spread of infectious diseases and reducing environmental hazards in various licensed childcare settings, including childcare centers, preschools, before- and after-school programs, 24-hour care facilities, and summer camps. The program conducts routine and opening health inspections, site evaluations for room changes, investigates complaints, provides outbreak response and technical assistance, and reviews facility plans for newly constructed and extensively remodeled childcare facilities. It also offers ongoing training, support, and education to childcare operators and staff.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total childcare facilities (operating)	236	-	-	-	-	247
Total routine inspections	224	54	59	62	79	254
Total follow-up inspections	93	25	21	17	17	80
Plan reviews submitted	4	3	2	0	0	5
Plan reviews completed	3	1	2	3	0	6
Openings completed	12	5	7	16	5	33
Change of ownerships completed	4	1	1	1	1	4
Site evaluations completed	20	6	7	13	0	26
Complaints	5	3	2	2	2	9

Accomplishments

- Partnered with the ACHD Industrial Hygiene Program to offer at-cost radon testing to more than 14 childcare facilities, helping them meet regulatory requirements and promoting safer indoor air quality for children and staff.
- Participated in the CDPHE's childcare regulation revision process to advocate for the needs of Adams County providers, highlight regulatory challenges, and support policy changes that uphold strong health and safety standards.

Industrial Hygiene, Healthy Housing, Lead and Radon

Funding/Revenue Source(s): Inspection Fees, General Funds

Year Ending FTE: 1

Year Ending Budget: \$104,561

The Industrial Hygiene (IH) Program aims to reduce indoor air hazards, support workplace health policies, reduce public exposures to hazardous contaminants and safety hazards, and reduce workplace injuries and illnesses. Good air quality is essential for safe and healthy living. Indoor air pollution is one of the top five health hazards. Major sources of indoor air pollution include combustion sources (such as gas furnaces and stoves), lead, asbestos, radon, mold, pests, and various chemicals. Poor indoor and outdoor air quality can worsen asthma symptoms. Poor indoor air quality is associated with inadequate housing conditions, characterized by improper maintenance, aging, or neglect, often observed in low-income communities. Consequently, there is a significant need to address respiratory illnesses and diseases, like asthma, in these target communities.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Housing complaints received and investigated	43	9	12	15	8	44
Number of methamphetamine properties investigated	20	6	3	0	0	9
Mold complaints received and investigated	61	7	12	16	15	50
Number of residential radon tests distributed	80	286	0	0	0	286
Number of lead cases investigated	41	5	6	3	10	24

Accomplishments

- Secured a prominent billboard along I-76 between January and March 2024 to promote the availability of free radon test kits during National Radon Action Month. This high-visibility outreach generated over 300 online requests and enabled residents to test for radon—a leading cause of lung cancer—under optimal winter conditions, enhancing public health protection through early detection.
- Conducted a successful giveaway of 300 free radon test kits in January 2024, identifying elevated radon levels in 50% of participating homes. This campaign empowered residents to pursue mitigation efforts and provided critical guidance online, reducing long-term health risks associated with radon exposure.
- Expanded lead poisoning prevention efforts by offering home assessments to all at-risk children, regardless of blood lead levels. By training the Industrial Hygiene team on the CDPHE EpiTrax system, ACHD accelerated investigation timelines and improved coordination with healthcare providers, delivering faster interventions and better outcomes for families.
- Secured \$70,000 in additional funds in September 2024 from CDPHE's Childhood Lead Poisoning Prevention Program to strengthen ACHD's lead response capacity. This funding supported six

Environmental Health Specialists in completing the 40-hour state-required Lead Inspector and Risk Assessor training, covered certification costs, and provided a full suite of lead sampling tools. ACHD also acquired an X-ray Fluorescence (XRF) meter to enable on-site lead detection in homes, facilitating immediate action to protect children from harmful exposure.

Air Quality (Love My Air)

Funding/Revenue Source(s): Federal Funds

Year Ending FTE: 1

Year Ending Budget: \$161,598

The Air Quality program monitors and improves air quality in Adams and Arapahoe Counties through the Colorado Local Entity Air Network (CLEAN). This collaborative network equips community partners, known as cohort members, with low-cost sensors to measure particulate matter (PM2.5) and nitrogen dioxide (NO2). Supported by an EPA grant, CLEAN's goals include advancing air quality monitoring, raising awareness, and empowering community members to reduce health risks. CLEAN also serves as a collaborative platform for partners to share air quality updates, learn from experts, and discuss innovative solutions to environmental issues.

ACHD provides technical support to ensure partners can effectively use sensor data to educate and inform communities about air quality and health impacts. Data from the sensors are publicly available on the [CLEAN dashboard](#) and through the "Love My Air Network" application on Android and Apple devices. Public access to this data helps raise awareness about air quality topics and empowers families and individuals to make informed behavior changes to protect their health and reduce pollution.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Air sensors deployed to partner sites throughout Adams and Arapahoe Counties	21	22	2	0	0	24
Monthly cohort meetings	12	3	3	3	2	11
Cohort partners supported	9	10	2	0	1	13

Accomplishments

- Collaborated with the Cities of Westminster, Brighton, and Aurora to expand the CLEAN cohort in 2024, integrating them alongside the original group of municipalities and organizations, including Commerce City, Northglenn, Thornton, Adams 12 Five Star Schools, Anythink Library, Arapahoe County, Arapahoe Libraries, Englewood, and Sheridan. This regional expansion strengthened collective efforts to address air quality and environmental health across jurisdictions.
- Hosted CLEAN's first in-person cohort check-in in August 2024 to foster rapport among partners, review project progress, and discuss future goals. Highlights included sharing Sheridan's handheld air sensor loan program, engaging in sustainability planning, and identifying opportunities for regional collaboration on environmental policy and communication strategies.
- Facilitated community brainstorming sessions in May and June 2024 with nearly 80 residents and representatives from community-based organizations, along with 19 staff from Adams County Health Department, Community Safety and Well-Being, and Community and Economic Development. These sessions collected valuable input on pressing social and environmental issues, informing future CLEAN programming and engagement strategies.
- Participated in seven community events from June through December 2024 to raise awareness about air quality and strengthen public understanding of local environmental initiatives.

- Presented key accomplishments and findings from the Love My Air program and CLEAN at the Colorado Environmental Health Association (CEHA) Conference in September 2024, highlighting regional successes and sharing insights with environmental health professionals statewide.
- Produced CLEAN's first Air Quality Index Short Report in partnership with Clarity Movement Co., documenting significant program achievements and providing stakeholders with actionable insights on regional air quality trends.

Business Support and Environmental Health Informatics

Funding/Revenue Source(s): General Funds

Year Ending FTE: 5

Year Ending Budget: \$474,985

At the beginning of 2024, the EH Informatics/Business Support program had 6 FTEs. By the end of the year, staffing decreased to 5 FTEs due to an FTE transfer to the Health Data and GIS program.

The Business Support and Informatics team within the EH Division works closely to provide comprehensive financial management, technical guidance, and data support. Their focus includes ensuring data quality and security and managing critical financial operations such as reconciliations and accounts receivable. They collaborate with the CDPHE to conduct data analyses and improve workflow processes across EH programs. This team is vital in optimizing data entry, retrieval, and reporting for all EH programs. The core leadership team oversees the division's environmental health activities, ensuring financial oversight and effective data management.

Accomplishments

- Enhanced the Onsite Wastewater Treatment System (OWTS) Installer/Cleaner renewal application process by implementing a more efficient system for invoicing, form completion, and mailing renewal letters. This update streamlined the annual licensing process, allowing clients to submit all required materials, including payment, in a single mailing, saving time and improving convenience.
- Added all school inspections as a new program element in ACHD's environmental health data management system to enable digital reporting, streamline data tracking, and improve access to inspection records. This change eliminated the need for handwritten reports, saving inspectors time and enhancing the efficiency of routine K–12 school health inspections aimed at identifying and resolving potential health and safety hazards in school environments.
- Uploaded all historical OWTS attachments into the environmental health data management system to expand public access to important system documents. Residents can now download as-built drawings, permits, and repair records anytime, removing the need to contact the office and empowering homeowners to retrieve vital documents at their convenience.

Strategic Health Initiatives

Behavioral Health • School Health Policy and Prevention • State Tobacco Education and Prevention Program • Communities Organizing for Prevention • Healthy Beverages for All • Maternal, Child, and Family Health • Regional Health Connector • Housing Stability • Food Access and Systems • Health Enrollment Team • Public Health Planning & Evaluation



Division Administration

Funding/Revenue Source(s): General Funds

Year Ending FTE: 4

Year Ending Budget: \$956,622

The Strategic Health Initiatives Division serves as the primary expert resource for developing, establishing, and maintaining innovative, evidence-informed, community-based public health promotion and disease prevention strategies identified through data analysis and community engagement. This work is achieved through community health data and resource analysis, interdisciplinary collaboration, and organizational and public policy to improve individual and community health while addressing structural obstacles to well-being.

ACHD places a strong emphasis on promoting positive community and behavioral health practices and systems while advancing social determinants of health that ensure all our community members have the opportunity to thrive. Community and behavioral health programs and services include tobacco prevention and cessation, mental and behavioral health promotion, substance use and violence prevention, healthy beverages, and youth and school engagement. Social determinants of health programs and services include health insurance enrollment, housing stability, health systems coordination and navigation, food security, and maternal, child, and family health systems.

Behavioral Health

Funding/Revenue Source(s): Federal and General Funds

Year Ending FTE: 4

Year Ending Budget: \$2,710,362

At the beginning of 2024, the Behavioral Health program had 3 FTEs. By the end of the year, staffing increased to 4 FTEs due to an increase in grant funding. All changes were approved through the formal BOH and BOCC processes.

The Behavioral Health Program collaborates with community partners to enhance mental health, prevent or address substance use, and promote well-being to prevent suicide and overdose. Its focus is on uniting efforts across sectors to apply a shared risk and protective factors approach and implement strategies spanning the behavioral health continuum – from promoting positive mental health and preventing the onset or progression of mental and substance use disorders to providing intervention treatments, supporting recovery, and restoring good mental health. The staff assesses and communicates community needs, identifies gaps and solutions in the behavioral health system, analyzes and shares data, trends, and evidence-based practices, and collaborates to implement community-led solutions. Priority is given to reducing mental health stigma, providing community-initiated case trainings such as Mental Health First Aid, increasing availability and utilization of services, and enhancing behavioral health capacity within other sectors, including school districts.

In 2024, ACHD utilized funding through the American Rescue Plan Act (ARPA) Tranche II funds to conduct a comprehensive assessment of the county's behavioral health services continuum and determine the system's capacity to provide direct services and supports for people with the greatest needs. The [2024 Adams County Behavioral Health Services and Supports Assessment: A Blueprint for Action](#) stands as a seminal report, documenting the point-in-time landscape of behavioral health challenges and existing service capacity within the community to address the behavioral health needs of community members and provides tangible recommendations for mitigating and addressing these challenges. The report makes the following key recommendations for action within the county to improve behavioral health outcomes: 1) increase and expand the behavioral health workforce in the county; 2) increase mental health screening and referrals in schools, primary care, and specialty settings; 3) improve and increase care coordination and case management among providers and systems across the county; and 4) Provide public health leadership that is engaged with behavioral health partners to improve access to services and supports and integrates promotion and prevention strategies.

