

# Colorado Department of Public Health & Environment

Fiscal Year 2024-2025  
Department Performance Plan



**COLORADO**

Department of Public  
Health & Environment

# Table of Contents

- Introduction.....2
- Mission.....3
- Vision.....3
- Guidelines & Commitments.....3
- Department Description.....5
- CDPHE Organizational Chart.....6
- SFY25 Wildly Important Goals & Strategies.....7
  - SFY25 WIG 1.1: Reducing Emissions & Improving Air Quality | GHGs.....7
  - SFY25 WIG 1.2: Reducing Emissions & Improving Air Quality | Ozone Precursors.....8
  - SFY25 WIG 2.1: Operational Efficiency (Air Pollution Control Division).....10
  - SFY25 WIG 2.2: Operational Efficiency (Health Facilities Division).....11
  - SFY25 WIG 3.1: Reduce the Incidence of STIs | Syphilis.....13
  - SFY25 WIG 3.2: Reduce the Incidence of STIs | Congenital Syphilis.....14
  - SFY25 WIG 3.3: Reduce the Incidence of STIs | HIV.....15
  - SFY25 WIG 4.0: Increasing MMR Vaccination Rates.....17
  - SFY25 WIG 5.0: Suicide Prevention.....18
- SFY25 Inclusion, Diversity, Equity and Accessibility.....20
- SFY24 Continuous Process Improvement Initiatives and Outcomes.....20
  - CDPHE Quality Improvement Projects (SFY24).....21
  - CDPHE Quality Improvement Projects (SFY25).....23
- SFY24 Performance Evaluation and Governor’s Dashboard.....25
  - SFY24 WIG 1: Air Quality - Ozone.....25
  - SFY24 WIG 2: Prevention Cost Savings.....26
  - SFY24 WIG 3: STI - Syphilis.....28
- CDPHE Reaccreditation.....29
- Appendix A - SFY24 WIG Data Visualizations.....30
  - SFY24 WIG 1: Air Quality - Ozone.....30
  - SFY24 WIG 2: Prevention Cost Savings.....32
  - SFY24 WIG 3: STI - Syphilis.....33

## Introduction

CDPHE is submitting this performance plan in accordance with the State Measurement for Accountable, Response and Transparent (SMART) Government Act ([C.R.S. 2-7-204](#)) and provides information related to the required components of the statewide performance management system implemented to manage the principal departments of the Executive Branch. Contained within this document are the organizational mission, vision, guidelines & commitments, department description, organizational chart, an overview of the Department's SFY25 Wildly Important Goals (WIGs) along with the strategies that support each goal, SFY24 Inclusion, Diversity, Equity and Accessibility efforts, SFY24 process improvement efforts, and concludes with a SFY24 performance evaluation.

## Mission

Advancing Colorado's health and protecting the places where we live, learn, work, and play.

## Vision

A healthy and sustainable Colorado where current and future generations thrive.

## Guidelines & Commitments

Impact and Innovation | Inclusion, Diversity, Equity & Accessibility (IDEA) | Trust | Collaboration

**Purpose statement:** Guidelines and commitments highlight the department's core values and drive the critical behaviors that enhance the organization's health and performance. The following actions will help us achieve transformative growth as a department.

**Encourage Innovation and Impact:** We acknowledge that every employee uniquely contributes to our organization and encourage them to consistently pursue continuous quality improvement, aiming for enhanced health and environmental outcomes for our state.

- **Commitment to Impact:** Stay dedicated to our work and its positive outcomes on the communities we serve.
- **Innovative Solutions:** Promote creative approaches and assess their effectiveness.
- **Data-Driven Decisions:** Use best practices, data, and evidence to guide our decisions.
- **Adaptability:** Recognize when efforts aren't meeting goals and adjust accordingly.

**Advance IDEA:** We embrace inclusion, diversity, equity, and accessibility (IDEA) within our work and as a department.

- **Remove Barriers:** Work consistently to eliminate obstacles so everyone can succeed.
- **Live Our Values:** Embrace and practice the principles of IDEA, promoting health equity and environmental justice.
- **Increase Self-Awareness:** Strive to understand and reduce biases in our practices, policies, and systems.
- **Cultural Responsiveness:** Enhance our ability to understand and support all Colorado communities, especially those disproportionately impacted and underrepresented in our workforce.

**Cultivate a Workplace Environment of Trust:** Foster a positive and supportive work environment where all employees feel valued and respected.

- **Engage in Open Dialogue:** Communicate with respect, honesty, and sincerity.

- **Own Decisions and Results:** Take responsibility for both decisions and their outcomes.
- **Build Better Relationships:** Understand our roles within the organization and work to develop strong, positive relationships with colleagues.
- **Appreciate Differences:** Make an effort to understand those with different values and experiences.
- **Support Team Members:** Recognize and appreciate the contributions of our team members.
- **Seek Understanding:** Use challenging situations as opportunities to gain better insights and work towards a shared purpose.
- **Leverage Support Systems:** Make use of existing resources and systems to ensure a fair and inclusive work environment.

**Collaborate:** Recognize that working together across divisions allows us to achieve our best and most impactful outcomes.

- **Foster Cross-Departmental Teams:** Develop opportunities for collaborative work across the agency.
- **Timely Inclusion:** Ensure the right people are involved at the appropriate times.
- **Build Stakeholder Partnerships:** Partner with stakeholders to support our goals and outcomes.
- **Learn from Each Other:** Stay open to learning from colleagues, the public, and other audiences.
- **Engage Diverse Viewpoints:** Include stakeholders with differing perspectives, even when discussions are challenging.
- **Community Collaboration:** Create opportunities to work with the communities we serve, integrating efforts across public health and environmental programs.
- **Practice Active Listening:** Listen actively and consider our capacity for change within the state government system.

## Department Description

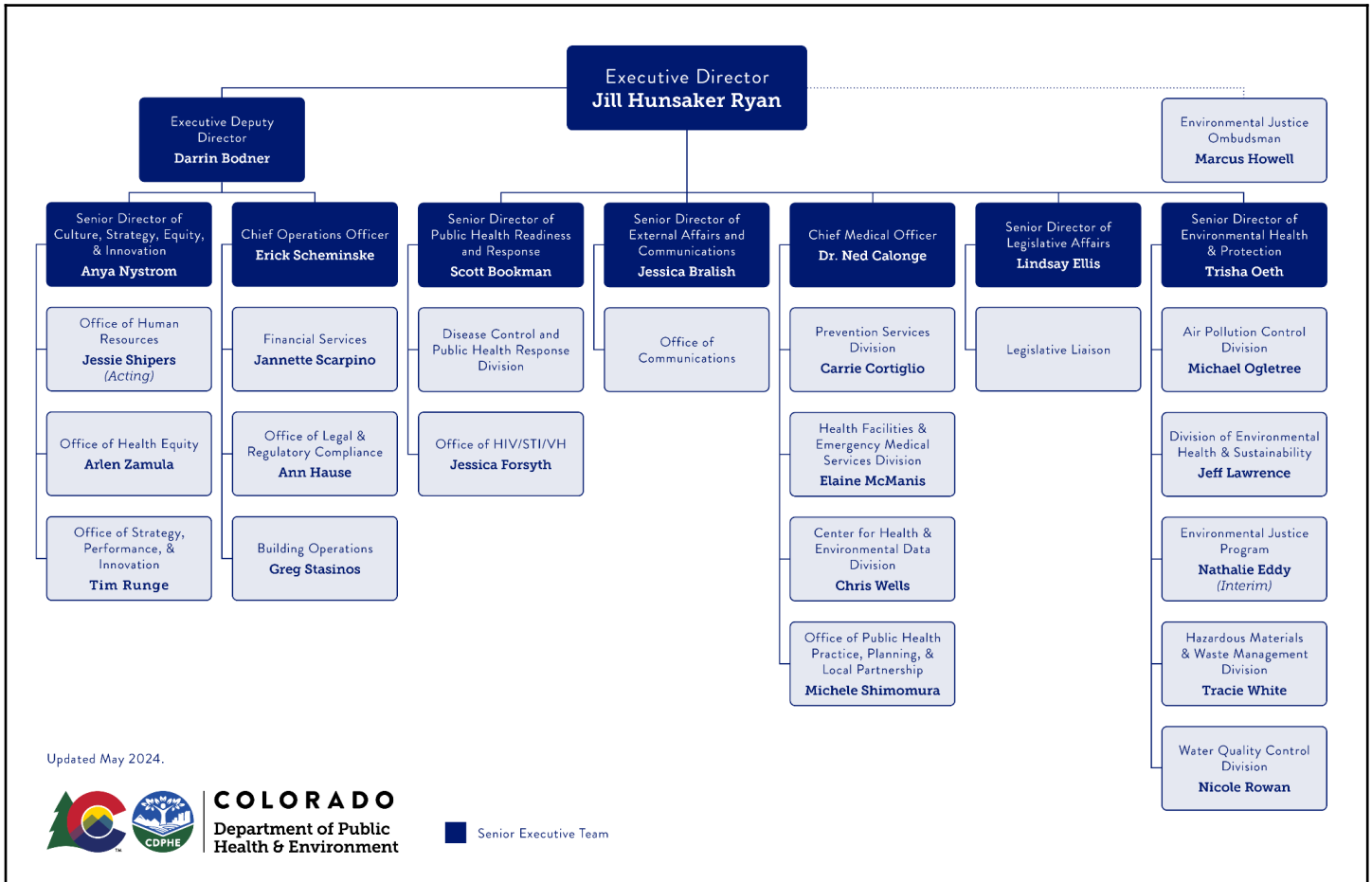
The Colorado Department of Public Health and Environment (CDPHE) is one of 21 cabinet-level departments whose executive director is appointed by the governor. Jill Hunsaker Ryan, MPH, is the department's executive director, appointed by Governor Polis as a cabinet member in 2019. The department serves all people of Colorado by providing public health and environmental protection services that promote healthy people in healthy places. Public health professionals use evidence-based practices in the public health and environmental fields to create the conditions in which people can be healthy. In addition to maintaining and enhancing our core programs, the department continues to identify and respond to emerging issues affecting Colorado's public and environmental health.

The department pursues its mission through broad health and environmental protection programs and activities. These include: chronic disease prevention; control of infectious diseases; family planning; injury and suicide prevention; general promotion of health and wellness; provision of health statistics and vital records; health facilities licensure and certification; laboratory and radiation services; emergency preparedness; air and water quality protection; hazardous waste and solid waste management; pollution prevention; and consumer protection.

