

# STATE OF COLORADO

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**Colorado Department  
of Public Health  
and Environment**

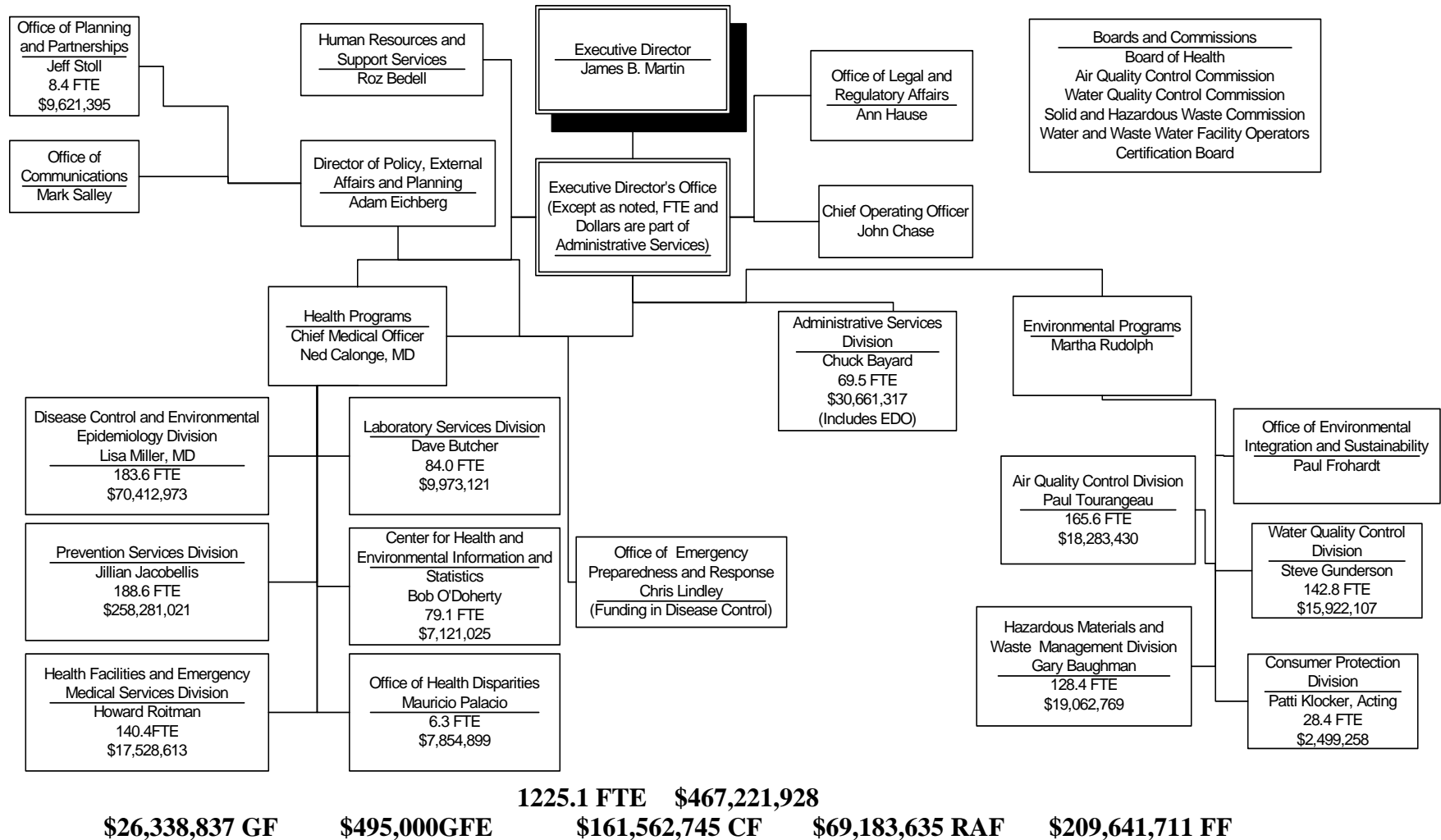
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**Department of Public Health and Environment  
Executive Director – James B. Martin**

## **Department Description**

**ORGANIZATION CHART**

Organization Chart Effective Date: October 2008



## **BACKGROUND INFORMATION**

The Colorado Department of Public Health and Environment is one of 16 cabinet-level departments whose executive directors are appointed by the governor. The mission of the Colorado Department of Public Health and Environment is to protect and preserve the health and environment of the people of Colorado. James B. Martin serves as executive director of the Department.

The Department is organized into 10 divisions that fall under three broad groupings: health programs, environmental programs and administration. Chief State Medical Officer Ned Calonge heads up the department's five health divisions, the Office of Emergency Preparedness and Response and the Office of Health Disparities. Director Martha Rudolph leads the department's four environmental divisions, plus the Office of Environmental Integration and Sustainability.

The Division of Administration includes the Executive Director's Office, business services, human resources, legal and regulatory affairs, and policy and external affairs (which includes the offices of communications, and Planning and Partnerships .) Support services includes building operations, telecommunications, and internal audit and management analysis.

In addition, the Department also serves as staff to five state appointed boards or commissions: Colorado Board of Health, Air Quality Control Commission, Water Quality Control Commission, Solid and Hazardous Waste Commission, and the Water and Waste Water Facility Operators Certification Board.

The Department serves the people of Colorado by providing high-quality, cost-effective public health and environmental protection services. The Department focuses on evidence-based best practices in the public health and environmental fields and plays a critical role in educating our citizens so they can make informed choices. In addition to maintaining and enhancing our core programs, we continue to identify and respond to emerging issues that could affect Colorado's public and environmental health.

The Department pursues its mission through broad-based health and environmental protection programs, including disease prevention; control of disease outbreaks; health statistics and vital records; health facilities licensure and certification; health promotion; maternal, child, adolescent, and women's health; tuberculosis and refugee health; prevention and treatment of sexually transmitted diseases and HIV; nutrition services; suicide and injury prevention; emergency medical services; disease prevention and intervention services for children and youth; laboratory and radiation services, and emergency preparedness. The Department's environmental responsibilities span a full array of activities, including air and water quality protection and improvement; hazardous waste and solid waste management; pollution prevention, environmental leadership; and consumer protection.

