



Board of Directors Regular Meeting AGENDA

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or [Zoom](#)

Date: Thursday, April 24, 2025

Time: 5:30 PM

5:30 PM I. Call to Order

Molly Gutilla

- a. Roll Call Board of Directors
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement
- d. Approval of Agenda

5:35 PM II. Presentations

Marsha Johnson

- a. Leading Change Management for Program Delivery and Partnerships
- b. Poudre School District, SummitStone Health Partners and CAYAC Partnership

Jessica Shannon,
Katie Matus &
Community Partners

6:05 PM III. Public Comment

Note: If you choose to comment, please follow the “Guidelines for Public Comment” provided at the end of the agenda.

6:35 PM IV. Consent Agenda

- a. February 27, 2025 - Regular Meeting Minutes
- b. March 12, 2025 - Joint Board Meeting with UCHHealth North Poudre Valley Health System Meeting Minutes
- c. Practice Transformation and Partnerships Contract
- d. Board Public Policy Committee Position Ratification

7:00 PM	V. Action Items	
	<ul style="list-style-type: none"> a. Q1 2025 Monthly Financial Statements and Reporting b. Contract for Comprehensive Analysis of Clinical Practices, Legal Practices and Risk Management Services 	<p>Misty Manchester</p> <p>Dana Turner</p>
7:20 PM	VI. Reports and Discussions	
	<ul style="list-style-type: none"> a. Health District Branding b. 2025 Board of Directors Election Update c. Board of Directors Reports d. Liaison to PVHS/UCHealth North Report e. Board Committee Updates <ul style="list-style-type: none"> • Public Policy Committee Update • Executive Committee Update f. Executive Director Staff Report 	<p>Marisa Dylan</p> <p>Jessica Shannon</p> <p>Board</p> <p>John McKay</p> <p>Committee Members</p> <p>Liane Jollon</p>
8:00 PM	VIII. Announcements	Molly Gutilla
	<ul style="list-style-type: none"> a. May 6, 2025 - Board Election b. May 22, 2025 - Regular Board Meeting 	
8:05 PM	IX. Adjourn	

Mission

The Mission of the Health District of Northern Larimer County is to enhance the health of our community.

Vision

- ❑ District residents will live long and well.
- ❑ Our community will excel in health assessment, access, promotion and policy development.
 - Our practice of **assessment** will enable individuals and organizations to make informed decisions regarding health practices.
 - All Health District residents will have timely **access** to basic health services.
 - Our community will embrace the **promotion** of responsible, healthy lifestyles, detection of treatable disease, and the **prevention** of injury, disability and early death.
 - Citizens and leaders will be engaged in the creation and implementation of ongoing **systems and health policy development** at local, state, and national levels.
 - Like-minded communities across the country will emulate our successes.

Strategy

The Health District will take a leadership role to:

- ❑ Provide exceptional health services that address unmet needs and opportunities in our community,
- ❑ Systematically assess the health of our community, noting areas of highest priority for improvement,
- ❑ Facilitate community-wide planning and implementation of comprehensive programs,
- ❑ Educate the community and individuals about health issues,
- ❑ Use Health District funds and resources to leverage other funds and resources for prioritized projects, and avoid unnecessary duplication of services,
- ❑ Promote health policy and system improvements at the local, state and national level,
- ❑ Continuously evaluate its programs and services for quality, value, and impact on the health of the community,
- ❑ Share our approaches, strategies, and results, and
- ❑ Oversee and maintain the agreements between Poudre Valley Health System, University of Colorado Health and the Health District on behalf of the community.

Values

- ❑ Dignity and respect for all people
- ❑ Emphasis on innovation, prevention and education
- ❑ Shared responsibility and focused collaborative action to improve health
- ❑ Information-driven and evidence-based decision making
- ❑ Fiscal responsibility/stewardship
- ❑ An informed community makes better decisions concerning health

Guidelines For Public Comment

The Health District of Northern Larimer County Board welcomes and invites comments from the public. Public comments or input are taken only during the time on the agenda listed as 'Public Comment.' Public Comment is an opportunity for people to express your views and therefore the Board of Directors generally does not engage in back-and-forth discussion or respond to questions.

If you choose to make comments about any agenda item or about any other topic not on the agenda, please use the following guidelines.

Before you begin your comments please:

- Identify yourself. Please spell your name for the record and let us know if you reside in the District.
- Tell us whether you are addressing an agenda item, or another topic.
- Please know that you will have up to 5 minutes to present public comment. However, the time allotted for public comment may be limited, so the Chair may need to shorten the time limit as necessary to give each commenter a chance to speak.
- Please address your comments to the Board of Directors, rather than individuals.



Board of Directors Regular Meeting MINUTES

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or Zoom

Date: Thursday, February 27, 2025

Time: 5:30 PM

Board Members Present:

Molly Gutilla, MS DrPH, Board President
Julie Kunce Field, JD, Board Vice President
Joseph Prows, MD MPH, Treasurer
Erin Hottenstein, Assistant Treasurer
John McKay, Secretary

Also Present:

Elizabeth Lebuhn, Associate Attorney,
Hoffman, Parker, Wilson & Carberry, P.C.
Ragini Acharya, Partner, Husch Blackwell

I. Call to Order

a. Roll Call Board of Directors

With a quorum present, Board President Molly Gutilla called the meeting to order at 5:37 p.m.

b. Welcome Guests & Attendees

c. Conflict of Interest Statement

Director McKay disclosed a conflict with the Consent Agenda item: SummitStone Health Partners Contract.

Motion: To move the SummitStone Health Partners Contract to Action Items.

Moved by Erin Hottenstein; seconded by Joseph Prows; John McKay abstains; passed unanimously.

d. Approval of Agenda

Motion: To approve the agenda with the amendment.

Moved by Julie Kunce Field; seconded by Joseph Prows; passed unanimously.

II. Presentations

a. Urban Renewal Authority Updates

Andy Smith, the city of Fort Collins' Redevelopment Manager, presented an update for the North College Urban Renewal Plan Area.

Director McKay inquired about demographic requirements for an Urban Renewal Authority (URA) housing project. Mr. Smith shared that 77% of units would be for those at 80% Area Median Income (AMI)

or less and that the remaining units would be up to 100% AMI and were based on household and income criteria released by the U.S. Department of Housing and Urban Development (HUD).

b. Health Equity Definition

Cassi Niedziela, Health Equity Strategist, presented a report on the creation of a Health Equity Definition for the Health District, Health Equity Surveys for staff, leadership, and board members, and the status of the development of the Health Equity Strategic Plan.

Director McKay asked about including new board members in the health equity survey and understanding how "community" is defined for specific populations, and staff training. Cassi Niedziela explained that the health equity definition was intentionally comprehensive, with the Strategic Plan translating this into concrete actions. The plan will reflect district residents, include targeted efforts for specific populations and contain clear accountability metrics. Initial training to promote health equity is being integrated into existing leadership and management meetings.

Director Gutilla stated that the health equity position had been passed in multiple budgets and had gone unfilled and expressed excitement on the progress of the definition and strategic plan.

c. Connections Electronic Health Records Implementation

Dana Turner, Health Services Director and Katie Matus, Health Services Coordinator provided an update on the Mental Health Connections program electronic health record (EHR) implementation. The new EHR system was launched on January 29, 2025. They also clarified that Connections/CAYAC programs have not been closed and that no significant changes have been made to services.

Staff highlighted that all roles intersecting with the EHR, including staff from IT, Human Resources, Compliance, and Finance were represented through a collaborative advisory committee.

Accomplishments included the successful implementation of the new EHR, enhanced patient care through standardized service definitions, Medicaid contracting with Rocky Mountain Health Plans, and data collection/infrastructure development. Challenges to implementation included unclear staff roles and service definitions, complex workflows, lack of standardized intake processes and underutilization of provider capacity.

Next steps in 2025 include developing a Client Campus, formalizing key metrics, and collecting meaningful data to improve access and quality of care. The team will continue to use change management efforts and apply lessons learned.

Director Prows thanked the staff for their time in answering his data questions during a meeting prior to the board meeting and shared that he better understood the District's data processes. He emphasized that the Board cannot meet its strategic plan of great governance, operational excellence, and equity by maintaining status quo and highlighted that documentation and data collection historically have not met minimum standards. And Dr. Prows shared examples of wait times up to nine months for patients that he personally had referred to CAYAC, expressing concern about underutilization of provider time when community need for services is high.

