December 17, 2018

Letter to the Community:

I am pleased to present the 2018-2020 Thriving Weld Community Health Improvement Plan (CHIP). This roadmap for improving health in Weld County was developed with input from hundreds of residents and in partnership with a wide variety of organizations. The CHIP is meant to guide public and private activities, initiatives, and investments with the aim to not only improve community health, but also to improve the conditions that foster health. This plan provides guidance on the prevention of chronic diseases, such as cancer, heart disease and obesity; and, moves beyond conventional public health to address a social condition that also significantly affects health—mental well-being.

To achieve the goals within the CHIP, the Health Department and its partners are committed to collaboration. We are eager to engage new partners with unique perspectives to create healthier and safer communities across Weld County. Collectively, we will need to be innovative while also utilizing proven and promising practices. The Health Department cannot bring about the desired improvements for Weld County alone. It is only through partnerships that we can create healthy communities where the healthy choice is the easy choice.

There are many critical pieces that will assist in transforming our collective efforts to improve health in Weld County apart from the strategies listed in this CHIP. By collectively addressing focused goals, we can take the important first step towards setting a course to improve the health of Weld County. I would like to thank the many people who contributed their ideas, expertise, energy, and commitment to develop this plan.

I look forward to working with you to make a difference in the health of Weld County.

Sincerely,

Mark E. Wallace, MD MPH
Executive Director
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WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)?

A community health improvement plan describes long-term, collaborative efforts to address community health issues. The health issues are typically identified by conducting a comprehensive community health assessment. A community health improvement plan, or CHIP, can also be viewed as a community-driven strategic plan. A CHIP is considered part of a national standard for all public health departments. This document briefly describes how Weld County Department of Public Health and Environment and the community have worked together and will continue to work together to improve the health of Weld County residents. The vision of the plan is to have a community where the healthy choice is the easy choice. The overarching goal of Thriving Weld County’s CHIP is two-fold: 1) to reduce people’s risk for chronic disease and help them maintain a healthy body weight through nutrition, physical activity, and obesity prevention strategies, and 2) to increase years of healthy life and reduce disparities among all Weld County residents through multiple social and emotional wellness strategies.

HOW WE USE OUR CHIP?

The CHIP has been continually reviewed and revised to incorporate new challenges, needs, and outcomes. The initial five-year CHIP was initiated in December 2012 after more than a year of gathering and reviewing assessment data, prioritizing health issues, and developing strategic maps for each health priority. The current CHIP is available at the Thriving Weld Website: www.thrivingweld.com. There are now over 95 organizations in the community working on 23 strategies and tracking progress on hundreds of measures. Three workgroups meet regularly, and the entire collaborative meets quarterly to share progress and challenges on their activities. An oversight committee meets monthly to guide vision and strategy, support alignment of activities, help mobilize resources, and maintain the shared measurement tool used by the collaborative group.

HOW DID WE CHOOSE OUR PRIORITIES?

2012 Prioritization Process

In 2012, Weld County’s top priorities were chosen by community partners from a longer list of priorities based on information from a variety of assessments that identified issues, themes, assets, and resources using a real-time electronic voting process. The prioritization process rated each health issue based on the issue’s importance in preventing resident death or disability, the capacity and readiness to work on the issue, and the collective ability of the health department and its partners to work on the issue together. The resulting priority areas were: 1) nutrition, physical activity, and obesity and 2) mental health and substance abuse.

2018 Prioritization Process

Between November 2017 and February 2018, Weld County Department of Public Health and Environment (WCDPHE) in partnership with the North Colorado Health Alliance and over 95 organizations as well as community members reviewed the most recent community health assessment data taking into consideration current local capacity, national and state priorities, and the extent which progress has been made on the existing priorities. Over 200 people participated in at
least one of two community meetings looking at data, considering strategies, identifying priorities, and then voting, again using an electronic voting process.

WHAT PRIORITIES WERE CHOSEN IN 2018?
The 2018 priorities chosen were: 1) healthy eating, 2) active living, and 3) healthy mind and spirit, which, although slightly re-branded in name from 2012, are a continuation from the initial 2012-2017 Thriving Weld CHIP. A related emerging topic that was identified during the voting process was (opioid) addiction. This issue is a top concern for the health department and for several partners including North Range Behavior Health and the North Colorado Health Alliance. A recently formed collaborative, The Opioid Abuse Prevention and Treatment Collaborative, includes partners from neighboring Larimer County are working to address opioid addiction issues. The healthy mind and spirit workgroup is keeping abreast of this emerging issue.

Detailed information about the priorities, expected outcomes, strategies employed, measures being tracked, and key individuals and organizations responsible for implementing strategies can be found at www.thrivingweld.com

WHAT CHANGED FROM THE PREVIOUS ACTION PLAN?
Although the broad priority areas have largely remained the same, some of the strategies and activities have been revised or modified over time to reflect shifts in resource or capacity to work on them. For example, strategies have been revised, expanded, or condensed in all three priority areas to better reflect the focus of ongoing activity for the workgroups. Another change is that the next CHIP cycle will be three years instead of five, to be timely and align with other internal and external partner efforts.

WHAT STRATEGIES ARE THE FOCUS IN 2018?
In February 2018, each workgroup met and prioritized strategies to focus on in 2018.

The Healthy Eating Workgroup is looking at focusing their activities related to the strategy around “improving availability of affordable healthy food and beverages to lower-income residents”.

The Active Living Workgroup wants to work on activities that will increase physical activity in adults and children. The two strategies they will focus on are: 1) to improve the built environment and
accessibility for physical activity, and 2) to engage healthcare provider through education and encouragement and referrals for physical activity.

While the Healthy Mind and Spirit Group has not decided on priorities yet, the group has a lot of momentum in the strategic areas of: 1) improving awareness and early detection of depression, suicide, bullying, and violence, 2) improving access to community services through programs and policies, and 3) expanding community service support systems for vulnerable populations.

**HOW IS CHIP PLAN PROGRESS BEING TRACKED?**

All information about the CHIP including progress is tracked on the Thriving Weld platform which is maintained by the North Colorado Health Alliance and publicly available at [www.thrivingweld.com](http://www.thrivingweld.com). Participating partners including Weld County Department of Public Health and Environment have access to the platform so that CHIP strategies and activities can be revised and indicators can be updated in a timely fashion. Progress is tracked regularly with workgroups, the collaborative, and oversight committee. On the website are links to CHIP progress reports.

**HOW IS THE PLAN UPDATED?**

The CHIP plan is updated and revised over the course of the multi-year effort by each priority area working group with input as needed by the oversight committee. The Thriving Weld interactive strategy management system and website make it easier to revise the plans and, more importantly, communicate those changes to partners and the community as a whole.

