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Introduction

CDPHE is submitting this performance plan in accordance with the State Measurement for Accountable, Responsive and Transparent (SMART) Government Act (C.R.S. 2-7-204) and provides information related to the required components of the statewide performance management system implemented to manage the principal departments of the Executive Branch. Contained within this document are the organizational mission, vision, guidelines & commitments, department description, organizational chart, an overview of the Department's FY26 Wildly Important Goals (WIGs) along with the strategies that support each goal, FY25 Inclusion, Diversity, Equity and Accessibility efforts, FY25 process improvement efforts, and a FY25 performance evaluation.

Department Mission, Vision, Guidelines & Commitments

Mission

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

Vision

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

Guidelines & Commitments

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

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

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

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

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

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

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

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

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

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

Department Description

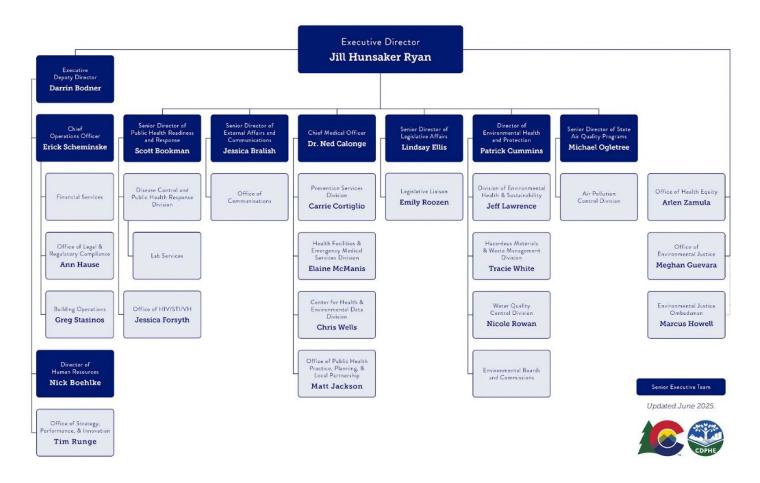
The Colorado Department of Public Health and Environment (CDPHE) is one of 21 cabinet-level departments whose executive director is appointed by the Governor. Jill Hunsaker Ryan, MPH, is the department's executive director, appointed by Governor Polis as a cabinet member in 2019. The department serves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

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

The department has over 2,200 employees, with the vast majority working at the offices in Glendale and the State Lab in Denver. CDPHE also has a satellite office in Grand Junction. Most employees use a hybrid schedule.

The department's total appropriation for FY 2025-26 is \$865.8 million. Of this amount, \$725.4 million, or 83.8%, is generated through fees and federal grants. The remaining \$140.4 million, or 16.2%, is from the General Fund. The statutory authority for the department is found predominantly in Title 25 of the Colorado Revised Statutes.

CDPHE Organizational Chart



FY25-26 WIGs & Strategies

WIG 1: Reducing Emissions & Improving Air Quality | GHGs

Support the adoption and implementation of new regulations and policies that will result in estimated reductions of greenhouse gas (GHG) emissions totaling 1,000 additional kilotons of CO2e per year once fully implemented for an estimated total of 20,130 kilotons of CO2e emissions reduced since July 2022, by June 30, 2026.

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

Lead Division: Air Pollution Control Division

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

Summary: Climate change poses an urgent and growing threat to the public's health, ecosystems, and the economy. In Colorado, its effects are already visible—more frequent extreme weather, longer wildfire seasons, prolonged drought, disease outbreaks, and tree loss from beetle infestations. These disruptions endanger communities and strain resources.

While climate change is a global issue, progress requires bold state-level action. Colorado has made significant strides in recent years, enacting programs and regulations to cut greenhouse gas (GHG) emissions and transition to cleaner technologies. The FY26 Wildly Important Goal (WIG) advances this work by targeting an annual reduction of 1,000 kilotons of CO₂e—an ambitious but achievable step aligned with the Greenhouse Gas Roadmap 2.0.

This WIG focuses on high-impact sources such as landfill methane, coal mine emissions, and industrial sectors covered under the GHG Crediting and Tracking System (GHG CATS). It leverages updated emissions data, inclusive stakeholder input, and innovative tools like the proposed Industrial Decarbonization Fund.

By integrating regulatory authority, market-based solutions, and community engagement, this initiative will reduce emissions, improve air quality, and protect the public's health. It also supports economic development through clean energy innovation, job creation, and equitable investment in disproportionately impacted communities—keeping Colorado on track to meet its 2025 and 2030 climate goals.

