

## **DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT**

### **State Board of Health**

## **CORE PUBLIC HEALTH SERVICES**

### **6 CCR 1014-7**

*[Editor's Notes follow the text of the rules at the end of this CCR Document.]*

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#### **Section 1 – Purpose and Authority for Rules**

- 1.1 These rules recognize that an effective public health system needs clearly defined core public health services. These core public health services are long-term programs, representing the minimum level of public health services that local public health agencies would provide in a modern public health system. Core public health services are intended to improve the health of individuals as well as the health of our communities.
- 1.2 These rules further recognize that local public health agencies are essential to the provision of quality and comprehensive public health services throughout the state and are critical partners with the Colorado Department of Public Health and Environment in maintaining a strong public health system.
- 1.3 This regulation is adopted pursuant to the authority in section 25-1-503 et seq., C.R.S. and is intended to be consistent with the requirements of the State Administrative Procedures Act, section 24-4-101 et seq. (the "APA"), C.R.S.

#### **Section 2 – Definitions**

- 2.1 All definitions that appear in Section 25-1-502, C.R.S., shall apply to these rules.
  - A. "Agency" means a county or district public health agency established pursuant to C.R.S. § 25-1-506, or a municipal public health agency established pursuant to C.R.S. §25-1-507.
  - B. "Local Board of Health" means a county or district board of health established pursuant to C.R.S. § 25-1-508, or a municipal board of health established pursuant to C.R.S. §25-1-507.
  - C. "Core public health" shall be defined by the state board and shall include, but need not be limited to, the assessment of health status and health risks, the development of policies to protect and promote health, and the assurance of provision of the essential public health services.
  - D. "Public health" means the prevention of injury, disease, and premature mortality; the promotion of health in the community; and the response to public and environmental health needs and emergencies in the community and is accomplished through the provision of essential public health services.
  - E. "Essential public health services". The essential public health services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems. These services are not additional requirements on local public health agencies. The 10 essential public health services are:

1. Monitor health status to identify and solve community health problems.
2. Investigate and diagnose health problems and health hazards in the community.
3. Inform, educate, and empower individuals about health issues.
4. Mobilize public and private collaboration and action to identify and solve health problems.
5. Develop policies, plans, and programs that support individual and community health efforts.
6. Enforce laws and regulations that protect health and promote safety.
7. Link people to needed personal health services and assure the provision of health care.
8. Encourage a competent public health workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Contribute to research into insightful and innovative solutions to health problems.

2.2 In addition, the definitions listed below shall apply to these rules.

- A. "Assure" means to address current and emerging community health needs through governmental leadership and action with public health system partners. Take reasonable and necessary action through a community defined selection of education, services, regulations, and enforcement.
- B. "Sustainable Development" refers to forms of progress or development that meets the needs of current generations without compromising the ability of future generations to meet their needs.

### **Section 3 - General Statement of Duties:**

3.1 Pursuant to Colorado Revised Statutes, part 5 of article 1 of title 25, in addition to all other powers and duties, an agency has the following duties:

- A. To provide or arrange for the provision of quality core public health services as defined by the state board or deemed essential by the comprehensive statewide public health improvement plan (section 25-1-506 (3)(b)(iii), C.R.S.).
  1. The agency shall be deemed to have met this requirement if the agency can demonstrate to the local board of health that other providers offer core public health services that are sufficient to meet the local need as determined by a local public health plan (Section 25-1-506 (3)(b)(iii), C.R.S.).
- B. Exemptions from the Provision of Core Services are further detailed in Section 5, below.