**WHO IMPLEMENTS THE CHIP?**

The Thriving Weld CHIP is implemented by over 90 partners and organizations across the county. A coordinating leadership committee made up of leaders and decision makers from four organizations (Weld County Department of Health and Environment, North Colorado Health Alliance, North Range Behavioral Health, and United Way of Weld County) meet monthly to provide strategic oversight, engage and convene partner organizations, cultivate community engagement and ownership, mobilize and coordinate resources, advance policy (big and small) and maintain Thriving Weld’s shared measurement system. Three priority area workgroups meet regularly (bi-monthly or quarterly) to monitor CHIP progress and challenges and coordinate their activities. Everyone also gets together quarterly to remain engaged and learn and grow the movement to make Weld County the healthiest place to live, work, learn, and play.

**WHAT YOU CAN DO TO HELP**

Community-level change takes time. However, when the community comes together, real and measurable change can happen. Weld County’s CHIP has been developed with extensive community involvement, but we encourage more organizations and individuals to become involved. Businesses, local governments, health care systems, insurers, clinicians, educators, non-profit, and faith-based organizations can align health improvement efforts around the CHIP and promote policies and leverage resources that focus on one or more of the health priorities. If you would like to join the Thriving Weld Community Group or participate in a working group, contact: Cindy Kronauge at ckrongauge@weldgov.com or call 970-400-2221.
COMMUNITY HEALTH PROFILE

Background – Who lives in Weld County and what is the community like?

With just over 300,000 population, Weld County, established in 1861, is a key geographic area of the Colorado Northern Front Range. It is situated between the foothills of the Rocky Mountains and the Great Plains, about 40 miles east of the Continental Divide and is the third largest county in land mass across the state. The northeastern portions of the county contain the vast Pawnee National Grassland and the Pawnee Buttes. Along the western border are low hills that are an indication of the foothills further west. Weld County is the 9th most populous county in the state.

While traditionally rural and agricultural in nature, due to its proximity to major transit routes and the Denver metro area, many communities in the county have seen rapid population growth and are becoming more urban and suburban in character. The median age of all people in Weld County is 34.3, which is quite a bit younger than the state median age of 37. The median age is expected to rise over time due to a large growth in the population aged 65 and over. Hispanics are the largest minority group in Weld County with most having ties to Mexico. Currently, about 3 out of 10 adults and 4 out of 10 children are Hispanic or Latino. The overall population density in the county is 63 persons per square mile which is lower than its neighboring western border counties of Larimer which is 115 persons per square mile and Boulder which is 406 persons per square mile.

Weld County has 26 incorporated and 21 unincorporated towns and municipalities. Greeley is the largest city with 103,990 people or 35% of the population. There are 12 organized school districts in Weld County ranging from the largest, School District Six in Greeley/Evans, to the smaller school districts of Prairie and Pawnee on the eastern plains. Greeley is home to the University of Northern Colorado as well as Aims Community College with a second Aims Campus in Ft Lupton. The county is served by several health care systems including two community-based health centers, and a large network of medical providers. The transit routes in the county include two interstate highways: Interstate 25 which runs north and south through western Weld County and Interstate 76 that runs from the south-central edge northeastward to the Morgan county border. Other major roads include US 85 and US 34, which intersect near Greeley, and State Highway 14, which runs through Ault. Local bus service is available within Greeley and Evans but is more limited or nonexistent in other Weld County communities.

Weld County’s economy is doing well due in large part due to a mix of jobs in the agricultural, oil and gas, manufacturing, and health-related industries. The median household income is $66,489, which is substantial but still some families have a hard time making ends meet due to the cost of child care, housing, and health care in the area primarily.

There are over 4,000 resident births and 2,000 deaths per year in Weld County. The overall fertility rate has been decreasing including the teen fertility rate. Deaths due to chronic disease are the most common cause of death for residents, followed by injuries, then communicable diseases.

Life expectancy is a measure that is often used to gauge overall health of a community. Life expectancy at birth refers to the average number of years a newborn is expected to live if everything else remains constant in the future. Life expectancy varies widely across Weld County. Two areas in Weld County (one between Windsor and Greeley and another around LaSalle) are ranked among the top ten counties in Colorado with a life expectancy of 88.5 and 88.0 years respectively, which are well
above the Colorado average of 80.5 years. But in many areas across the county, life expectancy at birth is well below the state average. The lowest life expectancy in Weld County is 73.2 years.

CHIP INITIAL PRIORITIZATION (2012)
In 2012, Weld County’s top priorities were chosen by community partners from a longer list of six potential health concerns based on information from a variety of assessments that identified issues, themes, assets, and resources using a real-time electronic voting process. The prioritization process rated each health issue based on the issue’s importance in preventing resident death or disability, the capacity and readiness to work on the issue, and the collective ability of the health department and its partners to work on the issue together. The top two priority areas were: 1) nutrition, physical activity, and obesity and 2) mental health and substance abuse.

2018 PRIORITIZATION
Between November 2017 and February 2018, Weld County Department of Public Health and Environment (WCDPHE) in partnership with the North Colorado Health Alliance and over 90 organizations including community members reviewed the most recent community health assessment data taking into consideration current local capacity, national and state priorities, and the extent which progress has been made on the existing priorities. Over 200 people participated in at least one of two community meetings looking at data, considering strategies, identifying priorities, and then voting, again using an electronic voting process.

The issues and findings considered during the prioritization process included:

1. The overall health status of Weld County’s adult population is mixed because while many people are in good to excellent health, many are also overweight or obese. Weld County’s obesity rate is significantly higher than Colorado’s.

2. More Weld County residents than ever had some type of health insurance in 2016 and the gap in uninsured rates narrowed between Hispanic and non-Hispanic residents. But many low-income residents are still uninsured, and costs and scheduling barriers are still major barriers to accessing health care.

3. People are engaging in healthy eating and active living behaviors but there is still room for improvement, especially in terms of dietary habits.

4. Residents are not immune to experiencing mental health conditions. About 2 in 10 residents said they thought they needed mental health care or counseling recently but only half of these residents actually sought care.

5. It is important to note that almost 5 in 10 Weld County working age adults in the workforce have one or more chronic physical conditions such as hypertension, coronary heart disease, stroke, diabetes, cancer, arthritis, current asthma, or chronic obstructive pulmonary disease (COPD) or depression, anxiety, PTSD, or alcohol or drug dependence.

