

Health Care Access Program Updates

Board of Directors Meeting

July 2024



Hundreds of thousands of Coloradans could lose Medicaid coverage after the COVID emergency declarations end



By John Daley · Feb. 24, 2023, 4:45 pm

NEWS: HEALTH

Colorado Medicaid is discriminating against people with disabilities, federal complaint claims

Families of people with disabilities have been receiving notices that they're no longer eligible for services, causing panic, confusion and delays



Jennifer Brown and Tatiana Flowers

4:00 AM MST on Feb 28, 2024



Why millions may be kicked off Medicaid in 2023 and what to do if you lose coverage

Health Feb 26, 2023 12:54 PM EDT

BREAKING NEWS CBI scientist's flawed DNA work was flagged years ago, internal investigation finds

NEWS > HEALTH • News

Coloradans have been losing Medicaid coverage at pre-pandemic rate following end of public health emergency

More denied because of incomplete information

What Coloradans need to know about renewing Medicaid as many face losing their coverage

As many as 325,000 people could lose Medicaid coverage in Colorado over the coming year. This guide will tell you how to navigate that.

Halfway Through 'Unwinding,' Medicaid Enrollment Is Down About 10 Million

1st Challenge: Understanding the Magnitude of PHE

Unwinding



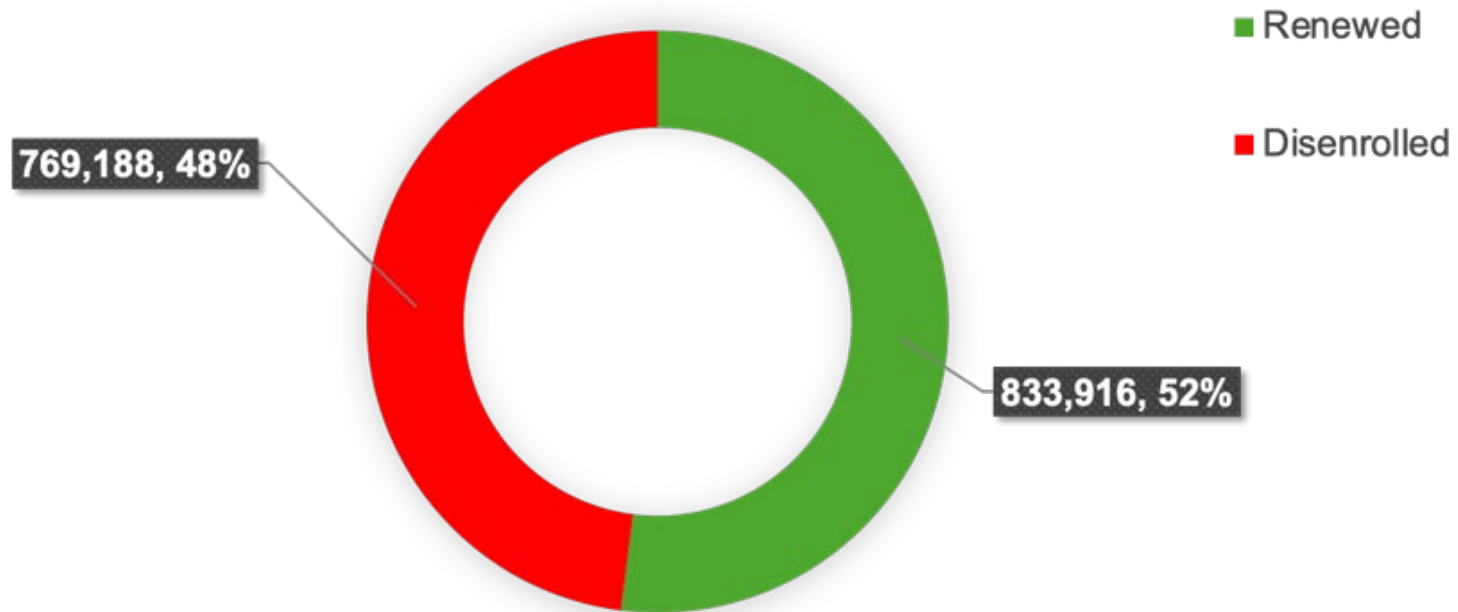
More than 1.8 million Coloradans were enrolled in Medicaid and CHP+ prior to the unwinding



Lack of resources and infrastructure on the County level

STATE DATA

Cumulative Renewal Outcomes (as of July 12, 2024) for Colorado Residents Who Were Enrolled in Medicaid/CHIP Prior to the Start of the Unwinding



