



**Board of Directors  
Regular Meeting Agenda**

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Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or [Zoom](#)

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Date: Wednesday, June 17, 2026

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Time: 6:00 PM

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| <b>6:00 PM</b> | <b>I. Call to Order</b> <ul style="list-style-type: none"><li>a. Roll Call Board of Directors</li><li>b. Welcome Guests &amp; Attendees</li><li>c. Conflict of Interest Statement</li><li>d. Approval of Agenda</li></ul>   | Erin Hottenstein                                       |
| <b>6:05 PM</b> | <b>II. Public Comment</b>   |  |
| <b>6:10 PM</b> | <b>III. Presentations</b> <ul style="list-style-type: none"><li>a. Legislative Session Presentation</li></ul>   | Alyson Williams  |
| <b>6:40 PM</b> | <b>IV. Consent Agenda</b> <ul style="list-style-type: none"><li>a. Approval of Draft Regular Meeting and Executive Session minutes from 5.20.2026 &amp; Executive Session minutes from 6.5.2026</li></ul>                   | Erin Hottenstein                                       |
| <b>6:45 PM</b> | <b>V. Reports and Discussions</b> <ul style="list-style-type: none"><li>a. Investment Report</li><li>b. Board of Director Reports</li><li>c. Liaison to PVHS/UCHealth Report</li><li>d. Executive Director Report</li></ul> | Courtney Green<br>Board<br>John McKay<br>Brian Ferrans |

**7:05 PM VI. Adjourn**

Erin Hottenstein

**Updates:**

- Next Board Meeting at the Health District on: August 19,2026 at 6pm
  - Pre Board Meeting Dinner at 5pm
- Board of Directors Retreat, September 9<sup>th</sup> 12-4pm (Location TBD)
- 2026 SDA Annual Conference September 15-17th, Keystone, CO



**AGENDA DOCUMENTATION**

*Meeting Date: June 17, 2026*

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**SUBJECT: Approval of draft minutes from: May 20, 2026 Regular Meeting and Executive Session & Special Meeting on June 5, 2026**

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**PRESENTER:** Erin Hottenstein

**OUTCOME REQUESTED:**  **Decision**     **Consent**     **Report**

**PURPOSE/ BACKGROUND**

To approve the draft minutes from: May 20, 2026 regular meeting and executive session & draft minutes from special meeting on June 5, 2026.

***Attachment(s): Draft meeting minutes.***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** Approve Minutes.


**Health District**  
**Board of Directors Meeting**  
**5.20.26**  
**DRAFT MINUTES**

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Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or Zoom

Date: Wednesday, May 20, 2026

Time: 6:00 PM

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<b>Board Members Present:</b>	<b>Also Present:</b>
Erin Hottenstein, Board President	Victor Kraft – CLA (Audit Presenter)
Lee Thielen, Board Vice President	Brian Ferrans – Executive Director
Sarah Hathcock, Secretary	Jacque Ferrero – Executive Assistant/Board Clerk
John McKay, PVH/UC Health Liaison	Courtney Green – Chief Administrative Officer
Julie Field, Treasurer (Remote/Zoom)	Dana Turner – VP of Client Experience
	Jessica Holmes – Controller/Finance Officer
	Alyson Williams – VP of Strategy & Impact
	Misty Manchester – Director of People & Business Operations
	Julie Kenney – HR Manager
	Marisa Dylan – VP of Marketing & Communications
	Michael Oliver – Information Systems Specialist
	Mike Lynch – Director of Infrastructure (Remote)
	Elizabeth Lebuhn – Legal Counsel (Remote)
	Juan Gonzales – ICC

**I. Call to Order**

The meeting was called to order at 6:01 PM by Board President Erin Hottenstein, with a quorum present. Guests and attendees were welcomed.

Pursuant to the bylaws, the conflict-of-interest statement was read. All board members confirmed no known or perceived conflicts of interest related to any agenda item. Directors Field and McKay, who joined after the statement was initially read, each confirmed no conflicts in the interest of transparency.

*The agenda was approved unanimously upon motion by Director Thielen, seconded by Director Hathcock.*

**II. Public Comment**

No public comment was received, either online or in person.

**III. Presentations**

**a. Annual Audit Presentation – Victor Kraft, CLA**

Victor Kraft of CLA presented the results of the annual audit for the fiscal year ended December 31, 2025. The Health District received an unmodified, or clean, opinion — the highest level of assurance available — meaning the financial statements are presented fairly in all material respects with no material errors or misstatements identified. The audit was conducted in accordance with required auditing standards, providing reasonable rather than absolute assurance. Kraft distinguished the financial audit from the forensic audit previously conducted, noting that a forensic audit is narrow and deep in scope and does not result in an opinion on the financial statements overall.

Key financial highlights include a net position of \$23.5 million, an increase of approximately \$2.2 million from the prior year. Of that total, \$467,000 is restricted per TABOR requirements. Total revenues were approximately \$15.2 million, with property taxes and specific ownership taxes comprising roughly 73% of that figure. Expenditures were approximately \$13 million, a minor increase of about \$500,000 from the prior year. The District came in under budget by approximately \$1.5 million with no compliance issues related to expenditures.

Regarding required communications to the board, accounting policies were found to be appropriate and consistently applied. Financial statement disclosures are neutral and clear with no evidence of bias. No high-risk estimates or unusual transactions were identified. Two immaterial misstatements were identified and corrected during the audit; no uncorrected misstatements remain in the final statements.

One significant deficiency was identified related to bank reconciliation review documentation: there was no documented evidence that reconciliations were being prepared and reviewed by separate individuals, either by physical sign-off or within NetSuite. This is a documentation issue rather than an accuracy concern — the reconciliations themselves were found to be accurate. The recommendation is to enable the reconciliation approval module in NetSuite or establish a physical sign-off process. Management confirmed outreach to NetSuite is already underway and a demo has been requested. Additionally, IT control observations were made, including opportunities to strengthen password requirements, implement a formal user-access review, enforce password policies consistently across all systems, and develop a formal IT security policy. No material weaknesses were identified. Board members congratulated management and staff on the clean audit result.

