

NORTHEAST  
COLORADO  
HEALTH  
DEPARTMENT



**2020**  
ANNUAL  
REPORT



# BOARD OF HEALTH

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Tony Wells, Vice President – Washington County Commissioner  
Terry Hofmeister, Secretary – Phillips County Commissioner  
Mark Turner – Sedgwick County Commissioner  
Robin Wiley – Yuma County Commissioner  
Mark Arndt – Morgan County Commissioner  
Samantha Mahaffey – Logan County Representative  
Laura Teague – Morgan County Representative

## OFFICE LOCATIONS

### Logan County

700 Columbine St.  
Sterling, CO 80751  
(970) 522-3741

### Morgan County

228 W. Railroad Ave.  
Fort Morgan, CO 80701  
(970) 867-4918

### Phillips County

127 E. Denver St.  
Suite C  
Holyoke, CO 80734  
(970) 854-2717

### Sedgwick County

118 W. 3rd St.  
Julesburg, CO 80737  
(970) 474-2619

### Washington County

482 Adams Ave.  
Akron, CO 80720  
(970) 345-6562

### Yuma County

529 N. Albany St.  
Suite 1120  
Yuma, CO 80759  
(970) 848-3811



## DIRECTORS REPORT

2020 was unlike any other year even though it started out similar to years past – there were an increased number of influenza cases and rumblings about a novel coronavirus in China. We were prepared to implement our first ever electronic health record system that would allow more efficient scheduling and billing services. Then March came and like the rest of the world, COVID hit our agency hard and continuously for the next several months.

We spent the last part of March and all of April trying to focus on case investigations/contact tracing, quarantine and isolation. It became apparent fairly quickly that our existing disease investigation staff couldn't handle the volume of cases pouring in, so it was "all hands on deck". In other areas, staff

that had previously done outreach/education or had worked in our environmental health were now provided new duties related to the health crisis. We had to pivot to deliver services in a different way — in-person became telephone or virtual visits and drive up services. Our staff got a crash course in the use of virtual meetings as we worked hard to quickly communicate within our agency, community partners and the state — so much information was coming at such a fast rate that it was a challenge to keep up. As scientists learned more about this novel coronavirus, now called COVID-19, the information changed to align with the new knowledge.

May found us collaborating with our counties on variances as each sought to serve their residents in the best way possible. NCHD increased staffing to help with the ongoing case investigations/contract tracing and continue assisting with outbreak follow-up. Our Environmental Health staff expanded to include business we had never worked with before and to getting clarification on ever-changing guidance so that all the businesses could re-open and regain some economic stability after the shut-down.

June and July were spent still doing case investigations/contact tracing, isolation and quarantine, outbreak investigation and follow-up. We also worked with our counties on safe ways to hold county fairs. We were able to hire an epidemiologist (data analyst) through a CDC Foundation grant and worked to expand the website data. We also investigated a rabies exposure and helped 8 people to get post-exposure rabies prophylaxis to make sure they didn't develop rabies (fatal) as a result of their exposure.

August and September were all about helping schools plan for back-to-school. Weekly meetings with each county's superintendents were set up to support them in this school-year-like-no-other. We worked on providing support/guidance for several large community events around the region. We assisted our communities to understand the

newly released COVID dial as we strived to keep up with increasing cases.

In October we held a drive-thru flu shot clinic in Yuma County to help prepare for the anticipated COVID-19 vaccine release. Testing availability was a challenge in our region, so we worked to bring local testing opportunities that provided free tests to anyone that needed them.

Like the rest of the state, November saw us dealing with a significant surge in COVID cases. Some schools in our region went remote and we all hoped that the Thanksgiving holiday would give enough space and time for cases to start decreasing.

Vaccine planning had been proceeding for a couple of months by the time December arrived. As we waited with the rest of the state and nation for vaccines to be granted emergency use authorizations, we planned and then implemented vaccination clinics in our region to parse out the scarce vaccine to priority groups. The arrival of vaccine gave us all some hope that this pandemic would eventually end and COVID-19 would become a routine part of our daily work and not an all-encompassing crisis.

Last year showed us how resilient we are as an agency, and I cannot state how proud I am of NCHD staff. We never closed our doors to providing services to the clients that count on us. Immunizations, family planning, WIC, environmental health services, vital records—all these services continued throughout the crisis, though some may have looked a little different. The staff faced huge challenges and pressures, but they continually kept the health and well-being of the public front and center. We certainly hope to never endure another year like 2020, but we came through stronger. I hope you enjoy reviewing the year in this report.

Sincerely,

Trish McClain, BSN, RN  
Public Health Director

# COVID RESPONSE

2020 was a year to remember in public health. In early January, even before the first confirmed case in Colorado, NCHD began closely monitoring news and information that was developing about the novel coronavirus and by early February, both the state and NCHD were engaged in daily communication with the Center for Disease Control and Prevention (CDC). In early March, as the first confirmed case of COVID-19 was announced in Colorado, our emergency preparedness and communicable disease staff began implementing the Disaster Preparedness Plan ensuring all systems were in place and communications were updated.