Director Prows expressed support for using data in the future to provide a roadmap for taxpayers to access quality services with attention to fiduciary stewardship and best practices. He also noted the significant change from prior documented clinical workflows to current streamlined workflows and

expressed his appreciation for staff for undertaking the difficult but necessary transformational progress.

Director Field expressed appreciation for the presentation and agreed that the reduction of the prior multi-page works flows to one page was a staggering transformation. She also addressed disinformation around the Health District's behavioral health services and stated that the District is keeping behavioral health programs open. She also stated that the District must rely on evidence-based outcomes as it focuses on the future challenges to public health. Director Field also acknowledged that change management challenges and moving from historical practices and standards, and turnover is not necessarily in itself a problem when staff do not align with the strategic plan.

Director McKay reported feeling conflicted about the different narratives surrounding the changes and thanked staff for the presentation, praising the clarity of the new workflows. He expressed the need to understand process improvement impact on client access. While commending the team's commitment to quality and fiscal responsibility, he shared concerns about staff retention and the impact vacancies have on client care and rebuilding the team's culture and requested further Board discussion. Director McKay also shared the commitment to quality and responsibility to the community and taxpayers and the importance of clear internal and external communications about the program's future.

Director Hottenstein shared appreciation for the presentation and recognized the significant work involved in the implementation. She also acknowledged change management challenges and emphasized the importance of maintaining quality services while improving systems and processes.

Executive Director Jollon emphasized the EHR's implementation importance for patient care, better data, access, and compliance. Executive Director Jollon shared that there is a pause in filling positions in order to ensure the organization adequately assesses community needs and options without over-committing resources. She also shared that resources would be committed to support staff through change management and communications to address misinformation around program closures.

III. Public Comment

- a. Lee Thielen - District Resident
Recognized the Health District nurses.
- b. Douglas Whitman - Salud Staff
Submitted a letter of public comment regarding the Child Adolescent Young Adult Connections (CAYAC) program.
- c. Averil Strand - District Resident
Recognized the Health District nurses.
- d. Katie McKee – District Resident
Commented on leadership and the strategic plan.
- e. Mark Cipher - Salud Staff
Commented on the CAYAC program.
- f. Andrea Nichols – District Resident
Commented on the Heart Health Promotion Program.
- g. Jake Lindas – District Resident
Commented on leadership and strategic plan.

IV. Consent Agenda

- a. January 23, 2025 – Regular Meeting Minutes.
- b. Partnership Agreement – Salud Family Health, Inc. Contract
- c. Colorado Health Institute Contract – Colorado Health Access Survey
- d. Information Technology Services – ICC Contract
- e. Board Public Policy Committee Position Ratification
 - l. HB25-1002: Medical Necessity Determination Insurance Coverage
 - ll. SB25-045: Health-Care Payment System Analysis

Motion: To approve the Consent Agenda.

Moved by Erin Hottenstein; seconded by Joseph Prows; passed unanimously.

V. Action Items

a. Partnership Agreement - SummitStone Health Partners Contract

Motion: To approve the Partnership Agreement.

Moved by Julie Kunce Field; seconded by Erin Hottenstein; John McKay recused himself; passed unanimously.

b. December 2024 Financial Statements – Unaudited

Misty Manchester, Interim Finance Director and Human Resources Director, provided an overview of the December 2024 financial statements. Executive Director Jollon shared that numerous practices were changed in the 2025 budget to foster greater transparency. The presented financial reports are formatted to align with the new budget processes, enabling improved forecasting for the coming year and continued refinement of how the organization tracks administrative costs.

Motion: To approve the December 2024 Financial Statements as unaudited.

Moved by Joseph Prows; seconded by Erin Hottenstein; passed unanimously.

c. Board Public Policy Committee – Advocacy Items

Director Erin Hottenstein provided an overview of two dental programs in the state budget, including the Medicaid Adult Dental Benefit and Colorado Senior Dental program. Given the significant budget cuts the state is facing; it was recommended that the Board strongly support the protection of these dental programs as they align with Health District priority areas.

Director Hottenstein and Deputy Director of Operations Abby Worthen shared that the Protect Our Care Colorado Coalition offers the opportunity to join a group, led by the Colorado Consumer Health Initiative, to advocate for the Affordable Care Act, Medicaid, and other health coverage programs at the federal level.

Deputy Director Worthen also shared about an advocacy opportunity, through the Colorado Children’s Campaign, to protect the Cover All Coloradans program in the state budget process. Staff recommended that the Board of Directors support joining the Protect our Care Colorado Coalition, adding the Health District as a member and participating in their sign-on and engagement options.

Motion: To strongly support the protection of the Medicaid Adult Benefit and the Senior Dental program within the state budget and support to join the Protect our Care Colorado Coalition and to add the Health District as a member and support sign on and engagement options. To support signing on to the letter to protect the Cover All Coloradans program.

Moved by Joseph Prows; seconded by John McKay; passed unanimously.

d. 2025 Board of Directors Election Update

Deputy Director of Operations Abby Worthen provided 2025 Board Election updates, noting information available on the website, the upcoming candidate orientation, polling locations, and thanked staff for their contributions to support the election. She also outlined the election communications plan and the opportunity for a Board of Director to serve as liaison.

Director Hottenstein asked about completing Absentee Ballot Request Forms online. Deputy Director Worthen explained that special districts require signatures, making fully online completion challenging, but forms could be signed, scanned, and emailed to election@healthdistrict.org.

Director McKay requested election information to share regarding the upcoming election.

Executive Director Jollon noted candidate information would be available on a sample ballot on the District's website, and that the League of Women Voters typically holds a candidate forum. Executive Director Jollon also explained the Health District would follow recommendations that governments shouldn't promote candidate's information and platforms, as candidates are responsible for their own promotion. Director Prows agreed, citing liability concerns and prior missteps.

No action taken.

e. Information Technology Services – ICC Contract

Motion: To approve the Information Technology Services - ICC Contract.

Moved by Julie Kunce Field; seconded by John McKay; passed unanimously.

VI. Reports and Discussions

a. Immigration Enforcement Protocol

Abby Worthen, Deputy Director of Operations, reported on steps taken and guidance developed for Health District staff to maintain privacy and safety for clients. She shared that Health District leadership collaborated with legal counsel and managers to develop organizational guidance and resources for potential legal immigration enforcement actions at facilities.

Director McKay inquired about signage in our facilities. Deputy Director Worthen explained that legal counsel recommended first creating a private areas policy, then developing the aligned signage.

b. Board of Directors Reports

- Molly Gutilla:
 - Supported the executive committee's role in working with the HR consultant in board self-evaluation and the Executive Director review.
 - Expressed gratitude for the strategic focus on health equity and community partner support amid federal policy and funding developments.
 - Shared enthusiasm for infrastructure improvements and the health campus and continued commitment to those items.
 - Will attend Public Health Association event in the coming week.

- Julie Kunce Field:
 - Made in-person visits to Senator Michael Bennet's and Congressman Joe Neguse's offices. Met with Rep. Neguse's Legislative Aide assigned to healthcare issues and found the in-person interaction valuable.
 - Oversaw the process with the HR consultant for the Executive Director review and the board self-evaluations.
 - Consulted with legal counsel about Board of Director training opportunities.
- Erin Hottenstein:
 - Attended the City of Fort Collins' State of the City meeting.
 - Discussed concerns about the Medicaid funding for District's dental program with State Senator Janice Marchman.
 - Received multiple communications regarding concerns around the CAYAC program and the strategic direction of the District, plus positive feedback about Larimer Health Connect.
- John McKay - No report
- Joseph Prows - No report

c. Liaison to PVHS/UCHealth North Report

John McKay - No Report

d. Board Committee Updates

- I. Executive Committee – Director Gutilla shared that there were no additional items to report.
- II. Governance Committee – Director Field thanked the staff for starting work to assess policies and the big lift to update policies and acknowledged this effort may be delayed due to a shift in priorities.
- III. Public Policy Committee – Director Hottenstein reported that the committee met to work through the recommendations presented for action.

e. Executive Director Staff Report

Liane Jollon, Executive Director, highlighted the written report and department updates within the board meeting packet, including key community meetings attended. She also highlighted meetings and planning regarding the Red Feather area community health assessment commitments to better understand their specific community health needs. She shared that recent focus has remained on internal foundation building, and in the coming months will shift externally to strengthening community partnerships. Executive Director Jollon also shared that the executive leadership team will be restructured to provide role clarity, accountability and to best align with the needs of the strategic plan. Additionally, the executive leadership team changes will be budget neutral.

Director Julie Kunce Field shared appreciation that the changes to the leadership team would prioritize customer experience, community partnerships, and organizational growth.