**b. Branding & Communications Update – Marisa Dylan, VP Marketing & Communications**

Dylan presented an update on the Health District's brand refresh and community communications campaign, covering where the organization has been, where it currently stands, and where it is headed. The rebrand reflects the Health District's current identity — representing connections among neighbors, partners, and community members — and conveys that no single entity owns the answers to public health challenges. The objective is one clear, recognizable brand mark with comprehensive guidelines, replacing sub-brands that diluted cohesion and confused the public. A core strategic principle is outside-in messaging: speaking to community members' needs rather than the organization's internal communications preferences.

Physical and environmental brand activations are well underway, including lobby desk logos, hanging ribbon graphics at the 120 and 202 locations, stairwell graphics, and 26 photographs

embedded throughout both buildings in which the Health District's icon mark has been placed within real community settings. Graphic designer Vance Sherwood was credited for enabling rapid implementation. Utility box art is in progress with artist China Maple; city approvals have been secured and painting is expected to begin within a few weeks. New program-specific brochures use an outside-in messaging approach, opening with statements that acknowledge the lived experience of the reader before describing services, and include transportation and multilingual service information.

A Storyline Wall was installed in the building several weeks prior, depicting the Health District's evolution alongside the community's development and acknowledging challenges openly while remaining future-forward. A Spanish-language version is planned. Internally, a new newsletter format has been introduced featuring Spotlights and Shout-Outs, Quick Kudos notepads from the Culture in Action (CIA) Committee, and an About Me User Guide initiative to improve team communication.

The Caring More campaign is the Health District's first community-facing advertising campaign, using a problem-first approach that leads with community members' challenges to build immediate relevance and trust. Current media placements include 20 billboards, 20 bench ads, 42 bus shelter ads in English and Spanish, 88 interior bus ads, five supermarkets, PSD newsletter placement, and Rocky Mountain Parents magazine. Early results are encouraging, with 80 to 100 organic daily searches for healthdistrict.org observed in the first week. A new website is expected to launch by end of Q2, featuring streamlined navigation around the three core service lines and analytics to track visitor journeys. A newly hired digital media specialist will expand social, Google Ads, and geo-targeted advertising.

Board members expressed strong appreciation for the overall direction and quality of the work. One board member raised a concern about the representation of identity in campaign imagery and the potential for unintentional perpetuation of racial stereotypes, asking whether focus groups have been conducted on how community members wish to be portrayed. Ms. Dylan acknowledged the concern, confirmed that three focus groups will be completed by year-end, and noted that a more detailed brand and imagery style guide is planned. A board member also asked whether marketing activity could outpace service capacity. Executive Director Brian Ferrans responded that the campaign has been a deliberate slow build, no significant demand surge has been observed, and open staff positions still provide a capacity buffer.

**c. Employee Stay Interviews & Engagement Survey – Misty Manchester, Director of People & Business Operations, and HR Team**

Manchester presented key themes from stay interviews conducted January 12 through 23, 2026, in which supervisors held 30-minute semi-structured one-on-one meetings with staff using five questions provided by HR. When asked why they stay, staff overwhelmingly cited the mission, community impact, and the relationships they have formed, along with compensation, professional development, and the organization's values-driven rather than quota-driven culture. Staff expressed a desire to learn more about leadership, organizational structure, decision-making, and how data drives strategy. They feel most supported when there is visible leadership, open dialogue, consistent expectations across the organization, and regular one-on-ones with clear feedback. Communication gaps during transitions and inconsistent accountability across programs were identified as key sources of feeling unsupported. Next stay interviews are scheduled for January 2027.

The employee engagement survey was conducted in April over 11 days and achieved an 80% response rate, up from 2025, placing the Health District at the top end of the national average of 70 to 80%. Notable improvements from 2025 to 2026 include increased transparency and communication, greater leadership engagement, a stronger sense of organizational direction,

and progress toward a cohesive culture. Employees remain deeply connected to the mission around community impact, access to care, and health equity. Positive trends include increased comfort sharing concerns with leadership, increased trust in the senior leadership team, increased pride in working for the Health District, and increased sense of career support. Areas requiring continued attention include workload management, team dynamics — with fewer employees reporting strong collaboration with their teams — and inconsistent communication of strategy across programs.

Survey questions on strategic plan integration revealed that while the plan is valued, its full impact depends on consistent organization-wide integration and stronger operational communication. The overall picture reflects an organization moving in a positive direction, with leadership communication strengthening, mission reinforced, and investment in culture and employees underway. Going forward, the HR cadence will include a spring engagement survey, annual performance reviews in July, an October pulse survey of seven to ten questions, and annual January stay interviews. Results will be shared with all staff at the quarterly Town Hall on Friday, May 22, 2026.

Board discussion included questions about the pulse survey format, the value of moving to a more sophisticated engagement platform such as Quantum to generate an actual engagement score, and strategies for connecting individual work to the broader strategic plan so employees can see and celebrate their contributions. HR Generalist Alexa Kuretsky was recognized for building the survey in Microsoft Forms.

#### IV. Consent Agenda

The consent agenda included approval of the draft meeting minutes from the April 22, 2026 regular board meeting, board public policy, and the ICC cybersecurity review.

*The motion to approve the consent agenda was made by Director Thielen, seconded by Director Hathcock, and passed unanimously.*

#### V. Action Items

No action items were presented at this meeting.

#### VI. Reports & Discussions

##### a. Board Member Reports

**Director Hottenstein:** Met with Victor Kraft from CLA regarding the audit and noted that the Public Policy Committee has wrapped up.

**Director Thielen:** Attended the Health District open house and found it very well done, well planned, well attended, and hospitable. Tours of the facilities were highlighted as a particularly effective and welcoming element.

**Director Hathcock:** Reported positive community feedback about Health District services and noted several encounters with staff outside of work, all of whom expressed that things are going well within the organization.

**Director Field:** Met with Victor Kraft and Executive Director Brian Ferrans regarding the audit and confirmed that the board public policy session is now concluded. Was unable to attend the open house due to being out of town.