6. People do partake in risky behaviors of smoking and drinking. Binge drinking is much higher among Weld adults than across the state. Also, about 1 in 10 residents say they use marijuana and use rates increased the most for adults between 18 and 34 years old.
7. Many residents say they talk on the phone or text or email while driving. Residents said distracted driving is also a problem and Weld County’s traffic fatality and injury rates are high compared to the state rates.

8. Health status varies by where we live, our income and education level, and other social and economic factors.

9. Many residents said Weld County is a great place to live. They expressed interest in improving the built environment through either supporting bike and/or pedestrian infrastructure; desiring more parks and recreation facilities; having better access to and preservation of open spaces; or suggesting either road, trail, or sidewalk improvements, maintenance, or construction so that individuals in communities can get around more actively and safely.

10. Children are the future but many face barriers to becoming healthy productive adults due to diet and exercise habits. More high school students are graduating on time and more children had health insurance than before, but children and youth are still at risk.

11. Our population is growing fast, especially our older adult population. Even though our economy is good, many households are struggling to make ends meet, worrying about the cost of housing, or have problems with childcare.

During the November 2017 convening, roundtable and large group discussion resulted in a collective aspiration to “Make Weld County the best place to live, learn, work, and play by working toward “health for all people” (physical and behavioral) through having a safe, clean, health-promoting built environment.” (see Appendix A)

During the February 2018 convening, also as a group, Thriving Weld partners agreed that behavioral health issues, drug/opioid addiction, and obesity to be among the more pressing health problems in Weld County. After considering all these factors and issues, the group voted to continue prioritizing healthy eating, active living, and emotional wellbeing for the next three years (see Appendix B).

Figure 1. 2018-2020 CHIP Priorities
SUMMARY OF THE CHIP PROCESS

Weld County’s 2012-2017 CHIP process was described in our 2012 Health Status Report and Community Health Improvement Plan. The 2018-2020 CHIP process builds upon the previous effort. The Thriving Weld collaborative, workgroups, and oversight committee reviewed the most recent community health assessment data taking into consideration current local capacity, national and state priorities, and the extent which progress has been made on existing priorities. Over 200 people participated in up to two community meetings looking at data, considering strategies, identifying priorities, and then voting, using an electronic voting process. The priorities chosen were: 1) healthy eating, 2) active living, and 3) healthy mind and spirit. The Thriving Weld CHIP is implemented by over 90 partners and organizations across the county. A coordinating leadership committee made up of leaders and decision makers from four backbone organizations (Weld County Department of Health and Environment, North Colorado Health Alliance, North Range Behavioral Health, and United Way of Weld County) meet monthly to help provide strategic oversight, engage and convene partner organizations, cultivate community engagement and ownership, mobilize and coordinate resources, advance policy (big and small) and maintain Thriving Weld’s shared measurement system. Three priority area workgroups are responsible for implementing priority area strategies. They meet regularly (bi-monthly or quarterly) to monitor CHIP progress and challenges and coordinate their activities. Everyone also gets together quarterly to remain engaged and learn and grow the movement to make Weld County the healthiest place to live, work, learn, and play. All information about the 2018-2020 CHIP including progress is being continually tracked on the Thriving Weld platform which is maintained by the North Colorado Health Alliance and publicly available at www.thrivingweld.com. Participating partners including Weld County Department of Public Health and Environment have access to the platform so that CHIP strategies and activities can be revised and indicators can be updated in a timely fashion. The CHIP plan is updated and revised over the course of the multi-year effort by each priority area working group with input as needed by the oversight committee.

CONSIDERATIONS OF SOCIAL DETERMINANTS OF HEALTH

The 2016 Community Health Survey identified several key determinants that directly impact the health of Weld County residents: affordable housing, barriers to healthcare, geographic location and educational attainment.

Housing

Many households are struggling to make ends meet in Weld County. In 2016, almost 40% of four-person households with children made $65,000 or less, which is the minimum income needed to be self-sufficient (e.g. pay for housing, food, transportation, childcare, taxes, etc.) in Weld County. The 2015 Weld County median household income was $69,434.

Barriers to Healthcare

Only 7% of Weld County residents lacked health insurance in 2016, down from 18% in 2007. However, costs and scheduling barriers are still major barriers to accessing healthcare. Regardless of income status, over five in ten residents said the cost of healthcare was a reason for not getting needed treatment.
Geographic Location and Educational Attainment

In Weld County, health status varies by where people live and their educational attainment among other factors. For example, in the Southeast part of the county, residents report rates of frequent mental distress three times higher (12%) than in the North (4%). Rates of mental distress are also five times higher for adults with less than a high school education (20%) than for college graduates (4%). Other social demographic factors that affect the health of residents are shown in Table 1.

<table>
<thead>
<tr>
<th>Health Determinant</th>
<th>General Population Rate</th>
<th>Subgroup Rate</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>7%</td>
<td>13%</td>
<td>Hispanic/Latino</td>
</tr>
<tr>
<td>Very low income</td>
<td>31%</td>
<td>45%</td>
<td>Very low income</td>
</tr>
<tr>
<td>Tobacco User</td>
<td>17%</td>
<td>36%</td>
<td>Very low income</td>
</tr>
<tr>
<td>Older adult</td>
<td>27%</td>
<td>59%</td>
<td>Older adult</td>
</tr>
<tr>
<td>Low education</td>
<td>10%</td>
<td>19%</td>
<td>Low education</td>
</tr>
<tr>
<td>Low income</td>
<td>19%</td>
<td>31%</td>
<td>Low income</td>
</tr>
</tbody>
</table>

Source: 2016 Weld Community Health Survey

COLLECTIVE IMPACT APPROACH

What is collective impact?
The formal concept of “collective impact” has been around for nearly a decade. Collective impact is essentially a group of people working across sectors to develop and align efforts around a shared goal. There are five core elements to collective impact:

- Agreement on a common agenda
- Development of shared measurement approach
- Leveraging resources through mutually reinforcing activities
- Building continuous communications
- Backbone structure to mobilize efforts

Using collective impact for community health improvement in Weld County

Weld County partners have used the collective impact process to develop and implement our community health improvement plan since 2012. Some critics say that using the collective impact approach can result in initiatives that are too narrowly framed or that community members themselves may not always be at the center of the change process. Weld County’s CHIP is broad and far reaching, not narrowly focused, but continually engaging community members has been a challenge. Moving forward with the new plan, our commitment to using a collective impact approach has expanded. Namely that:

- Those most affected by our priority issues need to be involved more actively in the efforts to improve the issue.
- Robust community engagement is hard work. It takes time and skill to create good opportunities to engage people at each stage of the change process. It also takes confidence and humility to more openly communicate with community members, especially when the inevitable tensions and conflicts arise.
New paradigm for collective impact and community health improvement

As efforts to address the variety of health issues in Weld County have advanced, thinking about collective impact has matured. The following is our future vision about using collective impact in our community health improvement work:

From common agenda to shared vision

- A true common agenda requires leadership to bring key stakeholders together; to review the key data which informs the issue; develop a shared vision for change; and determine the core pathways and strategies to drive the change. It also requires partners to find or create common ground despite their unique values, interests, and positions.