The department has over 2,100 employees, with the vast majority working at the offices in Glendale and the State Lab in Denver. CDPHE has satellite offices in Grand Junction and Pueblo. Most employees use a hybrid schedule.

The department's total appropriation for FY 2024-25 is \$863.3 million. Of this amount, \$720.1 million, or 83.4%, is generated through fees and federal grants. The remaining \$143.2 million, or 16.6%, is from the General Fund. The statutory authority for the department is found predominantly in Title 25 of the Colorado Revised Statutes.

# CDPHE Organizational Chart



## SFY25 Wildly Important Goals & Strategies

CDPHE has identified five Wildly Important Goals (WIGs) for Fiscal Year 2025. To ensure comprehensive coverage and effective implementation, WIGs 1, 2, and 3 have been further divided into sub-WIGs, addressing specific focus areas within each overarching goal. This structured approach allows CDPHE to target and achieve measurable outcomes across multiple critical health and environmental priorities.

### SFY25 WIG 1.1: Reducing Emissions & Improving Air Quality | GHGs

**Support the adoption and implementation of new regulations and policies by June 30, 2025 that will result in estimated reductions of GHG emissions totaling 1,000 kilotons of CO<sub>2</sub>e per year once fully implemented.**

**Context Statement:** Successful completion of this goal will reduce air pollution, improve public health, create green jobs, and address climate change in Colorado, making the state cleaner, healthier, and more sustainable for all residents.

**Lead Division:** Air Pollution Control Division

**Alignment:** The WIG supports Colorado's climate action by reducing greenhouse gas emissions, promoting electrification, and cleaner technologies. It advances the transition to a clean energy economy with electric vehicles, cleaner fuels, and renewable energy. It addresses environmental protection by reducing landfill methane and improving air quality, stimulating innovation, creating green jobs, and attracting clean energy investments, aligning with statewide goals.

#### Summary

Global climate change poses a serious threat to human health and the environment. In Colorado, our warming climate is already leading to more extreme weather events, longer fire seasons, prolonged droughts, increased infectious disease outbreaks, beetle infestations killing trees, and other disruptions to our fragile ecosystem. These impacts have significant economic repercussions for communities and directly affect individual health. While climate change is a global issue, addressing it requires a collective effort. Colorado has made significant strides in recent years by developing programs and regulations to reduce greenhouse gas (GHG) emissions. State-level action remains a crucial component in responding to this urgent threat.

This Wildly Important Goal (WIG) aligns closely with the Governor's Bold Priorities and statewide goals. It underscores Colorado's commitment to climate action by implementing regulations and policies designed to reduce GHG emissions, promote electrification, and encourage cleaner technologies. The WIG supports Colorado's transition to a clean energy economy by advancing electric vehicles, cleaner fuels, and renewable energy sources. Additionally, it addresses environmental protection by reducing methane emissions from landfills and improving air quality, thereby benefiting public health. Furthermore, the WIG is in line with the Governor's focus on economic development, as it stimulates innovation, creates green jobs, and attracts investment in Colorado's clean energy sector. Overall, this WIG demonstrates Colorado's dedication to tackling



climate change, advancing environmental sustainability, protecting public health, and fostering economic growth.

## Strategies

- **Promulgate Two Rulemakings to Support GHG Emissions Reduction:** Promulgate two rulemakings by June 30, 2025.

*(Areas of focus will include: Oil and Gas Emission Midstream Operations Reduction Plan, and Reporting of GHG Emissions from Landfills.)*

- **Promoting Clean Technology in Oil and Gas Operations:** Develop and implement a pneumatic strategy aimed at promoting the use of non-emitting technologies in oil and gas operations—with the target of establishing one program dedicated to this initiative—by June 30, 2025. This strategy involves developing programs, engaging stakeholders, monitoring progress, ensuring regulatory compliance, and communicating effectively.
- **Electric School Bus Grants:** Award grants to school districts for the acquisition of electric school buses through two biannual award rounds totaling \$7,500,000 by June 30, 2025.

## SFY25 WIG 1.2: Reducing Emissions & Improving Air Quality | Ozone Precursors

Continue to implement initiatives and state air quality programs through June 30, 2025 that will result in ongoing estimated future reductions of ozone precursor emissions totaling ~11,700 tons per year.

**Context Statement:** Successful completion of this goal will result in cleaner air, free from harmful ozone pollution, which will benefit Coloradans in many ways, from our public health, to our economy, to our valuable public spaces.

**Lead Division:** Air Pollution Control Division

**Alignment:** This WIG aligns with the Governor's Bold Priorities by promoting renewable energy, environmental sustainability, and reducing emissions to combat climate change. It addresses health concerns like asthma from poor air quality, particularly in Denver Metro/North Front Range. The WIG drives economic growth through innovation and job creation in clean industries, and emphasizes efficient governance, strategic planning, and collaborative partnerships.

## Summary

Ozone poses significant public health and environmental challenges. Exposure to ozone damages respiratory tissues, causing inflammation and irritation, and harms forests and crops. High concentrations of ground-level ozone adversely affect the health of Colorado's residents, leading to increased rates of asthma, other respiratory and pulmonary diseases, and a higher risk of cardiovascular disease. Consequently, hospitalizations rise, and premature death rates may increase. These health impacts disproportionately affect communities of color and low-income

residents, making it crucial to address ozone levels.

The Denver Metro/North Front Range Area (DMN/FR) fails to meet federal health-based standards for ozone, with the most severe issues along I-25 (“ozone nonattainment area”). Contributing factors include climate changes, weather patterns, and local pollution. Although ozone levels have started to decline, the reduction pace is insufficient to effect substantial change. As a result, the Environmental Protection Agency reclassified the DMN/FR from a “serious” nonattainment area in January 2020 to a “severe” designation in July 2021. For more data on ozone, see "[Ozone exceedance data](#)".

This Wildly Important Goal (WIG) aligns seamlessly with the Governor’s Bold Priorities by directly supporting environmental sustainability and public health—core aspects of the Governor’s vision for a cleaner, more sustainable Colorado. By ambitiously increasing the volume of processed Title V major source air emissions permits, this initiative enhances air quality and combats climate change, echoing the Governor’s commitment to environmental stewardship. Additionally, this proactive approach to air pollution reflects a dedication to innovation and efficiency in government operations, further supporting the Governor’s priorities for a healthy, sustainable, and well-managed state.

### Strategies

1. **NOx Reduction Committee, Regulatory Drive:** Form a NOx reduction steering committee aimed at pinpointing opportunities for further NOx reduction in the upstream oil and gas sector by June 30, 2025. This committee will drive the process to ensure that regulatory measures for NOx reduction are finalized and recommendations are available by June 30, 2025. These measures will be incorporated into future rulemaking.
2. **Air Quality Assurance:** Maintain daily air quality forecasts for at least 358 days out of 365 until June 30, 2025.
3. **NOx Intensity Report Review:** Review the first year of NOx intensity interim reports to ensure effective future implementation of NOx regulations in Colorado by March 31, 2025.
4. **Evaluate Regulations for Improvements:** Review the efficacy of adopted lawn and garden regulations and recommend any technically and economically feasible revisions to the adopted regulations by December 31, 2025.

### SFY25 WIG 2.1: Operational Efficiency (Air Pollution Control Division)

The Air Pollution Control Division will increase the completion of Title V major source permit reviews, requests and approvals from 50 per year to 120 per year by June 30, 2027.

**Context Statement:** Successful completion of this goal will ensure cleaner air and better public health outcomes and aligns with environmental justice goals. It reflects a commitment to efficient

governance and environmental stewardship, benefiting all communities by reducing pollution and promoting sustainability.

### **Lead Division: Air Pollution Control Division**

**Alignment:** This WIG supports the Governor's Bold Priorities by enhancing environmental sustainability and public health. It aims to increase permitting actions for major air emissions, improving air quality and combating climate change. The initiative highlights innovation and efficiency in government operations, reflecting the Governor's commitment to a healthy, sustainable, and well-managed Colorado.

### **Summary**

The WIG represents a strategic initiative by the Title V major source permitting team. This initiative is urgent due to the increasing complexity and volume of applications, driven by the Denver Metro Northern Front Range's shift from Moderate to Severe nonattainment of ozone standards. This shift has not only increased the workload but also introduced more intricate challenges due to evolving regulations and stricter EPA requirements. As a result, managing the rising complexity and increasing capacity simultaneously is a significant challenge.

To address this, the division has set a goal to streamline the Title V permit processing by FY27, backed by a robust plan to enhance workforce capacity. In FY23, the authorization of additional permit engineers and supervisors allowed the team to grow significantly from 10 to 29 members, including contractors and administrative support. This expansion is a direct response to the growing demands, equipping the division with the resources needed to effectively tackle service-delivery inefficiencies.

This plan is feasible due to a phased approach, enabling gradual and consistent progress. By setting clear, incremental targets, the division demonstrates a realistic and methodical strategy for achieving this ambitious goal, ensuring improved air quality management and environmental protection for Colorado.

### **Strategies**

1. **Staffing Surge:** Boost Title V permitting staff by hiring an additional 5 full-time employees (FTE) by June 30, 2025.
2. **Stationary Source System Modernization - Phase I:** Implement stationary source technology improvements for 9 priority work processes by December 31, 2024.

*[The specific work processes are EJ (Environmental Justice) Summary; Permit Modelling Determination; Gasoline Station Permitting; Relocation Notices; Surface Coating Permitting; Notice of Start Up; Crusher and Screen Permitting; Crematory Incinerator Permitting; and Well Completion.]*

3. **Process Improvement Evaluation Deadline:** Finalize evaluation and implementation, as necessary, for three process improvements designed to increase permit processing output and reduce barriers to efficient permit processing by June 30, 2025.

4. **Stationary Source System Modernization - Phase II:** Implement stationary source technology improvements for 15 priority work processes by June 30, 2025.