**Director McKay:** Recognized Mental Health Awareness Month and expressed appreciation for the Health District's behavioral health practitioners. Acknowledged Asian American and Pacific Islander (AAPI) Heritage Month. Attended the 4th Annual Pride Prom for youth ages 13 to 19 who

identify as queer, held in partnership with the Discovery Museum, City of Fort Collins, and Poudre River Library District. Attended the UC Health Board meeting and reported the following: UC Health anticipates a Medicaid rate reduction of 1.5 to 3%, representing an estimated \$3 million revenue impact for Northern Colorado; the HR1 legislative impact is estimated at approximately \$7 million; a minimum 8% increase in employee healthcare benefits costs is anticipated organization-wide, and Director McKay suggested the Health District consider going to market to competitively bid its own coverage. UC Health is also anticipating a 3% merit increase, continued patient care growth in Northern Colorado, and the new behavioral health unit at Poudre Valley Hospital is expected to be fully operational within the next quarter.

**b. Executive Director Report – Brian Ferrans**

Ferrans opened by expressing gratitude for employee engagement survey results trending in a positive direction and credited the leadership team's work over the past nine months. Since the last meeting, Ferrans attended a community outreach event in Red Feather Lakes connected to an ongoing health access survey open through the end of May, currently at approximately 300 responses toward a goal of 350. He also attended a Mind Our Future Coalition roundtable on statewide strategies for youth mental health with approximately 8 to 10 community partners.

Looking ahead, the all-staff Town Hall is scheduled for Friday, May 22, 2026, featuring the employee engagement survey results and executive director priorities for the remainder of the year. Ferrans recapped the recent open house as a flawlessly executed event, crediting all-hands staff participation, strong community networking, connections formed among internal teams, and enthusiastic engagement from the dental team.

Board members were reminded of the Special District Association Conference, September 15 through 17, 2026 in Keystone, Colorado. Those interested in attending are asked to contact Jacque Ferrero to be registered.

**VII. Executive Session**

The meeting was recessed at approximately 7:45 PM. The executive session was convened at approximately 7:50 PM via Microsoft Teams and concluded at 9:04 PM. Upon reconvening the public Zoom meeting at 9:06 PM, Director Hottenstein asked whether any participant believed that any substantial discussion of matters outside the motion to enter executive session had occurred, or that any improper action had occurred in violation of the Open Meetings Law. No concerns were raised.

**VIII. Adjournment**

*A motion to adjourn was made by Director Hathcock and seconded by Director Thielen. Passed unanimously.*

*The meeting was adjourned at 9:07 PM.*



**Board of Directors  
Special Meeting Agenda**

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Location: REMOTE – Microsoft Teams Meeting

<https://teams.microsoft.com/meet/212130124360042?p=TozCVk115y2TdSkSPP>

Date: Friday, June 5th 2026

Time: 7:00 AM

**7:00 AM I. Call to Order**

Erin Hottenstein

- a. Roll Call Board of Directors

*Meeting called to order at 7:07 AM by Director Hottenstein*

*Present: Director Thielen, Director Hathcock, Director McKay, Director Hottenstein, Director Field*

- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement
- d. Approval of Agenda

**7:05 AM II. Public Comment**

**7:10 AM II. Executive Session**

Erin Hottenstein

An Executive Session pursuant to C.R.S. § 24-6-402(4)(a) to discuss the possible purchase, acquisition, lease, transfer, or sale of real, personal, or other property interests related to the district’s long-term campus expansion and facility planning needs, including the evaluation of potential properties and associated strategic considerations.

***Motion to adjourn the Executive session by Director McKay at 7:48AM.***

***Passed unanimously.***

***Executive Session concluded at 7:48 AM***

***Motion to adjourn June 5, 2026, meeting by Director Field, Passed***

***Unanimously.***

***Meeting adjourned at 7:50 AM***



**AGENDA DOCUMENTATION**

*Meeting Date: June 17, 2026*

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**SUBJECT: Annual Investment Report**

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**PRESENTER:** Courtney Green

**OUTCOME REQUESTED:**  Decision  Consent  Report

**PURPOSE/ BACKGROUND**

Review of the Annual Investment report prepared by Jessica Holmes.

***Attachment(s): Annual Investment Report.***

**FISCAL IMPACT:** N/A

**STAFF RECOMMENDATION:** None.



# Annual Investment Report

For the Year Ended | December 31<sup>st</sup>, 2025

Jessica Holmes  
Controller/Finance Officer



# Executive Summary

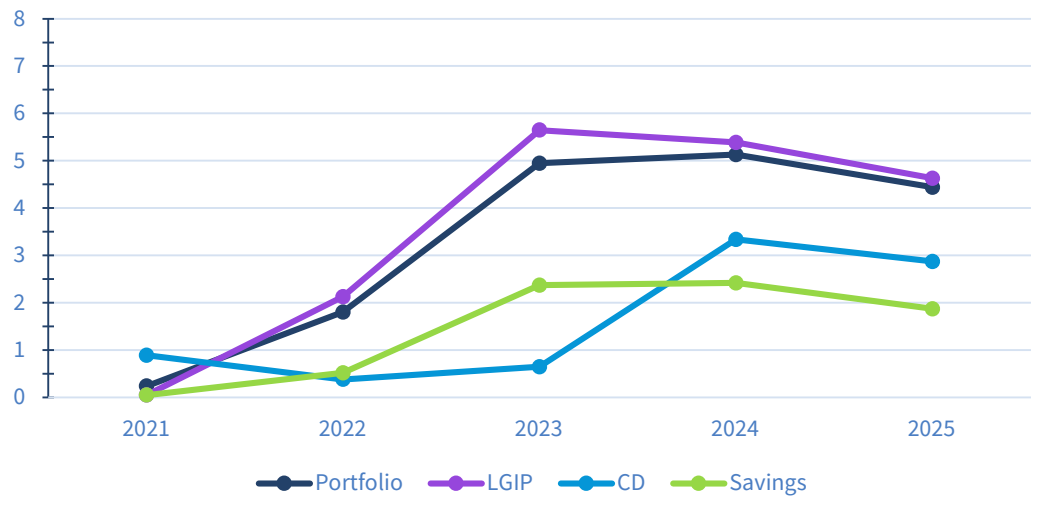
For the year ending December 31, 2025, the Health District’s investment portfolio performed in accordance with expectations. The portfolio maintained safety, liquidity, and yield –in that order of priority– in accordance with Colorado Revised Statutes §24-75-601 *et seq.* (the Public Deposit Protection Act).