Strategies

- 1. **Landfill GHG Reduction Rulemaking**: Promulgate a final rule to reduce greenhouse gas (GHG) emissions from landfills by August 31, 2025.
- 2. **Statewide GHG Inventory Update**: Update and publish the statewide GHG inventory, incorporating the latest emissions data by December 31, 2025.
- 3. **GHG Crediting and Tracking System (GHG CATS) Implementation**: Successfully implement the first year of the GHG Crediting and Tracking System (GHG CATS) to support the Greenhouse Gas Emissions and Energy Management for Manufacturing (GEMM II) regulation, ensuring full operational functionality of the tracking system by June 30, 2026.
- 4. Industrial Decarbonization Fund Proposal: Develop a formal proposal for an Industrial Decarbonization Fund to support Greenhouse gas Emissions and Manufacturing Management (GEMM) and other industrial sectors by June 30, 2026.

WIG 2: Reducing Emissions & Improving Air Quality | Ozone

Support the adoption and implementation of new regulations and policies that will result in estimated reductions of ozone precursor emissions totaling 4,200 additional tons per year once fully implemented for an estimated total of 29,421 tons of ozone precursor emissions reduced since July 2022, by June 30, 2026.

Context Statement: Successful completion of this goal will result in cleaner air that benefits the public's health, the economy, and improves our shared public spaces.

Lead Division: Air Pollution Control Division

Alignment: This goal directly supports the Governor's Bold Priorities by improving air quality, reducing emissions, and advancing Colorado's leadership in energy and environmental sustainability. By cutting harmful pollution, it helps combat climate change and lowers health risks like asthma, especially in high-ozone areas such as the Denver Metro and North Front Range. It also strengthens the economy by driving innovation, creating clean-energy jobs, and reducing healthcare costs. Through strategic planning and rulemakings, CDPHE ensures efficient government action. Collaboration with communities, local governments, and stakeholders makes this a shared effort, reinforcing Colorado's commitment to sustainability, public health, and economic growth.

Summary: Ground-level ozone is one of Colorado's most urgent and persistent air quality challenges, posing serious risks to both public health and the environment. Ozone exposure damages lung tissue, exacerbates asthma, increases the risk of cardiovascular disease, and contributes to premature death. It also harms forests and crops. Health impacts fall disproportionately on low-income communities and communities of color, underscoring the need for equitable solutions.

The Denver Metro/North Front Range (DMNFR) region consistently fails to meet federal ozone standards. In July 2021, the EPA reclassified the area from "serious" to "severe" nonattainment, driven by persistent exceedances along the I-25 corridor. Contributing factors include local

pollution, weather patterns, and the broader impacts of climate change. Although ozone levels are beginning to decline, progress remains too slow to meet health-based standards, largely due to complicating factors like Colorado's mountainous terrain, increasingly hot summers, wildfires and pollution sources external to the state.

The FY26 WIG sets a bold but achievable target: reduce ozone precursor emissions by 4,200 tons per year. This will require new strategies that impact the oil and gas sector, and targeting specific emissions such as landscaping equipment, through new regulations, expanded programs, and sustained community engagement. By leveraging regulatory tools and proven strategies, CDPHE is well-positioned to meet this goal and deliver cleaner air, healthier communities, and long-term environmental benefits.

For more data on ozone, see "Ozone exceedance data".

Strategies

- 1. Lawn and Garden Equipment Electrification: Implement a regulation requiring an increased percentage of commercial lawn and garden equipment to be electric-powered, reducing NOx and VOC emissions by May 31, 2026.
- 2. **NOx Intensity Program Expansion**: To achieve additional emissions reductions in the oil and gas sector, expand the NOx Intensity Program by proposing one additional rulemaking to the Air Quality Control Commission by June 30, 2026.
- 3. **Daily Air Quality Forecasting:** Provide accurate daily air quality forecasts for at least 358 days in FY26 by June 30, 2026.

WIG 3: Operational Efficiency - Air Pollution Control Division

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

Context Statement: Successful completion of this goal will ensure cleaner air and better public health outcomes and aligns with environmental justice goals. It reflects a commitment to efficient governance and environmental stewardship, benefiting all communities by reducing pollution and promoting sustainability.

Lead Division: Air Pollution Control Division

Alignment: This WIG directly supports the Governor's Bold Priorities by advancing environmental sustainability and public health—key pillars of the vision for a cleaner, more sustainable Colorado. By increasing the number of processed permits, this effort helps improve air quality and reduce emissions, reinforcing the state's commitment to combating climate change. Additionally, streamlining the permitting process enhances efficiency in government operations, demonstrating innovation and accountability. This initiative reflects the Governor's dedication to protecting public health while ensuring a well-managed and environmentally responsible state.

Summary: This WIG is a strategic initiative led by the Title V major source permitting team to address the growing complexity and volume of air permit applications. This effort is urgent because the Denver Metro/Northern Front Range region has been repeatedly downgraded for failing to meet ozone standards—moving from Moderate to Serious, and most recently to Severe nonattainment. This shift has dramatically increased both the number of permit applications and regulatory complexity, as more stringent EPA requirements and new state laws come into play.

