



## Board of Directors Regular Meeting AGENDA

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

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Date: Wednesday, October 22, 2025

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Time: 6:00 PM

**6:00 PM I. Call to Order** Erin Hottenstein

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

**6:05 PM II. Public Comment**

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

**6:10 PM III. Presentations**

No presentations are scheduled

**6:10 PM IV. Consent Agenda** Erin Hottenstein

- a. Approval of meeting minutes from 8.28.25 Regular Meeting
- b. Approval of meeting minutes from 9.24.25 Special Meeting
- c. Job Requirements for ED/CEO Position

**6:15 PM V. Action Items**

- a. Approval of Strategic Plan Erin Hottenstein
- b. Resolution 2025-13 to approve Charter for Ad Hoc Advisory Committee Erin Hottenstein
- c. Q3 2025 Financials Jessica Holmes

**6:45 PM VI. Reports and Discussions**

- a. HR1Updates
- b. Board of Director Reports
- c. Liaison to PVHS/UCHealth North Report
- d. Board Committee Updates
  - 1. ED/CEO Search
- e. Executive Committee Update
- f. Executive Director Staff Report

Dana Turner

Board

John McKay

Courtney Green

Erin Hottenstein

Courtney Green

**7:25 PM VII. Adjourn**

Erin Hottenstein



**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

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**SUBJECT:** Approval of draft minutes from August 28, 2025, meeting and the draft minutes from September 24, 2025, Special meeting.

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**PRESENTER:** Erin Hottenstein

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

**PURPOSE/ BACKGROUND**

To approve the draft minutes from August 28, 2025, meeting and the draft minutes from the September 24, 2025 Special meeting.

***Attachment(s): None.***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Approve Minutes



**Board of Directors Special Meeting  
DRAFT 8.28.25  
MINUTES**

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

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Date: Thursday, August 28, 2025

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Time: 5:30pm

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Board Members Present:	Also Present:
Erin Hottenstein, Board President	Nick Hartman- Hoffman, Parker, Wilson & Carberry, P.C
Lee Thielen, Board Vice President	Courtney Green Acting Interim Executive Director
Julie Kunce Field, Treasurer	Jessica Holmes, YPTC
Sarah Hathcock, Secretary	Misty Manchester-Director of People and Business Operations
John McKay, Liaison to PVHS/UCHealth North	Julie Kenney-HR Manager
	Jacque Ferrero-Interim Executive Assistant
	Rachel Larson-Interim Digital Media Specialist
	Katie Wheeler-Compliance Officer
	Cassi Niedziela-Health Equity Strategist

## **I. Call to Order**

- a. Roll Call Board of Directors  
With a quorum present, the meeting was called to order at 5:33 pm by Board President, Erin Hottenstein.
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement  
No conflicts were reported.
- d. Approval of Agenda  
*Motion: To approve the August 28<sup>th</sup> meeting agenda, as presented.*  
*Moved by Director Thielen, seconded by Director Hathcock, motion passes.*

## **II. PUBLIC COMMENT**

No public comment.

## **III. Presentations**

### **Health Equity Strategic Plan Presentation**

Cassi Niedziela presented the health equity strategic plan, addressing questions about community partnerships and acknowledging an extensive partner list though complete details weren't immediately available. A significant concern was raised about services being cut to Hispanic and underserved communities during the plan's development, with Niedziela referencing page 19 which outlines community embedded programs outside traditional clinic spaces. Regarding staff training and development, the organization has expanded management academy meetings from 5 to 15 minutes for equity topics and implemented new hire orientation sessions where all new employees meet with health equity staff during their first week. Program-specific trainings are being developed to address concerns that brief presentations may be insufficient for comprehensive culture change requiring robust professional development.

The discussion moved to hiring practices, where health equity questions are being embedded in all interviews with suggestions to require rather than prefer bilingual skills for positions, though this creates a slower hiring process while improving community access. Priority populations will be identified through a data-driven approach referenced on page 20, involving review of community health data resources to identify gaps and assess organizational capacity. The equitable funding model will be developed through a similar process involving the new partnerships team.

### **Compliance Department Update**

Katie Wheeler, a licensed attorney in a non-practicing role, introduced herself as the organization's first compliance officer starting in June 2024, leading a department of one tailored to the organization's specific needs. Election activities paused compliance initiatives from October through November, but she has since refocused on establishing basic duties including processing medical records requests and fostering a culture of compliance through staff training. Notable accomplishments include attending the Healthcare Compliance Academy conference and achieving 100% completion rate on the organization's first HIPAA training.

Wheeler detailed the Compliancy Group software implementation, which provides staff-facing components including a training platform, incident portal, and policies/procedures access, while admin-facing features include risk assessments, vendor/contract storage, and document management. Future plans for 2025-2026 include finalizing the compliance strategic plan, working with HR on policies and handbook updates, creating a quarterly internal compliance committee, and continuing policy revision with the governance committee.

The presentation concluded with confirmation of close coordination between compliance and health equity departments, with both working together on administrative equity practices and incident reporting systems, demonstrating organizational integration of these complementary functions.

### **Employee Engagement Survey Results**

The organization completed an anonymous employee engagement survey achieving a 76% response rate. HR generalist Alexa Kuretsky administered the survey during July 14th, revealing organizational strengths and gaps requiring trust rebuilding and improved employee support.

Four primary improvement areas emerged: increasing transparency around organizational changes; strengthening supervisor-leader support systems; developing recognition and retention strategies; and improving work environment and well-being as employees reported feeling overworked and burnt out.

Category results showed general job satisfaction but work-life balance concerns, staffing shortages and high turnover, need for clearer leadership communication, better change management, importance of advancement opportunities, and gaps between leadership intentions and frontline realities.

Open-ended responses revealed staff valued direct service work but wanted clearer role connections to program goals and better resourced infrastructure. Employees requested internal systems

improvements, transparent governance, modernized technology, organizational stability, better wages, improved PTO, and career advancement.

Next steps include sharing results through town halls, implementing stay interviews beginning January 2026, conducting follow-up survey in April, and establishing regular engagement surveys and pulse surveys.

Board members appreciated the assessment and clarified stay interviews as ongoing relationship-building conversations with emphasis on daily trust-building and regular pulse surveys rather than waiting for annual surveys.

#### **IV. Consent Agenda**

- a. June 26, 2025 - Regular Meeting Draft Minutes
- b. July 29, 2025 - Special Board Meeting Draft Minutes
- c. Forensic Audit Contract
- d. Connect for Health Colorado Contract Ratification of Policy Positions

*Motion: By Director Hottenstein to approve the consent agenda moving the Forensic Audit Contract and Policy Positions Ratification to Action items; seconded by Director Thielen; passed unanimously.*

#### **V. Action Items**

##### **Forensic Audit Contract**

Staff clarified that seven applications were received from various locations through an RFP process, and that Eide Bailey has a local office despite being headquartered in North Dakota, making them a well-regarded national firm with local presence. Three evaluators compared the applications through the standard evaluation process.

*Motion to approve the Forensic Audit Contract*

*Moved by Director Field, seconded by Director Thielen; passed unanimously.*

##### **Policy Positions Ratification**

Alyson Williams presented two policy positions that came before the board unusually late due to special session timing, when normally positions would be included in agenda documents with explanatory information. The first position involved the Personal Responsibility and Work Opportunity Reconciliation Act (PROWA) from 1996, which changed public benefits administration. A federal register notice from July proposed changes to how the law is implemented, potentially requiring immigration status considerations for federally supported programs including public health initiatives, Head Start, housing, federally qualified health centers, and community behavioral health centers that previously served all individuals regardless of immigration status.

The second position concerned Omni Salud, a state-level program providing health insurance coverage for undocumented individuals through financial assistance. The program currently serves 12,000 people, with the organization enrolling about 50 annually through Larimer Health Connect. The enrollment process operates as a first-come, first-serve lottery system that fills quickly, with spots disappearing within 24 hours in the second year. The organization wanted to ensure that program accessibility and funding wouldn't be drastically reduced during the special session, and the program was included in House Bill 256 to maintain slots in the thousands rather than reducing to 1,000-2,000 or stopping completely.

A board member asked about policy committee procedures, with Williams confirming that normally these positions would go through the policy committee via email.

Per board policy 997, if the board president responds affirmatively,

that is sufficient to move forward with policy positions that are then ratified by the full board.

*Motion to approve the Ratification of Policy Positions*

*Moved by Director Thielen, seconded by Director Hathcock; passed unanimously.*

## **Q2 2025 Financial Report**

Jessica Holmes, YPTC reported that after six months of 2025, the health district remains in strong financial position with revenues and expenditures both outperforming budget, resulting in \$6.97 million year-to-date fund balance increase. Revenue exceeded budget in all categories, with behavioral health programs falling 67% short of budgeted revenue but offset by strong oral health activities and one-time recognition of \$418,000 from previously deferred Medicaid billing. Over 95% of tax revenues have been collected by Larimer County, meaning sharp revenue decline for the remainder of the year. Total expenditures were \$752,000 under budget despite anticipated increases for planned improvements. Personal compensation represents 66% of spending (industry normal) but remains \$976,000 under budget. General administration slightly exceeded budget, but with savings in other functions, 57% of total budgeted expenses remain for the second half, indicating good trends. The district projects outperforming the 2025 budget by \$542,000, changing from a budgeted \$70,000 loss to projected \$470,000 gain.

The balance sheet shows a strong cash position, low liabilities, no loans, and unassigned fund balance of \$9.3 million expected to decrease to \$2.7 million by year end. The statement of functional expenses revealed a 72% program expense ratio and 28% administrative ratio, meaning nearly three-quarters of expenses go directly to programs. Professional development was 46% under budget due to seasonal conference timing, while service expenses exceeded budget.

During discussion, board members learned the District maintains 15 months of operating expenses on hand, which Holmes noted is high for a government agency. The District budgeted for 96-97 FTEs but currently has 67, though some positions were intentionally not budgeted. Holmes clarified regulations allow negative budgets as long as expenditures don't exceed revenues plus existing fund balance and noted this cash accumulation isn't a new issue.

