From the Executive Director:

Dear Friends,

It gives me great pleasure to present the Tri-County Health Department 2015 Annual Report and share some of the highlights of a really exciting year. We are celebrating our 68th year as a leader in public health in Colorado and now serve the over 1.4 million residents of Adams, Arapahoe, and Douglas Counties through over 60 programs operated at 11 offices from Brighton to Castle Rock! We live in one of the fastest growing and most vibrant areas of the state and work with some of the most creative partners you will find anywhere.

As we serve this large and diverse set of communities, we think and talk a lot about “population health.” Use of the term has exploded in the past few years—with over 20 million responses coming up in a Google search!—and it can have different meanings depending on whether your perspective is that of a health care provider, a hospital, an insurer, a business, or the man or woman on the street.

In public health circles, population health traditionally refers to “the health outcomes of a group of individuals, including the distribution of such outcomes within the group.”

The “group of individuals” on which TCHD focuses is the entire population—all 1.4+ million people—in our counties, regardless of where they live, how old they are, or what sort of health insurance they have.

As the definition states, we also focus on the distribution of outcomes within the group, which means we pay close attention to those in our counties at greater risk for poor health outcomes. For example, because poor health in mothers and their children can impact well-being over an entire life, we emphasize services to support them.

Similarly, we help individuals without a regular source of health care gain access to, and effectively use, programs such as Medicaid, which can open up opportunities for care long-unavailable to them.

Of importance, it is becoming increasingly apparent that where you live is strongly associated with how long you live. For example, across our counties, as measured by census tracts, the average age of death can vary by as much as 25 years from one community to another. Much of this difference is due to what are called social determinants of health (e.g., poverty, education, family stability, healthy environments) which impact health outcomes even more than the kind of health insurance you receive. Addressing these determinants across a community through greater attention to health equity—that is, working to assure equal opportunities for healthy outcomes for everyone—can have a big impact on population health.
Inside this Annual Report, we illustrate how we are operationalizing the concept of population health in our work at TCHD through three complementary approaches:

• **Addressing the Needs of Vulnerable Populations.** First, as public health departments have traditionally done, we provide services to at-risk groups within our communities through a variety of programs such as WIC, family planning, nurse home visits, and Medicaid enrollment. Providing services to groups who are vulnerable to poor health outcomes not only helps the individuals receiving the services, but it can also pay major dividends to the health of the entire population; since these vulnerable groups often have a disproportionately high number of the poor health outcomes for the total population, by addressing them, we can reduce health care costs over the long term.

• **Preventing the Spread of Disease and Ensuring Healthy Human Environments.** Second, we address problems that can easily and rapidly affect the entire community by providing control of communicable diseases and assuring safe conditions in facilities such as restaurants, childcare centers, swimming pools, and home septic systems—settings where breakdowns can multiply disease exposure and transmission to many people.

• **Impacting Population Health Through Policy and Partnerships.** Third, we work with partners and policymakers on health issues and opportunities currently affecting large parts of our community—Healthy Eating and Active Living, Emergency Preparedness and Response, secondhand smoke exposure, air quality/radon exposure, and refugee health—to promote prevention and enhanced wellness across the community.

In our five-year Strategic Plan, we have chosen to place extra emphasis on five population health priorities that can have the greatest impact on the health of our communities. These include:

• Reducing the health burden of obesity and chronic disease
• Reducing the health burden of tobacco and substance abuse
• Enhancing interactions with the health care delivery system
• Promoting healthy human environments
• Reducing the burden of mental health issues

The Annual Report also describes some highlights of our work of the past year in these important areas.

It has been noted that “Increasingly, our job in public health is influencing without authority, working with organizations that we don’t control or fund, to align what they do with the health of the public.” Given this reality, at TCHD, we believe that one of the best ways we can move the needle on overall population health is by serving as a chief community health strategist—playing a primary role to identify the important health issues affecting both vulnerable groups as well as the larger population, and then working to align the interests and efforts of a range of partners—health care providers, educators, businesses, community-based organizations, law enforcement, policymakers, and individuals and families—to address them. We are convinced that such an approach can dramatically increase the impact of our efforts and the return on investment from our programs to the community.

We look forward to working with all of our community partners to carry out this vision and the important work entrusted to us to promote, protect and improve the health of the population of Adams, Arapahoe and Douglas Counties.

