

STATE OF COLORADO



Colorado Department of Public Health and Environment

Strategic Plan 2011-2016

Introduction

The Colorado Department of Public Health and Environment is one of 16 cabinet-level departments whose executive directors are appointed by the Governor. The mission of the Colorado Department of Public Health and Environment is to protect and preserve the health and environment of the people of Colorado. Dr. Chris Urbina serves as executive director and chief medical officer of the department.

The department is organized into 11 divisions that fall under three broad groupings: health programs, environmental programs and administration.

The department also serves as staff to five state-appointed boards or commissions: Colorado Board of Health, Air Quality Control Commission, Water Quality Control Commission, Solid and Hazardous Waste Commission, and the Water and Waste Water Facility Operators Certification Board.

The department serves the people of Colorado by providing high-quality, cost-effective public health and environmental protection services. The department focuses on evidence-based best practices in the public health and environmental fields and plays a critical role in educating our citizens so they can make informed choices. In addition to maintaining and enhancing our core programs, we continue to identify and respond to emerging issues that could affect Colorado's public and environmental health.

The department pursues its mission through broad-based public health and environmental protection programs, including, among other programs, working on Colorado's ten winnable battles: Clean Air, Clean Water, Infectious Disease Prevention, Injury Prevention, Mental Health and Substance Abuse, Obesity, Oral Health, Safe Food, Tobacco, and Unintended Pregnancy. The winnable battles will be discussed in more detail later in the strategic plan.

The department has a staff of approximately 1,223 employees, with the vast majority working at the department's offices in Glendale. The state Laboratory is in Lowry and there are small satellite offices in Grand Junction and Pueblo. The department receives approximately 94 percent of its \$466 million funding from fees, grants and other non-General Fund sources.

Statutory Authority

The statutory authority for the Department of Public Health and Environment is found in Title 25 of the Colorado Revised Statutes (2012).

Overview of the Department's Strategic Plan:

This strategic planning document summarizes the Strategic Plan for the Colorado Department of Public Health and Environment for 2011-2016. It includes the following major elements:

- *The Mission Statement for the department
- *The Vision for the department
- *The Strategic Map for the department
 - Central Challenge
 - Strategic Priorities (performance based goals)
- *Performance Measures for the department
- *Strategies for achieving department goals
- *Performance Evaluation of the department's progress toward achieving goals

Mission

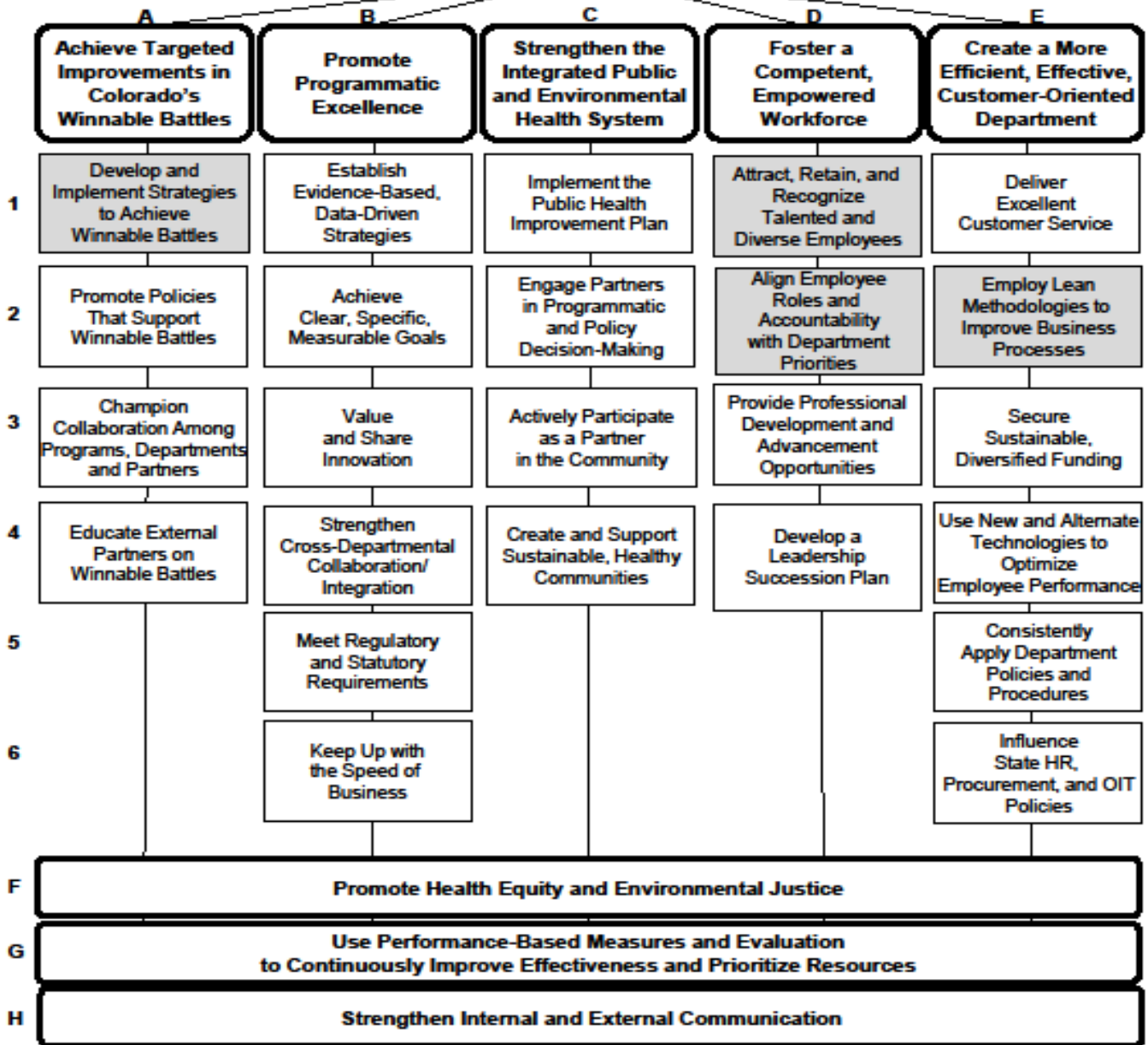
The mission of the Colorado Department of Public Health and Environment is to protect and improve the health of Colorado's people and the quality of its environment.

