Memorandum

To: Jill Hunsaker Ryan, MPH, Executive Director, CDPHE; Mara Brosy-Wiwchar, Chief of Staff, CDPHE

From: Susan Wheelan, MBA, Public Health Director, El Paso County Public Health

Re: El Paso County COVID-19 Mitigation Plan

Date: Updated October 30, 2020
Previous updates: July 13, 2020; October 20, 2020

El Paso County Public Health COVID-19 Mitigation Framework

On October 15, 2020, the Colorado Department of Public Health and Environment (CDPHE) met with El Paso County Public Health (EPCPH) regarding El Paso County’s incidence rates and requested a mitigation plan. At that time, the county’s incidence rates exceeded the Safer at Home Dial Level 1 status as follows:

- Two-week cumulative incidence rate: 147.82 per 100,000 people
- Percent positivity: 4.58%
- 2-week COVID-19 case count (new cases): 1,068

When CDPHE and EPCPH met again to discuss progress on October 21, 2020, CDPHE stipulated that if the county’s incidence rates had not significantly decreased, the county would be moved to a more restrictive level or Safer at Home Dial. As of today, the county’s incidence rates per CDPHE are as follows:

- Two-week cumulative incidence rate: 275.57/100,000 people
- Percent positivity: 6.84%
- 2-week COVID-19 case count (new cases): 1,991

CDPHE and the Governor’s office met with EPCPH on October 22, 2020 to discuss these trends and next steps. While the county’s incidence rates are aligned with Safer at Home Dial Level 3, CDPHE has decided that a gradual implementation of restrictions is suitable at this time.

As such, CDPHE is moving El Paso County to Safer at Home Dial Level 2. CDPHE also reserves the right to move the county to a more restrictive level at any point should circumstances warrant more aggressive sector restrictions.
The change from Level 1 to Level 2 is effective today, October 30, 2020 and the county should work to inform communities and stakeholders and ensure the transition is complete by Wednesday, November 4, 2020. This process will require the county to implement restrictions across all sectors as described in Section II.C of Public Health Order 20-35, as amended.

Should the county restore metrics for Level 1 at any time during the more restrictive phase, the county would need to maintain those metrics for two weeks and complete the request process described here in order to be moved back to Level 1.

Additionally, when the State transitioned to Safer at Home Dial 20-35 on September 15, 2020, any sector or site-specific variances that exceeded the new dial framework remained intact. This included El Paso County’s site-specific variances for Great Wolf Lodge (indoor water park only), Manitou Cliff Dwellings and Flying W. Ranch, and sector variances for Personal Recreation.

However, if a county moves to a more restrictive level in Safer at Home Dial, sector variances are permanently lost. As such, all personal recreation in El Paso County is required to operate according to the corresponding allowances and occupancies for Level 2.

While sector variances are permanently lost when a county moves to a more restrictive level in Safer at Home Dial, site-specific variances remain intact. Therefore, Great Wolf Lodge (indoor water park only), Manitou Cliff Dwellings and Flying W. Ranch can continue to operate according to the allowances and conditions of the original variance approval on June 29, 2020.

**Community Goals**

El Paso County is unified in responding to the threat COVID-19 poses to our community. Since February, we have been working with partners across our community to plan for, respond to, and mitigate the impacts of this global pandemic on our community. El Paso County Public Health (EPCPH) began monitoring COVID-19 in late 2019 as it was first emerging, we formed an incident command in February 2020 and in March 2020 partnered with the Pikes Peak Regional Office of Emergency Management to form a Unified Command and Emergency Coordination Center. The goals of this response effort include:

