

Pocket Guide

for | Local Boards of Health

In Accordance with
the Colorado Public Health Act of 2008
C.R.S. 25-1-501 et seq.

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COLORADO

**Office of Public Health Practice,
Planning, & Local Partnerships**

Department of Public Health & Environment



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Public Health Practice

Public Health Practice is the utilization of science-based strategies to promote the health of the community; prevent disease, injury and premature death; and respond to environmental threats and emergencies that could impact human health. In practice, state and local public health agencies work to ensure:

- ◆ Community health status is regularly assessed and plans made to improve health
- ◆ Infectious diseases are monitored and investigated to prevent their spread
- ◆ Children and adults have the opportunity to be vaccinated against disease
- ◆ Screening programs are available for early identification of chronic diseases
- ◆ Reproductive health services are available
- ◆ Health care services are available to all populations within the community
- ◆ Emergency response plans are in place for disasters
- ◆ Hazards that cause injury or disease are mitigated
- ◆ Drinking water is safe
- ◆ Air is healthy
- ◆ Sewage is contained
- ◆ Restaurants serve safe, untainted food

Public Health Legislation

The Colorado Public Health Act of 2008, C.R.S. 25-1-501 et seq., is intended to improve the performance of the public health system statewide. Within the Act, the Colorado General Assembly declared the following:

The public health system reduces health care costs by preventing disease and injury, promoting healthy behavior, and reducing the incidents of chronic diseases and conditions. Thus, the public health system is a critical part of any health care reform. Each community in Colorado should provide high-quality public health services regardless of its location. A strong public health infrastructure is needed ...and is a shared responsibility among state and local public health agencies and their partners within the public health system.

In general, the Act:

- ◆ Restructured the local governmental public health system.
- ◆ Defined the duties of a local public health agency.
- ◆ Directed the Colorado Board of Health to establish by rule:
 - minimum qualifications for directors
 - core public health services
 - minimum quality standards for public health services, and
 - a funding formula for allocating moneys to county and district public health agencies.
- ◆ Defined new roles for the state board of health and local boards of health.
- ◆ Established a collaborative, five-year planning cycle at the state and local levels.

Local Public Health Agency Organization & Personnel

The Act requires that each county establish and maintain a county public health agency or participate in a district public health agency. Any two or more contiguous counties may establish a district public health agency.

According to the Act, an agency shall consist of a county or district board of health, a public health director and a medical officer (if the director is not a physician), and other relevant personnel necessary to carry out the duties of the agency. The type of personnel will vary, given community needs and population size. Agencies may choose to employ professionals with specific expertise, share FTEs with other agencies, or contract with another agency for services. The following are examples of common positions held within local public health agencies.

- ◆ Emergency Preparedness Coordinator
- ◆ Environmental Health Specialist
- ◆ Epidemiologist
- ◆ Health Educator
- ◆ Health Planner
- ◆ Nutritionist
- ◆ Public Health Nurse

Local Public Health Agency Duties

The Act defines a public health agency as an organization operated by a federal, state, or local government or its designees that acts principally to protect and preserve the public's health. The Act established the duties of all local public health agencies, including carrying out the public health laws and rules of the state board and commissions.

In addition to other powers and duties, an agency shall:

- ◆ Complete a community health assessment and to create a county or district public health plan at least every five years.
- ◆ Advise the local board of health on public policy issues necessary to protect public health and the environment.
- ◆ Provide or arrange for the provision of quality, core public health services as defined by the Colorado Board of Health.

Core Public Health Services and minimum quality standards for providing core public health services were established by Colorado Board of Health rules (6 CCR 1014-7 and 6 CCR 1014-9).

Foundational Services

1. Communicable Disease Prevention, Investigation and Control
2. Environmental Public Health
3. Maternal, Child, Adolescent, and Family Health
4. Chronic Disease, Injury Prevention, and Behavioral Health Promotion
5. Access to and Linkage with Healthcare

Foundational Capabilities

1. Assessment and Planning
2. Communications
3. Policy Development and Support
4. Partnerships
5. Organizational Competencies
6. Emergency Preparedness and Response
7. Health Equity and the Social Determinants of Health

Note: LPHAs can provide the service itself, refer to another organization, or contract with another agency or organization to provide the service. The agency has met this requirement if it can demonstrate that other providers offer this service sufficient to meet the local need.

Local Public Health Agency Funds & Treasurer

The Act (C.R.S. 25-1-511) states that the county treasurer shall serve as the treasurer of the county public health agency. In the case of a district agency, the treasurer of the county having the largest population shall serve as treasurer to the agency. The agency treasurer shall create a public health agency fund, to which shall be credited:

- ◆ Any moneys appropriated from a county general fund.
- ◆ Any moneys received from state or federal appropriations or any other gifts, grants, donations, or fees for local public health purposes.

The agency treasurer assures that moneys from the fund shall be expended only for the purposes of the public health agency. All claims or demands against the fund shall be allowed only if certified by the public health director and the president of the county or district board or their designee.