VII. Executive Session

At 8:26 p.m., the board went into Executive Session to consider personnel matters, pursuant to C.R.S. § 24-6-402(4)(f) and not involving: any specific employees who have requested discussion of the matter in open session; any member of this body or any elected official; the appointment of any person to

fill an office of this body or of an elected official; or personnel policies that do not require the discussion of matters personal to particular employees, concerning the Executive Director's evaluation; An executive session for legal advice, the specific nature of which cannot be disclosed without comprising the purpose for which the executive session is authorized, pursuant to C.R.S. § 24-6-402(4)(b).

VIII. Announcements

- a. March 12, 2025 - Joint Board Meeting with UCHHealth
- b. Thursday, April 24, 2025 - Next Regular Board of Directors Meeting

IX. Adjourn

Motion: To adjourn the meeting at 9:35 p.m.

Moved by Julie Kunce Field; seconded by Erin Hottenstein; passed unanimously.

**Joint Meeting of The Board of Directors
of The Health District of Northern Larimer County
and UCHealth North Poudre Valley Health System**

Minutes

Location: 2315 E. Harmony Road, Fort Collins, CO 80528 Building C, Suite 200

Date: March 12, 2025

Time: 5:30 PM

Health District Board Members Present:

Molly Gutilla, MS DrPH, Board President
Julie Kunce Field, JD, Board Vice President
John McKay, Secretary
Erin Hottenstein, Assistant Treasurer
Joeseeph Prows, MD MPH Treasurer

UCHealth/PVH Board Members Present:

Jim Parke, Chair
Faraz Naqvi, Vice Chair
Christine Chin
Chris Osborn
Mike Dellenbach
Dennis Houska
Brad Oldemeyer

I. Call to Order

Meeting called to order at 5:37 p.m.

Molly Gutilla/Jim Parke

II. Presentations

a. Health District of Northern Larimer County Updates

Executive Director, Liane Jollon, provided an update on current programming, highlighting the 2024-2025 Strategic Plan and the upcoming Health District Board of Directors Election on May 6th. No action was taken.

Liane Jollon

b. UCHealth Updates

President and CEO, UCHealth Northern Colorado, Kevin Unger, gave an overview of UCHealth, highlighting community health needs, hospital initiatives and efforts to enhance staff wellness. No action was taken.

Kevin Unger

III. Adjournment

The meeting adjourned at 6:50 p.m.

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Practice Transformation and Partnerships Contract

PRESENTER: None

OUTCOME REQUESTED: ____ Decision x Consent ____ Report

PURPOSE

Per 99-01: Contract and Expenditure Signature Policy, contracts in the amount of \$50,000 - \$150,000 require general approval of the Board of Directors and the corresponding contract or document.

BACKGROUND

The Health District of Northern Larimer County intended to begin work with Health Management Associates (HMA) to assess learnings from the Behavioral Health Electronic Health Record Implementation project to inform behavioral health practice transformation planning and to support the development of the Health District's partnership and cooperative agreements strategy. It was determined that a more comprehensive analysis of clinical and legal practices and practice management systems is needed to inform future practice transformation efforts.

As a result, the associated practice transformation amendment with Health Resource Management Associates was terminated, and staff are now seeking general approval to continue work to support partnership design and strategy consulting. This work aims to support the Health District in improving healthy equity, partnership strength, and stewardship of Health District resources by implementing evidence-based funding, community engagement strategies, and tools for continuous quality improvement.

Attachment(s)

None

FISCAL IMPACT

None – The costs for partnership strategy design and strategy consulting were factored into the 2025 budget.

STAFF RECOMMENDATION

Staff recommend the Board provide general approval to ratify the terminated amendment and the continuation of partnership design and strategy planning.

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Board Public Policy Committee Position Ratification

PRESENTER: None

OUTCOME REQUESTED: ___ Decision __x__ Consent ___ Report

PURPOSE

Board Policy 99-7 Section: POLICY, Process: *To comport with the section related to “When time does not allow for discussion at a regularly scheduled board meeting,” the Policy Committee is made up of two members of the Board who can meet at an agreed-upon cadence in order to engage in policy work between regular meetings. Per 99-7, any direction given by the Policy Committee is subject to ratification or withdrawal by the full Board at its next public meeting.*

BACKGROUND

The second meeting of the Board Public Policy Committee was held on March 24, 2025. The Committee took positions for two bills which are presented for ratification in accordance with Board Policy 99-7. The bills and positions are as follows:

- HB25-1176: Behavioral Health Treatment Stigma for Providers (Support)
- HB25-1213: Updates to Medicaid (Support)
- SB25-008: Adjust Necessary Documents Program (Support)
- SB25-017: Measures to Support Early Childhood Health (Support)

Attachment(s)

None

FISCAL IMPACT

None

STAFF RECOMMENDATION

Staff recommend the Board ratify the bill positions taken by its Public Policy Committee regarding House Bill 25-1176, House Bill 25-1213, Senate Bill 25-008 and Senate Bill 25-017 at the March 24, 2025 meeting.

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Q1 2025 Monthly Financial Statements and Reporting

PRESENTER: Misty Manchester

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

PURPOSE/ BACKGROUND

In order to monitor financial performance as a component of fulfilling the Board of Director's fiduciary responsibilities in accordance with Health District Bylaws, monthly financial reports are presented to the Board of Directors for review.

Attachment(s):

- *Financial Summary – Q1 2025*
- *Balance Sheets – Governmental Fund*
- *Statements of Net Position*
- *Statement of Activities*
- *Statement of Activities – Actual to Budget Comparison*
- *Statement of Cash Flows*

FISCAL IMPACT

None

STAFF RECOMMENDATION

Accept the financial reports as presented.

Health District

OF NORTHERN LARIMER COUNTY

Financial Reporting Package

FOR THE THREE PERIODS ENDED MARCH 31, 2025

Jessica Holmes, YPTC

COMPLETED ON | APRIL 22, 2025

TABLE OF CONTENTS

Financial Summary	1
Highlights.....	1
Financial Statements: Essential Points	1
Finance Department: Progress Updates	3
Balance Sheets – Governmental Fund	4
Reconciliation: Balance Sheets to Statements of Net Position	5
Statements of Net Position	6
Statements of Activities	7
Statements of Activities: Budget to Actual Comparison	8
Statement of Functional Expenses	9

FINANCIAL SUMMARY

HIGHLIGHTS

The Health District of Norther Larimer County had a solid financial performance for the first quarter of 2025. The organization recognized Revenues of \$5.9M and incurred Expenditures of \$3.2M resulting in a Change in Fund Balance of \$2.7M. This positive impact increased the Governmental Fund Balance to \$14.1M as of March 31st, 2025.

Fund changes by restriction level are summarized below:

Governmental Fund Balance

	December 2024	March 2025	Change
Nonspendable	94,867	123,429	28,562
Restricted	470,801	470,801	-
Assigned	7,472,610	7,472,610	-
Capital	1,232,874	1,114,465	(118,409)
Unassigned	2,118,912	4,869,967	2,751,056
	11,390,064	14,051,273	2,661,209

FINANCIAL STATEMENTS: ESSENTIAL POINTS

BALANCE SHEETS – GOVERNMENTAL FUND

- **Cash & Investments** increased by \$1.4M during the first quarter of 2025 due to cash inflows (largely property tax collections) exceeding expenses.
- **Property Taxes** Receivable decreased by \$4.0M as taxes levied were collected and disbursed to the Health District by Larimer County. This activity is also notable on the Deferred Inflows of Property Tax Resources line.
- **The Fund Balance** section shows that Nonspendable funds have increased, this is the result of additional prepaid expenses. Capital funds have decreased due to the purchase of Capital Assets. The remaining changes are rolled into Unassigned funds for future appropriation.
- **The subsequent reconciliation** of the Balance Sheets to the Statements of Net Position highlights the items and amounts that are included in the full accrual basis of accounting but excluded from governmental activities (modified accrual basis of accounting). This reconciliation is completed to tie the Fund Balance to the Net Position.

STATEMENTS OF NET POSITION

- **The Statements of Net Position** are included for informational purposes. These statements include capital assets, long-term liabilities, and accrued compensated absences that are not reported on the Governmental Fund Balance Sheets.

STATEMENTS OF ACTIVITIES

- **The Statements of Activities** outline the revenues and expenditures for the first quarter of 2025 by month and collectively.
- **Revenues:** Tax revenues accounted for 84% of total first quarter revenues. Historically the Health District sees the highest property tax collections in February, March, April, and June. As of March 31st, 2025, 43% of the taxes levied by the organization have been collected.
- **Expenditures:** Personnel Compensation is the Health District's largest expense category making up 68% of total expenses. This is slightly lower than the state and local government average in which personnel compensation accounts for 71% of expenses.