To meet this challenge, the Air Pollution Control Division has set a goal to streamline the Title V permitting process by FY27 through a deliberate and sustained expansion of workforce capacity. In FY23, the division secured authorization to grow its team from 10 to 29 staff, including new permit engineers, supervisors, contractors, and administrative support. This significant investment is designed to directly address processing backlogs, regulatory demands, and service delivery challenges.

The plan is intentionally phased, with clear annual milestones and incremental growth, allowing the division to build momentum and maintain progress over time. By aligning staffing, process improvements, and regulatory compliance under one focused initiative, the WIG reflects a realistic strategy to improve air quality, protect public health, and ensure environmental accountability across Colorado's largest pollution sources.

Strategies

- 1. **Stationary Source Technology Improvements:** Implement technology improvements for 10 priority stationary source work processes to enhance efficiency and accuracy in permit processing by June 30, 2026.
- 2. **Data Visualization Views**: Develop and deploy four new data visualization views to improve tracking and transparency of active facilities, permits, units, enforcement cases, and one additional category by June 30, 2026.
- 3. Complaint Tracking System: Complete the development and fully implement a complaint tracking system to streamline reporting and resolution of air quality concerns by June 30, 2026.
- 4. **Process Improvement Evaluation**: Finalize the evaluation and implementation of two process improvements that increase permit processing efficiency and reduce regulatory barriers by June 30, 2026.

WIG 4: Operational Efficiency - Health Facilities and EMS Division

The Health Facilities and Emergency Medical Services (HFEMS) Division will bring all five key regulatory workstreams into alignment with their FY25-established timeliness benchmarks, by June 30, 2027.

Note: The five key regulatory workstreams are: 1) Facility Licensing, 2) Facility Adverse Event Occurrence Reviews, 3) Federal Guideline Institute (FGI) Reviews, 4) Licensing Surveys, and 5) Complaint Reviews.

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

Lead Division: Health Facilities & Emergency Medical Services

Alignment: This goal supports the Governor's Bold Priorities by improving healthcare quality, accessibility, and efficiency. Faster inspections and licensing help ensure safer healthcare facilities, reduce costs, and improve patient outcomes. By streamlining regulatory processes, the Division helps healthcare providers operate more effectively, promoting economic growth and expanding access to care. Additionally, this effort strengthens government efficiency by eliminating service delays and making oversight more responsive. A stronger, more efficient healthcare system means a healthier, more resilient Colorado—one that aligns with the Governor's vision for a prosperous state prepared to meet future healthcare challenges.

Summary: The Health Facilities & Emergency Medical Services (HFEMS) Division has demonstrated that ambitious goals can be achieved with strategic focus and operational improvements. Initially, the FY25 target aimed to increase the completion of inspection processing actions from 1,200 to 1,600 per year by June 30, 2025. However, HFEMS has already completed over 6,000 actions—far surpassing expectations. This success highlights the Division's expanded capacity and the effectiveness of recent process enhancements, including staffing increases, workflow improvements, and targeted training.

Since July 1, 2024, HFEMSD has filled 49 vacant and newly created positions- including 12 key vacancies with new general fund dollars - strengthening its ability to handle increasing workloads. Additionally, the Division has established clear benchmarks and acceptable timelines for each of its five key workflows. Process mapping and improvement efforts have already been completed in four of the five critical regulatory workstreams—occurrences, complaints, FGI plan review, and licensing actions. These efforts have already improved service delivery efficiency, setting the stage for sustained progress.

Given the substantial gains made in just one year, the original WIG, which aimed to increase processing actions to 2,400 per year by June 30, 2027, has been updated to focus on improving timeliness across the five key workstreams in the Division. Targets for timeliness in FY26 and FY27 will reflect the Division's significantly higher capacity and efficiency. By refining workflows, streamlining workload management, and investing in staff training, HFEMS is not only committed to staying on track to meet its revised targets but is also setting a new standard for regulatory efficiency. These accomplishments demonstrate a proactive commitment to timely compliance, improved oversight, and a stronger healthcare system for all Coloradans.

Strategies

1. **Process Improvement Review**: Conduct a comprehensive review of the survey licensing investigation process to identify inefficiencies and improvement opportunities, with quarterly progress reports on findings by June 30, 2026.

- 2. **Staff Training & Alignment**: Provide quarterly training for staff in the home and community and acute survey sections to ensure alignment with evolving workload demands by June 30, 2026.
- 3. Workflow Staffing Rate Monitoring: Maintain at least an 85% staffing rate in each of the five Health Facilities and EMS Division inspection processing workflows through June 30, 2026.