From shared measurement to strategic learning

- A common agenda is not possible without agreement on the ways success will be measured and reported. This measurement also helps hold partners accountable and learn from successes and failures. A robust learning and evaluation process is critical in community-wide change efforts.

From mutually reinforcing activities to a focus on high-leverage and loose/tight working relationships

- Partners may need the ability to pursue independent—even competing—pathways to a common goal. Partners should have the flexibility to focus on high-leverage strategies, and permission to work as loosely or a tightly as the situation requires.

From backbone support to a container for change

- Work on community change requires partners to set the work firmly in the center, rather than on the sides, of their organizational missions. It is important to have self-refueling that can sustain multiple cycles of learning and periodic drops in momentum and morale.

PARTNERSHIPS

A diverse group of community partners are actively involved in community-wide health improvement efforts (see Figure 2). In addition to government partners, partners from business, healthcare, education, community organizations, mental health, youth-focused, older-adult focused, and the general public are involved in Weld County’s community health improvement efforts. Since 2012, more partners have become involved. Recently, more individuals and organizations from the business sector (14%) and the general public (8%) have become involved. Over the past five years, the number of partners has more than doubled from about 35 in 2012 to more than 90 partners in 2017. Over 200 people attended the November 2017 Thriving Weld Summit.
COMMUNITY ENGAGEMENT

Community engagement is ongoing. The health department and its partners have been improving the connections between residents, communities, organizations, and programs in effecting positive change around health-related programs, services, and polices in a variety of ways. It is also well-known that there are different levels of community engagement (See Figure 3). Some of the ways community engagement has occurred locally are described next.

**Figure 3. Community Engagement Continuum**

**Fall 2015 Community Engagement Forums**

Five community meetings were held during September 2015 to consult with the general public. The meetings were advertised and then held at libraries in Greeley, Evans, Fort Lupton, Windsor, and Firestone. The purpose of the meetings was to facilitate discussion from community members about health issues and concerns of importance to them.

After brief introductions and an explanation of the current health issues based on survey and other data, community members were asked what they viewed as the most important health issues. Thirty-
two community members attended at least one meeting. Residents from Greeley, Evans, Loveland, Windsor, Frederick, and Longmont participated.

There were eight important health issues identified by the residents. The health issues include the following: healthy eating and drinking, physical activity, obesity, diabetes, health insurance access, mental wellbeing, distracted driving, and access to services. Obesity and mental wellbeing were mentioned as an important health issue during three of the four voting groups. Several of the other health issues overlap with the issue of obesity such as physical health, healthy eating and drinking, and diabetes. Health insurance access, access to services, and distracted driving were also mentioned in two out of the four voting groups. Participants made several suggestions about how to deal the various health issues. A wide range of strategies were suggested including programmatic, education, environmental, and policy-type changes.

Residents Input - 2016 Community Health Survey

Residents are routinely asked how concerned they are about a variety of health issues on the health department’s population-based community health surveys which are administered every three years. In 2016, over 2,000 residents responded. Over 650 residents made nearly 1,300 comments on making Weld County a healthier place to live, work, and play. The top 5 overall broad themes from those comments were related to:

1. Transportation (all types)
2. Government Services/ Community Programming
3. Environment
4. Parks, Recreation, and Open Spaces
5. Healthcare

The overall themes were further examined for major sub-themes. The top three sub-themes were related to:

1. expressing support for bike and pedestrian infrastructure
2. desiring more parks/recreation facilities, better access, or preservation of open spaces
3. suggestions for road, trail, and sidewalk maintenance, improvements, or construction which were all related to active living, physical activity, and improving the built environment.

Make Today Count Initiative 2013-2016

Make TODAY Count! was a three-year community health outreach campaign that was initiated in 2013 by the North Colorado Health Alliance in collaboration with the Weld County Community Health Improvement Plan Joint Implementation Committee and with funding from Kaiser Permanente of Colorado. The goal of the campaign was to directly engage residents in making simple choices every day that together will make Weld County thrive. The campaign worked closely with its partners to achieve the three goals of the community health improvement plan – improving well-being, increasing healthy eating, and increasing physical activity. The campaign conducted a variety of activities including supporting and expanding community gardens and farmer’s markets, encouraging organizations to adopt healthy beverage policies, promoting consistent health messaging with the 5210 campaign for youth and their families, working to make Weld County more bike and walk-friendly, and supporting the Little Free Libraries Project and Community Murals Projects. The Make
TODAY County! campaign was successfully implemented, with strong leadership, committed partners, and conducted a multitude of activities. The campaign directly reached nearly 50,000 adults and children in a variety of community events. More than 100 volunteers and 70 partner organizations collaboratively engaged in Make TODAY Count! activities. In terms of systems change, nearly 30 children’s programs and 16 other organizations adopted wellness and/or healthy beverage policies which have been sustained. In addition to the widespread local marketing organized by the campaign, campaign staff collaborated with partners on several successful community-oriented projects including the double-value SNAP program, the Family Fun Program, and community gardens. Overall, it was estimated that the population penetration rate for the campaign was 19 percent.

**Thriving Weld Steering Committee 2014 to present**

The Thriving Weld Community Health Improvement effort is supported by multiple organizations who share responsibility for helping maintain overall strategic coherence and manages implementation of the community work including stakeholder engagement, communications, data collection and analysis. Key responsibilities of steering committee members are to guide vision and strategy, maintain and establish shared measurement practice, cultivate community engagement and ownership, support aligning activities, and advancing policy and mobilizing resources. The Thriving Weld steering group was initially an internal health department team but quickly expanded to include community partner organizations. Currently, the steering group consists of four organizations: WCDPHE, North Range Behavioral Health, North Colorado Health Alliance, and United Way of Weld County. The steering committee is continuously monitoring and evaluating the initiative and itself and plans to expand its membership in 2018 and beyond to bring in more key community influencers and leaders.