2nd Challenge: Procedural Denials

PROCEDURAL & PAPERWORK-
RELATED DENIALS

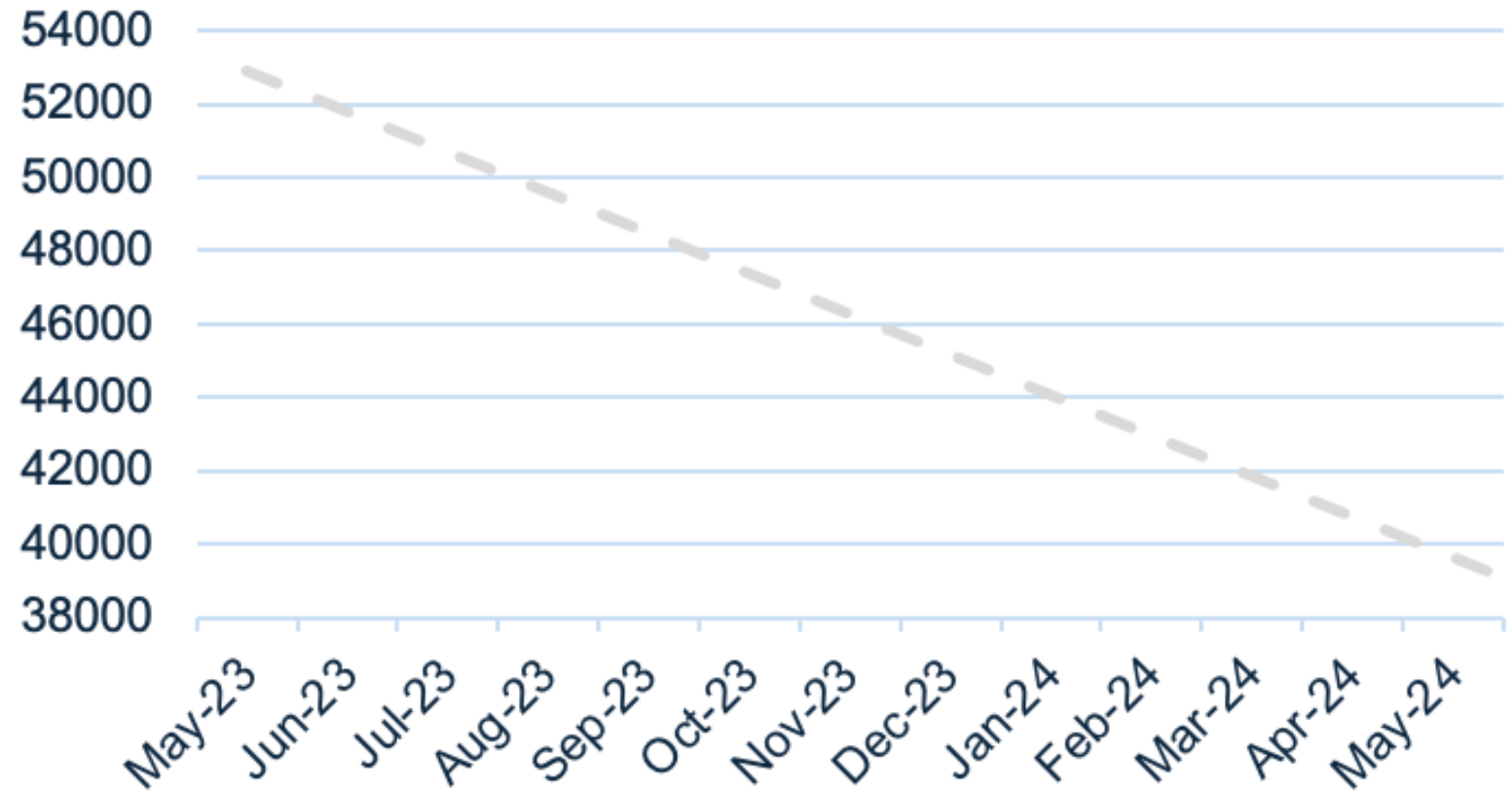
CHANGE IN ELIGIBILITY

Statewide, 66% had
coverage terminated for
procedural reasons.

COUNTY DATA

27% Net Medicaid Caseload Decline Rate for Larimer County

Larimer County Medicaid Caseload Decline



PARALLEL JOURNEYS

Clients	Staff
Accessing Care	Managing cases for members that applied early
Confusing Notifications	Contacting the County numerous times for numerous cases
Complexity of Procedural Denials	Initiation of appeals process: Wrote letters, gathered signatures, and sent to the Office of Administrative Courts

PARTNERSHIPS & KUDOS



Rocky Mountain
Health Plans



MACC (Medicaid
Accountable Care
Collaborative) Team

PHE Unwind and Renewals



Member Experience:

CCDC Listening Tour (Larimer County) Member expressed appreciation for a follow-up call offering support vs. *demanding* renewal completion.

This outreach was likely from the Health District of Northern Larimer County, a certified assister and community partner who has reached out to **2084** Members since October 2023.



Health Coverage Outreach Project



PREGÚNTENOS

Podemos ayudar con:

- Cobertura de Medicaid y CHP+
- Beneficios Dentales de Medicaid Ampliados
- Opciones de Cobertura de Salud Adicionales

Larimer Health Connect
970-472-0444



Se Habla Español

Health District
OF NORTHERN LARIMER COUNTY



**CHECK
IN**

We can help with:

- Medicaid & CHP+ Coverage
- Expanded Medicaid Dental Benefits
- Additional Health Coverage Options

Larimer Health Connect
970-472-0444



Se Habla Español

Health District
OF NORTHERN LARIMER COUNTY



PREGÚNTENOS

Revise su buzón de correo para la renovación de Medicaid.

Health District
OF NORTHERN LARIMER COUNTY



**CHECK
IN**

Need a Check Up? Check In with your Medicaid plan and make sure you've re-enrolled.

Health District
OF NORTHERN LARIMER COUNTY



PREGÚNTENOS

Cómo inscribirse en opciones asequibles de cobertura de salud médica.

El servicio es gratuito y podemos ayudarle a identificar planes de cobertura de salud y asistencia financiera.

Larimer Health Connect
970-472-0444



Se Habla Español



CHECK IN

to affordable health coverage options.



PREGÚNTENOS

Cómo inscribirse en opciones asequibles de cobertura de salud médica.

APRENDE MÁS



CHECK IN

to affordable health coverage options. We can help!

The service is free and we can help you identify health coverage plans and financial assistance.

Larimer Health Connect
970-472-0444



Se Habla Español



Connect for Health Colorado - Open Enrollment Campaign

Timeline: Oct. 15, 2023 – Jan. 15, 2024 | ~1.4 Million Total Impressions

Medicaid Unwinding – Public Awareness Campaign

Timeline: Oct. 15, 2023 – May 31, 2024 | ~3.9 Million Total Impressions

Google Ads

Organic Social
Media

Posters

Community
Kits

Banners

Client Video
Testimonials

Local Digital
Ads

Paid Social
Media

Flyers

Radio Ads

Billboard
Ads



IMPACT

Campaign Period: October 2023 - May 2024



26% increase in appointments at Larimer Health Connect



4,271 people reached directly from RMHP member list



945 appointments were completed during the Open Enrollment Period



12% increase in marketplace enrollments



LHC was able to connect folks with the health care coverage they were eligible for



Increase in need for prescription assistance

PLANNING AHEAD

Maximizing options for our undocumented community members

- OmniSalud Program
- Cover All Coloradans



Why a Denver-area community health center is merging with a mental health care provider

The merger between Clinica Family Health and Mental Health Partners — both nonprofits — is about creating financial sustainability and improving access to the spectrum of health care services

NEWS > HEALTH • News

Colorado clinics, mental health providers are seeing more uninsured patients — and they're worried that's the new normal

Patients removed from Medicaid after COVID public health emergency ended are struggling to find coverage

U.S.

Nearly 1 in 4 adults dumped from Medicaid are now uninsured, survey finds

By Phil Galewitz
April 12, 2024 / 5:00 AM EDT / KFF Health News



Systemic failure in Colorado's PHE Unwind

[Community Insight](#), [COVID-19](#), [Health](#), [Legal Advocacy](#)

Survey: 1 in 5 disenrolled from Medicaid since last April

🕒 Apr 15, 2024 - 03:52 PM

MONEYWATCH

Safety-net health clinics cut services and staff amid Medicaid unwinding

MONEY WATCH

May 30, 2024 / 11:06 AM EDT / KFF Health News



BREAKING NEWS Environmental groups to sue Suncor over repeated air pollution violations, saying Colorado has failed to regulate refinery



NEWS > HEALTH • News

Colorado's community health centers are struggling financially as patients lose Medicaid coverage

Revenue for treating uninsured hasn't increased as Colorado see 30% drop

Facing the facts: Advocates present to the JBC on glitch-plagued PHE Unwind

[Community Insight](#), [COVID-19](#), [Equity work](#), [Family Economic Security](#), [Health](#), [News](#), [Research and Policy Analysis](#)

Thank you!