WIG 5: Early Syphilis - Reduce the Incidence of STIs

Decrease the annual incidence of newly acquired early syphilis by 25%, from 1,533 cases in FY24 to 1,150 cases in FY27 by June 30, 2027.

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

Lead Division: Office of STI/HIV/Viral Hepatitis (OSHV)

Alignment: This initiative aligns with the Governor's priorities by improving the public's health, promoting inclusivity, and using state resources efficiently. Reducing early syphilis cases lowers healthcare costs and prevents severe health complications. The plan prioritizes underserved communities, ensuring equitable access to testing and treatment. By leveraging existing public health infrastructure and partnerships, it maximizes impact without unnecessary spending.

Additionally, the focus on prevention—through expanded testing and immediate treatment—supports the Governor's vision for proactive healthcare, reducing long-term disease burden, transmission and health care costs. This targeted, cost-effective approach advances the state's commitment to healthier communities and more efficient public health management.

Summary: Syphilis is a curable sexually transmitted infection (STI), but if left untreated, it can lead to serious and irreversible health consequences, including neurological damage, blindness, and hearing loss. Between 2019 and 2023, Colorado saw a 128% increase in syphilis cases—rising 84% among men and 330% among women. Cases of congenital syphilis surged by 364%, highlighting persistent health inequities, especially among those with histories of incarceration, substance use, or housing instability.

To reverse this trend, CDPHE has set a Wildly Important Goal to decrease the annual incidence of newly acquired early syphilis by 25%, from 1,533 cases in FY24 to 1,150 cases in FY27. This goal targets recent infections—where intervention is most effective—and reflects a focused, prevention-first strategy.

CDPHE is deploying evidence-based approaches such as rapid testing, opt-out emergency department screenings, field-delivered therapy (FDT), and targeted outreach to disproportionately affected communities. Early data show progress, and CDPHE will build on that momentum through the Syphilis Colorado Outbreak Response Coordination Center (CORCC), stronger partnerships, and

improved access to care. With clear milestones and strategic investments, Colorado is taking decisive action to reduce new syphilis infections and advance health equity statewide.

Strategies

- 1. **Expand Non-Clinical Syphilis Testing Access:** Increase the number of individuals tested annually for syphilis in non-clinical settings through the deployment of rapid, point-of-care (POC) testing kits provided by the CDPHE from 7,500 in FY25 to 9,000 individuals in FY26 by June 30, 2026.
- 2. Improve Syphilis Treatment Rates Among Women: Increase the annual proportion of women reported to the state with syphilis who receive adequate syphilis treatment as defined by the CDC treatment guidelines from 80% in FY25 to 90% in FY27 by June 30, 2027.
- 3. Improve Syphilis Treatment Rates Among Men: Increase the annual proportion of men reported to the state with syphilis who receive adequate syphilis treatment as defined by the CDC treatment guidelines from 86% in FY25 to 90% in FY27 by June 30, 2027.
- 4. Increase Access to Field-Delivered Therapy (FDT): Increase the number of clients who receive Field-Delivered Therapy by 25%, from 80 clients accessing Field Delivered Therapy in FY25 to 100 clients accessing Field Delivered Therapy in FY26.

WIG 6: Congenital Syphilis - Reduce the Incidence of STIs

Reduce annual congenital syphilis cases by 66%, from 74 cases in FY23-24 to 25 cases in FY27 by June 30, 2027.

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

Lead Division: Office of STI/HIV/Viral Hepatitis (OSHV)

Alignment: The Governor prioritizes expanding healthcare access and improving quality, especially for vulnerable populations. CDPHE's goal to reduce congenital syphilis cases directly supports this by addressing a critical public health crisis and improving maternal and infant health statewide. The initiative targets high-risk groups, including women in correctional facilities and those seeking care in emergency departments and community health centers, ensuring they receive timely testing and treatment. By strengthening provider education and using proven, evidence-based strategies, this effort aligns with the Governor's commitment to high-quality, accessible healthcare. This WIG reinforces Colorado's public health infrastructure and advances the state's broader healthcare priorities.

Summary: Congenital syphilis, a preventable but severe condition, poses significant health risks if untreated. Infants born with congenital syphilis can suffer from serious, irreversible health issues, including nervous system and brain damage, blindness, hearing loss, and vertigo. Between 2019 and 2023, congenital syphilis cases rose by 364% in Colorado. Significant inequities in congenital syphilis

outcomes are evident, particularly among populations with a history of criminal justice involvement, substance use, and homelessness.