### **Section 4 – The Provision of Core Public Health Services:**

4.1 Public health core services in Colorado shall include, but need not be limited to the following:

- A. **Assessment, Planning, and Communication:** All agencies are required to use assessment and planning methodologies to identify, evaluate and understand community health problems, priority populations, and potential threats to the public's health, and use this knowledge to determine what strategies are needed to engage partners and improve health. Furthermore, agencies are required to:
1. Participate in integrated state, local, and national surveillance system(s) that quantify public health and environmental problems and threats.
  2. Complete a local public health plan based on a comprehensive assessment of the community's health and environmental status at a minimum of every five years.
  3. Use regional and county data, provided by CDPHE, on conditions of public health importance, including: chronic and communicable disease; environmental hazards; health disparities; determinants of health; and injury.
  4. Communicate to the public and key stakeholders the results of the community health assessment and local public health plan, as well as other public health information that is important to the health of residents and visitors.
- B. **Vital Records and Statistics:** All agencies are required to record and report vital events (e.g. births and deaths) in compliance with Colorado statutes, Board of Health Regulations, and Office of the State Registrar of Vital Statistics policies. Public health directors shall act as the local registrar of vital statistics or contract out the responsibility of registrar in the area over which the agency has jurisdiction.
- C. **Communicable Disease Prevention, Investigation, and Control:** All agencies are required to track the incidence and distribution of disease in the population and prevent and control vaccine-preventable diseases, zoonotic, vector, air-borne, water-borne and food-borne illnesses, and other diseases that are transmitted person-to-person. Furthermore, agencies are required to:
1. Collect and report disease information according to Colorado Board of Health Rules and Regulations.
  2. Investigate cases of reportable diseases and suspected outbreaks according to standard protocols and guidance provided by CDPHE.
  3. Assure immunizations using established standards, and, in collaboration with CDPHE, monitor community immunization levels.
  4. Take appropriate measures to prevent disease transmission using methods specific to: infected persons (isolation, treatment, contact tracing/notification); contacts to infected persons (quarantine, prophylaxis); and the environment in which the communicable disease occurs (facility closure, disinfection).
  5. Work closely with CDPHE in communicable disease investigation and control, particularly if the investigation crosses county lines or technical assistance is needed.
- D. **Prevention and Population Health Promotion:** All agencies are required to develop, implement, and evaluate strategies (policies and programs) to enhance and promote healthy living, quality of life and wellbeing while reducing the incidence of preventable (chronic and communicable) diseases, injuries, disabilities and other poor health outcomes across the life-span. Furthermore, agencies are required to:

1. Work to improve the health status of infants, children, youth, women, and their families.
  2. Work to protect critical stages of a child's physical and mental development during pregnancy, infancy and early childhood.
  3. Promote physical (including oral) health, mental and behavioral health, and environmental health with emphasis on increasing health equity among priority populations (e.g., children, elderly, racial or ethnic populations).
  4. Address identified risk factors or behaviors (e.g., tobacco use, physical activity, nutrition, teen pregnancy, sexually-transmitted infections) based on community health assessment priorities.
  5. Inform, educate, and engage the public and policymakers to build community consensus and capability to promote/support evidenced-based strategies that enable healthy behaviors and environments for individuals, families, organizations, and communities.
  6. Assure strategies are delivered in a culturally and linguistically appropriate manner.
  7. Coordinate efforts with governmental and community partners to link individuals to services such as primary care, maternal and child health care, oral health care, specialty care, and mental health care.
  8. Develop community-specific solutions to address prevention priorities.
  9. Promote and participate in planning for sustainable environments that support healthy living.
- E. Emergency Preparedness and Response: All agencies are required to prepare and respond to emergencies with a public health or environmental health implication in coordination with local, state and federal agencies and public and private sector partners. Furthermore, agencies are required to:
1. Participate in All-Hazards planning, training, exercises, and response activities within the local jurisdiction.
  2. Serve as or support the "Emergency Support Function 8 -Public Health" lead for the county, region, or jurisdiction.
  3. Implement an emergency communication strategy to inform the community and to activate emergency response personnel in the event of a public health crisis.
  4. Coordinate with county Emergency Managers and other first responders.
  5. Promote community preparedness by communicating steps that can be taken before, during, or after a disaster.