Dental/Oral Health Updates

Board of Directors Meeting

July 2024



Strategic Plan Objectives



PARTNERSHIP
EXPANSION



CAPACITY BUILDING



COMMUNITY
ENGAGEMENT

Partnership Expansion & Recent Outreach Events

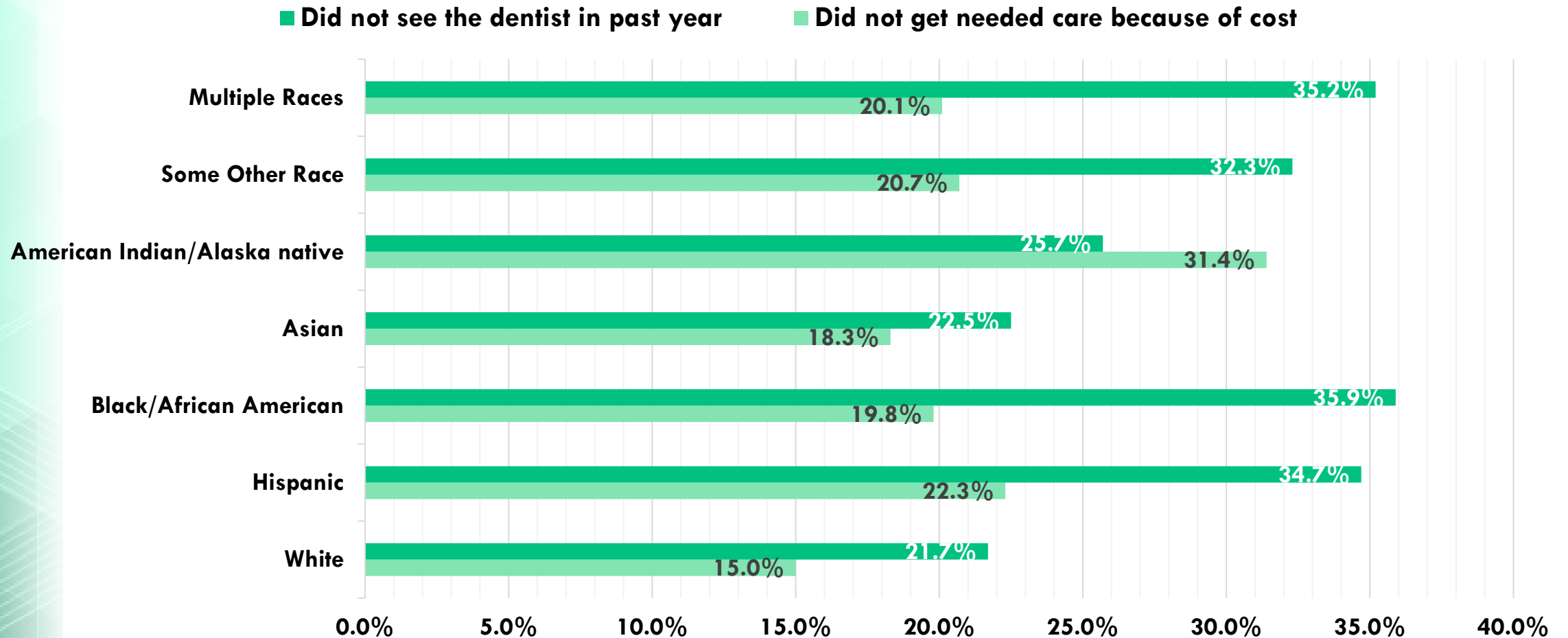
La Familia

Fuerza Latina

Front Range
Community College



Colorado Use of Care and Cost Barriers



General Anesthesia Program (GAP)

What is GAP?

PVH & HD Partnership

Opportunities for Growth



Work with Older Adults

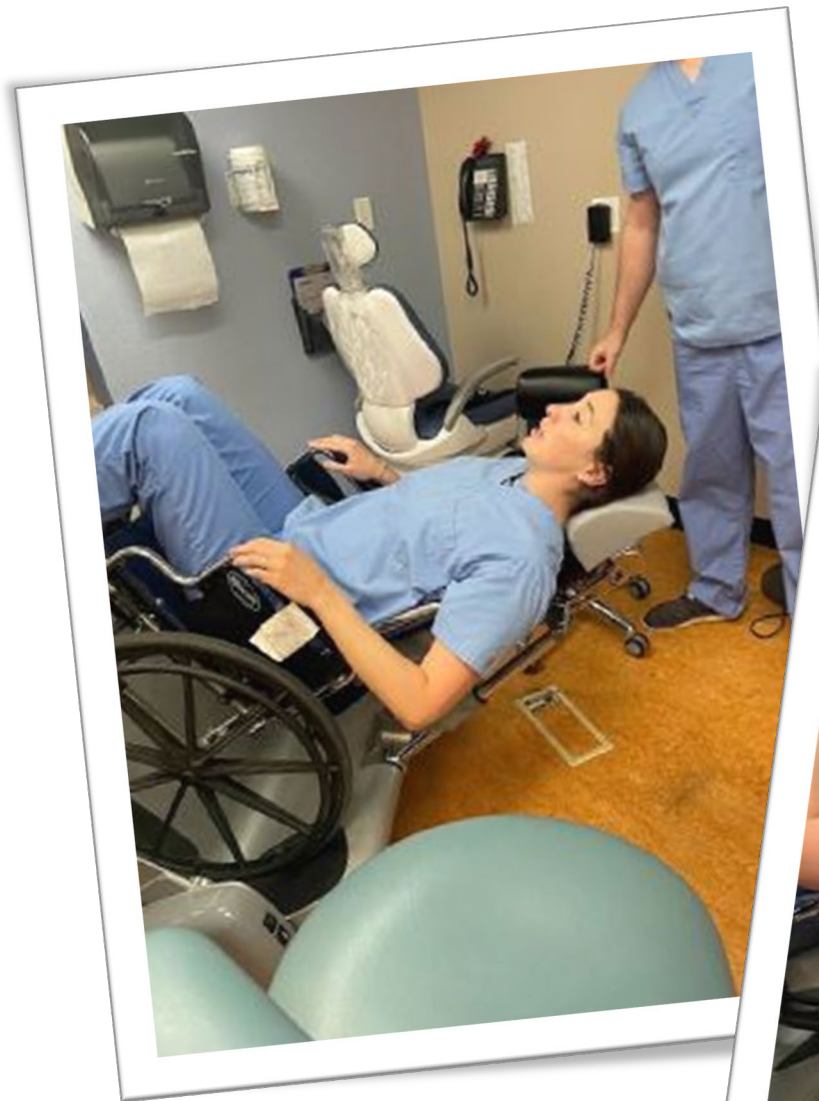
Overview

Specific Grant Funding
Opportunities for Seniors

Client Assistance



Wheelchair Recliner



**CHECK
IN** 

Medicaid Dental Benefit Expansion Awareness Campaign



**CHECK
IN**

We can help with:

- Medicaid & CHP+ Coverage
- Expanded Medicaid Dental Benefits
- Additional Health Coverage Options



Larimer Health Connect
970-472-0444

**CHECK
IN**

**Medicaid Dental
We Can Help!**

Health District
OF NORTHERN LARIMER COUNTY

PREGÚNTENOS

sobre su
salud dental.