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**Trish McClain**

This has been an unprecedented year and has affected our lives in almost every aspect. I'm incredibly proud of the work that our employees have done — switching roles quickly and taking on new duties and responsibilities.

On March 13, NCHD activated our Incident Management Team (IMT) with Mike Burnett, NCHD Response Coordination Officer, designated as the Incident Commander taking the lead on NCHD's COVID-19 response.

The IMT was comprised of Command, Operations, Public Information, Planning and Logistics. The Operations section was the largest with three groups. The first group coordinated phone triage, staffing and the modification of regular NCHD programs. The second group was comprised

of nurses conducting contact tracing, case investigations, and follow up. Finally, the third group of environmental health professionals conducted communication with businesses and community outreach.

The Public Information team developed and disseminated response communications and incident case data to partners, news affiliates and the public through press releases, social media, web pages and radio.

The Planning section monitored phone calls, media, and situational awareness as well as daily planning. Logistics managed and disseminated Strategic National Stockpile supplies, Personal Protective Equipment (PPE) and other resources to authorized organizations as needed.

On March 18 NCHD's contact tracing and case investigation started with one public health nurse. As the number of cases began to quickly rise, NCHD created a team of staff to conduct contact tracing and case investigation.

Case investigation and contact tracing is a valuable tool used during disease investigations by public health specialists to reduce disease spread and potential outbreaks. This is reliant on quickly locating and talking with a patient who has tested positive for COVID-19 to identify people with whom they have been in close contact.

Those identified as close contacts are notified during the contact tracing process where they are interviewed and provided guidance on how to keep themselves and others safe. NCHD's interviewers operate under strict confidentiality rules and collected data is protected in secure systems. Interviewers do not reveal who the individual was exposed to nor is individual information shared. All information collected during interviews is used only by NCHD to track the spread of the disease.



*"Engagement with the public during contact tracing is imperative," says NCHD Response Coordination Officer, Mike Burnett. "Since we are out in the public again and interacting more frequently, this is the best tool we have to manage this disease in a proactive way while allowing our economy to start to thrive."*



## COVID RESPONSE

The Statewide Stay-at-Home order at the end of March required NCHD Environmental health staff to work closely with businesses to provide technical support and guidance to improve employee protection from infection outbreaks and remain safely open.

By the middle of April, our health district's first deaths associated with COVID-19 occurred and NCHD began tracking detailed case data for each county. NCHD hired a data analyst the end of April and then in collaboration with the CDC Foundation, we added an epidemiologist to our response by the end of June, 2020. In September, 2020, NCHD hired another epidemiologist. During the summer, NCHD improved case data with the introduction of the COVID-19 data dashboard. The COVID-19 dashboard was created on NCHD's website to disseminate the real time data which was used by the community and government leaders to make decisions regarding mitigation measures.

Responding to outbreaks was another important part of NCHD's epidemiological response to COVID-19. The definition of an outbreak varied by facility type (for example: Long Term Care facility versus a business or school). The sizes and length of outbreaks also varied. NCHD staff, working closely with the Colorado Department of Public Health & Environment (CDPHE), provided guidance to each outbreak facility and ensured they had the PPE and other supplies needed to mitigate their outbreak. Between April through December, 2020, there were 47 outbreaks in NCHD's health district.

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**Trish McClain**

“It's more likely COVID-19 is contracted by someone you live or spend a lot of time with and less likely to be the checkout person or a passer-by on the street, and those aren't currently investigated as contacts.”



Confirmed and Probable

6910

COVID-19 Cases

57 orders

11,150

Individual Pieces of PPE

Oct thru Dec

1187

Contacts Traced

Between March 16th and May 8th, NCHD's Response Logistics processed 57 orders for PPE going to our local hospitals, long term care facilities, law enforcement and EMS agencies, and others, totaling almost 11,150 individual pieces of PPE. Without having the ability to facilitate distribution of these critical supplies these organizations simply may have been forced to do without.

Because of our diverse multi-cultural communities, NCHD realized the need to see this pandemic through a health equity lens. We were in the forefront of identifying this need and hired a health equity specialist who began laying the foundation for this important work during the summer of 2020.

Fall began a second acceleration of COVID-19 cases which lingered into the winter months. Outbreaks became more common and deaths continued to climb into the 100's. As December approached, NCHD began preparing for vaccinations with clinic planning, as well as logistical preparedness. The week of December 14 marked the introduction of COVID-19 vaccine to northeast Colorado hospitals, NCHD received vaccine right before Christmas