*Motion to approve the Q2 2025 Financial Report*

*Moved by Director Field, seconded by Director Thielen; passed unanimously.*

## **ED/CEO Search Sub-Committee**

The Board of Directors discussed hiring an executive director for the District, which has experienced multiple leadership transitions in three years. The central debate focuses on whether to hire a permanent leader or a transitional/transformational leader for 18-24 months.

One director argued this approach would provide focused change management without the political pressures that affected previous executives. One director believes quality permanent candidates might view the position as "career suicide" given the organization's recent instability, and a transitional leader could implement necessary changes from a strategic perspective.

Other board members express concerns, worried it would negatively impact staff morale and delay the stability everyone seeks. The Board emphasized that staff need relationship-building leadership focused on trust and culture rather than just systems change. One member suggested an interim appointment instead of a full search for a short-term position.

The discussion reveals tension between needing transformational change and wanting stability.

Some argue these aren't mutually exclusive - the ideal candidate could combine change management skills with relationship-building capabilities.

Rather than rushing to decide, the board chose to gather staff input through their consulting firm, CPS. Recognizing previous hiring decisions were largely top-down, they want staff voices centered in this

process. CPS will conduct focus groups and surveys asking staff what they want in leadership and their preferences between interim, transitional, and permanent positions. The board defers the advisory subcommittee decision until after receiving staff feedback, since the type of position may influence whether community partners should participate in selection. The Board came to a consensus to defer making a decision on the type of leader and gave direction to staff to request that CPS conduct a staff survey.

### **September Special Meeting and Board Schedule for 2025**

The Board of Directors were faced with scheduling decisions for September. The board decides to hold a special meeting on September 24th focused solely on the executive director search, rather than a regular meeting with multiple agenda items. One member supports this but emphasizes keeping it focused on one topic to minimize staff workload.

The Board of Directors discussed whether to include public comment at the special meeting. While special meetings typically don't require public comment, they decide to include it since they're seeking input on the leadership search process and want to maintain their commitment to inclusive decision-making.

Administrative complexity arises around two separate resolutions: changing regular meetings from Thursdays to Wednesdays at 6:00 PM and scheduling the September 24th special meeting. There was brief discussion about accommodating schedule changes but the board proceeds with the Wednesday change.

The Board of Director's handled the resolutions procedurally by first approving the regular meeting schedule with September 24th removed, then separately scheduling a September 24<sup>th</sup> special meeting.

*Motion to have a September Special Meeting and approve the Board schedule for the remainder of 2025*

*Moved by Director Thielen, seconded by Director Hathcock; passed unanimously.*

### **Safety Deposit Boxes**

The board approves resolutions 2025-04 through 2025-09 for safety deposit box signatory access. When asked why there are multiple resolutions, staff clarify each covers a different box. There was a brief question about signature requirements that were resolved.

*Motion to approve Resolutions 2025(04-09)*

*Moved by Director Thielen, seconded by Director McKay; passed unanimously.*

### **Public Policy Committee**

The board appoints Lee Thielen and Erin Hottenstein to the public policy committee via resolution 2025-10. Thielen volunteers and Hottenstein expresses interest, while other members decline due to bandwidth constraints.

*Motion to approve Resolution 2025-10*

*Moved by Director McKay, seconded by Director Hathcock; passed unanimously.*

## **VI. Reports and Discussions**

### **HR1 Federal Policy Impact**

**Policy Changes:** HR1 affects Medicaid, CHIP, ACA, and Medicare, causing increased consumer costs, eliminated federal subsidies, reduced enrollment, and more uncompensated care demand.

**Local Impact:** Larimer County couple earning \$81,000/year will see premiums jump from \$186 to \$1,600 monthly. Projected losses: 3,500 people in Larimer County, 6,700 in Weld County.

**State Cuts:** Governor authorized \$300M additional cuts including reduced Medicaid dental rates and



pediatric behavioral therapy rates.

**District Response:**

- Staff compassion fatigue training
- Proactive coverage renewal communication
- Community partner collaboration
- Safety net referral preparation

**Partnerships:** Staff attending community meetings as listeners. School district faces \$6M cut (29 counselors). Salud limiting new uninsured patients.

**Board Requests:** Monthly updates, impact analysis framework, advocacy talking points, earlier agenda placement, public health collaboration.

**2026 Budget Process Timeline:**

- October 15: Budget distributed to board
- October 22/23: Board presentation
- November 19: Public hearing
- December: Budget adoption and mill levy setting

**Note:** Final property valuations available December 10, five days before submission deadline.

**Board of Directors Reports**

- Director Hottenstein:** Adapting through Change forum and Women of Distinction Event
- Director Hathcock:** Board cohesion development
- Director McKay:** Health Network open house, overdose awareness event
- Director Field:** Forensic audit meeting, strategic plan reflection
- Director Thielen:** League of Women Voters resource role

**Executive Director Staff Report**

Courtney Green initially planned to share highlights from program updates but decided to save time by having attendees read through all the program updates themselves instead.

Green expressed appreciation to the team for a great experience from the previous week, noting that Director McKay was missed from that session. Looking ahead, there was excitement shared about communicating future direction and plans with teams and staff, including the creation of work plans that would be shared in January.

**VII. Adjourn**

*Motion to adjourn the meeting at 9:17pm*

*Moved by Director McKay, seconded by Director Hathcock; passed unanimously.*



**Board of Directors Special Meeting  
9.24.2025**

**DRAFT MINUTES**

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

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Date: Wednesday, September 24, 2025

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Time: 6:00pm

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<b>Board Members Present:</b>	<b>Also Present:</b>
Erin Hottenstein, Board President	Elizabeth G. LeBuhn - Hoffman, Parker, Wilson & Carberry, P.C
Lee Thielen, Board Vice President	CPS- David Niemeyer and Gloria Timmons
Julie Kunce Field, Treasurer	Courtney Green - HD Chief Administrative Officer
Sarah Hathcock, Secretary	Rachel Larson-Interim Digital Media Specialist
John McKay, Liaison to PVHS/UCHealth North	Jacque Ferrero- Interim Executive Assistant

**I. Call to Order**

- a. Roll Call Board of Directors  
With a quorum present, the meeting was called to order at 6:00 pm by Board President, Erin Hottenstein.
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement  
No conflicts were reported.
- d. Approval of Agenda  
*Motion: To approve the September 24th meeting agenda, as presented.*  
*Motion by Director Thielen, seconded by Director McKay, motion passes.*

**II. Public Comment**

Public comment statement was read, and no one indicated an interest regarding public comment. Director McKay confirmed that the meeting was posted for public comment, and this was confirmed by Rachel Larson.

**III. Discussion**

The discussion began with a review of the hiring timeline with CPS (the search firm). Neimeyer provided updates on their progress since the last meeting, and Timmons presented survey results. CPS explained they would first develop recruitment materials,

but the Board of Directors needs to decide whether this will be permanent or transitional hire before they can finalize the brochure. Once that decision is made, they can complete the brochure within one week, with the remaining process taking 12 weeks. After 30 days, CPS will screen candidates and send them to the Board, then facilitate semi-final and final interviews. The timeline extends into the holiday season, which may require additional time for final considerations. CPS is ready to proceed and emphasized that candidates approaching Board members directly should be referred to CPS to maintain consistency in the process.

#### **IV. Presentations**

Timmons delivered a PowerPoint presentation about the survey results. There were questions about the number of respondents, with approximately 46 people responding, which lead to over 60% response rate. Board members sought clarification on various aspects including how options were presented to employees, leadership qualities, and other survey details.

The staff survey results showed diverse preferences regarding leadership tenure (39% preferred less than two years, 30%, 8%, and 21.74% for other ranges) and transition type, with 51.11% supporting a permanent leader while also favoring an interim leader for the next six months to establish organizational culture. When asked about leadership style, staff valued inspirational, collaborative, thoughtful, and strategic qualities, with emphasis on leadership that prioritizes employees first and demonstrates relational, steady, level-headed, and empathetic characteristics. The data showed the highest percentages split between transformational and strategic leadership styles.

The top director qualities identified were the ability to build connections and relationships (78%), followed by the ability to set a clear vision, with a significant drop-off to delegation skills, relevant familiarity, and understanding of complex financial strategies. Experience in addressing health equity received 19% support, with staff interpreting this as work with marginalized populations or people with inequitable health access. The top areas of support needed from the executive director include creating a psychologically safe and fun environment, collaborating with staff to set clear priorities, providing direct communication and appreciation, and supporting staff roles and growth opportunities. Key personal attributes desired were someone calm, level-headed, consistent, dependable, trustworthy with integrity, humble and open to corrections, collaborative, personable with a growth mindset, passionate about the work, and accountable.

During the discussion, the Board of Directors appreciated the strong survey response and emphasized keeping staff input as the primary driver.

#### **V. Action Items**

During the action items discussion, the Board addressed what type of leader they wanted to hire. Board members discussed the need for stability, with some favoring a long-term permanent position. They noted that the Executive Leadership Team has stepped up during this transitional period, providing beneficial stability. After considering that they had already had a transitional leader for six months and reviewing survey data summarized above, the Board of Directors decided to post the position as a permanent role. Regarding the permanent versus interim question, participants noted that qualities like compassion must be assessed through in-depth conversations with candidates. While 35% of respondents supported an interim position, the consensus leaned toward posting a permanent position, though Board

members wanted a few more months to ensure they were making the right decision based on staff input.

The Board then discussed forming a subcommittee to assist in the hiring process. They determined that having two Board members officially on the committee would be more manageable than having all five participate, especially since they wanted to be mindful about open meetings requirements that would kick in when more than two members meet. After discussing the previous hiring process and clarifying when the subcommittee would be involved in the various phases, they decided to create a committee with two Board members including: Director Thielen and Director Hottenstein and two staff members that include: Chief Administrative Officer, Courtney Green and Director of People & Business Operations, Misty Manchester.

*Motion to approve Resolution 2025-12. Moved by Director McKay, seconded by Hathcock, passed unanimously.*

#### **IV. Adjourn**

*A motion was presented to adjourn the meeting at 7:15pm.*

*Moved by Director Thielen, Seconded by Director Hathcock and passed unanimously.*



**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

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**SUBJECT: Job Requirements for ED/CEO Position**

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**PRESENTER:** Erin Hottenstein

**OUTCOME REQUESTED:** \_\_\_\_ Decision \_ ☒ \_ Consent \_\_\_\_ Report

**PURPOSE/ BACKGROUND**

Affirming job requirements as approved by CPS HR Consulting and the ED/CEO Search Sub-Committee on October 6, 2025.