Total portfolio value at year-end was \$13,782,403, generating \$612,059 in investment earnings, representing an overall portfolio yield of approximately 4.44%.

While investment earnings for 2025 were higher than the District’s 2024 earnings of \$597,659, the portfolio yield decreased by 69 basis points (bps) from 5.13% in 2024 to the 4.44% we saw in 2025.

As the majority of the Health District’s portfolio is invested in COLOTRUST, a local government investment pool (or LGIP), this decrease was expected and prefaced in the last investment report. LGIP accounts invest in short-term instruments that are frequently repriced, this means that rates are not locked in and yield changes almost immediately with the Federal Funds Rate. The Fed lowered rates by 25 bps (or 0.25%) in September, October, and December of 2025.

Investment Yield Decreased 0.69% in 2025



# Investment Portfolio

Governmental entities that are funded by tax dollars, such as the Health District, are subject to strict investment regulations to ensure safety, liquidity, and public accountability. An investment strategy focused on low risk and high liquidity is essential for regulatory adherence. To comply with regulations, the Health District’s funds are held in the following permissible investment options: Local Government Investment Pools (LGIP), Certificates of Deposit (CDs) at qualified banks, and a flexible savings account.

Just over 90% of the Health Districts funds are invested in the Colorado Local Government Liquid Asset Trust, a LGIP that invests government entities’ funds strictly within the investment parameters set by state law. An additional 8% are invested in Certificates of Deposit (collateralized bank deposits) with banks that are authorized to accept public funds. The remaining 2% are held in a Flexible Savings Account.

Type	Investment	Balance	Income	Yield	Allocation
LGIP	COLOTrust - Plus+	12,424,596	575,585	4.63%	90.15%
	COLOTrust - Prime	1,614	65	4.05%	0.01%
		<b>12,426,211</b>	<b>575,651</b>	<b>4.63%</b>	<b>90.16%</b>
CDs	Adams Bank & Trust	269,734	11,828	4.38%	1.96%
	Advantage Bank	128,072	4,900	3.83%	0.93%
	Advantage Bank	155,944	5,877	3.77%	1.13%
	Points West Community Bank	127,629	4,656	3.65%	0.93%
	Points West Community Bank	168,293	4,353	2.59%	1.22%
	Mountain Valley Bank	250,031	-	0.00%	1.81%
		<b>1,099,703</b>	<b>31,614</b>	<b>2.87%</b>	<b>7.98%</b>
Other	FNBO - Flexible Savings Account	256,490	4,795	1.87%	1.86%
<b>Total Portfolio</b>		<b>\$ 13,782,403</b>	<b>\$ 612,059</b>	<b>4.44%</b>	<b>100%</b>

All accounts are covered by FDIC insurance up to \$250K, balances exceeding FDIC limits are collateralized with pledged securities.

The Health District's investment portfolio is compliant and meets the dual goals of generating meaningful returns and preserving public funds, while maintaining full alignment with Colorado's statutory requirements for governmental entities. However, the organization would benefit from implementing an investment laddering strategy to lock in higher rates based on liquidity needs.

## Outlook & Considerations

As mentioned in the Executive Summary, the Federal Reserve lowered interest rates by a combined 75 bps from September to December of 2025. While these cuts impacted the Health District's investment yield in 2025, they have been having a higher influence on our 2026 investment earnings.

The Federal Reserve is expected to hold interest rates steady for the remainder of 2026 due to persistent, elevated inflation. Geopolitical shock and energy prices changed economic projections that had previously anticipated additional rate cuts this year. A leadership transition has further complicated the outlook, but there is consensus among experts that the bar to lower or raise rates remains high and would require a significant change from the status quo for the Fed to act.

The Health District's investment portfolio has remained largely unchanged for years due to internal staffing and leadership transitions. As such, I will echo my recommendations from last year:

- LGIP Investments – consider adjusting exposure in response to the decreased rates.
  - Maintain balances that are sufficient for operational liquidity and reallocate excess funds into higher-yielding instruments, such as CDs.
- CD Investments – there is still some opportunity to lock in slightly higher rates through CDs.
  - If possible, take action to invest excess funds into regulation compliant CDs with fixed rates while they remain ahead of LGIP yields.
  - Use a laddered CD approach to balance yield and liquidity (invest across multiple maturities of 6, 9, 12, and 18 month terms based on operational needs).
- Savings Account – reevaluate usage.
  - The Flexible Savings Account was originally established as a liquid option to gain returns, while also having cash available for operations. However, the LGIP accounts have been fulfilling that purpose.
  - With a yield of 1.87%, well below LGIP and CD rates, these funds are being underutilized. I would be beneficial to move these funds to a different investment option.
- Future Reporting & Monitoring
  - While a comprehensive report is not necessary on a quarterly basis, investment and rate trends should be monitored and summarized at the same cadence as our Financial Reporting Packages.
  - Additionally, the Health District should consider rebalancing investments as needed to maintain optimal yield and liquidity.

While the nationwide economic uncertainty had resulted in lower investment yield, due to maintaining the required low risk high liquidity focus on our investments, the Health District's funds are never at risk of loss. However, it is important that we still respond accordingly to changes to safeguard yields, which in turn provide the organization with more funds to invest in the community we serve.



## AGENDA DOCUMENTATION

*Meeting Date: June 17, 2026*

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**SUBJECT:** Executive Director Report

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**PRESENTER:** Brian Ferrans

**OUTCOME REQUESTED:** \_\_\_ Decision \_\_\_ Consent  X  Report

Please find the Executive Director Staff Report attached with current program updates.