- Promoting a safe community where disease transmission is contained and hospital capacity to treat our residents is maintained.
- Sustaining a vibrant economy with opportunities for business and labor to succeed resulting in families maintaining housing, health insurance and capacity to meet basic needs.
- Returning to in-person learning to support intellectual, social and emotional development of youth, as well as capacity of parents to engage in work while children are in a safe environment.
- Improving mental health and well-being of El Paso County residents supported by engagement in civic life, community activities, and health behaviors.
- Avoiding long-term consequences of a prolonged Stay-at-Home phase that may include reduced economic stability; increases in negative outcomes such as domestic violence, child abuse; diminished mental health; loss of housing and/or businesses and diminished capacity for community recovery.
Disease Trends
Between May 25 and June 16, El Paso County experienced a steady decline in cases and achieved a low incidence threshold of less than 25 cases per 100,000 residents. In late June, cases—along with the two-week incidence rate—began a steep incline. After reaching 157.1 cases per 100,000 on July 29, the incidence then began a sustained decline lasting through mid-September (reaching 53.5 on September 12). Starting in mid-September, El Paso County began to see modest upticks, with sharper increases most recently in both the two-week incidence rate and the test positivity rate. After a sustained period of stable or declining hospitalizations, those have started to increase as well. There have been increases in cases following holiday weekends – a trend that has been noted after both Fourth of July and Labor Day weekend. We continue to monitor hospitalized cases, personal protective equipment (PPE) supplies, testing capacity, contacting tracing/case investigation and surge capacity, and other local data. Our recent increase in incidence is driven by broad community spread, across all sectors—including and not limited to businesses, schools, retail, social gatherings, and places of worship—with marked increases in individuals who work while infectious. There is also a marked increase in the number of contacts associated with positive cases. With the return to learn and 122,000 students across 17 public school districts and an additional 4,000 students in private schools, this is an activity that requires a tremendous amount of public health coordination, follow up, and technical assistance. While return to learn itself is not necessarily driving the increases in disease burden, it does require a high level of staff involvement and technical expertise to provide guidance to school partners. Increasing turnaround times in testing impact the ability of community members to take decisive actions to limit the spread and sustain quarantine.

Data Dashboard

As part of continued efforts to increase transparency and provide accurate, up-to-date data to the public, EPCPH continues to share data daily on an interactive data dashboard. The goal is to provide data and trends so that residents can make the most informed decisions. When CDPHE released the new dial framework, EPCPH enhanced and refined the local data dashboard to align with the state’s framework and metrics. The screen shot below depicts page one of 13 on the comprehensive dashboard. Metrics are updated daily, and the information is also frequently shared on social media, in updates and presentations, and to community and media partners.
Mitigation Steps

1. Maintain and increase partnerships: EPCPH recognizes the need to reverse the upward trajectory of disease trends in our county and state. The Pikes Peak Regional Office of Emergency Management (PPROEM) and EPCPH have been in Unified Command since March 2020 to respond to COVID-19 in El Paso County. Over the course of our response we have forged strong partnerships across El Paso County including all the cities and towns therein and these partners are committed to supporting our community through this period. Strong partnerships are critical to engaging all sectors of our community in this response. Below are our partners and the steps we are taking together to mitigate disease spread.

   a. Partners:
      i. Hospitals, health care and medical:
         1. Penrose-St. Francis Hospital, UCHHealth Memorial Hospital, Children’s Hospital, Peak Vista Community Health Center, Matthews-Vu Primary Care, OPTUMCare, Peak Medical (rural), Evans Army Community Hospital (Fort Carson), 10th Medical Group (USAFA), 21st Medical Group (Peterson AFB)
      ii. Business and economic:
         1. The Colorado Springs Chamber & EDC, VisitCOS, Regional Recovery Council, Downtown Partnership, Pikes Peak Workforce Center, Pikes Peak Small Business Development Center, El Paso County Economic Development Department, Pikes Peak Chapter of the Colorado Restaurant Association
         2. Working with the Pikes Peak Chapter of the Colorado Restaurant Association on a COVID-19 safety certification initiative which will provide an opportunity for restaurants and bars to be evaluated on a standard COVID-19 safety criterion and receive acknowledgement
      iii. Fire and law enforcement:
         1. El Paso County Sheriff’s Office, Colorado Springs Fire Department, City of Colorado Springs Police, Regional Emergency Trauma Advisory Council (RETAC)
      iv. Schools and universities:
         1. University of Colorado - Colorado Springs, Colorado College, Pikes Peak Community College, Superintendents of the Pikes Peak Region, United States Air Force Academy, University of Colorado School of Medicine
      v. Behavioral health:
         1. National Alliance on Mental Illness (NAMI) Colorado Springs, University of Colorado Springs, Colorado, Greater Resilience Information Toolkit (GRIT)
      vi. Other community partnerships:
         1. Community Health Partnership, Ascending to Health Respite Care, Pikes Peak United Way, Springs Rescue Mission, Pikes Peak Library District, Salvation Army, faith-based nurses, The Place, Family Promise, Colorado Springs Conservatory
      vii. Military installations
         1. Working with military partners to on mitigation coordination and communication
viii. Faith-based community:
   1. COSILoveYou