The Department has a staff of approximately 1,225 employees, with the vast majority working at the Department's offices in Glendale. There are small satellite offices in Grand Junction and Pueblo. The Department receives approximately 95 percent of its \$470 million funding from fees, grants and other non-general fund sources. The statutory authority for the Department is found in Title 25 of the Colorado Revised Statutes.

### **Overview of Health Divisions and Offices**

Disease Control and Environmental Epidemiology Division – includes programs for immunization, communicable disease, tuberculosis, viral hepatitis, environmental epidemiology and toxicology, birth defects monitoring and prevention, , refugee health and sexually transmitted infections/HIV.

This division supports the prevention and/or control of communicable diseases, assesses the risk of illness related to environmental exposures, and monitors birth defects.

Prevention Services Division – includes programs for cancer, cardiovascular disease and chronic pulmonary disease prevention, early detection and treatment; the Colorado Physical Activity and Nutrition (COPAN); cardiovascular disease and stroke prevention; the Colorado Cancer Registry; comprehensive cancer prevention and control; the Women's Wellness Connection providing breast and cervical cancer screening; diabetes control; arthritis; asthma; the Statewide Tobacco Education and Prevention Partnership (STEPP); injury, suicide and violence prevention programs, including child fatality prevention systems (as per statute); the special supplemental nutrition program for Women, Infants and Children (WIC); child and adult care food program ; child, adolescent, and school health; the Nurse Home Visitor program; the Tony Grampsas Youth Services program; the Children's Trust Fund/Family Resource Centers programs; the health care program for children with special needs; the interagency prevention systems project; family planning; the Prenatal and Prenatal Plus Programs; oral health; and rural and primary care.

The Prevention Services Division leads efforts to improve the health and well being of all Coloradans through health promotion, public health prevention programs, and access to health care.

### **Office of Emergency Preparedness and Response**

This office is responsible for all-hazards preparedness, including natural disasters, bioterrorism, pandemic flu, epidemics and other health emergencies, and hospital and emergency medical system preparedness.

Health Facilities and Emergency Medical Services Division – includes the facility and agency licensure program, the long-term care program and the emergency medical services program.

This division provides support and regulatory oversight for hospitals, ambulatory surgical centers, long term care facilities, assisted living residences and other health facilities; for emergency medical technicians and air ambulance services; and for the state trauma system.

Laboratory Services Division – includes the programs for laboratory certification, chemistry, evidential breath-alcohol testing, microbiology, newborn screening, radiochemistry, serology and toxicology.

This division supports public health activities with laboratory services including screening for newborn illnesses, breath alcohol and serum drug testing for law enforcement, bioterrorism surveillance, zoonotic disease testing (plague, West Nile Virus, hantavirus, avian flu), human disease testing (TB, STDs, vaccine preventable diseases), radiochemical and radiation testing, water and air testing, milk testing and laboratory certification.

Center for Health and Environmental Information and Statistics Division – includes the health statistics section, vital records, information technology, medical marijuana program registry, and geographic information systems.

This division gathers and analyzes health data, including the Behavioral Risk Factor Surveillance System (BRFSS), provides birth and death certificates, administers the Medical Marijuana Registry, and provides desktop, applications and network support for the department.

Office of Health Disparities – This office supports activities aimed at eliminating health disparities as seen in Colorado among communities of color, rural areas, and groups of individuals whose health and health care outcomes vary from those of other groups of citizens.

The office supports the Minority Health Advisory Committee, the Interagency Health Disparities Leadership Council, and oversees the tax funded Amendment 35 Health Disparities Grant Program.

### **Overview of Environmental Divisions and Offices**

Air Quality Control Division – includes the planning and policy program, stationary sources program, indoor air program, mobile sources program and technical services program.

This division administers the State air quality programs, which includes the regulation of air emissions from stationary and mobile sources; the regulation of asbestos and lead-based paint removal and demolition activities; the regulation of open burning; the development of air quality attainment and maintenance plans to keep Colorado in compliance with the National Ambient Air Quality Standards; the collection and analysis of ambient air quality data; and the performance of complex modeling analysis of air pollution impacts.

Consumer Protection Division – includes programs for artificial tanning, body art, child care centers, drugs, health fraud and medical devices, milk and dairy products, product safety, retail food, managing chemicals in schools, vector control and wholesale food.

This division monitors food, milk, drugs and medical devices; regulates food preparation environments such as restaurants, food manufacturers, processing plants, day care centers, correctional facilities and schools; regulates, reviews and investigates foods, consumer products and household substances; helps control insects, rodents and other vectors of animal borne diseases; and coordinates consumer protection activities with local, state and federal agencies.

Hazardous Materials and Waste Management Division – includes the radiation program, remediation program and solid and hazardous waste program.

This division administers the State regulatory programs for solid and hazardous waste, which includes the management, treatment and disposal of solid waste, and the generation, storage, transportation, treatment and disposal of hazardous waste. The division also oversees the remediation of contamination associated with the release of solid or hazardous waste at regulated private sites, federal facilities, and superfund sites across the state. “Brownfields” redevelopment is also encouraged through implementation of the Voluntary Cleanup and Redevelopment Act. In addition, the division administers the State regulatory program for radiation control, which includes the use, management and disposition of radioactive materials, and the oversight of radiation services.

Water Quality Control Division – includes the administration, watershed, clean water facilities and drinking water programs.

This division administers the State water quality and drinking water programs, which includes the regulation of discharges of pollutants into the State’s surface and ground waters; the support and regulatory oversight of the public drinking water program; the administration of the industrial pretreatment program, biosolids program and reuse program; the monitoring and assessment of surface and ground waters; the development of Total Maximum Daily Loads for Colorado’s impaired waters; administering the Drinking Water Revolving Fund and the Water Pollution Control Revolving Fund programs to provide

financial assistance to government entities for the construction of drinking water and wastewater facilities; the review and approval of site location and design of domestic wastewater treatment works; and the development of reports and lists that reflect the status of water quality in Colorado.