Sincerely,

John M. Douglas, Jr., MD
Executive Director
Addressing the Needs of Our Vulnerable Populations

With an emphasis on prevention ahead of treatment, Tri-County Health Department (TCHD) provides access to care for uninsured individuals and other vulnerable populations—improving the health of the entire population. This includes increasing access to care for children, older adults and low-income individuals.

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federal assistance program that provides nutrition counseling, breastfeeding support, referrals, and vouchers for nutritious foods. In 2015, TCHD’s 24,021 WIC clients received a monthly average of $57.67 worth of healthy groceries...

...with a retail value of $16,714,735 which also benefits our local economy.

In 2015, 6,819 Family Planning clients received 14,820 individual exams or visits, and approximately 100,000 free condoms were distributed to prevent disease and unplanned pregnancy.

Reductions in teen birth rates:
Per 1,000 female population, ages 15-19 (2009–2014)

TCHD nurses made 10,114 home visits for prenatal care, child development, parenting skills and community referrals in 2015. This nurtures successful parents, and gives their children the best possible start in life, leading to improved mental and physical health and increased economic self-sufficiency.

We have recently seen a decrease in the number of uninsured residents through greater access to medical and preventive health services. Improved access to health insurance enables more people to get the health care they need, leading to longer, healthier lives.

In 2015, TCHD provided 27,729 linkages to Medicaid enrollment and efficient utilization of healthcare.

Percent of individuals living below U.S. poverty level of $11,670/yr:

- Adams County: 18.2%
- Arapahoe County: 11.7%
- Douglas County: 4.1%
- Colorado: 13.1% (2014)

These dramatic reductions are primarily due to greater access to long acting reversible contraceptives (LARCs), the most effective birth control available.

Poverty has a profound impact on access to health care, infant mortality, teen pregnancy, smoking, chronic diseases, poor nutrition, substance abuse, and life expectancy.
Preventing the Spread of Disease and Ensuring Healthy Environments

Preventing illness and death remains a major public health challenge. Each year, 1 in 6 people in the U.S. gets sick from eating contaminated food, primarily from norovirus and Salmonella. TCHD works with municipalities, long-term care facilities and schools to prevent the spread of person-to-person diseases such as norovirus and whooping cough, and animal-borne diseases such as West Nile virus and rabies. In addition, we provide prevention services that promote healthy environments—health inspections of restaurants and child care centers, lead poisoning education, occupational health consultations for business and industry, and the promotion of smoke-free environments.

TCHD conducted 61 disease outbreak investigations in 2015, affecting 1,400 individuals—including norovirus, Salmonella, plague, whooping cough and rabies. In addition, after the World Health Organization declared the Ebola outbreak in West Africa a Public Health Emergency, TCHD monitored 71 travelers from the affected regions, to be sure no one fell ill.

25,279 immunizations given by TCHD in 2015—for measles, mumps and rubella, HPV, influenza, whooping cough, hepatitis and tetanus.

In 2015, TCHD performed 15,360 inspections in a variety of settings, including 10,513 restaurant/retail food inspections of the 4,685 licensed facilities in our counties, which served approximately 310 million meals in 2015.

594,684 pounds of household hazardous waste recycled or disposed of safely at five TCHD Household Chemical Roundups in 2015—including paint, oil, chemicals, pesticides, tires, and electronics.

43,000 mosquitoes trapped in 2015 for West Nile virus testing.

TCHD provides multi-disciplinary Emergency Preparedness and Response services. In 2015, 27 Health Alerts were sent to our network of 4,912 partners including municipalities, schools, hospitals, medical providers, and emergency response agencies.
More than two-thirds of U.S. adults are overweight or obese, as are nearly one in three children. Obesity is a major contributing factor to the top three leading causes of death—heart disease, cancer, and stroke. To combat this, TCHD works with our communities to maximize residents’ access to healthy foods and opportunities for physical activity for all ages and abilities.

15.1% of U.S. adults currently smoke, and smoking remains the leading cause of preventable disease, disability, and death. In 2015, TCHD worked with local youth to create a media campaign called “TobaccoFree303” to encourage youth not to use tobacco or electronic smoking devices. The campaign won a Bronze Leaf Award from the Colorado Healthcare Communicators Association.

Opioid overdoses (including prescription pain relievers and heroin) killed over 28,000 Americans in 2014—more than car crashes. Surprisingly, at least half of all opioid overdose deaths involve a prescription drug. TCHD is working with community partners to promote safer prescriptions, secure disposal, needle exchange programs, addiction treatment, and drug overdose antidotes.