*[The priority work process are Concrete Batch Plants; Dry Cleaners; Grain Elevators; Landfills; General APEN (Annual Pollution Emission Notice); Natural Gas Engines; Glycol Dehy Units; Equipment Leaks; Condensate Storage Tanks; Amine Units; Produced Water Tanks; Hydrocarbon Loadout Activities; Crude Oil Storage Tanks; Gas Venting; Routine or Predictable Emissions; Boilers; Mining Operations; Asphalt Plants; Print Shops; Air Curtain Destructors; Diesel Engines; and Billing & Fees.]*

5. **Public Comment Efficiency:** Implement SMARTComment software system to efficiently gather feedback on permits that require public comment by June 30, 2025.

## **SFY25 WIG 2.2: Operational Efficiency (Health Facilities Division)**

The Health Facilities & EMS Division will increase completion of inspection processing actions from 1200 per year to 2,400 per year by June 30, 2027.

*“Inspection processing action” refers to a systematic procedure undertaken to review, evaluate, and ensure the compliance and safety of healthcare facilities. Combined inspections processing actions cut across five separate workflows: 1) Facility Licensing, 2) Facility Adverse Event Occurrence Reviews, 3) FGI Reviews, 4) Licensing Surveys, and 5) Complaint Reviews.*

**Context Statement:** Successful completion of this goal will protect healthcare consumers through fair, routine regulatory oversight, accountability to industry standards, and demonstrate improved, timely responses, benefiting Colorado's licensees and citizens.

**Lead Division:** Health Facilities & Emergency Medical Services

**Alignment:** This goal aligns with the Governor's Bold Priorities by enhancing healthcare quality and accessibility, reducing costs, and improving outcomes. It supports economic growth through streamlined healthcare processes and innovation. Additionally, it promotes efficient government operations by addressing regulatory inefficiencies, ensuring Colorado's healthcare infrastructure is robust, responsive, and prepared for future challenges, reflecting the Governor's vision for a resilient, prosperous state.

### **Summary**

The Health Facilities and Emergency Medical Services Division has experienced a growing backlog in various programs, including licensing surveys, facility incident follow-ups, and complaint investigations since the onset of COVID-19. Additionally, due to the high volume of licensed health facilities, some programs are facing periodic delays in processing licenses. These inefficiencies stem from understaffing, inconsistent quality assurance reviews, outdated and insufficient systems

and data supports, and inadequate workforce resources for recruitment and retention in survey programs.

To address these issues, the Division is implementing extensive reviews and process improvements to eliminate waste, streamline processes, centralize workload management, improve tracking systems, and cross-train staff to maximize resources. Proven strategies that successfully eliminated a backlog in Medicaid survey inspections will be re-evaluated and applied to other survey programs.

With the approval of sustainable program funding beginning this fiscal year and funding for the replacement of ineffective data and tracking systems, the Division is working to fill vacant positions, evaluate the need for additional or different types of positions, and establish workflow efficiency benchmarks and timelines through improved system and data tracking and routine operational reviews.

Centralized workload management with standardized procedures and benchmarks for completion will streamline processes, reduce delays, and improve overall service delivery and outcomes for regulatory oversight of licensed facilities. This forward-thinking approach demonstrates the Division's commitment to enhancing healthcare regulatory processes, ensuring timely compliance, and creating more efficiency in supporting healthcare providers by reducing backlogs.

### **Strategies**

1. **Fill Vacancies:** Fill 12 vacant positions by June 30, 2025.
2. **Workflow Efficiency Benchmarks and Timelines.** Establish specific benchmarks and acceptable timelines for the completion of processing actions from each of the five workflows by August 31, 2024.
3. **Enhance Data and Process Accuracy:** Complete a detailed operational process review to identify potential areas for improvement by March 31, 2025.
4. **Optimized Workforce Deployment:** Train existing staff in high-priority programs to align their skills with workload demands by June 30, 2025.

### **SFY25 WIG 3.1: Reduce the Incidence of STIs | Syphilis**

**Decrease the incidence of syphilis by 25%, from 3,535 cases in 2024 to 2,651 cases by June 30, 2027.**

**Context Statement:** Successful completion of this goal will significantly reduce syphilis rates, improve public health, lower healthcare costs, and ensure more equitable access to medical services across Colorado's diverse communities.

**Lead Division:** Office of STI/HIV/Viral Hepatitis

**Alignment:** CDPHE’s WIG aligns with the Governor’s priorities of improving public health, inclusivity, and resource management. It aims to control syphilis, reducing healthcare costs and disease burden. Targeting marginalized populations ensures healthcare access and inclusivity. Utilizing existing infrastructure and partnerships demonstrates efficient resource management. Preventative measures through testing and treatment support the Governor’s vision for preventative healthcare.

## Summary

Syphilis, a curable sexually transmitted infection (STI), poses significant health risks if left untreated. Untreated syphilis can lead to severe, irreversible health issues, including nervous system and brain damage, blindness, hearing loss, and vertigo. Between 2019 and 2023, syphilis cases increased by 128% overall, with an 84% increase among men and a 330% increase among women. Congenital cases rose by 364% during the same period. Significant inequities in syphilis outcomes are evident in Colorado, particularly among people with a history of criminal justice involvement, substance use, and homelessness. Disparate treatment outcomes also exist, with treatment rates for men exceeding those for women.

The Colorado Department of Public Health and Environment (CDPHE) will work to improve and sustain both testing and treatment of syphilis through continued partnerships with community-based organizations and key providers. This includes expanding access to rapid testing kits for organizations serving people experiencing homelessness, those with substance use disorders, and individuals with mental health concerns. Additionally, the number of Emergency Departments offering opt-out syphilis screening will be increased to promote equity by offering accessible treatment options and services. To achieve the goal of reducing the overall incidence of syphilis, there will be a concerted focus on testing and treatment across all populations through the implementation of the Syphilis Colorado Outbreak Response Coordination Center (CORCC).

## Strategies

1. **Expand Rapid Testing Access:** Increase the number of individuals tested for syphilis in non-clinical settings through the deployment of rapid, point-of-care (POC) testing kits provided by the CDPHE from 1,100 to 2,800 individuals by June 30, 2025.
2. **Universal Syphilis Screening: Collaborative Strategy:** Increase the number of Emergency Departments who are recruited to implement a universal opt-out syphilis screening program in an Emergency Department setting by collaborating with two partners by June 30, 2025.
3. **Increase Treatment Completion (Women):** Increase the number of women who receive adequate treatment from 77% to 90% by June 30, 2027.
4. **Increase Treatment Completion (Men):** Increase the number of men who receive adequate treatment from 86% to 90% by June 30, 2027.

## SFY25 WIG 3.2: Reduce the Incidence of STIs | Congenital Syphilis

Reduce congenital syphilis cases by 48%, from 148 projected cases in 2024 to 77 by June 30, 2027.

**Context Statement:** Successful completion of this goal will significantly save neonatal lives, free children from devastating life-long health issues, and promote disease control -- demonstrating Colorado's commitment to protecting its most vulnerable populations.

**Lead Division:** Office of STI/HIV/VH

**Alignment:** CDPHE's goal to reduce congenital syphilis aligns with the Governor's priorities of improving healthcare access and quality for vulnerable populations. Focusing on high-risk groups, such as women in correctional facilities and emergency departments, supports underserved communities. The initiative links these populations to treatment and enhances provider skills through education, aligning with the Governor's commitment to high-quality, evidence-based healthcare.

### Summary

Congenital syphilis, a preventable but severe condition, poses significant health risks if untreated. Infants born with congenital syphilis can suffer from serious, irreversible health issues, including nervous system and brain damage, blindness, hearing loss, and vertigo. Between 2019 and 2023, congenital syphilis cases rose by 364% in Colorado. Significant inequities in congenital syphilis outcomes are evident, particularly among populations with a history of criminal justice involvement, substance use, and homelessness.

The Colorado Department of Public Health and Environment (CDPHE) is committed to improving and sustaining both testing and treatment of syphilis, with a special focus on preventing congenital syphilis. This will be achieved through continued partnerships with community-based organizations and key providers. Efforts will include expanding access to rapid testing kits for organizations serving people experiencing homelessness, those with substance use disorders, and individuals with mental health concerns. Additionally, increasing the number of Emergency Departments offering opt-out syphilis screening will promote equity by providing accessible treatment options and services.

To reduce the incidence of congenital syphilis, CDPHE will focus on comprehensive testing and treatment strategies across all populations, implementing the Syphilis Colorado Outbreak Response Coordination Center (CORCC) to coordinate these efforts.

### Strategies

1. **Boost Women's Treatment Linkage:** Aim to link 75% of women tested for syphilis—up from the current 70%—in supported correctional facilities to adequate treatment by June 30,

2025.

2. **Expanding Syphilis Testing for Medicaid:** Increase proportion of pregnant persons covered by medicaid who are tested for syphilis within the first 250 days of gestation, from 62% in FY24 to 68% by June 30, 2025. Focus on facilities serving high-risk groups such as correctional facilities, emergency departments, and community centers.
3. **Enhancing Prompt Syphilis Treatment Access:** Increase the rate of prompt syphilis treatment within the first 250 days of gestation, for diagnosed pregnant persons from 83% to 87% by June 30, 2025, focusing on high-risk groups in correctional facilities, emergency departments, and community centers.
4. **Enhancing Syphilis Diagnosis and Treatment:** Improve healthcare providers' skills in diagnosing, testing, staging, and treating syphilis by providing at least one (of 4) learning session to 100 providers by June 30, 2025 in an educational series by ECHO (Extension for Community Health Outcomes) Colorado.

### **SFY25 WIG 3.3: Reduce the Incidence of STIs | HIV**

**Lower new HIV cases by 15%, from 479 in 2023 to 407 by June 30, 2027.**

**Context Statement:** Successful completion of this goal will reduce new HIV cases in Colorado, ensuring better health for all residents, especially communities of color, and advancing the state's efforts to end the HIV epidemic.

**Lead Division:** Office of STI/HIV/VH

**Alignment:** The WIG aligns with the Governor's priorities by promoting health equity, fostering innovation, and building thriving communities. It targets communities of color disproportionately affected by HIV, addressing disparities in incidence and healthcare access. Using a data-informed approach, it tailors interventions to reduce HIV infections and improve outcomes. This supports statewide health goals of reducing preventable diseases, improving access, and eliminating disparities.