Health District
OF NORTHERN LARIMER COUNTY

PREGÚNTENOS

sobre la
cobertura dental
de Medicaid.
¡Podemos ayudar!

HealthDistrict.org

Health District
OF NORTHERN LARIMER COUNTY



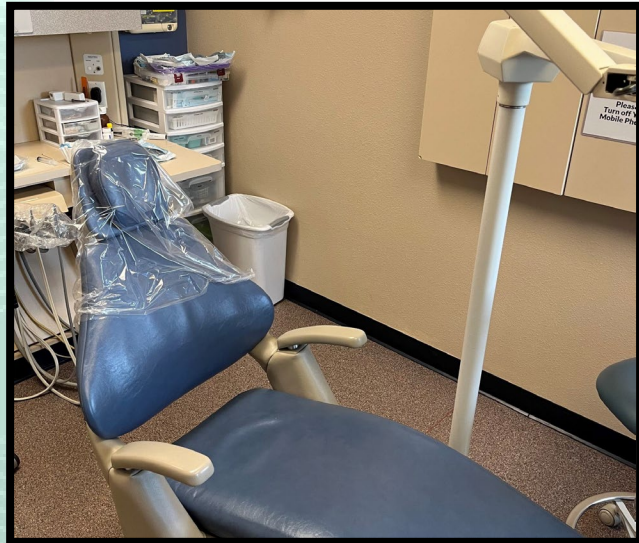
Dental Benefit Expansion – Jet Marketing Campaign

Timeline: Sept. 15, - Dec. 31, 2023 | ~ 1.8 Million Total Impressions

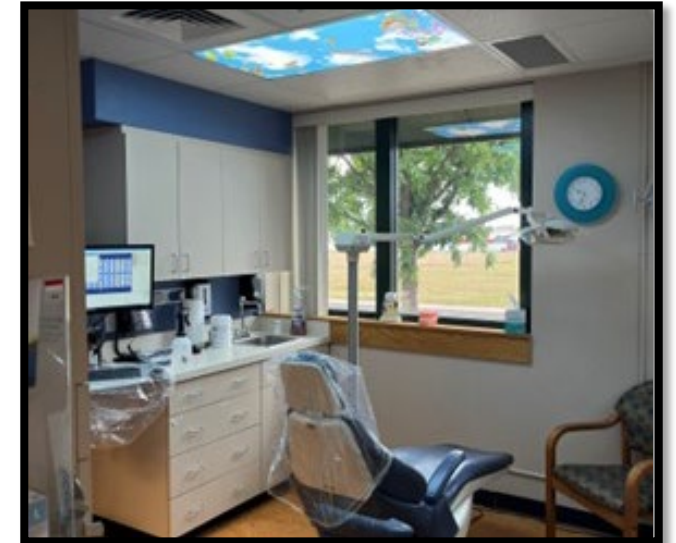


Dental Operator Upgrades

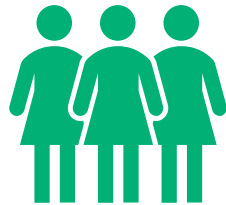
BEFORE



AFTER



Summary



2,305 Unduplicated Clients
(June 1, 2023 – May 31, 2024)



7,634 Dental Visits Over The
Past Year



68.1 % Treatment Plan
Completion Rate

Thank you!

A LETTER FROM OUR BOARD CHAIR AND EXECUTIVE DIRECTOR

To our community members, colleagues, and partners:

We are excited to share the 2024–2025 Strategic Plan, which lays a critical foundation for the long-term success of the Health District. Since its inception 30 years ago, the Health District has been an essential resource for addressing the health needs of Northern Larimer County’s residents.

Our achievements stem from our deep-rooted mission to enhance the health of our community. We best achieve this mission by continually evaluating and adapting our infrastructure and services to address the critical health needs of our residents as they evolve.

As we envision the possibilities over the next 30 years, we have developed a 2024–2025 Strategic Plan, centered on four strategic priority areas that are critical to our success: *Great Governance, Health Equity, Organizational Excellence, and Partnerships.*

We are privileged to build upon the groundwork and dedication that has guided the organization in providing exceptional services to the residents of Northern Larimer County for three decades. We honor this legacy by strengthening the fabric of our organization.

We are accountable to district taxpayers, ensuring that our community is involved in the investment they’ve made in the Health District. We know that equity and organizational excellence are inseparable in community health, and we cannot fully achieve our mission unless all people in our community are included and involved.

Recognizing that we cannot do this work alone, we will take a collaborative approach to building a healthier community. We’re committed to engaging and strengthening cross-sector partnerships and providing more comprehensive support to improve health among our residents.

By fortifying *Great Governance, Health Equity, Organizational Excellence, and Partnerships* across our programs and services, we will augment and amplify our greatest strength—the talent and expertise of our dedicated staff—and elevate community standards for equitable, excellent care.

While the health needs of our community have changed dramatically since the Health District’s founding 30 years ago, the need for exceptional health services has not. Our commitment to meeting those needs as they transform remains.

Here’s to the next 30 years of enhancing the health of our community!

Sincerely,

A handwritten signature in blue ink, appearing to read "Molly Gutilla". The signature is fluid and cursive, with a large initial "M" and "G".

Molly Gutilla | Board President

Liane Jollon | Executive Director

Health District of Northern Larimer County

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30 YEARS OF CARING Health District

OF NORTHERN LARIMER COUNTY
1994 ~ 2024

The Health District of Northern Larimer County 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.

Continued on next page.



OUR STORY

The Health District of
Northern Larimer County





OUR MISSION

Enhance the health of our community.

Through this separation, the Health District has been able to play a uniquely supportive role in community health. Rather than operating a hospital, we enhance the health of community residents in the following ways:

- We provide low-cost dental care to eligible residents of all ages through our Family Dental Clinic.
- We offer needs assessments, short-term counseling, and connections to local behavioral health resources through our Mental Health Connections program.
- We offer 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.

STRATEGIC PRIORITIES

OVERVIEW



OVERVIEW

STRATEGIC PRIORITIES, *continued*



Great Governance

Great governance is essential to an impactful and high-performing organization. It is inclusive and participatory.



Organizational Excellence

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



Health Equity

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.



Partnerships

Broad, cross-sector partnerships are needed to effectively address the full array of complex factors impacting community health.



EXECUTIVE SUMMARY OVERVIEW

This executive summary provides an overview of the strategic direction for the Health District for 2024–2025. 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



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

ORGANIZATIONAL EXCELLENCE



Organizational excellence emphasizes the importance of the people, 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 services are efficiently delivered using available resources. Organizational excellence focuses on the role of cross-cutting functions in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.