STATEMENTS OF ACTIVITIES: BUDGET TO ACTUAL COMPARISON

- **The Budget to Actual Comparison** of the Statements of Activities highlights the differences between budgeted and actual revenues and expenditures.
- **Revenues:** Overall, revenues were ahead of budget by \$210K, less than a 4% difference. This variance is largely due to fluctuations in property tax resource collections and a conservative budgeting approach to lease revenue.
- **Expenditures:** Actual expenses were below budget by \$475K, a difference to budget of about 13%.
 - While Personnel Compensation was below budget by 19%, the 2025 budget included compensation for vacant positions that are in the process of being filled. As such, this variance is not expected to continue into the remainder of the year.
 - Supplies, Equipment, & Software came in over budget due to the timing of capital purchases. Occupancy Expenses were over budget due to seasonal variances and the timing of Repair & Maintenance expenses.

STATEMENT OF FUNCTIONAL EXPENSES

- **The Statement of Functional Expenses** provides an account of revenues and expenses by functional area. Due to data limitations within the current accounting software, information cannot currently be broken out into all functional areas accurately, this report will improve with the transition to NetSuite.
- Client Experience programs (Behavioral Health, Oral Health, and Access to Care) brought in Revenues of \$473K and incurred expenses of \$1.7M.
- Strategy & Impact programs brought in Revenues of \$25K and incurred expenses of \$657K.
- Program Operations combined accounted for 8% of revenues and 74% of expenditures.
- General & Administrative functions brought in \$5.4M of Revenue (tax revenues are classified as general funds) and incurred \$835K of expenses.
 - Reminder: historically, personnel compensation for administration was allocated across all programs. That practice was not continued into 2025 to provide visibility and accuracy into programmatic expenses.
 - With the change noted above, General & Administrative expenses represented 26% of total expenditures for the first quarter.

FINANCE DEPARTMENT: PROGRESS UPDATES

COMPLETED PROJECTS

In addition to the completion of projects previously outlined in the November 2024 financial reporting package (2025 Budget Restructure, Capital Improvement Plan, Financial Reporting, Department Improvements), the below projects have also been completed:

- **Conversion to Modified Accrual** – the Health District had historically reported the use of the modified accrual basis of accounting; however, actual accounting records were not following this practice in interim financial reporting. This has been corrected allowing for accurate governmental financial statements in both interim and audited financial reports. The most notable changes that will be reflected in the Statements of Activities are the absence of depreciation and amortization expenses and the expense of capital purchases as incurred.
- **GL Account Clean Up** – every asset, liability, and fund general ledger account should be reconciled and supported. When YPTC was engaged, reconciliations and support only existed for a handful of those accounts. As of 2024 year-end, all general ledger accounts had been reconciled and supported. These reconciliations continue to be completed monthly to ensure accurate accounting and financial reporting.
- **Chart of Accounts Restructure** – The restructure of the chart of accounts has been completed and will be implemented along with NetSuite. The original chart contained over 3,400 active accounts; the new chart contains 175 accounts. This will allow for simpler transactional coding as well as improved insight into key financial areas.
- **Department Restructure** – The departments and programs utilized by the Health District in its financial reporting have been restructured to offer enhanced statements that are reflective of current strategic goals while also allowing room for future growth as the organization embarks in new priority areas.

PROJECTS IN PROGRESS & FUTURE IMPROVEMENTS

The projects listed below are in progress or slated for future completion:

- Accounting Software – Transitioning from Great Plains to NetSuite.
- Payroll Software – Transitioning from Great Plains to UKG.
- Various process improvements to amplify efficiency.
- Documentation of updated policies and procedures.
- Development and documentation of improved internal controls.

Health District

Of Northern Larimer County

Balance Sheets - Governmental Fund

As of March 31, 2025

	<u>December 2024</u>	<u>March 2025</u>	<u>Q1 2025 Change</u>
ASSETS			
Cash & Investments	11,994,048	13,388,447	1,394,399
Receivables			
Property Taxes	10,775,197	6,729,486	(4,045,711)
Specific Ownership Taxes	61,277	64,184	2,907
Clients, Net of Allowance	394,549	609,810	215,262
Leases	59,299,350	59,556,942	257,592
Grants & Other	73,933	38,042	(35,891)
Prepaid Expenses	94,867	123,429	28,562
TOTAL ASSETS	<u><u>82,693,221</u></u>	<u><u>80,510,340</u></u>	<u><u>(2,182,881)</u></u>
LIABILITIES, DEFERRED INFLOWS, & FUND BALANCE			
LIABILITIES			
Accounts Payable	228,461	277,388	(48,927)
Accrued Liabilities			
Payroll Liabilities	354,387	327,804	26,584
Treasurer Fees	(30)	13,807	(13,838)
Property Tax Escrow	40,539	10,430	30,109
Tenant Deposits	16,373	9,443	6,930
Unearned Revenue	168,765	97,707	71,058
TOTAL LIABILITIES	<u><u>808,494</u></u>	<u><u>736,579</u></u>	<u><u>71,915</u></u>
DEFERRED INFLOWS			
Property Tax Resources	10,776,854	6,039,410	4,737,444
Lease Resources	59,299,314	59,264,584	34,731
Service Resources	418,494	418,494	-
TOTAL DEFERRED INFLOWS	<u><u>70,494,662</u></u>	<u><u>65,722,488</u></u>	<u><u>4,772,174</u></u>
FUND BALANCE			
Nonspendable Funds - Prepaid Expenses	94,867	123,429	(28,562)
Restricted Funds - TABOR Reserve	470,801	470,801	-
Assigned Funds	7,472,610	7,472,610	-
Capital Funds	1,232,874	1,114,465	118,409
Unassigned Funds	2,118,912	4,869,967	(2,751,056)
TOTAL FUND BALANCE	<u><u>11,390,064</u></u>	<u><u>14,051,273</u></u>	<u><u>(2,661,209)</u></u>
TOTAL LIABILITIES, DEFERRED INFLOWS, & FUND BALANCE	<u><u>82,693,221</u></u>	<u><u>80,510,340</u></u>	<u><u>2,182,881</u></u>

Unaudited - For Management Use Only

Health District
Of Northern Larimer County

Reconciliation: Balance Sheets to Statements of Net Position

As of March 31, 2025

	<u>December 2024</u>	<u>March 2025</u>	<u>Q1 2025 Change</u>
TOTAL GOVERNMENTAL FUND BALANCE	11,390,064	14,051,273	2,661,209
Amounts Included in Statements of Net Position but excluded from Governmental Activities:			
Capital Assets, Net	9,936,025	9,956,400	20,375
Unavailable Revenues	418,494	418,494	-
Long-Term Liabilities	(117,534)	(117,534)	-
Compensated Absences	(317,233)	(317,233)	-
TOTAL NET POSITION	21,309,817	23,991,401	2,681,584

Unaudited - For Management Use Only

Health District
Of Northern Larimer County
Statements of Net Position

As of March 31, 2025

	<u>December 2024</u>	<u>March 2025</u>	<u>Q1 2025 Change</u>
ASSETS			
CURRENT ASSETS			
Cash & Investments	11,994,048	13,388,447	1,394,399
Receivables			
Property Taxes	10,775,197	6,729,486	(4,045,711)
Specific Ownership Taxes	61,277	64,184	2,907
Clients, Net of Allowance	394,549	609,810	215,262
Grants & Other	73,933	38,042	(35,891)
Prepaid Expenses	94,867	123,429	28,562
TOTAL CURRENT ASSETS	<u>23,393,871</u>	<u>20,953,398</u>	<u>(2,440,472)</u>
NON-CURRENT ASSETS			
Leases Receivable	59,299,350	59,556,942	257,592
Capital Assets			
Capital Assets, Net	9,737,338	9,717,445	(19,893)
Right to Use Assets, Net	179,966	156,602	(23,364)
Software in Development	18,721	82,353	63,632
TOTAL NON-CURRENT ASSETS	<u>69,235,375</u>	<u>69,513,342</u>	<u>277,967</u>
TOTAL ASSETS	<u>92,629,246</u>	<u>90,466,740</u>	<u>(2,162,505)</u>
LIABILITIES AND NET POSITION			
LIABILITIES			
Accounts Payable	228,461	277,388	(48,927)
Accrued Liabilities			
Payroll Liabilities	354,387	327,804	26,584
Treasurer Fees	(30)	13,807	(13,838)
Property Tax Escrow	40,539	10,430	30,109
Tenant Deposits	16,373	9,443	6,930
Unearned Revenue	168,765	97,707	71,058
Right to Use Liability (SBITAs)	117,534	117,534	-
Compensated Absences	317,233	317,233	-
Deferred Inflows			
Property Tax Resources	10,776,854	6,039,410	4,737,444
Lease Resources	59,299,314	59,264,584	34,731
TOTAL LIABILITIES	<u>71,319,429</u>	<u>66,475,339</u>	<u>4,844,089</u>
NET POSITION			
Beginning Net Position	17,510,830	21,309,817	(3,798,987)
Change in Net Position	3,798,987	2,681,584	1,117,403
TOTAL NET POSITION	<u>21,309,817</u>	<u>23,991,401</u>	<u>(2,681,584)</u>
TOTAL LIABILITIES AND NET POSITION	<u>92,629,246</u>	<u>90,466,740</u>	<u>2,162,506</u>