![Figure 4. Thriving Weld Backbone Organizations](image-url)
Thriving Weld Summit 2017

In November 2017, a community health summit called “Health is Everyone’s Business” was organized collaboratively by Weld County Department of Public Health and Environment, North Colorado Health Alliance, North Range Behavioral Health, and the United Way of Weld County. The purpose of the summit was to celebrate existing partnerships, develop new ones, and to help shape the direction for the next several years on how to make Weld County the healthiest place to live, learn, work, and play. Over 200 attended the half day event with over a dozen speakers.

![Thriving Weld 2017 Summit Flyer](image.png)

*Figure 5. Thriving Weld 2017 Summit Flyer*
CHIP WORKGROUPS AND POLICY AND SYSTEMS LEVEL CHANGE

The Community Health Assessment (CHA) identified that many residents said Weld County is a great place to live. Over 1,300 comments received from the 2016 CHA shows residents want more places to safely walk and ride their bicycles, including places to play outdoors. Residents clearly are desiring more parks and recreation facilities, access to open spaces, and trails.

In 2018, the Active Living Workgroup reviewed and voted to address two policy improvement areas: Improve the Built Environment and Increase Accessibility for Physical Activity; and, Engage Healthcare Provider Education, Encouragement, and Referrals for Physical Activity. These two strategy areas were identified from the Active Living Strategy Map (see www.ThrivingWeld.com). There are current efforts to explore the development of a new north-south running trail from the towns of Milliken to Firestone, which could also include significant open space. An additional east-west trail corridor is nearing completion between the city of Windsor and Eaton. A new youth-oriented outdoor adventure park is also under development in East Greeley. Several municipalities, including the city of Greeley, are expanding bike lanes and safe street crossings for pedestrians and bicyclists. The town of Johnstown is the latest municipality to be constructing a new recreation complex, which will serve over 12,000 residents. Outreach to healthcare providers and a variety of partners, include a prescription for physical activity and time outdoors in nature, are in development.

The Health Eating Workgroup is working to Improve Availability of Affordable Healthy Food and Beverages to Lower Income Residents, identified from the Healthy Eating Strategy Map (see www.ThrivingWeld.com). A subset of this strategy includes increasing access to the Women, Infants, and Children (WIC) nutrition program and increasing access to the Supplemental Nutrition Assistance Program Education (SNAP-Ed) program. Colorado and Weld County residents have had historically low participation in these programs.

The Mental Wellbeing workgroup is currently considering their options from the Mental Well-being Strategy Map (see www.ThrivingWeld.com) and possible policy or educational outreach efforts.
ACTION PLAN: HEALTHY EATING

The goal of this priority is to increase access and consumption of healthy and affordable foods across the lifespan in Weld County. The ultimate outcomes are to increase people living at a healthy body weight, decrease the consumption of sugary drinks, and increase the consumption of healthy foods. The action plan has a robust set of strategies shown in Figure 6. A more detailed interactive version of the action plan can be found at www.thrivingweld.com. The action plan shown in Figure 6 was developed and revised to its current form during the first CHIP cycle.

Thriving Weld County: Healthy Eating

![Figure 6. Healthy Eating Action Plan Diagram](image)

The Healthy Eating Action Plan is monitored and tracked by the Healthy Eating Workgroup partners using the Thriving Weld Dashboard at www.thrivingweld.com. There are over a dozen measures being used to track progress on this action plan. The Healthy Eating scorecard measures can be found here: http://thrivingweld.com/healthy-eating/ As of February 2018, over 80% of the measures were either on target or close to their target and at least 50% were trending in a positive direction. Organizations participating and responsible for implementing strategies can be found in Appendix C.
ACTION PLAN: ACTIVE LIVING

The goal of this priority is to increase access and participation in physical activity especially among less active adults and children in Weld County. The ultimate outcomes are to increase people living at a healthy body weight, increase physical activity in adults and children, reduce screen time in youth, and increase active transportation options in Weld County. The action plan describing the strategies is shown in Figure 7 and details can be found at www.thrivingweld.com.

![Figure 7. Active Living Action Plan Diagram](image)

The Active Living Action Plan is monitored and tracked by the Active Living Workgroup partners using the Thriving Weld Dashboard at www.thrivingweld.com. There are eight measures being used to track progress on this action plan. The Active Living scorecard measures can be found here: http://thrivingweld.com/active-living/ As of February 2018, over 80% of the measures were either on target or close to their target and at least 60% were trending in a positive direction. Organizations participating and responsible for implementing strategies can be found in Appendix C.
ACTION PLAN: HEALTHY MIND AND SPIRIT

The goal of this priority is to promote positive mental and emotional well-being in homes, schools, workplaces, and neighborhoods. The ultimate outcomes are to improve mental and emotional wellbeing among residents, increase the amount of people who receive needed care, reduce self-harm and intrapersonal violence, and increase the amount of youth and adults who abstain from alcohol, tobacco, and other drugs. The action plan describing the strategies is shown in Figure 8 below and details can be found at www.thrivingweld.com.

![Figure 8. Healthy Mind and Spirit Action Plan Diagram](#)

The Healthy Mind and Spirit Action Plan is monitored and tracked by the Healthy Mind and Spirit Workgroup partners using the Thriving Weld Dashboard at www.thrivingweld.com. There are 14 measures being used to track progress on this action plan. The Healthy Mind and Spirit scorecard measures can be found here: http://thrivingweld.com/healthy-mind-spirit/ As of February 2018, over 90% of the measures were either on target or close to their target and at least 50% were trending in a positive direction. Organizations participating and responsible for implementing strategies can be found in Appendix C.
Appendix A

November 2017 Summit Takeaways
The overall health status of Weld County’s adult population is mixed. While many residents say they are in good to excellent health, since 2010, more people have become overweight and obese. The obesity rate increased 24%; the percent of residents with high blood pressure has increased 19%; and the percent of residents with diabetes increased 36%.

People are engaging in healthy behaviors but there is still room for improvement, especially in terms of dietary habits. Only 2 in 10 residents eat two fruit and three vegetable servings every day.

More Weld County residents than ever (93%) had some type of health insurance in 2016. There was also a large reduction in the gap in uninsured between Hispanic/Latino and non-Hispanic/Latino residents. But there is still room for improvement because 15% of very low-income residents remain uninsured.

Costs and scheduling barriers are still major barriers to accessing health care. Regardless of income status, over 5 in 10 residents said the cost of health care was a reason for not getting needed health care. Almost 3 in 10 residents cited scheduling barriers as a reason for delayed care.

Residents are not immune to experiencing mental health conditions. In 2016, about 2 in 10 residents said they thought they needed mental health care or counseling in the past 12 months. Only about one half of those who thought they needed mental health care actually sought care.