This report reflects Adams County's shared commitment to understanding and addressing the complex behavioral health landscape in Adams County and guided the distribution of over \$7 million in ARPA funding through competitive grants and focused investments.

Metrics

Indicator	2024				
	Q1	Q2	Q3	Q4	TOTAL
# people trained in Mental Health First Aid	22	18	15	16	71
# of community touchpoints in Adams County *	16	28	28	52	124
# of people reached with stigma reduction messaging in Adams County	16,880	17,350	3,160	8,995	46,385

* Includes mental health stigma reduction activities such as classes, community events, and tabling, as self-reported by Ambassador organizations.

Accomplishments

- Issued \$3.2 million in ARPA Behavioral Health Services and Supports funds to expand mental health services in schools and communities. Funded partners included health care providers, school districts, nonprofits, and universities, increasing access to care across Adams County. Awardees include Kids First Health Care, Colfax Community Network, Aurora Public Schools, Griffith Center, Aurora Mental Health and Recovery, UCHHealth at University of Colorado Anschutz Medical Campus, Latinx Therapist Project, Reaching HOPE, Regis University, Center for African American Health, and the Adams County Youth Resource and Assessment Center.
- Distributed \$1.9 million in ARPA Co-Responder funds to expand programs in Brighton, Commerce City, Federal Heights, Thornton, and Westminster. These teams paired behavioral health specialists with first responders to help assess, support, treat, and refer individuals with behavioral health challenges to care. Residents in all Adams County jurisdictions are now covered by a Co-Responder program.
- Facilitated six Community of Practice sessions for Adams County's seven Co-Responder programs to share best practices, enhance collaboration, and support data use and sustainability planning across jurisdictions. Municipalities with Co-Responder programs include Aurora, Brighton, Federal Heights, Northglenn, Thornton, Westminster, and the Adams County Sheriff's Office.
- Awarded \$1.2 million in ARPA Training and Stigma Reduction funds to increase community mental health awareness and reduce stigma. Six community-based organizations received funding to launch tailored campaigns through the Community Ambassadors for the Mental Health project. The community-based organizations funded by Adams County are Amigos de Mexico, Center for African American Health, Colorado Asian Culture and Education Network, Colorado Ethiopian Community, Envision: You, and Muslim Youth for Positive Impact.
- Allocated \$1.15 million in ARPA Strengthening Families funds to Early Childhood Partnership of Adams County (ECPAC) to build the Resource and Referral Hub and promote the Five Protective Factors framework, connecting families to support in times of need.
- Delivered the first Question, Persuade, Refer Suicide Prevention training to 28 county staff from ACHD, Human Services, Community Safety and Well-Being, and the Department of Motor Vehicles to equip them with early intervention tools and strengthen the county's internal capacity for suicide prevention.
- Partnered with the 17th Judicial District Attorney and community groups to host two Suicide Prevention Month resource fairs, reaching 170 attendees with educational materials, gun locks, Care Kits, and safe storage boxes for medications or substances to promote mental health and prevent suicide.

School Health Policy and Prevention

Funding/Revenue Source(s): General Funds

Year Ending FTE: 1

Year Ending Budget: \$139,847

The School Health Policy and Prevention Program underscores the vital link between education and health outcomes, viewing educational attainment as a key social determinant of health. The program strengthens school partnerships by identifying resource needs, building connections, and using school feedback to shape communication strategies. It addresses the bidirectional impact between health and education, aiming to mitigate the negative effects of poor health on education performance and capitalize on the benefits of education for improving health, income, social and psychological well-being, healthy behaviors, and overall community wellness. Acknowledging the broader determinants of health beyond healthcare services, the program adopts a holistic approach to support social connections, meaningful employment, and lifelong learning.

Accomplishments

- Expanded district engagement in the Healthy Kids Colorado Survey (HKCS) from one to three Adams County school districts, providing a clearer picture of youth health across the region and improving the ability to track and address emerging needs.
- Launched a new communication strategy for the 2024–25 school year by transitioning to MailChimp for monthly school newsletters. This platform provided valuable data insights that informed content refinement and boosted engagement with school health initiatives. The ACHD newsletter achieved an average open rate of 57.2%, outperforming the industry average of 41.1% and demonstrating strong community interest.
- Expanded the ACHD Internal School Task Force's focus beyond school partners to include a Shared Risk and Protective Factors (SRPF) and Youth Engagement approach to prevention. Members completed a mapping exercise to align health department initiatives and programming across the social ecological model. A core planning team supported the development of foundational accountability measures, including a workplan to launch a new SRPF Community of Practice in 2025.

State Tobacco Education and Prevention Program (STEPP)

Funding/Revenue Source(s): State Grants

Year Ending FTE: 3.5

Year Ending Budget: \$466,828

At the beginning of 2024, the STEPP program had 2.5 FTEs. By the end of the year, staffing increased to 3.5 FTEs due to an increase in grant funding. All changes were approved through the formal BOH and BOCC processes.

The State Tobacco Education and Prevention Program (STEPP) is focused on eradicating tobacco use and promoting health while reducing differences in outcomes across Colorado. Strategies align with three overarching goals: 1) to reduce tobacco and e-cigarette use among youth and young adults, 2) to protect priority populations from secondhand smoke/vapor and tobacco waste, and 3) to enhance tobacco cessation support for priority populations, which includes people of varied representation, rural residents, individuals on Medicaid, and individuals with behavioral health conditions.

Work under the STEPP grant includes partnering across sectors to implement municipal policy changes to prevent youth access to and initiation of tobacco and nicotine products; collaborating with community-based organizations to engage youth in activities that promote protective factors; supporting schools with data and policy analysis, prevention and cessation education, and alternatives to suspension programs; and responding to secondhand smoke complaints from worksites, multi-unit housing, and public settings with a community-centered approach that considers the impact on both the complainant and the individual engaged in smoking or vaping behavior.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Number of teachers and adults working with youth, parents, and guardians engaged with cessation and/or prevention education and resources	80	125	355	175	60	715
Number of events, presentations, and initiatives facilitated in schools and the community *	12	18	28	9	12	67
Number of youth engaged with cessation and/or prevention education and resources **	250	154	8,177	315	1,090	9,736
Amount distributed to partners to engage priority populations through school and community-based initiatives with prevention, cessation, and mental health supports	\$35,000	-	-	-	-	\$55,025

*Engagement experiences included 4 youth coalitions, 4 support/learning groups, 6 focus groups, and 53 initiatives, presentations, and trainings (33 community-based and 20 school-based). These opportunities were highly collaborative, with the majority initiated by schools or community-based organizations.

**The dramatic increase in outreach experienced during Q2 is due to a seasonal increase in opportunities to engage youth in schools in April and the community in May and June. The decrease seen in Q4 is due to a reduction in engagement opportunities during the holiday months of November and December.

Accomplishments

- Partnered with Compound of Compassion to host five Summer Safe Zone events in Aurora, engaging 200 youth in safe, supportive gatherings centered on relationship-building and positive activities that fostered resilience and emotional well-being.
- Piloted three alternatives to suspension programs at Aurora Public Schools to address risky behaviors like vaping by providing education, emotional support, and healthy coping strategies. ACHD staff implemented the INDEPTH program, an evidence-based intervention by the American Lung Association, at local high schools. After the pilot, school staff were trained to continue the program independently.
- Supported the Aurora Partners for Thriving Youth Coalition in efforts to strengthen local tobacco retail laws by providing research and data analysis. The coalition aims to prevent youth access to tobacco by requiring retailers to be licensed and comply with regulations.

"I have actually seen a drastic difference and barely smell the smoke at all lately. I think your involvement has made a big difference. You've been amazing and I can't thank you enough for getting this under control."

–Multi-unit housing resident experiencing secondhand smoke.

Communities Organizing for Prevention

Funding/Revenue Source(s): State Grants

Year Ending FTE: 1

Year Ending Budget: \$102,838

Communities Organizing for Prevention (COFP) is an evidence-based prevention system that builds the capacity of community members through a multi-year process to address the underlying causes of youth health and behavioral problems. COFP utilizes the Communities That Care (CTC) model, which includes methods for building a wide-ranging community coalition, processes for analyzing data and recognizing community problems, tools for identifying community assets and resources, techniques for assessing and prioritizing risk and protective factors, and procedures for setting goals, implementing strategies, and evaluating progress. Two keys to the success of any COFP community coalition are active youth participation and a strong leader (also known as the CTC Mobilizer). Funded by ACHD and hosted by Bennett Park and Recreation District, the I-70 Corridor CTC Coalition (I70CCTC) possesses both.

The I-70 Corridor CTC Coalition and its associated youth leader board, Teens for Change, are led by a dedicated Mobilizer and Youth Advisor, who are local residents with a vested interest in the community. The coalitions are supported and provided with technical assistance by an experienced ACHD public health professional in accordance with the principles of Positive Youth Development. The I70CCTC, together with Teens for Change, strives to offer balanced opportunities for improving youth health in schools, families, and communities through educational outreach focusing on youth substance use prevention and safety for all.

Accomplishments

- Hosted the Teen Summer Series throughout summer 2024, providing a safe, substance-free space for rural youth to gather weekly. The series reached 75 teens through activities, learning, and food, while an additional 50 youth participated in the "Party in the Park" Teen Pop-Up at the Town of Bennett Summer Concert, demonstrating the demand for youth-friendly events.
- Offered life skills training at the Bennett Recreation Center in fall 2024 for Teens for Change and community members. Ten participants completed CPR/First Aid certification, and 17 joined a month-long American Sign Language course, drawing attendees from Watkins, Bennett, Strasburg, Byers, and Deer Trail, promoting leadership, inclusivity, and community connection.
- Participated in Library Lobby Day in March 2024, where Teens for Change youth joined the Anythink Bennett Library team at the state capital. They met with representatives, advocated for local libraries, and sat on the House floor, igniting their interest in civic engagement and empowering them to influence change at the state level.
- Delivered two interactive sessions at a statewide conference, including the only youth-led presentation on the agenda. Five Teens for Change members represented their peers with insight and confidence, highlighting the importance of youth voices in public health and prevention spaces.

Healthy Beverages for All

Funding/Revenue Source(s): State Funds

Year Ending FTE: 0.5

Year Ending Budget: \$106,000

ACHD is one of seven local public health agencies in the Denver metro area that make up the Healthy Beverage Partnership (the Partnership). Current activities include the Healthy Beverage Choices for All campaign, which focuses on the adoption and implementation of evidence-based municipal policy strategies that limit access, availability, and marketing of sugary drinks to youth and young adults to prevent chronic diseases in populations most burdened by too much weight for health, type II diabetes, heart disease, cancer, and high blood pressure. Led by the Public Health Institute at Denver Health, the partnership includes Adams, Arapahoe, Boulder, Garfield, Jefferson, and Pueblo County Health Departments.

The Partnership relies on local coalitions to design and direct education and awareness efforts about the harmful health effects of sugary drinks, their contribution to differences in health outcomes, and ways local communities can enact policies to reduce consumption. Campaign strategies include conducting assessments to identify interest in and support for sugary drink reduction policies, developing tools and guides in partnership with the community to increase awareness of sugary drink reduction policies, and engaging communities in rural and semi-urban counties to adopt and implement Healthy Drinks in Kids' Meal (HDKM) ordinances – an evidence-based strategy that decreases the marketing of unhealthy beverages to children.

