Thank you for your interest in the Pueblo City-County Health Department (PCCHD). This report summarizes the great work accomplished throughout the past year by the 84+ local public health employees.

Public health in Pueblo County was a year of action and planning for the PCCHD. Community work groups accomplished goals throughout the year to carry out the first of a five-year Community Health Improvement Plan. Focusing on the community chosen goals of Obesity and Teen and Unintended Pregnancy, PCCHD spearheaded the action.

PCCHD also spent time planning for the future with a redesign of our vision and mission while writing the department’s strategic plan for the next three years. Looking forward to 2014 and continuing the work being done, as well as expand where the evidence-based data shows it is needed.

Christine Nevin-Woods, DO, MPH
Public Health Director

**MISSION:**
Pueblo City-County Health Department is a vital asset, committed to promoting and protecting the health and environment of the community through prevention, partnerships, leadership and enforcement.

**VISION:**
Pueblo County will be a thriving, clean and safe Colorado community, proud that it exemplifies self-responsibility, active living and optimal health.
Annually, the Pueblo City-County Health Department recognizes a Public Health Champion, an individual who displays significant contributions to Pueblo’s public health as a role model in the Pueblo community. John Panepinto was chosen as the 2013 Public Health Champion.

Since 1998, John Panepinto has been an active and committed member of the PCCHD’s Board of Health. He has fulfilled leadership roles during his tenure with PCCHD to include Vice President and President (8½ years). In addition, John also served as the Pharmacy Consultant for PCCHD for several years.

John is a generous contributor to the Pueblo community as well as to the Health Department and shares the common goal of promoting health and protecting the environment. John is a leader in public health and has developed expertise in many areas of public health, especially concerning local health departments. John has always been interested and involved in Pueblo’s public health priorities and issues, and does what is needed to advocate for the community’s health.

John has lead the effort for adequate public health funding at the local and state level and promoted the need for a new state-of-the-art Health Department building in Pueblo. John worked on ballot issue 1A for funding the new building, and the planning and development of the architectural plans. He strongly supported the concept of a “green” energy efficient building and was a critical force in obtaining the Leadership in Energy and Environmental Design (LEED) designation, which was achieved in 2010.

Also, in 2009, John was recognized for his leadership and commitment to public health. A conference room at the newly constructed Health Department was named in his honor.

Community Health Improvement Plan

The Community Health Improvement Plan (CHIP) that addresses obesity and teen and unintended pregnancies, has been in place and moving forward for a year. In collaboration with over 39 organizations and community members, there has been significant progress to meet the objectives, activities and timelines outlined in the CHIP. Many lessons have been learned and activities adjusted to meet the changing demands and environment. Significant strides were made over the past year; however, much is left to do.

In order to track progress toward meeting goals, objectives, activities and timelines, PCCHD partnered with the Pueblo Triple Aim Corporation to purchase a software system. The software allows multiple individuals and agencies to enter notes, data and indicate if an activity is complete, on track, or behind. This system will aid all partners with tracking progress to make Pueblo County the healthiest county in Colorado.
Cleaning Up a Neighborhood

Throughout the year, PCCHD has been actively involved with the residents of the Eiler’s neighborhood, City Council, County Commissioners, and other governmental agencies regarding the listing of the Colorado Smelter site and the surrounding residential area on the National Priority List as a “Superfund Site”.

Activities by PCCHD in 2013:

- Conducted home inspections to identify possible sources of lead.
- Provided education to homeowners and residents on how to reduce lead exposure by proper cleaning methods, safe remediation processes, behavior, and through nutrition.
- Attended and participated in all community meetings.
- Participated in the EPA’s survey regarding the listing of the area by canvassing the Eiler’s neighborhood educating residents on high levels of lead and arsenic in soil.
- Distributed flyers and educational materials to resident by going door-to-door in the Eiler’s and Bessemer neighborhoods.
- Assisted the Agency for Toxic Substances and Disease Registry (ATSDR) in September 2013 with its investigation of determining lead and arsenic levels in children, pregnant women, and women of childbearing ages.
- In October 2013, assisted ATSDR in retesting individuals regarding arsenic levels.
- Researched sources for possible grant funding through the U.S. Department of Housing and Urban Development for lead remediation inside homes.

Legionella Contamination

An environmental investigation of Legionella was conducted stemming from a complaint received by a guest of a local hotel. During the initial complaint inspection, the facility was closed as the pool and spa were not in compliance with public health regulations of swimming pools and mineral baths. Conditions observed showed a potential for bacteria to grow, reproduce and thrive.