GOALS

- 1 Prepare the Health District Board of Directors to successfully carry out duties of governance and [transparency](#)*
- 2 Protect the integrity of the Health District’s financial position and foster [fiscal stewardship](#) and [accountability](#).
- 3 Reflect the community in the Health District’s work and increase opportunities for the community to see itself in this work.

GOALS

- 1 Shape Health District policy to promote positive health outcomes and operational excellence.
- 2 Fortify enabling functions, including Finance, Human Resources, Support Services, and Information Technology.

Strengthen communications functions and strategy, both internally and externally,
- 3 and promote conditions that improve visibility, organizational transparency, and the use of programs and services.
- 4 Commit to using improved data collection analysis and dissemination for decision-making.

*Definitions for terms in [hyperlink blue](#) can be found in Appendix A.

EXECUTIVE SUMMARY

OVERVIEW *continued*



This executive summary provides an overview of the strategic direction for the Health District for 2024–2025. 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.*

HEALTH EQUITY



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.

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 Develop and implement a definition of *health equity* for the Health District.
Cultivate an environment in which diverse thought and experience is welcomed, and staff knowledge of and commitment to equity is invested in.
- 2 Implement new strategies for high-quality and fair treatment of Health District clients and community members.
- 3 Build the foundation to become a model of inclusive excellence for health care partners and collaborators.

PARTNERSHIPS



Broad, cross-sector partnerships are needed to effectively address the full array of complex factors impacting community health.

GOALS

- 1 Assess partner relationships and opportunities for community **engagement**.
- 2 Build and strengthen partnerships that maximize impact on community health.
- 3 Improve collaboration between the Health District and our partners to advance health equity.

STRATEGIC PLANNING PROCESS

WHY A STRATEGIC PLAN?



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



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.



STRATEGIC PLANNING PROCESS

THE SIX INPUTS

- ① A review and assessment of existing Health District policies
- ② Individual Health District Board of Directors interviews
- 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 plan process, a review of the five inputs; Government 101; strategic public management; communication; strategic budgeting; change and transition; and connecting the strategic plan to annual and programmatic budgets and workplans.

On the following two days, May 15–16, 2024, the strategic planning retreat was held. 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.



STRATEGIC PLANNING PROCESS

RETREAT OBJECTIVES

During our annual strategic planning retreat, we discussed the mission of the organization: **the why, what we do, who we are, and who we serve**. We participated in several brainstorming exercises around our primary goal for the retreat, which was to obtain direction from the Board. During this time, we gained a better understanding of the many different ways in which we each contribute to making the Health District a vital community organization and learned how centering our planning around shared strategic priorities can amplify the resonance of our mission internally and throughout the community and increase 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**.



GREAT GOVERNANCE OBJECTIVES AND STRATEGIES

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

GOAL 1



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

- 🎯 **Objective 1.1:** Enhance clarity around roles and responsibilities (Board and staff).
 - **Strategy 1.1.1:** Update Board policies.
 - Develop a process and timeline for bringing updated policies to the Board for review and approval in 2024–2025.
 - **Strategy 1.1.2:** Provide Board training in 2024 and 2025 on identified topics.
 - See [Appendix](#) for a list of training areas identified throughout the strategic planning process.
 - **Strategy 1.1.3:** Develop a new and documented onboarding process for the Board of Directors.
 - Review and update the current Board binder.
 - Develop and implement a comprehensive and standardized onboarding process for all new Board members.
 - **Strategy 1.1.4:** Enhance the use of legal counsel.
 - Require legal counsel attendance at all Board meetings.
 - Utilize legal counsel for the update and development of organizational policies.
- 🎯 **Objective 1.2:** Increase Board meeting effectiveness.
 - **Strategy 1.2.1:** Develop and implement quarterly strategic-plan reports.
 - **Strategy 1.2.2:** Update meeting-agenda documentation to align with statutes, regulations, policy, bylaws, and/or strategic plan area(s).

Protect the integrity of the Health District’s financial position and foster fiscal stewardship and accountability.



GOAL 2

- 🎯 **Objective 2.1:** Implement best practices to support **fiscal sustainability** and asset management.
 - **Strategy 2.1.1:** Evaluate existing programs, systems, and processes, and update them for quality improvement, fiscal sustainability, and transparency, as needed.
 - **Strategy 2.1.2:** Utilize existing policy audit to develop a plan to update and implement best-practice policies.
- 🎯 **Objective 2.2:** Promote fiscal sustainability, transparency, compliance, and best practices concerning all budgetary, financial, and regulatory standards.
 - **Strategy 2.2.1:** Implement strategic budgeting to eliminate current structural deficit.
 - **Strategy 2.2.2:** Update financial policies and procedures and internal controls, as needed.
 - **Strategy 2.2.3:** Modernize budget and accounting software.
 - **Strategy 2.2.4:** Explore pathways to improve community awareness, access to budget information, and trust in the Health District’s stewardship of public funds.



GREAT GOVERNANCE OBJECTIVES AND STRATEGIES

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


GOAL 3





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

 **Objective 3.1:** Enhance transparent and effective internal and external communication.

-  • **Strategy 3.1.1:** Update communications and brand standards.
-  • **Strategy 3.1.2:** Explore new technologies and communication channels.
-  • **Strategy 3.1.3:** Provide timely and accessible information through multiple channels to enhance **engagement** and reach priority populations and the broader community.
- **Strategy 3.1.4:** Examine existing community engagement processes and outcomes.

 **Objective 3.2:** Shape Health District policy to promote positive health outcomes and operational excellence.

-  • **Strategy 3.2.1:** Assess local, state, and federal policies impacting the health of Health District residents and organizational operations.
-  • **Strategy 3.2.2:** Assess and maximize the use of partnerships and support contractors to influence policies impacting the health of Health District residents.



ORGANIZATIONAL EXCELLENCE

OBJECTIVES AND STRATEGIES

Organizational excellence emphasizes the importance of the people, 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 services are efficiently delivered using available resources.

Organizational excellence focuses on the role of cross-cutting functions in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.

GOAL 1



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

-  **Objective 1.1:** Members of the Board continue to demonstrate leadership by upholding integrity in accordance with high standards of behavior, serving as role models for others in the organization.
 -  • **Strategy 1.1.1:** Develop an ethics policy that contains a Board and employee code of conduct.
 -  • **Strategy 1.1.2:** Provide Board training and support.
-  **Objective 1.2:** Staff members continue to demonstrate integrity by conducting themselves in accordance with high standards of behavior, serving as role models for others in the organization.
 -  • **Strategy 1.2.1:** Develop an ethics policy that contains a Board and employee code of conduct.
 -  • **Strategy 1.2.2:** Provide staff training and support.
-  **Objective 1.3:** Be an employer of choice in Larimer County by integrating an “excellence and equity” lens into all employment processes and the [HR lifecycle](#).
 -  • **Strategy 1.3.1:** Assess and enhance the existing HR lifecycle.
 -  • **Strategy 1.3.2:** Develop a strategic HR lifecycle that has an equity lens.
 -  • **Strategy 1.3.3:** Develop key performance indicators to assess the HR lifecycle.
 -  • **Strategy 1.3.4:** Finalize organizational compensation philosophy.
 -  • **Strategy 1.3.5:** Hire a health equity strategist.
-  **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.
 -  • **Strategy 1.4.1:** Assess and identify training and professional development needs based on input and feedback from staff.
 -  • **Strategy 1.4.2:** Provide high-quality, year-round staff development and leadership training across all levels of the organization.
 -  • **Strategy 1.4.3:** Develop the infrastructure and processes to track and monitor the training and development provided.
 -  • **Strategy 1.4.4:** Identify metrics for assessing professional and leadership development to strengthen a strategic HR lifecycle.