2. Increase collaboration with business community—refresh and revitalize messaging within El Paso County
   a. Partner with El Paso County Economic Development and Small Business Development Center to organize a webinar series on contact tracing, outbreak investigations and communicable disease to help businesses understand the value in partnering with Public Health and best practices that can be implemented
   b. On August 5, Public Health partnered with Visit COS, the Colorado Springs Chamber & EDC, Downtown Partnership, and the City of Colorado Springs to launch a “Peak of Safety” campaign. A testament to Pikes Peak regional leadership and collaboration, the goal of the campaign is to unite businesses, visitors and residents in an effort to stay safe, follow public health guidelines, and slow the spread of COVID-19. By taking the pledge, visitors and residents are eligible for an array of discounts and deals throughout the region. Our community will be refreshing on these messages and efforts. Notable stats from the campaign:
      i. As of early October, 557 people have taken the Peak of Safety Pledge
      ii. There have been 3,098 pageviews of the Peak of Safety Pledge landing page
      iii. Social media posts shared by VisitCOS have reached a total of 54,968 people on Facebook, with 4,535 engagements.
   c. As part efforts to advocate for increased teleworking, on August 5, the Colorado Springs Chamber & EDC launched a package of resources called “Clocking in from the kitchen table: tools to help your company effectively telecommute.” The package consists of an interactive infographic toolkit and a Telephone Town Hall with Employers Council and the CEO of Altia. The telecommuting toolkit includes information and resources for both employers and employees, from tips on managing teams remotely to ideas for staying focused at home. The telephone town hall featured a discussion on effectively transitioning teams to telecommuting, including best practices from the human resources and management perspective. There is also a dedicated page of business resources related to COVID-19. Metrics from these resources include:
      i. Telecommuting Toolkit + Town Hall
         1. Email invitation and toolkit announcement: 1,369 opens / 79 clicks
      ii. Telecommuting Toolkit webpage
         1. 268 pageviews
         2. 1:41 average time spent on page
      iii. Chamber & EDC COVID webpage (includes link to toolkit):
         1. 7,506 pageviews
         2. 1:45 average time spent on page
      iv. Window signs for businesses
         1. 2,078 page views
         2. 2:30 average time spent on page
         3. Another 707 searched “window signs” on the Chamber & EDC website before going to the page, spending an average time of 3:36 on page
v. Blog on tips for social distancing in Colorado Springs
   1. 1,702 page views
   2. 3:15 average time spent on page

d. In preparation for the fall and winter months, EPCPH is working with the business community on the development of two winter toolkits. One will be aimed at business owners, with a focus on providing tangible tips and recommendations (for example, increasing handwashing signage in offices, maximizing opportunities to telecommute, putting in place sick policies that make it feasible for employees to stay home when sick, providing flu shots, etc.). The other toolkit will be more broadly focused on community members and highlighting ways to maintain civic and social engagement in the winter months while still practicing COVID-19 prevention measures.

e. EPCPH is working closely with the retail food community, in addition to participating in a statewide workgroup, on innovative ways to expand winter dining options through the winter months.