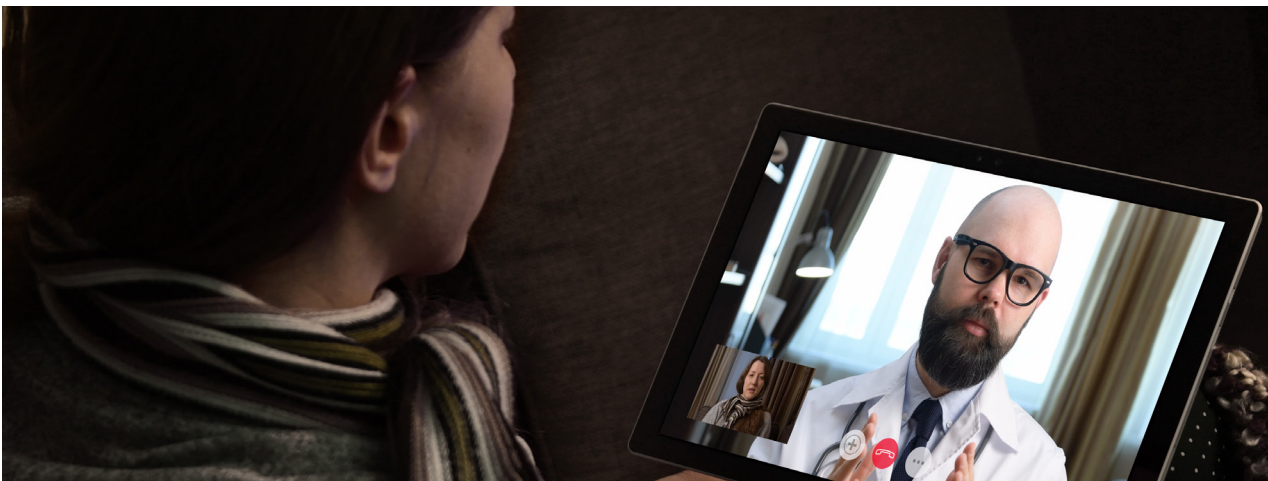
and on December 28th, NCHD held the first vaccination clinic in Washington County beginning our ongoing goal to provide vaccine to everyone who wants it. In total NCHD administered 119 COVID-19 vaccinations in the final week of 2020.

Throughout 2020 and continuing on into 2021, our responsibilities include public information, business communication, contact tracing, case investigation, outbreak investigations, testing and vaccinations.

In 4 days of 2020

119

Doses of Vaccine Administered





*"I watched from a front row seat as the pandemic uniquely destabilized communication in every sector of our organization. Subsequently, I also witnessed as we positively responded by making changes and adapting in order to exchange vital information."* said Mary Brumage, Marketing and Media Specialist and PIO



# PUBLIC INFORMATION AND COMMUNICATIONS

2020 was a big year for communication at NCHD. Not only did the way in which we communicate internally change, but interaction with and between our communities increased by leaps and bounds.

Because of the efforts associated with the pandemic, all NCHD departments saw increased communications with state and federal public health agencies and internal daily communications. Social distancing also required a change to our exchange of information but highlighted our ability to adapt to new technologies. Weekly and monthly virtual meetings with schools, childcare providers, churches, law enforcement, first responders, long term care facilities, healthcare systems, funeral homes and local government officials were also part of our scheduled communications.

Phone Triage

1566

Call Assists

In addition, NCHD implemented internal daily continuity of operations (COOP) updates that were sent to staff keeping everyone informed of COVID-19 updates and daily staffing changes. These consisted of a COVID-19 FAQ with general COVID-19 information and an extension list. The COVID-19 FAQ contained general COVID-19 information about testing, public resources and later, regional vaccination sites. The FAQ was updated as required, which helped ensure that staff had accurate and up-to-date information when responding to public inquiries. The daily extension list included a list of trending topics and the name, availability and extension of the staff person responding to each topic.

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**Liz Hickman**

Centennial Mental Health Center

“I wanted to share our sincere gratitude for ALL you are doing for our communities right now and for us specifically. We are so thankful for your updated information and guidance, your consultation around exposure and quarantine issues, and for your thoughtful messages in regional media. You are representing the data and science as it evolves, and doing your best to guide us all to “be smart and be kind”, which is MUCH appreciated!”

The Environmental Health (EH) department assumed many new communication tasks over the past year because of the COVID response. In that time, there were over four thousand recorded contacts to businesses, residents, and licensed facilities in regards to Public Health Orders and overall public safety. They worked with community partners and business owners to address the concerns of the public and took on many new roles aiding in areas generally not assigned oversight to including churches, golf courses, libraries, private events, weddings, funerals, retail stores, garage sales, spas, salons, dog grooming, campgrounds, marinas, beaches, court rooms, sporting events and organized sports, day camps, etc. They were tasked with becoming subject specific experts in order to fill the need of those calling to gain information.