Vision

Colorado will be the healthiest state with the highest quality environment.

**Colorado Department of Public Health and Environment
Strategic Map: 2011-2016**

**Align Priorities and Resources
to Improve and Sustain Public Health
and Environmental Quality**

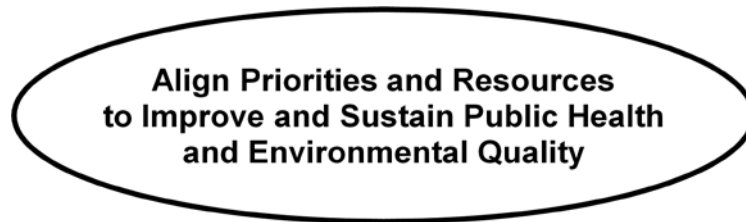


Strategic Map

The strategic map of CDPHE summarizes the department’s strategy for the next five years and what it must do to carry out the mission and achieve the vision. It contains the following main elements:

Central Challenge

The oval at the top of the map represents the central challenge facing the department over the next five years. It is the focal point for the department’s strategies and guides what the organization needs to do to support its mission.



Strategic Priorities (Performance Based Goals)

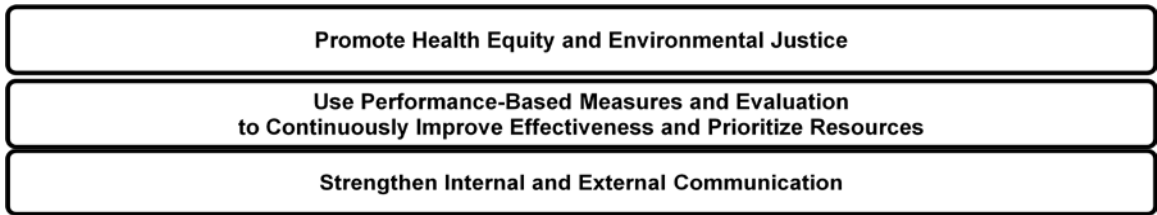
The central challenge is supported by five strategic priorities or performance-based goals labeled A-E on the strategic map. These are the critical things the department must do in order to meet our central challenge.



Cross-cutting Strategic Priorities

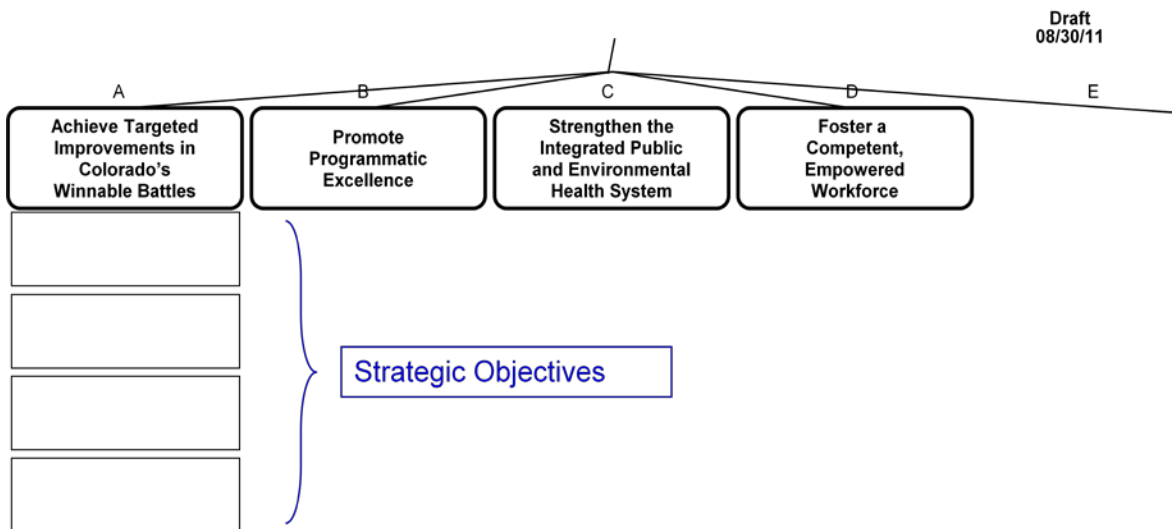
At the bottom of the strategic map are three cross-cutting strategic priorities. There are several characteristics of a cross-cutting strategic priority:

- A cross-cutting strategic priority is foundational to achieving the central challenge so it is placed at the bottom of the strategic map to show this.
- A cross-cutting strategic priority also spans the map from left to right to show that the work of implementing it needs to be embedded in all of the other strategic priorities.



Strategic Objectives

The boxes under each strategic priority are strategic objectives and correspond with the strategies component of the SMART Act. Strategic objectives are the next level of “what to do.” They represent the areas of focus in the coming year in order to make progress toward success in achieving the strategic priority.



In order to move toward success in achieving the performance based goals (strategic priorities); the department will be focusing on the following four strategies (strategic objectives from the strategic map) for the coming fiscal year.

The objective number (i.e. A1) corresponds to the position on the strategic map

- Objective A1. Develop and Implement Strategies to Achieve Winnable Battles
- Objective D1. Attract, retain and recognize talented and diverse employees.
- Objective D2. Align Employee Roles and accountability with Department Priorities
- Objective E2. Employ Lean Methodologies to Improve Business Processes

Strategies, Performance measures and evaluation for strategic priorities

Strategic Priority A – Achieve Targeted Improvements in Colorado’s Winnable Battles

Strategy overview

Objective A1. Develop and Implement Strategies to Achieve Winnable Battles

Colorado has identified 10 Winnable Battles:

- **Clean Air**
- **Clean Water**
- **Infectious Disease Prevention**
- **Injury Prevention**
- **Mental Health and Substance Abuse**
- **Obesity**
- **Oral Health**
- **Safe Food**
- **Tobacco**
- **Unintended Pregnancy**

Colorado's Winnable Battles align with the Centers for Disease Control and Prevention's (CDC) Winnable Battles and the seven priorities for EPA's Future and are Colorado's greatest opportunities for ensuring the health of our citizens and visitors. Based on data, these winnable battles have been selected as key public health or environmental issues where progress can be made in the next five years.