3. Increase capacity to quickly isolate and quarantine:
   a. The EPCPH Communicable Disease team pre-COVID consisted of 3.5 FTE. As a result of responding to this pandemic, we have now increased our Communicable Disease Team to a team of 72 consisting of 15.5 newly hired full-time equivalents (FTE), 17 additional case investigators staffed through the Pikes Peak Workforce Center (PPWFC), and 40 volunteer case investigators from the Medical Reserve Corps. The new staff and volunteers have provided critical Spanish language capacity and Medical Reserve Corps (MRC) volunteers have provided 3,762 additional case investigation hours at a value of $162,387. All of these additional FTE and volunteers have required training, support and mentorship from our original core team of 3.5 FTE. While historically this team has been able meet the requirement of 8.7 cases per 100,000 per day as noted in the metrics to certify for Protect Our Neighbors, based on rapidly increasing disease burden, it has made meeting this metric more challenging. As necessary, we leverage additional capacity through the contact tracing/case investigation team through CDPHE. Additionally, EPCPH has resumed activity with PPWFC to continue to identify and recruit additional staff for the case investigator role, focusing on staff who can work on the weekend, as we have noted an increased caseload during those days. Bilingual skillset will continue to be a preferred criterion.
   b. Continued suspension of many EPCPH services to leverage staff for disease investigations. We request continued flexibility on CDPHE grant deliverables to allow this flexibility to continue into 2021, so we are able to surge staff for COVID-19 as needed.

4. Increase community-based testing:
   a. Using the definition of sufficient testing capacity set forth in the metrics required to certify for Protect Our Neighbors, which states that a county or region must have the capacity to test (collect samples and testing partnerships) 15 people per 10,000 residents per day, El Paso County would need to test 1,084 residents per day. El Paso County is currently meeting this metric, with multiple test sites available, including a community-based drive-through site, as well as multiple health care systems and private providers who offer testing.
   b. EPCPH partnered with the Southeast YMCA and Servicios de la Raza to pair services by offering COVID-19 testing at an existing food drive for disparately impacted populations in southeast Colorado Springs.
i. This targeted site was open Mondays only from June 29 through August 17, with a total of 100 tests completed.

ii. This testing site yielded a much higher positivity rate than EPC as a whole at approximately 35%, though it should be noted that there is a smaller sample size.

c. A community-based drive-through testing site opened on August 11 at the Citadel Mall.
   i. The site is low-barrier and offers easy, free and convenient testing.
   ii. Testing is encouraged for people experiencing COVID-19 symptoms, first responders, health care workers, critical infrastructure employees, teachers, and individuals who work in congregate settings. Testing is provided for all individuals who seek it.
   iii. The site has been open for a total of 10 weeks (50 testing days) and has completed 13,953 tests through October 17. The site averaged approximately 279 tests per day.
   iv. The site was initially funded for a period of 60 days, but the contract has since been extended through December 2020, so we are able to continue to provide this low-barrier resource to our community.

d. El Paso County Low-Barrier Testing Strategy
   i. The purpose of this strategy is to expand additional testing locations outside of the City of Colorado Springs limits, with a focus on increasing access in underserved areas regionwide and decreasing barriers for all El Paso County residents. Satellite testing sites operate in the following manner:
      1. Fountain – Monday through Friday from 8 a.m. to 5 p.m.
      2. Falcon – Tuesday through Thursday from 9 a.m. to 2 p.m.
      3. Monument – Monday, Wednesday, Friday from 9 a.m. to 2 p.m.
   ii. The operating days are based on population for each of these areas. These sites will be initially open for a period of two weeks. Based on use these sites may be adjusted or extended.

e. Additional testing available through partners:
   i. UCHealth
   ii. Peak Vista Community Health Center
   iii. In response to the increasing disease burden, Matthews-Vu will be augmenting community testing capacity with up to 800 tests per day to be analyzed at their own lab (anticipated to be developed over the next 4-6 weeks)
      1. Free testing: if individuals do not have insurance, they bill, but there is no up-front cost
   iv. Colorado Springs Fire Department (CSFD) provides testing for individuals experiencing homelessness.

f. Community Health Partnership (CHP) in collaboration with EPCPH and community partners anticipates being awarded a grant through Kaiser to facilitate flu vaccination and testing for individuals experiencing homelessness.