HDKM policies ensure that the default beverage served with a bundled kid's meal (i.e., a kid's meal that includes a drink) is a healthy option, either unflavored milk or water. Providing healthy default options on kids' menus has been proven to encourage families to choose these drinks while preserving personal choice. The partnership has successfully supported five communities in adopting HDKM policies, including Lafayette in 2017, Longmont in 2021, Golden in 2022, and, most recently, Denver in March 2024.

Metrics

Indicator	2024
Community members engaged with healthy beverage messaging through local outreach events	600
Decision makers reached with information about the health benefits associated with a local Healthy Drinks in Kids Meals ordinance	40
Invested in promoting healthy beverage messaging through promotoras outreach, community events, and school-based dental clinics to increase awareness about the negative health consequences of sugary drink consumption.	\$20,000
Community outreach events sponsored in collaboration with partners	14

Accomplishments

- Conducted two Healthy Eating Active Living training sessions for 40 childcare providers in February and June 2024 using the Promotoras/Promotor model through Kids in Need of Dentistry (KIND). Providers learned to identify hidden sugars, explored healthier beverage options, and gained confidence in promoting healthy habits in childcare settings. Feedback was highly positive, with many expressing interest in future sessions.
- Engaged families, parents/guardians, and childcare providers in Thornton and Commerce City in March and April 2024 to build support for a Healthy Drinks in Kids' Meals ordinance. These

outreach efforts secured over 60 signed pledge cards in Commerce City and confirmed strong community interest in healthier beverage policies, prompting a focused advocacy strategy.

- Awarded \$18,000 in subcontract funds to KIND to support Promotoras/Promotor-led outreach for the Healthy Beverage Choices for All campaign. Activities included community events, education, and policy support focused on priority communities in Commerce City. KIND also gathered feedback and signatures to build momentum for the Healthy Drinks in Kids' Meals ordinance.
- Sponsored KIND's second annual Smile Fest in August 2024, bringing together 120 patients and families for a day of celebration, health resources, food vendors owned by priority populations, and cultural performances that promoted connection and wellness.
- Sponsored Hyland Hills Park and Recreation District's annual Spooktacular event, distributing healthy beverage education materials to 600 children. Of 218 bundled meals sold, 160 (74%) accepted water as the default beverage, demonstrating strong community support for healthier drink options.

"I try to keep soda and other sugary drinks out of the house. My kids know it's only water, milk, or natural juice. So, when we go to restaurants, it's nice to see them serving only healthy drinks for kids. When they don't see any soda on the menu, there's no back and forth with them."

—KIND Promotora

Maternal, Child, and Family Health (MCFH)

Funding/Revenue Source(s): Federal Funds, Private Grants, and General Funds

Year Ending FTE: 3

Year Ending Budget: \$539,911

The Title V Maternal and Child Health Program (MCFH) in Adams County is dedicated to enhancing the health and well-being of families through population-based and infrastructure-building strategies. Focused on primary prevention and early intervention, the program is committed to the health of people of reproductive age, infants, children, youth, and Children and Youth with Special Health Care Needs (CYSHCN). The program's strategic anchors include fair treatment, community engagement, and proactive approaches in working with these populations. MCFH emphasizes collaborative partnerships within ACHD, among direct service providers, and with external organizations to advance its mission. A key initiative, the Strengthening Families Partnership, aims to transition the current child welfare system toward a more prevention-oriented and balanced model of child and family well-being supported by a comprehensive service continuum.

Accomplishments

- Initiated a department-wide Language Access program by convening a cross-division workgroup in August 2024, completing data collection in October to identify the nine most-used languages in the community, and developing both a Language Access Toolkit and 'I Speak' posters. These resources enhanced staff capacity to recognize and accommodate the language needs of residents, ensuring greater access to services.
- Secured a grant to host a free tax preparation site for low- and middle-income families, completing 331 tax returns and securing \$704,711 in tax credits and refunds for Adams County residents, boosting household stability and supporting long-term economic well-being.
- Coordinated a 10-session Stress-Responsive, Trauma-Informed training series beginning in September 2024 for 20 ACHD staff to build skills for managing stress and trauma, foster a culture of care in the workplace, and enhance services to the Adams County community.
- Presented alongside the CDPHE at a national conference to highlight local economic mobility efforts, including the tax preparation site, and demonstrate how financial well-being directly impacts public health. Research shows that increased economic mobility improves food security, reduces adverse childhood experiences, and tax credits significantly reduce poverty and support family health outcomes.



I SPEAK

POINT TO YOUR LANGUAGE

Amharic አማርኛ እናገራለሁ

Arabic أنا أتكلم العربية

Bengali আমি বাংলায় কথা বলি।

Burmese ကျွန်မ ဗမာစကားပြောတယ်
ကျွန်တော် ဗမာစကားပြောတယ်

Chuukese Nei foropun Chuuk

Chinese (Mandarin) 我说普通话

Chinese (Cantonese) 我講廣東話

Dari من دری صحبت می کنم

Dutch Ik spreek Nederlands

Farsi (Persian) من فارسی صحبت می کنم

French Je parle français

German Ich spreche Deutsch

Greek Μιλάω ελληνικά

Haitian Creole Mwen pale
kreyòl ayisyen

Hindi (male) मैं हिंदी बोलता हूँ
Hindi (female) मैं हिंदी बोलती हूँ

Hmong Kuv hais lus Hmoob

Igbo Ana m asụ Igbo

Indonesian Saya bisa berbahasa
Indonesia

Italian Parlo italiano

Japanese 日本語対応可能です。

Karen ယကတိၤ ကညီကျိာ်

Khmer ខ្ញុំនិយាយភាសាខ្មែរ

Kinyarwanda Mvuga
Ikinyarwanda

Korean 저는 한국말을 합니다

Lao ຂ້ອຍເວົ້າພາສາລາວ

Lingala Nalobaka Lingala

Marshallese Mōj kōnono
kajin Majeļ

Nepali म नेपाली बोल्छु

Oromo Ani afaan
Oromoon dubbadha

Pashto زه پښتو خبرې كوم

Polish Mówię po polsku

Portuguese Eu falo português

Punjabi (male) मैं ਪੰਜਾਬੀ ਬੋਲਦਾ ਹਾਂ
Punjabi (female) मैं ਪੰਜਾਬੀ ਬੋਲਦੀ ਹਾਂ

Rohingya Añí Rohingya hotá hoí.

Romanian Vorbesc română

Russian Я говорю по-русски

Somali Waxaan ku
hadlaa Soomaali

Spanish Hablo español

Swahili Ninaongea Kiswahili

Tagalog Nagsasalita ako
ng Tagalog

Thai ฉันพูดภาษาไทย

Tigrinya ንግርኛ እናገራለሁ

Turkish Türkçe konuşuyorum

Ukrainian Я розмовляю
українською

Urdu (male) میں اردو بولتا ہوں
Urdu (female) میں اردو بولتی ہوں

Vietnamese Tôi nói tiếng Việt

Yoruba Mo n sọ Yorùbá



ADAMS COUNTY
HEALTH DEPARTMENT
Your Health. Our Mission.

Regional Health Connector

Funding/Revenue Source(s): State Grants, Private Grants

Year Ending FTE: 2

Year Ending Budget: \$208,465

At the beginning of 2024, the Regional Health Connector program had 1 FTE. By the end of the year, staffing increased to 2 FTEs due to an increase in grant funding. All changes were approved through the formal BOH and BOCC processes.

The Regional Health Connector (RHC) aims to improve health in Adams County by connecting the systems that keep communities healthy, including primary care, hospital systems, public health, social services, and other community resources. The RHC works at the systems level to bridge connections and leverage community assets and resources to address community needs. The RHC also serves as a liaison to physicians' offices, hospitals, community organizations, and social services organizations, creating partnerships that lead to healthier communities and healthier practices throughout Adams County. After assessing community needs, the RHC works with healthcare providers to launch targeted projects that improve local health outcomes.

Accomplishments

- Convened the Adams County Health Alliance for four quarterly meetings in 2024, engaging an average of 40 participants per session. Members learned about final Medicaid unwind data, the PEAK benefits system, 2024 legislative updates, the Cover All Coloradans benefit, and received Narcan training from the Adams County Harm Reduction (now Project Connects) team.
- Provided financial and technical support to eight community-based organizations (CBOs), in partnership with Metro Area Health Alliances and Colorado Access, to prepare for Medicaid reimbursement for Community Health Workers (CHWs). Funded by a Regional Accountable Entities grant, this support equipped CHWs, trusted messengers from within the communities they serve, to address social determinants of health through screenings, counseling, and navigation assistance. The eight CBOs included Cuenta Conmigo, Denver YMCA, Benefits in Action, Doctors Care, Families Forward, Village Exchange, Vuela For Health, and Kids First CO.
- Held five CHW Community of Practice meetings in 2024 for CBOs and interested organizations, featuring state experts from the Colorado Department of Health Care Policy and Financing and the CDPHE. These sessions addressed billing, reimbursement, and education policies, while facilitating shared learning and feedback to inform CHW Medicaid reimbursement policy.
- Hired ACHD's first full-time Community Health Worker in October 2024 to enhance resource referrals, provide direct community support, and strengthen the department's connection with residents.
- Delivered a statewide training on Appreciative Inquiry in May 2024 through the Adams County RHC. This session introduced a strengths-based approach to systems change and guided RHCs in applying Appreciative Inquiry principles to local initiatives.
- Established the Adams County Youth and Community Violence Prevention Action Team in January 2024 with support from the National Association of County and City Health Officials. The team completed a needs assessment and action plan, identifying four strategic priorities and five objectives to guide local violence prevention efforts. The four strategic priorities include –

- Building a path for ongoing, comprehensive, and holistic care for individuals and communities.
- Strengthening family and community engagement to empower them to act in their communities and with their government leaders.
- Developing a multisector ecosystem focused on a sustained investment in violence prevention over the next 5 years.
- Strengthening supports to help youth and young adults thrive through leadership, educational attainment, and employment.

Housing Stability

Funding/Revenue Source(s): State Grants

Year Ending FTE: 1

Year Ending Budget: \$132,568

The ACHD Housing Stability program recognizes healthy and safe housing as a fundamental human right and an essential component of public health. Central to this work is the vision of creating a community free of cost-burdened households (i.e., households that spend over 30% of their income on housing). This includes preserving affordable housing close to employment hubs, public transportation, and community resources, such as mobile home parks. The program advocates for robust tenant protections against displacement, including just-cause eviction ordinances, anti-harassment measures, affordable legal aid, and rent control, alongside promoting affordable homeownership opportunities through models like community land trusts.

Throughout 2024, the Housing Stability Coordinator worked closely with the Adams County Human Services Economic Mobility Division's Homelessness Reduction and Support Workgroup to research and draft a proposal for a day shelter in Adams County to advance long-term housing solutions for unhoused community members. With support from ACHD's Communications team, the Housing Stability Program launched a webpage in November 2024 to provide resources and technical assistance for partners assisting families and older adults in securing healthier, more stable housing. The program prioritizes strong community partnerships, individualized support, and active involvement in key committees, councils, and workgroups.