Uninsured

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<th>Year</th>
<th>2007</th>
<th>2010</th>
<th>2013</th>
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<tr>
<td>Rate</td>
<td>18%</td>
<td>15%</td>
<td>11%</td>
<td>7%</td>
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Needed Mental Health Care

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<tr>
<th>Year</th>
<th>2007</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate</td>
<td>21%</td>
<td>15%</td>
<td>17%</td>
<td>19%</td>
</tr>
</tbody>
</table>
People do partake in risky behaviors of smoking and drinking. About 1 in 6 adults use one or more tobacco products. Binge drinking is high in Weld County at 31% compared to 18% statewide.

About 10% of residents use marijuana, which is lower than Colorado’s rate of 14% but marijuana use among 18 to 34-year-old has nearly doubled from about 8% in 2013 to about 15% in 2016.

Health status varies by where we live, our income and education level, and other factors. One health variable is frequent mental distress which is defined as reporting 14 or more days in the past month when mental health is not good. Rates of frequent mental distress in the Southeast part of the county are three times higher than rates in the North part of the county. Rates are five times higher for adults with less than a high school education (20%) than for college graduates (4%). And, over 20% of residents living in poverty report frequent mental distress compared to only 8% of residents not living in poverty.

Distracted driving is also a problem with 76% saying they talk on the phone while driving and 41% saying they text or email while driving.

Our environment matters too. Many residents said Weld County is a great place to live. The overwhelming theme in the 1,300 comments expressed by residents, however, about making the county an even healthier place to live, work, and play was to improve the built environment through either supporting bike and/or pedestrian infrastructure; desiring more parks and recreation facilities; having better access to and preservation of open spaces; or suggesting either road, trail, or sidewalk improvements, maintenance, or construction so that individuals in communities can get around more actively and safely. This was the overwhelming theme is all parts of the county. Survey respondents said:

“Continue to add to the trails for biking, running, walking, etc. so we have more places to exercise safely away from traffic.”

“More family friendly activities, trails, bigger parks to encourage activity.”

“Better bike and walking trails that are integrated throughout city, … allowing movement throughout the city.”

“More bike trails that go on for miles and miles. I think you would see a healthier community if you gave people the means to be healthy…”

For more information go to: weldhealth.org or contact: ckronauge@weldgov.com
Our Community’s Future

A Few More Takeaways

Children are the future but some are facing barriers to becoming healthy productive adults. About 3 in 10 children are overweight or obese, 6 in 10 do not meet physical activity guidelines, and about 1 in 7 have had mental or behavioral problems, according to their parents.

- **27%** Overweight or Obese Children Aged 5 – 14 Years
- **62%** Children Aged 5 - 14 Years are Physically Active 60 Minutes or More Each Day
- **15%** Children Aged 1-14 Years with Mental/Behavioral Problems

High school graduation is an important indicator of how young people are thriving. Weld County’s youth high school graduation rate is increasing and better than the state rate of 79%.

- **4-year On-Time Graduation Rate**
  - 74%
  - 82%
  - 81%

<table>
<thead>
<tr>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>74%</td>
<td>82%</td>
<td>81%</td>
</tr>
</tbody>
</table>

The county’s population is expected to continue to grow – a lot. By 2040, the population is expected to almost double. For residents aged 65 and older, the population is expected to increase 127%.

Many households are struggling to make ends meet. In 2016, almost 40% of 4-person households with children made $65,000 or less, which is the minimum income needed to be self-sufficient (e.g., pay for housing, food, transportation, childcare, healthcare, taxes) in Weld County for a family of four.

- **Annual Cost for Basic Necessities, Family of Four**
- 2015 Median Household Income $69,434

Although Weld County’s economy is good, did you know….?

- Nearly 2 in 10 residents said they were usually or always worried or stressed about paying mortgage or rent in the past 12 months.
- In 2016, 15% of residents provided temporary housing to at least one another person due to a health problem, loss of housing, or other financial hardship.
- Among workers with children living at or below the federal poverty level, almost 1 in 4 workers had to quit, not take a job, or change their job due to problems with childcare.

To be healthy, children need access to healthcare when needed. Currently, about 4,000 Weld County children are uninsured and another 5,600 children may be at risk of becoming uninsured.
THRIVING WELD SUMMIT: 2017 ROUNDTABLE DISCUSSION SUMMARY

RECAP

- Two questions were asked:
  - Question 1: What does a “healthiest community” mean to you?
  - Question 2: How can you and your organization help make Weld County a “healthiest community”?

- There were 95 comment cards collected and analyzed. 194 coded comments for question 1 and 119 coded comments for question 2.
- All three priority area themes were mentioned in the comments. There were 25 references related to mental well-being, 15 references related to healthy eating, and 7 references related to physical activity.

QUESTION 1: COMMENT THEMES AND COUNTS

<table>
<thead>
<tr>
<th>Count</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>33</td>
<td>Access to resources, healthcare, or health promoting environment</td>
</tr>
<tr>
<td>26</td>
<td>Environment that is supportive to the built environment, safe, and clean</td>
</tr>
<tr>
<td>24</td>
<td>Health equity and inclusiveness for all demographic and geographic groups</td>
</tr>
<tr>
<td>11</td>
<td>Health promoting culture</td>
</tr>
<tr>
<td>11</td>
<td>Wholistic/integrated health</td>
</tr>
<tr>
<td>10</td>
<td>Economic health and opportunities</td>
</tr>
<tr>
<td>9</td>
<td>Personal connections among neighbors, families, and community members</td>
</tr>
<tr>
<td>8</td>
<td>Organizational connections, networking, and collaboration</td>
</tr>
<tr>
<td>5</td>
<td>Measurement tracking and meeting targets</td>
</tr>
<tr>
<td>4</td>
<td>Positive emotions (engaged and happy people)</td>
</tr>
<tr>
<td>3</td>
<td>Adaptability to changing issues</td>
</tr>
<tr>
<td>2</td>
<td>Overcoming mental health stigma</td>
</tr>
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</table>

QUESTION 1 MAIN THEMES AND QUOTES: A HEALTHIEST COMMUNITY MEANS…..

1. **ACCESS** – There were 33 references to this theme. About 25% of the references were primarily related to access to healthcare, another 25% were primarily related to having access to a health promoting environment, another 25% mentioned access to healthcare and a health promoting environment, and the remaining 25% did not specify what they meant by access. A few comments made were:
   - “Everyone has access to a safe and healthy environment and access to available services to promote mental and physical health and wellbeing.”
• “… all community members have access to the resources to achieve optimal health; spiritual, emotional, occupational, behavioral, medical.”
• “…[to have an] accessible built environment that facilitates healthy active lifestyles.”