Office of Environmental Innovation and Integration – includes the pollution prevention program and Pollution Prevention Advisory Board, environmental leadership program, environmental management system permit program, environmental agriculture program, small business assistance program, SARA Title III, and Supplemental Environmental Projects.

This office oversees the Department’s cross-cutting and non-traditional environmental protection programs and initiatives including regulation of concentrated animal feeding operations; administering the statewide reward program that offers incentives to companies that voluntarily go beyond compliance with state and federal regulations; providing outreach and technical assistance on sustainability; developing and promoting pollution prevention projects; working with communities to address environmental justice concerns; collecting information regarding the use, storage, production, and release of hazardous chemicals using the annual Tier II Hazardous Chemical Inventory report, and the annual Toxic Release Inventory report; and working with State departments and agencies to reduce State energy consumption, increase State use of alternative energy resources, increase energy efficiency, and decrease emissions and fuel consumption of the State vehicle fleet.

## **PRIOR YEAR LEGISLATION**

### **SB 08-153 Home Care Agency Licensure (Boyd, Ferrandino)**

The Department inspects and certifies home health agencies for the federal Centers for Medicare and Medicaid (CMS). This inspection and certification program allows these facilities to receive Medicare and Medicaid reimbursement and provides some degree of consumer protection through inspections and complaint investigations. However, there are many home care agencies that are not CMS certified. Colorado was one of only five states that did not license home care agencies, which placed consumers at great risk for physical, sexual, and verbal abuses, fraud, crime, and medical negligence. This bill protected home care consumers by establishing licensure requirements for all home care agencies including home health and personal assistance services.

### **HB 08-1038 Fee Setting for Assisted Living Residencies (Ward, Reisberg)**

Assisted living facilities provide a home-type setting for people who have round-the-clock personal assistance needs. The Department licenses these facilities to ensure the health and well being of consumers. This bill provided additional resources for inspection and enforcement activities by allowing the Board of Health to increase the current fees charged to assisted living residencies.

### **HB 08-1054 Wholesale Food Manufacturing Storage Fees (Sandoval, Hodge)**

The Department's Wholesale Food Program inspects wholesale food manufacturing and storage facilities to ensure the proper processing and storage of food products in Colorado in order to decrease the likelihood of food borne illnesses. The program also performs food recall investigation activities when food borne illnesses are reported, including administrative and technical support for grocers, restaurants, health care providers, and the general public. Because national food recall activities have increased by an additional 100 recalls per year, the demand on the Department's Wholesale Food Manufacturing program has also increased, necessitating new revenue for additional resources. This bill increased fees paid by wholesale food manufacturers, providing adequate resources to ensure food safety in Colorado.

### **HB 08-1100 Funding for the Colorado Responds to Children with Special Needs Program (Keller, Gagliardi)**

Families of children born with birth defects in Colorado are linked to support services through the Colorado Responds to Children with Special Needs (CRCSN) Program. Budget cuts had disabled this program, forcing a reduction in services and leaving many children and families without a guide to health care resources. This legislation restored the program through an increase in birth certificate fees.



**HB 08-1116 Access to Dental Care for Seniors (Shaffer, Gallegos)**

The General Assembly established the Dental Assistance Program for Low-Income Seniors in 1977 to provide dental care to seniors enrolled in the Old Age Pension program. The program supplements Medicare and Medicaid, which do not cover dental services for adults or seniors unless necessary dental care is associated with a medical condition. Reimbursement rates for dental procedures under the program have not kept pace with the cost of providing care, which has resulted in a loss of dental providers willing to participate in the program. The lack of providers has severely reduced the program's capacity to serve eligible participants statewide. This legislation allows the Board of Health to set reasonable dental reimbursement rates without increasing the program's budget. Adjustments to the reimbursement rates will increase dental provider participation, allowing greater access to dental care for eligible seniors.

**HB 08-1199 Tuberculosis Statutes Update (Williams, Ferrandino)**

The Department of Public Health and Environment is statutorily responsible for the prevention and control of communicable diseases such as tuberculosis (TB). The tuberculosis statute is more than 30 years old and contains provisions that no longer reflected current, nationally accepted disease control and prevention practices. This bill aligned statutory TB control provisions to match current public health practices in order to assure adequate public health protection statewide.

**SB 08-037 Hazardous Waste Omnibus (Tupa, Fischer)**

The Department has the jurisdiction to regulate hazardous waste contaminants in order to protect public health and the environment. This bill changed three major sections of the statute dealing with hazardous wastes: environmental covenants, contaminated sites, and hazardous waste fees. **Environmental Covenants.** An environmental covenant is a formal, voluntary land use restriction for partially remediated properties. It allows a landowner to choose between 100 percent remediation and partial remediation of the owner's contaminated property in exchange for certain land use restrictions. Based on the belief that a covenant is an interest in real property, the federal government will not enter into environmental covenant agreements with the state, which severely limited the Department's ability to manage the long-term use of formerly contaminated federal properties. This bill protects public health and avoids a costly and prolonged legal battle with the federal government by creating an "environmental use restriction", which is essentially an environmental covenant applied unilaterally. **Six Month-Three Year Limitations-Contaminated Sites.** The state budget requires appropriations for superfund, Brownfield, and natural resource damages clean-up projects be encumbered within six months and fully expended within three years. Due to the long-term nature of these projects, it is impossible to meet the time frame limitations and as a result, the Department requests annual waivers from the spending requirements. This bill allows hazardous waste site cleanups to continue without delay or loss of federal funding by extending the encumbrance deadlines for superfund, Brownfield, and natural resource damage sites by 12 months. **Hazardous Waste Fee Allocation Structure Limitations.** The hazardous waste statute contains a fee allocation structure that limits the percentage of revenue derived from fees paid by entities that treat, store, dispose, and generate hazardous waste. Federal funds currently subsidize a large portion of the program, sharing program costs with fee payers.