Accomplishments

- Successfully completed all deliverables for the Health Disparities Grant from CDPHE, strengthening existing community partnerships and establishing new partnerships with Los Amigos de Mexico, McKinney-Vento Liaisons from Adams 5, Adams 12, Aurora Public Schools, and Westminster Public Schools. The program provided COVID-19 supplies and prevention education to support community members.
- Secured a budget reallocation of \$13,178.33 per organization from the Health Disparities Grant to support housing navigation at Almost Home, Brother's Redevelopment, and Growing Home.
 - Almost Home funded partial wages for two Navigators who served 890 people through their drop-in Housing Navigation Center, 610 by phone, and 57 through emergency shelter services—a 67% increase in people served compared to the previous four months. Funds also supported contracted deep cleaning for the family shelter, which served 15 families and 57 individuals between May and September 2024.
 - Brother's Redevelopment's Colorado Housing Connects assisted 43 households with housing-related resources and referrals, including utility assistance for 23 households (62 individuals) at risk of losing power due to unpaid Xcel Energy bills.
 - Growing Home expanded food pantry staffing and outreach, resulting in a 20% increase in food distribution and a significant reduction in families turned away for services.

Food Access and Systems

Funding/Revenue Source(s): General Funds, Local Funding

Year Ending FTE: 1

Year Ending Budget: \$126,313

The Food Access and Systems program fosters fair, resilient, and just food systems across Adams County through policy, systems, and environmental change. The approach encompasses three evidence-based strategies to achieve this: 1) food access program facilitation; 2) policy and advocacy; and 3) working across divisions, departments, and organizations for positive food systems change. Food access programming includes overseeing a local food access farmers market (“Healthy Farmers Markets”), collaborating on produce box pick-up programs for SNAP, WIC, and Medicaid program recipients, and engaging in cross-county partnerships for produce prescription programs. Policy and advocacy efforts include fostering collaboration and convening partners to implement food system change policies, focusing on initiatives led by the community and community partners. These efforts also involve offering technical assistance, support, and resources to elevate and support the work of community partners and partnering to co-develop an Adams County food policy council. Systems and environmental change include community food asset mapping and implementing food system resilience planning. The program utilizes the Community Spectrum of Engagement to Ownership tool to integrate community leadership into new and existing projects and participates in several statewide anti-hunger committees and community food workgroups.

The program partners closely with Adams County Human Services for several programs, most notably the Healthy Farmers Markets. Both departments serve on the Healthy Farmers Markets Steering Committee, with Human Services providing full funding for the 2023-2026 seasons through ARPA funds. Other partnerships include monthly Adams County Food Security convenings between the two departments, with efforts to expand across multiple departments; collaborating to attend resource fairs that request food access resources; and a joint food security grant review team. The Food Access and Systems program also meets with the Adams County Community Safety and Well-Being Department to collaborate and create alignment of any food access work happening throughout the county.

Metrics

Indicator	2023	2024
Farmers market attendees	6,691	8,494
Dollar amount of produce given to community members	\$74,120	\$157,325
\$25 vouchers provided	3,374	4,032
\$25 farm fresh food boxes provided	-	2,100
\$25 WIC Farmers Market Nutrition Program vouchers or boxes provided	1,328	1,361
Zip codes identified as USDA low-income/low-access areas served	12	9
Additional boxes provided to the community at box pick-up locations through the Colorado Nutrition Incentive Program	-	3,461

Accomplishments

- Supported a successful application to the USDA Gus Schumacher Nutrition Incentive Program (GusNIP) to fund the Adams and Boulder County Produce Prescription Program for Pregnant Patients, in partnership with Boulder County Public Health and Clinica Family Health. The program, informed by patient input, is set to launch in 2025.

- Secured funding from the Johns Hopkins Bloomberg American Health Initiative in August 2024 to hire a consultant for the co-development of the Adams County Food Policy Collective with Growing Home, with a planned launch in 2025.
- Collaborated with the Adams County Manager's Office to incorporate food system resilience into the [Adams County Long-Term Recovery and Resiliency Strategic Plan \(goal 10.5\)](#).
- Presented on Building Resilient Food Systems to Reduce Food Insecurity in Adams County at the 2nd Annual Adams County Health Forum.

Health Enrollment Team

Funding/Revenue Source(s): State and General Funds

Year Ending FTE: 6

Year Ending Budget: \$541,602

The Health Enrollment Team is dedicated to fostering community engagement and improving access to health care coverage for individuals ages 0-64. All sites are Certified Application Assistance Sites and are authorized by the Colorado Department of Health Care Policy and Financing to assist Colorado residents in applying for medical benefits. The state has certified the team in Presumptive Eligibility (PE), enabling them to offer immediate, short-term Medicaid coverage to pregnant individuals and individuals under 19 while their applications are processed, ensuring timely access to health care.

Additionally, all Health Enrollment Specialists are certified Assistors who can help members apply for financial assistance in the Colorado marketplace. The team focuses on determining eligibility for health coverage programs, including Medicaid, Child Health Plan Plus (CHP+), Connect for Health Colorado, and Omni Salud. They guide individuals through the application process, promote health insurance literacy, address application issues, and assist in maintaining coverage through life's changes.

Metrics

Indicator	2023	2024
Community events attended	32	69
People reached with health coverage information at events	4,500	5,600
Enrollment appointments completed	781	1,761
Medicaid enrollments	374	1,069
CHP+ enrollments	53	141
Look up support (client inquiries that don't lead to enrollments)	1,408	11,282
Enrolled in qualified health plans in Connect for Health Colorado	273	270

Accomplishments

- Streamlined internal workflows and standardized team training to ensure all Health Enrollment Specialists provide consistent, high-quality client support. These improvements significantly boosted the team's efficiency and outreach, contributing to a 186% increase in Medicaid enrollments, from 374 in 2023 to 1,069 in 2024.
- Transitioned the Health Enrollment Team to a [client-facing platform](#) on April 1, 2024, allowing community members to self-schedule appointments for medical coverage assistance. This shift improved access by enabling individuals to choose convenient times and locations, and empowered partners to promote services without exchanging client data.

Public Health Planning & Evaluation

Funding/Revenue Source(s): State and General Funds

Year Ending FTE: 2

Year Ending Budget: \$327,556

The Public Health Planning and Evaluation team works with the community to identify and actively develop solutions to community issues that impact health. The team manages the state-mandated community health assessment and improvement planning processes at the department and coordinates and supports the Adams County Thriving Communities Collective and its work to improve Economic Security, Health and Housing, and Access to Care for all people in Adams County. The team also manages the PARTNER (Community Partner Relationship Management) system, a software platform the division uses to track the impact and outcomes of partnerships. Additionally, the team provides technical assistance and expertise in assessment, evaluation, and planning for programs across the department, ensuring evidence-based practice and innovative, high-quality public health research, practice, assessment, and evaluation.

Accomplishments

- Facilitated and strengthened the Adams County Thriving Communities Collective (ACTCC), a collaboration of over 40 community-based organizations, community members, county departments, and peers. In partnership with the ACTCC, the team led the development of the 2025–2029 Adams County Community Health Improvement Plan (CHIP), outlining goals for Access to Care, Economic Security, and Housing.
- Supported the Youth and Community Violence Prevention Action Teams (VPAT) project throughout 2024 by guiding the completion of action plans aimed at reducing youth and community violence in Adams County and the greater metro area. This work advanced local violence prevention strategies and strengthened cross-sector collaboration.
- Assisted in developing evaluation plans and preparing and distributing surveys during summer 2024 for two-gun violence prevention initiatives, a gun lock distribution pilot in local safety-net primary care practices, and a similar effort in nursing programs. Between March and June 2024, these initiatives resulted in the distribution of 80-gun locks and 879 safety conversations, averaging one lock per 10 conversations and increasing firearm safety awareness among families in Adams County.

Nutrition and Family Health

Supplemental Nutrition Program for Women, Infants, and Children (WIC) • WIC Breastfeeding Peer Counselor Program (WIC Breastfeeding Support) • Supplemental Nutritional Assistance Program Outreach • Adams County Diabetes Education and Prevention Program



Division Administration

Funding/Revenue Source(s): General Funds
Year Ending FTE: 3
Year Ending Budget: \$616,689

The Nutrition and Family Health (NFH) Division leads initiatives that improve education, food access, community referrals, and advocacy related to diet, health, and nutrition across all stages of life. All division programs contribute to preventing chronic conditions such as diabetes, obesity, and cardiovascular disease, promote food security with increased access to nutritious foods, and protect the health of families overcoming difficult social and economic circumstances.

Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Funding/Revenue Source(s): Federal and General Funds

Year Ending FTE: 26.75

Year Ending Budget: \$2,445,172

The Supplemental Nutrition Program for Women, Infants, and Children (WIC) program provides healthy foods, nutrition education, breastfeeding support, and community resources to 11,125 income-eligible pregnant, postpartum, and breastfeeding individuals; infants; and children up to five years old throughout Adams County. WIC supports health promotion and disease prevention by delivering targeted interventions during critical periods of growth and development. Historically, as one of the nation's most successful public health nutrition programs, participation in WIC has contributed to healthcare cost savings and improvements in maternal and infant health outcomes, including the reduction of preterm births and the delivery of low birthweight babies. Additionally, research shows that WIC families have improved diet quality when participating in the program.

Metrics

Indicator	2023	2024
WIC Dollars Spent in Adams County	\$11,384,217.38	\$10,087,156.11
Participating Stores	41	41

WIC Client Caseload by Office Location, 2024	2023	2024				
	Monthly Average	Q1 Average	Q2 Average	Q3 Average	Q4 Average	Monthly Average
Bennett	105	147	154	160	158	155
Brighton	1,349	1,391	1,416	1,404	1,405	1,404
Commerce City	1,980	2,121	2,168	2,147	2,103	2,127
North Broadway	3,044	3,198	3,246	3,197	3,218	3,215
Westminster	3,907	4,133	4,181	4,239	4,342	4,224
Total monthly average	10,385	10,990	11,165	11,116	11,227	11,125

Accomplishments

- Offered monthly in-person WIC services at the Bennett Community Center, improving access for rural families and supporting 1,860 client visits.
- Partnered with Arapahoe County to enroll 72 newly arriving residents into WIC at the Village Exchange Center in Aurora, expanding support for immigrant and refugee families.
- Increased the percentage of WIC-enrolled infants and children with Medicaid coverage from 66% in 2023 to 70% in 2024, expanding access to critical nutrition and health services for families already connected to the healthcare system.

WIC Breastfeeding Peer Counselor Program (WIC Breastfeeding Support)

Funding/Revenue Source(s): Federal and General Funds

Year Ending FTE: 2.75

Year Ending Budget: \$123,336

Promoting and supporting breastfeeding is a critical component of public health as it provides significant lifetime health benefits for the infant, decreasing the risk of various health conditions and contributing to a healthier society. The WIC program recognizes the importance of providing human milk and ensures that WIC participants receive evidence-based breastfeeding information. The WIC program provides a weekly breastfeeding support group open to anyone in the community and partners with other local agencies to offer virtual infant feeding classes. WIC participants can also receive individual lactation support from an International Board-Certified Lactation Consultant (IBCLC) or Certified Lactation Counselor (CLC). The Breastfeeding Peer Counselor Program connects mothers with peers who have personal breastfeeding experience and offers support via text or phone seven days a week. Clients enrolled in the Breastfeeding Peer Counselor program also receive automated texts providing helpful information throughout their pregnancy and while breastfeeding. WIC works in partnership with the Mother's Milk Bank and local hospitals to support breastfeeding within the community.