The Winnable Battles were chosen for the following reasons:

1. They are important:
 - Many people are affected or at risk (mortality and morbidity rates, disability, etc.).
 - They involve a large degree of health disparities.
 - They impose a large economic burden or risk on quality of life.
2. We have an ability to impact these areas:
 - Evidence-based strategies or best practices exist.
 - There is community-level readiness and support for change.
 - We can have an impact on a large percentage of the target population.
3. There is capacity to improve these areas:
 - There is political will and there are champions to support these issues.
 - There are organizations prepared to take the lead and to move forward.
 - There is sufficient staff available, and funding is available or obtainable.

Colorado's Winnable Battles were chosen with consideration of national and local goals (CDC's Winnable Battles, the Seven Priorities for EPA's Future and local public health and environmental priorities). Alignment of national, state and local efforts allow for maximum effectiveness and efficiency. To make a difference, we need our schools/universities; workplaces/businesses/industries; state health care, human services, natural resources and transportation agencies; conservation/environmental

groups; foundations; faith-based organizations; elected officials; and nonprofit organizations to be active participants in the Winnable Battles.

Performance evaluation

The following performance measures are targeted to strategic priority A—Winnable Battles. However, each group of performance measures may list other strategic priorities that are impacted secondarily.

Clean Air

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- E). Create a More Efficient, Effective, Customer-Oriented Department

| | Baseline (Year) | Colorado 2016 Target |
|--|---|---|
| Clean Air | | |
| Reduce emissions of mercury. | 80% mercury capture at three large CO power plants (2011) | 80% mercury capture from large power plants in CO |
| Emissions of harmful ground-level ozone forming pollutants from major sources in the ozone non-attainment area | 16,500 tons per year of NOx (nitrogen oxides) (2008) | Reduction of 11,000 tons of NOx in Denver metro and North Front Range |

Strategies to meet the Clean Air Winnable Battle

- Implement Colorado regulations for mercury reductions from Colorado power plants.
- Implement retirements of older, less efficient coal-fired power plants, fuel switching from coal to natural gas, and emission controls provided for by the Colorado Clean Air - Clean Jobs Act.

Performance Evaluation

Colorado has adopted regulatory provisions that will require large power plants to capture 80% of mercury emissions commencing in 2014. Additional provisions that are slated to take effect in 2018 will require a 90% mercury capture rate from these sources. In September 2012, the Environmental Protection Agency approved changes to Colorado’s State Implementation Plan (SIP), which include new requirements that will achieve annual NO_x reductions of 11,000 tons per year in the ozone non-attainment area by 2016, and approximately 35,000 tons per year statewide by 2018. Some of these reductions are already in place as a result of the shut-down of Cherokee Power Plant Units 1 and 2. Currently, the Air Pollution Control Division is working with the remaining affected sources to develop more detailed implementation plans that will ensure that these NO_x reduction targets will be met.

Clean Water

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- E). Create a More Efficient, Effective, Customer-Oriented Department

| | Baseline (Year) | Colorado 2016 Target |
|---|---|---|
| Clean Water | | |
| Percent of water bodies that attain compliance with water quality standards | 52% of river/stream miles attain standards 30% of lakes/reservoirs attain standards (2010) | 60% of river/stream miles attain standards 40% of lakes/reservoirs attain standards (2010) |
| Improve the quality of surface water and ground water that contains hazardous contaminants by treating the contaminated water | 2,441 million gallons of water treated (2010) | 2,628 million gallons of water treated |
| Number of people served by public drinking water systems that are not in compliance with uranium and radium standards | 21,204 people (28 systems – 1.7% of total systems) (2010) | 4,116 people (16 systems – 0.8% of total systems) |

Strategies to meet the Clean Water Winnable Battle

- The Department provides technical and financial assistance to the communities with elevated uranium and radium levels in their drinking water supplies.
- The Department coordinates with local and federal agencies to support the Arkansas Valley Conduit that will bring fresh, clean water to many communities along the Lower Arkansas River Valley.
- Prioritize permits that discharge to waters that do not meet standards.
- Respond to violations for discharges to waters not meeting standards and for compliance schedules requiring construction of new/modified wastewater treatment facilities.

- Develop and implement Total Maximum Daily Loads of pollutants (TMDLs) directed at those situations where meeting standards can be achieved in an efficient/effective manner.
- Reduce nutrient concentrations from sources contributing to standards exceedance beginning in 2012.
- Provide for a robust monitoring program to identify whether additional controls might be necessary to meet more specific water quality goals anticipated to be set after 2022.

Performance Evaluation

Since 2007, the Colorado Department of Public Health and Environment has identified 43 Public Water Systems in Colorado where uranium or radium levels in drinking water exceeded health standards. Today about 28 systems serving about 21,000 remain out of compliance. The Department provides technical and financial assistance, negotiates schedules for compliance, and coordination with local and federal agencies. Additionally, the Department has established an online community for the Public Water Systems in the Arkansas Valley to share information on interim measures they can take, until they receive fresh, clean water from the Arkansas Valley Conduit project. In 2012 two more systems have installed treatment systems, and another two are under construction. By spring 2013, there will be fewer than 6,000 people in Colorado served by Public Water Systems with elevated uranium and radium levels in their drinking water supplies.

The Colorado Department of Public Health and Environment monitors the quality of all surface waters in Colorado to determine the status relative to the designated uses (water supply, recreation, aquatic life, agriculture, and wetlands) and applicable protective standards. In 2010, water quality standards were attained in 52% of total stream miles and 30% of total lake acres. Standards were not attained in 12% of stream miles and 31% of lake acres. Water quality was undetermined in 36% of stream miles and 39% of lake acres. In 2012, the Department completed the biennial assessment of surface water quality across the state. Water quality standards were attained in 64% of total stream miles and 28% of total lake acres. Standards were not attained in 11% of stream miles and 23% of lake acres. Water quality was undetermined in 25% of stream miles and 49% of lake acres. The Department will use these results to develop annual surface water quality monitoring plans in subsequent years.