A total of 37 samples were taken and submitted for testing to the Colorado Department of Public Health and Environment. Of the samples submitted, 23 were tested for bacteria, 13 of which tested positive for the bacteria Legionella. Bacteria was found throughout the pool and spa, yet not localized to any one area. In addition to the positive environmental samples, one individual confirmed positive, and two other people were linked in the illness study. In response to the results of the environmental bacterial testing, the hotel facility remained closed for approximately one month. During the closure, the facility was required to complete a deep cleaning, which included a week-long drying period and professional cleaning of the air-handling system, in addition to disinfecting all pool and spa surfaces.

What is Legionella?

Legionella is a germ that can cause a type of pneumonia and grows well in high water temperatures such as a hot tub. In order to kill the Legionella germs, it is important to maintain the right level of disinfectant in the hot tub. Disinfectant levels should be checked at least two times daily.

Left: An Environmental Health Specialist is conducting environmental sampling of the facility’s skimmer basket for presence of Legionella.
May 20, 2013 marked 10 years since the enactment of the Pueblo Smoke-Free Air Act. A Pueblo study comparing health conditions a year-and-a-half prior to the ordinance and the three years after the ordinance became effective showed hospital admissions for heart attacks dropped 41 percent for Pueblo residents. A 2010 economic impact study determined no economic impact on tavern and restaurant sales tax revenue, a slight decrease in revenue for bars, and increased revenue for restaurants- offsetting the decrease. The ratio of restaurant openings to closings did not change over the study period.

The Health Department celebrated the 10-year anniversary with a poster contest, billboards, a proclamation read by the Pueblo City Council, and in collaboration with the City of Pueblo, the production of a video documenting the ordinance campaign. The video can be viewed at the City of Pueblo’s YouTube Channel www.youtube.com/user/CityOfPueblo1.

The Food Safety Program was awarded a five-year grant from the Food and Drug Administration (FDA). The grant’s goal is to reduce foodborne illness and related injuries by implementing the FDA Voluntary National Retail Food Regulatory Standards. PCCHD successfully met Industry and Community Relations Standards, by reporting food inspections on-line, establishing a Food Safety Forum for the community, developing a recognition program for food facilities and on-line training for food workers.

Currently, work is being completed on training PCCHD Food Inspectors. Inspectors must complete 60 hours of on-line classes that include courses on foodborne illness investigation and response, active managerial control, and identifying foodborne illness risk factors. Inspectors are then state-standardized and must complete continuing education courses throughout their career. Foodborne Illness Defense Preparedness and Response Standard is in progress, and a foodborne illness task force has been formed to respond to complaints and outbreaks.

View food inspections online at www.pueblohealthdept.org.

Foodborne contaminants cause an average of 5,000 deaths, 325,000 hospitalizations, 76 million illnesses and costs billions of dollars annually. The five most common foodborne pathogens cost the U.S. economy more than $44 billion each year in medical costs and lost productivity.
The environment an individual lives, works and plays in can affect their health and wellbeing significantly. This impact can be both positive and negative depending on the assets of the community. Understanding assets and barriers assist planning efforts to ensure an individual’s needs and ultimately the community’s needs, are being met. Public health officials recognize the link between health and the built environment, and are promoting active living as a way of addressing these challenges. There are correlations between lower obesity rates and communities with significant built environment assets.

To determine built environment assets, barriers, and priority areas for improvement, the Health Department developed a database of maps and information totaling 161,996 feet of sidewalk segment files, and 28,530 feet of crosswalk files, which is more than 36 linear miles within the Pueblo City Center (Pueblo downtown area). This project was a great partnership between Pueblo County Geographical Information Systems and the Health Department. The findings will continue to be presented to community leaders to prioritize built environment projects and best practices for improvement.

**New Immunization Fees**

The Affordable Care Act requires all insurance companies pay for preventive care without requiring the insured person to pay a co-pay or deductible. Preventive care includes all routine and recommended vaccines. Beginning January 2013, PCCHD began following new strict federal guidelines in using vaccine purchased by the federal and state government. Public health can no longer use federally purchased vaccine to vaccinate insured youth and adults (only uninsured).

PCCHD is in the process of becoming a provider for several types of health insurance. The patient pays full cost of the vaccine(s) and works with their insurance company to be reimbursed. Anyone, adult or child, who is uninsured, may receive required and recommended vaccines at PCCHD and pay only the cost of administration which is $21 per injection. No uninsured person is refused services if they cannot pay the full administration fee. Individuals are encouraged to check with their doctor to receive the vaccinations they may need. For more information contact the clinic at (719) 583-4380.
Pueblo County Food System Assessment

“How can the local and regional food system of Pueblo County provide more safe, fresh and healthy foods and improve food access, food security, and health of all Pueblo residents?”