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

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

Strategies

- 1. **Boost Syphilis Treatment Linkage in Correctional Facilities**: Increase the annual proportion of women tested for syphilis in correctional facilities that are linked to adequate treatment from 75% in FY 25 to 80% in FY27 by June 30, 2027.
- 2. Increase Early Syphilis Testing for Medicaid-Covered Pregnancies: Increase the annual proportion of pregnant persons covered by Medicaid who are tested for syphilis within the first 250 days of gestation, from 62% in FY24 to 68% in FY25 by June 30, 2025.
- 3. Improve Timely Syphilis Treatment During Pregnancy: Increase the rate of prompt syphilis treatment within the first 250 days of gestation, for diagnosed pregnant persons from 90% in FY25 to 92% in FY26 by June 30, 2026.
- 4. Strengthen Provider Skills Through Colorado ECHO Training: Improve healthcare providers' skills in diagnosing, testing, staging, and treating syphilis by convening a series of Community of Practice sessions, led by Colorado ECHO (Extension for Community Health Outcomes), reaching at least 50 providers by June 30, 2026.

WIG 7: HIV - Reduce the Incidence of STIs

Maintain the number of new HIV diagnoses in Colorado at or below 480 cases in calendar year 2026 by December 31, 2026.

Context Statement: Successful completion of this goal will help stabilize new HIV cases in Colorado, protect the health of all residents—especially communities of color disproportionately affected by HIV—and strengthen the state's long-term efforts to end the HIV epidemic.

Lead Division: Office of STI/HIV/Viral Hepatitis (OSHV)

Alignment: This WIG supports Governor Polis's priorities by advancing health equity, innovation, and strong communities. It focuses on maintaining progress in preventing new HIV infections, particularly in communities of color that continue to face higher rates and barriers to care. By using data to guide targeted interventions, the WIG helps sustain recent gains, address persistent disparities, and protect public health. Maintaining new HIV diagnoses at or below 480 cases by the end of 2026 ensures continued alignment with statewide goals to promote health, expand access, and strengthen community resilience across Colorado.

Summary: To achieve the federal goal of ending the HIV epidemic by 2030, Colorado must sustain and deepen efforts to reduce new infections, expand access to care, improve outcomes for people living with HIV, and eliminate health disparities. Communities of color continue to be disproportionately affected. In 2022, Hispanic/Latinx individuals accounted for 40% of new HIV diagnoses, with an infection rate of 12.6 per 100,000. Black/African Americans made up 12% of diagnoses, with an even higher rate of 18 per 100,000—highlighting the need for focused, culturally responsive interventions.

Equally concerning is the rise in concurrent HIV and AIDS diagnoses, which comprised 19% of new HIV cases in 2022. Of these, 35% were among Hispanic/Latinx Coloradans and 7% among Black/African Americans. This trend points to missed opportunities for early detection and timely care.

By advancing early testing, outreach, and healthcare engagement—particularly in disproportionately impacted communities—Colorado can move closer to its goal.

Strategies

- 1. Improve Linkage to Care: Increase the proportion of newly diagnosed individuals with HIV who are linked to HIV medical care within 30 days from 85% in calendar year (CY) 2024 to 90% by December 31, 2026 (CY 2026).
- 2. **Improve Retention in HIV Care**: Increase the proportion of (People Living with HIV) PLHIV achieving viral suppression from 71% of PLHIV in CY24 to 75% of PLHIV by December 31, 2026.
- 3. **Reduce Late-Stage HIV Diagnoses**: Decrease the annual number of late-stage HIV diagnoses among Black, Indigenous, and Hispanic populations from 64 in CY24 to 57 in CY26 by December 31, 2026, through increased awareness of HIV status.
- 4. **Strengthen PrEP Uptake**: Increase the percentage of navigation clients who received PrEP (pre-exposure prophylaxis) prescription medication from 80% in CY 2024 to 85% by December 31, 2026.

WIG 8: Increase MMR Vaccination Rates

Maintain kindergarten MMR vaccination coverage in Colorado at or above 88.03% by June 30, 2026.

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

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

Alignment: Maintaining Measles, Mumps, and Rubella (MMR) vaccination coverage among kindergarteners at or above 88.03% directly supports the Governor's Bold Priorities by safeguarding public health and strengthening community well-being. This WIG helps prevent measles outbreaks, protect vulnerable populations, and ensure children can stay healthy and in school. Sustaining current coverage is especially important as national vaccination rates decline and global measles cases rise. Through targeted outreach, school-based clinics, and evidence-based strategies, Colorado is acting to prevent backsliding and promote equity in vaccine access. This WIG reflects the state's proactive commitment to safety, health, and resilience for all Coloradans.

Summary: The COVID-19 pandemic disrupted routine childhood vaccinations, and while most age groups in Colorado have since rebounded, kindergarten rates remain a concern. For the fourth year in a row, MMR coverage among kindergartners has remained below 90%, holding steady at 88.03%. CDPHE's FY26 Wildly Important Goal is to maintain this coverage level—at or above 88.03%—through June 30, 2026.