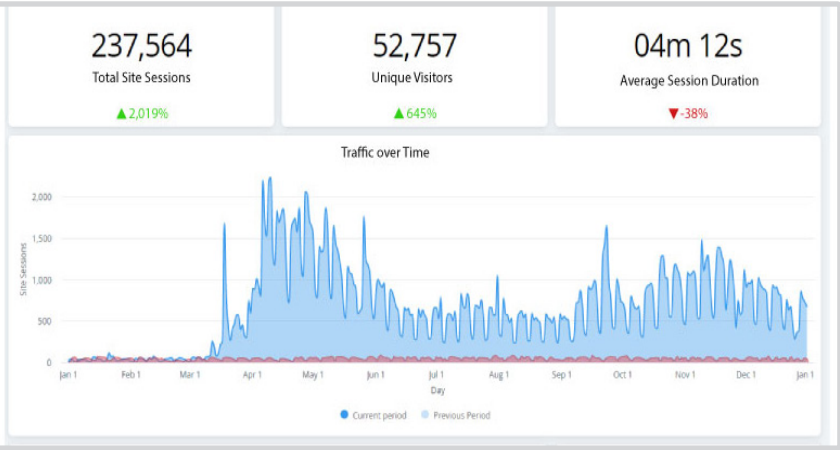
EH resolved

290

Public Health Order  
Complaints

# PUBLIC INFORMATION AND COMMUNICATIONS

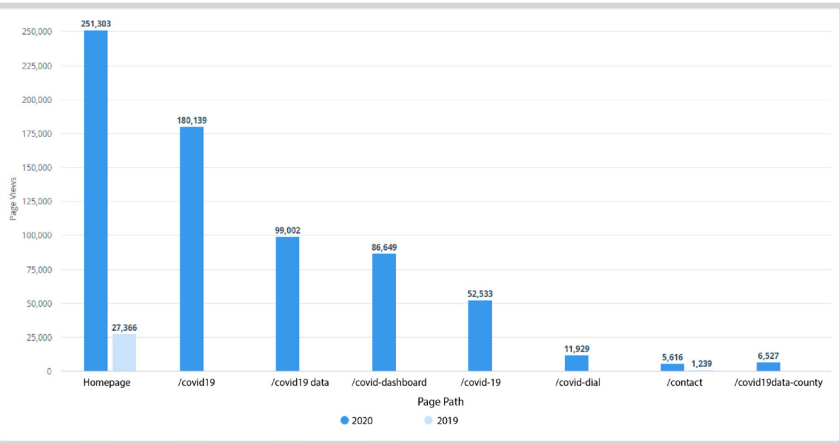
The communications team implemented and strengthened on-line methods, adopted multiple strategies to provide accurate and timely information to the public and adapted a variety of formats, platforms and languages to reach our growing minority communities and to overcome disinformation from disreputable sources.



This approach included a surge of briefings, social media campaigns, website development, media inquiries and interactions with local and state media escalating the amount of time and effort to disseminate public information. Our efforts were rewarded as we saw a huge increase in awareness of public health and our NCHD.

Press Releases

**58** and **48**  
English Spanish  
Translated



Local and National

**55+**  
Media Inquiries

*Top Left* - NCHD's website analysis shows that total site sessions, unique visitors and traffic over time all increased exponentially in 2020 compared to 2019 (identified in red). *Middle* - Compared to last year, website traffic increased exponentially. *Bottom* - NCHD website audience is targeted locally but has interested audiences as far as northern China.





NCHD's Facebook page saw our posts reaching over seven thousand people in mid-April as COVID-19 became a public health crisis. It continued to stay strong through 2020.



**Facebook**

- 3,998 Followers (compared to 1,219 in 2019)

**Top Locations**

- Sterling - 1,048
- Ft Morgan - 513
- Yuma - 308
- Brush - 234
- Wray - 176
- Holyoke - 160
- Akron - 147
- Wiggins - 67
- Haxtun - 62
- Denver - 58
- 82% Women  
17% Men  
(the majority of family health decisions are made by women)

**Languages**

- English - 3,540
- Spanish - 197
- English (UK) - 58
- Spanish (Spain) - 13
- Portuguese (Brazil) - 7

**Partner/Organizational Meetings and Updates**

890+

**Calls and/or Zoom Sessions**



**Twitter**

- 191.1k Impressions Earned (compared to 11.8k in 2019)
- 1% Engagement rate
- 176 Link Clicks
- 479 Followers (compared to 64 in 2019)

**Social Media Posts**

200+

**Up 100% from 2019**



**Instagram**

- 248 followers
- 159 post

**Top locations**

- Sterling - 19%
- Ft Morgan - 9%
- Denver - 6%
- Yuma - 3%
- Holyoke - 3%

**Age Range**

- 18-24 - 3%
- 25-34 - 24%
- 35-44 - 29%
- 45-54 - 26%
- 55-64 - 10%
- 65+ - 6.3%
- 74% Women  
26% Men

# ENVIRONMENTAL HEALTH

NCHD's Environmental Health Division protects our communities from environmental hazards through focused efforts on food safety, water and air quality, and zoonotic disease. Our staff are referred to as generalists, because of their work in every program we offer, performing various inspections, licensing facilities and providing education on a number of topics.

In addition to regular duties in 2020, the environmental health staff also aided Logistics and Continuity of Operations for the COVID-19 Response. Since child care inspections were no longer allowed in person, the task of taking on virtual inspections began. The staff found a way to work with our facilities to do these inspections using whatever form of video was accessible to the facilities. This was not an easy task, but was well received by the facilities EH regulates.

The Retail Food Safety Program at NCHD is Environmental Health Division's largest program. Within our six county health district, staff visit and inspect each restaurant, grocery store, school and any other facility that store and/or serve food. Inspections are performed biannually for most facilities, or more frequently if a facility has had a history of critical violations or is the subject of complaints.

## Retail Food Establishments

243 of 395  
Inspections Facilities



Due to the closure of nonessential businesses, no inspections were conducted for Body Art Studios, Swimming Pools and Spas.