Infectious Disease Prevention

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|---|--------------------------------|----------------------------|
| Infectious Disease Prevention | | |
| Percent of children who are up to date on their DTaP immunization at school entry | 92.6% (2010) | 95% |
| Gonorrhea rate in 15-29 year olds | 206.7 per 100,000 (2010) | 188. per 100,000 (2013) |

Strategies to meet the Infectious Disease Prevention Winnable Battle

- Increase DTaP immunizations by expanding access and utilization of the Colorado Immunization Information System (CIIS) in child care facilities, head start programs, WIC programs, and elementary schools. Colorado has pertussis disease (whooping Cough) that this vaccine can prevent. In addition, Colorado can compare our coverage rates to other states using an individual vaccine, but the requirements for the complete series differ state by state.
- CDPHE and the Colorado Department of Education will work with at least one school district in the coming year to assist them in adopting the sexual health education related curriculum standards.
- Address increased rates of gonorrhea in the most affected communities by sharing information about the problem and facilitating a community-based strategy to address the increased rates.

Performance Evaluation

Colorado has experienced a number of successes related to the DTaP Winnable Battle. In May of 2012, the Immunization Section worked with 9News to film a public Service announcement (PSA) featuring Governor Hickenlooper discussing his personal experience with pertussis and the importance of immunizations. The PSA aired on Channel 9 and several radio stations in June and is re-airing on the radio in August. Additionally, in August of 2012, the Colorado Immunization Section awarded more than \$500,000 to 26 Local Public Health Agencies for immunization and other community

outreach activities aimed at improving the pertussis immunization rate of kindergartners in Colorado.

Concurrent with these positive steps, Colorado is also experiencing challenges. In the first School Immunization Survey since initiating the Winnable Battle campaign, Colorado's percent of kindergartners up to date on pertussis immunizations declined from 92.6% to 85.5%. Additionally, Colorado is experiencing a significant outbreak of pertussis and case counts are anticipated to continue to increase through 2012 and into 2013. Given these recent events, the Immunization Program is re-focusing attention to the immunization winnable battle and the importance of immunizations.

The Colorado Department of Education (CDE) and the Colorado Department of Public Health and Environment (CDPHE) are collaborating to support schools in the establishment and implementation of a Comprehensive Sexual Health Education (CSHE) program within an alternative education setting. The intended outcome is the reduction of sexually transmitted infections and diseases to youth with high risk behaviors. The CDE has met with and conducted a needs assessment with Hidden Lake High School and Florence Crittenton School. It is expected that these two schools will implement an evidence-based comprehensive sexual education curriculum in the coming school year. In collaboration with CDPHE, the CDE will provide professional development for school staff, follow up during the implementation phase, and resource and assessment options.

In January 2011, the Department's Sexually Transmitted Infection (STI/HIV) Section implemented the Section's Gonorrhea (GC) Strategy. This effort incorporates brief STI/HIV prevention messages with enhanced STI case ascertainment activities. This follow-up includes increased provider and client contact in order to obtain more complete demographic variables such as race/ethnicity and current address. Additionally, efforts are made to confirm adequate treatment and the collection of gender of sex partner information. This more complete data has allowed us to more efficiently and effectively identify the most affected communities in Colorado. In collaboration with the North East Denver Health Alliance, the Section has targeted STI related outreach and capacity building efforts in the Montbello and Green Valley Ranch communities. Additionally, in conjunction with our community partners, the Section has expanded outreach and testing initiatives in the 80204 and 80205 zip codes. These communities have been identified as having some of the highest rates of GC in Colorado.

Preliminary analysis indicates a 15.6 percent decrease in GC rates in 15-29 year olds from 2010 to 2011. While this far exceeds our expected three percent reduction each year, future long term trend analysis and evaluation will be performed to determine if these strategies continue to impact disease rates in this population.

Injury Prevention

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|---|--------------------|----------------------|
| Injury Prevention | | |
| Decrease teen motor vehicle deaths rates (15-19 year olds)(expressed as X per 100,000 teens) | 12.7 (2009) | 10.5 |
| Increase the percent of adults who wear a seat belt | 82.9% (2010) | 90.0% |
| Rate of fall related hospitalizations among adults ages 65+ (expressed as X per 100,000 adults) | 1952.7 (2009) | 1757.0 |

Strategies to meet the Injury Prevention Winnable Battle

- Strengthen graduated driver’s licensing laws.
- Enact a primary seat belt law.
- Support the implementation of evidence-based exercise programs to increase balance, gait and strength among older adults.
- Integrate clinical care practice with community falls prevention programs.
- Enable fall strategy avoidance by offering a rebate on the installation of stabilization equipment and devices for long and short term care facilities.

Performance Evaluation

The department’s primary injury prevention objectives focus on reducing motor vehicle deaths and injuries and injuries resulting from falls among the elderly. These two Department initiatives are part of a multi-year strategy to advance injury prevention goals. The department has identified measures that will track achievement of its work goals for the coming year that will allow it to determine progress toward this multi-year plan. CDPHE will annually review outcomes compared to benchmarks for each

performance measure. In addition, it will monitor the meeting of 14 specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review. Working with community partners and creating synergy in our activities, we have real hope of accomplishing our goals.

Increased motor vehicle safety represents one of ten signature public health achievements of the last Century. The primary opportunity, and the most proven approach, to improving motor vehicle safety at the state level rests with policy initiatives that create the conditions for safer driving. In order to develop the environment to explore the best policy initiatives to improve those conditions, the department seeks to distribute education about public health strategies that improve safety and convene a coalition for improved safety. Over the next year the department plans to increase interagency and partner collaboration by forming the Colorado Injury Prevention Network and hosting a symposium to build capacity to engage in policy work on prevention issues. In addition the department will conduct research on motor vehicle policies that can improve safety such as graduated driver's license laws and convene trainings to disseminate the findings of these studies.