5. Increase supports to community settings at increased risk for disease transmission including long-term care facilities (LTCF), homeless shelters, schools (K-12) and higher education, and county jail:
   a. Early in our response, we identified priority populations for intervention due to the risk of disease transmission in congregate settings. EPCPH formed steering committees for LTCF, homeless and dedicated technical assistance for our county jail.
   b. These teams will continue efforts to include assistance in planning for PPE needs, technical assistance regarding cohorting and prevention planning.
c. EPCPH efforts to support LTCFs has included mental health support to facility staff via BrainWise training. These efforts garnered attention in the national BrainWise Newsletter highlighting the innovative application of this program in the LTCF setting and positive results in staff morale while fighting COVID-19 within the facilities. Helping staff cope and remain in their positions is critical to the ability of these facilities to prevent future outbreaks.

d. EPCPH also facilitated a letter-writing campaign from school children in May and the faith community via COSIloveyou to staff and residents of LTCFs in July-August to reduce their feelings of isolation and increase staff and resident morale.

e. Schools have been a consistent priority since March. Our Emergency Coordination Center (ECC) has been working closely with partners from schools and higher education institutions across the County to prepare and implement the return to in person learning.

1. EPCPH developed a comprehensive school guidance document to provide to school partners. This is a living document and continues to be updated with new guidance and/or pertinent information from the State.

2. EPCPH has an established a dedicated team of experts who provide timely and reliable technical expertise and guidance to schools.
   1. A Public Health School Liaison has been hired.
   2. EPCPH’s epidemiology team facilitates routine weekly virtual office hours to provide dedicated support to school nurses as they address COVID-19 concerns, review real-life scenarios and facilitate peer learning across 17 different school districts.

iii. Most recently, EPCPH’s school team has been lauded by CDPHE for their efforts to support schools as they navigate return to learn amidst the pandemic.

6. Protect Our Neighbors Grants

   a. Planning

   i. EPCPH, in partnership with the local organizations Resilient, Strong, Engaged (RISE) Coalition and Servicios de la Raza (SDLR), has received funding for a pilot project that will work within the following: RISE service area, zip codes 80910 and 80916 of Colorado Springs where US Census data estimate 36-51% of the population is Hispanic; zip code 80917, where SDLR serves about 15,000 Latinx families; and the Fountain Valley region, which has a Hispanic population ranging between 11-15%, according to US Census data.

   ii. The project is intended to target collection and dissemination of data from/to Spanish-speaking individuals who reside in the service areas about their needs, and it will also seek to input the collected data into a containment and mitigation plan specifically devised by EPCPH for non-English speaking populations of El Paso County.

   b. Infrastructure

   i. EPCPH, in partnership with Resilient Inspired Strong Engaged (RISE) Coalition, Servicios de la Raza (SDLR), Silver Key, Mercy’s Gate, Catholic Charities, and Solid Rock Community Development Corporation (Solid Rock), and Pikes Peak United Way wants to address the issues of food insecurity, rent and utility assistance, and transportation support to/from COVID-19 testing sites among residents of the County.

   ii. Funding will help populations that were inequitably affected by the pandemic meet their basic needs help maintain the community safety net infrastructure.
7. GRIT (Greater Resilience Information Toolkit)
   a. EPCPH has partnered with the renowned Dr. Charles Benight of the University of Colorado, Colorado Springs (UCCS) to launch GRIT (Greater Resilience Information Toolkit). GRIT offers free resources with information and supportive video content that empower individuals and communities to expand their capacity to build resilience.
   b. GRIT provides resilience support coach training, a free opportunity for volunteers to learn to be a GRIT coach to be a resource for support and education in the community.
   c. The five-hour course provides information and skills on general and COVID-19 related stress, resilience, disaster recovery skills, support, and small interventions to educate, support, and motivate individuals and communities to be as resilient as they can be in the wake of COVID-19.
   d. Since launching in March 2020, to date GRIT has 1,030 coaches who have signed up across 36 states and four countries, with 410 GRIT coaches signed up specifically in El Paso County.
   e. EPCPH had dedicated a portion of CARES funding specifically to behavioral health and resiliency collaboration to support our community and address the behavioral impacts of COVID-19, with particular emphasis on health equity. A total of $155,917 was allocated for the El Paso County method. This includes funding going to UCCS-National Institute for Human Resilience and NAMI Colorado Springs for personnel and other projects costs, as well as Design Rangers (a local graphic design firm) for outreach and marketing services.

