

*(Core public health services - Attachment B
Statement of Basis and Purpose and Specific Statutory Authority)*

**STATEMENT OF BASIS AND PURPOSE
AND SPECIFIC STATUTORY AUTHORITY FOR
6 CCR 1014-7**

June 24, 2011

Basis and Purpose.

State statutes require the State Board of Health to establish, by rule, core public health services to be assured or provided by each county and district public health agency. The proposed rules ensure that core public health services that meet local needs are available statewide.

Specific Statutory Authority. These rules are promulgated pursuant to the following statutes: These rules are promulgated pursuant to Section §25-1-503(1)(a), C.R.S. (2008)

Major Factual and Policy Issues Encountered.

The major considerations regarding these rules are a) compliance with state law (C.R.S. 25-1-501 et seq.), and b) respect for the spirit of the law that suggests that the prevention of injury, disease, and premature mortality; the promotion of health in the community; and the response to public and environmental health needs and emergencies are accomplished through the provision or assurance of core public health services. The proposed core public health services would constitute the first time such provisions have been brought to rule for consideration by the State Board of Health.

Baseline capacity assessments conducted by the Department in 2011 indicate that these proposed core public health services are already being provided or assured by most local public health agencies across the state. As such, the proposed core public health services were developed so as to allow each local public health agency to develop and implement programs, strategies, interventions, and activities appropriate to the population served. Furthermore, the local public health agency can provide the service itself, refer to another organization, or contract with another agency or organization to provide the service, including neighboring counties. The local public health agency will be deemed as providing the service if it can demonstrate that other providers offer this service sufficient to meet the local need. Finally, the delivery of the core public health services is to be performed in accordance with the 10 Essential Public Health Services as developed by the national Core Public Health Functions Steering Committee in 1994.ⁱ

An inclusive and multi-faceted stakeholder involvement process was conducted in order to draft the proposed core public health services. An initial draft of the core public health services was developed by focus groups of 350 public health professionals during the summer of 2009. During the process of drafting the core public health services, the Department received input from stakeholders in the local and state public health community through the Public Health Improvement Steering Committee which consists of representatives from local public health

agencies, environmental and public health officials, CDPHE leadership, and the Colorado Association of Local Public Health Officials. The draft core public health services were finalized by the Public Health Improvement Steering Committee in September 2009 for inclusion in Colorado's Public Health Improvement Plan. This draft was discussed with county commissioners at the Colorado Counties, Inc meeting in November 2009. The draft core public health services were then released for broad consideration and use by members of the public health community during 2010.

Alternative Rules Considered and Why Rejected.

There are no alternative methods for achieving the purpose of the proposed rule. C.R.S. §25-1-503(1)(a) requires the State Board of Health to establish, by rule, the core public health services to be assured or provided by each county and district public health agency. No alternative rules were considered because the proposed core public health services were developed in consultation with over 350 public health professionals within the state, and made final by the Public Health Improvement Steering Committee, a group that includes representatives from local public health agencies, environmental and public health officials, CDPHE leadership, and the Colorado Association of Local Public Health Officials.

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