Hospitalization and some estimates assume the associated direct medical care and indirect costs from falls among the elderly will cost the nation almost \$60 billion annually by 2020. Fall prevention can extend the healthy years of thousands of seniors. Several fall prevention programs have been developed to improve strength and balance. The department will train seven master trainers who will deploy these initiatives so that their effectiveness as a community intervention can be assessed. The department will also convene a statewide coalition to share the findings from the fall prevention pilots and promote evidence based fall prevention strategies with public health partners.

Mental health and Substance Abuse

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|---|--------------------|----------------------|
| Mental Health and Substance Abuse | | |
| Decrease the percent of 9 th -12 th graders who attempted suicide in the past 12 months | 7.6% (2009) | 4.6% |
| Decrease the percent of adults who report current depression | 7.0% (2008) | 5% |
| Decrease the percent of adults who report binge drinking in the past 30 days | 15.4% (2010) | 12% (2016) |
| Decrease the percent of 9 th -12 th graders who report binge drinking in the past 30 days | 25.1% (2009) | 20% (2016) |

Strategies to meet the Mental Health and Substance Abuse Winnable Battle

- In collaboration with the Department of Health Care Policy and Financing and the Department of Human Services, develop action plans for addressing these Winnable Battles. Action plans will clearly delineate CDPHE’s role. Implement action plans.

Performance Evaluation

Mental health issues affect a significant number of persons in every community, not only those who experience them but also their family members, co-workers and the community in general. Energy spent in dealing with the prevention of and early treatment of such issues pays great dividends to all concerned.

The department is advancing several public health approaches to reducing substance abuse and connecting resources to those in need of mental health services. Research has shown that youth who possess and develop multiple protective factors are better able to resist initiation of substance abuse. Therefore CDPHE seeks to advance and promote positive youth development through its TGYS programs. These programs teach decision skills, resiliency, and positive self image.

Training professionals to recognize the signs and symptoms of depression and other mental health challenges represents the best opportunity to direct the health care

systems resources to those most in need. The department has several program initiatives to teach providers the signs of suicidality among adolescents, pre-natal and post-natal depression in women, and working age men. These efforts will be complemented by promotional efforts that encourage help-seeking behaviors by those facing mental health challenges.

Finally, the department will strengthen collaboration with other state agencies and partners regarding mental health and substance abuse. Public health can advance efforts that work across the population through interagency collaboration by developing integrated approaches that train members of the health, education, behavioral health, and early childhood systems to recognize the signs of depression and substance abuse and encourage health system payers to provide appropriate coverage for routine mental health and substance abuse screening.

These efforts form the current year's focus, but they are part of a multi-year strategy to apply a public health model to the burden of mental illness and substance abuse. Four goal areas have been identified. Performance measures that measure progress towards these goals have been developed and are being tracked quarterly. CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of 9 specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review.

Obesity

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|---|--------------------|----------------------|
| Obesity | | |
| Percent of adults maintaining a healthy weight | 42.4% (2010) | 50.0% |
| Percent of children 2-14 years who are at a healthy weight | 77% (2010) | 80% |
| Percent of high school students who are at a healthy weight | 82% (2009) | 83% |
| Percent of mothers who are still breastfeeding their infants at 6 months of age | 61.2% (2010) | 65.0% |

Strategies to meet the Obesity Winnable Battle

- Promote physical activity and nutrition in school, community and worksite settings.
- Ensure health insurance reimbursements and benefits align with US Preventive Services Task Force Recommendations for obesity counseling and control.
- Collaborate with internal and external partners to produce updated regulations for healthy eating and physical activity in child care centers for adoption by the Board of the Department of Human Services.
- Promote the policy adoption of the ‘Colorado Can Do 5’ in healthcare settings to advance support of breastfeeding.

Performance Evaluation

Obesity prevention and control is a primary focus for CDPHE and a vital problem to address if the state is to succeed in bringing down the costs resulting from chronic disease. While Colorado’s adult obesity prevalence rate ranks it the least obese among the 50 states, its rate of increase mirrors that of other states and the obesity prevalence among its youth puts it in the middle of the pack nationally. Unless progress is made soon, rates of diabetes and cardiovascular disease could begin to rise precipitously in the state.

The department has embarked on an ambitious agenda to convene program staff from across multiple programs that touch on the lives of people in numerous settings so as to bring the full resources of its prevention capacity to bear upon the problem. Programs from women and infant nutrition, to injury prevention, to physical activity, to school-based health and wellness efforts, and from nutrition to women's health lent staff, who worked together to conduct a comprehensive review of the literature, a systematic rating of the evidence for the most effective strategies and interventions, and a prioritization process to identify the best programs to deploy. These efforts will be shared in the coming year with public health partners at the local level and working in the non-profit sector to build capacity for obesity control and prevention initiatives statewide. The department will then coordinate efforts with these partners to ensure the most efficacious deployment of resources and efforts across the state.

The department will seek to raise public understanding of the causes of obesity and the importance of addressing this problem, particularly among business leaders, health care providers, and philanthropy. It will work with health plans to improve the coverage and reimbursement for obesity screening and counseling by providers. It will continue to promote good breastfeeding practices so that infants get a head start on a lifetime of good nutrition. It will promote increased physical activity through several initiatives which seek to encourage more active lifestyles through community design, transportation policies, and open space promotion. It will promote better nutrition by seeking to advance strategies that have promise to curb poor eating habits and facilitate access to healthier foods in schools, child care settings, institutional environments, and communities.

Transformation of the environments that promote obesity and make poor eating and unhealthy living easy choices for too many people will not happen overnight. For this reason, the department's strategy consists of a five year plan to make measurable progress on its winnable battle metrics in this area. This multi-year plan focuses in the first year on developing knowledge and understanding among public health professionals of the most efficacious and promising strategies. However, efforts to improve and transform the environments people experience so that healthier choices are easier to make, have already begun.

Performance measures that track progress toward efforts to increase levels of physical activity and improved nutrition have been developed and built into the 5-year plan. CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of 22 specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review.