On or before September 1 of each year, the public health director, along with the local board of health, shall estimate the total cost of maintaining the public health agency for the ensuing fiscal year. The estimates shall be submitted in the form of a budget to the board of county commissioners in a single county agency, and a committee composed of the chairs of the boards of county commissioners in a district agency.

The board of county commissioners (or the respective boards if in a district agency) are authorized to provide any moneys necessary to cover the cost of maintaining the agency for the next fiscal year, by an appropriation from the county general fund or general funds from all counties (proportionately) in a district. In order to qualify for state assistance, the counties shall contribute a minimum of one dollar and fifty cents per capita for its local or district health services, and may contribute additional amounts as it may determine to be necessary to meet its local health needs.

Local Board of Health Structures

COUNTY AGENCIES

- ◆ Each county board of health shall consist of at least five members.
- ◆ The terms of the initial appointments are staggered, and then for five years thereafter.
- ◆ Members of the county board of health shall reside within the county where the public health agency is located.
- ◆ No business or professional group or governmental entity shall constitute a majority of the board.
- ◆ In counties with populations of less than 100,000, a three member board may be appointed. The board of county commissioners may designate itself as the county board of health if there was not a separate board of health prior to the effective date of the Act.

DISTRICT AGENCIES

- ◆ Each district board of health shall consist of a minimum of five members, and include at least one representative from each county in the district.
- ◆ Members of the district board of health shall be residents of one of the counties within the district.
- ◆ No business, professional group or governmental entity shall constitute a majority of the board.

Electing Local Board of Health Officers

Once a local board of health is established, a president and other officers should be elected at an organizational meeting. The Public Health Director may serve as secretary, at the board's discretion, but shall not be a member of the board.

Meetings

Regular meetings of a board of health must be held at least once every three months. Special meetings may be called with three days notice, or in the case of an emergency twenty-four hours notice by the public health director, the president of the board, or by the majority of the members of the board.

Adopting By Laws

A county or district board may adopt, and at any time, may amend bylaws in relation to its meetings and the transaction of its business. A majority of the board shall constitute a quorum.

Local Board of Health Appointments

The Act (C.R.S. 25-1-508) states that members of a county board of health shall be appointed by the board of county commissioners from each county comprising the district.

Because local boards of health play a vital role in the public health system by providing oversight, recommending budgets, and developing policies to keep the public safe and healthy, the National Association of Local Boards of Health (NALBOH) has developed recommendations for appointing authorities to consider. NALBOH recommends that board membership reflect the diversity of the community it serves, and board members have expertise in the areas of:

- ◆ Public Health
- ◆ Environmental Health
- ◆ Medicine/Nursing
- ◆ Health Promotion/Health Education
- ◆ Mental Health/Social Work
- ◆ Education
- ◆ Community Advocacy
- ◆ Media Relations
- ◆ Business

In addition, the Act specifies that members of the board shall serve without compensation, with the exception of necessary travel and subsistence expenses to attend meetings.

Public Health Director Selection

The Act directs local boards of health to select a public health director, who meets the following minimum qualifications established in rule (6 CCR 1014-6) and listed below:

Physician Director Candidate:

- ◆ Licensed to practice in Colorado within six months of hire.
- ◆ Medical school graduate (MD or DO) & preferably board certified in preventive medicine.
- ◆ Within the past ten years, have five years of administrative experience in public health or related field; two years supervising public health professionals.
- ◆ A candidate with one year of graduate study in a recognized school of public health is preferred.

Non-Physician Director Candidate:

- ◆ Master's degree in public health or related discipline.
- ◆ Within the past ten years, have five years of administrative experience in public health or related field; two years supervising public health professionals.
- ◆ If candidate is a nurse, he/she shall have a license to practice in Colorado within six months of hire.

Note: If the public health director is not a licensed physician, a designated medical officer (advisor) shall be employed or contracted (paid or volunteer) by the district or county board of health to advise the public health director on medical decisions and be available at all times to the public health director. The medical officer must be a graduate from an approved medical school (MD or DO) and licensed to practice medicine in the state of Colorado.

Public Health Director Selection

Substitutions: The local board of health may substitute professional public health work experience for certain academic requirements, or exceptional academic preparation for certain experience requirements, when a candidate is otherwise prepared to fulfill the duties.

Waivers: Under certain conditions, the local board of health may waive the minimum qualifications set forth in 6 CCR 1014-6, under the following criteria:

- ◆ The population of the jurisdiction for the county or district served and its ability to recruit a qualified candidate;
- ◆ Whether the candidate for public health director will seek to obtain additional public health education and experience within five years of the waiver; and
- ◆ The county or district board of health has explored joining with a county or establishing a district public health agency with a qualified public health director.

If the state board of health determines that the waiver does not meet the criteria the state board of health shall direct the department to work with the county or district board of health to assist the appointed director in obtaining the needed skills or experience.

Note: Within 30 days of substituting a requirement or allowing the waiver, the local board of health shall submit the information to the Colorado Board of Health for review, through Form 1014-6.

Boards and Directors

Powers & Duties

Administrative Oversight

Local Boards of Health

Select a Public Health Director to serve at the pleasure of the board. Employ/contract with a medical officer to advise the director, if not a physician. In the event of either vacancy, employ/contract with a qualified person, or request temporary assistance from another county or state health department.