## MEETINGS

The Executive Director met with the following community partners and attended the following meetings/events since May 20, 2026, board meeting:

- Claudia Menendez – City of Ft. Collins, Equity & Inclusion Officer
- Urban Renewal Authority – Josh Birks & Andy Smith
- Colorado Medicaid Commission – overview of how this new commission will be setup and structured
- Fort Collins Police Services HOPE & MHRT Ribbon Cutting Ceremony
- Board Member check-in w/ Directors Hottenstein and Thielen
- Executive coaching session
- Gloria Kat – La Familia
- Colorado Trust – to review HD investments
- All Staff Meeting and HD Staff Town Hall session
- Behavioral Health Work Session – MHSU Alliance & HD hosted work session on June 11<sup>th</sup>

## UPCOMING MEETINGS/EVENTS

- Salud – Laura Schwartz
- Joy Sullivan – United Way of Larimer County
- Juneteenth Celebration – Saturday, June 20<sup>th</sup> 9am-7:30pm
  - Health District will be hosting a table as part of the Health & Wellness Fair near the East Lawn
- Summer Bike to Work Day – Wednesday, June 24<sup>th</sup> 6:30am-9:30am
- NOCO Foundation – Executive Director/CEO Roundtable Discussion “From Pressure to Possibility: A Practical Guide to Strategic Partnerships” - June 30<sup>th</sup> 8:30am-10:30am
- Annual Health District Employee Picnic – July 29<sup>th</sup> @ 4:30pm (Edora Park ,Shelter #1)

## **Other Updates**

- Leadership Engagement
  - Multiple facilitated discussions with our leadership group to identify team culture, decision-making, and leadership development improvement opportunities. This work is being done to ask our leaders directly what they need from executive team and each other, in order to be as engaged and effective as possible in their roles.
- Posted for the new Training and Professional Development Strategist position
  - 125 applicants. Staff is conducting screenings and will schedule interviews in the next two weeks.
- Employee Benefits & Staff Appreciation
  - Announced at our May Town Hall meeting the addition of two additional sick days and a dedicated Mental Health day available for staff to use each year. Also awarded a staff appreciation bonus to all full-time, part-time and PRN staff.
- Executive Leadership Retreat
  - Held a half-day retreat for the executive team in late May at the Sylvan Dale Ranch. Focus was on connection and culture, strategic vision & leadership structure, and mission/vision/values reflection.
- Behavioral Health Work Session
  - Facilitated a work session on June 11<sup>th</sup> with various community partners, service providers, and MHSU Alliance stakeholders. Purpose was to explore current gaps/needs related to BH services and care for adolescents/families and adults. This was a part of the District's efforts to inform our existing and future behavioral health services and strategies.

***Attachment(s): May 2026 Program Updates***

# Leadership report summary

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**Reporting department:** Health Equity  
**Reporting month:** May 2026

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## What's new/key updates

- In partnership with HR, health equity has been embedded into the upcoming annual staff performance management process. The revised approach will further embed equity language into existing assessment criteria and add a dedicated health equity criterion, reflecting how equity should be both a foundation woven into all work and a distinct organizational priority.
- Resources to support health equity integration into the 2027 work planning process were compiled and shared with each team, identifying each team's alignment to the health equity strategic plan. This directly supports health equity strategic plan Goal 1 (valuing and integrating health equity as a core component of our work) and Strategy 1.3.2 (developing team workplans that align with health equity goals).
- Recommendations to enhance current interpreter services tools and workflows remain underway, including a phone/video interpretation tools assessment, updated interpreter services procedure and reference sheet, and an onboarding toolkit. All work aligns with the national standards for culturally and linguistically appropriate services (CLAS).

## Strategic relevance

- **Health Equity:** Embedding equity into performance management and work planning invests in staff knowledge and commitment, cultivating an environment that welcomes diverse thought and experience. Interpreter services enhancements advance culturally and linguistically appropriate services, helping all community members achieve their best health.
- **Organizational Excellence:** Integration of health equity into performance management and team workplans strengthens internal infrastructure and supports transparent, engaging communications so everyone feels seen, heard, and respected. Interpreter services enhancements strengthen program infrastructure and service delivery.

## Issues/risks/challenges

- N/A

## Key metrics/trends

- At the start of each quarter, this section contains visualizations on health equity strategic plan implementation progress.

# Leadership report summary

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**Reporting department:** Strategic Funding Partnerships  
**Reporting month:** May 2026

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## What's new/key updates

- Key community stakeholders were asked to provide feedback on the proposed Partnership Principles in order to ensure feasibility and acceptability in implementation. The feedback received was minimal overall, which positions the organization well for robust implementation in the near future.
- Staff are continuing to make progress on creation and implementation of a framework to guide the work of strategic funding partnerships. At the August meeting, staff will report on the proposed framework.

## Strategic relevance

- **Organizational Excellence:** Instituting processes for this new programmatic area build the infrastructure for this area to ensure clarity, transparency, and sustainability.
- **Partnerships:** Prioritizing relationship building with consistent feedback loops and mutual accountability mechanisms that strengthen identified service delivery outcomes.

## Issues/risks/challenges

- No significant issues to report.

## Key metrics/trends (quarterly)

- No new metrics or data to report. Partner reports from Quarter 2 will be reflected in the regular August meeting update.

# Leadership report summary

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**Reporting department:** Data & Analytics  
**Reporting month:** May 2026

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## What's new/key updates

- **Data system modernization:**
  - Work continues to identify a data system that will replace our internally built and maintained client database.
  - Top vendors, selected from submitted written proposals, will be invited for demonstrations.
  - A staff workgroup will help evaluate vendor demos and meet every two weeks for synchronous updates and planning throughout the transition.
- **Data governance:** Staff drafted a technical dictionary of data collected in our legacy client database that will be translated for non-technical audiences to inform discussions on data migration and data collection workflow alignment.
- **Red Feather Lakes Area Healthcare Access Survey:** This local community survey closed on May 31, 2026. We are evaluating survey responses for completeness and quality. We'll conduct analysis over the next 2 months and expect to present initial results to the Red Feather Lakes community in late August.
- **County-level Analysis of 2025 Colorado Health Access Survey (CHAS):** Work continues to work with the Colorado Health Institute to analyze and synthesize this community health data.