#### **Summary**

To achieve the federal Health and Human Services Agency's ambitious goal of ending the HIV epidemic by 2030, Colorado must intensify efforts across several key areas: reducing new HIV infections, enhancing access to healthcare, improving health outcomes for people living with HIV, and addressing the pervasive disparities and health inequities associated with HIV. Communities of color are particularly hard-hit by the epidemic. In 2022, Hispanic/Latinx individuals accounted for a staggering 40% of new HIV diagnoses, with an infection rate of 12.6 per 100,000 people. Similarly, Black/African Americans represented 12% of new diagnoses, with a higher infection rate of 18 per 100,000. These statistics highlight the urgent need for targeted interventions.



Furthermore, the issue of concurrent diagnoses, where individuals are diagnosed with AIDS within 30 days of an initial HIV diagnosis, is alarmingly on the rise. In 2022, these concurrent diagnoses made up 19% of all new HIV cases. Within this group, 35% were among Hispanic/Latinx individuals, and 7% were among Black/African Americans. These figures underscore the critical need for early testing, education, and sustained healthcare engagement to prevent the progression of HIV to AIDS. By focusing on these areas, Colorado can make significant strides towards ending the HIV epidemic and ensuring health equity for all its residents.

## Strategies

1. **Enhance PrEP Prescription Rates:** Increase the percentage of navigation clients who received PrEP (pre-exposure prophylaxis) prescription medication from 78% in 2024 to 80% by June 30, 2025.
2. **Reducing Late Stage HIV Diagnoses:** Reduce the number of late stage diagnoses from 64 as of December 31, 2023 to 57 through increasing awareness of HIV status among black, indigenous and hispanic people of color by June 30, 2025.
3. **Peer Navigators for HIV Care:** Enhance care engagement and promote equitable outcomes among Ryan White clients by recruiting two peer navigators to support long-term care for people living with HIV by June 30, 2025.

## SFY25 WIG 4.0: Increasing MMR Vaccination Rates

**Increase the measles, mumps, and rubella (MMR) vaccination rates among Colorado kindergarteners from 88.3% to 95% by June 30, 2027.**

**Context Statement:** Successful completion of this goal will protect Colorado children from measles and other preventable diseases, ensuring their health and well-being. It also strengthens community immunity, keeping everyone safe from outbreaks.

**Lead Division:** Disease Control and Public Health Response (DCPHR)

**Alignment:** Increasing MMR vaccination rates in kindergartens aligns with the Governor's priorities on public health and community well-being. Achieving a 95% rate enhances community immunity, reduces measles risks, and supports uninterrupted schooling and workforce stability. Prioritizing evidence-based interventions demonstrates Colorado's leadership in disease prevention and resilience, reflecting the state's commitment to equity, safety, and a healthier, prosperous future.

## Summary

The pandemic initially disrupted the delivery of routine vaccines and well-child visits, with varying levels of impact across age groups. Since then, coverage for most vaccines and age groups, as measured by Colorado Immunization Information System (CIIS) data, has improved and risen above pre-COVID baselines, except for kindergarten vaccination rates.

The Colorado Board of Health rule [6 CCR 1009-2](#) requires most schools and licensed child care facilities to report aggregate immunization and exemption data to CDPHE annually. For the 2023-2024 school year, schools and child care/preschool facilities reported this data directly to CDPHE through an online data collection tool or by sending deidentified data to the department between October 2023 and January 2024.

[Data for the 2023-2024 school year](#) show modest increases in kindergarten vaccination rates for all vaccines. However, with the exception of hepatitis B (91.1%), immunization rates for school-required vaccines among kindergartners are still below 90% for the third year:

- DTaP: 87.92%
- MMR: 88.33%
- Polio: 87.85%
- Varicella: 87.28%

Kindergarten compliance rates for hepatitis B, DTaP, MMR, polio, and varicella all increased by 1.7% or less in the 2023-2024 school year compared to 2022-2023.

The observed modest increases in kindergarten vaccination coverage for the 2023-2024 school year are encouraging; however, routine vaccination coverage remains low compared to rates measured prior to the COVID-19 pandemic and falls short of Colorado's goal of 95% coverage for all school-required vaccines. Among Colorado's kindergartners, coverage for school-required vaccines is 2-5 percentage points lower than [rates measured for the 2019-2020 school year](#).

The COVID-19 pandemic made it difficult for children to access care and get vaccinated against other non-COVID, vaccine-preventable diseases. These low vaccination rates have contributed to the resurgence of the measles virus globally. While measles is no longer endemic to the U.S., it remains common in many countries, and its incidence is increasing due to low vaccination rates. Given measles' high contagion and the interconnectedness of the world through international travel, it can easily cross borders. As of May 16, 2024, a total of 139 measles cases were reported by 21 U.S. jurisdictions, more than double the number in all of 2023. Of these 139 cases, 45% were in children under 5 years, 82% occurred in unvaccinated people, and 54% resulted in hospitalization for isolation or management of measles complications.

## Strategies

- **Boosting Vaccine Rates in Schools:** Conduct at least 60 targeted school-based vaccine clinics in partnership with schools with low MMR coverage and high non-compliance rates by November 30, 2024.
- **Enhance MMR Vaccination Through Direct Messaging:** Provide outreach via direct texts or email messages to the parents of kindergarten-aged children who are overdue for MMR

vaccination, and increase the percentage of children who became up-to-date with their MMR vaccinations as a result of this outreach from 16% as of September 11, 2023 to 25% by June 30, 2025.

- **Measles Awareness Campaign:** Develop and implement a measles-focused statewide media and outreach campaign to achieve 55 million impressions by August 31, 2024.

## SFY25 WIG 5.0: Suicide Prevention

Reduce the age-adjusted suicide rate in calendar year 2025 by 7% by December 31, 2025, compared to calendar year 2023.

*(The age-adjusted suicide rate is a standardized statistical measure used to compare suicide prevalence across different populations or time periods while accounting for variations in age distributions.)*

**Context Statement:** Successful completion of this goal will significantly lower suicide rates in Colorado, enhancing suicide-specific prevention, intervention, and postvention programs and safety across all communities, and making the state a more inclusive, healthier place to live.

**Lead Division:** Prevention Services Division

**Alignment:** This WIG aligns with the Governor's priorities on health and well-being, mental health accessibility, and gun violence prevention. By reducing suicide rates, it improves overall health. Training more mental health providers and increasing targeted therapy access supports mental health priorities. Engaging with the firearm community through the Gun Shop Project addresses suicide prevention. Supporting youth aligns with state efforts to protect vulnerable populations.

### Summary

CDPHE is reinstating the reduction of the age-adjusted suicide rate as a Wildly Important Goal (WIG) for Fiscal Year 2024-25. This goal, aligned with the National Strategy for Suicide Prevention, underscores Colorado's leadership in comprehensive suicide prevention efforts. Colorado stands out nationally with data trends moving positively, signaling the effectiveness of our strategies. By leveraging all competitive federal grants for suicide prevention, we ensure a robust resource base for implementing scalable, evidence-based interventions.

Colorado's suicide rate had been increasing slightly year over year, going back 20+ years. In 2019, when suicide prevention first became a WIG, the Colorado Department of Public Health and Environment (CDPHE) re-tooled its programming. We applied for and received multiple federal grants. We adjusted strategies to focus on areas with the greatest potential impact. By 2021, the rising trend began to level off, and in 2022, we began to observe a decrease in the suicide rate. This is in contrast to the national rate which continues to increase.

Initiatives such as the Gun Shop Project and the Follow-up Services Project exemplify strategic efforts that CDPHE believes have significantly contributed to bending the curve on age-adjusted suicide rates in Colorado. The Gun Shop Project collaborates with firearm retailers to promote safe storage and identify signs of suicidal intent among customers. The Follow-up Services Project provides continuous support to individuals after a hospital discharge from a suicide-related crisis, helping to prevent recurrence. Additionally, we believe that the relatively new Office of Gun Violence Prevention, may also be having an impact on suicide by firearm. Expanding our programming has become a top priority for the department, and as such, we will invest new dollars into suicide prevention from our federal preventative services block grant--discretionary public health funds given to states annually--and we will continue to seek new federal grant funding as well.

This collaborative and strategic approach, validated by empirical data from these initiatives, enhances our capability to significantly impact suicide rates. The reinstatement of this WIG on the Dashboard reaffirms CDPHE's commitment to prioritizing mental health and leveraging proven strategies to improve community well-being across the state.

## Strategies

1. **Triple Gun Shop Visits Initiative:** Increase the number of Colorado Firearm Community gun shop visits from Gun Shop Project Grantees and the Office of Suicide Prevention from 160 to 560 by June 30, 2025.
2. **CAMS Training Expansion Initiative:** Increase the number of Colorado mental and behavioral health providers who have completed the Collaborative Assessment and Management of Suicidality (CAMS) Role-Play Training from 2,715 to 3,115 by June 30, 2025.
3. **RMCP Follow-Up Service Expansion:** Increase the number of people receiving Follow-Up Project services from Rocky Mountain Crisis Partners (RMCP) from 36,000 to 42,500 by June 30, 2025.
4. **Youth Suicide Therapy Boost Project:** Increase the number of young people (up to age 19) receiving suicide-specific therapy from the Second Wind Fund from 940 to 1,350 by June 30, 2025.

## SFY25 Inclusion, Diversity, Equity and Accessibility

CDPHE believes transformational change can be realized and therefore we continue our sustained commitment to integrating inclusion, diversity, equity, and accessibility (IDEA) values into how we do business. Refer to the [IDEA Work Plan](#) for more information.

## SFY24 Continuous Process Improvement Initiatives and Outcomes

The Office of Strategy, Performance, and Innovation (OSPI) launched several initiatives over the past year to support Performance Management and Quality Improvement (PMQI) infrastructure at CDPHE:

1. CDPHE's Office of Strategy, Performance, and Innovation (OSPI) has implemented a comprehensive, standardized Intake and Service Delivery model to support all phases of the project lifecycle. This initiative is a key component of OSPI's strategy to build an effective internal consultancy, enabling CDPHE staff to achieve consistent success and realize cost savings.

As part of this consultancy, OSPI developed a suite of standardized tools, including an intake form, project documentation template, project slides, meeting notes, and Lean tool templates. These resources ensure consistent project documentation and deliverables for clients and end-users.

Additionally, OSPI adopted Monday.com as a centralized project management platform to enhance transparency and team collaboration. The office also established team standards for monitoring and tracking projects, ensuring a unified approach to project management across the department.