The Pueblo City-County Health Department worked closely with contractors from Colorado State University-Pueblo (CSU-P) and WPM Consulting, LLC to develop, implement, and document a food systems assessment to determine the answer to this question.

The Food System Assessment used existing reports on population, poverty, food security, health disparities, and nutrition in Pueblo County. CSU-P staff also analyzed local, state, and national data related to agricultural inputs, production, processing, distribution and marketing, along with consumer behaviors, nutrition and public health. In addition to secondary data collection and analysis, the assessment team provided opportunities for public input through surveys, interviews, focus groups, and public meetings.

Some of the findings from the assessment are listed below and the full report can be found on the Health Department website at www.pueblohealthdept.org.

- Pueblo County faces higher obesity and childhood poverty rates than Colorado.
- While most Puebloans are not eating the recommended fruits and vegetables, low-income families are more often forced to compromise on eating healthy food to make ends meet.
- Many Pueblo residents live in an “unhealthy” food environment and have low access to a “healthy” food environment, which affects their food consumption choices.
- Cost and distance are consistently found to be the main challenges to the availability of more fruits and vegetables across Pueblo.
- After full-service grocery stores, fast food is the most commonly reported source of all foods in the county.
- There is a strong desire for access to more fresh and local foods, and therefore a need for more direct farm-to-market sales in the county.
- Desire to improve food and nutrition skills and education, such as knowing how to prepare or grow your own foods.
- Technical and business development support for new farmers is critical so they can take advantage of opportunities to enter agriculture and develop sustainable operations.

A Food Action Council, comprised of multiple stakeholders and community members, is committed to overseeing the implementation of this assessment’s findings.

National Minority Health Month

April is National Minority Health Month and promotion efforts for this month by the Health Department included 1) a public meeting at InfoZone highlighting the healthcare issues and challenges in 2013, 2) collaboration with St. Mary-Corwin Medical Center to distribute information on how to prepare for a doctor’s visit (English and Spanish version), 3) promoting “Walk with a Doc” through various social media outlets, and 4) highlighting service providers in the community who serve un- or under-insured residents. A small informational flyer with Pueblo doctors who accept patients with little or no health insurance was created. The flyers were distributed at community clean-ups sponsored by PCCHD and through the medical community and pharmacies.
**Sexual Health Answers**

Technology plays a big part in the world. “Go Ask Tara” is an innovative texting and e-mail service offered to the Pueblo community to provide comprehensive and medically accurate answers about sexually transmitted infections and family planning. The service decreases barriers around the discussion of sexual and reproductive health by providing anonymity of the user. This service provides the user access to a nurse, including non-business hours.

During the past 12 months, “Go Ask Tara” received questions from 93 individuals. Out of these initial 93 questions, approximately 60 percent transformed into dialogues between the nurse practitioner and the individual. The subject matter of the questions received covered the entire spectrum of sexual and reproductive health. The subjects included were: birth control (where to get it, cost, what to do when a pill is missed, types and efficacy), sexually transmitted diseases (signs and symptoms, where to get tested and treated), minor consent for care related to sexual health, pregnancy prevention, confidentiality, emergency contraception, pregnancy tests (costs, where to get them) and irregular spotting and bleeding.

**Breastfeeding Assistance**

The Colorado Women, Infant and Children (WIC) Program was awarded half a million dollars for having the highest number of “exclusive breastfeeding food packages” in the U.S. With this funding, PCCHD began a pilot texting program for breastfeeding moms in Pueblo, and in 10 additional rural counties.

Starting in December 2013, the pilot Breastfeeding Text Program began. Currently, 196 moms, pregnant and breastfeeding, participate in the program throughout 11 counties. Participants receive weekly educational texts and have access to two-way texting with a peer counselor seven days a week. The program’s success in the rural clinics is extremely important as most WIC programs in rural areas have lost their funding or have never had this support in place. The pilot program runs through September, 2014, with continuation based on program success.

**Colorectal Cancer Screening Project**

The Colorectal Cancer Screening project aims to increase how often doctors screen to reduce the cases of colorectal cancer in Pueblo. With funding from the University of Colorado Denver from the Colorado Department of Public Health & Environment, public service announcements were placed on social media through PCCHD’s Facebook, Twitter and YouTube channel targeting community members over 50 years of age to encourage screening.