ORGANIZATIONAL EXCELLENCE

OBJECTIVES AND STRATEGIES

Organizational excellence emphasizes the importance of the people, 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 services are efficiently delivered using available resources.



Organizational excellence focuses on the role of cross-cutting functions in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.


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






GOAL 2



 **Objective 2.1:** Audit and update processes and workflows among programs, services, and enabling functions.


-  • **Strategy 2.1.1:** Assess operational functions of enabling services and programs.
-  • **Strategy 2.1.2:** Develop operational plans to enhance efficiency.
- **Strategy 2.1.3:** Monitor and evaluate workflow and process changes.

 **Objective 2.2:** Strengthen financial management and infrastructure to enable the delivery of high-quality services and support continuity of operations.

-  • **Strategy 2.2.1:** Align budgetary goals with strategic plan and address existing structural budget deficit to ensure long-term **fiscal sustainability**.
-  • **Strategy 2.2.2:** Update financial system, including technologies, policies, processes, and an Internal Controls Examination.
- **Strategy 2.2.3:** Enhance financial communications.
- **Strategy 2.2.4:** Develop a process for continuous improvement.
- **Strategy 2.2.5:** Provide staff with training and support.

 **Objective 2.3:** Strengthen IT management and infrastructure to enable the delivery of high-quality services and support the continuity of operations.

-  • **Strategy 2.3.1:** Deploy a modernized IT infrastructure that enables seamless access to information and resources.
-  • **Strategy 2.3.2:** Strengthen data and knowledge-management systems.
- **Strategy 2.3.3:** Enhance information sharing to improve workflows and collaboration.
- **Strategy 2.3.4:** Leverage analytic technology to support enhanced data-driven decision-making and operations.

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

- **Strategy 2.4.1:** Develop a capital maintenance and improvement plan to strategically plan for short-term and long-term infrastructure and capital needs.
- **Strategy 2.4.2:** Develop and implement an occupancy plan and facilities-management system.
- **Strategy 2.4.3:** Strategically budget for ongoing capital maintenance and infrastructure needs.
- **Strategy 2.4.4:** Develop a strategy for co-location and centralization of services to achieve integrated care objectives.




ORGANIZATIONAL EXCELLENCE





OBJECTIVES AND STRATEGIES

Organizational excellence emphasizes the importance of the people, 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 services are efficiently delivered using available resources.







Organizational excellence focuses on the role of cross-cutting functions in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.


 **Objective 2.5:** Identify, assess, and determine responses to key strategic, operational, and financial risks associated with the Health District’s goals and objectives.




-  • **Strategy 2.5.1:** Hire a compliance officer.
-  • **Strategy 2.5.2:** Review, evaluate, and adjust policies and procedures for internal controls.
-  • **Strategy 2.5.3:** Assess compliance risks within and across Health District services and operations.
-  • **Strategy 2.5.4:** Implement mitigation strategies that facilitate balanced, calculated risks necessary to achieve the Health District’s mission.

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.

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

-  • **Strategy 3.1.1:** Evaluate existing outreach efforts and effectiveness to identify needs and opportunities.
-  • **Strategy 3.1.2:** Develop standardized processes and workflows for outreach efforts that are equitable, accessible, and effective at reaching priority populations (address needs/gaps in updated process or workflows).
-  • **Strategy 3.1.3:** Develop a comprehensive communication strategy to be executed in 2025.
-  • **Strategy 3.1.4:** Obtain any necessary tools/technology to enhance outreach efforts.
-  • **Strategy 3.1.5:** Implement new processes and tools to enhance outreach efforts.
-  • **Strategy 3.1.6:** Measure the effectiveness and impact of outreach and education strategies and identify opportunities for refinement.

 **Objective 3.2:** Enhance the reputation of the Health District as a subject-matter expert and facilitator for collaborative work among community and state-wide partner organizations.

-  • **Strategy 3.2.1:** Assess existing support efforts for community partnerships and partner engagement to identify needs and opportunities.
-  • **Strategy 3.2.2:** Develop strategies, processes, and resources to facilitate greater cross-cutting support for building, maintaining, and expanding strategic relationships.
-  • **Strategy 3.2.3:** Measure effectiveness and equitability of reputation-management and strategic-relationship support and identify opportunities for refinement.







ORGANIZATIONAL EXCELLENCE

OBJECTIVES AND STRATEGIES

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Organizational excellence involves oversight, structures, processes, and standards to ensure that impactful services are efficiently delivered using available resources.






Organizational excellence focuses on the role of cross-cutting functions in organizational operations and continuous improvement. Organizational excellence enables health equity, partnerships, and great governance.

-  **Objective 3.3:** Improve consistency and efficiency in communications processes and products across the organization.
-  • **Strategy 3.3.1:** Inventory and assess existing internal communications processes, marketing materials, and other collateral.
-  • **Strategy 3.3.2:** Update existing strategies and products and develop new processes to address procedural gaps and ensure high-quality material across the organization.
-  • **Strategy 3.3.3:** Implement new website and associated products to improve equitable access to information.
- **Strategy 3.3.4:** Measure effectiveness, impact, and equitability of internal communications processes and products and identify opportunities for refinement.

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



GOAL 4

-  **Objective 4.1:** Assess what data is required to improve data-driven decision-making.
-  • **Strategy 4.1.1:** Examine and assess existing organizational and community data-collection practices and methodologies.
- **Strategy 4.1.2:** Determine strategies, policies, and procedures to enhance data collection.
- **Strategy 4.1.3:** Identify existing agreements and partners with whom the Health District shares or needs to collaborate with on data-sharing.
- **Strategy 4.1.4:** Create or update agreements with partners that meet the data-sharing practices, policies, and needs.
-  **Objective 4.2:** Gain clarity on best practices for data analysis and dissemination.
-  • **Strategy 4.2.1:** Connect organizational decision-making to population health analytics and program evaluation.
-  • **Strategy 4.2.2:** Procure consultant to analyze organizational evaluation practices.



HEALTH EQUITY OBJECTIVES AND STRATEGIES

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.*

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.

GOAL 1



Develop and implement a definition of *health equity* for the Health District.