Despite targeted efforts—including mobile clinics, direct outreach to families, and a statewide media campaign—MMR rates did not improve in FY25. However, Colorado may still be faring better than other states, many of which have seen sharper declines in vaccine uptake. National data will not be available until fall.

The urgency is clear: measles is resurging globally, and the U.S. has reported 1,088 cases across 33 jurisdictions as of May 29, 2025. Of these, 30% were in children under 5, 96% were unvaccinated, and 12% required hospitalization.

Although federal COVID-19 immunization funding supported Colorado's efforts, that funding ended in March 2025—just as the threat of measles grows. Sustained action is needed to protect children and ensure Colorado does not fall below its current MMR vaccination rate.

Strategies

- 1. **School-Based Clinics**: Conduct at least 60 targeted school-based vaccine clinics in partnership with schools that have low Measles, Mumps, and Rubella (MMR) vaccination coverage and high noncompliance rates by June 30, 2026.
- 2. **Direct Outreach**: By June 30, 2026, increase the percentage of kindergarten-aged children who become up to date with their MMR vaccinations due to direct text and email outreach to 30%, compared to 27.9% in FY25.
- 3. **Media and Outreach Campaign**: Develop and implement a statewide measles-focused media and outreach campaign to achieve at least 14 million impressions by June 30, 2026.

4. **Community Engagement**: By June 30, 2026, implement at least 40 community-based vaccine education events to promote vaccine literacy and increase vaccine confidence in low propensity/low vaccination communities.

FY26 Inclusion, Diversity, Equity and Accessibility

CDPHE will continue our sustained commitment to integrating inclusion, diversity, equity, and accessibility (IDEA) values into how we do business. Refer to the <u>IDEA Work Plan</u> for more information.

FY25 Continuous Process Improvement Initiatives and Outcomes

In FY25, CDPHE fully deployed its internal continuous improvement consultancy, a key function of the Office of Strategy, Performance, and Innovation (OSPI), with a focus on supporting improvement efforts aligned with executing the Department's strategy, achieving WIGs, and eliminating process waste. OSPI launched several initiatives to enhance Performance Management and Quality Improvement (PMQI) infrastructure at CDPHE.

Training & Development

1. Good People, Good Government Initiative
As part of CDPHE's strategic priority to foster a culture of continuous improvement, the
department launched a bold, agency-wide effort to equip employees with the tools and
mindset to drive meaningful change. Through the Change Agents Training program—an
innovation approach tailored specifically for government—staff across all levels gained
access to proven strategies for improving how we work and serve Coloradans. This hands-on
training drew from industry best practices and practical process improvement techniques to
make daily work more efficient, effective, and fulfilling.

The Office of Strategy, Performance, and Innovation (OSPI) played a key role in reinforcing these efforts, actively engaging teams to apply what they learned in real-world settings. All CDPHE employees were invited to participate in the online "Intro to Innovation" course, which introduced structured problem-solving methods and empowered staff to implement improvements in their own roles. In addition, the department launched the Leadership Innovation Academy—an intermediate program focused on adaptive leadership, root cause analysis, and leading change in complex systems.

In total, 358 staff engaged with the initiative. Forty-nine employees completed the Intro to Innovation course across six cohorts, while 16 leaders successfully completed the advanced Innovation Academy—each one becoming a champion for continuous improvement at CDPHE.

PMQI Communications & Resources

2. OSPI Quarterly Newsletters & Annual Report
A newly developed quarterly newsletter and annual report provided a mechanism for sharing information about progress in the areas of quality improvement, performance management,

strategic planning, system design, and digital accessibility in partnership with the rest of CDPHE, toward executing the Department's strategy.

3. Revamped Intranet & QI Tools Library
OSPI developed a Tools Library to empower staff to practice reliable methods to improve
day-to-day work within their locus of control. Tools include process mapping, fishbone
analysis, 5 whys, spaghetti diagrams, eight wastes, standard work, and communication
circles.

PMQI Maturity

4. Quality Culture Assessment

In March 2025, CDPHE conducted a department-wide Quality Culture Assessment utilizing the National Association of City and County Health Officials (NACCHO) Organizational Culture of Quality Self-Assessment Tool. The tool was developed to assess the maturity of CDPHE's Quality Culture including all the people, systems and structures foundational to developing a culture that values, models, and promotes continuous quality improvement (QI). CDPHE received 435 responses resulting in a comprehensive score of 4.1 on a 6-point scale, indicating "Formal QI Exists in Specific Areas of the Agency". Transition strategies will be identified to move the department towards "Formal Agency-wide QI".