8. Communication Plan
   a. As part of COVID-19 response efforts, the Joint Information Center (JIC) has been engaged since early March to provide accurate, credible and reliable information to keep the public informed and empower them to make the best decisions. The JIC includes experienced communication professionals from Public Health and City and County government. The JIC also regularly engages other public information officers (PIOs) through the regional Crisis Communication Network, as well as field PIOs from agencies such as schools, health care, business community, law enforcement, fire, emergency management, as well as communication entities from other municipalities.
   b. Communication Objectives: Increase awareness in the community about upward trends in COVID-19 cases; increase engagement in preventive messaging and activities; mitigate the spread of disease in El Paso County.
   c. Key Messages:
      i. Encourage the consistent use of masks – focus on emphasizing wearing a mask in public indoor spaces, as well as when in close proximity to others and when social distancing isn’t possible
      ii. Practice social distancing (six feet of distance) as much as possible
      iii. Wash hands frequently with soap and water
      iv. Stay home when sick
      v. Keep gatherings small
      vi. Minimize the frequency and number of personal interactions to decrease complexity
      vii. Education on various activities and associated risk of viral spread
      viii. How to celebrate the holidays safely amidst the pandemic
      ix. Promotion of continued layering of all preventive measures and utilizing them consistently wherever residents work, live, worship and play.

   d. Communication Strategies:
i. Utilize mass media channels in English and Spanish to reach a broad audience to raise awareness, combined with targeted community outreach efforts

ii. Leverage partners to maximize grassroots efforts to reach community members, gain buy-in, achieve broad sector-appropriate messaging

iii. EPCPH is also directly addressing the doubts that are raised about COVID-19, preventive measures and data to mitigate false messages, complacency and division of mission

e. **Target Population(s):** Residents of El Paso County

f. **Communication Tactics:**

   i. **Messaging efforts to promote the importance of face coverings**
      a. #MaskUpCOS Campaign – Public Health partnered with the City of Colorado Springs to launch a strength-based campaign called #MaskUpCOS to encourage our community to wear masks. Participants in the campaign highlighted why they personally believe it is important to wear a mask, and were intentionally selected from diverse sectors of our community: mother and her immuno-compromised child; ER doctor; oncology nurse; speech pathologist at a skilled nursing facility; business leader; faith-based leader; Paralympic athlete; veteran. The campaign launched with a press conference to promote it on June 26
      b. As part of efforts to augment the campaign, EPCPH ran a series of paid social media ads from July 7 – August 31. Running for a total of eight weeks, each week a different graphic was featured; each graphic was specifically customized and targeted toward an audience with whom the ad would resonate. The ads reached an additional 123,762 people, with 349,838 impressions.

   ii. **Messaging efforts to promote the importance of all preventive measures**
      1. EPCPH and partners continue to promote the importance of prevention measures such as wearing a mask, social distancing, frequently washing hands with soap and water, staying home when sick, and keeping gatherings small. We recognize that in order to mitigate spread of disease in our community, we need people to engage simultaneously in all of these important measures. Efforts to that end include:
         a. Frequent social media messaging (Facebook, Twitter and Instagram) on the big 3:
            i. Wear a mask
            ii. Practice social distancing
            iii. Wash hands frequently
         b. Providing residents the tools and information needed to empower them to make the most informed decisions:
            i. Frequent data updates to educate the community on local COVID-19 trends and numbers.
            ii. Each week on social media, the JIC shares a “data download post” which features the two-week incidence rate and two-week test positivity rate, explains what those numbers mean, and pairs the data with prevention messaging. Engagement with these posts is very high, and JIC works with closely with data team to provide thorough and informative responses to questions from citizens.
         c. Encouraging people to get tested if they are experiencing symptoms and making testing locations and information readily available.
d. Regularly updating County and City leadership, and issuing news releases to share highlights from the presentations.

e. Diversifying local messengers so that EPCPH is joined by the voices of local partners and trusted individuals in promoting prevention and containment of COVID-19 to help El Paso County thrive.

iii. Stepped up prevention campaign for fall and winter months

1. The County and EPCPH are moving forward with two efforts to increase prevention messaging: a social media campaign and a Spanish radio campaign. Both initiatives will be funded by CARES. Vendors have been selected, planning meetings have occurred, and these campaigns efforts should launch shortly.
   a. Approximately $68,000 will be used for a PR firm to assist with social media to include development of messaging and creative, ad placement and strategy, media buy, tracking metrics and analytics, and reporting out. There will be an emphasis on engaging younger demographics, as they represent a high proportion of COVID-19 cases.
   b. Up to $10,000 will be used for a firm to assist with Spanish radio ads. The firm will assist with scripts, voice talent, ad placement, and metrics. These ads will be targeted to populations who are disparately impacted by COVID-19 and health inequities. Radio spots have been recorded and air set to begin airing next week.