***Attachment(s): ED/CEO Position Brochure***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Approve position brochure.





HEALTH DISTRICT OF NORTHERN LARIMER COUNTY

# Executive Director/ Chief Executive Officer

*If you have experience managing community care, want a new challenge, and live or aspire to live near the Rocky Mountains, then Larimer County in Northern Colorado is your next move. The Health District is looking for its next Executive Director/Chief Executive Officer. When you come to the Health District, you will be taking on a leadership role with the opportunity to make an impact on both individuals and the community.*



## The Area

The Fort Collins/northern Larimer County area has been ranked one of the best places to live in the U.S. by publications such as Time, Forbes, and Livability magazines. Situated in the foothills of the Rocky Mountains, the area offers a beautiful four-season climate, astonishing mountain views, and the opportunity to enjoy endless outdoor activities and a casual lifestyle. You will find great schools, low crime rates, and a high-tech economy that produces good jobs.



## The Health District

The Health District is a special tax district created by voters in 1960 to serve the health needs of the northern Larimer County region. It's a local government operating under special district laws of the State of Colorado. The boundaries of the Health District encompass the northern two-thirds of Larimer County and include the cities of Fort Collins, Laporte, Timnath, Wellington, Livermore, and Red Feather Lakes. The District is largely funded through a property tax mill levy.

The Health District provides services from a comprehensive client campus in northern Fort Collins with a state-of-the-art dental clinic and client services hub. It owns two additional office buildings – one housing administrative staff and with the other containing leased office space, for a combined portfolio of four buildings.

The Health District's 2025 budgeted services include the following:

- » Dental care services, including dental primary care services and oral health screenings
- » Behavioral health services for children, youth, and adults
- » Assistance with health insurance enrollment and plan management, and health insurance literacy

With a focus on health equity, the Health District provides direct services, as well as funding to partners, to best understand and address key barriers to health. This model allows the organization to adjust to the ever-changing challenges and opportunities that impact health and health care.

The Health District is governed by a publicly elected, five-member Board of Directors that establishes the agency's priorities, and hires and oversees the Executive Director/CEO. The Health District's 2025 budget is \$14,945,215. Programs and services are provided by 80 FTE talented and dedicated employees.

To learn more, visit [www.healthdistrict.org](http://www.healthdistrict.org).

## ■ The Position

The Executive Director/CEO provides direct leadership and oversight to a five member Executive Leadership Team and an Executive Assistant/Board Clerk. The position is responsible for day-to-day management of the organization and has the key role of setting an organizational tone that is mission-driven.

The position is a leadership role, not just internally, but also in the community. In addition, the Executive Director/CEO will stay abreast of changes at the national, state, and local level that may significantly impact community health and collaborate to develop community awareness of and support for health status improvement. Creating positive working relationships with other health, government, and not-for-profit agencies will be an important part of the Executive Director's/CEO's job.

## ■ Priorities, Initiatives, and Challenges

The Board has identified several priorities and challenges for the next Executive Director/CEO:

» The next Director should evaluate the key organizational systems and determine what needs to be adjusted.

The District recently developed and approved a 2024-27 strategic plan, focusing on four key strategic areas:

- » **Great Governance:** The 2025 budget supports this priority by providing for investment in systems and processes to ensure fiscal stewardship, open and transparent communication, and informed decision-making.
- » **Organizational Excellence:** The budget supports this priority by investing in cross-cutting functions to support continuous improvement in organizational operations, and it enables health equity, partnerships, and great governance.
- » **Health Equity:** The budget supports this priority by providing staff with the resources to improve the access, inclusivity, and reach of the Health District's programs and services through a lens of cultural humility to become a model of responsiveness and trust for the health care community.
- » **Partnerships:** The budget supports this priority by facilitating the development of innovative infrastructure for funding health-related services that involve substantial co-design of programs and outcome assessment methods.





## ■ The Ideal Candidate

The ideal candidate will have:

- » Strategic, visionary leadership skills
- » High emotional intelligence, and genuine care for the people employed and served by the Health District
- » Effective change management skills
- » Commitment to encouraging innovation and initiative
- » Excellent communication and relationship-building skills
- » Strong collaboration skills
- » High integrity and consistent professional presentation
- » Calm and thoughtful demeanor
- » Experience implementing strategic plans
- » Ability to empower employees, delegate as appropriate, and hold staff accountable
- » Direct experience working with and supporting a board of directors
- » Experience with a variety of health care models and evidence-based practices
- » Knowledge of and experience with health and mental health programs, and policies
- » Experience with community building and promoting health equity
- » Strong organizational, budget, and financial management experience, along with legal and technical acumen
- » History working with governmental entities

## ■ Education and Experience

A minimum of seven (7) years of experience in health, public health, health care, human services, or other relevant field, with at least five (5) years in a leadership role, is required.

A master's degree with major study in public health, social work, healthcare administration, human services administration, public administration, business, or related field appropriate for the Health District is preferred. An equivalent combination of education and experience will be considered, provided the individual's background demonstrates the knowledge, skills and abilities required for the position.





## ■ Compensation and Benefits

The compensation and benefits package will be competitive and negotiable depending on the experience and qualifications of the chosen candidate. The hiring range for this position is **\$183,488 - \$247,709** annually.

The position offers the following benefits:

- » 100% paid employee Medical and Dental insurance (75% paid for dependent coverage)
- » Long-Term Disability Insurance and Life Insurance
- » Intermediate paid leave benefits to eligible employees, in lieu of the State of Colorado FAMILI coverage
- » 125 Flexible Spending Account
- » 401(a) retirement plan employer match at 5% (employees contribute 3%)
- » Flexible time off with pay is available for benefit level employees to use as they choose for vacation, sick leave, or other personal needs
- » Voluntary low cost vision insurance and a 457(b) pre-tax retirement plan
- » Employee Assistance Programs (EAPs) providing up to six counseling sessions per issue
- » Federal student loan forgiveness for qualifying borrowers

We believe that diverse backgrounds and perspectives strengthen our organization, so we consider a combination of experiences to meet minimum qualifications. Experience may include related knowledge, skills, abilities, education, work, and lived/living experience.

We are committed to creating an equitable and inclusive workplace and proudly serves as an Equal Opportunity Employer. We welcome applicants from all backgrounds and ensure that all qualified candidates receive consideration for employment without regard to race, color, ethnic or national origin, ancestry, age, sex, pregnancy, disability, genetic information, veteran status, gender, marital status, sexual orientation, gender identity or expression, religion (creed), political beliefs, or any other characteristic protected by federal, state, or local laws





## ■ Application and Selection Procedure

This position is open until filled. To be considered for this exceptional career opportunity, submit your resume and cover letter by the first resume review date of **November 7, 2025**. Your resume should reflect years and months of employment, beginning / ending dates, as well as the size of staff and budgets you have managed.

Please go to our website to submit your application: [www.cpshr.us/recruitment/2526](http://www.cpshr.us/recruitment/2526)

For further information contact:

**CPS HR CONSULTING**  
*Your Trusted HR Advisor For 40 Years*

David Niemeyer  
Tel: 916-471-3326  
E-mail: [dniemeyer@cpshr.us](mailto:dniemeyer@cpshr.us)

or

Gloria Timmons  
Tel: 916-471-3461  
E-mail: [gtimmons@cpshr.us](mailto:gtimmons@cpshr.us)

Website: [www.cpshr.us/search](http://www.cpshr.us/search)

Resumes will be screened in relation to the criteria outlined in this brochure. Candidates with the most relevant qualifications will be given preliminary interviews by the consultants. The most qualified candidates will be invited for further interviews with the Health District. Final interviews and other assessment activities will be in-person sometime in early 2026. An appointment will be made by the Board of Directors following comprehensive reference and background checks.



**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

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**SUBJECT: Approval of Strategic Plan Refresh**

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**PRESENTER:** Erin Hottenstein

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

**PURPOSE/ BACKGROUND**

To approve the finalized Strategic Plan Refresh as presented.

***Attachment(s): Strategic Plan Refresh document***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Approve Strategic Plan Refresh



# Health District

FY2024–2027

**Strategic Plan**

September 2025 Refresh

# A Letter From Our Board President

Dear community members, partners, and staff:

We've completed the annual update of the Health District's 2024–2027 Strategic Plan. We've set priorities to support the health and well-being of our neighbors in Northern Larimer County.

These values-driven focus areas hold that we operate with integrity, transparency, and accountability as we reflect our population's needs in our work. We're finding new ways to engage with our community. We're modernizing infrastructures and systems to bring our plan to life most efficiently. And because we know we can't do this work alone, we're fostering partnerships so we can tackle increasingly complex health challenges together.

The strategic plan also recognizes that imbalances exist throughout health care, and progress means making sure everyone gets the care and support they deserve. That's why we're putting health equity at the center of everything we do.

We want to recognize our talented and compassionate staff in this work. They do more than treat and educate clients—they provide peace of mind each day, so families know we'll be there for them when they need us most.

The Health District has been a mainstay in Northern Larimer County for 30 years, and our strategic plan is designed to continue lifting up the community with lasting impact for years to come.

Sincerely,



Erin Hottenstein  
Health District, Board President

# Table of Contents

Letter from Board President	2
Table of Contents	3
Our Story	4
Our Mission	5
Health District Executive Summary	6
Strategic Planning Process	8
Retreat Objectives	9
Strategic Priorities Overview	10
Great Governance	11
Organizational Excellence	12
Health Equity	13
Partnerships	14
Progress Report	15
Progress and Accomplishments	16
Great Governance	17
Organizational Excellence	18
Health Equity	19
Partnerships	20
Board of Directors	21





## Our Story

The Health District is a unique district, distinguished by the diversity of services we provide and our capacity and commitment to adapting to the community's changing health needs. Our origin story is no less unique.

In the 1950s, Larimer County was struggling to keep up with the health needs of its growing community. Hospitals were overcrowded to the point that, in 1952, there were 236 days in which hospital care had to be provided in corridors. Local legislators and residents recognized the scope and severity of the problem, and in 1960, they made a successful push to create the first-ever hospital district in the state of Colorado to fund the development of Poudre Valley Memorial Hospital.