In 2013, two community clinics were reviewed, and strategies for improving screening rates were developed in order to improve clinic procedures in hopes of reducing deaths associated with colorectal cancer.
Beginning in 2012, PCCHD began hosting regional specialty clinics for the Healthcare Program for Children with Special Needs (HCP). Each year, PCCHD host four neurology clinics with Dr. Seay and two rehabilitation clinics with Dr. Biff at the Otero County Health Department Rocky Ford office. The pediatric specialists are from the University of Colorado School of Medicine, in partnership with Children’s Hospital Colorado.

Children from all over the state may attend these clinics, yet the clinics mostly serve the population in Southeast Colorado. By having these clinics in rural locations, children with special health care needs are able to access pediatric specialty care in areas of Colorado where pediatric medical specialists are least available. HCP nurses ensure families have the necessary resources to provide care for their children. They collaborate with regional health department HCP nurses, as well as local primary care providers and model a medical home team approach. In 2013, HCP regional specialty clinics in Rocky Ford served 43 children in Southeast Colorado.

PCCHD Maternal Child Health Program worked with local partners to coordinate a more standardized developmental screening and referral process for Pueblo infants and toddlers. A work group formed from Assuring Better Child Health and Development (ABCD), Children First, Healthy Communities/Pueblo StepUp, Colorado Bluesky, Child Find, Pueblo Community Health Center, PCCHD, and parents of children with special health care needs, focused on two ways to support all Pueblo children for screening, ensuring the children are on track with their growth. Developmental delays may be the failure to meet certain developmental milestones, such as sitting, walking, and talking, at the average age. Research shows if delays or problems are found early and intervention is started right away, the child has a much better chance of reaching their maximum potential for the rest of their life.

To guide these efforts, the work group determined to first complete the ABCD Community Roles and Responsibilities worksheet. This worksheet looked at members of the community performing developmental screening, specifically which tool they use, how often screening is done, and what barriers keep children from getting needed services. The work group is now focusing on developing community protocols to ensure all children have the appropriate screening, referral and follow-up. The group is also developing a “map” for anyone with a concern about a child’s development will have an easier time finding help for the child and his/her family.
March 1, 2013, the City of Pueblo enacted a Non-Cigarette Tobacco Retailer Licensing ordinance to protect the health, safety and welfare of Pueblo youth. Tobacco use rates for Pueblo youth are higher than Colorado rates.

The first year of the ordinance was successful, with 119 retailers becoming licensed and five businesses discontinuing the sale of non-cigarette tobacco products rather than applying for the new license. The Pueblo Police Department completed two compliance checks, which resulted in six retailers cited for selling e-cigarettes or chew tobacco to minors. There have been no complaints or issues from retailers regarding the new license and the $100 licensing fee has been determined sufficient to recover all administration and enforcement costs.
The Weight of the Nation, a campaign to raise public awareness of the health impacts of the increase in obesity across the U.S., was launched by HBO and several other partners. The campaign includes a TV series that can be viewed by the public, along with DVD’s and a discussion guide for businesses, agencies or organizations to use as a starting point for examining and discussing the impact of obesity on individuals, families, communities and the nation. PCCHD uses these tools to increase awareness of Pueblo’s obesity issues. In 2013, presentations were given in three local neighborhoods (Salt Creek, Greenhorn Valley and the Eastside), along with one presentation to community leaders and one to Colorado State University-Pueblo students who live on campus.

Following the viewings, focus group discussions took place encouraging attendees to look at what course of action they may take as an individual, family, business, or agency to decrease obesity. The Weight of the Nation screenings will continue to take place in 2014. The presentations increased public awareness of the seriousness of widespread obesity, and prompted others to join the Community Health Improvement Plan’s Obesity Team with implementing the Obesity Work Plan for Pueblo.

Pertussis Infection

Pertussis infection, or whooping cough, saw a dramatic rise in Colorado during 2013. Overall, Pueblo County had a 70% increase in confirmed cases. Typically, confirmed cases are just the tip of the iceberg compared to the actual number of cases in the community.

In October 2013, a 14-year-old male was diagnosed with pertussis that led to a large outbreak investigation at a local high school. Epidemiologists determined 17 of 32 football players, as well as two coaches were symptomatic on the first day of the investigation. Letters were sent home to the parents of all students at the school instructing them to watch for a cough and if symptomatic to contact their doctor for testing and treatment. Health Alerts were sent to local doctors to explain the unique aspects of the possible community outbreak. At least 21 confirmed cases were connected to the outbreak, numerous cases were clinically diagnosed (in which the provider felt confident the patient had pertussis so did not test), and over 100 people were recommended for treatment.