Unaudited - For Management Use Only

Health District
Of Northern Larimer County
Statements of Activities
For the First Quarter of 2025

	January 2025	February 2025	March 2025	Q1 2025
REVENUES				
Tax Revenues	431,812	3,727,091	754,260	4,913,163
Service Revenues, Net	109,548	109,465	131,752	350,765
Lease Revenues	115,352	117,138	113,463	345,953
Grant Funds	14,913	45,886	84,343	145,142
Other Revenues	40,935	34,796	46,685	122,417
TOTAL REVENUES	712,560	4,034,376	1,130,504	5,877,440
EXPENDITURES				
Personnel Compensation	779,912	696,217	697,127	2,173,256
Professional Development	18,833	18,939	17,278	55,049
Contracted Services	114,965	87,688	168,048	370,700
Service Expenses	43,095	56,097	37,959	137,151
Supplies, Equipment, & Software	35,108	19,637	16,165	70,910
Occupancy Expenses	93,267	47,360	12,501	153,129
Other Operating Expenses	36,268	72,530	28,829	137,627
Capital Expenditures	5,015	93,666	19,729	118,409
TOTAL EXPENDITURES	1,126,463	1,092,133	997,635	3,216,231
CHANGE IN FUND BALANCE	(413,903)	2,942,244	132,868	2,661,209
Beginning Fund Balance	11,390,064	10,976,161	13,918,404	11,390,064
ENDING FUND BALANCE	10,976,161	13,918,404	14,051,273	14,051,273

Unaudited - For Management Use Only

Health District
Of Northern Larimer County

Statements of Activities: Budget to Actual Comparison

For the First Quarter of 2025

	<u>Q1 2025 Budget</u>	<u>Q1 2025 Actual</u>	<u>\$ Difference</u>	<u>% Difference</u>	<u>2025 Budget</u>	<u>Budget \$ Remain</u>	<u>Budget % Remain</u>
REVENUES							
Tax Revenues	4,811,788	4,913,163	101,375	2.11%	11,361,432	6,448,269	56.76%
Service Revenues, Net	365,688	350,765	(14,922)	-4.08%	1,462,750	1,111,985	76.02%
Lease Revenues	292,322	345,953	53,631	18.35%	1,304,044	958,091	73.47%
Grant Funds	109,637	145,142	35,505	32.38%	394,048	248,906	63.17%
Other Revenues	88,241	122,417	34,176	38.73%	352,964	230,547	65.32%
TOTAL REVENUES	5,667,675	5,877,440	209,764	3.70%	14,875,238	8,997,798	60.49%
EXPENDITURES							
Personnel Compensation	2,688,530	2,173,256	515,274	19.17%	10,435,115	8,261,859	79.17%
Professional Development	89,406	55,049	34,356	38.43%	345,893	290,844	84.08%
Contracted Services	368,968	370,700	(1,732)	-0.47%	1,444,600	1,073,900	74.34%
Service Expenses	142,657	137,151	5,506	3.86%	1,340,129	1,202,978	89.77%
Supplies, Equipment, & Software	104,559	189,319	(84,760)	-81.06%	413,113	223,794	54.17%
Occupancy Expenses	120,624	153,129	(32,505)	-26.95%	469,461	316,332	67.38%
Other Operating Expenses	176,783	137,627	39,157	22.15%	496,902	359,275	72.30%
TOTAL EXPENDITURES	3,691,527	3,216,231	475,296	12.88%	14,945,213	11,728,982	78.48%
CHANGE IN FUND BALANCE	1,976,149	2,661,209	685,060	34.67%	(69,975)		
Beginning Fund Balance	11,390,064	11,390,064			11,390,064		
ENDING FUND BALANCE	13,366,213	14,051,273			11,320,089		

Unaudited - For Management Use Only

Health District
Of Northern Larimer County

Statement of Functional Expenses

For the First Quarter of 2025

	<u>Client Experience</u>	<u>Strategy & Impact</u>	<u>Total Program Operations</u>	<u>General & Administration</u>	<u>Health District</u>
REVENUES					
Tax Revenues	-	-	-	4,913,163	4,913,163
Service Revenues, Net	328,517	22,248	350,765	-	350,765
Lease Revenues	-	-	-	345,953	345,953
Grant Funds	142,642	2,500	145,142	-	145,142
Other Revenues	1,489	-	1,489	120,928	122,417
TOTAL REVENUES	472,648	24,748	497,396	5,380,044	5,877,440
EXPENDITURES					
Personnel Compensation	1,166,806	489,877	1,656,683	516,573	2,173,256
Professional Development	35,767	7,295	43,062	11,987	55,049
Contracted Services	202,252	76,041	278,293	92,407	370,700
Service Expenses	124,959	4,511	129,470	7,681	137,151
Supplies, Equipment, & Software	112,316	32,987	145,304	44,016	189,319
Occupancy Expenses	67,131	42,848	109,980	43,149	153,129
Other Operating Expenses	15,382	3,165	18,547	119,080	137,627
TOTAL EXPENDITURES	1,724,613	656,726	2,381,339	834,892	3,216,231
IMPACT TO FUND BALANCE	(1,251,965)	(631,978)	(1,883,943)	4,545,152	2,661,209
					11,390,064
					14,051,273

Unaudited - For Management Use Only

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Contract for Comprehensive Analysis of Clinical Practices, Legal Practices and Risk Management Services

PRESENTER: Dana Turner

OUTCOME REQUESTED: ☒ **Decision** ☐ **Consent** ☐ **Report**

PURPOSE

Per 99-01: Contract and Expenditure Signature Policy, contracts in the amount of \$50,000 - \$150,000 require general approval of the Board of Directors and the corresponding contract or document.

BACKGROUND

The Health District of Northern Larimer County (Health District) released an RFP for qualified agencies to examine historical and current behavioral health practices in order to identify areas of potential risk and provide recommendations for system improvements.

The Executive Leadership team has selected Open Minds, a certified woman-owned small business, to complete this work. Open Minds has more than 35 years' experience in behavioral health. The team has extensive knowledge in Colorado behavioral health service delivery, forensic accounting, and financial best-practices in healthcare and clinical workflows. It also has experience completing audits and compliance with clinical best practices, documentation standards, and quality management.

This assessment is in line with our strategic initiative of organizational excellence, as well as direct service staff's long-standing request for compliance support. The assessment will provide the District with recommendations on structures, processes, and standards to develop a roadmap in order to provide impactful services and continue to remain focused on continuous programmatic improvement.

Attachment(s)

None

FISCAL IMPACT

The approval of this contract will have minimal impact on the current 2025 behavioral health budget. This is due to budgeted, but unfilled, positions in the current budget. A main purpose of this assessment is to best decide how to appropriately staff programs in alignment with clinical best practices.

STAFF RECOMMENDATION

Staff recommend general approval of the Open Minds contract in support of a comprehensive analysis of clinical and legal practice and risk management systems.



AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Health District Branding

PRESENTER: Marisa Dylan

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

PURPOSE

To elevate the Health District's visual identity in line with best practices, changing needs, and strategic plan initiatives

BACKGROUND

The Health District has been in need of an updated visual identity, including a color palette and logo that reflected community, continuity, accessibility and partnerships in health care. Communications held a workshop to determine visual brand priorities and relied on the executive leadership team and other department stakeholders to evaluate logo and palette options.

Hedy & Hopp was chosen to execute this work. H&H is a women-owned and operated agency specializing in branding and creative, as well as overall marketing and communications needs, for health care organizations. They were selected for their expertise in best practices, their extensive portfolio and their prioritization on emotional connection to visual identity.