The original district boundaries, which have not changed, excluded South Larimer County, as Loveland residents were already being served by a local hospital. This is why Health District services today focus on district residents, unless outside funding is received to serve people living outside our boundaries.

The Poudre Valley Hospital District continued to operate the hospital for the next 30 years, but by the 1990s, concerns had mounted that the legal structure of the hospital district was impacting the hospital's long-term ability to effectively serve its mission. So, in 1994, the district Board voted to separate the two. A private, nonprofit entity was created to manage the hospital, and the reconfigured Health District was empowered to enhance community health.







## Our Mission

The Health District has been able to play a uniquely supportive role in bettering the health of our community residents. Rather than operating a hospital, we are able to follow through on our mission—to *enhance the health of our community*—by...

- Providing low-cost dental care to eligible residents of all ages through our Family Dental Clinic.
- Offering needs assessments, short-term counseling, and connections to local behavioral health resources through our Mental Health Connections program.
- Offering free services to help people sign up or manage their enrollment in health insurance plans through Medicaid, CHP+, or the Connect for Health Colorado Marketplace through our Larimer Health Connect Program.

In addition to these core services, we have the flexibility to introduce new forms of support to respond to emergent health needs in the community as they change with the times.

The Health District of today may be different from the hospital district our community created in 1960, and even different from the small community health team we started as in 1994. One thing that has not changed, and will not change, is the Health District's commitment to enhancing the health of Northern Larimer County and our commitment to meeting the changing needs of our community.

*Photo on this and the previous page:*

The Health District introduced a mobile unit providing basic medical services named the Health Van in 1996. The next year, Fort Collins was devastated by the Spring Creek Flood, which washed out homes, damaged infrastructure, and claimed the lives of five people. Health District staff offered first-aid services in the field with the Health Van and administered tetanus shots in hard-hit neighborhoods.



# Health District Executive Summary

## September 2025 Refresh

# Executive Summary

## September 2025 Refresh

This executive summary provides **an overview of the strategic direction** for the Health District for 2024–2027 as well as the **strategic planning process** we employed as a means of understanding and achieving our goals and objectives.



# Strategic Planning Process

## Strategic Plans

A strategic plan was created to help the Health District identify and achieve its short- and long-term goals, recognize opportunities, mitigate risks, and achieve clarity around how best to accomplish this.

A strategic plan aligns the District's resources and activities with its short- and long-term goals in order to produce the greatest impact, and provides guidance to successfully achieve the Health District's mission: *to enhance the health of our community*.

The District relies on a strategic plan to offer clarity and direction to support staff in executing strategic plan goals.

## The Planning Process

In order to develop a robust and comprehensive strategic plan, the Health District hired an outside consultant to conduct a creative, collaborative strategic planning retreat aimed at developing a strategic plan that, for the first time in the Health District's 30-year history, fully integrates all organizational functions.

*In accordance with Health District Bylaws Article V, section 1, and Board Governance Policy 97-3, the Board must approve a strategic plan annually. The 2024–2025 Health District strategic planning retreat resulted in establishing strategic priority areas, goals, and strategies to inform the budget process and guide the staff in their day-to-day operations.*

To prepare for the strategic planning retreat, the consultant conducted a discovery process that included six (6) inputs. The information collected from these inputs was used to prepare for the two-day strategic planning retreat.

## The Six Inputs

- 1 A review and assessment of existing Health District policies
- 2 Individual interviews with each Health District Board member
- 3 Six interviews with community partners (stakeholders identified by the Board)
- 4 Interviews with members of the Health District's Executive Leadership Team
- 5 Summary data from the Health District's 2022 Community Health Survey and 2023 Youth Behavioral Health Assessment, as well as from secondary sources
- 6 Management and leadership input during strategic planning retreat

The consultant spent two days (May 13–14, 2024) with the leadership and management teams to integrate them into the strategic planning process. The leadership and management teams participated in two (2) three-hour interactive workshops that covered the following topics: the strategic planning process, a review of the six inputs, Government 101, strategic public management, communication, strategic budgeting, change and transition, and connecting the strategic plan to the annual budget. The strategic planning retreat was held over the course of two days, May 15–16, 2024. On day one, participants included the Board, the Executive Director, and the Deputy Directors. The participants on day two included the Board, the Executive Director, and the Executive Leadership Team.

# Retreat Objectives

## 2024 Retreat Objectives

During the 2024 strategic planning retreat, we participated in several brainstorming exercises around our primary goal for the retreat: to obtain direction from the Board. We gained a better understanding of the why driving *what we do*, *who we are*, and *who we serve* within our community, as well as an appreciation for the many different ways in which we each contribute to making the Health District a vital community organization. We learned how centering our planning around shared strategic priorities amplifies the resonance of our mission—internally and throughout the community—and increases the impact of our work. Meaningful discussions took place and direction was provided to the staff. *In accordance with CRS 24-6-402, no formal actions were taken at the retreat.*

**For our 2024–2025 strategic planning retreat, our objectives were as follows:**

- 1 Review roles and responsibilities.
- 2 Gain an understanding of what was heard in the discovery process and interviews.
- 3 Gain recognition and consensus of where the organization is and where it wants to go.
- 4 Gain clarity and consensus on a strategic framework.
- 5 Build relationships and trust between the Board and staff.
- 6 Set a strong foundation to move the organization into the future.
- 7 Integrate staff workplans into the Board’s strategic-plan direction.

## 2025 Retreat Objectives

The 2025 Board retreat was held on August 20, 2025. The Leadership Team participated to provide the Board with a program overview and review of 2024–2025 progress and accomplishments. The 2025 refresh included four new inputs. Individual interviews with District Board of Directors, Strategic Plan questionnaires completed by the Board, a Staff Focus Group, and responses to questions related to the strategic plan as part of the 2025 Employee Engagement Survey.

The primary goal for the 2025 retreat was to update the 2024–2025 Strategic Plan, providing direction for the 2024–2027 plan.

**Our objectives for the 2025 retreat were as follows:**

- 1 Reaffirm strategic priority areas and strategic plan goals.
- 2 Simplify and clarify the plan.
- 3 Celebrate impact of 2024–2025 accomplishments and progress.

# Strategic Priorities Overview

The four strategic priorities provide a roadmap that will guide our efforts and aspirations as we carry out our mission: *to enhance the health of our community.*



# Great Governance



## STRATEGIC PRIORITIES

Great governance is essential to an impactful and high-performing organization. It is inclusive and participatory. Each process ensures fiscal stewardship, open and transparent communication, and informed decision-making.

Policies, processes, decisions, direction, and actions support accountability and responsiveness to the current and future needs of Health District residents and taxpayers.

## GOALS

- 1 Support the Health District Board of Directors to successfully carry out duties of governance and transparency.
- 2 Ensure the integrity of the Health District's financial position and provide fiscal stewardship and accountability.
- 3 Reflect community needs in the Health District's work.
- 4 Shape Health District policy to promote positive health outcomes and operational excellence.

# Organizational Excellence



## STRATEGIC PRIORITIES

Organizational excellence emphasizes the importance of the people, along with processes, technology, and systems that enable the Health District to carry out its mission: *to enhance the health of our community.*

Organizational excellence involves oversight, structures, processes, and standards to ensure that impactful and needed services are efficiently delivered using available resources. Organizational excellence focuses on the role of cross-cutting functions (communications and the Community Engagement and Health Equity teams) in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.

## GOALS

- 1 Support transparent and engaging internal communications so everyone in the organization feels seen, heard, and respected.
- 2 Strengthen infrastructure in all areas, including programs, services, finance, human resources, information technology, communications, and facilities.
- 3 Strengthen external communications strategy to promote visibility and transparency of programs and services.
- 4 Use improved data collection, analysis, and dissemination for decision-making.



# Health Equity



## STRATEGIC PRIORITIES

By implementing our health equity strategy, we'll align with and support the achievement of the Health District's mission: *to enhance the health of our community.*

Through a lens of cultural humility, we aim to improve access, inclusivity, and reach of the Health District's programs and services, and become a model of responsiveness and trust for the health care community.

## GOALS

- 1 Cultivate an environment that welcomes diverse thought and experience, and invests in staff knowledge and a commitment to equity.
- 2 Model inclusive excellence for health care partners and collaborators.
- 3 Center community voices and remove barriers to meet individual needs, helping all community members achieve their best health.



**At the Health District**, health equity means that *every person has a fair opportunity to achieve their highest level of health and well-being.*

It's our responsibility to:

- **Support total well-being:** Many factors affect overall health and well-being. We work to provide services that meet each person's needs.
- **Find and address barriers:** We work to make changes to unfair systems that create barriers to better health.
- **Center community:** Our community guides our work. Building trust and working together helps us improve health for everyone.

We're committed to our team and those we serve. We'll listen, learn, act, and keep improving.

# Partnerships



## STRATEGIC PRIORITIES

We'll cultivate broad, cross-sector partnerships to effectively address the full array of complex factors impacting community health.

## GOALS

- 1 Expand community engagement.
- 2 Build and strengthen partnerships to maximize impact on community health.
- 3 Improve collaboration between the Health District and our partners to advance health equity.
- 4 Focus on transparent and engaging external communications to build and strengthen relationships.



# Progress Report

## 2024–2025

# Progress and Accomplishments

## 2024-2025

The Health District has been partnering with Amber Blake Consulting since March 2024 to identify, achieve, and surpass short- and long-term goals that uphold our mission *to enhance the health of our community*. Guided by our four strategic priorities—**Great Governance**, **Organizational Excellence**, **Health Equity**, and **Partnerships**—we have achieved significant progress toward accomplishing these goals.

We have implemented targeted actions carefully aligned with our strategic plan through the 2025 budget process and the execution of staff work plans.

Presented here is a comprehensive report detailing the individual goals and objectives the Health District has accomplished. It is our hope that this work reflects the Health District’s commitment to enhancing the lives of Health District residents and addressing the evolving needs of our community.



# Great Governance

## Progress and Accomplishments



### GOAL 1 Prepare the Health District Board of Directors to successfully carry out duties of governance and transparency.