## Strategic relevance

- **Organizational Excellence:** All updates relate to improving and expanding available data for decision-making. Additionally, the procurement of a modern data system strengthens our core infrastructure.
- **Partnerships:** Our healthcare access survey project with the RFL community is expanding community engagement. Our work with CHAS data is improving collaboration with partners to advance health equity.

**Issues/risks/challenges:** Implementing the HL-7 messaging feature (this feature is allowing us to test and learn from the development of interfaces in preparation of a new client data system) to automatically transmit client demographic data from the HD Database to Dentrax (Dental Program EHR) is delayed due to lagging Dentrax software updates which need to be implemented during office downtime. These updates are pending the coordination of IT support with office downtime.

**Key metrics/trends:** No metrics to report this month. Defining and developing metrics for this new program is part of the 2026 program workplan. Anticipated areas of focus will be data quality indicators and/or data use trends.

## Leadership report summary

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**Reporting department:** Community Engagement  
**Reporting month:** May 2026

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### What's new/key updates

- The Outreach and Education team attended a variety of community events and coalition meetings in May, connecting with a total of 291 individuals. Highlights included participation in the annual Autism Resource Fair, the Perinatal Well-Being Coalition, and Mission ReConnect: Veteran & Service Member Coalition.
- The nonclinical workgroup of the Mental Health and Substance Use Alliance began implementation planning for their first approved strategy, Connecting Community Care: Building a coordinated approach to nonclinical behavioral health in Larimer County. Staff is scheduling the coordination of care workgroup kick off, which will also meet monthly, and working with steering committee members to begin planning this year's retreat.
- Changing Minds was a featured partner at a Lift the Label event and discussion panel this month. Lift the Label is a statewide campaign run by the Colorado Behavioral Health Administration which closely aligns with Changing Minds messaging. The event was well attended by people with lived experience.
- Feedback from the Health & History presentation, which highlights how history has shaped health and social outcomes in our community today, has been overwhelmingly positive. Participants reported being informed, reflective, and hopeful with increased understanding of redlining, systemic inequities, and local history. Participants also reflected sadness and anger alongside feelings of gratitude, inspiration, and motivation for action and change. Overall, the presentation has been described as powerful, educational, and impactful, especially in connecting historical context, data, and lived experience. Staff are excited to be taking the presentation beyond internal and pilot presentations and join the City of Fort Collins for a presentation in June.

### Strategic relevance

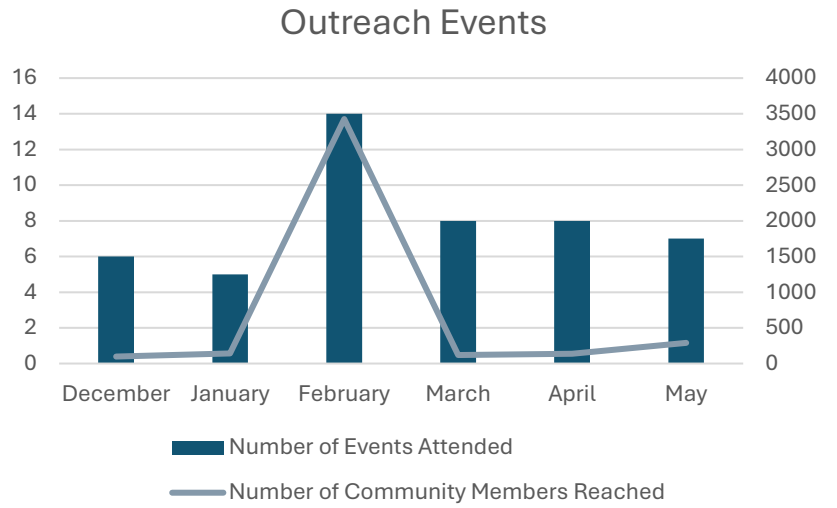
- **Health Equity:** The Community Engagement program strives to be responsive to community needs and marginalized identities in our approach and offerings. This is embedded in the Alliance nonclinical workgroup and is a key facet of the Health and History project.
- **Partnerships:** The Health and History project expands community engagement and builds relationships that advance health equity. Additionally, the Changing Minds campaign has enable the program to cultivate relationships with an array of community organizations.

### Issues/risks/challenges

- No significant issues to report.

**Key metrics/trends**

- The Outreach and Education team attended 7 events, reaching 291 individuals in May, reaching the most individuals at the annual Autism Resource Fair.



# Leadership report summary

**Reporting department:** Dental  
**Reporting month:** May 2026

- The Open House was a success, with strong attendance from community partners. The event generated significant interest in our dental service, including interest from potential partners and candidates for our PRN hygienist position.
- The Health District Family Dental Clinic was pleased to receive notification of award for Senior Dental grant funding for FY2026-27 from the Department of Health Care Policy & Financing. The Dental Health Care Program for Low-Income Seniors experienced a two-million-dollar funding cut for the upcoming fiscal year. The Family Dental Clinic is grateful to remain a grantee as the Department reported receiving almost 3.5 million in grant requests over the available funding.
- Recruitment was opened for our open full-time dentist position. The clinic is pleased to report that a current Family Dental Clinic part-time dentist accepted the role. The transition is scheduled to begin in September.

## Strategic relevance

- **Partnerships, Health Equity, and Organizational Excellence:** Build and strengthen partnerships to maximize impact on community health.
- **Organizational Excellence, Health Equity, and Great Governance:** Strengthen infrastructure in all areas, including programs, services, finance, human resources, information technology, communications and facilities.

## Issues/risks/challenges

- No significant issues to report

## Key metrics/trends

Dental Program – Ready to Report as of 6/2

	Jan 2026 Confirmed	Feb 2026 Confirmed	Mar 2026 Confirmed	Apr 2026 Confirmed	May 2026 Preliminary
Number of Appointments	466	494	605	528	590
Number of Unique Individuals Served	339	346	444	390	411
Community Screenings	n/a	n/a	n/a	n/a	n/a

Data Source: Health District Dentrix EHR, Appointment & Procedure Tables

Includes: Dentist and hygienist appointments combined

Excludes: Eligibility appointments and eligibility-only clients (no resulting dentistry appointment)

Limitations: These data reflect a point-in-time snapshot of a complex, evolving electronic health record. As patient records mature and undergo routine quality review, information may be revised and future summary reports may change.