Over the last 10 years, while program costs have increased, federal funding for the program has remained flat, forcing fees to cover a greater portion of program costs. This legislation eliminated the statutory fee allocation structure and gave fee setting authority to the Hazardous and Solid Waste Commission. This allows the Commission to continue its current practice of fee setting and rulemaking based on extensive stakeholder negotiations, but without complicated allocation formulas.

**SB 08-055 Stationary Sources of Pollution Fee Increase (Hagedorn, Madden)**

The Department is responsible for regulating emissions of air pollutants, such as particulate matter, emissions that form ground level ozone, and hazardous air pollutants from power plants, oil and gas producers and other industrial or commercial emitters (“stationary sources”). Due to federal and state budget cuts and the increasing demand for tighter air quality management, the Department sought additional sources of revenue to support the program. This bill provides additional resources needed to meet current and future air quality management demands by increasing fees charged to stationary sources of air pollution.

**HB 08-1099 Commission Clean up (Tochtrop, McNulty)**

In previous legislation, the Department moved specific authorities for the drinking water program and waste tire hauler program from the Board of Health to more appropriate commissions. At that time, specific portions of these authorities were inadvertently omitted. This bill addressed those omissions by transferring water penalty appeal hearings under the drinking water program from the Board of Health to the Water Quality Control Commission, and the waste tire hauler rulemaking authorities from the Board of Health to the Hazardous and Solid Waste Commission. It also revised the Colorado Water Quality Control Act to comply with federal requirements.

**SB 08-194 Public Health Reorganization (Senator Hagedorn, Representative McGhion)**

The public health system in Colorado is complex and multifaceted. This bill directs the Department and local public health agencies to establish a statewide, comprehensive public health plan and helps to organize the public health system in such a way that promotes the availability of core public health services to every person in Colorado with a consistent standard of quality.

**HB 08-1337 Colorado Children’s Trust Fund (CCTF) Audit (Morse, White)**

The Colorado Children’s Trust Fund (CCTF) is statutorily required to undergo an annual external financial audit, which typically costs the program between \$6,000 and \$8,000 out of a total fund balance of approximately \$300,000. It was the only grant program under the Department with a balance of less than \$1 million that statutorily required an external audit in addition to the annual Departmental audit performed by the state Auditor’s Office. Accordingly, this bill removed the external auditing requirement for the CCTF, channeling approximately \$8,000 additional dollars per year into child abuse prevention programs.

**SB 08-102 Spending Authority Pollution Prevention Advisory Board (PPAB) Staff (Bacon, Pommer)**

Previous legislation created recycling grant programs with an oversight committee called the Pollution Prevention Advisory Board. This board is charged with several authorities, one of which is reviewing and approving recycling grant applications. This legislation provided one full time administrative assistant for the Board in order to relieve administrative burdens and increase efficiencies in the grant review process.

**HB 08-1396 Leadville Feasibility Study (Wiens, Scanlan)**

The Department works with the Environmental Protection Agency (EPA) and other federal organizations to protect water quality in Colorado. Years ago, the federal government constructed the Leadville Mine Drainage Tunnel (LMDT) to dewater flooded mines in the Leadville mining district. A collapse in the LMDT caused a backup of water increasing the level of the mine pool and pressure within the tunnel. This pressure could lead to a blowout of the LMDT, releasing a billion gallons of contaminated water into the Arkansas River, damaging downstream property, and endangering the river's aquatic ecosystems. Lake County commissioners believe water flowing from the collapsed Canterbury Tunnel is contributing to the LMDT mine pool. However, there is conflicting and incomplete information regarding any actual hydrological connection between the two tunnels. This bill authorized a study to determine if drilling into or re-opening the Canterbury Tunnel would relieve pressure in the LMDT.

**HB 08-1414 Regulation of Oil and Gas Evaporation Ponds (Penry, Buescher)**

Oil and gas drilling produces a wastewater byproduct that contains a petroleum residue. In some circumstances, this "production water" is delivered to an oil and gas waste disposal facility, which are commercial facilities that recover the petroleum. The Department of Public Health and Environment regulates commercial oil and gas waste disposal facilities and the Colorado Oil and Gas Conservation Commission (COGCC) regulates the private facilities. While the COGCC has established comprehensive rules regulating private facilities, current law provided the Department insufficient direction to ensure that commercial waste disposal facilities provide adequate protection of public health and the environment. This legislation provided authority to the Solid and Hazardous Waste Commission to promulgate rules based upon minimum standard requirements for the regulation of commercial oil and gas waste disposal facilities.

**HOT ISSUES**

**Emergency Preparedness and Response:** The September 11, 2001 attacks on the United States set the stage for a number of public health emergencies that have brought the need for public health preparedness to the forefront for both political leaders and the public. Since then, the Department has responded to anthrax attacks, prepared for potential smallpox attacks, developed extensive plans for responding to the emergence of West Nile Virus, a salmonella outbreak in Alamosa that was tied to the town's drinking water supply, encountered a severe influenza vaccine shortage during one of the most severe influenza seasons on recent record, helped with the

housing of displaced survivors of Hurricane Katrina, and responded to local tornados, snowstorms, and wildfires, all of which involved one or more programs in the Department.

While Colorado's emergency response is coordinated by the Division of Emergency Management in the Department of Local Affairs, all of the health, medical and mortuary portions of the state's emergency operations plan are assigned to the Emergency Preparedness and Response Division in the Department which is entirely funded by federal grants. This division provides support and direction to all local public health agencies, hospitals, more than 1500 licensed healthcare facilities and the Department's divisions for all emergency preparedness and response activities.

The Department's emergency preparedness grant funding is at risk due to new requirements for matching funds from the Federal government. In 2007, Congress passed the Pandemic and All-Hazards Preparedness Act (PAHPA) Public Law 109-417 which will require states to provide maintenance of effort and matching funds beginning in the 2009-10 federal fiscal year. In addition, there is the expectation that the states will sustain current funding levels (FY08) and the infrastructure that has been developed previously with these federal funds. Beginning in 2009, the state will be required to supply a 5 percent, and in the subsequent year, a 10 percent match in order to maintain essential federal funding. Without the required match, all federal funding for emergency preparedness services likely will be terminated.