2. As part of its continuous quality improvement efforts, CDPHE is redesigning and enhancing its Performance Reporting Forums. These forums have been rebranded as the 'Business Intelligence and Innovation Forum' and now include reporting on both division strategic work plan efforts and progress on department strategic priorities outlined in the [SFY 2023-2026 CDPHE Strategic Plan](#).

The forums foster dialogue, identify improvement opportunities, and promote a common language across the department. Additionally, the OSPI team, now certified in Results-Based Accountability as a performance management framework, is providing training and resources to both Division and Department staff to support these efforts.

3. OSPI has expanded its team by hiring two new Quality and Performance Improvement Consultants, funded by the CDC's public health infrastructure grant, "Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems" ([CDC-RFA-OE22-2203](#)). Additionally, in February 2024, OSPI appointed a Director of Organization & Business Effectiveness to serve as CDPHE's Principal Consultant for Quality Improvement and Performance Management across the department. These strategic hires are aimed at enhancing quality improvement and performance management initiatives throughout CDPHE.
4. In April 2024, OSPI launched the Quality Improvement (QI) 101 online training for all CDPHE staff. This training underscores CDPHE's commitment to fostering a culture of continuous

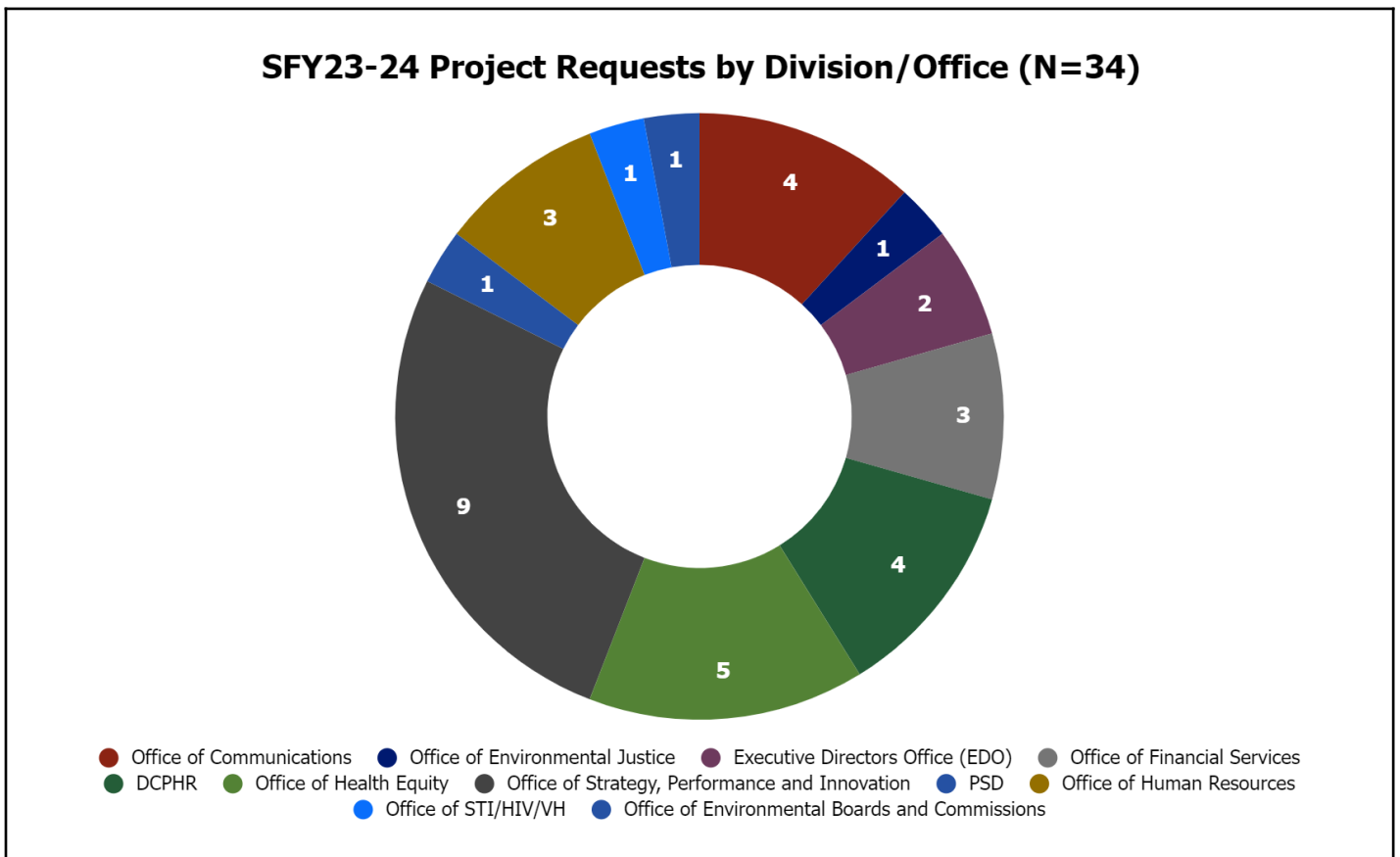
quality improvement. The first module offers an introduction to QI basics and fundamental Lean concepts, while the second module delves into common Lean tools and provides an overview of OSPI and its services.

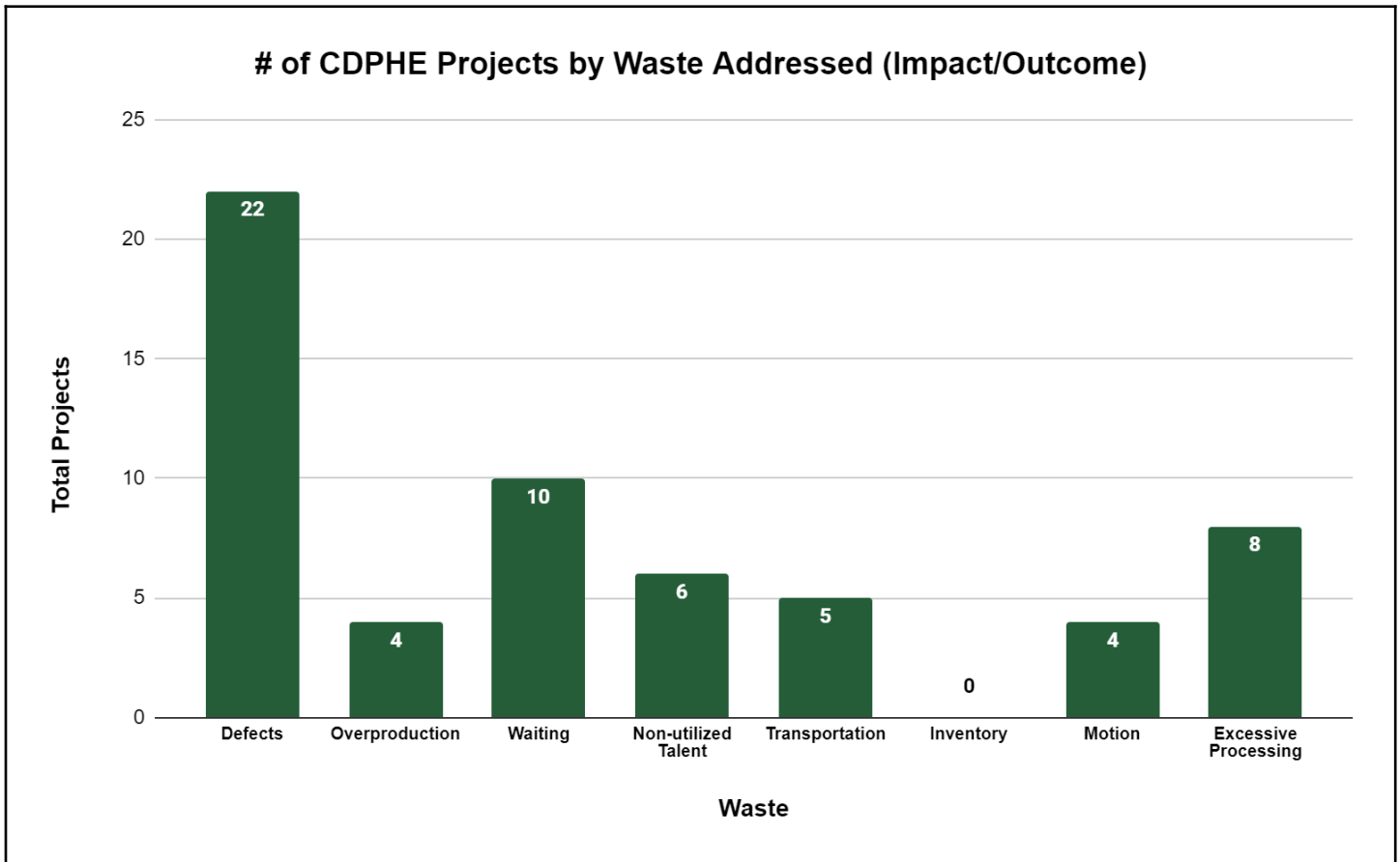
The training, developed using the web-based Articulate/Rise 360 application, is digitally accessible and available to staff on COTRAIN. This initiative ensures that all employees have the knowledge and resources necessary to engage in effective quality improvement practices.

### CDPHE Quality Improvement Projects (SFY24)

In SFY24, the Office of Strategy, Performance, and Innovation (OSPI) received 34 improvement project and consultancy requests from 12 different divisions and offices. These requests encompassed a range of services, including general consultation, system design, quality improvement, business intelligence, and department-wide initiatives. The visual below provides a breakdown of the total project requests by Division for SFY24. Of the 34 project requests, 12 were completed in FY24.

These efforts are aligned with CDPHE’s Strategic Goal 4.5: to promote a culture of continuous improvement throughout the department.





### CDPHE Quality Improvement Projects (SFY25)

Building on the successes of FY24, CDPHE’s Office of Strategy, Performance, and Innovation (OSPI) is poised to continue its transformative initiatives into FY25, reinforcing the department’s robust PMQI infrastructure and advancing strategic planning efforts. With the comprehensive Intake and Service Delivery model firmly established, OSPI will persist in fostering an effective internal consultancy, driving consistent project success and cost efficiency across CDPHE.

The rebranded Business Intelligence and Innovation Forum will continue to serve as a vital platform for performance reporting and strategic dialogue, promoting a unified approach to departmental priorities. OSPI's certified Results-Based Accountability framework and ongoing training initiatives, including the recently developed Quality Improvement and Performance Management 101 online training, will serve to further embed a culture of continuous quality improvement.