Metrics

ACHD Breastfeeding Peer Counselors Metrics	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total client contacts	5512	1,660	2,089	2,159	1,665	7,573
Average monthly caseload	753	872	1,038	1,073	1,073	1,014
End-of-year caseload	836	-	-	-	-	1,043
Number of electric breast pumps loaned	470	80	53	77	45	255
Number of single-user pumps distributed	29	8	9	7	3	27

ACHD WIC Program Breastfeeding Initiation and Duration Rates	2023	2024
Breastfeeding initiation rate among WIC participants	81%	82%
Rate of breastfeeding at three months postpartum among WIC participants	53%	56%
Rate of breastfeeding at six months postpartum among WIC participants	43%	46%

Other ACHD Breastfeeding Programs Metrics	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total regional virtual breastfeeding class attendees	29	17	11	29	10	67
Total ACHD Baby Café attendees	18	5	10	16	23	54

Other ACHD Breastfeeding Programs Metrics	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total certified lactation counselor (CLC) on-call referrals	78	32	36	30	28	126
Number of medical students and interns attending breastfeeding management rotations	13	5	2	0	0	7

Accomplishments

- Provided advanced breastfeeding training to nine Nutrition Division staff, expanding access to evidence-based lactation support for clients. Prior to the training, three staff held CLC credentials and three held IBCLC credentials. As a result of the training, seven staff members became eligible to sit for the CLC exam and two for the Certified Lactation Educator exam, strengthening the team's ability to offer timely support and referrals for complex breastfeeding needs.
- Collected 1,283 ounces of expressed human milk at the Brighton donation station for the Mother's Milk Bank, supporting infants across the region.

Supplemental Nutritional Assistance Program Outreach

Funding/Revenue Source(s): Federal Funds

Year Ending FTE: 0.8

Year Ending Budget: \$158,831

The Supplemental Nutritional Assistance Program (SNAP) Outreach Program, formally called SNAP PEAS (Partners Engaging in Application Services), works directly with WIC clients to help them apply for SNAP benefits. WIC program staff are cross-trained to provide remote or in-person application assistance, helping families navigate the SNAP application process. Staff leverage their close relationships with WIC clients to reduce barriers and improve access to SNAP and other food benefits.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Completed SNAP applications	450	183	203	184	178	748

Accomplishments

- Completed 748 SNAP applications, redeterminations, and change reports in 2024, exceeding the grant goal by 106% and supporting consistent access to food assistance.
- Developed referral processes with internal programs - including Nurse-Family Partnership, Health Enrollment, and Sexual Health - to enhance care coordination and expand wraparound services, ultimately increasing food security for clients across the health department.
- Streamlined the document upload process in the PEAK system to accelerate application approvals and remove transportation barriers for clients. By uploading documents on behalf of clients, staff streamlined access to benefits and eliminated the need for in-person submission at Human Services offices.

Adams County Diabetes Education and Prevention Program

Funding/Revenue Source(s): State Funds

Year Ending FTE: 3.7

Year Ending Budget: \$479,708

The Diabetes Education and Prevention Program helps residents adopt healthier lifestyle habits by expanding access to education, prevention, and support services. The program's target population includes individuals who are under- or uninsured and lack alternative options for obtaining these services, in addition to those facing greater health challenges, diabetes, and other chronic diseases. The team maintains relationships with 20 partners, including primary care practices, community-based organizations, recreational centers, businesses, and churches to outreach, promote, recruit for, and offer the following two programs: 1) the Diabetes Self-Management Education and Support (DSMES) program and 2) the CDC evidence-based National Diabetes Prevention Program (NDPP), marketed by ACHD as Journey to Wellness.

Diabetes education and prevention services are provided in English and Spanish and offer in-person and virtual options. Program staff also participate in state-level workgroups influencing awareness and sustainability of access to DSMES and NDPP for all Colorado residents.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
NDPP participants enrolled in classes	68	71	53	58	21	203
DSMES participants enrolled in classes	105	27	50	38	20	135

Accomplishments

- Launched 17 one-year NDPP class series to expand access to evidence-based lifestyle change support for individuals at risk for type 2 diabetes. These programs helped participants build sustainable, healthy habits, reduce their risk of chronic disease, and improve long-term health outcomes.
- Facilitated 25 eight-hour DSMES class series to equip individuals with the tools to manage diabetes and make healthier choices. Participants gained personalized strategies to control blood sugar, reduce complications, and lower healthcare costs through improved self-care and health outcomes.

Nursing

Immunizations • Sexual Health • Harm Reduction and HIV Prevention • Nurse Support Program • Nurse-Family Partnership • Child Fatality Review/Child Maltreatment Prevention • HCP: A Program for Children and Youth with Special Healthcare Needs • School/Childcare Nurse Liaison • Family Recovery Program • Nursing Operations Program • Nursing Training and Quality Improvement



Division Administration

Funding/Revenue Source(s): State and General Funds

Year Ending FTE: 7

Year Ending Budget: \$2,347,784

Public Health Nurses deliver clinical care and preventive services. The programs within the Public Health Nursing Division focus on maternal and child health, immunizations, disease management, and controlling communicable diseases. Through initiatives such as the Nurse-Family Partnership, Immunization Clinics, and targeted health screenings, the Public Health Nursing Division directly impacts individual and community health outcomes. ACHD strengthens community health by delivering high-quality nursing services directly to the Adams County community.

Immunizations

Funding/Revenue Source(s): Revenue, Federal, State, and General Funds

Year Ending FTE: 9.5

Year Ending Budget: \$1,308,003

The ACHD Immunization Clinic provides low- to no-cost, safe, and effective vaccines for all recommended immunizations to infants, children, and adults. On-time vaccination is an important way to help prevent potentially life-threatening illnesses. The Immunizations Program partners with the ACHD Office of Public Health Preparedness and Response and the Communicable Disease Surveillance Program to deliver clinical responses to vaccine-preventable disease outbreaks such as hepatitis A, meningitis, and measles. In addition, this program monitors the compliance of Colorado Board of Health Rule 6 CCR 1009-2 related to the requirement of schools and licensed childcare facilities to annually report aggregate immunization data to CDPHE.

Metrics

Immunization Visits	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Immunization Program visits	1,907	502	706	611	955	2,774
Off-site clinic visits	552	248	74	124	308	754
Sexual Health Program visits for immunizations	9	7	1	2	1	11
Total Immunization visits	2,468	757	781	737	1,264	3,539

Individual Vaccinations Administered by Program/Location	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Immunization Program	4,771	1,532	1,176	1,662	2,944	7,314
Sexual Health	11	18	1	3	0	22
Off-site clinic	850	428	248	258	729	1,663
Total individual vaccinations administered	5,632	1,978	1,425	1,923	3,673	8,999

2024 COVID-19 and Influenza Vaccinations Administered	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
COVID-19	993	291	110	89	638	1,128
Influenza	910	276	133	35	799	1,243
Total COVID-19 and influenza vaccinations administered	1,903	567	243	124	1,437	2,371

Accomplishments

- Received a National Association of County and City Health Officials (NACCHO) Partnering for Vaccine Equity (PAVE) grant for \$150,000 promoting community engagement, data collection, and developed a meaningful communications campaign to increase positive vaccine knowledge

and vaccination through social media, bus billboards, and kiosk ads that ran in September and October 2024.

- Partnered with two community-based organizations, Adelante and The Village Exchange Center, to promote the importance of respiratory vaccines and other adult and pediatric routine vaccinations. This partnership led to nine outreach clinic collaborations, the development of a community informed respiratory season vaccine campaign as well as ACHD monetary support of their Community Health Workers to promote vaccine education and clinics.
- Collaborated with the ACHD Office of Public Health Emergency Preparedness and Response to conduct an emergency vaccine tabletop exercise to review and practice the ACHD Immunization Clinic Routine and Emergency Vaccine plans in August 2024.
- Hosted an Immunize Colorado AmeriCorps VISTA volunteer who facilitated community engagement, conducted research, and strengthened immunization service support across Adams County. Their efforts:
 - Established a new partnership with Almost Home in Brighton, expanding community-based immunization outreach.
 - Led an MMR data initiative to identify Adams County schools for targeted MMR and routine vaccine clinics, improving vaccine coverage among school-age children.
 - Conducted outreach with Project Connects to inform unhoused residents about available immunization services, increasing access for vulnerable populations.
 - Provided vaccine education and scheduled follow-up appointments at four ColoVax clinics, enhancing community participation and completion rates.
 - Mapped immunization rates from 2014–2024 to identify trends and inform future planning.
 - Represented ACHD at local events, including farmers markets, Adelante clinics, Village Exchange Center clinics, and Shots for Tots & Teens clinics, to promote services and increase visibility.
 - Supported clinic operations by assisting with client registration, ensuring smoother service delivery.
- Partnered with VaxCare, an integrated platform that combines procurement and billing for 97% of insurance payers in Colorado, including Kaiser, Medicare, and Tricare. Launched December 2024.

Sexual Health

Funding/Revenue Source(s): Revenue, Federal, State, and General Funds

Year Ending FTE: 13.75

Year Ending Budget: \$1,783,720

At the beginning of 2024, the Sexual Health program had 12.5 FTEs. By the end of the year, staffing increased to 13.75 FTEs due to an increase in grant funding. All changes were approved through the formal BOH and BOCC processes.

The Sexual Health program provides client-centered sexual health services that overcome challenges, including stigma, discrimination, cultural and religious beliefs, and systemic imbalances. Clinic-based and mobile outreach services provide extensive education focused on preventing unintended pregnancies and transmission of HIV and STIs, as well as healthy relationships, substance use, mental health, and human trafficking. The Sexual Health program sees people of all genders and focuses on at-risk populations, including those who are lacking sufficient resources, low-income, and adolescents. The program offers clinic-based and mobile services, including reproductive health exams, contraceptive counseling and supplies, pregnancy testing, HIV and hepatitis C testing, and syphilis, chlamydia, and gonorrhea testing and treatment. The program also offers DoxyPEP for the prevention of syphilis, chlamydia, and gonorrhea. The program also provides pre-conception counseling for clients planning a pregnancy. No-cost breast and cervical cancer screenings are funded by Women's Wellness Connection for all uninsured individuals ages 21-64. This program also helps to annually educate thousands of Adams County high school students about sexual health.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Unduplicated clients total	890	304	385	506	446	1,641
Unduplicated patients with household income less than 100% federal poverty level	723	178	242	261	257	938
Nexplanon procedures	56	16	32	30	27	105
Intrauterine device (IUD) procedures	40	13	14	15	20	62
Oral contraceptive pill (OCP) packs dispensed	2,295	695	762	497	637	2,591
Nuvarings dispensed	306	63	58	78	36	235
Depo Provera injection given or dispensed	383	103	125	123	118	469
Gonorrhea and chlamydia tests completed	827	134	453	497	522	1,606
Human immunodeficiency virus (HIV) tests completed	190	113	179	239	244	775
Syphilis (RPR) tests completed	96	130	193	251	260	834
Human papillomavirus (HPV) tests completed	122	64	52	61	43	220
Colposcopy tests completed	20	8	7	10	6	31

Accomplishments

- Proposed and facilitated a Colorado State Board of Pharmacy rule change that enabled mobile pharmacy dispensing for other outlet pharmacies. This change expanded access to essential medications and improved patient care in communities with unmet health needs.
- Designed and implemented clinic-based and mobile syphilis treatment programs to improve access to timely care and address a critical public health issue. As a result, syphilis testing increased by 64% from 2023 to 2024, reflecting improved screening and community outreach.
- Implemented Doxycycline Post-Exposure Prophylaxis (DoxyPEP) prescribing and dispensing protocols to prevent syphilis, chlamydia, and gonorrhea. This initiative marked a significant advancement in STI prevention efforts, helping to reduce infection rates and promote public health resilience.