- ✓ Implemented a formal onboarding process for Directors elected in May 2025
- ✓ Established a comprehensive Board training program for 2024–2026
- ✓ Included legal counsel at all Board meetings to reinforce compliance and legal integrity as a special district
- ✓ Enhanced Board meeting agenda documentation to align with all relevant statutes, regulations, bylaws, policies, and strategic plan areas, ensuring compliance and more transparency

### GOAL 2 Protect the integrity of the Health District's financial position and foster fiscal stewardship and accountability.

- ✓ Transitioned to a modified accrual accounting system for fully transparent financial reporting
- ✓ Created multi-year capital equipment budgeting
- ✓ Updated internal controls for improved fiscal oversight and aligned the budget with the strategic plan
- ✓ Audited and updated financial workflows during the software implementation process

### GOAL 3 Reflect the community in the Health District's work and increase opportunities for the community to see itself in this work.

- ✓ Community Impact and Outreach & Education teams currently studying community engagement processes and outcomes to replicate successes and build in best practices
- ✓ Established brand standards to define our voice and messaging that resonate with the community's priorities, including a warm, approachable tone using plain-language principles, as well as intentional inclusivity with stories and visuals so community members can see themselves reflected and valued

# Organizational Excellence

## Progress and Accomplishments



### GOAL 1 Shape Health District policy to promote positive health outcomes and operational excellence.

- ✓ Hired a health equity strategist who has made recognized progress in integrating an equity lens into employment processes
- ✓ Migrated services to a single client campus to better serve all patient populations and increase collaboration between teams
- ✓ Co-designing and implementing improved procedures for data collection, quality assurance, and reporting within the dental program

### GOAL 2 Fortify enabling functions including Finance, Human Resources, Support Services, and Information Technology.

- ✓ Implemented human resources information system (HRIS) called UKG
- ✓ Implemented the payroll and performance management modules
- ✓ NetSuite implementation in process
- ✓ General ledger codes simplified from 5,240 to 192
- ✓ Upgraded software and hardware, including Dentrix, Windows 11, two new servers, and one new SAN (Storage Area Network)

### GOAL 3 Strengthen communications functions and strategy, both internally and externally, and promote conditions that improve visibility, organizational transparency, and use of programs and services.

- ✓ Communications implemented new project management system and ticketing system to update processes, workflows, and requests to address projects in a timely manner
- ✓ Refreshed the Health District's visual identity with updated brand logo, colors, and typography, among other assets
- ✓ Hired a compliance officer and conducted comprehensive compliance risk assessments to strengthen our operational integrity
- ✓ Started using Compliancy Group to manage and maintain incident reporting, policy/procedures, and employee education
- ✓ Refreshed the intranet and established a regular weekly cadence for sharing news, with Readership up 28% from the previous intranet version
- ✓ Greatly increased awareness efforts for the 2025 Board election through radio ads, print and digital ad buys, direct mail, and additional social media platforms
- ✓ Audited all paid marketing and began working only with vendors and outlets that can track and report quarterly on visibility metrics
- ✓ Implementing and refining a Community Relationship Management system (CRM) to build, maintain, strengthen, and better measure community relationships

### GOAL 4 Commit to using improved data collection, analysis, and dissemination for decision-making.

- ✓ Establishing a data infrastructure by making progress on standardizing data collection methods and implementing ways to find disparities to support evidence-based decision-making
- ✓ Implemented new electronic health record fully within our Mental Health Connections program

# Health Equity

## Progress and Accomplishments



### GOAL 1 Develop a health equity strategy that aligns with and supports the achievement of the Health District's mission: *to enhance the health of our community.*

- ✓ Made significant investments in building organizational capacity to advance health equity
- ✓ Hired a dedicated health equity strategist to lead these efforts
- ✓ Established and communicated the Health District's health equity definition, crafted with input from Health District staff

### GOAL 2 Cultivate an environment in which diverse thought and experience is welcomed, and staff knowledge of and commitment to equity is invested in.

- ✓ Piloted an internal workgroup, the Health Equity Action Team (HEAT), beginning January 2025
- ✓ Working with the participants to determine how best to integrate their feedback and our learnings into the final version of this workgroup
- ✓ Client services collaboration developed and piloted

### GOAL 3 Implement new strategies for high-quality and fair treatment of Health District clients and community members.

- ✓ Developed a comprehensive organizational Health Equity Strategic Plan designed to transform our systems, practices, and policies to better serve all community members
- ✓ Working with the Larimer & Weld Regional Assessment Collaborative to assess and enhance community data-collection practices to be in alignment with health equity best practices

# Partnerships

## Progress and Accomplishments



### GOAL 1



Assess partner relationships and opportunities for community engagement.

- ✓ Implementing and refining a Community Relationship Management system (CRM) to be able to build, maintain, strengthen, and better measure community relationships
- ✓ Strengthening community impact by fostering meaningful partnerships with local non-governmental organizations, especially through the work of the Mental Health and Substance Use Alliance of Larimer County
- ✓ Continued to foster strong and multi-faceted partnerships with other governmental organizations such as Poudre School District and Larimer County through work like the Mental Health and Substance Use Alliance, the behavioral health referral partnership, the Larimer County Strategic Plan implementation, and joining the consulting group for the development of the Larimer County Behavioral Health Services multi-year funding strategy and involvement with their community master plan
- ✓ Actively cultivating partnerships with organizations that represent and support the interests of under-resourced communities, making sure our joint efforts reach people who face the greatest barriers to health and wellness

### GOAL 3



Improve collaboration between the Health District and our partners to advance health equity.

- ✓ Executed funding-partnership agreements with partners with whom we have historically shared staff, such as SummitStone Health Partners, Salud, and UCHealth



# Board of Directors Health District



**Erin Hottenstein**  
President



**Lee Thielen**  
Vice President



**Julie Kunce Field**  
Treasurer



**Sarah Hathcock**  
Secretary



**John McKay**  
PVH Liaison



**We also acknowledge and thank the members of the Health District staff who were integral** in providing support and feedback in the development of this plan, as well as our community partners for your engagement, support, and participation in this process.



Health District FY2024–  
2027 Strategic Plan  
September 2025 Refresh

[www.healthdistrict.org](http://www.healthdistrict.org)

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2024–2025 Strategic Plan and 2024–2027 Plan refresh were conducted and completed by Amber Blake Consulting.



**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

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**SUBJECT: Establishing a Charter for the Ad Hoc Advisory Committee for the ED/CEO Search Process**

---

**PRESENTER:** Erin Hottenstein

**OUTCOME REQUESTED:** \_\_\_\_ Decision **X** Consent \_\_\_\_ Report

**PURPOSE/ BACKGROUND**

To establish a Charter for the Ad Hoc Advisory Committee to the search committee for its Executive Director hiring process.

***Attachment(s): Resolution 2025-13; Ad Hoc ED/CEO Search Subcommittee charter***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Staff recommend that the Board approve the Establishing Charter for the Ad Hoc Advisory Committee for the ED/CEO Search Process

**Health District of Northern Larimer County  
Resolution No. 2025-13**

**A Resolution of the Board of Directors of the Health District of Northern Larimer County Establishing a Charter for the Ad Hoc Advisory Committee to the Search Committee for its Executive Director Hiring Process**

**Whereas**, pursuant to Board Policy 01-01 (the "Policy"), the Board approved Resolution No. 25-12 on September 24, 2025, establishing an *ad hoc* Advisory Committee to the Search Committee for an Executive Director; and

**Whereas**, the Board now desires to establish a charter for the *ad hoc* Advisory Committee pursuant to Section 1 of the Policy.

**Now Therefore be it Resolved by the Board of Directors of the Health District of Northern Larimer County that:**

**Section 1.** The *ad hoc* Executive Director Search Committee Charter (the "Charter") is adopted and approved in the form attached hereto.

**Adopted this 22<sup>nd</sup> day of October, 2025.**

\_\_\_\_\_  
Erin Hottenstein, President

**Attest:**

\_\_\_\_\_  
Sarah Hathcock, Secretary



**Health District of Northern Larimer County  
Ad Hoc CEO/ED Search Committee Charter**

**Purpose**

The Ad Hoc CEO/ED Search Committee (“Committee”) is established by the Board of Directors of the Health District of Northern Larimer County (“Board”) to oversee and guide the process of recruiting, evaluating, and recommending a candidate for the position of Chief Executive Officer (CEO/ED)/Executive Director (ED). The Committee will ensure that the search process is conducted with transparency, fairness, and alignment with the Health District’s mission, values, and strategic priorities.

**Authority**

The Committee operates under the authority of the Board of Directors and is accountable to the Board. The Committee has no independent decision-making authority except as specifically delegated by the Board. Final decisions regarding the hiring and appointment of the CEO/ED shall rest with the full Board of Directors.

**Responsibilities**

The Committee shall:

1. Develop and recommend to the Board a process and timeline for conducting the CEO/ED search.
2. Determine whether to engage an external executive search firm and oversee its selection and engagement, subject to Board approval.
3. Define and recommend to the Board the desired qualifications, competencies, and attributes for the CEO/ED position.
4. Review and refine the CEO/ED job description and position profile.
5. Oversee the recruitment, screening, and evaluation of candidates in collaboration with any contracted search firm.
6. Ensure the search process reflects the Health District’s commitment to equity, inclusion, and organizational excellence.
7. Provide periodic updates to the full Board on progress and milestones throughout the search process.

**Composition**

- The Committee shall consist of two members of the Board of Directors.
- The Committee may include members of senior staff, community representatives, or consultants.



### **Meetings**

- The Committee shall meet as needed to fulfill its responsibilities, either in person or virtually.
- Updates of each meeting shall be provided to the full Board.

### **Confidentiality**

Committee members are expected to maintain strict confidentiality regarding all matters related to candidates and deliberations. Breaches of confidentiality may result in removal from the Committee.

### **Duration**

The Committee is an ad hoc body and shall dissolve automatically upon the completion of the CEO/ED search process and appointment of the new CEO/ED, unless otherwise extended by the Board.

### **Adoption**

This charter was adopted by the Board of Directors of the Health District of Northern Larimer County on [date].