2. ENVIRONMENT – There were 26 references related to the environment. The most frequently mentioned environment issue was around safety and feeling safe (11 references). Other environmental sub-themes mentioned were having a supportive built environment that promotes health, and having a clean environment.

3. HEALTH EQUITY – There were 24 references to this theme. Several references mentioned equity directly but many comments referenced “health for all people”. One summit attendee said that the healthiest community is [the] “belief that people are more than the number of days they work, the color of their skin, how much money they have - they are a whole person with real needs and real value.”

QUESTION 2: COMMENT THEMES AND COUNTS

<table>
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<th>Count</th>
<th>Theme</th>
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<tbody>
<tr>
<td>74</td>
<td><strong>Collective planning and development (i.e., collective impact)</strong></td>
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<tr>
<td></td>
<td>Active Partnerships (40)</td>
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<tr>
<td></td>
<td>Connect People with Resources (18)</td>
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<td></td>
<td>Funding and Resource Management (11)</td>
</tr>
<tr>
<td></td>
<td>Organizational Sharing (5)</td>
</tr>
<tr>
<td>10</td>
<td>Community Engagement</td>
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<td>9</td>
<td>Education</td>
</tr>
<tr>
<td>6</td>
<td>Advocacy for Most Vulnerable</td>
</tr>
<tr>
<td>5</td>
<td>Integrity</td>
</tr>
</tbody>
</table>

QUESTION 2 MAIN THEMES AND QUOTES: HOW CAN YOU/YOUR ORGANIZATION HELP….

The main theme mentioned in response to question 2 about making Weld County the healthiest community was about collective planning and development. Although not mentioned directly many participants seemed to reference working collectively to impact community health.

ACTIVE PARTNERSHIPS – Many summit participants mentioned this theme. They mentioned collaborating, partnering, and engaging their partners. One notable quote from a participant was “Collaborate! Work with other agencies as much as possible and try to develop partnerships for now and for the future endeavors.”

CONNECTING PEOPLE/THE PUBLIC WITH LOCAL RESOURCES – For this theme, some participants were very specific in saying what their organization could do and others answered more broadly. For example, Weld Food Bank said their vision is to provide access to healthy food which helps keep health care costs lower and fuels children for learning. Someone from
Northrange said that committing to providing Mental Health First Aid to every organization on the dashboard was desirable. Public health staff mentioned staffing more mobile units while another participant mentioned that more outreach to rural areas is needed.

**FUNDING AND RESOURCE MANAGEMENT** – The comments mentioned in this sub-theme included referencing leveraging assets, supporting efficient data collection and sharing and use, continuing to use our community health survey to develop relevant and responsive programs, and finding more funding.

**ORGANIZATIONAL SHARING** – Several participants mentioned sharing data and survey information in order to as one person put it: “identify common goals/projects and work towards these; helping to figure out how to resolve/reduce redundancy and inefficiencies to collaboration.”
Appendix B

Prioritization Results
At the February 7, 2018 Thriving Weld Partnership Meeting, the attendees voted to continue to prioritize healthy eating, active living, and healthy mind and spirit as top-level priorities in the community health improvement plan. In a live poll, the majority of attendees also responded to the question: *What emerging health trend, if any, are you most concerned about?* The raw results are shown below.

The live poll results were further analyzed, and the top three most frequent themes were: addiction (some said opioid addiction), mental/behavioral health, and obesity. The emerging health concern themes are shown below.
Appendix C

Thriving Weld Partnership Groups
Steering Group
The Thriving Weld Steering Group includes members from Weld County Department of Public Health and Environment, North Colorado Health Alliance, United Way of Weld County, and North Range Behavioral Health.

Eric Aakko  Weld County Department of Public Health and Environment
Leslie Beckstrom  Weld County Department of Public Health and Environment
Noah Chornyak  North Colorado Health Alliance
Melanie Falvo  United Way of Weld County
Audrey Goold  Weld County Department of Public Health and Environment
Cindy Kronauge  Weld County Department of Public Health and Environment
Deirdre Pearson  North Colorado Health Alliance
Lyle Smith-Graybeal  United Way of Weld County
Mark Wallace  Weld County Department of Public Health and Environment
Kendall Alexander  North Range Behavioral Health

Healthy Eating Workgroup
The Healthy Eating Workgroup currently consists of 32 members and is facilitated by: Maggie Shawcross, High Plains Library District and Leslie Beckstrom, Weld County Department of Public Health and Environment. Kelly Martinez, Weld County Department of Public Health and Environment and Jennifer Linder, North Colorado Health Alliance also assist the workgroup when needed.

Nanette Achziger  LPR Construction
Annie Baker  North Colorado Health Alliance
Leslie Beckstrom  Weld County Department of Public Health and Environment
Menan Bergman  Bank of Colorado
Ellie Betts  Sunrise Community Health
Moranda Boles  Greeley-Evans School District 6
Katie Castillo  UCHC
Deb DeBoutez  City of Greeley
Ellie Dudley  Integrated Nutrition Education Program
Lori Ealey  Aetna
Rene Gonzalez  Colorado Access
Erma Gonzalez  Sunrise Community Health
Olga Gonzalez  Weld County Department of Public Health and Environment
Nancy Haffner  North Range Behavioral Health
Rachel Hurshman  Greeley-Evans School District 6
Jennifer Linder  North Colorado Health Alliance
Kelly Martinez  Weld County Department of Public Health and Environment
Kristin Montoya  Create Your Health
Lauren Murray  Greeley-Evans School District 6
Alexia Peake Inhulsen  Peake Wellness Center
Linda Pierre  Community Member
<table>
<thead>
<tr>
<th>Name</th>
<th>Organization/Role</th>
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<tbody>
<tr>
<td>Kevin Quinn</td>
<td>Major Medical Supply</td>
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<tr>
<td>Natalie Rehurek</td>
<td>Greeley-Evans School District 6</td>
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<tr>
<td>Rebecca Robbins</td>
<td>Greeley-Evans School District 6</td>
</tr>
<tr>
<td>Mike Schwan</td>
<td>Weld County Department of Public Health and Environment</td>
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<tr>
<td>Teresa Sharp</td>
<td>Colorado School of Public Health at UNC</td>
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<tr>
<td>Maggie Shawcross</td>
<td>High Plains Library District</td>
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<tr>
<td>Meredith Skoglund</td>
<td>Weld County Area Agency on Aging</td>
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<td>Lorrie Wellman</td>
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<td>Nancy Wendirad</td>
<td>Community Member</td>
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<tr>
<td>Patrick Willoughby</td>
<td>Major Medical Supply</td>
</tr>
<tr>
<td>Kathy Zavela Tyson</td>
<td>Community Member</td>
</tr>
</tbody>
</table>

**Active Living Workgroup**

The Active Living Workgroup currently consists of 28 members and is facilitated by: Stacey Brown, High Plains Library District, Amanda Lalonde, City of Greeley, and Eric Aakko, Weld County Department of Public Health and Environment. Erin Olson and Leslie Beckstrom also assist this workgroup when needed.