## Child Care Centers

32 of 37  
Inspections Facilities

Child Care Centers within our health district are inspected a minimum of once per year. The rules and regulations governing child care centers, along with the environmental health inspections performed, assure and maintain minimum health and sanitation requirements. Environmental Health should not be confused with the Division of Child Care in the Colorado Department of Human Services, which licenses child care facilities.



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*"COVID has been a very trying experience for the EH division. Keeping up with the order updates while having new interactions with citizens who had different views on the pandemic was a challenge. Some were mad and some were scared and some just didn't know what to do."  
Said Mel Bustos, EH Manager*

# ENVIRONMENTAL HEALTH

## Water Testing

NCHD tests public and private drinking water for bacterial contamination. It is recommended that private wells be tested annually for bacteria or more often if there are known problems with well water in that area. This is especially important if problems such as flooding or land disturbances have been experienced and if replacing or repairing any part of a well system.

### Water Sample Testing

931  
For bacteria



### Food Service Workers

30  
ServSafe Trained

### Septic Permits

148  
Issued

On-site wastewater treatment system permits are required for any building creating wastewater flow that is not connected to a city sewer. Any new system or repair of an existing system requires a permit from the health department. Systems are inspected to ensure compliance with the regulations approved by the NCHD Board of Health.

### Food Handlers

24  
Trained through  
NCHD Interventions

## Food Safety Training

NCHD helps keep Northeast Colorado consumers safe by encouraging all food service employees to take food safety trainings. With the cooperation of CSU Extension, NCHD offers two courses for facilities to choose from.



**Vital Record Distributions**

The Northeast Colorado Health Department serves as the Vital Records registrar for Logan, Morgan, Phillips and Washington Counties. NCHD can provide certificates if the individual was born or died in Colorado. Birth certificates are available for Colorado births dating back to 1906. Certain death records may require a waiting period. Below are the number of certificates requested from each serviced county:

**Logan County**

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Birth Certificates	960
Death Certificates	1821
Free Veteran Copy	24

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**Morgan County**

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Birth Certificates	849
Death Certificates	1853
Free Veteran Copy	45

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**Phillips County**

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Birth Certificates	56
Death Certificates	300
Free Veteran Copy	10

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**Washington County**

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Birth Certificates	15
Death Certificates	23
Free Veteran Copy	1

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*"I am proud of how the WIC program and staff were quick to change procedures during the pandemic by implementing new methods of contact with our customers to keep them safe without interruptions of benefits or nutritional services." Said Jodi Murray, WIC Educator and Deputy Registrar*



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## The Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

WIC is a nutrition program that provides supplemental nutritious foods, personalized nutrition education, breastfeeding support, and referrals to health services and other community resources.

WIC eligibility requirements include:

- Be a pregnant, breastfeeding (up to one year postpartum) or non-breastfeeding (up to six months postpartum) woman; an infant; or child up to five years of age.
- Be income-eligible (individuals who participate in other programs such as Medicaid, Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance to Needy Families (TANF)) may automatically be income-eligible.
- Have identification and proof of income and address.

Preserving access to WIC food benefits, nutrition and breastfeeding support, and referrals to services has been crucial during the pandemic. The actions needed to reduce the spread of the COVID-19 virus negatively impacted the American economy, creating significant challenges for low-income individuals. The Families First Act adjusted WIC operations to allow participants access to WIC benefits while minimizing personal contact. The USDA approved the following WIC program operational waivers to protect WIC participants and providers from COVID-19 exposure:

- Physical presence waivers: removed requirements for in-person office visits for enrollment or re-enrollment and provided the flexibility to postpone weight, length/height measurements, and hemoglobin testing.
- Remote issuance waivers: suspended the requirements for in-person pickup of electronic benefits transfer (EBT) cards and allowed food benefits to be issued remotely.

Enrollment  
**2110**  
On Average



Average Vouchered  
**1891**  
Participants

Vendor EBT  
**\$1,192,494**  
In Sales



## Immunizations

An essential part of public health, immunizations are available at all six of our locations, one day per week in each office. We also provide additional walk-in immunization clinics during back to school and flu season.

Total  
**1003**  
Patients



During 2020, we were able to provide immunization services in all 6 of our counties but had to temporarily reduced clinic hours in Phillips, Sedgwick and Washington counties due to the COVID-19 response. In addition, some community outreach activities and recall/reminder services have been suspended or delayed as well. During the summer and fall, a Back to School immunization campaign “Delete Disease” and a Flu vaccine campaign- “Flu Fighter” were developed. Immunization reminder cards were sent to children and teens for 4th birthday, MMR and HPV as well as technical support was provided to local schools and childcare centers for Colorado’s annual immunization reporting.

Total Vaccines

**1611**  
Administered

	Vaccines Administered	TB Skin Tests	Patients
Logan	314	51	261
Morgan	603	29	273
Phillips	98	0	74
Sedgwick	26	0	26
Washington	40	0	29
Yuma	530	0	340

Total TB Skin

**80**  
Tests



## Communicable Diseases

A core duty of public health is the tracking and control of communicable disease. Communicable diseases are spread by physical contact with an infected person, contact with a contaminated surface or object, bites from infectious insects or animals and airborne transmission.