Harm Reduction and HIV Prevention

Funding/Revenue Source(s): Federal, State, and General Funds, Opioid Resettlement Fund

Year Ending FTE: 10.75

Year Ending Budget: \$1,128,275

At the beginning of 2024, the Harm Reduction and HIV Prevention program had 8 FTEs. By the end of the year, staffing increased to 10.75 FTEs due to 1 FTE transfer from the Sexual Health program and an increase in grant funding. All changes were approved through the formal BOH and BOCC processes.

The Harm Reduction and HIV Prevention team, Project Connects, provides strategies to mitigate risks related to substance use and overcome challenges to essential services critical to well-being. The team offers harm reduction supplies, teaches risk reduction strategies, and shares wellness resources in a secure, non-judgmental environment. This program provides no-cost HIV, syphilis, hepatitis C, chlamydia, and gonorrhea testing; pre-exposure prophylaxis (PrEP) referrals; counseling; free safer sex supplies; syringe access and safer smoking supplies; and referrals to substance recovery, housing, food, and Medicaid enrollment. Project Connects also provides Naloxone, distributes fentanyl test strips and xylazine test strips, along with opioid overdose prevention and response training.

ACHD prioritizes mobile/outreach-based interventions, actively removing access challenges by meeting community members where they are. This program delivers testing and prevention services in public libraries, shelters, jails, treatment centers, parks, and encampments. In response to the increasing opioid overdose rates, the program provides naloxone and training to the community, prompting “carrying” naloxone to be a common practice.

In 2024, the Harm Reduction program received increased funding from the Regional Opioid Abatement Council (ROAC) to expand services. While core harm reduction efforts continued to receive support, the bulk of new funding was directed toward enhancing jail-based harm reduction initiatives. This expansion focuses on engaging justice-involved individuals to reduce recidivism and negative impacts associated with substance use. The program’s expansion aims to provide direct support, strengthen partnerships to improve access to critical services and resources, and increase education for both individuals affected by the justice system and the professionals who work with them. Additionally, this second round of opioid grant funding enabled the program to hire a Mobile Program Supervisor to help lead and support the expanded team and services.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Total reach/interactions through direct services, outreach, and training engagements	3,339	3,214	2,036	1,622	1,253	8,125
Number of new syringe access program clients enrolled	184	-	-	-	-	153
Syringes distributed	10,590	5,390	12,265	18,460	17,325	53,440
Naloxone distributed	2,092	1,082	1,444	240	936	3,702
Fentanyl test strips distributed	5,632	2,483	3,832	898	6,332	13,545
Xylazine test strips distributed	1,040	1,243	2,025	697	1,255	5,220
Harm reduction kits distributed	1,412	755	1,541	1,541	1,772	5,609
Condoms distributed	7,690	2,766	6,654	656	4,076	14,152

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
HIV tests conducted (nonclinical)	152	24	62	50	91	227
Hepatitis C tests conducted	43	20	45	34	83	182
Chlamydia/gonorrhea tests conducted	118	14	38	44	67	163
Syphilis tests conducted	68	22	45	36	81	184

Accomplishments

- Rebranded the program from ACHD Harm Reduction to “Project Connects” to reflect its commitment to promoting health and fostering community connections. This rebranding reduced stigma and built trust with populations hesitant to engage with government-run services, especially regarding safer sex and substance use resources. The program emphasized its role as a connector by meeting people where they are and lowering access barriers.
- Strategically integrated Harm Reduction and Sexual Health staff to streamline clinical and mobile service delivery, resulting in more accessible, seamless patient care. This consolidation also optimized staffing efficiency and reinforced alignment with key grant funding priorities.
- Delivered collaborative mobile outreach services with the Sexual Health Program, providing syringe access, safer use supplies, Naloxone, and STI testing and treatment. This outreach resulted in a 77% increase in Naloxone distribution, a 141% increase in Fentanyl test strip distribution, and a 94% increase in condom distribution from 2023, demonstrating enhanced community engagement.
- Provided overdose prevention and response training to over 150 Adams County community members, equipping them with knowledge on the importance and proper use of Naloxone. Each participant received Naloxone to take home, empowering them to play an active role in reducing future overdose fatalities in their communities. Training is available by signing up [here](#).
- Expanded walk-in services at the Westminster Clinic to five days per week from 9 a.m. to 4 p.m. to improve service accessibility. This expansion boosted program reach by 333% in unique clients from 2023 to 2024, and increased client encounters by 143%, significantly improving community access to essential health services.
- Advocated for state-level legislative changes to protect clients in harm reduction programs, contributing to the successful passage of HB24-1037. This law extended paraphernalia exemptions to include all safer use supplies (pipes, foil, snorting tools), increasing legal protection for clients and enabling programs to adapt to evolving substance use trends.

Nurse Support Program

Funding/Revenue Source(s): Local Funds
Year Ending FTE: 9.5
Year Ending Budget: \$1,145,173

The Nurse Support Program works in partnership with Adams County Human Services to provide home visitation services to pregnant or parenting Adams County families. Public health nurses connect families to community resources, provide education and information, and coordinate care to help families thrive. Families are eligible if they work with Adams County Children and Family Services or reside in Adams County and meet income requirements.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Referrals received	161	54	72	49	36	211
Families enrolled in the Nurse Support Program (average)	109	72	84	83	87	82
Percent of referrals converted to being enrolled in the program	67%	70%	62%	57%	50%	-
Home visits completed	880	302	357	294	272	1,225

Accomplishments

- Launched a free Childbirth and Breastfeeding class for low-income pregnant individuals in Adams County, offering three 8-week series in English and Spanish to provide knowledge about childbirth, navigating the healthcare system, self-advocacy, and informed decision-making during pregnancy and delivery.
- Presented a session on Public Health Nursing and Child Welfare: Strengthening Families Together at the Kempe Foundation International Conference to Change Child Welfare.
- Recommended by Children and Family Services to be reviewed by the Title IV-E Prevention Clearinghouse as a potential evidence-based program, which may make the county eligible to receive additional funding.

“I am so thankful for this class and everything I learned. I didn’t want the class to end.”

– Nurse Support Childbirth Class Participant.

“My nurse is patient, compassionate, respectful of my boundaries, and explained everything she did. She was not just a nurse but a friend, a listener, and a mother. She cared for me beyond, and I can say she has a great heart. The love and care she offered; I cannot repay her. Anyone else who will have her will never regret it.”

– Nurse Support client.

Nurse-Family Partnership

Funding/Revenue Source(s): Federal and State Funds

Year Ending FTE: 16.5

Year Ending Budget: \$2,048,837

The Nurse-Family Partnership (NFP) is an evidence-based community health program with more than four decades of research demonstrating measurable health and socioeconomic improvements for first-time and low-income pregnant people and their children. A registered nurse partners with each NFP participant and visits the family until the baby turns two. The relationship that develops promotes improved prenatal and maternal health, child development, and increased family self-sufficiency. The program aims to improve pregnancy outcomes, enhance child health and development, and increase family self-sufficiency.

Metrics

Indicator	2023	2024
Total # of families served	340	404
# completed home visits	3,615 (85% in-person)	4,467 (87% in-person)
NFP clients-initiated breastfeeding (benchmark = 81.9%)	91.0%	96.0%
NFP infants/toddlers received developmental screening	61.6%	76.6%
NFP clients screened for postpartum depression	87.0%	92.3%
NFP infants/toddlers fully immunized by 24 months	87.2%	98.4%
# referrals received	715	566

“As first-time parents, it was scary to think we have full responsibility for a tiny human; for their wellbeing and development. We don’t have any friends with kids and are the first in our family to have kids, so we don’t have a lot of support from parents in our generation. [Since beginning the program] we feel more confident and trust our intuition.”

– NFP client.

“Thank you, guys, for the support and education [NFP] provides. I love the program - it helps me feel a lot more prepared as well as educated on potential things about my baby. I also love it because I don’t feel alone in my experience with my pregnancy.”

– NFP client.

Accomplishments

- Improved performance in 14 of 18 Maternal, Infant, and Early Childhood Home Visitation federal benchmarks. Notable gains included a 37% increase in caregivers completing or returning to school, a 23% increase in clients engaging in mental health services, and a 69% increase in

children accessing Early Intervention services, strengthening family stability, child development, and economic self-sufficiency. These outcomes show how early and sustained support through the evidence-based NFP model strengthens families over the long term.

- Received joint recognition from the Colorado Department of Early Childhood and Health Resources & Services Administration for meeting the attrition reduction goal of the Adams County NFP Continuing Quality Improvement project. Despite a 46% increase in families relocating outside the Denver metro area, low attrition rates were maintained, which are linked to improved health and developmental outcomes for parents and children. These findings will inform future strategies to ensure continuity of care across transitions.
- Hosted a successful Fall Festival & Resource Fair, bringing together over 25 community partners and serving 170 families with health, education, wellness, and civic engagement resources.

Child Fatality Review/Child Maltreatment Prevention

Funding/Revenue Source(s): State and General Funds

Year Ending FTE: 1

Year Ending Budget: \$129,430

The Colorado Child Fatality Prevention Act mandates local county review of all preventable child deaths. ACHD designates a Public Health Nurse to facilitate the review of child fatality cases within Adams County, resulting in the development of prevention strategies. This work is done with Child Fatality Review Teams recruited across multiple public health, law, emergency services, medical, and education fields. The review teams use a public health approach to prevent child deaths by aggregating data from individual cases, describing trends and patterns, and recommending prevention strategies. Cross-county strategies may include recommendations to increase access to adolescent behavioral health treatment for suicide prevention, parental support to build awareness of warning signs of substance use, or gun safety.

Metrics

Indicator	2023	2024
# of child fatality cases assigned	36	27
# of cases reviewed	36	27
# of Review team meetings completed	9	7

Accomplishments

- Presented firearm-related injury data from the Child Fatality Review Team at the American Public Health Nurses Association and Public Health in the Rockies annual conferences through a national poster presentation. Findings highlighted causes and manners of child deaths and showcased how ACHD is implementing prevention strategies based on local reviews, demonstrating a public health approach to reducing firearm-related fatalities.
- Distributed over 200 firearm trigger locks and safe storage information to community members at ACHD-supported Healthy Farmer Markets and baby safety events, promoting firearm safety and reducing the risk of unintentional injuries in homes.