Objective 1.1: Enhance organizational capacity to advance health equity.



• **Strategy 1.1.1:** Hire a health equity strategist.

• **Strategy 1.1.2:** Convene local subject-matter experts who work in support of priority populations.

• **Strategy 1.1.3:** Synthesize relevant data on community needs.

• **Strategy 1.1.4:** Communicate the Health District’s definition and vision of equitable service delivery.

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



GOAL 2



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



• **Strategy 2.1.1:** Incorporate an equity lens into Board decisions, discussions, and actions.



• **Strategy 2.1.2:** Assess staff demographics in relation to the community we serve.

• **Strategy 2.1.3:** Iteratively align organizational practices to EDIJ best practices.



Objective 2.2: Measure impact of our services on priority populations for iterative improvement.



• **Strategy 2.2.1:** Ensure equity measures are embedded into data systems and establish benchmarks.

• **Strategy 2.2.2:** Compare observed to desired outcomes.

GOAL 3



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



Objective 3.1: Develop an organizational Health Equity Strategic Plan to transform systems, practices, and policies.



• **Strategy 3.1.1:** Conduct strengths, weaknesses, opportunities, and threats (SWOT) analysis to identify policies, systems, and practices that further or hinder equity initiatives in the organization.

• **Strategy 3.1.2:** Benchmark Health District client service procedures to Culturally and Linguistically Appropriate Services (CLAS) Standards.

• **Strategy 3.1.3:** Commit to use of destigmatizing and culturally appropriate language in alignment with health equity best practices.


• **Strategy 3.1.4:** Update processes, policies, and procedures to promote inclusive and equitable access.



HEALTH EQUITY OBJECTIVES AND STRATEGIES

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.*

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.


 **Objective 3.2:** Enhance the visibility of Health District programs and services as a welcome resource for people with underrepresented identities.

- **Strategy 3.2.1:** Identify populations that are underserved by other health care services.
- **Strategy 3.2.2:** Evaluate existing marketing and outreach efforts targeted toward priority populations and identify needs and opportunities.
- **Strategy 3.2.3:** Update and develop marketing and outreach strategies specific to priority populations that are equitable, accessible, and effective.
- **Strategy 3.2.4:** Implement strategies to enhance existing marketing and outreach efforts.
- **Strategy 3.2.5:** Measure the effectiveness and impact of updated strategies to identify opportunities for refinement.


Build the foundation to become a model of inclusive excellence for health care partners and collaborators.



GOAL 4

 **Objective 4.1:** Inform and elevate standards for high-quality, equitable, and inclusive care toward equity and justice.

- **Strategy 4.1.1:** Examine and assess community data-collection practices to inform community-wide health equity strategies.

 **Objective 4.2:** Champion standards on methodologies for health equity assessment and analysis.

- **Strategy 4.2.1:** Conduct system-level network mapping to determine priorities alignment and crossover.



PARTNERSHIPS





OBJECTIVES AND STRATEGIES

Broad, cross-sector partnerships are needed to effectively address the full array of complex factors impacting community health.

GOAL 1







Assess partner relationships and opportunities for community engagement.

-  **Objective 1.1:** Conduct system-level network mapping to determine alignment and crossover of priorities.
 -  **Strategy 1.1.1:** Enhance critical partnerships with new and existing partners.
 - Strategy 1.1.2:** Develop and implement a partnership-management process and tools to identify, track, and manage partner relationships.
 - Strategy 1.1.3:** Establish designated relationship liaisons with community partner organizations to enhance communications, collaboration, and shared knowledge.
 - Strategy 1.1.4:** Develop and implement an evaluation process for understanding the impact of community partnerships.
-  **Objective 1.2:** Work in collaboration with community partners to enhance shared knowledge and service-access for priority populations.
 -  **Strategy 1.2.1:** Identify patient personas that are common between the Health District and other community partners to better understand shared-service needs.
 - Strategy 1.2.2:** Conduct patient-level journey mapping.
 - Strategy 1.2.3:** Establish clear data and service flows between community partner organizations for the identified patient personas to ensure seamless service delivery.

Build and strengthen partnerships that maximize impact on community health.



GOAL 2




-  **Objective 2.1:** Strengthen community health impact through fostering partnerships with government entities.
 -  **Strategy 2.1.1:** Identify key partners from network map across government entities and services.
 -  **Strategy 2.1.2:** Improve and expand coordination with local government entities and services.
 - Strategy 2.1.3:** Assess and iteratively improve the quality and completeness of governmental partnerships.
-  **Objective 2.2:** Strengthen community impact through fostering partnerships with local non-governmental organizations (e.g., nonprofits, hospital systems).
 -  **Strategy 2.2.1:** Identify key partners from network map across critical non-governmental organizations.
 - Strategy 2.2.2:** Improve collaboration between Health District and health care delivery systems to advance health equity.
 - Strategy 2.2.3:** Assess and iteratively improve the quality and completeness of non-governmental partnerships.



PARTNERSHIPS

OBJECTIVES AND STRATEGIES






Broad, cross-sector partnerships are needed to effectively address the full array of complex factors impacting community health.

-  **Objective 2.3:** Cultivate partnerships with organizations that represent and support the interests of priority populations and health-related social needs.
-  • **Strategy 2.3.1:** Identify key partners from network map.
-  • **Strategy 2.3.2:** Develop ad hoc community workgroups to create the bridge between strategy and service.
- **Strategy 2.3.3:** Support community-based advocacy organizations in advancing causes important to the well-being of our community.

GOAL 3



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

-  **Objective 3.1:** Strengthen, codify, and reconcile relationships that meet strategic plan goals.
-  • **Strategy 3.1.1:** Review and assess existing relationships, partnerships, and agreements for alignment with goals, resource allocation and investment, and ongoing compliance.
-  • **Strategy 3.1.2:** Reconcile partnership investments.
-  **Objective 3.2:** Establish role clarity and define and effectively communicate the Health District's role in serving the community.
-  • **Strategy 3.2.1:** Create a clear service/communications strategy.
- **Strategy 3.2.2:** Facilitate discussions with partners to define the Health District's distinct service lines.



APPENDIX A

GLOSSARY

accountability Taking responsibility for one’s decisions and actions.

cross-cutting functions Health District departments of Communications and Planning, Policy, Research & Evaluation, including Community Impact and Health Equity teams.

enabling functions Health District departments of Finance, Human Resources, and Support Services, including Information Technology.

engagement Community and organizational involvement in Health District services and its work to achieve sustainable outcomes, equitable decision-making processes, and deepened relationships.

fiscal sustainability Creating and maintaining a balanced budget; judiciously tapping into reserve funds when essential for the delivery of Health District services; crafting and implementing a long-term financial plan with an infrastructure and capital-improvement strategy. Ensures that the Health District maintains a robust financial foundation to deliver programs and services aligned with its mission; promotes agility; allows the Health District to operate effectively, even in dynamic and challenging circumstances.

human resources lifecycle* Encompasses all activities related to human resources (HR) within the Health District.

integrity Impartiality, ethical behavior, and responsible use of information and resources; compliance with laws, regulations, and organizational policies; demonstrating and fostering high standards of professionalism across all levels.

leadership Leading by example; adhering to roles, responsibilities, policies, and decisions.

outreach Involves community-facing communications, strategies, and tactics meant to increase public knowledge of the Health District brand and the organization’s services, mission, vision, and values.

stewardship Managing, monitoring, and safeguarding resources (fiscal, personnel, and other) on behalf of the public; monitoring and enhancing the ability to serve the public interest over time.

transparency Public, staff, and other stakeholders having full access to accurate and clear information; promotes accountability and trust in governance processes.