Oral Health

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|---|--------------------|----------------------|
| Oral Health | | |
| Percent of children ages 1-5 who first went to the dentist by 12 months of age | 3.4% (2010) | 5.0% (2014) |
| Percent of children ages 1-14 with pain, cavities, broken or missing fillings, teeth pulled because of cavities, or bleeding gums | 15.2% (2010) | 13.0% (2014) |

Strategies to meet the Oral Health Winnable Battle

- Increase use of evidence-based interventions and practices
 - Increase number of children receiving dental sealants
 - Increase the number of community water systems that are optimally fluoridated for oral health and/or support community efforts to provide alternative sources of fluoride
- Increase oral health equity/decrease oral health disparity
 - Increase the number of dental providers in Health Professional Shortage Areas
 - Increase the number of Medicaid dental providers
 - Increase oral health literacy
- Promote community-based oral health champions/coalitions
- Align oral health projects across the state
- Promote integration of dental homes within health homes

Performance Evaluation

Oral diseases are nearly 100 percent preventable, yet every year thousands of Coloradans suffer from poor oral health. Oral disease costs the state in terms of lost work hours, absences from school, pain, and needless suffering and shame.

The department's efforts to address this problem start with finalizing a multi-year plan with statewide partners in oral health. CDPHE will seek to increase collaboration with other state agencies, local public health departments, external partners and Colorado providers to identify and set in place community standards for oral health, develop toolkits that can be deployed at a community level to improve oral health, and create local coalitions that can identify needs, resources, and solutions regarding oral health.

Community water fluoridation represents the most effective strategy that works across the population to improve oral health. Fluoridation is one of 10 signature accomplishments of public health in the last Century. The department will work with communities to identify unfluoridated water systems and provide the technical assistance and connections to resources that can jump start community fluoridation efforts. The department will also seek to develop and deploy the resources that can educate the public about good oral health and best practices to promote a lifetime of good health. It will seek to reduce disparities in oral health by collecting and interpreting data about oral health and the incidence of caries, tooth loss and other poor outcomes among different populations. It will promote and facilitate the deployment of services that advance oral health such as programs to deploy sealants among at-risk youth and developing risk-based preventive dental benefits for adults with chronic disease.

The plan developed by CDPHE contains performance measures that track progress towards implementing and disseminating interventions that can work to reduce the burden of oral disease among Coloradans. CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of 16 specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review.

Oral health has been shown to be associated with a host of other major health issues; periodontal disease, for instance, may be linked to problems such as cardiovascular disease, diabetes and stroke. Efforts to improve oral health can potentially advance other public health initiatives in myriad ways.

Safe Food

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|--|--------------------|----------------------|
| Safe Food | | |
| Decrease the occurrence of 3 or more foodborne illness violations in Colorado restaurants. | 14.36% (2010) | 10% |
| The percent of restaurant and grocery store inspections resulting in food being thrown out due to unsanitary conditions. | 9.8% (2009) | 7.5% |

Strategies to meet the Safe Food Winnable Battle

- Ensure a technically competent and effective inspectional workforce.
- Continue to collaborate with federal partners to maintain national food safety expertise and be a part of national policy development.
- Collaborate with LPHA partners and other food safety stakeholders to enhance an effective food safety program which includes effective inspections, enforcement, and response and investigation to foodborne illness and food emergencies.
- Identify and provide food safety training to food handlers to give them the knowledge to assess and reduce foodborne illness risk factors in full service restaurants.
- Implement innovative program approaches focused on the reduction of the occurrence of foodborne illness risk factors.
- Identify and utilize the necessary data to drive effective program outcomes.
- Investigate the cause of foodborne illness, which can lead to the identification of ways to prevent future foodborne illness. Maintain the reportable disease surveillance system that is used to detect many foodborne illnesses and monitor trends to assess the impact of various food safety strategies.

- During investigations, emphasize preventive measures, both to those involved (to prevent recurrences) and to the general public in press releases.
- Scientifically (i.e. through DNA testing) link the cases of foodborne illnesses to sources in order to prevent or reduce the spread of illness.
- Support local public health agencies by providing guidance in case investigation and control. This includes writing and maintaining the Communicable Disease Manual and doing formal (CD training program) and informal training with local public health agency staff. Individual case investigation and disease control is vital to prevent spread of foodborne pathogens.

Performance Evaluation

CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review

Tobacco

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|--|-------------------------------|----------------------|
| Tobacco | | |
| Percent of adults who are current smokers | 16.0% (2010) | 12% |
| Reduce the illegal sales rate to minors through enforcement of laws prohibiting the sale of tobacco products to minors | Baseline available 10/2011 | 5% |
| Percent of adolescents who are current smokers | 17.7% (2009) | 16% |
| Percent of children who are exposed to secondhand tobacco smoke in the home | 30.9% (2010) | 28% |

Strategies to meet the Tobacco Winnable Battle

- Secondhand Smoke and Cessation
 - Implement state and local initiatives to disseminate information about secondhand smoke and tobacco-free policies
 - Create and enforce tobacco-free policies in worksites and communities
 - Disseminate information about cessation, support cessation programs including the Colorado QuitLine
 - Increase insurance coverage for cessation interventions
 - Fund and implement the Colorado QuitLine to help low income people who smoke and pregnant women who smoke successfully quit
 - Implement media campaigns to encourage smokers to quit and to use the QuitLine.
- Reduce Youth Initiation
 - Implement state and local initiatives to counteract pro-tobacco messages
 - Increase tobacco-free policies
 - Increase restrictions on tobacco sales to minors and to enforce those restrictions
 - Require a license for tobacco retailers
 - Increase penalties for violations of the state law prohibiting tobacco sales to minors

- Provide school-based, youth-friendly programs such as Second Chance and NOT on Tobacco to provide cessation assistance and education to youth who use tobacco.

Performance Evaluation

Few public health initiatives have experienced the kind of sustained and broad success that tobacco prevention and control initiatives have enjoyed in recent years. In Colorado, the rate of adult smoking has declined from 22.3 percent in 2001 to 16.0 percent in 2010. Tobacco control is another one of 10 signature achievements for public health over the last Century. Tobacco taxes, public education, advances in therapies such as nicotine replacement, and limits on smoking in public places have all worked together to reduce the prevalence of tobacco use, adding years to the lives of millions and yielding observable declines in the number of people developing lung cancer. The department will continue to advance these efforts and, with the return of funding for tobacco control activities through the restoration of Amendment 35 program dollars, it will increase its efforts in their breadth and intensity.