**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

---

**SUBJECT: Approval of the Q3 Financial Report as presented**

---

**PRESENTER:** Jessica Holmes, YPTC

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

**PURPOSE/ BACKGROUND**

To approve the Q3 Financial Reports as presented

***Attachment(s): None.***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Approve Q3 Financial Report





# **FINANCIAL REPORTING PACKAGE**

## **FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2025**

Table of Contents

Financial Discussion & Analysis ..... 1

    Executive Summary ..... 1

    Finance Update & Disclaimer ..... 2

Financial Statements ..... 3

    Balance Sheets ..... 3

    Statements of Revenues, Expenditures, and Change in Fund Balance..... 4

    Budget Comparison: Statement of Revenues, Expenditures, and Change in Fund Balance ..... 5

# Financial Discussion & Analysis

## EXECUTIVE SUMMARY

As of September 30, 2025, the Health District remains in a strong financial position. Year-to-date revenues and expenditures have both outperformed budget expectations, resulting in a net increase to the fund balance of \$4.76M.

The chart to the right shows the fund balance change by month, and below you will find the key financial highlights.

### 2025 Fund Balance Change by Month

The fund balance has increased from \$11.39M at the end of 2024, to \$16.15M at the end of Q2 2025.



Chart: Jessica Holmes, YPTC

### Balance Sheet

- **Cash & Investments:** Increased by \$5.18M to \$17.18M
- **Receivables:** Declined due to seasonal tax collections.
- **Liabilities:** Increase due to expense accruals during software transition.
- **Deferred Inflows:** Down \$11.31M due to revenue recognition.

### Revenues

- **YTD Total:** \$14.54M
- \$721K above budget.
- **Tax Revenues** are on track, 99% collected.
- Service, Lease, and Investment Revenues are all above budget.

### Expenditures

- **YTD Total:** \$9.78M
- **Personnel Costs:** \$6.14M, 22% below budget.
- **Supplies, Equipment, & Software:** Over budget due to capital purchases.
- Expenditures are under budget by 12% overall, 35% of budgeted expenses remain.

### Programs vs General & Admin

- **Program Operation Costs:** \$7.24M 74% of total.
- **General & Admin Costs:** \$2.54M 26% of total.

## Overall

The Health District remains in a strong financial position.

## Financial

The fund balance increased by \$4.76M, ending the third quarter of 2025 at \$16.15M.

## Position

As projected, with the majority of tax revenues collected in the first half of the year, expenditures are exceeding revenues now that we are in the second half. However, strong year-to-date performance ensures the District is well-positioned to stay within its annual budget.

## FINANCE UPDATE & DISCLAIMER

The Finance Department migrated from its previous accounting software to NetSuite ERP in September 2025. While this was an important milestone in the path to providing accurate, timely, and informative financial information there is some functionality that is still in process. As such, these financial statements should be considered drafts. Significant changes are not anticipated. We appreciate your patience as we work to ensure that all data is accurate and complete.

# Health District of Northern Larimer County

## Balance Sheets

Governmental Fund Financial Statements

As of September, 30, 2025

	<u>December 2024</u>	<u>September 2025</u>	<u>YTD Change</u>
<b>ASSETS</b>			
Cash & Investments	11,994,048	17,177,808	5,183,761
Receivables			
Property Taxes	10,775,197	142,719	(10,632,478)
Specific Ownership Taxes	61,277	63,199	1,922
Clients, Net of Allowance	394,549	73,574	(320,974)
Leases	59,299,350	58,774,298	(525,052)
Grants & Other	73,933	16,446	(57,487)
Prepaid Expenses	94,867	133,225	38,358
<b>TOTAL ASSETS</b>	<b><u>82,693,221</u></b>	<b><u>76,381,270</u></b>	<b><u>(6,311,951)</u></b>
<b>LIABILITIES, DEFERRED INFLOWS, &amp; FUND BALANCE</b>			
<b>LIABILITIES</b>			
Accounts Payable	228,461	598,539	370,078
Accrued Liabilities			
Payroll Liabilities	354,387	335,713	(18,674)
Treasurer Fees	(30)	622	652
Property Tax Escrow	40,539	31,290	(9,249)
Tenant Deposits	16,373	13,972	(2,400)
Unearned Revenue	168,765	75,062	(93,703)
<b>TOTAL LIABILITIES</b>	<b><u>808,494</u></b>	<b><u>1,055,197</u></b>	<b><u>246,703</u></b>
<b>DEFERRED INFLOWS</b>			
Property Tax Resources	10,776,854	111,696	(10,665,158)
Lease Resources	59,299,314	59,068,086	(231,228)
Service Resources	418,494	-	(418,494)
<b>TOTAL DEFERRED INFLOWS</b>	<b><u>70,494,662</u></b>	<b><u>59,179,782</u></b>	<b><u>(11,314,881)</u></b>
<b>FUND BALANCE</b>			
Nonspendable Funds - Prepaid Expenses	94,867	133,225	38,358
Restricted Funds - TABOR Reserve	470,801	470,801	-
Assigned Funds	7,472,610	7,472,610	-
Capital Funds	1,232,874	853,092	(379,782)
Unassigned Funds	2,118,912	7,216,563	5,097,652
<b>TOTAL FUND BALANCE</b>	<b><u>11,390,064</u></b>	<b><u>16,146,291</u></b>	<b><u>4,756,227</u></b>
<b>TOTAL LIABILITIES, DEFERRED INFLOWS, &amp; FUND BALANCE</b>	<b><u>82,693,221</u></b>	<b><u>76,381,270</u></b>	<b><u>(6,311,951)</u></b>

The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.

Unaudited - For Management Use Only

# Health District of Northern Larimer County

## Statements of Revenues, Expenditures, & Changes in Fund Balance

Governmental Fund Financial Statements

For the Nine Months Ended September, 30, 2025

	<u>Jan to Aug 2025</u>	<u>September 2025</u>	<u>YTD 2025</u>
<b>REVENUES</b>			
Tax Revenues	11,110,462	94,222	11,204,685
Service Revenues, Net	1,224,458	61,642	1,286,100
Lease Revenues	1,102,549	115,542	1,218,091
Grant Funds	358,796	-	358,796
Other Revenues	413,052	56,203	469,255
<b>TOTAL REVENUES</b>	<b>14,209,317</b>	<b>327,610</b>	<b>14,536,927</b>
<b>EXPENDITURES</b>			
Personnel Compensation	5,559,872	576,835	6,136,707
Professional Development	140,380	17,547	157,927
Contracted Services	987,672	123,459	1,111,131
Service Expenses	732,450	91,556	824,006
Supplies, Equipment, & Software	242,527	52,825	295,352
Occupancy Expenses	337,027	42,128	379,155
Other Operating Expenses	406,995	50,874	457,869
Capital Expenditures	372,046	46,506	418,552
<b>TOTAL EXPENDITURES</b>	<b>8,778,969</b>	<b>1,001,731</b>	<b>9,780,700</b>
<b>EXCESS/(DEFICIENCY) OF REVENUES OVER EXPENDITURES</b>	<b>5,430,349</b>	<b>(674,122)</b>	<b>4,756,227</b>
<b>CHANGE IN FUND BALANCE</b>	<b>5,430,349</b>	<b>(674,122)</b>	<b>4,756,227</b>
Beginning Fund Balance	11,390,064	16,820,413	11,390,064
<b>ENDING FUND BALANCE</b>	<b>16,820,413</b>	<b>16,146,291</b>	<b>16,146,291</b>

*The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.*

Unaudited - For Management Use Only



## Health District of Northern Larimer County

### Budget Comparison: Statement of Revenues, Expenditures, & Changes in Fund Balance

Governmental Fund Financial Statements

For the Nine Months Ended September, 30, 2025

	<u>YTD Budget</u>	<u>YTD Actual</u>	<u>\$ Difference</u>	<u>% Difference</u>	<u>2025 Budget</u>	<u>Budget \$ Remain</u>	<u>Budget % Remain</u>
<b>REVENUES</b>							
Tax Revenues	11,134,584	11,204,685	70,101	0.63%	11,361,432	156,747	1.38%
Service Revenues, Net	1,097,063	1,286,100	189,038	17.23%	1,462,750	176,650	12.08%
Lease Revenues	1,012,601	1,218,091	205,489	20.29%	1,304,044	85,953	6.59%
Grant Funds	306,661	358,796	52,135	17.00%	394,048	35,252	8.95%
Other Revenues	264,723	469,255	204,532	77.26%	352,964	(116,291)	-32.95%
<b>TOTAL REVENUES</b>	<b>13,815,632</b>	<b>14,536,927</b>	<b>721,295</b>	<b>5.22%</b>	<b>14,875,238</b>	<b>338,311</b>	<b>2.27%</b>
<b>EXPENDITURES</b>							
Personnel Compensation	7,826,336	6,136,707	1,689,629	21.59%	10,435,115	4,298,408	41.19%
Professional Development	259,607	157,927	101,680	39.17%	345,893	187,966	54.34%
Contracted Services	1,083,450	1,111,131	(27,681)	-2.55%	1,444,600	333,469	23.08%
Service Expenses	812,597	824,006	(11,409)	-1.40%	1,340,129	516,123	38.51%
Supplies, Equipment, & Software	309,835	713,904	(404,070)	-130.41%	413,113	(300,791)	-72.81%
Occupancy Expenses	352,096	379,155	(27,059)	-7.69%	469,461	90,306	19.24%
Other Operating Expenses	435,862	457,869	(22,008)	-5.05%	496,902	39,033	7.86%
<b>TOTAL EXPENDITURES</b>	<b>11,079,783</b>	<b>9,780,700</b>	<b>1,299,083</b>	<b>11.72%</b>	<b>14,945,213</b>	<b>5,164,513</b>	<b>34.56%</b>
<b>CHANGE IN FUND BALANCE</b>	2,735,849	4,756,227	<b>2,020,378</b>	<b>73.85%</b>	(69,975)		
Beginning Fund Balance	11,390,064	11,390,064			11,390,064		
<b>ENDING FUND BALANCE</b>	<b>14,125,913</b>	<b>16,146,291</b>			<b>11,320,089</b>		

The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.

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**AGENDA DOCUMENTATION**

*Meeting Date: October 22, 2025*

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**SUBJECT: HR1 Update**

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**PRESENTER:** Dana Turner

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

**PURPOSE/ BACKGROUND**

As H.R. 1- One Big Beautiful Bill Act (OBBA) is beginning to be implemented, there are significant systemic changes forthcoming that will have a substantial impact on our community. This report is centered on discussing the response to impacts on the community and develop possible tactics to reduce harm in a collaborative and intentional manner.