In FY25, CDPHE will fully deploy the internal continuous improvement consultancy, a key function of OSPI, with a focus on supporting improvement efforts aligned with executing the Department’s strategy, achieving WIGs, and eliminating process waste. Additionally, OSPI will restructure the strategy deployment facilitation approach to enhance efficiency and effectiveness, aligning efforts across the department toward shared goals. The suite of standardized tools and the centralized project management platform, Monday.com, will remain pivotal in ensuring

transparent and collaborative project management.

In support of the department's strategic priority of developing a culture of continuous improvement, CDPHE will welcome Change Agents Training - and their Innovation Academy - to broadly socialize standard methods and mindsets for all employees to engage in making positive changes in their work. OSPI will leverage and reinforce this training when engaging all levels of teams to make CDPHE more efficient, effective, and enjoyable for both our employees and the Colorado residents we serve. This unique innovation training program, designed specifically for governments, will draw on various industry best practices, leverage process improvements, and empower employees to make meaningful and impactful changes. The Innovation Academy will offer Intermediate courses in practical problem solving six times a year and a tactical and adaptive leadership course for senior executives. Participants will gain experience in structured problem-solving, root cause analysis, and innovation impact, documenting their innovations and creating tangible improvements.

The strategic expansion of the OSPI team, bolstered by new hires and leadership appointments, will sustain the momentum of quality and performance improvement efforts, solidifying CDPHE's commitment to excellence and innovation in public health and environmental protection.



## SFY24 Performance Evaluation and Governor's Dashboard

The Colorado Department of Public Health and Environment made great progress on the goals contained within the FY24 performance plan. The summary below provides an overview of accomplishments and the status of each of the priority areas as of June 30, 2024, with corresponding graphs to visual progress in Appendix A. For additional details, access the online [Performance Plan Dashboard](#).

### SFY24 WIG 1: Air Quality - Ozone

**Adopt new regulatory requirements and implement state air quality programs by June 30, 2024 that will result in estimated reductions of ozone precursor emissions totaling ~11,700 tons per year once fully implemented.**

**WIG 1** focused on Air Quality, specifically reducing Ozone emissions through the implementation of four goals:

- 1. Promulgate three rulemakings (oil and gas pre-production, small engines, and Colorado Clean Cars) by the Air Quality Control Commission to support ozone emission precursor reductions.**

This goal was 100% achieved in December 2023. These regulatory initiatives are projected to reduce ozone precursor emissions by approximately 12,513 tons per year when completely implemented. We also plan to complete additional rulemakings to address ozone precursor emissions in the coming year.

- 2. Develop and design the Clean Fleet Enterprise transportation network company (i.e., Uber/Lyft) grant program to support and accelerate the transition from fossil fuel-powered car share vehicles and trucks to electric motor vehicles.**

This goal was 100% achieved in January 2024 and we anticipate that emission reductions will be achieved through this program in the next year.

- 3. Increase Title V Permitting Staff from 23 FTE to 30 FTE.**

This goal is 100% completed, with the Title V Permitting Staff level currently at 30 FTE, with the addition of 1 new FTE in May 2024.

- 4. Sustain daily air quality forecasts for 358 out of 365 days through June 30, 2024.**

The Air Pollution Control Division has issued air quality forecasts every day so far for this performance period and remains on track to complete this goal by the end of the fiscal year. As of June 30, 2024, the number of daily air quality forecasts is 366.

Progress on these indicators is included in Appendix A in Figures 1-5 respectively.

## **SFY24 WIG 2: Prevention Cost Savings**

**Healthcare Savings: WIG 2:** Develop and implement a framework for incorporating health cost savings analysis into evidence-based policy/program design decisions for public health prevention. Implement at least five programmatic changes informed by this framework in 2024 and develop cost saving targets for 2024-2026.

### **Literature Review and Initial Findings**

In October 2023, CDPHE engaged the Office of Public Health Practice at the Colorado School of Public Health to review literature on cost savings associated with state-supported prevention interventions. CDPHE consulted the CDC's Community Guide to Preventive Services and compiled a list of interventions supported by CDPHE, other state agencies, or the Governor's Office with evidence of cost savings.

Key interventions reviewed include:

- Long-acting reversible contraception (LARC)
- Adult and childhood immunizations (including influenza)
- WIC feeding program
- WiseWoman prevention program (heart disease risk)
- Naloxone distribution

The review highlighted that nurse home visitor programs (NHVP) show cost savings when evaluating child maltreatment, with additional savings in other outcomes. The NHVP is housed in CDHS.

CDPHE noted that most individual-level prevention interventions, such as breast and cervical cancer screening, cholesterol, and blood pressure screening, do not save money but are cost-effective, extending life by one year for less than \$50,000 to \$100,000.

### **Presentation and Implementation**

During the SMART Act hearing on January 18, 2024, CDPHE's Chief Medical Officer presented the prevention WIG and highlighted public health interventions from the literature review. These interventions included:

- Routine childhood vaccinations
- Long-acting reversible contraception (LARC)
- Tobacco control and cessation efforts
- School-based dental sealant programs

- Nurse home visitor program (NHVP)
- Influenza vaccination

The summary of the literature review (Literature Review for Cost Saving) has been distributed to key Governor's Office staff, completing this component of the WIG 100%.

### **Framework Development and Further Application**

CDPHE developed a framework for incorporating health cost savings analysis into evidence-based policy and program design for public health prevention. This framework guided the FY24-25 department Impact Measure for:

- Syphilis prevention and control
- Congenital syphilis prevention and control
- Screening and PrEP for HIV
- Measles, Mumps, and Rubella immunization

CDPHE also applied the framework in approving the use of the CDC's Preventive Health and Health Services Block Grant for children's oral health screening. This brought the total number of projects using the Prevention Cost Savings framework to five, meeting the WIG target and completing this component 100%.

### **Future Work and Data Visualization**

The final component of the Prevention WIG involves developing a data visualization for potential cost savings associated with preventive services in Colorado by June 30, 2025. Since cost savings has been added to many of the FY 25 Health WIGS, progress on cost savings will be updated throughout the year on the WIG data dashboard by taking any reductions in disease or increases in immunizations, and adding a cost-saving multiplier, as quantified in the scientific literature and documented as a FY 25 Impact Measure on the Governor's Dashboard.

### **Summary**

CDPHE has successfully reviewed and identified cost-saving prevention interventions, developed a framework for health cost savings analysis, and applied it to multiple public health projects, meeting the targets for the FY 24-25 WIG. The final phase of visualizing cost savings is underway, marking significant progress in enhancing public health policy and program design.

Progress on WIG 2 indicators is included in Appendix A in Figures 6-9 respectively.

## SFY24 WIG 3: STI - Syphilis

Reduce the incidence of syphilis by 20% by June 30, 2025.

WIG 3 addressed the incidence of syphilis cases by implementing strategies in 4 key areas:

- **Provider Education and Engagement Initiatives:** The provider education and engagement efforts included the release of a Health Alert Network (HAN) on April 1, 2024, and the signing of a Public Health Order by the governor on April 19, 2024. Furthermore, the team is collaborating with Colorado ECHO (Extension for Community Health Outcomes) to launch a comprehensive four-part provider education program starting on June 6, 2024. This program has already attracted over 200 registrations, demonstrating significant interest and engagement from the provider community.
- **Syphilis Screening and Treatment Pilot in Emergency Departments:** The exploration of a syphilis screening and treatment pilot in emergency department settings is underway. Several emergency departments, including Denver Health, have expressed interest in partnering with CDPHE on this initiative. Through discussions with these interested partners, the Office of STI/HIV/VH and DCPHR has identified key barriers to implementation, such as the need for support with referrals and follow-up care. The Office is actively working on finding solutions to overcome these challenges and ensure the successful launch of the pilot program.
- **Expanding Syphilis Testing Statewide:** As of Quarter 3, the Office has supported over 7,200 syphilis tests in communities across the state, surpassing the initial goal of 3,100 tests. This significant achievement reflects our commitment to expanding the program and enhancing public health efforts in the future.
- **Expanding Access To Treatment:** The Office Disease Intervention Specialists have linked 85% of men and 76% of women diagnosed with syphilis during FY24 to treatment. Additionally, the team is expanding access to field delivered therapy (FDT), successfully treating 41 women with FDT so far in FY 24.

Progress on this WIG is included below in Appendix A in Figures 10-15 respectively.

## CDPHE Reaccreditation

The Colorado Department of Public Health and Environment (CDPHE) achieved a significant milestone in 2016 by earning Accreditation status from the Public Health Accreditation Board (PHAB), becoming the 16th state health department in the United States to receive this prestigious recognition. Accreditation from PHAB signifies that CDPHE adheres to nationally recognized, practice-focused, and evidence-based standards of performance, which serve as benchmarks for excellence in public health services.

Reaccreditation is not mandatory but a voluntary process that CDPHE has chosen to pursue as part of its commitment to continuous improvement. The reaccreditation process is strategic, designed to enhance the department's performance management capabilities, ensuring that public health goals are met efficiently and effectively. This approach fosters a culture of continuous evolution, improvement, and advancement within the department, ultimately increasing its effectiveness in improving population health outcomes.

On June 21, 2022, CDPHE participated in a virtual Reaccreditation site visit with PHAB. This visit was an integral part of the reaccreditation process, allowing PHAB to assess CDPHE's ongoing adherence to accreditation standards. Following this assessment, CDPHE was awarded a five-year continuation of its accreditation status in State Fiscal Year (SFY) 2023, extending through 2027 (see 09/26/2022 [press release](#)). This recognition underscores CDPHE's sustained commitment to public health excellence and its proactive efforts in maintaining high standards of performance.

In September 2023, CDPHE took further steps to uphold its accreditation by completing a required PHAB annual report. Additionally, the department submitted the SFY 2023-2026 Performance Management and Quality Improvement (PMQI) [Plan](#) for documentation review and feedback. This submission is a critical component of the reaccreditation process, as the feedback provided by PHAB will be utilized to strengthen the PMQI Plan. By incorporating this feedback, CDPHE aims to enhance its performance management and quality improvement initiatives, ensuring that the department is well-prepared for the Reaccreditation application in August 2027.