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization/Role</th>
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<tbody>
<tr>
<td>Eric Aakko</td>
<td>Weld County Department of Public Health and Environment</td>
</tr>
<tr>
<td>Rachel Artz-Steinberg</td>
<td>North Colorado Health Alliance</td>
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<td>John Barnett</td>
<td>City of Greeley</td>
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<tr>
<td>Leslie Beckstrom</td>
<td>Weld County Department of Public Health and Environment</td>
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<td>Sarah Boyd</td>
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<td>Stacey Brown</td>
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<td>Russell Carson</td>
<td>University of Northern Colorado</td>
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<td>Sean Casten</td>
<td>Team Tom Gym</td>
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<td>Jennifer Cooney</td>
<td>City of Greeley</td>
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<td>John Cordova</td>
<td>North Range Behavioral Health</td>
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<tr>
<td>Clint Dudley</td>
<td>Thompson Rivers Parks and Recreation</td>
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<td>Lindsay Guard</td>
<td>Thompson Rivers Parks and Recreation</td>
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<tr>
<td>Andrea Haring</td>
<td>City of Greeley</td>
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<tr>
<td>Matthew Hortt</td>
<td>High Plains Library District</td>
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<tr>
<td>Whitney Janzen-Pankrat</td>
<td>Weld County Area Agency on Aging</td>
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<td>Eva Jewell</td>
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<td>Lisa Joyner, MHA</td>
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<tr>
<td>Sylvia Kamau-Small</td>
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<td>Zach Kilimann</td>
<td>Soccer Without Borders</td>
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<td>Joel Krzan</td>
<td>Aetna</td>
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<tr>
<td>Amanda Lalonde</td>
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<tr>
<td>Kelly Leffler</td>
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<td>James Neill</td>
<td>Town of Kersey</td>
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<tr>
<td>Erin Olson</td>
<td>Weld County Department of Public Health and Environment</td>
</tr>
<tr>
<td>Megan Packard</td>
<td>North Colorado Youth for Christ</td>
</tr>
</tbody>
</table>
Healthy Mind and Spirit Workgroup

The Healthy Mind and Spirit Workgroup currently consists of 53 members and is facilitated by: Courtney Bell, Greeley-Evans School District 6 and Audrey Goold, Weld County Department of Public Health and Environment. Kat Ventoruzzo, Weld County Department of Public Health and Environment also assists the workgroup when needed.

Nanette Achziger LPR Construction
Annette Alfano UCHealth
Sujeith Barraza North Colorado Health Alliance
Courtney Bell Greeley-Evans School District 6
Debra Bianchi Alzheimer's Association
Lesley Brooks Sunrise Community Health
Jessie Caggiano Greeley-Evans School District 6
Melanie Cyphers Weld County Department of Public Health and Environment
Melanie Falvo United Way of Weld County
Dorothy Farrel Sava Center
Caitlin frantz North Range Behavioral Health
Rachel Freeman Weld County Department of Public Health and Environment
Anne Fritz North Colorado Health Alliance
Rosaryo Gallegos Salud Family Health Centers
Rene Gonzalez Colorado Access
Audrey Goold Weld County Department of Public Health and Environment
Corrie Groesbeck Weld County Department of Public Health and Environment
Amanda Hartshorn North Colorado Health Alliance
Abe Herrera The Children's Health Place
Christy Howell UCHealth
Heather Hyndman North Colorado Health Alliance
Peggy Jarrett SCL Health (Platte Valley Medical Center)
Melissa Jensen Community Grief Center
Clara Juarez North Colorado Health Alliance
Christina Kauffman High Plains Library District
Jacki Kennedy North Range Behavioral Health
Jennifer Linder North Colorado Health Alliance
Kelsey Lyon Larimer County Department of Health & Environment
Joanna Martinson North Colorado Health Alliance
Shawna Miller Almost Home Online
Meredith Munoz North Colorado Health Alliance
Samantha Orozco Sunrise Community Health
Adrian Oxton Heart Centered Counseling
Thriving Weld Organizational Partners

Over 300 participants (including 11 community members) from over 100 organizations are now a part of the Thriving Weld Community Group.

City of Evans
City of Greeley
Colorado Access
Colorado Department of Human Services
Colorado Department of Public Health and Environment
Colorado Early Education Network
Colorado Rockies
Colorado School of Public Health at UNC
Community Advantage/ResCare
Community Foundation of Greeley and Weld County
Community Grief Center
Cranford Cove Tea Tavern
Create Your Health
Division of Vocational Rehabilitation
Dr. Mayeda
Drive Smart Weld County
Ehrlich Motors
Encompass Healthcare Data Solutions
First National Bank
Flood and Peterson
Front Range Dermatology Associates
Front Range Energy, LLC
Good Samaritan Society-Loveland Village
Goodwill Denver
Greeley Chamber of Commerce
Greeley Downtown Development Authority
Greeley Easy Home Rentals LLC
Greeley Transitional House
Greeley-Evans School District 6
Health District of Northern Larimer County
Health Links
Heart Centered Counseling
High Plains Library District
Highland High School
Homewatch CareGivers
Immigrant and Refugee Center of Northern Colorado
In-Situ, Inc.
InnovAge
Partners Mentoring Youth
Peake Wellness Center
Phase 2 Company
Project Angel Heart
Rocky Mountain Service Employment Redevelopment
Salud
Salud Family Health Centers
Sava Center
SCL Health (Platte Valley Medical Center)
Senior Resource Services
Sexual Assault Victim Advocate Center
Soccer Without Borders
State of Colorado
Sunrise Community Health
Team Tom Gym
The Arc of Weld County
The Children’s Health Place
The Colorado Health Foundation
The Greeley Dream Team, Inc.
Thompson Rivers Parks and Recreation
Tobacco-Free Coalition of Weld County
Town of Kersey
Town of LaSalle
UCHealth
United Way of Weld County
University of Colorado Denver
University of Northern Colorado
Volunteers of America
Weld County Government
Weld County Area Agency on Aging
Weld County Board of Health
Weld County Department of Human Services
Weld County Department of Public Health and Environment
Weld Food Bank
Woodward, Inc.