**State Laboratory:** The public health laboratory system in Colorado is a network of local laboratories partnering or working in close affiliation with State laboratory staff to provide population-based surveillance data and support infectious disease outbreak investigations. Information supplied by this network is crucial to epidemiologists for early detection of outbreaks and the prevention and control of communicable disease. With the elimination of state funding in 2002, the cost for public health laboratory testing conducted by the State was shifted to local health departments, animal control agencies, and citizens. Local agencies are increasingly unable and unwilling to absorb these costs and have significantly curtailed essential surveillance activities, placing the health of Colorado residents at increased risk. Individuals often have no incentive to pay for testing that benefits the larger population (i.e. testing a dead squirrel found in their yard for plague). And, the Laboratory has no source for funding the testing necessary to respond to unanticipated outbreaks, such as a whooping cough outbreak of more than 1,000 cases in 2004-05, the 2007 outbreak of plague among tree squirrels in Denver, or the water testing necessary during the 2008 salmonella outbreak in Alamosa which sickened more than 400 citizens.

The loss of general fund support for the Laboratory in 2002 has been mitigated through grants and fee increases over the past five years. However, recent decreases in grant funds and increasing demand for public health lab services has created a critical situation such that the lab is faced with eliminating important services due to insufficient funding.

**Public Health Reauthorization Act (SB 08-194):** SB08-194 requires identified boards, agencies, and public officials to collaboratively develop state and local public health plans that set priorities for the public health system in Colorado. The primary purpose of the Act is to assure that core public health services are available to every person in Colorado with a consistent standard of quality.

An effective public health system reduces health care costs by preventing disease and injury, promoting healthy behavior, and reducing the incidence of chronic diseases and conditions. Each community in Colorado should provide high-quality public health services regardless of its location. Under the new law, each county must establish – or be part of – a local public health agency organized under a local board of health with a public health director and other staff necessary to provide public health services. In addition, the state of Colorado and each local public health agency must have a comprehensive public health plan by December 31, 2009, that outlines how quality public health services will be provided.

The law calls on public officials including the State Board of Health, Colorado Department of Public Health and Environment, County Commissioners, Local Public Health Agencies, Local Public Health Directors, and Local Boards of Health to work together to develop a Statewide Public Health Improvement Plan that will become the model for Local Public Health Improvement Plans.

**Hospital-Acquired Infections:** Hospital-acquired infections, which occur during or after a hospital stay, are a growing concern among healthcare consumers and professionals. While the public is increasingly interested in the occurrence rates of these infections, most hospitals do not publicly report this data. Colorado’s Hospital-Acquired Infections Disclosure Act (House Bill 06-1045) was approved in June 2006, requiring hospitals, ambulatory surgical centers, and dialysis centers to disclose their rates of infections for specific conditions, such as central line catheters and post-surgical wounds. The intent of the law is to have these health facilities report infection data through one web-based system, which requires the use of identical definitions and data collection methods in order to ensure the public can easily compare infection rates to the national average and from one health facility to another.

The Department is charged with the management and oversight of the hospital acquired infections report and has recently released the initial set of reporting data collected from August 1, 2007 through January 31, 2008. Adult central line infections are the first category of data to be collected and released, with some marked differences between hospitals and between hospitals and the national average. While it will take several years to collect initial data sets in multiple categories from each of the health facility types, the legal requirement for health facilities to report this data creates public pressure for health facilities to revisit infection control practices and address the growing concern of hospital acquired infections.

**Oil and Gas Development:** Oil and gas development is growing at a phenomenal rate in Colorado. Most of this growth is occurring on the west slope, in areas that have traditionally not experienced significant oil and gas development, and in areas where there are significant impacts to residents, wildlife and the environment. In response to concerns regarding these impacts, the legislature passed

HB07-1341 requiring the Colorado Oil and Gas Conservation Commission (COGCC) to promulgate rules to protect public health, welfare, safety, the environment and wildlife, and to establish a timely and efficient procedure for consultation with the Department regarding new regulations. HB 1341 also changed the membership of the Colorado Oil and Gas Conservation Commission to include members with experience in environmental or wildlife protection and in soil conservation or reclamation, and the membership was increased to include the Executive Directors of both the Colorado Department of Public Health and Environment and the Department of Natural Resources. Sister legislation, HB07-1298, required the COGCC to develop a consultation process with the Division of Wildlife, and to promulgate regulations to protect wildlife from the impacts of oil and gas development.

Over the course of the last year, the Department has worked closely with the COGCC to develop draft regulations in response to the legislative directive, taking into consideration comments provided by interested stakeholders. Rulemaking commenced in May and is expected to conclude in August. As predicted, the proposed rules have generated significant interest within the oil and gas industry, local governments, royalty owners, agriculture interests, environmental groups, wildlife groups and the public at large. It is anticipated that the new rules will include new environmental and public welfare requirements as well as a consultation process between the Department and the COGCC. The Department intends to work very closely with the COGCC to implement the new rules, and as the program expands, the Department anticipates the potential need to increase the number of positions that are assigned to this work to ensure that the Department's consultation and involvement is timely and efficient.

**Climate Change:** News about climate change hits the airwaves nearly every day as cities, counties and countries embrace initiatives to reduce greenhouse gas emissions. On Earthday, April 22, 2008, Governor Ritter issued two Executive Orders that outline large scale state initiatives to combat climate change.

The first executive order set a greenhouse gas reduction goal of 20 percent below 2005 levels by 2020 and issued directives that, if carried out effectively, will allow Colorado to meet that goal. Achieving this ambitious goal requires accurate data regarding the sources of greenhouse gas emissions within the state. To that end, Colorado has joined The Climate Registry (TCR), a voluntary greenhouse gas emissions reporting system, and the Department's executive director sits on that board. This voluntary registry provides a mechanism through which businesses, state agencies, local governments, and others can measure and report their greenhouse gas emissions. In addition, Colorado is one of only two states (Utah is the other) to commit to reporting the state's emissions to TCR. In Early 2009, the Department also will draft and recommend regulations to the Air Quality Control Commission for mandatory reporting of greenhouse gas emissions from major stationary sources.