Current Department efforts focus on preventing initiation among youth, promoting quitting among users of tobacco products, reducing exposure to second-hand smoke, and reducing disparities in tobacco usage that occur in different populations and groups. The department's efforts to reduce and prevent initiation among youth begin with research into effective strategies developed and deployed in other states to identify the most promising practices for Colorado. This research will be shared with partners working at the local level to reduce the availability of tobacco products to youth. The department will also conduct monitoring of marketing efforts by tobacco companies and inspections of retail establishments for compliance with the Family Smoking Prevention and Tobacco Control Act. Tobacco cessation is advanced through the provision of Amendment 35 funding to maintain the statewide Quitline to help current smokers kick their habit and marketing efforts to direct people contemplating cessation towards quitting resources. These efforts will also be extended to youth through special programs aimed at the young adult population. Second-hand smoke threatens the health of millions who live near or around people who smoke, and the department works with housing authorities and localities to reduce people's exposure to this byproduct of smoking, since there is no safe level of exposure to tobacco smoke. Finally, it investigates and advances initiatives that have the promise to reduce tobacco use among populations that have rates of use higher than the rest of the population.

The strategies in these four areas are each accompanied by a set of clear tasks that support objectives that advance the department's goals. Performance measures have been developed which will track and inform progress on these tasks and progress towards these objectives and goals. CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of 26 specified performance targets in the work plan; each will indicate progress towards

the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review.

The area of smoking cessation and the fostering of awareness of the deleterious effects of tobacco use is one in which great strides have been made. It is still vitally important to continue this work to combat the use of tobacco and tobacco related products among the young.

Unintended Pregnancy

- A). Achieve Targeted Improvements in Colorado’s Winnable Battles
- B). Promote Programmatic Excellence
- C). Strengthen the Integrated Public and Environmental Health System

| | Baseline (Year) | Colorado 2016 Target |
|--|--------------------|----------------------|
| Unintended Pregnancy | | |
| Rate of effective birth control in sexually active men and women ages 18-44 (self report) | 73.3% (2010) | 80.0% |
| Rate of effective methods of birth control in sexually active high school students (self report) | 26.4% (2009) | 30.0% |
| Number of births to teens ages 15-17 per 1,000 teens ages 15-17 | 19.9 (2009) | 18 |

Strategies to meet the Unintended Pregnancy Winnable Battle

- Develop and implement a statewide action plan in partnership with other state agencies, local communities, and youth across Colorado that employs specific, evidence based strategies to improve youth sexual health.
- To increase consumer knowledge of available and effective contraceptive methods through a public awareness effort.
- To increase provider awareness of effective contraceptive methods, particularly long-acting, reversible contraceptives, through the wide-spread distribution of the HealthTeamWorks Contraceptive Guidelines.
- To inform the public of increased eligibility for coverage of family planning and contraceptive services under the Patient Protection and Affordable Care Act.

Performance Evaluation

The department’s goals in its efforts to reduce unintended pregnancy consist of raising the level of public knowledge about sexual health and reproductive options and increasing access to reproductive health services. Nearly half of all pregnancies in Colorado are unintended and the likelihood of an unintended pregnancy rises as the level of income or education among individuals falls. The department is working to help

improve reproductive health among the state's women and reduce the disparities across income, education, and race and ethnicity in the levels of unintended pregnancy. The department distributes funds, technical assistance, and training to providers and clinics to help them increase their capacity to enroll eligible women into programs that provide them with reproductive health benefits. In addition, it promotes the use of long acting contraceptive approaches and supports the provision of quality subsidized family planning services to Colorado's Title X clients. Reproductive life planning is a concept that promises to help reduce the rate of unintended pregnancy and this and other strategies such as raising awareness about family planning services and an understanding of sexual health will be disseminated to the public and providers to increase public knowledge about reproductive and sexual health.

These two strategic foci are comprised of activities and performance measures that track progress towards goals and benchmarks around reproductive health in Colorado. CDPHE will annually review outcomes compared to benchmarks for each performance measure. In addition, it will monitor the meeting of 16 specified performance targets in the work plan; each will indicate progress towards the implementation and completion of activities identified as advancing the objectives of the work plan and furthering the strategies identified above. Adjustments to strategies will be made as appropriate given the findings of the review.

Strategic Priority D – Foster a Competent, Empowered Workforce

Strategy Overview

Objective D1. Attract, Retain, and Recognize Talented and Diverse Employees.

Objective D2. Align Employee Roles and Accountability with Department Priorities

Strategy overview

D2. Align Employee Roles and Accountability with Department Priorities

By aligning each employee's goals and roles with the five strategic priorities we ensure that employees are aware of how their contributions directly forward these goals. Employees at all levels of the organization will be held accountable for the work they do in support of department goals.

D1. Attract, Retain, and Recognize Talented and Diverse Employees.

Organizational psychology literature supports the fact that employees who feel valued within an organization are more productive. Recognizing employee contributions that result in progress toward strategic objectives ensures that employees are in line with the goals of the organization.

Performance evaluation

The performance measures listed below are targeted to this specific strategic priority. However, each group of performance measures lists other strategic priorities that are impacted secondarily.

The core of what can be accomplished within the domain of public health in the state of Colorado is to a large degree dependent on the quality of the state public health workforce. Energy and dollars spent in this arena bring dividends on many levels.

Foster a Competent, Empowered Workforce

D). Foster a Competent, Empowered Workforce

E). Create a More Efficient, Effective, Customer-Oriented Department

| | Baseline 2011 State wide employee engagement Survey | FY 2013-14 state wide Employee Engagement Survey |
|--|--|--|
| Percent of employees who “Strongly Agree” with this statement: In my work group, we have the processes and systems to provide consistent customer or public service. | Baseline identified with results of survey | Increase by 10% |
| Work Units complete and follow a standard work plan template that aligns the work of the Unit with the strategic goals of the department | 0 | 100% (by 2016) |
| Each employee has 2-4 Individual Performance Goals that directly relate to the strategic goals of the work unit and department | 0 | 100% (by 2016) |

Strategies to address the strategic priority of Foster a Competent, Empowered Workforce

Attract, Retain, and Recognize Talented and Diverse Employees

- Attract talented and diverse employees by increasing CDPHE presence at job & career fairs
- Retain talented and diverse employees by offering training, mentoring, and fair performance management.
- Recognize talented and diverse employees through internal publications and bulletin board postings.