Overall, CDPHE's dedication to maintaining its PHAB accreditation status demonstrates its commitment to public health excellence. The department's strategic focus on continuous improvement and adherence to nationally recognized standards plays a crucial role in its mission to protect and enhance the health and environment of all Coloradans.

## Appendix A - SFY24 WIG Data Visualizations

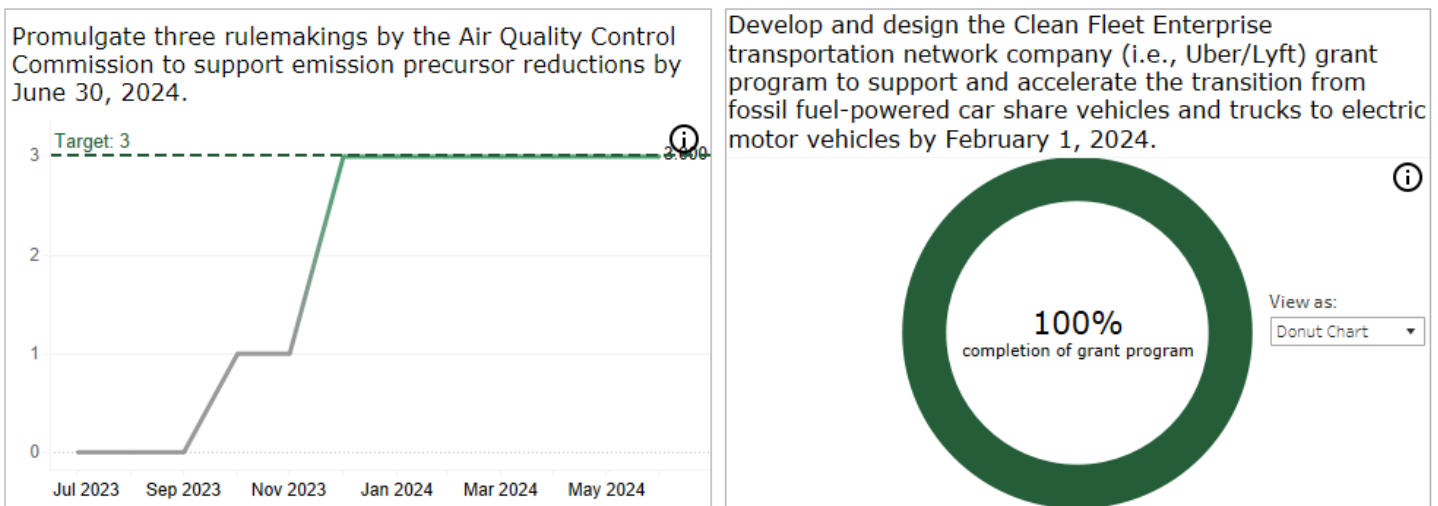
### Progress on SFY24 Wildly Important Goals

See the [Governor's Dashboard](#) for updated performance metrics. Progress on the Air Quality WIG will be reflected in the dashboard as they are reported on an annual basis.

### SFY24 WIG 1: Air Quality - Ozone

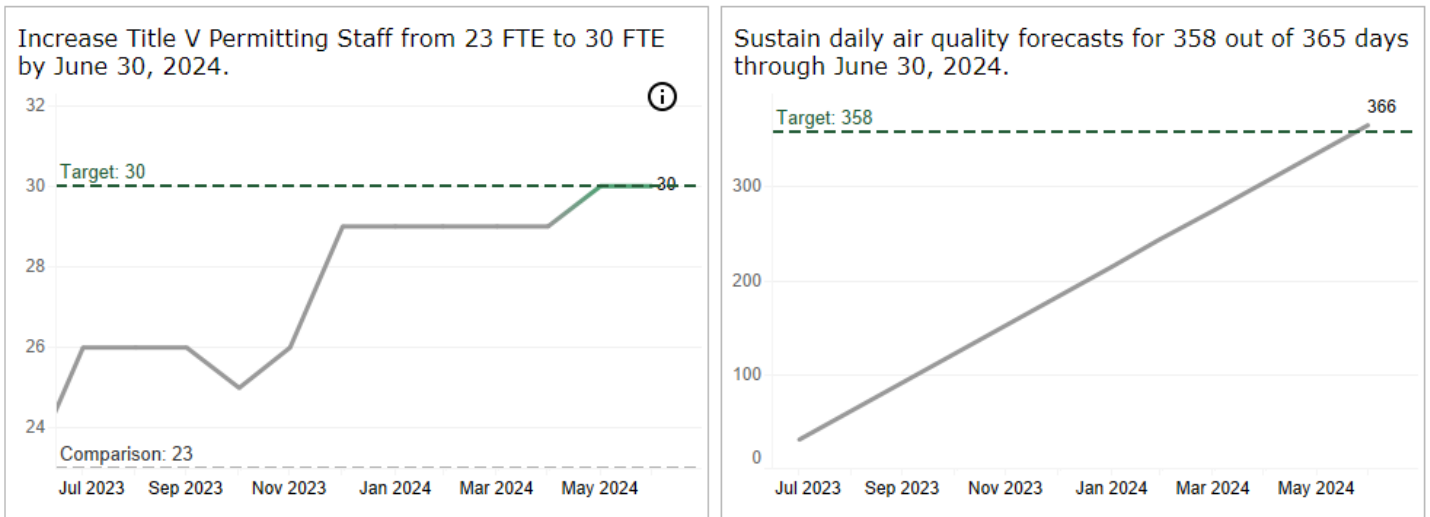


**Figure 1:** Adopt new regulatory requirements and implement state air quality programs by June 30, 2024 that will result in estimated reductions of ozone precursor emissions totaling ~11,700 tons per year once fully implemented.



**Figure 2 (on left):** Lead Measure 1.1: Promulgate 3 rulemakings by the AQCC to support emission precursor reductions (Oil and Gas Pre-production NOx emissions, small engines, and Colorado Clean Cars) by June 30, 2024.

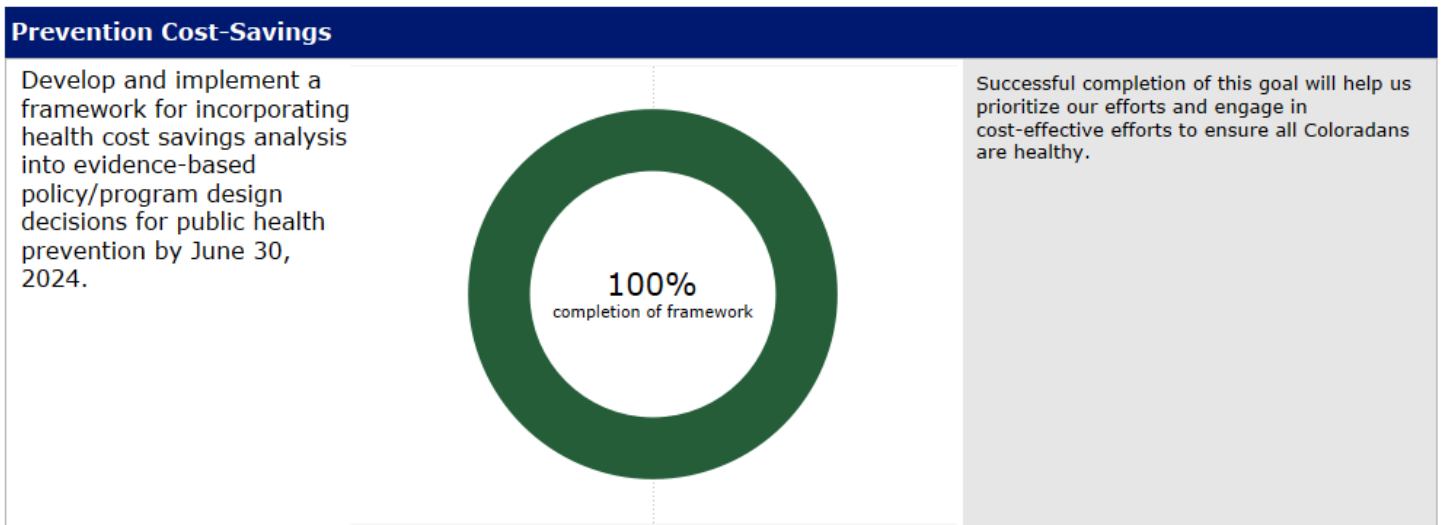
**Figure 3 (on right):** Lead Measure 1.2: Develop and design the Clean Fleet Enterprise transportation network company (i.e., Uber/Lyft) grant program to support and accelerate the transition from fossil fuel-powered car share vehicles and trucks to electric motor vehicles by February 1, 2024.



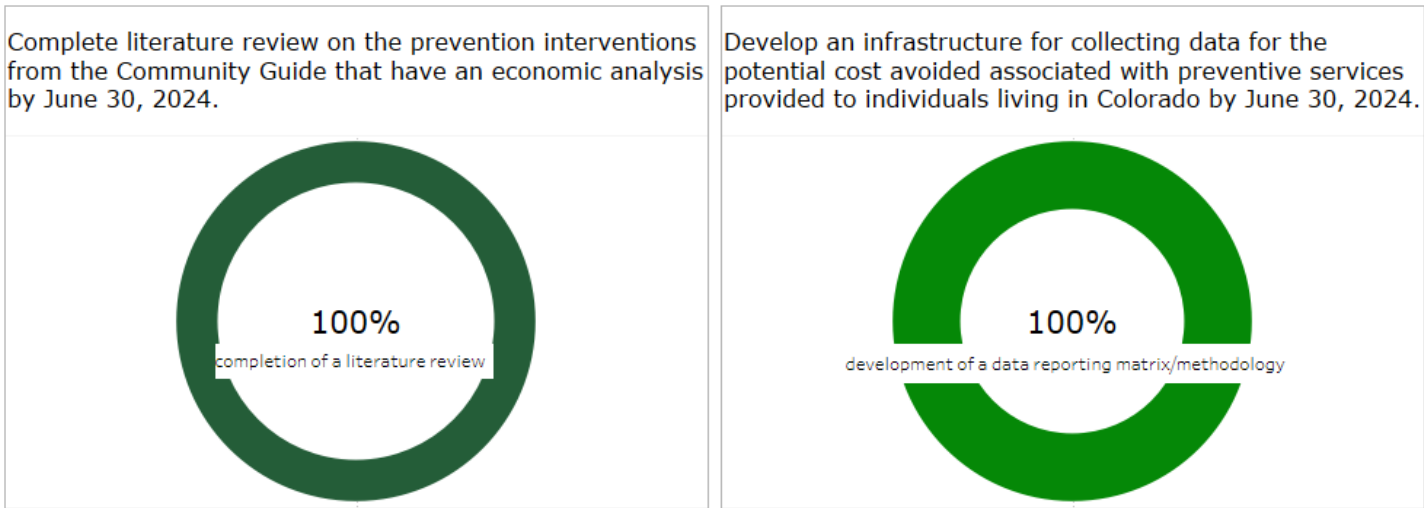
**Figure 4 (on left):** Lead Measure 1.3: Increase Title V Permitting Staff from 23 FTE to 30 FTE by June 30, 2024.