The second executive order tasks the Department and the Colorado Department of Agriculture with the establishment of an agricultural carbon offset program. This will be the first-ever state commitment to establishing a system under which farmers and ranchers could get credit – and sell those credits – for adopting agricultural practices that increase the amount of carbon dioxide being

stored in their soils. An example would be shifting to no-till agriculture, which stores CO<sub>2</sub>, but also increases water retention and reduces costs – a win-win-win in the arid West.

**Ozone Non-Attainment:** For several years Colorado maintained compliance with the EPA adopted ground-level ozone standard of 0.08 parts per million (ppm) through the implementation of measures adopted by the Colorado Air Quality Control Commission. Unfortunately due in part to the hot, dry weather conditions experienced in Colorado last summer, this federal standard was violated in the Front Range, and last fall EPA determined that the state was out of compliance with the federal ozone standard. By July 2009 Colorado is required to submit an appropriate emissions control plan for approval by the EPA. This plan must include measures that will reduce ozone levels so that compliance with the federal standard can be achieved and maintained. In addition, last summer Governor Ritter challenged the Regional Air Quality Council (RAQC), the lead air quality planning organization for the Denver metropolitan area, to develop and propose additional measures to further reduce ambient ozone concentrations below the national standard.

The effort needed to identify effective measures to reduce ozone levels in the Front Range has been made more difficult by the recent decision by the EPA to reduce the federal ground-level ozone standard to 0.075 ppm. Although 2013 is the earliest Colorado will need to submit an emissions control plan that demonstrates compliance with this new standard, many more areas beyond the Front Range may be out of compliance with the lower standard. Determining the additional measures for the Front Range, and for any additional areas that are out of compliance with the new standard, will be challenging.

The RAQC staff and the Department's Air Quality Control Division have been working to identify and consider for proposal to the RAQC and to the North Front Range Transportation and Air Quality Planning Council an overall ozone mitigation plan for the Denver and North Front Range ozone non-attainment area. The proposed ozone mitigation plan will contain a federally enforceable component to demonstrate long term compliance with the current federal standard and will contain additional strategies that will help achieve the Governor's directive to do more than just meet the current federal requirements.

**WORKLOAD INDICATORS**

**Administrative Services Division (ASD)**

Workload Indicators – Accounting	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Total number of payment vouchers processed within 5 days	28,033	28,500	28,500	28,500

Workload Indicators – Internal Auditor	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Percent of subrecipient’s financial and single audits resolved within 60 days of receipt.	96%	90%	90%	90%

Workload Indicators – Human Resources	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Classification Actions processed.	290	300	310	310
Personal Services contracts reviewed.	507	525	540	540
Requests for referral exams.	221	319	265	265
Employees attending training classes	816	900	1000	1000
New employees hired	132	145	150	150

**Center For Health and Environmental Information and Statistics (CHEIS)**

Workload Indicators - Vital Records	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of births and deaths recorded	103,000	104,000	105,000	105,000
Number of birth and death certificates issued	330,000	340,000	350,000	350,000

Workload Indicators - Health Statistics	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of health surveys completed	15,000	15,000	15,000	15,000



Workload Indicators - Information Technology	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of networked personal computers supported	1,400	1,500	1,500	1,500
Number of computer servers managed	100	110	120	120

**Laboratory Services Division (LSD)**

Workload Indicators – Laboratory Services	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of laboratory tests performed	3,051,234	3,052,172	3,000,000	3,000,000
Number of laboratory results detected in excess of established standards (abnormal results)	12,129	13,375	12,000	12,000
Number of Lab inspections completed.	380	449	320	320
Number of law enforcement officers trained annually in the proper usage and maintenance of breathalyzer equipment. * Statutory changes required all Colorado law officers to be retrained on the use of this equipment.	4,648*	4,104*	1,700	1,700

**Office of Planning and Partnerships**

Workload Indicators – Planning and Partnerships	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Average number of contacts with local health agencies per year. Includes regional meetings, conference calls, visits, correspondence, and meetings of statewide health organizations. Measure is number of visits with each of the 54 public health agencies in Colorado.	2	5	5	5
Host meetings with local health nursing directors for purposes of providing technical assistance, communications, and support. Number of regional meetings.	27	27	27	27
Number of new local and state public health officials who receive the Department’s sponsored public health orientation.	100	100	125	125

**Air Quality Control Division (AQCD)**

Workload Indicators – Oil and Gas Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of oil and gas facility inspections conducted.	216	240	266	266
Number of oil and gas facility enforcement actions completed.	43	46	53	53

Workload Indicators – Stationary Sources	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of minor source permits issued.	2,671	3,124	3,000	3,100
Number of major source permits issued.	30	40	50	50
Number of minor source inspections.	591	778	600	600
Number of major source inspections.	181	160	150	150
Number of enforcement actions completed in the Stationary Sources Program.	105	120	120	120

Workload Indicators – Mobile Sources	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of quality assurance audits performed.	2,409	2,094	2,199	2,199
Number of emissions inspectors trained and qualified.	403	370	388	388
Number of repair assistance provided to the repair industry.	2,125	3,636	3,818	3,818
Number of Clean Screen vehicles identified.	65,030	197,033	249,400	249,400
Number of High Emitter vehicles identified.	0	1,926	4,000	4,000

Workload Indicators – Business Assistance Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of site visits with small businesses.	217	382	250	250
Number of workshops or seminars with small business entities or associations.	5	7	8	8

Workload Indicators – Indoor Environmental Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of asbestos permits issued by the Indoor Environment Program.	2,927	3,811*	3,800*	3,800*
Number of inspections performed by the Indoor Environment Program	649	700	800	800

Workload Indicators – Indoor Environmental Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of lead permits issued by the Indoor Environment Program.	97	69	85	85
Number of inspections performed by the Indoor Environment Program	68	43	41	45
Number of CFC inspections performed by the Indoor Environment Program	1,475	1,215	1,500	2,000

