



EMORY

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PUBLIC
HEALTH

Interfaith Health Program
Hubert Department of Global Health

Moving Faith and Health into the Mainstream

IHP Colorado Springs

Presented by Cynthia Wacker • Dr. Barbara Joyce

Core Partners

- Penrose–St. Francis Health Services: Mission Outreach
- University of Colorado-Colorado Springs, Bethel School of Nursing
- Walgreens
- Colorado Springs Fire Department: Community Outreach
- El Paso County Public Health



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ACCOMPLISHMENTS

Objective: Enhance capacity through increased partnerships within and outside the Colorado Springs area for improved health outcomes.

- Doubled health care educational partners including insurance enrollment through Connect for Colorado.
 - Documented 342 visits, 30% no insurance, 70% no vaccine coverage
 - Insurance status change in 11 individuals,
 - Follow-up Breast care appointments for 34 women
- Increased Flu shots by 14%
 - 2014 16 clinics for a total of 1065 vaccinations; 2015 22 clinics for a total of 1215
 - Serving homeless and low income at social ministry sites
 - Increased Hispanic clinics from 2 to 5
- 2 clinics held outside of Colorado Springs
 - Facilitated training for community agency (Salvation Army) as well as partnering hospital medical and non-medical volunteers.



ACCOMPLISHMENTS (CONTINUED)

Objective: Provide faith and health educational opportunities for clergy and public health, with focus on changing health outcomes for vulnerable and at risk populations

- 3 clergy seminars held with a total of 123 in attendance
- IHP partners convened group to include new and current partners that identified vulnerable poverty areas of Colorado Springs resulting in state grant opportunities.
- IHP partners presented Faith and Health model nationally at APHA, Westberg, and 2015 fall National ANCC Nursing Magnet conference.



CHALLENGES

Time

- Adapting to changing environments
 - Public health staff change: always needing to reintroduce topic and test collaborative
 - ACA; Critical for identifying changing population needing access
 - Organizational and job changes for partners
 - Ability to adapt quickly to needed changes in clinic or objectives
- Determining opportunity priorities
 - Presentations, grants, publications take time that does not always fit neatly into “job”

CAPACITIES

1. Collaborations that Endure

The COS IHP collaboration has developed a unique ability to be separate yet integrated. Each partner has determined an intentionality to its faith based/community health role and adjusted to national as well as local changes in health care practice.

Examples:

- Separate practices: Community Center Collaborative (CCC), PSF Neighborhood Nurse Centers, spirituality in physician practices and Social crisis centers.
- Integrated; Flu clinics with Faith Community Nurses, Students and partnering agencies

2. Building and Maintaining Trust

Each partner as well as the agencies represented has built trusted relationships in the community that overlap and build upon the trust of each member. One agency alone can not maintain both the faith and health networks required to facilitate needed change. Example:

- Walgreens, CSFD
- Build Health Challenge Grant included CCC partners (YMCA) as well as the hospital and Public health. The grant incorporates faith initiatives and public health due exclusively COS IHP

3. Relationships and Presence as Paramount

The relationships that the partners have in the community are critical to be asked to be present at the table for all discussions that can potentially affect change for our identified populations. This provides the opportunity to facilitate presentation of the Model Practice Toolkit as well as key components of IHP.

- Local and state health departments, Centura, CCC, FCN network, National nursing

OPPORTUNITIES

Connect for Colorado (ACA) enrollment alignment with fall Flu Clinics

- Expand to Healthy Church Initiative partners and the Centura Community Health Advocates to host enrollment events to coincide with a Community Fall Flu Clinic. (The Switch)

Faith and Health Conferences

- Expanding Fall clergy event on Pandemic and/or disaster roles and opportunities for congregations/FBO to include public health presence.
- Readiness for all vaccine or public health related crisis
- IHP clergy and PH team event for Midwest.

Faith Community Nursing

- Enhancing the practice beyond congregational models
- Foundation classes
- Community health nursing roles



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QUESTIONS FOR DISCUSSION

1. What more would you like to know about this site's work?
2. Your capacities slide is quite impressive. It reflects a deliberate effort to understand those capacities and to build relationships with other organizations based on that understanding. I can see that over time this has created a significant number of enduring partnerships. How is this done? What explains your ability to continually expand your reach to socially vulnerable groups?