Attachment(s): None

FISCAL IMPACT

None. Associated costs were accounted for in the 2025 budget.

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: 2025 Board of Directors Election Update

PRESENTER: Jessica Shannon

OUTCOME REQUESTED: ____ Decision ____ Consent x Report

PURPOSE

Per §§1-13.5-111(1) and 32-1-103(147), C.R.S., special districts must hold regular elections on the first Tuesday after the first Monday in May in odd-numbered years for the purpose of electing Directors to the Board and, as applicable, for the submission of other ballot issues or questions.

BACKGROUND

The Designated Election Official (DEO), consultant, and staff continued efforts and election planning meetings to coordinate election duties, resources, and timeline.

Board members have been receiving regular email updates on election activities.

Progress Updates:

- **Ballot Processing and Mailing:**
 - Ballots mailed to those on the Permanent Mail-In Voters List (PMIV) on April 4th
 - Developed and documented workflow for processing Absentee Ballot Requests
 - Recruited and trained staff to support Absentee Ballot Request Forms, ensuring processing and mailing within statutory requirements.
- **Communications:**
 - Postcards mailed to households within the district
 - Ongoing multi-channel outreach; including a “Vintage Voting” message push on social media channels to promote day-of voting.
 - NPR and KUNC advertising scheduled for five days prior to the election.
 - Ads scheduled for Coloradoan and North Forty News
- **Notifications:**
 - Developed and posted required signage at polling locations.
 - Published notice in Coloradoan and DOLA in accordance with statutory deadlines.
- **Logistics:**
 - Toured all three polling places and planning for set up and day of election logistics.
 - Recruited election judges with training scheduled for April 28th.
 - Recruited Canvass Board members.
- **Polling Locations:**
 - Completed site tours and logistics planning for all three polling places.

Next Steps:

- Planning for post-election results certification and oaths of office
- After-action review of the 2025 Board of Directors Election to support future elections

Upcoming public-facing deadlines for May 2025 election:

- **April 29:** Application for absentee ballot deadline
- **May 6:** Election Day

Attachment(s): None

FISCAL IMPACT

None

STAFF RECOMMENDATION

None.

AGENDA DOCUMENTATION

Meeting Date: April 24, 2025

SUBJECT: Executive Director Report

PRESENTER: Liane Jollon

OUTCOME REQUESTED: ____ Decision ____ Consent __X__ Report

Please find the Executive Director Staff Report attached with current program updates.

• **MEETINGS**

The Executive Director met with the following community partners and attend the following meetings/events since the Feb 27, 2025 board meeting:

- Larimer County Public Health Improvement Plan (CHIP)
- Health Management Associates (HMA) Partnership Development Leadership Interview
- Frontline Public Affairs
- Kevin Unger, President and CEO - UCHealth Northern Colorado Region
- Kelly DiMartino, Fort Collins City Manager
- Cyndi Dodds, Interim CEO - SummitStone Health Partners
- John Santistevan, CEO - Salud
- Kristin Stephens, Larimer County Commissioner
- Brian Kingsley, Superintendent - Poudre School District
- Liz Davis, Senior Executive Director Student Services and Whitney Bennett-Clear, Assistant Director of Student Services - Poudre School District
- Tom Gonzales, Larimer County Public Health Director
- Dr. Janell Wozniak and Dr. Bernie Birnbaum - UCHealth Family Medicine Center
- Dr. Lesley Brooks, Chief Medical Officer - SummitStone Health Partners

• **Other Updates**

1. Board of Directors Orientation and Training Contract

- RFP in progress

2. Executive Leadership Team Optimization Update

- ELT optimization underway with an updated organization chart to follow

3. Client Campus Update

- Planning in progress

4. Fee Structure

- Efforts underway to evaluate our client fee structure process

6. Compensation

- As a reminder, the 2025 budget Included compensation increases for Support staff, Technical staff, program-level managers and professional staff. There we no increases for providers, Director-level or Executive staff. Due to current economic trends, the Board may give future consideration to mid-year increases.

Attachment(s):

- April 2025 Program Updates

Staff Summary

Family Dental Clinic

- The Dental Patient Care Specialists have initiated a more in-depth partnership with La Familia to address and remove barriers to care for patients struggling to complete dental treatment.
- On March 26, Dr. Gruba and hygienist Jadyn conducted dental screenings for 15 individuals at the Resources and Rights Fair. This community outreach event plays a key role in building trust with the Latino/a/x population and allowing the Dental Clinic to provide individualized dental care.
- The Dental Clinic has successfully resumed Medicaid billing through the work with eAssist, including the daily submissions of new claims and efforts to recover aging claims for reimbursement.
- The Dental Clinic hired a bilingual dental assistant and is actively recruiting for a front office supervisor and new lead dentist.



Organizational Excellence | Objective 2.1: Audit and update processes and workflows among programs, services, and enabling functions. **(Status: Work in Progress)**



Health Equity | Objective 1.4: Attract and employ diverse and highly qualified staff, retain staff through development and growth opportunities, and promote staff to address increasingly complex challenges. **(Status: Work in Progress)**



Health Equity | Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective, and inclusive outreach avenues. **(Status: Work in Progress)**



Partnerships | Objective 1.2: Work in collaboration with community partners to enhance shared knowledge and service-access for priority populations. **(Status: Work in Progress)**

- The Family Dental Clinic has the following vacancies:
 - 1 (1.0) FTE Dental Hygienist (currently posted)
 - 1 PRN FTE Dental Hygienist (currently posted)
 - 1 (1.0) FTE Front Office Supervisor (hiring in progress)
 - 1 (1.0) FTE Lead Dentist (currently posted)

Health Care Access

Larimer Health Connect (LHC)

- The LHC team remains dedicated to assisting individuals and families with health coverage needs, including Medicare, life change events, Medicaid and CHP+ renewals, case troubleshooting, and advocacy.
- The LHC team is planning to two health insurance literacy classes with the team: “Your Health, Your Coverage: Understanding Your Benefits.” Classes will be held at the 120 Bristlecone Office with lunch offered as well as a raffle for two \$50 gift cards to encourage attendance. Classes are offered in English and Spanish.
- LHC is working to complete the tasks for the Connect for Health Colorado contract extension. As part of this work, the LHC team is engaging with community partners to identify service gaps with the potential to maximize LHC’s support in the community.



Organizational Excellence | Strategy 2.1.3: Monitor and evaluate workflow and process changes. **(Status: Work in Progress)**



Organizational Excellence | Strategy 2.2.5: Provide staff with training and support **(Status: Work in Progress)**



Health Equity | Strategy 3.1.4: Update processes, policies, and procedures to promote inclusive and equitable access. **(Status: Work in Progress)**



Partnerships | Strategy 1.1.1: Enhance critical partnerships with new and existing partners. **(Status: Work in Progress)**

Prescription Assistance (PA)

- The Prescription Assistance (PA) program continues to help people experiencing gaps in coverage as well as people with undocumented status. Program policies and procedures are being evaluated and updated.

This work aligns with the following strategic priorities:



Great Governance | Strategy 2.1.1: Evaluate existing programs, systems, and processes, and update them for quality improvement, fiscal sustainability, and transparency, as needed. **(Status: Work in Progress)**



Health Equity | Strategy 3.1.4: Update processes, policies, and procedures to promote inclusive and equitable access. **(Status: Work in Progress)**

- The Health Care Access team currently has no vacancies.

Mental Health Connections (Connections – Adult & CAYAC)

- Mental Health Connections (MHC) team is currently undergoing a leadership transition. The Health Services Director and Health Services Project Strategist have migrated offices to the Mulberry office to provide direct support to the team.
- The single-entry referral point system in partnership with Poudre School District (PSD) and SummitStone Health Partners successfully launched as of Monday, March 31, 2025! The project is currently in its pilot phase, with plans to go fully live for the Fall 2025 school year. The cross-agency project team has received positive feedback from all partners involved in this work and have been invited by PSD to be recognized at their upcoming board of directors meeting.
- An offer has been extended to a contracted medication provider for the CAYAC program to address the current medication management caseload while MHC leadership evaluates demand and capacity for services. The provider began onboarding on Wednesday, April 9.
- MHC leadership is also searching to fill Behavioral Health Provider vacancies across the Adult and CAYAC team.
- Leadership have engaged in contracting with an agency to elevate efforts to fill current open BHP positions and obtain coverage for an upcoming maternity leave.
- After launching the new electronic health record (EHR), ICANotes, the MHC is meeting weekly to discuss data quality assurance and improvement needs. The Research and Evaluation Manager has been working diligently to analyze and organize the data since the initial launch on January 29. This provides a valuable learning opportunity for staff around the importance of reliable data collection – both for program operations and understanding patient outcomes. Ongoing at-elbow support and training are being provided to ensure that all staff members feel confident as they continue to familiarize themselves with the new system and updated workflows.