*Note: The same individual may be counted as a unique client served in multiple Health District programs.*

# Leadership report summary

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**Reporting department:** Larimer Health Connect  
**Reporting month:** May 2026

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## What's new/key updates

- Larimer Health Connect was awarded funding from Connect for Health Colorado at the full requested amount of \$223,300 annually. The grant contract will span three years, providing increased stability and support for our ongoing health coverage outreach, education and enrollment assistance services.
- LHC staff participated in an internal stakeholder meeting with Patient and Family Centered Care Partners (subcontracted by HCPF to develop communication toolkits) to provide feedback on HCPF member correspondence about upcoming coverage changes and share common concerns from clients regarding confusing or inconsistent notices. Our team also reviewed and provided input on new communication materials designed to improve clarity and member understanding. The feedback provided was well received and appreciated.

## Strategic relevance

- **Partnerships:** Build and strengthen partnerships to maximize impact on community health.
- **Partnerships:** Improve collaboration between the Health District and our partners to advance health equity.
- **Health Equity:** Center community voices and remove barriers to meet individual needs, helping all community members achieve their best health.

## Issues/risks/challenges

- Upcoming changes related to HR1 pose significant risk of coverage loss.

## Key metrics/trends

	<b>Jan 2026 Confirmed</b>	<b>Feb 2026 Confirmed</b>	<b>Mar 2026 Confirmed</b>	<b>Apr 2026 Confirmed</b>	<b>May 2026 Preliminary</b>
Number of Appointments	230	193	211	190	187
Number of Unique Individuals Served	Multiple household members may be served during each appointment counted above. We have completed initial rounds of validation testing for a new method of calculating total # of unique individuals served. We anticipate being able to confidently report this number by end of Q2 2026.				
<p>Data Source: Health District Database</p> <p>Includes: In-person scheduled, In-person walk-in, Phone/virtual appointments for insurance navigation</p> <p>Excludes: Follow-up phone calls and emails (general communication encounters), Prescription assistance appointments</p> <p>Limitations: These data reflect a point-in-time snapshot of a complex, evolving client management system. As client records mature and undergo routine quality review, information may be revised and future summary reports may change.</p> <p><i>Note: The same individual may be counted as a unique client served in multiple Health District programs.</i></p>					

# Leadership report summary

**Reporting department:** Mental Health Connections (MHC)

**Reporting month:** May 2026

## What’s new/key updates

- The team opened a Lead Care Coordinator position to support care coordination staff with training and immediate support needs. This opportunity also creates a growth opportunity for staff interested in the position.
- The Connections team and manager continue to be heavily involved in the Clinical Quality Committee, working through recommendations from Open Minds consultants, and creating best practice guidelines for staff.
- The Connections Manager and Psychologist are in early discussion with Foothills Gateway, a Fort Collins organization that provides case management, services, and support to individuals with intellectual and developmental disabilities, about a potential pathway to help clients with adaptative assessments which would allow them to access Foothills Gateway services.

## Strategic relevance

- **Organization Excellence:** Strengthen infrastructure in all areas, including programs, services, finance, human resources, information technology, communications, and facilities.
- **Great Governance:** Shape Health District policy to promote positive health outcomes and operational excellence.
- **Partnership:** Improve collaboration between the Health District and our partners to advance health equity.

## Issues/risks/challenges

- No significant issues to report.

## Key metrics/trends

- Mental Health Connections Program – Ready to Report as of 6/2/26

	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026
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	Confirmed	Confirmed	Confirmed	Confirmed	Preliminary
Number of Appointments	59	35	34	35	38
Appointment Detail	20 Adult 39 CAYAC (Child)	26 Adult 9 CAYAC (Child)	28 Adult 6 CAYAC (Child)	29 Adult 6 CAYAC (Child)	20 Adult 18 CAYAC (Child)
Number of Unique Individuals Served	28	20	15	17	21
Data Source: Health District ICANotes EHR, Appointment Table Includes: Attended appointments (therapy, testing, psychiatric services) Excludes: Care coordination encounters; All other therapy, testing, psychiatric appointment status (cancelled, no-show, or otherwise not attended) Limitations: These data reflect a point-in-time snapshot of a complex, evolving electronic health record. As patient records mature and undergo routine quality review, information may be revised and future summary reports may change. Note: The same individual may be counted as a unique client served in multiple Health District programs.					

# Leadership report summary

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**Reporting department:** Infrastructure Operations  
**Reporting month:** May 2026

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## What's new/key updates

- Worked with realtor and leadership to explore campus expansion opportunities.
  - Completed Phase 3 of our office moves.
  - Completed Campus fire safety drills.
  - Completed setup of the Campus open house and All-staff meeting.
  - Completed IT onboarding of 3 new staff members.
  - Continue to manage 3<sup>rd</sup> party tenant requests at 425 w. Mulberry.
  - Executed a new lease at 425 Mulberry #110.
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## Strategic relevance

- **Organizational Excellence** – Strengthen infrastructure in all areas, including programs, services, finance, human resources, information technology, communications and facilities.
  - **Great Governance** – Ensure the integrity of the Health District's financial position and provide fiscal stewardship and accountability.
  - **Health Equity** – Model inclusive excellence for health care partners and collaborators.
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## Issues/risks/challenges

- No significant issues to report.
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## Key metrics/trends

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- Completed 36 / 37 Facility Workorders in past 30 days. 97% completion rate.
- 145 new Information Technology Workorder Tickets were created in past 30 days.