*\* Also includes the number of Demolition Notices issued.*

### Water Quality Control Division (WQCD)

Workload Indicators – Drinking Water Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Total number of persons affected by public water systems with at least one health based violation of a drinking water standard during the reporting period.	176,657	200,142	200,000	170,000
Total number of persons served by public water systems with at least one health-based violation of a drinking water standard during the reporting period that either returned to compliance or is under an enforceable compliance schedule to serve safe drinking water.	52,557	77,944	100,000	100,000

Workload Indicators – Clean Water Facilities Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Percent of permits and general permit certifications that are current in accordance with EPA’s permit backlog criteria current.	New Measure	79% *	estimate 80-85%*	, estimate 82.5%
Percentage of major (flow greater than 1,000,000 gallons per day)- facilities inspected or providing a self-certification. (Note, EPA reduced the required frequency of inspections in FY2008-09)	100%	100%*	49%*	49%*
Percent of high priority permits issued.	94% (15 of 16 permits)	100%* (5 of 5 permits)	100%* (18 of 18 permits)	100% (estimate 25 permits)
Number of inspections completed at minor wastewater treatment facilities.	148	150	150	150
Number of inspection-discovered violations that could impact water quality.	New Measure	79*	80	80

Workload Indicators – Clean Water Facilities Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of resolved inspection-discovered violations that could impact water quality.	New Measure	31	40	48

\*Reported data are based on the federal fiscal year.

Workload Indicators – Watershed Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of completed and substantially implemented source water protection plans.	New Measure	8	14	25
Number of water bodies where TMDL is submitted to EPA for approval.	New Measure	36	40	20
Number of impaired watersheds where water quality improved.	New Measure	2	2	2

**Hazardous Materials and Waste Management Division (HMWMD)**

Workload Indicators – Hazardous Materials	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of inspections performed				
The actual number of inspections will vary from year to year due to the 3-year inspection cycle for a significant number of x-ray machines	5,455	7,159	5,575	5,575
Number of enforcement actions issued (formal and informal actions)	81	85	85	85
Number of applications, permits, and licenses processed.	1,385	1,220	1,315	1,315
Number of active potentially contaminated areas at regulated facilities (individual contaminated areas).	987	970	970	970

**Consumer Protection Division (CPD)**

Workload Indicators – Consumer Protection Local Assistance Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Retail food standardization exercises conducted for state and local inspection personnel.	15	3	16	16
Technical assistance responses to local government regarding retail and wholesale food issues.	1,019*	641	600	600

\*The figure in FY 06-07 is so high due to No Bare Hand Contact, an addition to the Retail Food rules and regulations, and HB06-1023 implementation.

Workload Indicators – Consumer Protection Food Protection Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of vulnerability assessments conducted	20	248	200	200

Workload Indicators – Consumer Protection Dairy, Retail Food, Wholesale Food, Vector, and Public Institution Inspection Programs	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of inspections (milk producers/processors, wholesale/retail food firms, correctional facilities, child care facilities, schools, artificial tanning facilities and non-community ground water systems). (1)	3,202	2,951	3,185	3,218
Condemnation actions (retail and wholesale food) against foods to ensure contaminated food products do not reach the consumer. (2)	166	258	220	220
Number of special investigations/recall activities conducted on food products. (3)	23	77	52	52
Requested and required activities that include investigations, assessments, surveillance and public presentations as they relate to plague, encephalitis, relapsing fever, tularemia, and hantavirus activity, their associated arthropod vectors and or rodent/avian hosts with the purpose of reducing the risk of human exposure. (4)	236*	9	62	62

- (1) Due to turn-over of staff, response to public health emergencies related to Alamosa and the increase in food recalls, the number of routine inspections could not be met.
- (2) Due to the large volume of violations found during inspections of retail food establishments and wholesale food firms, the number of condemnation actions increased.
- (3) Due to an increase in the number of product recalls which affected Colorado establishments, the Division’s activities increased.
- (4) The figure in FY 06-07 is high due to the number of specimens collected during field exercises and training of county personnel. The figure in FY 07-08 is low due to staff turn-over and difficulty in filling the position.

Workload Indicators – Consumer Protection School Inspection Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
<p>Number of schools in direct service areas that will implement changes to reduce chemical waste. (5)</p> <p>Disseminate information through the Colorado Department of Education on green or microchemistry, recycling and chemical procurement controls to reduce waste. Number of Schools contacted. (6)</p> <p>(5) The CPD is working with Office of Environmental Integration and Sustainability (OEIS) to collect and dispose of mercury-containing devices from schools in the San Luis Valley area. The process to do this has been identified, however completion of the project is targeted for January, 2009.</p> <p>(6) Colorado Department of Education could not distribute this information as needed. CPD is pursuing another method to distribute this information and it will be accomplished in FY 80-09.</p>	New Measure	-	8	8
		-	572	572

**Disease Control and Environmental Epidemiology (DCEED)**

Workload Indicators – Immunization	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of doses of vaccine distributed	921,246	971,915	1,025,370	1,025,370

Workload Indicators – Communicable Disease, STI/HIV, CRCSN and Hepatitis	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of reports of notifiable conditions received	88,398	90,166	91,969	91,969

Workload Indicators - Tuberculosis	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
The number of contacts to active tuberculosis cases that are identified and treated, in order to prevent further spread of tuberculosis.	1,170	1,113	1,113	1,113

Workload Indicators – Colorado Responds to Children with Special Needs (CRCSN)	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of at-risk children referred for intervention services *The maternal age of women in Colorado is increasing thus the probability of having a child with a birth defect increases with age of mother.	4,669	5,801*	6,000	6,400

Workload Indicators – Refugee Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of refugees screened for health conditions	899	1,000	1,000	1,000

**Prevention Services Division (PSD)**

Workload Indicators - Family Planning	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of clients receiving Title X family planning services.	51,130	51,166	52,000	53,500

Workload Indicators - Prenatal Plus	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
The percent of women who receive model care in the Prenatal Plus Program and quit smoking while pregnant.	68%	70.8%	72%	72%