Great Governance | Strategy 2.1.1: Evaluate existing programs, systems, and processes and update them for quality improvement, fiscal sustainability and transparency as needed. **(Status: Work in Progress)**



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency. **(Status: Work in Progress)**



Organizational Excellence | Strategy 2.2.5: Provide staff with training and support. **(Status: Work in Progress)**



Partnerships | Objective 2.3: Cultivate partnerships with organizations that represent and support the interests of priority populations and health-related social needs. **(Status: Work in Progress)**

- Mental Health Connections has the following vacancies:
 - 1 (1.0) FTE CAYAC Behavioral Health Provider (sourcing)
 - 1 (1.0) FTE CAYAC Care Coordination Specialist (currently posted)
 - 1 (1.0) FTE Adult Behavioral Health Provider (sourcing)
 - 1 (0.5) FTE Adult Care Coordination Specialist (not yet posted)
 - 1 (1.0) FTE Program Manager (not yet posted)
 - 1 (1.0) FTE Operations Supervisor (not yet posted)

Integrated Care Team

- The Integrated Care (IC) Program Manager continues to work with UCHealth Family Medicine Center (FMC) and Health District administration to support a thoughtful transition for the IC Program staff towards becoming UCHealth employees.
- a
- The IC Team continues to provide support to patients and staff regarding recent federal level changes that negatively affect FMC's patient population.



Partnerships | Strategy 1.1.1: Enhance critical partnerships with new and existing partners. **(Status: Work in Progress)**



Partnerships | Strategy 1.2.1: Identify patient personas that are common between the Health District and other community partners to better understand shared-service needs. **(Status: Work in Progress)**

- The Integrated Care Team has no current vacancies.

Staff Summary

Research & Evaluation

Internal Program Evaluation

- In alignment with recommendations from Results Lab, the internal **Data Enhancement Workgroup** is advancing efforts to expand demographic data collection to better reflect the diversity of our current priority populations. Approximately 80% of core demographic questions have been finalized to support robust impact and health equity measurement. The co-design process with leadership, Family Dental Clinic Staff, and the Health Equity Strategist for the remaining data elements is ongoing. A training curriculum is in development to build staff capacity for collecting and utilizing demographic data with confidence. Training will be completed prior to piloting updated data collection procedures with dental patients.



Organizational Excellence | Strategy 4.1.2: Develop strategies, policies, and procedures to enhance data collection. **(Status: Work in Progress)**



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies. **(Status: Work in Progress)**



Health Equity | Strategy 2.2.1: Ensure equity metrics are embedded into data systems and establish benchmarks. **(Status: Work in Progress)**

Community Health Survey

- Our contract with the Colorado Health Institute (CHI) to oversample Larimer County households in the **2025 Colorado Health Access Survey** has been finalized. The survey is currently in the field, with initial response rates in Larimer County slightly ahead of target in this first phase of data collection. Data collection is planned to continue through July 2025.



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies.

(Status: Work in Progress)

Community Engagement

- We continue to co-facilitate the Regional Assessment Collaborative Health Equity Workgroup, which is focused on co-developing a regional research methodology for gathering data on priority populations across Larimer and Weld Counties. This collaborative approach aims to ensure inclusive, representative community health assessment processes that inform equitable public health strategies.



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies.

(Status: Work in Progress)



Health Equity | Strategy 2.2.1: Ensure equity metrics are embedded into data systems and establish benchmarks. (Status: Work in Progress)

Staffing Update

- Two evaluation positions remain vacant with hiring timelines under review. As revised data collection and reporting workflows are implemented, we are reassessing how to structure additional evaluation positions to support data quality assurance, analysis, and reporting.

Community Impact Team (CIT)

Behavioral Health Focus

- We provided a welcome and onboarding to the 16 new **Mental Health and Substance Use Alliance (MHSU Alliance)** Steering Committee members. Staff are preparing for the April MHSU Alliance Steering Committee meeting and drafting the six-month update on the MHSU Alliance Strategic Plan, with the goal of publishing the update in early May. The MHSU Alliance currently has nearly 80 General Members and is implementing a more regular communication infrastructure.



Organizational Excellence | Objective 3.2: Enhance the reputation of the Health District as a subject-matter expert and facilitator for collaborative work among community and state-wide partner organizations. (Status: Work in Progress)



Partnerships | Strategy 2.2.2: Improve collaboration between Health District and health care delivery systems to advance health equity. (Status: Work in Progress)

- Supporting the planning of the **Sequential Intercept Mapping (SIM)** workshop (April 29-30). This will involve up to 60 individuals and organizations who work at the intersections of criminal justice and behavioral health services to map out patient experience and gaps in care or service. Staff have successfully advocated for diverse representation from both organizations and people with lived and living experience to be involved.



Partnerships | Strategy 2.2.2: Improve collaboration between Health District and health care delivery systems to advance health equity. (Status: Work in Progress)



Partnerships | Objective 2.1: Strengthen community health impact through fostering partnerships with government entities. (Status: Work in Progress)

- Began relaunching the **Changing Minds** campaign with an internal soft launch at the March All Staff Meeting, including an update and overdose prevention training for Health District Staff. This is the start of implementing a comprehensive strategy, which will include evaluation metrics and reporting to share out impact and engagement.



Health Equity | Strategy 3.2.4: Implement strategies to enhance existing marketing and outreach efforts. (Status: Work in Progress)

- Staff are currently exploring alternative **Naloxone** access options due to changes in accessibility to the state's bulk fund.



Partnerships | Objective 1.2: Work in collaboration with community partners to enhance shared knowledge and service access for priority populations. **(Status: Work in Progress)**

Health-Related Social Needs Focus

- Strengthening relationships with the transportation and housing sectors in Larimer County to better understand the landscape and current priorities within our community.



Partnerships | Objective 2.3: Cultivate partnerships with organizations that represent and support the priority populations and health-related social needs. **(Status: Work in Progress)**

- Researching and compiling a history of Fort Collins through the lens of specific identities to inform future projects focusing on history and its impact on health outcomes.



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies. **(Status: Work in Progress)**

Outreach & Education

- Assisting in planning the City of Fort Collins Juneteenth Health & Wellness Fair (June 21) and a Spring Teen Self-Care Fair (May 4) with community partners.
- Supported and attend outreach events, focusing on reaching underserved and underrepresented groups. This includes supporting rural and non-Fort Collins based residents at the St. Patty's Day Fest in Wellington and immigrant communities through the Community Empowerment Clinic hosted by Fuerza Latina and the Interfaith Solidarity and Accompaniment Coalition (ISAAC). The Outreach Team reached over 300 people in March.



Health Equity | Objective 3.2: Enhance the visibility of Health District programs and services as a welcome resource for people with underrepresented identities. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective, and inclusive outreach avenues. **(Status: Work in Progress)**

Staffing Update

- Both the Community Impact Team and Outreach and Education are fully staffed.

Health Equity

Health Equity Strategic Plan

- We have developed a plain language **health equity definition** utilizing input from nearly 80% of staff. The definition was presented in the February Board of Directors meeting and was rolled out to staff in March through the All-Staff meeting and internal postings in buildings and InTheLoop. The definition is being rolled out externally in Spring 2025 and is the framework for the ongoing development of the 2025 Health Equity Strategic Plan.



Health Equity | Goal 1: Develop and implement a definition of health equity for the Health District. **(Status: Complete)**

- Drafting of the **2025 Health Equity Strategic Plan** has begun. Data from the Board of Directors Health Equity Survey (100% response rate), Leadership & Management Health Equity Survey (94% response rate), and the All-Staff Health Equity Survey (73% response rate) are informing the content of the plan.



Health Equity | Objective 1.1: Enhance organizational capacity to advance health equity. **(Status: Work in Progress)**



Health Equity | Objective 3.1: Develop an organizational Health Equity Strategic Plan to transform systems, practices, and policies. **(Status: Work in Progress)**

Other Cross-Functional Collaboration

- We are in the process of forming an organizational health equity workgroup, the **Health Equity Action Team (HEAT)**, with participation from all teams. The goal of this group is to involve staff in advancing health equity by creating a collaborative, flexible framework for participation that fosters inclusivity, aligns with strategic plan goals, and supports actionable solutions.