# Leadership report summary

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**Reporting department:** Human Resources  
**Reporting month:** May 2026

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## What's new/key updates

- HR is updating the criteria questions for annual performance reviews, incorporating health equity language and adding a dedicated health equity criterion. Annual reviews will take place July 1-31, 2026, and HR is preparing resource materials to help guide and support supervisors/managers.
- Work has begun on the 2027 HR Strategic Workplan.
- HR is partnering with program managers across the organization to enhance the new employee onboarding experience. New employees will be invited to attend an orientation session designed to support their transition into the organization. The sessions will focus on cultural integration, an overview of the health district (mission, strategic plan and core values), presentations from programs/departments, compliance requirements and relationship building. Additionally, training for new supervisors will cover best practices for supervisors, applicable state and federal employment laws and navigating the HRIS system.
- HR is working with IT to update the orientation/exit processes.
- HR has developed a monthly cadence and continues to partner with managers/VPs to support a positive work environment which facilitates good communication and the ability to be proactive in meeting business needs.
- At the May 20<sup>th</sup> Board meeting, HR presented a summary of key themes identified through Stay Interviews and the Employee Engagement survey. The next step is to render these findings into actionable strategies that address the challenges facing our organization and celebrate our progress.
- HR teams members continue to work with the Health Equity Action Team (HEAT) and Culture in Action (CIA) committees.
- HR continues to work with a Senior Solution Consultant from UKG on reimplementation of the recruiting module. Conversations and rebuilding of the module are going well.

## Strategic relevance

- **Organizational excellence:** Strengthen infrastructure in all areas, including programs, services, finance, human resources, IT, communications, and facilities.
  - **Health Equity:** Cultivate an environment that welcomes diverse thought and experiences and invests in staff knowledge and a commitment to equity.
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**Issues/risks/challenges**

- The continued challenge is finding the time required to re-implement the UKG recruitment module and provide support across the organization.
- HR continues to explore other HRIS platforms to be in a better position in case a change becomes necessary.
- The HR team continues to be short-staffed due to a team member out for an extended period.

**Key metrics/trends**

<b>Job Searches/Pending</b>	<b>Five (5) positions are currently open and advertised. One (1) internally posted position is in the interview stage. One (1) position closed at the end of May and is currently moving through the selection process.</b>
<b>Onboarding</b>	<b>Digital Media Specialist Dental Front Office Associate Community Engagement Team Intern</b>
<b>Offboarding</b>	<b>(2) Dentist and Dental Front Office Associate</b>

# Leadership report summary

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**Reporting department:** Compliance  
**Reporting month:** May 2026

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## What's new/key updates

- Planning for the 2027 election has begun, with an RFP for a DEO to be posted in June, along with tentative reserving of polling places
- Review of internal policies is underway. Internal policies are being added and updated as needed with plans for a complete revamp by the end of 2026.
- The Compliance Committee is meeting the end of June to review incidents and discuss any compliance issues
- The Governance Committee is set to reconvene shortly to being review/revision of board policies
- An additional service is being added on to our Compliancy Group software, an advisory services team, in order to manage our compliance projects and strengthen our compliance program
- Workplans for 2027 are underway!

## Strategic relevance

- **Great Governance:** shaping Health District's policy to promote operational excellence.
- **Organizational Excellence:** Strengthen infrastructure in all areas, including programs, services, finance, human resources, IT, communications, and facilities.

## Issues/risks/challenges

- No significant issues to report

## Key metrics/trends

- Compliancy Group Incident Reporting: 1 incident reported for the month of May

# Leadership report summary

**Reporting department:** Finance Department  
**Reporting month:** May 2026

## What’s New/Key Updates

- The implementation of Expensify expense management software is in progress. The software has been configured to sync automatically with NetSuite. With ease of use and automation the switch to Expensify will save the organization an estimated \$2,500 per month in employee time.
- The completed 2025 Financial Audit was submitted to the Office of the State Auditor on June 5<sup>th</sup>, 2026.

## Strategic Relevance

- **Great Governance:**
  - Support the Health District Board of Directors to successfully carry out duties of governance and transparency.
  - Ensure the integrity of the Health District’s financial position and provide fiscal stewardship and accountability.
- **Organizational Excellence:**
  - Strengthen infrastructure in all areas, including programs, services, finance, human resources, IT, communications, and facilities
  - Use improved data collection analysis for decision making.

## Issues/Risks/Challenges

- Continuation of previously reported challenges with functionality in NetSuite ERP and NetSuite Planning & Budgeting have led to an optimization phase. Outside resources have been identified to assist with this process.

## Key Metrics/Trends

### Tax Revenues as of May 31, 2026

- As of May 2026, 70% of all Property Taxes levied by the Health District have been collected, as well as 41% of budgeted Specific Ownership Taxes.
- Overall, \$3.8 million tax revenues remain to be collected for the rest of 2026.

	\$ Collected	% Collected	\$ Remaining
Property Taxes	\$ 8,083,627	70%	\$ 3,394,668
Personal Property Exemption	\$ 16,531	100%	\$ -
Specific Ownership Taxes	\$ 291,354	41%	\$ 416,646
	<b>\$ 8,391,512</b>	<b>69%</b>	<b>\$ 3,811,314</b>

# Leadership report summary

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**Reporting department:** Marketing and Communications  
**Reporting month:** May 2026

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## What's new/key updates

- Our Digital Media Specialist position has been filled for digital design involving “The Loop,” social media, the new website, micro-pages and Google Ads. He will also dive deeper into analytics for better data-based decision making. Our Digital Media Specialist began June 1.
- We have completed a text review of the initial 70 pages of the new Health District website, set to launch the last week of July. Content has been significantly pared down to provide clear navigation that focuses on the client journey. We’re also ensuring that necessary links from the current site translate correctly to the new site.
- We’re working on a much more extensive 2025 annual report that goes beyond numbers alone, as it has appeared previously. It will include the following content: the what and why of the Health District, health equity, community needs, program overviews and data, partnerships, impact stories, outreach efforts, staff recognition, the financials and projections for 2027. The new annual report will appear as a flipbook that will be embedded on the new website.
- Internally, we’re making a foray into high-quality videos to share information with staff, complete with motion graphics, and drone-shot intros and outros.

## Strategic relevance

- We continue to work on reflecting the community’s needs in our work, supporting transparent and engaging internal communications, strengthening external communications and cultivating an environment that welcomes diverse thought and experience.

## Issues/risks/challenges

- No significant issues to report