All hospitals, physician offices and laboratories are required to report positive communicable disease information to health departments, per state regulations. Public health investigates illnesses and outbreaks to halt further transmission. Below are the past years case counts for communicable diseases in northeast Colorado.

The below numbers represent the combined diagnosis totals of all six of our counties.

### Communicable Diseases

# 127

Reported in 2020



Diagnosis	2016	2017	2018	2019	2020
Campylobacteriosis	31	39	56	44	31
Cryptosporidiosis	12	12	12	2	1
Giardiasis	3	8	4	2	4
Hemolytic Uremic Syndrome	0	0	0	1	1
Influenza - Hospitalized	28	48	60	62	42
Legionellosis	3	0	1	0	1
Pertussis	7	3	0	9	0
Salmonellosis	31	24	22	21	35
Shigellosis	0	7	1	4	2
STEC (Shiga Toxin Producing E.coli)	13	8	12	15	9
Tularemia	1	0	0	1	0
West Nile Virus	9	5	10	4	1
<b>Total</b>	<b>138</b>	<b>154</b>	<b>178</b>	<b>165</b>	<b>127</b>



“  
**Brandee  
Martinez**  
“It was a challenging year. Clinic frequencies decreased due to nurse availability, however we pulled together as a team and were able to meet the demand of our community.”

**Reproductive Health  
(Family Planning)**

This Program provides quality services, helping to meet the reproductive health and birth control needs of men and women in Northeast Colorado. Services provided include abstinence counseling, physical exams, pap smears, adolescent healthy relationship counseling, pelvic exams, clinical breast exams, substance use screening, STI testing and treatment, pregnancy tests, several forms of birth control with birth control counseling.

Clinic  
886 to 461  
Visits Individuals

Our goal is to help our clients make informed decisions, allowing them to take charge of their reproductive health. We continued Family Planning services throughout 2020 including in-person clinic visits.

STI Tests  
246  
(Gonorrhea and Chlamydia)

Cervical Cancer  
45  
Screenings

## LifeSource Project

The LifeSource Project is a program focused on preventing youth suicide in our region. LifeSource helps remove financial barriers for youth at risk for suicide to get them the help they need.

Referrals for

40

Students



*"The pandemic created a lot of stress for individuals, families, organizations and entire communities. While public health measures were important, the resulting stress took a toll on our mental health." Said Michelle Pember-ton, Public Health Planning & Grants Specialist*



# CLIENT SERVICES

## Specialty Clinics

Through the Children's Hospital and CU Medicine Outreach Clinics we reduce barriers to families such as cost, lost work or school time and travel. Hosting specialty clinics at our main locations minimizes the number of trips to the Front Range for those families. Clinics are available for children ages birth through age 24. The Colorado Children's Hospital and CU Medicine provide funding for the specialty clinics. During any specialty clinic, you can find doctors from Children's Hospital that specialize in individual needs of the patients that are on the schedule on that given day. In 2020, many of these in-person clinics had to be canceled and transitioned to telehealth. Although this was convenient, it hindered the hands-on care many of these patients need.



Specialty Outreach Clinics for Children



Children's Hospital Colorado

A Total of  
**87** at **17**  
Appointments Clinics

## Healthy Child Clinics

Healthy Child Clinics offer free vision, hearing, speech, social/emotional, developmental and dental screenings to all children ages six months to five years old. The goal is to identify any health or developmental issues early and refer to appropriate resources before any problems develop. Because of social distancing and concern of spread, most of these clinics were cancelled in 2020.

Total  
**38** at **2**  
Children Clinics



## School-Based Oral Health Services

NCHD provides Oral Care to our communities through a variety of resources. Our program contracts with local hygienists and dentists to provide screenings for school age children where they might not receive oral health care otherwise. It decreases absences in the schools by providing sealants and fluoride treatments.

Children's Dental  
Health Month  
**2370**  
Dental Hygiene Kits  
to Students



Due to the impact of COVID-19, the Oral Health Program was unable to offer services to many of our schools during the 2020 school year. Schools were not allowing visitors and, in many instances, children were not even allowed in the building for several months. Because of this, the NCHD oral health staff focused on providing education and dental hygiene kits that included a toothbrush, toothpaste, floss, timers and brushing calendars to children in our 6 counties. We also distributed over 2000 newsletters to parents of school age children to educate on the importance of dental hygiene, dental visits during a pandemic and offered resources for dental providers.

To further our educational message, the oral health program advertised on the local radio stations and in newspapers that reached all 6 counties and centered around National Children's Dental Health and National Dental Hygiene Month. We provided posters, coloring pages for coloring contests, cross word puzzles and brushing calendars for these events. We ran a holiday campaign as well that provided helpful resources around eating healthy

during the holidays. NCHD provided toothbrush kits for the holiday drive that included mental health resources and guidance on oral health.

Although COVID-19 has strongly impacted our program, we have continued to provide resources and education to fill the gaps until we are able to get back into the schools to provide dental screenings.