Team Capacity

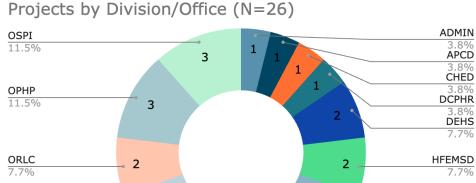
- 5. Increased team capacity
 The strategic expansion of the OSPI team, bolstered by three new hires: a Digital
 Accessibility Program Administrator, a Strategy and Performance Coordinator, and a Quality
 and Performance Improvement Consultant, will sustain the momentum of quality and
 performance improvement efforts, solidifying CDPHE's commitment to excellence and
 innovation in public health and environmental protection.
- 6. Team capacity forecasting tool
 OSPI implemented a time forecasting tool for the purpose of improving decision-making and
 team operations by leveraging historical data to inform future trends. The tool has
 optimized resource allocation, allowing for informed strategic decisions and prioritization.

FY25 CDPHE Quality Improvement Projects

In FY25, the Office of Strategy, Performance, and Innovation (OSPI) responded to a surge in demand for its expertise, receiving 26 improvement and consultancy project requests from 20 different divisions and offices across CDPHE. These projects reflected the department's growing commitment to data-driven decision-making and operational excellence.

The requests spanned a wide spectrum—from system design and quality improvement to business intelligence and high-impact, department-wide initiatives. Each engagement was an opportunity to streamline processes, improve outcomes, and build internal capacity for continuous improvement.

Of the 26 total projects, OSPI successfully completed 11 during the fiscal year. Thirteen are actively moving forward, while only two were discontinued. The visual below highlights the breadth of this work, showcasing how divisions across CDPHE are increasingly turning to OSPI as a trusted partner in driving innovation and results. These efforts are aligned with CDPHE's Strategic Goal 4.5: to promote a culture of continuous improvement throughout the department.



 OHE
 1

 3.8%
 3.8%

 OFS
 3

 11.5%
 3

 BDO
 11.5%

ADMIN: Administration

APCD: Air Pollution Control Division

CHED: Center for Health and Environmental Data DCPHR: Disease Control and Public Health Response

Division

DEHS: Division of Environmental Health and

Sustainability

EDO: Executive Director's Office

HFEMSD: Health Facilities and Emergency Medical

Services Division

HMWMD: Hazardous Materials and Waste Management

Division

OFS: Office of Financial Services OHE: Office of Health Equity

OPHP: Office of Public Health Practice,

Planning & Local Partnerships PSD: Prevention Services Division

ORLC: Office of Legal & Regulatory Compliance OSPI: Office of Strategy, Performance and

Innovation

Outcomes of Quality Improvement Efforts

The outcomes from these projects were many and varied, but the majority focused on streamlining processes, building new processes, or aligning teams around common goals.

Efficiency/Quality Outcomes:

- Developed a more reliable method for communicating environmental incident reports
- Developed a more reliable and efficient method for intaking new staff for timekeeping
- Developed a faster and more effective method for onboarding new staff
- Standardized leave request intake and processing for increased efficiency and reliability
- Streamlined and standardized methods for managing grant funding in DCPHR
- Improved the process for issuing health facility licenses to shorten the time for issuance

 Improved the process for reviewing solid waste permitting documents, increasing the review completion percentage

Process Development Outcomes:

- Built a process for receiving and responding to Digital Accessibility requests from the public
- Built a process for handling ADA requests from staff

Alignment:

• Engaged with 15 different departments or work units to develop annual work plans for that unit, leaving them with common goals and plans for achieving them

FY25 Performance Evaluation and Governor's Dashboard

CDPHE has made great progress on the goals contained within the FY25 performance plan. The summary below provides an overview of accomplishments and the status of each of the priority areas as of June 30, 2025. For additional details on the strategies, access the online CDPHE
Performance Plan Dashboard.

WIG 1.1 Reducing Emissions & Improving Air Quality: GHGs

Support the adoption and implementation of new regulations and policies by June 30, 2025, that will result in estimated reductions of greenhouse gas (GHG) emissions totaling 1,000 kilotons of CO2e per year once fully implemented.

Strategies to support this WIG:

- Electric school bus grants
- Promulgate two rulemakings to support GHG emissions reduction
- Implement a strategy that promotes clean technology in oil and gas reductions

Metric	FY2024 Baseline	FY2025 Outcome*
Reductions in GHG emissions totaling 1,000 kt CO2e/year	0	511

^{*}Provisional data as of May 2025

Note: One rulemaking target is unlikely to be reached during FY25 due to delays and the electric school bus grants were canceled.