Workload Indicators - Tobacco Prevention	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of callers to the Colorado QuitLine.	39,971	38,184	46,000	46,000
Number of pregnant callers to the Colorado QuitLine.	458	371	800	800
Number of hits to the “Own Your C” website	359,784	400,000	430,000	430,000

Workload Indicators – Nutrition Services	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of breastfeeding friendly hospitals.  Research has shown that breast-fed babies are less likely to be obese. This is a new designation with new criteria, and the process is just emerging. The number of hospitals that meet these new criteria is expected to spike. Currently there are 54 hospitals in the state with labor and delivery services, and 1 hospital (children’s) with services for newborns only.	1	1	2	3

Workload Indicators – Coordinated School Health	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of school buildings implementing Coordinated School Health.	56	130	150	150

Workload Indicators – Physical Activity and Nutrition	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of restaurants participating in the Smart Meal program.	140	200	250	250
Number of communities implementing policy and environmental changes.	31	75	100	125

**Health Facilities and Emergency Medical Services Division (HFEMSD)**

Workload Indicators – Emergency Medical Services & Trauma	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Cumulative number of trauma centers designated Successful application and on-site review leads to a designation. The level of designation is commensurate with the facility’s level of trauma care resources, not the level of quality of care.	69	69	69	69
Applications for Emergency Medical Technician (Basic, Intermediate and Paramedic) certification and renewal of certification. Number received Number approved	5,264 4,591	5,527 4,821	5,803 5,062	5,803 5,062



Workload Indicators – Administrative Support	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of assisted living residence licenses processed	505	559	540	540
Number of other licenses processed	750	842	850	850

Workload Indicators – State Licensure & Federal Certification Programs	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of surveys conducted	2,702	2,783	2,783	2,783
Number of complaint investigations	672	723	723	723

**Office of Environmental Integration and Sustainability**

Workload Indicators - Greening Government	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Percent of energy reduced	New Measure	20%	20%	20%
Percent of water reduced		20%	20%	20%
Percent of paper reduced		20%	20%	20%
Percent of petroleum reduced		20%	20%	20%
Number of waste reduction goals achieved		2 projects	2 projects	2 projects
Percent of new vehicle purchases that will be alternative fuel or hybrids.		80%	90%	90%

Workload Indicators - Pollution Prevention Advisory Board Grants	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of recycling projects funded*	New Measures	12	12	12
Amount of waste diverted from Colorado landfills*				
Number of new recycling markets developed*		*	*	*
Number of beneficial use projects funded*				
Amount of material reused *				
Number of research grants awarded to improve recycling techniques, technology or create new markets for discarded materials*		7	4	4

*\*New grant program starting FY 07-08. Measures will depend on the grant program criteria, number of applicants, type of projects, funding allocations, etc.*

Workload Indicators - Environmental Leadership Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Amount of air emissions reduced	30.1 tons	30.6 tons	31 tons	31 tons
Amount of water conserved	58 M gallons	59 M gallons	61 M gallons	61 M gallons
Amount of hazardous waste reduced	954,142 tons	973,000 tons	990,000 tons	990,000 tons
Amount of solid waste reduced	56,864 tons	58,000 tons	60,000 tons	60,000 tons
Amount of petroleum reduced	888,782 gallons	906,000 gallons	924,000 gallons	924,000 gallons
Amount of Ozone depleting substances reduced	2.75 tons	3 tons	3 tons	3 tons
Acres of land to which habitat improvements were made	1,013	1,033	1,053	1,053
Number of water quality and air quality inspections	330	371	390	390
Number of compliance assistance activities performed	100	100	125	125
Number of complaints resulting in an on-site inspection	24	30	25	25
Percent of concentrated animal feeding operations meeting water quality	83%	85%	97%	97%
Percent of housed commercial swine feeding operations meeting water quality and air quality requirements	74%	80%	97%	97%
Number of new water quality and air quality permits issued	18	20	10	10

**Emergency Preparedness and Response Division**

Workload Indicators – Emergency Preparedness and Response Division	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Percentage of annual plans developed, maintained, and tested annually.	75%	90%	100%	100%

Workload Indicators – Emergency Preparedness and Response Division	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of clinicians and public health response plan partners who receive real-time public health emergency communication messages.		100	120	120
Number of volunteers in the Colorado Public Health and Medical Volunteer database.	700	1000	1400	1400
Number of trainings, drills, and exercises conducted at the state and local level to test and improve the ability to respond to and recover from public health emergencies (including, but not limited to testing state/local ability to identify threats, receive and dispense pharmaceuticals, provide critical information to the public, issue isolation or quarantine orders, etc.)		1 statewide exercise with 50% participation from external partners  50 OEPR courses offered, 300 trained	1 statewide exercise with 75% participation from external partners  75 OEPR courses offered, 600 trained	1 statewide exercise with 75% participation from external partners  75 OEPR courses offered, 600 trained
Percent of partnerships with emergency responders	70%	80%	90%	90%
Percent of partnerships with businesses and other private institutions	20%	30%	40%	40%
Percent of partnerships with local public health agencies	100%	100%	100%	100%
Percent of partnerships with state and local government agencies	80%	85%	90%	90%
Number of on-going meetings with external partners	15	15	15	15

**Office of Health Disparities**

Workload Indicators – Health Disparities Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of departmental partnerships with community-based organizations.		50	60	60
Number of departmental partnerships with educational institutions		20	30	30
Number of departmental partnerships with businesses		25	35	35
Number of departmental partnerships with local agencies		20	30	30
Number of departmental partnerships with state agencies		15	25	25
Number of departmental town hall meetings		5	10	10
Number of departmental community-based meetings		20	30	30

Workload Indicators – Health Disparities Program	FY 06-07 Actual	FY 07-08 Actual	FY 08-09 Approp.	FY 09-10 Request
Number of individuals to be reached through Health Disparities Grants Program grantees outreach efforts to eliminate health disparities in cancer, cardiovascular, and pulmonary diseases.	New measure	169,431	171,000	171,000
Number of individuals reached through the Health Disparities Grants Program grantee outreach efforts.	New measure	169,431	169,431	169,431
Number of grantee site visits to conduct fiscal and programmatic contract monitoring.	34	35	35	35