*The **human resources lifecycle** begins with aligning HR strategy to the organization’s business goals. Next, it involves designing the organizational structure, individual jobs, and teams. HR planning anticipates workforce needs while fostering a positive work environment based on the organization’s vision and values. Recruitment, onboarding, performance assessment, training, employee engagement, and career management follow. Finally, effective exit management ensures smooth employee departures. The HR life cycle integrates strategy and execution, supporting employees from recruitment to exit.

Image source: <https://www.linkedin.com/pulse/guide-hr-lifecycle-chuma-chukwujama/>

APPENDIX B

TRAINING NEEDS IDENTIFIED BY BOARD MEMBERS

(list not exhaustive)

Governance and Roles

- Roles and Responsibilities
- Fiduciary Responsibility
- Policy setting
- Communication process (limits)
- Health District Board Policies

Liability and Legal Issues

- Conflicts of interest
- Legal-limits discussion/obligations

Ethics

Special District Rules

- CORA
- Open-meeting rules
- Serial meetings

UCHealth Contract Overview

Onboarding

- Onboarding binder update
- Substantive orientation and onboarding
- Roles/duties of an elected Board

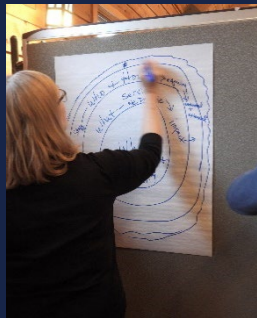
Opportunities for Professional Development

- Governance, and fiduciary roles and responsibilities (e.g., SDA)
- Public and community health (e.g., APHA)

HEALTH DISTRICT BOARD OF DIRECTORS



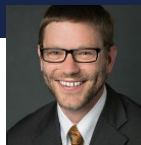
Molly Gutilla
President



Julie Kunce Field
Vice President



John McKay
Secretary



Joseph Prows
Treasurer



Erin Hottenstein
Assistant Treasurer

ACKNOWLEDGMENTS

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 OF
NORTHERN LARIMER COUNTY**
STRATEGIC PLAN
FY2024–2025

www.healthdistrict.org

Board Key Dates for Budget Year 2025

- May 16** Board strategic planning meeting
- June 25** 2025 Strategic plan update
- July 23** Strategic plan approval
- Aug 26** Strategic budgeting work session
- Sept 24** Review proposed 2025 Compensation adjustment
- Oct 15** **Proposed 2025 budget received**
- Oct 22** Budget work session
- Nov 12** Public hearing on proposed 2025 budget
- Dec 10** Board meets to approve 2025 budget, certify mill levy, and adopt resolutions
- Dec 31** **“By this date the Board shall enact ‘Resolution to Appropriate Funds’ for ensuing fiscal year” (DOLA)**

Fair Campaign Practices Act



We're in the midst of the
2024 election cycle...



Fair Campaign Practices Act (FCPA), CRS § 1-45-101, *et seq.*

Limits certain campaign activities that elected or appointed officials of a state or political subdivision in Colorado may take. The FCPA applies to any:

- Candidate for election to/retention of office
- Statewide ballot issue
- Local ballot issue
- Referred measure, when submitted
- Elected official recall

What you may do as a Board

Advocacy Resolution

- The Board may pass an advocacy resolution in support of or against a local or state ballot issue, which resolution may urge the electorate to vote for or against the matter.
- The Board may direct that the advocacy resolution be distributed, but distribution may **ONLY** be through “customary means.” The Board may not use paid advertising to publicize an advocacy resolution.



**RESOLUTION TO SUPPORT THE PASSAGE OF A LARIMER
COUNTY BALLOT ISSUE IMPOSING A 0.25% COUNTYWIDE
SALES AND USE TAX FOR THE PURPOSE OF PROVIDING
MENTAL HEALTH CARE SERVICES FOR RESIDENTS OF
LARIMER COUNTY**

Resolution 2018-16

Factual Summaries

- **The Board may direct staff to prepare and disseminate a factual summary (including arguments both for and against) on any issues of official concern. An issue of official concern is one that will appear on a ballot for residents within the Health District.**
 - Preparation of factual summaries by staff is not permitted for any issues or questions that appear on any other ballot in any other jurisdiction. Any factual summaries prepared by staff for potential dissemination must be reviewed by the Health District's legal counsel prior to dissemination. A factual summary cannot contain a conclusion or opinion in favor of or against the issue of official concern.
- **If an issue appears on a ballot in another jurisdiction, the Board may ask staff to pass along to the Board any factual summaries created by other jurisdictions, if they are balanced and include arguments both for and against.**
 - The Board may not ask staff to disseminate these external factual summaries to others (though staff may answer questions directly posed to them from the public about the existence of such summaries).

What you may do individually

In Official Capacity

- You may respond to unsolicited questions about ballot questions or issues or candidates. In responding to such questions, you may relate an official Health District position.
- Spend up to \$50 in public funds in the “form of letters, telephone calls, or other activities incidental to expressing (your) opinion” on a campaign issue. This provision is intended to help public officials avoid technical violation of the FCPA and should not be viewed as an affirmative authority to spend public funds. Consultation with legal counsel is recommended prior to spending any funds in this manner.

As a Private Citizen

- You may express your opinion regarding a ballot issue or candidate as long as you state you are not speaking on behalf of the Health District. This could include:
 - Accepting invitations to appear in panel discussions or public forums
 - Giving interviews to news reporters
 - Writing letters to the editor
 - Submitting newspaper opinion columns
- In doing so, you may identify yourself as a Health District Board Member as long as you state or imply that you are not speaking on behalf of the Health District. You should carefully document that any such statements are made on your personal time and as a private citizen.

What you may not do

You may not

As a Board

- Direct staff to expend public funds to support or oppose a ballot issue (with the previous exception) or a candidate
- Make any contribution in campaigns for any person to any public office

Individually

- As a representative of the Health District, solicit opportunities to express your opinion on a ballot issue or candidate.
- Spend more than \$50 of Health District funds incidental to the lawful expression of your opinion
- State or imply that you are speaking on behalf of the Health District or the Board when giving your opinion on an election issue.
- Solicit questions about an election issue solely so that you may respond.