WIG 1.2 Reducing Emissions & Improving Air Quality: Ozone Precursors

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

- Air quality assurance daily forecasts
- Nitrogen oxides intensity report review

- Form a Nitrogen oxides reduction committee and identify opportunities for reducing NOx in the upstream oil and gas sector
- Evaluate lawn and garden regulations for improvements

Metric	FY2023	FY2024 Baseline	FY2025 Outcome*
Reductions in ozone precursor emissions totaling ~11,700 tons/year	12,708	12,513	11,700

^{*}Provisional data as of May 2025

WIG 2.1 Operational Efficiency: Air Pollution Control Division

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

Strategies to support this WIG:

- Improve staffing with hiring
- Conduct process improvement evaluation
- Stationary source system modernization- Phase I
- Stationary source system modernization- Phase II
- Improve public comment efficiency

Metric	FY2024 Baseline	FY2025 Outcome*
Completion of Title V major source permit reviews, requests, and approvals from 50 to 120 per year by FY27	50	66

^{*}Provisional data as of May 2025

WIG 2.2 Operational Efficiency: Health Facilities & EMS Division

The Health Facilities & EMS Division will increase completion of inspection processing actions from 1,200 per year to 2,400 per year by June 30, 2027.

- Fill vacancies
- Establish workflow efficiency benchmarks and timelines
- Enhance data and process accuracy
- Optimize workforce deployment

Metric	FY2024 Baseline	FY2025 Outcome*	FY2026 Goal	FY2027 Goal
Increase completion of inspection processing actions from 1,200 per year to 2,400 per year by FY27	1,200	5,948	2,000	2,400

^{*}Data as of March 2025 (Q3)

WIG 3.1 Reduce the Incidence of STIs: Syphilis

Decrease the annual incidence of syphilis by 25%, from 3,535 cases in FY24 to 2,651 cases in FY27 by June 30, 2027.

Strategies to support this WIG:

- Expand rapid testing access
- Implement universal syphilis screening in collaboration with Emergency Departments
- Increase treatment completion (women)
- Increase treatment completion (men)

Metric	FY2024 Baseline	FY2025 Outcome*	FY2026 Goal	FY2027 Goal
Decrease the annual incidence of syphilis from 3,535 cases in FY24 to 2,651 cases in FY27	3,535	2,905	3,005	2,651

^{*}Projection as of May 2025 (based on data from July 1, 2024 - March 31, 2025)

WIG 3.2 Reduce the Incidence of STIs: Congenital Syphilis

Reduce annual congenital syphilis cases by 48%, from 148 projected cases in FY24 to 77 cases in FY27 by June 30, 2027.

- Boost women's treatment linkage in correctional facilities
- Expanding syphilis testing for Medicaid
- Enhancing prompt syphilis treatment access, emphasizing high-risk groups in correctional facilities, emergency departments, and community settings
- Enhancing syphilis diagnosis and treatment through Extension for Community Health Outcomes (ECHO) Colorado training

Metric	FY2024 Baseline	FY2025 Outcome*	FY2026 Goal	FY2027 Goal
Reduce annual congenital syphilis cases from 148 projected cases in FY24 to 77 cases in FY27	148	42	100	77

^{*}Provisional data as of May 2025 (based on data from July 1, 2024 - May 31, 2025)

WIG 3.3 Reduce the Incidence of STIs: HIV

Lower new HIV cases by 12.5%, from 479 in calendar year 2023 to 419 in calendar year 2026 by December 31, 2026.

Strategies to support this WIG:

- Enhance PrEP prescription rates
- Reducing late-stage HIV diagnoses
- Recruit peer navigators for HIV care

Metric	CY2023	CY2024*	CY2025 Outcome**	CY2026 Goal
Lower new HIV cases from 479 in CY23 to 419 in CY26	479	471	185	419

^{*}CY24 cases being reviewed and finalized

WIG 4 Increase MMR Vaccination Rates

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

- Boosting vaccine rates in schools through school-base vaccine clinics
- Enhance MMR vaccination through direct messaging to parents
- Implement measles awareness media campaign

^{**}Provisional data as of May 2025 (based on data from January 1, 2025 - May 31, 2025)

Metric	FY2024 Baseline	FY2025 Outcome*	FY2026 Goal	FY2027 Goal
Increase the measles, mumps, and rubella (MMR) vaccination rates among Colorado kindergarteners from 88.3% to 95% by FY27	88.3%	88%	92%	95%

^{*}Provisional data as of May 2025 (Annual rate from the 2024-2025 school year)

WIG 5 Suicide Prevention

Reduce the age-adjusted suicide rate in calendar year 2025 by 7% by December 31, 2025 (to 19.46 per 100,000 people), compared to calendar year 2023 (20.93 per 100,000 people).

- Increase Colorado Firearm Community gun shop visits
- Expand Collaborative Assessment and Management of Suicidality (CAMS) trainings
- Expand Follow-Up project services
- Youth suicide therapy boost project in collaboration with the Second Wind Fund

Metric	CY2023	CY2024*	CY2025 Outcome
Reduce the age- adjusted suicide rate in CY25 by 7%	20.93 per 100,000 people	20.85 per 100,000 people	Provisional data available June 2025

^{*}Provisional data as of June 2025