HCP: A Program for Children and Youth with Special Healthcare Needs

Funding/Revenue Source(s): Federal Funds

Year Ending FTE: 1

Year Ending Budget: \$133,989

HCP at ACHD is a Title V Block Grant-funded program that provides intensive care coordination, resources, and information for families with children who have special healthcare needs. Families can receive HCP support for a wide range of needs, including medically complex issues like diabetes or a physical and behavioral disability such as birth defects or autism. The program supports families with or without a diagnosis. The HCP nurse supports families by completing a shared plan of care to achieve mutually identified goals while building the family's ability to self-advocate in the complicated system for kids with special needs. The HCP program aims to increase medical, specialty, and behavioral healthcare access; increase understanding and assist navigation with insurance coverage for special needs; and provide transition support in both the medical and education systems to ensure the provision of necessary resources to mitigate and prevent compounding disability. Children from birth to age 21 are eligible for this no-cost service.

Metrics

Indicator	2023	2024
Care coordination clients	22	19
Information and referrals	137	204
# family encounters - information and resources provided	-	112
# referrals received	-	61
# Community/ACHD encounters -consultations	-	107
Average length of service by client (days)	-	169.9

Accomplishments

- Supported an increasing number of non-English speaking families, with 47.4% (9 of 19) of care coordination clients in 2024 requiring interpretation services, demonstrating the growing need for language-accessible support.

School/Childcare Nurse Liaison

Funding/Revenue Source(s): Revenue

Year Ending FTE: 0.5

Year Ending Budget: \$66,005

The School/Childcare Nurse Liaison program was launched in 2024 and was supported by a 0.5 FTE position reallocated from the Immunizations program.

Public Health nurses are uniquely qualified to deliver quality, cost-effective services for local schools and childcare programs. In 2024, ACHD was engaged by two Head Start early learning centers and one charter school in Westminster Public Schools to provide professional nursing services. The primary objective of this program is to provide comprehensive Child Care Health Consultation services for Adams County participating schools that foster collaborative relationships between public health and education, decrease barriers to school or childcare attendance and increase access to resources and knowledge for staff and caregivers.

Accomplishments

- Trained 65 staff members across eight sites to administer or delegate inhaled, emergency, topical, and oral medications to children in school or childcare settings.
- Completed 52 school site visits across Adams County to deliver health-related trainings, conduct monthly consultations, perform medication audits, and facilitate medical event debriefings. These visits improved medication safety practices and reinforced collaboration between public health and educational institutions.

Family Recovery Program

Funding/Revenue Source(s): Local (Opioid)

Year Ending FTE: 1

Year Ending Budget: \$149,637

The Family Recovery Program (FRP) is a newly created program, launched on July 29, 2024, and funded by Adams County Opioid Abatement Grant funds, awarded by the Adams County Regional Opioid Abatement Council. A dedicated Public Health Nurse coordinates care for pregnant and parenting individuals in ACHD programs who face substance misuse challenges, act as a subject matter expert to support existing ACHD programs serving individuals with substance misuse or related behavioral health concerns, liaison to community-based partners and service providers to increase access to treatment options, and engage in policy and system-level prevention strategies to address barriers to treatment and ultimately decrease child maltreatment and fatality. The Family Recovery Program anticipates the ability to begin direct services in early 2025, strengthening the impact of ACHD programs and providing quality access to substance misuse services in Adams County.

Accomplishments

- Initiated collaborative partnerships with over 25 community behavioral health providers to gather critical information on treatment availability, referral processes, and provider attributes, including cultural competencies, language access, and cost structures.
- The program will begin accepting clients in 2025. The following key drivers were provided to the Adams County Regional Opioid Abatement Council to measure the FRP success –
 - Metric: Number of identified behavioral health providers who serve Adams County.
 - Goal: Increase baseline # of 40 identified providers by 25% by 4/30/2026
 - Metric: FRP will assess client readiness for entry into treatment and evaluate with Stages of Change model.
 - Goal: Client will demonstrate positive behavior change by moving a minimum of one phase within the Stage of Change model.
 - Metric: % of nurses who agree or strongly agree that they were better able to provide services because of FRP intervention.
 - Goal: 90% of referring nurse home visitors report increased capacity to meet program goals.
 - Metric: % of established behavioral health partners surveyed who agree or strongly agree that FRP increases entry to behavioral health support.
 - Goal: Survey established behavioral health provider network to assess impact

Nursing Operations Program

Funding/Revenue Sources, FTEs, and Budgets are included in the Public Health Nursing Division Overview numbers.

The Nursing Operations Team is a vital component of the Nursing Division, driving operational excellence in delivering high-quality care to the community. The multidisciplinary team includes a Clinical Informatics Specialist, an Administrative Coordinator, a Community Health Worker, and a Revenue Cycle Specialist.

This team ensures seamless clinic operations by optimizing workflows, enhancing client care processes, and managing the essential administrative, technological, and financial systems that support the division’s mission. The Nursing Operations Team is committed to improving health outcomes while maintaining efficiency and fiscal accountability.

Metrics

Indicator	2024				
	Q1	Q2	Q3	Q4	TOTAL
Fees charged	\$82,126.00	\$65,018.61	\$95,348.02	\$113,940.74	\$356,433.37
Actual fees collected	\$55,449.09	\$45,212.77	\$54,110.37	\$70,421.79	\$225,194.02

Accomplishments

- Developed and implemented an inventory tracker for the Project Connects Harm Reduction program to monitor supply and demand accurately. This tool reduced shortages, minimized overstocking, and improved cost efficiency by allowing the team to anticipate supply needs and avoid unnecessary purchases.

Nursing Training and Quality Improvement

Funding/Revenue Source(s): General Funds

Year Ending FTE: 1

Year Ending Budget: \$135,000

The Public Health Nursing Training and Quality Improvement Program oversees the coordination of clinical placements for nursing students at both undergraduate and graduate levels and graduate students from non-nursing disciplines seeking to complete a shadow, capstone, or practicum experience within the Nursing Division. The program also facilitates internship opportunities within the Nursing Division for high school students. The program is designed to address the Public Health Accreditation Standard of ensuring and maintaining a competent public health workforce and fostering the development of a sufficient number of qualified public health nurses. The program aims to inspire individuals to pursue public health as a career path. To enhance professional development and ensure the delivery of evidence-based nursing care, the program provides continuous learning opportunities. A designated Public Health Nurse collaborates with department programs, county resources, and professional organizations to lead staff training and development initiatives.

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# of staff certified in Basic Life Support (BLS)	35	17	17	9	15	58
# of staff/community members certified in CPR/First Aid	0	0	0	36	0	36
# of hours spent precepting graduate students	70	90	103	211	179	583
# of hours spent precepting undergraduate students	48	96	172	194	224	686

Accomplishments

- Established three formal agreements with higher education institutions to strengthen partnerships and expand experiential learning and workforce development opportunities. This expansion deepened academic collaboration and enhanced community-based learning pathways. These additions brought the total number of active partnerships to 12, including the University of Northern Colorado, Front Range Community College, Denver College of Nursing, St. Joseph Medical Residency, Colorado Mountain College, University of Colorado Anschutz, Denver Metro (MSU), and Colorado Christian, Grand Canyon, Colorado State, Johns Hopkins, and Regis Universities.
- Delivered hands-on phlebotomy skills training to four Harm Reduction staff in May 2024, increasing staff capacity to provide essential clinical and community-based services. This training expanded service delivery capabilities within the team and improved client access to comprehensive harm reduction care.

Performance and Business Excellence

Vital Records • Public Health Policy and Public Affairs • Performance Management and Quality Improvement • Project Support Office • Workforce Development • Financial Planning and Analysis • Administrative Support



Division Administration

Funding/Revenue Source(s): General Funds
Year Ending FTE: 1
Year Ending Budget: \$855,536

The Performance and Business Excellence Division is critical in supporting high performance and continuous improvement throughout ACHD. The division improves internal systems by training staff and helping teams manage projects more effectively. These efforts also strengthen local partner organizations to better serve the community. Strategic direction is also essential in maintaining ACHD's competitive position and advancing key business development initiatives. The division's financial expertise encompasses accounting, budgeting, contracting, compliance, and the strategic management of long-term investments, all vital to ACHD's sustainability and pursuit of excellence. This Division works collaboratively with the internal service departments of Adams County government to ensure alignment to budget planning, accounting, and fiscal and human resource-related policies and procedures.

Another key aspect of the Performance and Business Excellence division is its effective management of daily operations. This encompasses facility management, capital investments, and logistics coordination for cross-divisional work. The division also maintains a strong emphasis on administrative excellence, ensuring ACHD's operations are consistently held to the highest standards.

While most of the division's focus is internal, the Performance and Business Excellence division still maintains a strong external presence through our Vital Records Program. This team primarily focuses on the issuance of birth and death certificates to community members in counties across the state of Colorado.

Vital Records

Funding/Revenue Source(s): Revenue

Year Ending FTE: 6

Year Ending Budget: \$542,763

At the beginning of 2024, the Vital Records program had 4 FTEs. By the end of the year, staffing increased to 6 FTEs due to an increase in revenue funding. All changes were approved through the formal BOH and BOCC processes.

Vital Records is an essential service mandated for all Colorado health departments, ensuring the accurate processing of birth and death certificates. The program operates under the authority of CDPHE's Office of Vital Statistics, with staff members officially deputized to carry out these duties. Within the state, there are 53 Vital Record Offices linked to health departments, with Adams County being one with dedicated personnel for handling these vital documents. The Vital Records office collaborates with five local hospitals, as well as several outside of the county, and provides services directly to Adams County Human Services, approximately 50 funeral homes, the Motor Vehicle Department, and passport agencies. In addition, they maintain partnerships with walk-in customers and funeral homes, handle email and telephone inquiries, faxes, two third-party vendors, and courier orders, and directly deliver to 24 funeral homes.

The responsibilities of the staff extend beyond processing, as they are vigilant in reviewing each submission for potential fraud, verifying the legitimacy of requesters, and confirming the identification provided meets the stringent requirements—21 forms of primary ID and an equal number of secondary IDs are accepted. Staff can issue certificates for any birth or death that occurred in Colorado. They also handle home birth and death registrations in Adams County, which means being available on weekends and holidays for urgent requests. This service is critical for timely death registrations and the provision of permits required for burials, cremations, and the transportation of remains to other states and countries, ensuring the needs of the community are met even during non-standard hours. [Appointments for birth and death certificates can be scheduled online through the Adams County Vital Records Office.](#)

Metrics

Indicator	2023	2024				
	TOTAL	Q1	Q2	Q3	Q4	TOTAL
Death certificates issued	73,535	19,517	19,129	18,898	16,025	73,569
First copy	12,135	3,250	2,986	3,096	2,753	12,085
Second+ copy	61,400	16,267	15,663	15,802	13,272	61,004
Death certificate revenue	\$1,040,900	\$276,471	\$241,299	\$267,346	\$227,596	\$1,012,712
Birth certificates issued	7,735	3,309	3,136	3,076	2,412	11,933
First copy	5,648	2,384	2,337	2,245	1,723	8,689
Second+ copy	2,087	925	799	831	689	3,244
Birth certificate revenue	\$140,091	\$59,705	\$57,127	\$55,703	\$43,417	\$215,952
Total certificates Issued	81,270	22,826	22,265	21,974	18,437	85,502
Total revenue	\$1,180,991	\$336,176	\$298,426	\$323,049	\$271,013	\$1,228,664

Accomplishments

- Completed regular deliveries to 24 funeral home locations across seven Colorado counties, ensuring timely and reliable access to vital records for families during end-of-life planning. This service supported compassionate care and improved coordination with funeral service providers.
- Drove 28,696 miles to fulfill delivery responsibilities, demonstrating a strong commitment to statewide service coverage and enhancing access to essential records in urban and rural communities.
- Processed 7,652 orders through third-party vendors to serve individuals nationally and internationally who were seeking vital records for events that occurred in Colorado. This effort expanded access to critical documentation, supported legal and personal needs, and improved customer service reach beyond state borders.