F. Environmental Health: Recognizing that significant responsibility for environmental quality management and oversight lies with state and federal agencies, all agencies are required to participate in the protection and improvement of air, water, land, and food quality by identifying, investigating, and responding to community environmental health concerns, reducing current and emerging environmental health risks, preventing communicable diseases, and sustaining the environment. These activities shall be consistent with applicable laws and regulations, and coordinated with local, state and federal agencies, industry, and the public. Furthermore, agencies are required to:

1. Identify and mitigate vector-borne (e.g. insects, rodents), air-borne, water-borne, food-borne, and other public health threats related to environmental hazards.
2. Take appropriate steps to support the protection of surface water and groundwater, including recreational waters and drinking water sources, and assure appropriate local regulatory oversight of onsite waste-water systems.
3. Implement public health laws, policies and procedures to assure the safety of food provided to the public at retail food establishments.
4. Implement public health laws, policies and procedures to assure the sanitation of institutional facilities (e.g. child care facilities, local correctional facilities and schools).
5. Take appropriate steps to assure the proper storage, collection, treatment, and disposal of garbage, refuse, and solid and hazardous waste.
6. Promote programs to minimize the amount of solid and hazardous waste and maximize the amount of recycling and reuse.
7. Participate in land use planning and sustainable development to encourage decisions that promote positive public health outcomes (e.g. consideration of housing, urban development, recreational facilities and transport), and that protect and improve air quality, water quality and solid waste management.
8. Where appropriate and practicable, enter into contracts or other acceptable agreements with the state's environmental programs in order to perform local assessments, inspections, investigations, and monitoring programs.

G. Administration and Governance: All agencies are required to establish and maintain programs, personnel, facilities, information technology, and other resources necessary to deliver core public health services throughout the agency's jurisdiction. This may be done directly by the agency, or in collaboration with other governmental agencies, and community and regional partners. Furthermore, agencies are required to:

1. Maintain competent, appropriate staffing and other resources to ensure capacity for delivery of core public health services.
2. Meet minimum quality standards in the delivery of core public health services throughout the jurisdiction.
3. Implement public health laws, policies, and procedures regarding agency operations in compliance with state statutes, rules, and regulations.
4. assess the provision of core public health services provided in the jurisdiction.

5. Establish procedures for working across jurisdictional boundaries and/or for requesting assistance in the delivery of core public health services.
  6. Utilize effective financial management systems and ensure management of the public health fund in accordance with C.R.S. 25-1-511.
- 4.2 Delivery of the core services shall be performed in accordance with the 10 Essential Public Health Services as defined by section 25-1-502, C.R.S.

#### **Section 5 - Exemption from the Provision of Core Services:**

- 5.1 When sufficient appropriations are absent, the local board shall set priorities for fulfilling the duties described in section 25-1-506(3), C.R.S., and include the list of priorities in its local public health plan submitted pursuant to section 25-1-505, C.R.S.
- 5.2 The local board of health may choose to limit the scope of the core public health services provided that:
- A. There is limited need for the core public health services in the community, or
  - B. Other providers provide this service sufficient to meet the local need.

#### **Section 6 – The Failure to Provide Core Public Health Services**

- 6.1 Pursuant to section 25-1-510, C.R.S., CDPHE may:
- A. If a core service is not being provided within the jurisdiction, CDPHE will first work with the local public health agency and the local board of health to address how the agency has prioritized these core public health services, and any statutory requirements to provide them.
  - B. Staff and programs within CDPHE will work with a local public health agency that is unable to provide core services, that agency's board of health, agencies in neighboring counties, local health providers, appropriate stakeholders, and other organizations to determine how best to provide or assure core services within that agency's jurisdiction.
  - C. If necessary, reallocate state funds to or from an agency that is not able to provide core public health services to another entity to deliver services in that agency's jurisdiction.

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#### **Editor's Notes**

#### **History**

Entire rule eff. 11/30/2011.