***Attachment(s): None.***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** None.



## AGENDA DOCUMENTATION

*Meeting Date: October 22, 2025*

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**SUBJECT:** Executive Director Report

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**PRESENTER:** Courtney Green

**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 September 24, 2025 board meeting:

- SDA Conference
- Janelle Wozniak and Marcia Snook-FMC
- Tom Gonzales-with Larimer County Public Health
- Amber Blake – ABC Consulting
- Yashica Lind – The Lind Group
- Jason Olson-Eide Bailly
- Cathy Kipp-Senator and Andrew Boesnecker-State Representative HR1
- Angela Heyroth – Talent Centric Design

- **Other Updates**

- 1. **Insurance**

- Applications for property/liability, Workers Compensation, and employee medical/dental insurance have all been submitted for 2026

- 2. **All Staff Meeting - Cultivating Culture**

- Angela Heyroth, from Talent Centric Designs, spent four hours with staff to kick off the first part our culture journey. The session was dedicated to exploring and ideating on staff's desired organizational culture. Employees were able to brainstorm on what values, traditions, interactions, and behaviors they want to see at the Health District.

- 3. **Performance Management**

- Staff completed annual performance evaluations in UKG during the month of September. This was a huge milestone, as the Health District has not administered standardized evaluations in the past. In future years, the annual evaluation period will be held in July.

**Attachment(s):**

- September 2025 Program Updates

## Staff Summary

- The team is now live in Oracle NetSuite (the new accounting software) which went live on September 1<sup>st</sup>.



**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:

- We are continuing to work in tandem with the Controller/Chief Financial Officer (CFO) from Your Part-Time Controller (YPTC), providing financial oversight:
  - Assessing processes
  - Creation of financial reports
  - Internal control processes
  - Creation of Policies and Procedures
  - NetSuite Implementation
  - Budgeting process



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



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

- 2026 Budget has been the main focus. Draft budget will be sent to Board on 10/15 and work session will be held to review
- We are currently planning Oracle NetSuite training for end users of the system such as:
  - Inputting Purchase Orders
  - Running reports
- NetSuite Planning and Budgeting platform - training for Finance Team has begun.



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

## Staff Summary

- HR onboarded the Behavioral Health Senior Manager, Care Coordination Specialist, Dental Front Office Associate and Health Coverage Specialist. Offers have been extended for five positions and as of October 9, five open positions are posted, and four positions are currently in the interview phase.
- Supervisors worked with their staff and completed annual performance reviews.
- All Staff Meeting was held and began work with Angela Hayroth on culture.



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

## Looking forward:

- HR continues to work on implementing the recruitment module in UKG.
- HR is working on redesigning and refining onboarding processes



**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.

- HR is working on designing new supervisor training and creating a quarterly process for culture orientation for new staff.



**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.



**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.

- HR is continuing to work with an HR Consultant at CPS HR Consulting to revise our current handbook and HR Policies. Deliverables will be provided within the next two weeks.

## Staff Summary

### Facilities

- The team has an 89% completion rate as 41 of 46 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 successfully leased two suites at 425 w. Mulberry.
- Suite #112 – The Iris Center.
- Suite #105 – Linder Counselling.
- Facilities continues to work with our programs as they settle into the new Client Campus.
- Includes multiple office moves to better align the programs.
- Assisting in office setups for 5 new hires.



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

### Information Technology (IT)

- Facilities continues to work with ICC for IT consulting and support needs.
  - A total of 120 IT work orders have been received from staff in the past 30 days.
- HD has nearly completed updating all computers to Window 11.
- HD is in the process of ordering 10 new laptops for staff.
- HD relocated 9 staff members and fulfilled their IT needs.



**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.



## **Family Dental Clinic**

- Since joining the Family Dental Clinic team in August, the new Lead Dentist, Dr. Kelly Halligan, has launched an initiative to analyze chair utilization, a key measure of how efficiently the clinical space and time are being used for patient care. By identifying scheduling gaps and opportunities for optimization, she is working closely with the Dental Leadership team to increase efficiency and expand access, ultimately allowing the clinic to serve more patients within its existing capacity.
- In response to the ongoing national shortage of dental hygienists, the Dental Clinic renewed its contract with a temporary staffing agency, which has allowed the clinic to bring in temporary hygienists to help maintain continuity of care. This solution is helping bridge the gap in the hygiene department as the clinic continues to recruit for a permanent team member.
- The Dental Clinic has implemented new supply-ordering software to streamline the procurement process and improve inventory management; and the Dental team is completing targeted training in the dental practice management system to address financial audit recommendations, ensure accurate accounts receivable reporting, and improve daily workflow efficiency.

This work aligns with the following strategic priorities:



**Organizational Excellence | 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: Ongoing/In Progress)**



**Organizational Excellence | Strategy 2.1.2:** Develop operational plans to enhance efficiency. **(Status: Ongoing/In Progress)**

- The Family Dental Clinic has the following vacancies:
  - 1 (1.0) FTE Dental Hygienist (currently posted)
  - 1 (1.0) FTE Dental Assistant (posting in progress)

## **Health Care Access (Larimer Health Connect & Prescription Assistance)**

### **Larimer Health Connect (LHC)**

- The LHC team is now fully staffed and ready to support the community during this open enrollment season. The team is up to date on their training certifications and legislative changes, including reduced financial assistance and fewer OmniSalud slots for individuals who are undocumented. In preparation for these changes, the team will participate in Compassion Fatigue training to build tools for managing emotions and reactions they may encounter as community members face higher costs and struggle to afford coverage due to reduced financial assistance. In addition to providing education during appointments, the

team will inform customers of upcoming changes through Health Insurance Literacy classes, email newsletters, community partners and other communication channels.

- The team is currently planning schedules for open enrollment including enrollment events at a variety of partner sites to help meet customers where they are. LHC has also partnered with the Harmony Library where LHC will offer evening and weekend hours.
- Given continuous changes at the federal level, leadership is working with the team to continue to closely monitor legislative updates and funding developments from the Health Insurance Affordability Enterprise and the impacts of reduced funding for the 2026 plan year. Along the legislative lines, Health District and LHC program information will be shared at an upcoming Town Hall meeting attended by Senator Cathy Kipp and Representatives Andy Boesenecker and Yara Zokaie.
- The team continues to collaborate with the Outreach and Education team at community events, giving presentations, providing program information, and assisting with on-site enrollment when appropriate. The team also continues to visit The Family Center/La Familia and the Community Life Center monthly to answer health coverage questions and assist with applications.

This work aligns with the following strategic priorities:



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



**Organizational Excellence | Strategy 2.1.3:** Monitor and evaluate workflow and process changes. **(Status: Ongoing/In Progress)**



**Organizational Excellence | Strategy 2.2.5:** Provide staff with training and support. **(Status: Ongoing/In Progress)**



**Organizational Excellence | Strategy 3.1.1:** Evaluate existing outreach efforts and effectiveness to identify needs and opportunities. **(Status: Ongoing/In Progress)**



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



**Partnerships | Strategy 1.1.1:** Enhance critical partnerships with new and existing partners. **(Status: Ongoing/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.
- With upcoming federal changes and reduced funding for financial assistance through the Connect for Health Colorado Marketplace (beginning this upcoming open enrollment period), health insurance and prescription costs will rise, likely increasing unaffordability

for many customers, and potentially significantly increasing demand for our Prescription Assistance program.

- The team continues to explore opportunities to expand partnerships with local pharmacies to enhance patient access and offer more choices in pharmacy services for the individuals we serve.

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: Ongoing/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: Ongoing/In Progress)**

- The Health Care Access team currently has no vacancies.

### **Mental Health Connections (Connections – Adult & CAYAC)**

- The MHC team is excited to share that on Monday, 9/22/25, the new Behavioral Health Senior Manager, Keiran Bissell, joined the Mental Health Connections team. Keiran brings a wealth of experience, clinical expertise, and leadership skills to the program. The program staff were involved with the selection and hiring process, even completing a “Meet & Greet” style interview before Keiran accepted their offer. Keiran has jumped in headfirst, with rapport building as major focus in their first few weeks of onboarding.
- MHC leadership continues its search to fill open vacancies across the Adult and CAYAC teams. A sourcing and placement agency is assisting with identifying candidates to fill current open positions.
- Care Coordination Specialists from the CAYAC and Adult teams continue to support the Behavioral Health Referral Team (BHRT) partnership between SummitStone, Poudre School District (PSD), and the Health District to best serve PSD students and families seeking community behavioral health services. CAYAC Care Coordinators attended PSD Mental Health Staff meetings throughout September to provide awareness of the new, centralized referral system and answer staff questions.
- The Comprehensive Analysis of Clinical Practices, Legal Practices, and Risk Management Services, conducted in partnership with OPEN MINDS is wrapping up. The project aims to identify potential operational and legal risks and provide recommendations to align behavioral health practices with industry standards and best practices. A final report is on track to be shared with the Health District leadership team and Board of Directors at the November Board meeting. It will outline opportunities to strengthen alignment with industry

standards, best practices, and enhance compliance which will better position the program to support community members and partners.

- The MHC team is working with the Facilities team to make improvements to the 120 campus to better serve MHC clients. Improvements will include the construction of a multi-purpose family therapy space that can be reserved by staff for varying types of behavioral health sessions. MHC staff are involved with the design process, including having input on the space, furniture, and equipment needs.

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: Ongoing/In Progress)**



**Organizational Excellence | Strategy 2.4.4:** Develop a strategy for co-location and centralization of services to achieve integrated care objectives. **(Status: Ongoing/In Progress)**



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

- Mental Health Connections has the following vacancies:
  - 1 (1.0) FTE CAYAC Behavioral Health Provider (currently posted & sourcing)
  - 1 (1.0) FTE CAYAC Testing Psychologist (currently posted & sourcing)
  - 1 (1.0) FTE Adult Behavioral Health Provider (sourcing)

## DATA & ANALYTICS

### Internal Program Evaluation

- Data staff and leadership continue to provide support for the Comprehensive Analysis of Clinical Practices, Legal Practices, and Risk Management Services, conducted in partnership with OPEN MINDS.