Public Health Policy and Public Affairs

Funding/Revenue Source(s): General Funds

Year Ending FTE: 1

Year Ending Budget: \$132,209

The Public Health Policy and Public Affairs Sr. Advisor is crucial in reducing differences in health outcomes and enhancing population health through systemic efforts. The advisor works with leaders at all levels of government, including federal, state, and municipal, to support policies that improve health outcomes and reduce disparities. Engaging directly with the Colorado General Assembly, this role is instrumental in shaping and promoting policies that bolster ACHD's capacity to deliver key programs and services. The position supports legislative efforts and ordinances to improve the mental, physical, and social determinants of health for Adams County residents. Beyond legislative activities, the advisor collaborates with coalitions, participates in regulatory processes like state rulemaking, aids in executing legislative initiatives, and closely coordinates with all ACHD divisions.

Accomplishments

- Developed, advocated for, and successfully passed HB24-1456 at the Colorado General Assembly to address and reduce rates of congenital syphilis in Colorado. Sponsored by Adams County legislators Julia Marvin, Lindsey Daugherty, and Dafna Michaelson Jenet, the bill passed with bipartisan support and was signed into law by Governor Polis on June 5, 2024, marking a significant step forward in protecting maternal and infant health.
- Sponsored an amendment to HB24-1037: Substance Use Disorders Harm Reduction, enabling ACHD staff to distribute a broader range of harm reduction products. This amendment expanded the tools available to support individuals struggling with substance use and enhanced the impact of harm reduction services in 2024.
- Created the first-ever ACHD 'Policy Papers' for Adams County elected officials on tobacco retail licensure and healthy beverage policies. These briefs supported informed decision-making, strengthened policy advocacy, and positioned ACHD as a resource for evidence-based public health legislation.
- Hosted the 2024 ACHD Local Elected Officials event, with over 40 attendees representing seven Adams County municipalities. The event featured presentations on behavioral health, tobacco control, and climate and environmental updates, including contributions from the United States Environmental Protection Agency (EPA).

Performance Management and Quality Improvement

Funding/Revenue Source(s): General Funds, Revenue

Year Ending FTE: 3

Year Ending Budget: \$390,056

The Performance Management and Quality Improvement (PMQI) team supports ACHD staff with training and tools to solve problems, improve programs, and deliver better public health services. The PMQI team provides consultation, coaching, facilitation, problem-solving support, and training to all ACHD teams, programs, and divisions. The team has two main deliverables: 1) establishing and sustaining a performance management system and 2) utilizing lean methodologies and other tools to cultivate a culture of quality improvement across the department.

The PMQI program supports ACHD in building staff capacity, initiating strategic projects, developing key processes, and delivering organizational and developmental training to strengthen the public health workforce. These efforts enhance the department's ability to provide essential public health services to the Adams County community. The team is often called upon to facilitate meetings and improvement events geared toward a defined opportunity statement and is essential in the deployment and support of the ACHD 2024-2026 Strategic Plan.

Accomplishments

- Established a Performance Improvement and Excellence Workgroup with representatives from all divisions to promote and support quality improvement (QI) efforts across ACHD programs. This cross-functional collaboration strengthened QI capacity, encouraged innovation, and aligned division-level initiatives with department-wide goals.
- Facilitated over 70 continuous improvement and strategic planning events for ACHD Divisions and other Adams County departments to increase operational efficiency, align departmental goals with county-wide priorities, and foster collaboration. These efforts enhanced the delivery of public services and promoted unified direction across departments.
- Facilitated Social Styles training for over 40 colleagues across the department to strengthen communication, build team cohesion, and enhance organizational effectiveness. This training fostered more productive relationships and supported a positive work culture.
- Drafted the department's Performance Management and Quality Improvement Plan in collaboration with executive leadership to guide ACHD in cultivating a culture of continuous improvement. The plan connects leadership goals with day-to-day operations and supports data-driven decisions and is required for Public Health Accreditation.

Project Support Office

Funding/Revenue Source(s): General Funds, Revenue

Year Ending FTE: 2

Year Ending Budget: \$307,024

The Project Support Office (PSO) provides the foundational framework, governance, and tools for initiating, planning, executing, monitoring, controlling, and closing ACHD's projects. The PSO has established a Project Management Institute-based framework comprising processes, best practices, guidelines, tools, and artifact templates to enable project teams to be successful and provide consistent project delivery. The governance aspect of the PSO brings standardization to chaotic and varied project management practices. The PSO uses defined, repeatable processes and standards to bring order and consistency to project management.

The PSO focuses on two key areas: 1) Portfolio Management and 2) Project Delivery. Portfolio Management involves the centralized management of projects to ensure strategic alignment, resource optimization, prioritization, and risk management. This is achieved through monthly meetings with the Public Health Leadership Team (PHLT) to review the department's project portfolio. Project Delivery follows a structured process to guide project execution. Monthly "PSO Meetings" are held, requiring attendance from all project managers with active projects. These meetings provide training on tools and templates and opportunities to share project status updates and support consistent project delivery.

Accomplishments

- Provided tailored training and support to ACHD divisional project managers on initiatives including American Rescue Plan Act projects, Community Health Improvement Plan, the Central Referral System, Language Access Planning, and Food System Resilience. This support enhanced project execution, increased staff capacity, and improved the delivery of key public health initiatives.
- Collaborated with the Adams County Information Technology and Innovation (ITi) department to establish a formal Project Support Office within ITi as part of their organizational strategic plan. This effort introduced industry-standard project management practices, strengthened cross-departmental coordination, and supported staff recruitment to enhance long-term project capacity.
- Delivered project management support to ITi throughout the first year of the ITi Strategic Plan to guide its transformation into a service-oriented organization. This contribution helped establish operational foundations, improved service delivery, and aligned IT functions with countywide strategic priorities.

Workforce Development

Funding/Revenue Source(s): State and General Funds

Year Ending FTE: 2

Year Ending Budget: \$244,223

ACHD's Workforce Development program is committed to fostering a skilled, varied, and resilient workforce equipped to address current and emerging public health challenges. The program helps ACHD employees grow in their careers by offering training, mentorship, and development opportunities, so they're ready to meet the changing needs of the community. By investing in its workforce, the department can cultivate a culture of excellence and adaptability, ensuring all employees are well-equipped to meet the evolving needs of public health now and in the future. ACHD aims to ensure its staff are skilled, motivated, and equipped to deliver excellent public health services. The range of activities and services provided by public health workers requires an experienced, motivated, and well-trained workforce.

Accomplishments

- Developed and implemented a health department-specific New Employee Orientation (NEO) to complement the county-wide orientation provided by Adams County People and Culture. This NEO improved onboarding experiences, strengthened departmental integration, and supported early employee engagement. Over 60 ACHD staff have attended the department-specific NEO.
- Offered several new training courses to staff to enhance leadership and career development opportunities, including 20 attending Technology of Participation Facilitation Training and 71 attending Mental Health First Aid. These offerings promoted skill-building, supported mental well-being, and encouraged professional growth across the department.

Financial Planning and Analysis (FP&A)

Funding/Revenue Source(s): Federal, Local (Opioid), and General Funds

Year Ending FTE: 4

Year Ending Budget: \$471,097

At the beginning of 2024, the FP&A program had 3 FTEs. By the end of the year, staffing increased to 4 FTEs due to an increase in external funding. All changes were approved through the formal BOH and BOCC processes.

Colorado Revised Statutes 25-1-511(4) requires ACHD to adopt an annual budget. This statute mandates that "on or before September 1 of each year, a county board of health shall estimate the total cost of maintaining the county public health agency for the ensuing fiscal year, and the amount of moneys that may be available from unexpected surpluses or from state or federal funds, or other grants or donations." Additionally, CRS 29-1-108 requires the ACHD Board of Health to conduct a public hearing regarding budget adoption and subsequently adopt the budget following an affirmative majority vote. ACHD operates on a calendar-year budget cycle from January 1 through December 31.

The Financial Planning and Analysis (FP&A) team develops and monitors the department's budget while ensuring strategic alignment of resources with organizational goals and priorities. In addition to budgetary oversight, the team assists with the coordination of departmental purchasing activities, manages the creation, compliance, and execution of revenue and expense agreements, and coordinates accounts payable reviews.

The FP&A team leads grants management activities, from identifying and prospecting new funding opportunities to writing and submitting competitive grant proposals. The team ensures full compliance with all grant requirements, including reporting, documentation, and financial tracking. The team actively contributes to program development by collaborating with operational teams to design financially sustainable, strategically aligned initiatives that qualify for external funding. Through these integrated functions, the FP&A team supports both fiscal health and long-term growth of the department's public health programs. The team provides comprehensive oversight and management of all financial activities, ensures financial compliance with applicable laws, regulations, and policies, and maintains internal control policies and procedures.

ACHD coordinates with Adams County's Budget and Finance department for centralized financial services that enhance processing efficiency and reporting capabilities. These activities include accounts payable, accounts receivable, cash management, federal funds reporting, procurement, and financial audits.

Administrative Support

Funding/Revenue Source(s): State, General Funds, and Revenue

Year Ending FTE: 6

Year Ending Budget: \$361,204

At the beginning of 2024, the Administrative Support program had 4 FTEs. By the end of the year, staffing increased to 6 FTEs due to an increase in revenue funding. All changes were approved through the formal BOH and BOCC processes.

The Administrative Support team plays a behind-the-scenes role to keep day-to-day operations running smoothly across all ACHD programs by coordinating supplies, scheduling, and logistics across the department. They are pivotal in scheduling, managing appointments, improving clinic customer service, supporting referral programs, and ensuring all program staff are equipped for their jobs, a critical aspect for an employer. Beyond these duties, the team leads the implementation of administrative policies and systems, manages office supplies and vendor relations, and collaborates with other departments to create a cohesive administrative framework. Their expertise extends to logistics coordination, participation in committees, representation on councils, and strategic initiatives, as well as providing exceptional customer service to the community, stakeholders, leadership, and department staff.

Accomplishments

- Coordinated 220 community events across multiple health department divisions to streamline planning, foster interdepartmental collaboration, and strengthen partnerships with organizations throughout Adams County. This effort enhanced public outreach, improved service delivery, and promoted unified community health initiatives.
- Represented the department on key internal and external committees and workgroups, including the People's Council, A-Proud, Asian American Pacific Islanders affinity group, Language Access planning group, strategic planning workgroups, Adams County Safety Committee, community engagement workgroup, P.I.E. Team, and administrative support workgroup. This engagement amplified all voices, guided balanced policy development, and strengthened cross-functional alignment within the organization.