Some of TCHD’s current policy and partnership efforts address:

- Breastfeeding support
- Chronic diseases
- Early childhood advocacy
- Emergency Preparedness and Response
- Health alliances
- Health equity
- Healthy aging
- Healthy beverage promotion
- Healthy Eating and Active Living (HEAL)
- Land use planning
- Hospital community benefit planning
- Medical Reserve Corps
- Mental health promotion
- Obesity
- Radon/air quality
- Refugee health
- Tobacco prevention
- Substance abuse
- Worksite Wellness

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Addressing Population Health Priorities in Our Strategic Plan

The residents of our communities, and the entire country, face an increasing range of health challenges. Therefore, in our five-year strategic plan, TCHD has chosen to focus on five population health priorities that can have the greatest impact on the health of our communities...

Reducing the Health Burden of Obesity and Chronic Disease

Along with tobacco use, obesity and the lack of physical activity are responsible for much of the illness and early death related to chronic diseases.

In 2015, TCHD held 97 community educational events with 4,328 attendees; and inspired 2,201 employees with physical activity and nutrition programs through 40 Worksite Wellness employer partnerships.

Reducing the Health Burden of Tobacco and Substance Abuse

Colorado voters banned cigarette smoking statewide in public spaces in 2006, before the invention of eCigarettes.

Now Brighton, Greenwood Village, Littleton and Thornton have added “Electronic Smoking Devices” to their existing smoking bans, protecting 227,126 residents.

TCHD helps clients access health care directly and through our work with key community partners.

TCHD promotes food safety through education and inspections, and works to improve air and water quality in our communities.

In 2016, TCHD was awarded a State Innovation Model project grant to better integrate behavioral and physical health, and increase the access to mental health services, for the estimated 358,953 low-income individuals in the greater metro area.

Enhancing Interactions with the Health Care Delivery System

Enrollment in Medicaid and Child Health Plan Plus has expanded dramatically in the last few years, and the TCHD jurisdiction now accounts for 19.54% of the 1.2 million Colorado individuals enrolled in 2015.

For example, TCHD completed Health Impact Assessments in Sheridan and the Adams County Federal Boulevard corridor, designed to incorporate health-promoting policies for 20,000 residents—including healthy eating and active living, traffic safety, and air and water quality.

Promoting Healthy Human Environments

Promoting healthy eating and active living, traffic safety, and air and water quality.

Reducing the Health Burden of Mental Health Issues

Reducing the Health Burden of Tobacco and Substance Abuse

Reducing the Health Burden of Mental Health Issues

Reducing the Health Burden of Obesity and Chronic Disease

Enhancing Interactions with the Health Care Delivery System

Promoting Healthy Human Environments

Reducing the Health Burden of Mental Health Issues
Select Public Health Services Provided in 2015

Communicable Disease Control:
- Disease outbreak investigations – incidents: 61
- Communicable disease investigations – individuals: 1,400

Environmental Health Services:
- Childcare center inspections: 806
- Land use plan reviews: 375
- Pounds of household hazardous waste recycled: 594,684
- Public swimming pool/spa inspections: 658
- Restaurant/retail food establishment inspections: 10,513
- Septic system permits: 464

Healthcare Access:
- Medicaid/CHIP+ applications: 1,110
- Medicaid linkage and educational interactions: 27,729

Nursing Services:
- Family Planning program clients/visits: 6,819 / 14,820
- Immunizations given: 25,279
- Nurse-Family Partnership clients/visits: 676 / 7,736
- Women’s cancer screenings: 2,314

Nutrition Services:
- Breastfeeding peer counseling contacts: 11,253
- Community nutrition class attendees: 4,328
- WIC food vouchers – retail value: $16,714,735
- WIC – Total clients/contacts: 24,021 / 112,843

Public Health Communications:
- Health alerts sent/network recipients: 27 / 4,912
- Twitter followers: 1,374
- Website visits: 213,631

Tobacco Prevention and Cessation:
- Students impacted by new tobacco-free policies: 170,000
- Youth-created media campaign impressions: 11,795,455

Vital Records:
- Birth certificates: 24,667
- Death certificates: 67,314

Top Five Causes of Death
(Age-adjusted mortality rate per 100,000 people, 2014)

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