Align Employee Roles and Accountability with Department Priorities

- To ensure that all employees understand how their work furthers the winnable battles and program excellence the department will:
- Develop a comprehensive communication plan to ensure that Colorado’s winnable battles are communicated to and understood by employees.
- Adopt a standardized work plan template that is aligned with the department’s strategic plan; this will be implemented by all work units.
- Hold supervisors and managers accountable to ensure that each employee has IPG’s that are linked to the strategic plan through work unit and division work plans.

Performance Evaluation

The Department is developing tactics to achieve these strategies. Division representatives are planning for job & career fairs to recruit individuals for work in their specific areas. A leadership development training project has been launched with a pilot group, and the mentoring program has over 50 active pairs of mentors/mentees who address issues that will enhance retention. Performance management is being addressed through development of guidance for performance reviews and a code of conduct. Employees are being recognized in the “hats off” section of the Department’s internal newsletter, which is posted in prominent places.

The department is currently engaged in many Lean initiatives such as fiscal standardization and various program specific projects to identify and implement improvements that will make employees more efficient, effective, productive and better able to deliver services to customers and citizens. As a result of these efforts, the department hopes to see a 10% improvement in employee’s rating of the statement that their work team “has the processes and systems to provide consistent customer or public service. The department will compare results from the 2011-12 statewide employee engagement survey with the results of the next statewide survey planned for August of 2013.

The Department has developed a standard work plan template and most of the work units in the department have developed work plans that align the work of their unit with the strategic goals of the department.

Additionally, employees have new mandatory elements in their performance plans that require them to know how their duties relate to department strategic priorities. Supervisors also have additional elements in their plans that require them to evaluate employee progress on supporting department strategic priorities. Approximately 73% of employees currently have the elements in their plans.

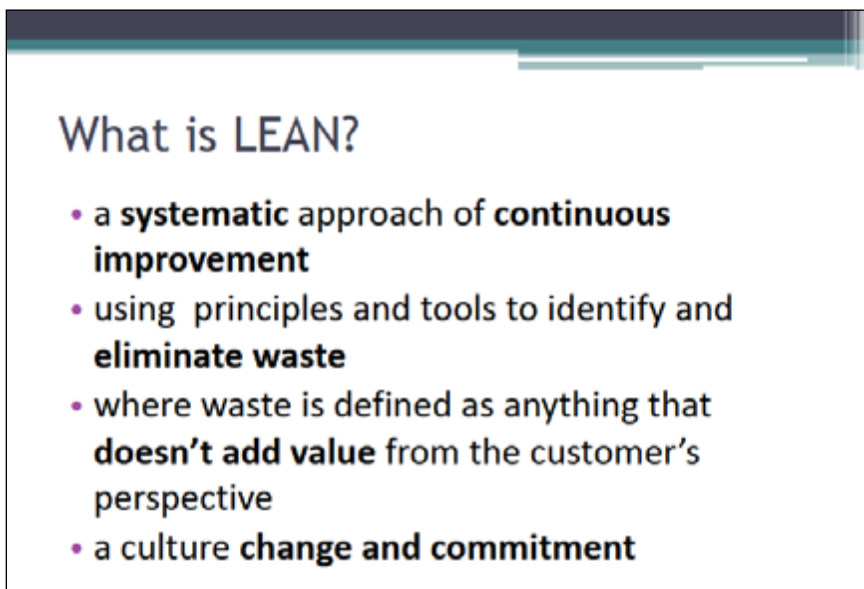
Strategic Priority E Create a More Efficient, Effective, Customer-Oriented Department

Strategy overview

Objective E2. Employ Lean Methodologies to Improve Business Processes

Lean is a process improvement approach that looks at reallocating resources to achieve better results for customers, both internal and external, with whom the department works. It is about efficiently deploying the department's resources.

The department's goal is to embed Lean methodologies into everyday work processes to eliminate waste and improve customer service.



What is LEAN?

- a **systematic** approach of **continuous improvement**
- using principles and tools to identify and **eliminate waste**
- where waste is defined as anything that **doesn't add value** from the customer's perspective
- a culture **change and commitment**

| | FY 2011-12 | FY 2012-13 (Targeted) |
|---|------------|-----------------------|
| Estimated Annual Savings (Employee time, etc) Lower threshold of \$1,000 | | |
| One time savings Lower Threshold of \$500 | | |
| Time and percent reduction in cycle time of processes | | |
| Number of processes standardized | | |
| Reinvestment of savings | | |
| Number and percent of employees participating in events | | |
| Number and percentage of employees participating in training | | |
| Number of Lean events conducted | | |
| | | |

Strategies to Create a More Efficient, Effective, Customer-Oriented Department

- Utilize Lean experts to train departmental staff in Lean methodologies.
- Utilize Lean experts and trained staff to facilitate Lean events to improve the efficiency of programs and activities.
- Require divisions to identify Lean activities within their expertise areas and implement as part of their adopted work plans.

Performance Evaluation

During this initial year of the CDPHE Lean program, as is standard for any new performance improvement initiative, the focus is on building capacity and infrastructure. During the initial year, the department has invested heavily in building capacity in each of the 11 divisions through training and events. Another major initiative has been providing training for the entire executive team so they have the knowledge needed to support division Lean work. Every division has completed at least one Lean event and each division has allocated two people to serve in the roles of Lean Deployment Manager and Champion. Each division has a detailed twelve month action plan which includes:

1. their top three priority processes identified for improvement initiatives
2. A division Lean training schedule

Over the next year the Department will begin to see quantifiable results from these initiatives and the exponential progression of Lean throughout the department as more staff are trained, more initiatives are undertaken and there is greater alignment of these efforts toward strategic priorities.