<table>
<thead>
<tr>
<th>Year</th>
<th>Confirmed Cases</th>
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<tbody>
<tr>
<td>2008</td>
<td>3</td>
</tr>
<tr>
<td>2009</td>
<td>1</td>
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<tr>
<td>2010</td>
<td>17</td>
</tr>
<tr>
<td>2011</td>
<td>4</td>
</tr>
<tr>
<td>2012</td>
<td>10</td>
</tr>
<tr>
<td>2013</td>
<td>33</td>
</tr>
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</table>

“We are seeing more pertussis outbreaks nationally! Why? Parents are choosing not to vaccinate their children and childhood vaccine protection does wane over time. It is so important to keep our vaccination rates high and also make sure young teens and adults have an additional vaccine called Dtap. This vaccine provides protection against diphtheria, tetanus, and pertussis, and is very important to keep up the level of protection during the teen and adult years.”

- Dr. Christine Nevin-Woods, Public Health Director
Core Values

PCCHD is dedicated to the mission of public health by providing prompt response to ever-changing public and environmental health issues. The workforce is guided by the following values:

- Communication
- Accountability
- Respect
- Positive Attitude
- Empowerment and Professional Growth
- Teamwork

Administration

Christine Nevin-Woods, DO, MPH, Public Health Director
Sylvia Proud, MS, IPMA-CP, Deputy Director
Lynn Procell, MSN, RN, Community Health Services Director
Kenneth A. Williams, BS, Environmental Health Director
Jody Carrillo, MS, RN, Disease Prevention & Emergency Preparedness Director

What to Look for in 2014?

- Strategic Planning
- Accreditation
- Triple Aim
- Prenatal Drug Exposure
- Amendment 64 Local Recommendations
- Evidence-Based Public Health policy

Pueblo County Board of Health

Eileen Dennis, President
Dr. Richard A. Martinez, Vice-President
Dr. Michael Nerenberg, Member
Terry A. Hart, Pueblo County Commissioner, Member
Lucio Torres-Florez, Member
Select Public Health Services Provided

<table>
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<tr>
<th>Service</th>
<th>2013</th>
<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Animal Bites</td>
<td>466</td>
<td>475</td>
<td>448</td>
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<tr>
<td>Childcare Center Inspections</td>
<td>55</td>
<td>60</td>
<td>48</td>
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<tr>
<td>Family Planning Program Clients/Visits</td>
<td>2,768</td>
<td>3,707</td>
<td>3,850</td>
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<td>Immunizations given, total</td>
<td>1,931</td>
<td>2,367</td>
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<td>Children immunizations</td>
<td>765</td>
<td>941</td>
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<td>Adult immunizations</td>
<td>774</td>
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<td>Travel immunizations</td>
<td>392</td>
<td>372</td>
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<td>Communicable Diseases (including TB)</td>
<td>370</td>
<td>336</td>
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<td>Health Care for Children</td>
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<tr>
<td>with Special Needs clients</td>
<td>394</td>
<td>373</td>
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<tr>
<td>Rabid Animals</td>
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<td>Submitted for testing</td>
<td>68</td>
<td>87</td>
<td>86</td>
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<tr>
<td>Positive rabid skunks</td>
<td>0</td>
<td>17</td>
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<td>Positive rabid bats</td>
<td>4</td>
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<td>Restaurant/Food Establishment Inspections</td>
<td>1,716</td>
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<td>Septic System Permits Issued:</td>
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<tr>
<td>New installation permits</td>
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<td>Remodel permits</td>
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<tr>
<td>Repair permits</td>
<td>13</td>
<td>10</td>
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<td>Vital Statistics, total certificates issued</td>
<td>17,414</td>
<td>17,515</td>
<td>18,970</td>
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<tr>
<td>Birth certificates</td>
<td>6,604</td>
<td>6,658</td>
<td>7,290</td>
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<td>Death certificates</td>
<td>10,810</td>
<td>10,857</td>
<td>11,680</td>
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<td>WIC – Total clients/contacts</td>
<td>5,010</td>
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<td>7,590</td>
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<td>WIC – Total food voucher retail value</td>
<td>$3,279,218</td>
<td>$3,424,930</td>
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<td>2010 Population Base</td>
<td>158,000</td>
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Report compiled and distributed by the Public Information Office at PCCHD. View the complete report at www.pueblohealthdept.org. Photos on pages 1, 3, 4, 5, 8 and 12, are submitted by Justin R. Gage, Environmental Health Specialist, 2014.