**Organizational Excellence | Strategy 4.1.2:** Develop strategies, policies, and procedures to enhance data collection. **(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

- The Colorado Health Access Survey (CHAS), conducted by our partners at the Colorado Health Institute (CHI), has been completed. The public release of the data will be on November 19<sup>th</sup>. Leadership continues to explore analysis strategies to ensure we are well-positioned to derive meaningful, actionable insights into the health and needs of our community when the data is released later this year.



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

## COMMUNITY ENGAGEMENT PROGRAM

### Behavioral Health Focus

- To advance the unifying results statement (*All people in Larimer County across the lifespan are thriving, feel safe and resourced, and have a sense of belonging.*) the Mental Health and Substance Use (MHSU) Alliance Steering Committee adopted five key indicators in August to track progress over time. They also approved a data development agenda focused on identifying a shared community metric to monitor youth behavioral health.
- CIT Staff are working with MHSU Alliance Steering Committee Members to plan a session at the Rethinking Addiction and Recovery (RARE) Conference in October to support outreach, recruitment, and broader community engagement.
- The MHSU Alliance's first workgroup—focused on non-clinical behavioral health promotion—is meeting regularly and working toward developing locally tailored strategies. A second workgroup, centered on the coordination of care, is preparing to launch soon.
- The CIT Manager now represents the MHSU Alliance on the Opioid Abatement Advisory Group, helping advise the regional council on funding processes and support strategies.



**Organizational Excellence | Strategy 3.2.1:** Assess existing support efforts for community partnerships and partner engagement to identify

needs and opportunities. **(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)**

- In September, the CIT Manager presented findings and recommendations from the April Sequential Intercept Model (SIM) Workshop to the Board of County Commissioners. Next steps include broader community presentations and supporting action planning efforts.



**Partnerships | Objective 1.1:** Conduct system-level network mapping to determine alignment and crossover of priorities. **(Status: New Project)**

- The Changing Minds campaign has officially relaunched! The team is partnering with a local marketing firm to roll out paid placements, including digital billboards and social media ads, to drive traffic to the campaign's website and channels. Staff are also developing a strategy to further engage youth.



**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

- The pilot Health & History project is launching soon with select community partners to gather early feedback. Internal presentations are also being planned to guide project direction and ensure alignment with community priorities.



**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)**

### Outreach & Education

- Staff are working with the Mental Health Connections team to plan and prepare for the next Therapists' Network and Training (TNT) event, on November 12<sup>th</sup>. The team is finalizing the agenda and will work on outreach and communication to local behavioral health providers soon.
- The Changing Minds campaign and Health District are planning partners for the upcoming Teen Self Care Fair, which will be on October 12<sup>th</sup>. This is a key outreach event for young people and their caregivers in the community.
- The Outreach Team has wrapped up a very busy outreach season. Key events over the last few months included 13 events. In September, the Outreach Team reached approximately 451 community members.
- The Outreach Team is finalizing key materials—including an overview presentation about the Health District and an Outreach Coverage Guide—to support consistent and effective communication during tabling and outreach efforts across the Community Engagement program and broader staff.





**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)**



**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)**

### Staffing Update

- Team is fully staffed.
- The program successfully hosted a CIT Summer Intern in achieving her internship goals through mentorship and community exposure.
- The Community Engagement program hosted a relaxing retreat in September. Staff enjoyed a meal together and painted pottery at a local studio.
- As we transition into year-end planning and work plan development, leadership is encouraging staff to prioritize well-being, maintain balance, and focus on the most critical priorities to ensure a strong and sustainable close to the year.

## HEALTH EQUITY

### Health Equity Strategic Plan

- The 2025-2027 Health Equity Strategic Plan is complete. A high-level overview of the plan was shared in the September All-Staff Meeting. The health equity strategist will be attending all program team meetings throughout October and early November to provide a team-specific informational presentation. The plan is also now available in English and Spanish on the [Health District website](#).



**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: Complete)**

### Other Cross-Functional Collaboration

- The Health Equity Action Team (HEAT) pilot summary report, based on feedback from an evaluation survey, is nearing finalization. The report will include 1) a summary of the pilot experience and group's feedback, 2) recommendations from the group to address health equity communication barriers, and 3) recommendations for the team's next steps. In the pilot evaluation survey, one supervisor of a participant wrote "My staff are craving opportunities to be involved with organizational policy and action, and I thought HEAT was a great way for them to engage, interact with other team members, and provide direct input and feedback. My staff who participated really enjoyed it, and it was reported to me that the HEAT topics were refreshing and long overdue, so they really appreciated it."
- The health equity strategist led a series of *Dental Health Equity in Action* trainings to connect the dental team's work with our health equity goals. The vast majority of participants agreed that the training was a good use of their time, felt comfortable asking questions, learned something new, and found the content relevant to their role. One

participant shared that they “really appreciated the time [the health equity strategist] took to meet with each team separately — it created a more comfortable space for asking questions and made the session even more valuable.”

- The health equity strategist continues to host a health equity orientation with all new hires during their first week of employment with the Health District. This orientation serves to align on our organizational commitment to and understanding of health equity, build excitement for our health equity work, and connect the new employee’s role to our health equity goals.



**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)**

### **Community Engagement:**

- The Regional Assessment Collaborative Health Assessment **Workgroup** is co-facilitated by the Health District’s health equity strategist. This group continues to co-design improved data collection tools and questions that better reflect the needs of identified populations across Larimer and Weld Counties.



**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)**

- The health equity strategist serves as a member of the Justice, Equity, Diversity, and Inclusion (JEDI) Coalition’s core planning team. This group works to build relationships with JEDI professionals in our region and integrate a JEDI lens into county-wide initiatives.
- The health equity strategist is participating in a healing-centered engagement training cohort with other equity-focused professionals in Larimer County. The learnings from this cohort will promote collective healing and foster places and spaces of belonging across Larimer County.



**Partnerships | Goal 2:** Build and strengthen partnerships that maximize impact on community health. **(Status: Work in Progress)**

### **POLICY**

- Leadership and two Board members joined a meeting with Rep. Boesenecker and Sen. Kipp to discuss the Health District’s role in the community and the response to federal actions.
- We have started to draw out our strategy for the 2026 legislative session to maximize the contract with Frontline Public Affairs while leveraging our work with statewide partners and our presence on various coalitions and groups.



**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)**



**Great Governance | Strategy 3.2.2:** Assess and maximize the use of partnerships and support contractors to influence policies impacting the health of Health District residents. **(Status: Work in Progress)**

### **PARTNERSHIPS**

- With all of the partnership agreements completed, the Health District is excited to work with in partnership the Integrated Care team at Family Medicine Center, Salud, and SummitStone Health Partners.
- Leadership has been building a stronger network with organizations and entities that also conduct funding work, including serving on Larimer County Behavioral Health Services' small consultation group as part of their wider effort to design a multi-year funding framework.

### **Staffing Update**

- Final interviews for the Senior Partnerships Strategist are in progress.

## Staff Summary

### Work Plan

- Compliance has finished a work plan for 2026 that aligns with the organizational strategic plan to implement best practices and ensure the Health District is complying with applicable laws and regulations.



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

### Compliance Group/The Guard

- Staff are being trained in team meetings on use of the Incident Portal. Incidents are now being reported and tracked.
- Compliance Group is now being used for Cybersecurity training for new hires, with all staff slated to be on an annual cybersecurity training starting in Spring of 2026.



**Organizational Excellence | Strategy 1.4.2:** Provide high-quality, year-round staff development and leadership training across all levels of the organization. **(Status: Work in Progress)**



**Organizational Excellence | Strategy 1.2.2:** Provide staff training and support. **(Status: Work in Progress)**

- Risk assessments will be performed. This is to ensure the Health District is complying with applicable rules and laws, and following best practices. This audit is projected to roll out in 2025.



**Organizational Excellence | Strategy 2.5.3:** Assess compliance risks within and across Health District services and operations. **(Status: Work in Progress)**

### Special Projects

- Compliance is forming a Compliance Committee and identifying staff members to meet quarterly to review the Compliance Group incident portal and any other compliance issues.
- Compliance is also working with CPS HR Consulting in developing the employee handbook and developing policies and procedures.

- Compliance is meeting biweekly with the Director of Practice Innovation and Quality on contract compliance, operational compliance, and other topical issues.
- Work on BOD policies is underway with biweekly meetings and draft revisions.
- Emergency Preparedness: Compliance is working with the State and other programs on streamlining our emergency preparedness requirements.



**Organizational Excellence | Strategy 2.5.2:** Review, evaluate, and adjust policies and procedures for internal controls. **(Status: Work in Progress)**

## Communications

- Communications has extended job offers to managing editor and graphic designer candidates, and is preparing to make an offer to a digital media specialist candidate. This will make the team nearly fully staffed and able to pursue planned omnichannel promotional campaigns.
- Communications has begun working with Street Media to place awareness messaging of the HD client campus in strategic areas around Fort Collins. This includes traditional static billboards, digital billboards, and bus and bus stop signage. This is part of an effort to get the community used to seeing HD branding around town and better promote what we can offer those in need of services.
- Communications continues to strive for transparency with staff around direction and culture. Via our intranet, “In the loop,” we’re posting frequent updates around Board decisions, particularly around the hiring of an executive director/CEO, so staff feel informed about progress. We’re also posting more opportunities for direct feedback and engagement to help staff understand that we truly want and need their thoughts and preferences to move forward with a healthy culture.
- Communications has provided SWAG for outreach efforts/events to help external recognition, as well as to departments for internal buy in to the new brand. With initial orders, we’re getting a baseline of how much is needed for more accurate budgeting. (Board members will receive samples of these items.)

This work aligns with the following strategic priorities:



**Organizational Excellence | Objective 3.1:** Improve outreach to clients and Health District residents through providing diverse, effective and inclusive outreach avenues.



**Organizational Excellence | Strategy 3.1.3:** Develop a comprehensive communications strategy to be executed in 2025.



**Great Governance | Objective 3.1:** Enhance transparent and effective internal and external communications.

- Communications is ensuring that there are educational and interactive components to “In the loop,” including a trivia question weekly that asks staff to weigh in on their knowledge of health equity principles and the health equity strategic plan.

This work aligns with the following strategic priority:



**Health Equity | Objective 2.1:** Integrate values of equity, diversity inclusion and justice in Health District operations, practices and partnerships.