Health Equity | Goal 2: Cultivate an environment in which diverse thought and experience is welcomed, and staff knowledge of and commitment to equity is invested in. **(Status: Work in Progress)**

Policy

The staff Policy Strategy Team's recommendations for positions on bills during March were approved by the **Board Public Policy Committee (BPPC)** and will be ratified in the April Board of Directors meeting. The BPPC also received updates on the status of the state budget and the Health District's advocacy efforts.

Related to the advocacy that the Board had approved during the February meeting:

- The Joint Budget Committee (JBC) did not include any caps on the **Medicaid Adult Dental Benefit** in the state budget proposal.
- There was a proposal to reduce the **Senior Dental Program** by \$1 million but this recommendation was rejected by the JBC and the funding remains stable.
- The JBC members also rejected the recommendation to eliminate the **Cover All Coloradans** program. There remains a possibility for capping the program or reducing benefits, staff continue to monitor the situation.



Great Governance | Strategy 3.2.1: Assess local, state, and federal policies impacting the health of Health District residents and organizational operations. **(Status: Work in Progress)**

Staff Summary

- Candidates are being interviewed to fill the Budget Analyst and Accountant – Accounts Receivable positions.
- Financial consultant continues to provide support with tasks due to the vacancies on the team.



Organizational Excellence | Strategy 1.4: Attract and employ diverse and highly qualified staff, retain staff through development and growth opportunities, and promote staff to address increasingly complex challenges.



Organizational Excellence | Strategy 2.1.1: Assess operational functions of enabling services and programs.



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency.



Organizational Excellence | Strategy 2.2.5: Provide staff with training and support.

Looking forward:

- Finance is continuing to work in tandem with the Controller/Chief Financial Officer (CFO) from Your Part-Time Controller (YPTC) providing financial oversight.
- YPTC Controller/CFO, is continuing work in the following areas:
 - Assessing processes
 - Creation of financial reports
 - Internal control processes
 - Creation of Policies and Procedures



Great Governance | Goal 2: Strengthen financial management and infrastructure to enable the delivery of high-quality services and support continuity of operations. **(Status: Work in Progress)**



Great Governance | Strategy 2.1: Implement best practices to support fiscal sustainability and asset management. **(Status: Work in Progress)**

- The 2024 Audit is currently in progress.



Great Governance | Strategy 2.2: Promote fiscal sustainability, transparency, compliance, and best practices concerning all budgetary, financial, and regulatory standards. **(Status: Work in Progress)**



Organizational Excellence | Strategy 2.1.1: Assess operational functions of enabling services and programs.

- The initial phases of the cloud-based Oracle NetSuite Financial Accounting System have begun with system design in progress.



Organizational Excellence | Strategy 2.2.2: Update financial system, including technologies, policies, processes, and an Internal Controls Examination.



Great Governance | Strategy 2.2: Promote fiscal sustainability, transparency, compliance, and best practices concerning all budgetary, financial, and regulatory standards. **(Status: Work in Progress)**

Staff Summary

- HR onboarded a Clinical Care Coordination Specialist and a Care Coordination Specialist for Mental Health Connections; two internal staff members had position changes.
- Since January, eight staff members have been offboarded. This is a combination of both voluntary and involuntary terminations over four different programs.
- As of April 9th, three open positions and one PRN opening were posted.
- A contracted Psychiatrist Nurse Practitioner will begin at Mental Health Connections/CAYAC on April 21, 2025.



Organizational Excellence | Strategy 1.3.1: Assess and enhance the existing HR lifecycle

Looking forward:

- UKG implementation is under way and will provide a Human Resources Information System (HRIS)/Capital Management (HCM) system. Manager training has begun, and staff are logging their timecard information in both the new system and our current system. Parallel payrolls are being administered to ensure system accuracy before the official “Go Live” date.



Organizational Excellence | Strategy 2.3.1: Deploy a modernized IT infrastructure that enables seamless access to information and resources.



Organizational Excellence | Strategy 1.4.3: Develop the infrastructure and processes to track and monitor the training and development provided.

- Training opportunities for staff are being assessed. (Examples: Customer service, CPR, AED, etc.)



Organizational Excellence | Strategy 1.4.1: Assess and identify training and professional development needs based on input and feedback from staff.



Organizational Excellence | Strategy 1.4.2: Provide high-quality, year-round staff development and leadership training across all levels of the organization.

- Collaborative work continues with the Health Equity Strategist to attend HR meetings in order to review position descriptions and job postings for opportunities to enhance equitable language. This work aligns with both the organizational and Health Equity strategic plans.



Health Equity | Strategy 2.1: Integrate values of equity, diversity, inclusion, and justice (EDIJ) in Health District operations, practices, and partnerships.



Organizational Excellence | Strategy 1.3: Be an employer of choice in Larimer County by integrating an “excellence and equity lens into all employment process and the HR lifecycle. Assess and enhance the existing HR lifecycle.

Staff Summary

Facilities

- The team has an 90% completion rate as 26 of 29 work orders submitted, through MaintainX, in the past 30 days were completed.



Organizational Excellence | Strategy 2.3.4: Leverage analytic technology to support enhanced data-driven decision-making and operations.

- Facilities has supported the set up and needs for two election offices at 120 Bristlecone to support election operations.
- Facilities successfully implemented and facilitated the smooth transition to the all-badge door access system for staff.
- Facilities has started minor construction improvements to the 120 Bristlecone office to support final program moves to the health campus.



Organizational Excellence | Strategy 2.4: Strengthen facilities and infrastructure management to enable the delivery of high-quality services and support the continuity of operations.

- Facilities continues work to ensuring the Mulberry rental spaces are filled.
 - Facilities is in lease renewal negotiations with Sandbell, the largest tenant at 425 w. Mulberry.



Organizational Excellence | Strategy 2.4.2: Develop and implement an occupancy plan and facilities-management system.

- Facilities will manage the purchase of up to 3 new dental chairs.



Organizational Excellence | Strategy 2.4.1: Develop a capital maintenance and improvement plan to strategically plan for short-term and long-term infrastructure and capital needs.

Information Technology (IT)

- Facilities continues to work with ICC for IT consulting and support needs.
 - A total of 149 IT work orders were completed in the past 30 days.
 - A total of four new employees were onboarded with usernames, computers/laptops/workstations.
 - The purchase and negotiation of a new copier was completed.



Organizational Excellence | Strategy 2.3 Strengthen IT management and infrastructure to enable the delivery of high-quality services and support the continuity of operations.



Organizational Excellence | Strategy 2.2:1 Deploy a modernized IT infrastructure that enables seamless access to information and resources.



Organizational Excellence | Strategy 2.3.4: Leverage analytic technology to support enhanced data-driven decision-making and operations.

- Communications has made significant strides in further defining our new visual identity in collaboration with agency Hedy & Hopp. We've worked with stakeholders to best understand our core identity and differentiators. As a result, Hedy & Hopp provided three distinct visual identity directions with sample logo treatments, color palettes and typography. We're in the process of gathering feedback and refining elements.



Great Governance | Strategy 3.3.1: Update communications and brand standards. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1.1: Evaluate existing outreach efforts and effectiveness to identify needs and opportunities. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1.3: Develop a comprehensive communication strategy to be executed in 2025 **(Status: Work in Progress)**

- Communications posted an RFP for a new website in parallel with our work on brand repositioning. Approximately 30 vendors submitted proposals. We're in the process of evaluating each proposal for scopes of work prioritizing user experience (UX), intuitive site architecture, modern visual elements and WCAG (accessibility) practices.



Great Governance | Strategy 3.3.1: Update communications and brand standards. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective and inclusive outreach avenues. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1.3: Develop a comprehensive communication strategy to be executed in 2025 **(Status: Work in Progress)**

- Communications is providing ongoing marketing and communications work for comprehensive coverage of the Board election and opportunities for public participation. Efforts include social media, email, radio spots, print advertising, digital advertising, signage and web updates.



Great Governance | Strategy 3.1.3: Provide timely and accessible information through multiple channels to enhance engagement and reach priority populations and the broader community. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective and inclusive outreach avenues. **(Status: Work in Progress)**



Organizational Excellence | Objective 3.1.3: Develop a comprehensive communication strategy to be executed in 2025 **(Status: Work in Progress)**

- Communications has also continued prioritizing combating misinformation across platforms in collaboration with Hooker Strategy Partners. Our efforts have focused on misinformation narratives in the community, providing timely and accurate counter-messaging to reinforce community trust through transparency and engagement. In addition to social media and email efforts, we have created a repository of frequently asked questions and answers on our website for internal and external messaging alignment.