Holiday Drive  
**391**  
Toothbrush Kits  
Delivered



Dental Hygiene Awareness  
**2164**  
Educational Materials



"COVID has made it really hard to present in schools, provide community outreach at events and implement policy changes. Since there have been so many operational issues for the schools, tobacco usage has been put on the back burner." Said Jessica Smillie, Community Health Specialist



## Tobacco Cessation

NCHD provides tobacco prevention and cessation resources through various entities and partners throughout northeast Colorado. We serve six counties and provide numerous quit support options that engage youth, adults and expecting mothers.

The tobacco program is an important resource for our communities. Relationship building and maintaining partnerships has been crucial during the pandemic in order to expand on our fight against tobacco. During the first part of last year, and as a consequence of COVID-19, the tobacco program was placed on hold. In the spring, most employees were transitioned to more immediate COVID-19 duties reducing the resources usually dedicated to the tobacco program. However, by the fall of 2020, additional employees were hired enabling the program to operate at full capacity once again.

The last few months of 2020 and on into 2021, was dedicated to getting the tobacco program back on track. During that time, we held several tobacco presentations in those middle and high schools that are now allowing visitors, and reformed tobacco youth coalitions in each school to address vaping concerns and overuse by students. Additionally, preventative measures and education to school staff and parents are being provided by our tobacco team through newsletters and presentations. Educational materials include: Tobacco posters, Quit Kits, CO Quit Line cards, and mental health awareness cards to schools in our 6 counties in northeastern Colorado.

In other segments of our community, we participated in tobacco cessation efforts and partnered with local healthcare and medical providers, multi-unit housing managers and fitness centers.

Presentations

5

and events



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**Mechelle Beck**

“Maintaining partnerships and strengthening relationships with organizations was a challenge. Social distancing interrupted our key communication methods, while resources were diverted to more immediate needs - It's been tough.”

Educational Newsletters

570

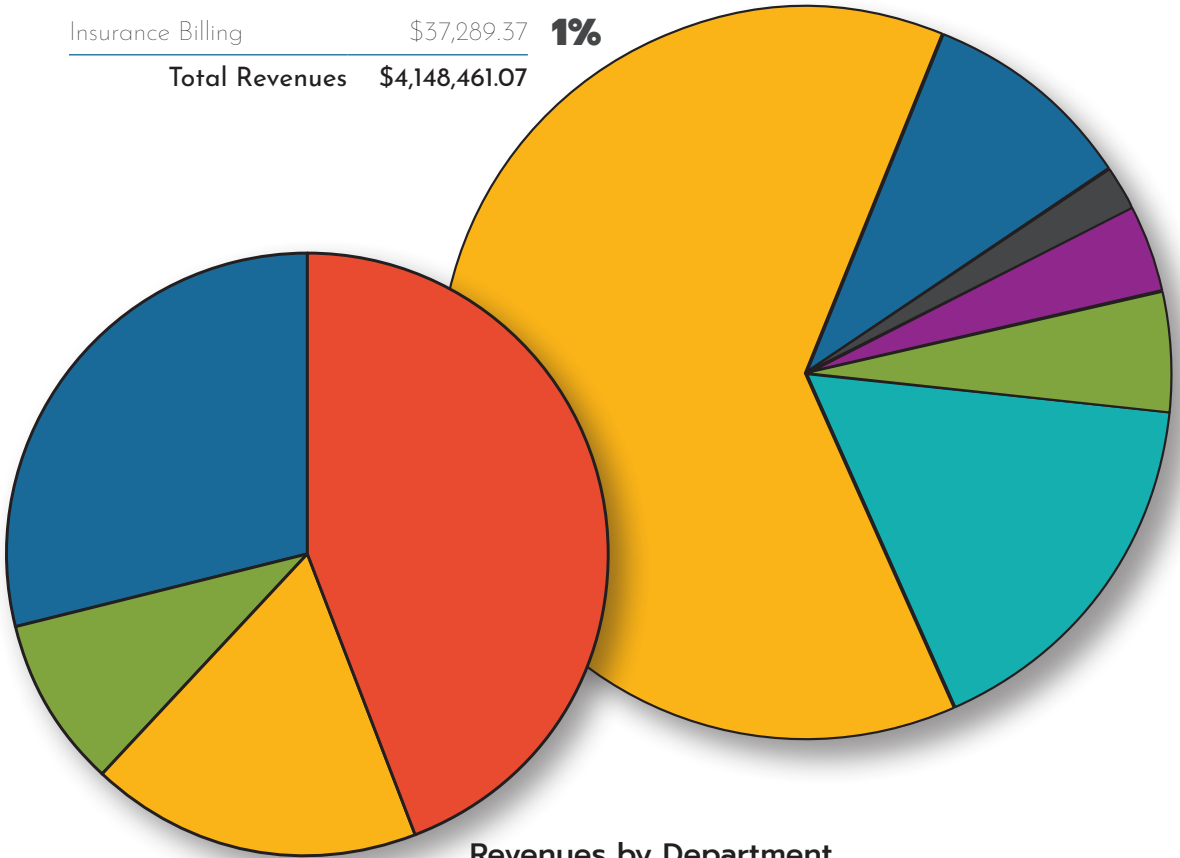
to Parents



# ANNUAL FINANCIALS

## Revenues

Miscellaneous Revenue	\$167,700.54	<b>4%</b>
State Per Capita	\$217,578.00	<b>5%</b>
County Per Capita	\$697,956.00	<b>17%</b>
Contracts & Grants	\$2,632,615.27	<b>63%</b>
Fees	\$395,321.89	<b>10%</b>
Insurance Billing	\$37,289.37	<b>1%</b>
<b>Total Revenues</b>	<b>\$4,148,461.07</b>	