**Figure 5 (on right):** Lead Measure 1.4 : Sustain daily air quality forecasts for 358 out of 365 days through June 30, 2024.

## SFY24 WIG 2: Prevention Cost Savings

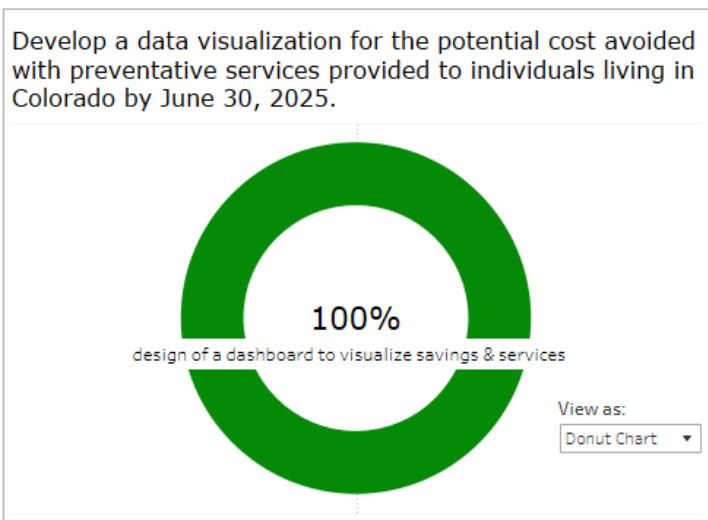


**Figure 6:** Develop and implement a framework for incorporating health cost savings analysis into evidence-based policy / program design decisions for public health prevention.



**Figure 7 (on left):** Lead Measure 2.1: Complete literature review on the prevention interventions from the Community Guide that have an economic analysis by June 30, 2024.

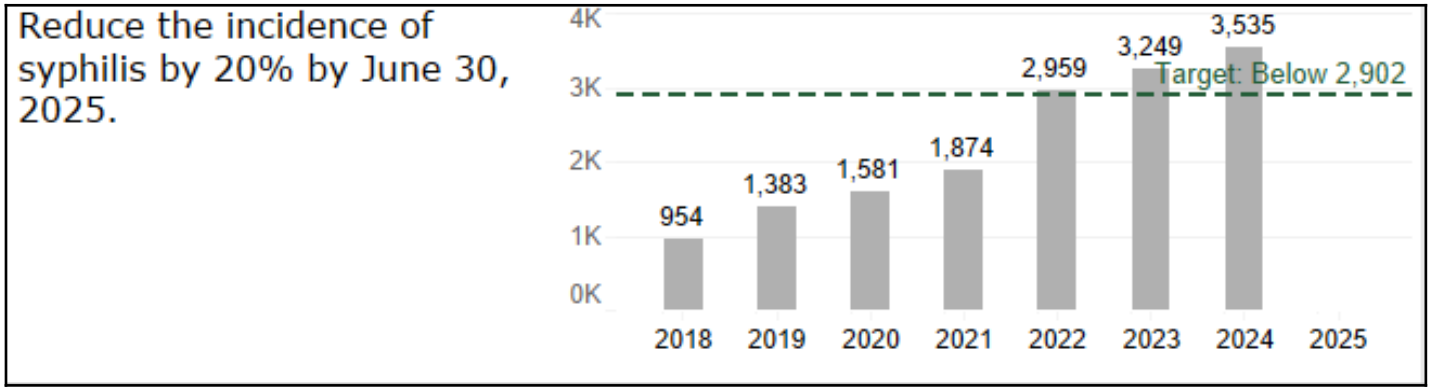
**Figure 8 (on right):** Lead Measure 2.2: Develop an infrastructure for collecting data for the potential cost avoided associated with preventive services provided to individuals living in Colorado by June 30, 2024



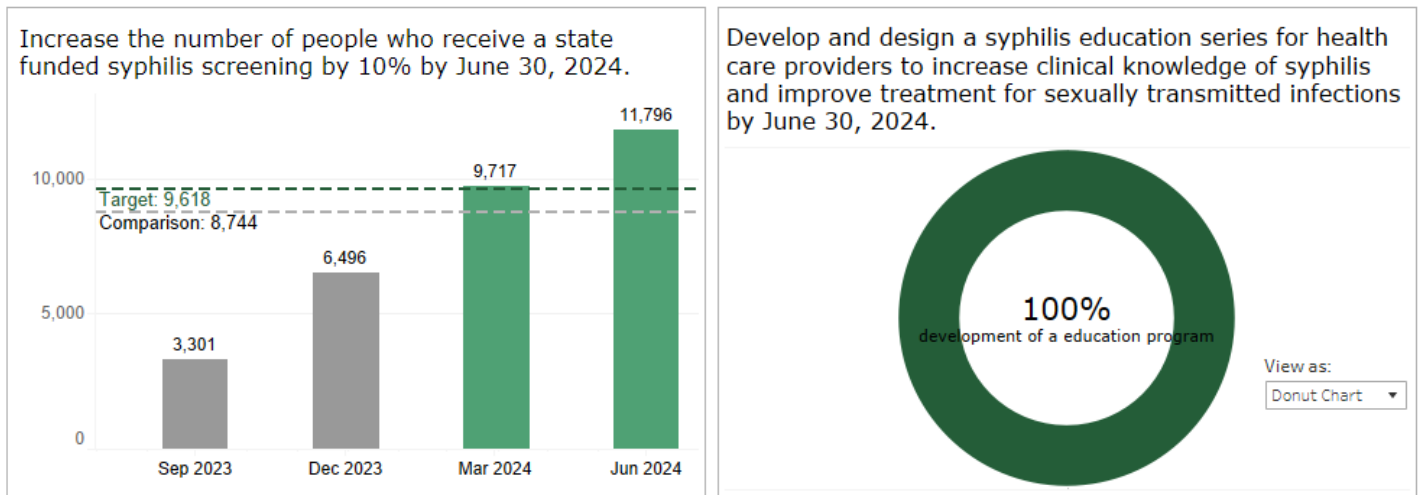
**Figure 9:** Lead Measure 2.3: Develop a data visualization for the potential costs avoided savings associated with preventative services provided to individuals living in Colorado by June 30, 2025.



## SFY24 WIG 3: STI - Syphilis

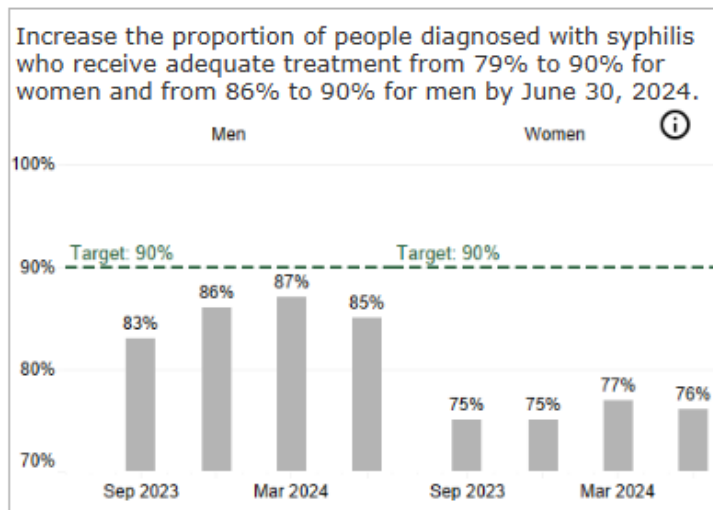
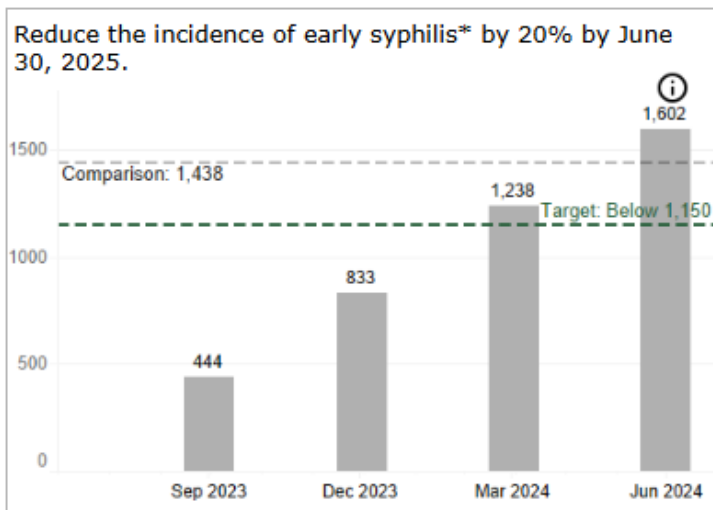


**Figure 10:** Reduce the incidence of syphilis by 20% by June 30, 2025.



**Figure 11 (on left):** Lead Measure 3.1: Increase the number of people who receive a state funded syphilis screening by 10% by June 30, 2024.

**Figure 12 (on right):** Lead Measure 3.5: Develop and design a Syphilis education series for health care providers to increase clinical knowledge of Syphilis and improve treatment for sexually transmitted infections by June 30, 2024.



**Figure 13 (on left):** Lead Measure 3.4: Reducing the incidence of early syphilis\* by 20% by June 30, 2025. \*early syphilis includes primary, secondary and early latent stages.

**Figure 14 (on right):** Lead Measure 3.2: Increase the proportion of men diagnosed with syphilis who receive adequate treatment from 86% to 90% by June 30, 2024.

**Figure 15 (on right):** Lead Measure 3.3: Increase the proportion of women diagnosed with syphilis who receive adequate treatment 79% to 90% by June 30, 2024.