Hold regular Board of Health meetings at least once every three months.

Request Director or another to serve as board secretary, responsible for maintaining all records required by Part 2 of Article 72 of Title 24, C.R.S., and ensuring public notice of meetings in accordance with Part 4 of Article 6 of Title 24, C.R.S.

Provide, equip, and maintain suitable offices and facilities for the proper administration and provision of Core Public Health Services.

Follow orders, rules, and standards of the Colorado Board of Health.

Hold hearings, administer oaths, subpoena witnesses, and take testimony in all matters relating to the respective powers and duties of a local board of health, (e.g., local regulation variances, appeal of a cease and desist order, removal of a license, etc).

Act in an advisory capacity to the public health director on all matters pertaining to public health.

Approve the five-year local public health plan, and then submit to the State Board of Health for review.

Determine necessary services and set local priorities consistent with state public health laws and rules, according to local needs and the resources available, and consistent with the state and local public health improvement plans.

Boards and Directors

Powers & Duties

Administrative Oversight

Public Health Director

Act as custodian of all property and records of the agency.
Maintain an office location designated by the county or district board.

Select all personnel required by the agency and prescribe the duties.

Serve as secretary to the county or district board of health, if requested by the board.

Administer and enforce 1) the public health laws of the state, 2) the orders, rules, and standards of the state department, commissions and/or board of health; and the orders and rules of the local board of health.

Hold hearings, administer oaths, subpoena witnesses, and take testimony in all matters relating to the respective powers and duties.

Act as the local registrar of vital statistics or contract the responsibility.

Direct the completion of a community health assessment and local/regional public health plan, every five years.

Policy Making

Local Boards of Health

Determine general policies to be followed by the public health director, in administering & enforcing public health laws, orders, & rules.

Develop and promote the public policies needed to secure the conditions for a healthy community, by considering the advice and expertise of the local public health agency.

Issue orders & adopt rules consistent with the laws, rules & orders of the state & the state board, for public or environmental health issues that pose no immediate health threat (e.g. nuisance abatement).

Public Health Director

Issue orders & adopt rules consistent with the laws, rules & orders of the state, & the state board in the event of a public health emergency (e.g. quarantine & isolation, water boil, evacuation, closure of a public place, etc.).

Boards and Directors

Powers & Duties

Financial Oversight

Local Boards of Health

Annually review the costs of maintaining the local public health agency for the ensuing year. These estimates shall be submitted in the form of a budget to the board of county commissioners or to a committee composed of the chairs of the boards of all counties comprising a district agency.

Assess fees to offset the actual, direct costs of environmental health services, with the exception of any person who has already paid a fee to the state or federal government, and using the already-established fee for annual retail food establishment inspections, set forth in section 25-4-1607.

Accept and, through the public health director, use, disburse, and administer all appropriated county general funds, federal and state aid or other property and services or money allotted to an agency for county or district public health functions.

Board President (or designee) and Public Health Director certify that claims or demands made against the local public health agency fund were expended only for the duties of the agency.

Public Health Director

Annually estimate the total cost of maintaining the local public health agency for the ensuing year, submit the budget to the local board of health for review, and then the board of county commissioners, or a committee composed of the chairs of the boards of all counties comprising a district, for approval.

Direct the resources necessary to carry out the county or district public health plan, based on service priorities from the local board of health.

Along with Board President or their designee, certify that claims or demands made against the local public health agency fund were expended only for duties of the agency.

Public Health Resources

 <p>COLORADO Office of Public Health Practice, Planning, & Local Partnerships Department of Public Health & Environment</p>	<p>Office of Public Health Practice, Planning, and Local Partnerships: https://cdphe-lpha.colorado.gov/</p>
	<p>National Association of Local Boards of Health (NALBOH): www.nalboh.org</p>
 <p>CALPHO Colorado Association of Local Public Health Officials</p>	<p>Colorado Association of Local Public Health Officials: www.calpho.org</p>
 <p>COLORADO Department of Public Health & Environment</p>	<p>Colorado Department of Public Health & Environment: www.colorado.gov/cdphe</p> <p>Boards & Commissions Established by Statute: State Board of Health, Water Quality Control Commission, Solid and Hazardous Waste Commission, and Air Quality Control Commission: https://cdphe.colorado.gov/public- information/boards-and-commissions</p> <p>Department Rules & Regulations www.colorado.gov/cdphe/regulations</p>
 <p>COLORADO PUBLIC HEALTH ASSOCIATION</p>	<p>Colorado Public Health Association: www.coloradopublichealth.org</p>
	<p>Public Health Accreditation Board: www.phaboard.org</p>
	<p>National Association of City and County Health Officials (NACCHO): www.naccho.org</p>

For more information

On the Colorado Public Health Act of 2008, or to request technical assistance on board of health orientation, please contact the Office of Public Health Practice, Planning, and Local Partnerships, Colorado Department of Public Health and Environment at:

<https://cdphe-lpha.colorado.gov/>



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