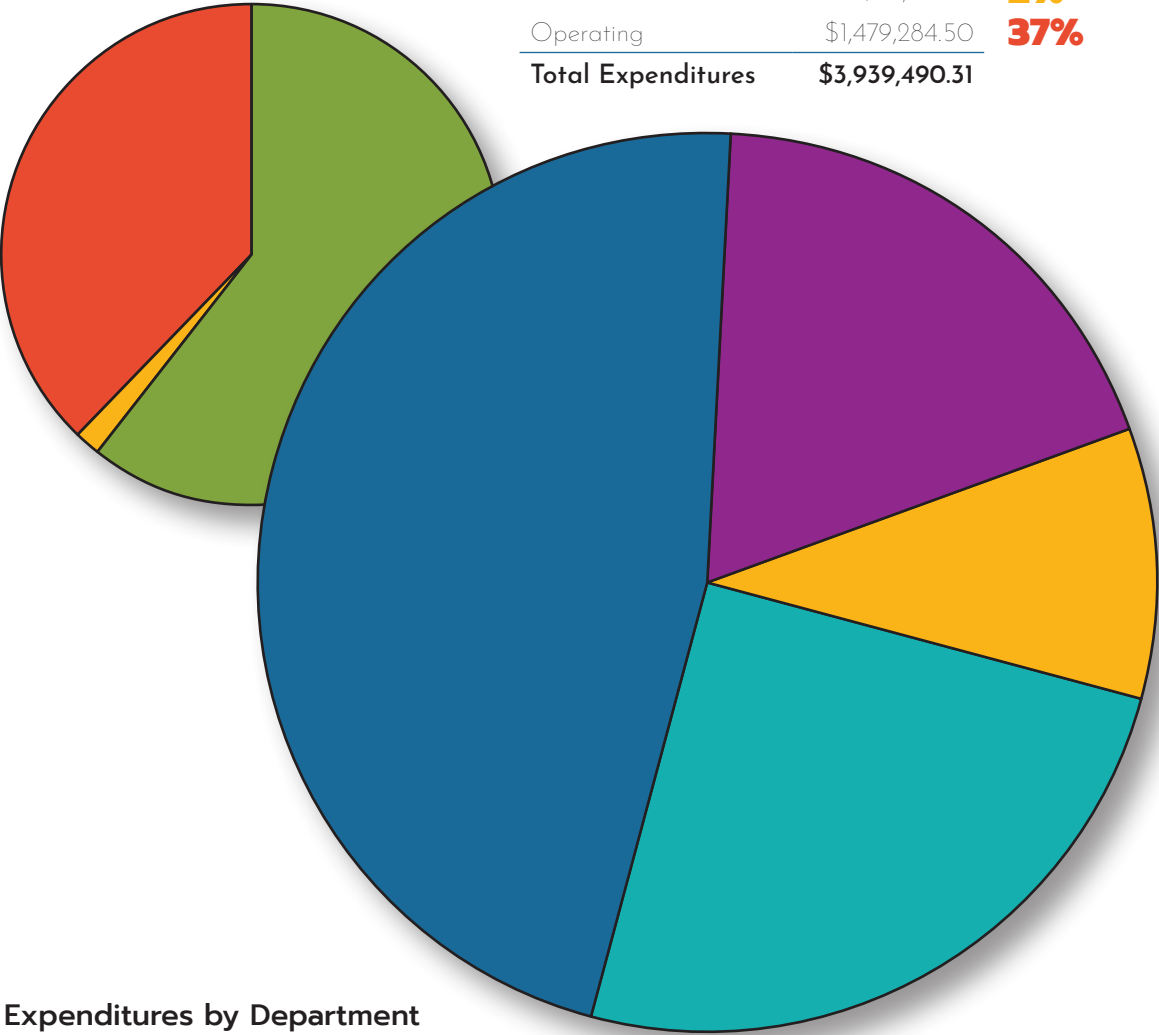


## Revenues by Department

Nursing	\$1,833,486.62	<b>44%</b>
COVID-19	\$740,366.99	<b>18%</b>
Environmental Health	\$384,107.39	<b>9%</b>
Admin & EPR	\$1,190,500.07	<b>29%</b>
<b>Total</b>	<b>\$4,148,461.07</b>	

### Expenditures

Salaries /Related	\$2,393,393.57	<b>61%</b>
Travel	\$66,812.24	<b>2%</b>
Operating	\$1,479,284.50	<b>37%</b>
<b>Total Expenditures</b>	<b>\$3,939,490.31</b>	



### Expenditures by Department

Nursing	\$1,840,242.91	<b>47%</b>
COVID-19	\$734,876.43	<b>18%</b>
Environmental Health	\$380,489.25	<b>10%</b>
Admin & EPR	\$983,881.72	<b>25%</b>
<b>Total Revenues</b>	<b>\$3,939,490.31</b>	



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