2. As part of fall and winter communication planning, the JIC also created two digital toolkits – one on flu prevention and one on tips to safely celebrate Halloween amidst the pandemic. Each toolkit contains social media graphics, sample posts/copy, fact sheets, and FAQs. These have been shared widely with partners in the Crisis Communication Network.

3. EPCPH established “Health Department Tuesdays” (live segments) with a local CBS affiliate which air on the first and third Tuesdays of the month and cover pertinent COVID-19 topics/updates of EPCPH’s choosing.

4. EPCPH is working with partners to initiate a multi-sector communication framework on a broad range of topics, with the goal of motivating people to take action. The intent is to have a built-in, accessible network of experts from multiple disciplines that have the unique ability to coordinate and communicate a community-wide message about the importance of following guidelines and recommendations to keep our residents, economy, schools, workforce, residents, and community healthy.

9. Timeline
   a. **July 7**: Proactively self-reported increasing positivity rate to State Epidemiologist and anticipation that El Paso County would cross 5% threshold. Convened partners to discuss mitigation needs.
   b. **July 8**: El Paso County positivity rate of 6% reported to state and guidance sought regarding mitigation process.
   c. **July 9**: Convened with City, County, business, hospital and public safety partners to discuss mitigations steps needed in partnership to reverse trends. Planned news conference regarding a call to action to increase awareness of the #MaskUpCOS campaign and disease trends with city partners, conducted multiple interviews to discuss rising trends and
continued outreach plan. Develop plan to leverage school partner PIOs to increase mask campaign reach into the community.

d. **July 10**: Met with school PIOs.
e. **July 11**: Discussed mitigation plan with CDPHE Chief of Staff and she confirmed that it was appropriate to submit our plan on Monday July 13.
f. **July 13**: Submit mitigation plan to CDPHE
g. **July 13-27**: Two-week implementation of mitigation phase
h. **July 27**: Check-in with CDPHE regarding mitigation process and progress.
i. **July 27 to August 10**: If indicators do not resolve to pre-trigger levels, two-weeks at the medium threshold
j. **August 3**: Indoor variances temporarily reduced capacity to 100 people, except places of worship.
k. **August 5**: The Colorado Springs Chamber & EDC launched interactive teleworking toolkit
l. **August 11**: New community-based drive-through testing site launched at the Citadel Mall
m. **August 17**: Return to learn began to phase in for schools throughout El Paso County
n. **September 2**: Began increased preventive messaging specific to Labor Day holiday
o. **October 6**: Two-week incidence rate exceeds the threshold of 75 set forth in the dial framework for Safer at Home Level 1 - Cautious
p. **October 7**: EPCPH launched digital toolkits for flu prevention and Halloween messaging – underscoring the importance of prevention this year amidst the pandemic
q. **October 15**: EPCPH proactively initiated a meeting with CDPHE to discuss increasing numbers and current mitigation efforts. Follow up meeting set for October 21.
r. **October 15**: EPCPH has begun working with medical and communicable disease experts on messaging for travel, colder weather, and winter holidays as they relate to COVID-19
s. **October 21**: CDPHE and EPCPH met again to discuss progress. CDPHE stipulated that if the county’s incidence rates had not significantly decreased, the county would be moved to a more restrictive level or Safer at Home Dial.
t. **October 22**: CDPHE and the Governor’s office met with EPCPH on October 22, 2020 to discuss these trends and next steps.
u. **October 30**: CDPHE makes the decision to move El Paso County to Safer at Home Level 2. While the county’s incidence rates are aligned with Safer at Home Dial Level 3, CDPHE has decided that a gradual implementation of restrictions is suitable at this time.