

Penrose-St. Francis Health Services Mission Outreach, Colorado Springs, CO

In Colorado Springs, attention to building and maintaining a core set of partnership relationships results in expanded outreach to hard-to-reach persons and communities. These core partners include: Penrose-St. Francis Health Services Mission Outreach; the University of Colorado, Colorado Springs Bethel School of Nursing; Westside Cares; Colorado Springs Fire Department, and Walgreens. The successes of their flu immunization clinics are largely due to the strength and commitment of the partnership that has developed from the six years of immunization work starting with childhood immunization clinics in 2005.



Model Practice in Action

The Collaboration Multiplier: Trusted Relationships Can Make it Happen!

Penrose St. Francis Health Mission, with strong, long standing partnerships, is an exemplar of the model practice, Circle of Core Partners.

The experience of one family reveals what is possible when trusted partner relationships are in place. One person in one small family made a call to the largest health entity in our state because they wanted to get a flu shot for their home bound family member. They called the Colorado State Health Department. Surprisingly from that high level a web of trusted connections was activated. The person at the state health department, located outside our county, called one of the Interfaith Health Program Colorado Springs partners that they knew was providing flu shots for the community. That partner did not have the ability to provide the vaccine, but didn't let it stop there. They contacted another partner with the information and found who had a policy in place that could make this happen. That partner was the Colorado Springs Fire Department who because of their CARES program was willing and able. They made the call to the home and provided the vaccination for a very grateful family who now knew their family member was protected and that their community cared about them.

This same trusted relationship thread has generated acts of service for the newly and chronically unemployed as well as disenfranchised members of the community such as the homeless, ex-offenders and substance abuse program participants. Relationships and connections across churches, crisis interventions sites, soup kitchens, and community centers provide a network of neighborhood sites linked by a trusted group of leaders from our partnering agencies.

In summary this story represents the shared knowledge of the benefits of our collaboration and commitments, the recognition of our web of connection and partners, and the trust in knowing that we would take care of it . . . and make it happen.



What Does it Take?

The following shows how one replicates this success, what actions to take for replication, and how to operationalize those actions:

- Collaboration occurs based on a shared mission, so know your mission. Be able to articulate what you do and why you do it and ask others to do this and share. We spend time defining what is important to us in the beginning of each partnership engagement.
- There is an awareness that we are faith-based, not faith-required. In Colorado Springs, the faith community is brought on board as an integrated member, not to be used, but as part of the whole collaborative.
- We hold a review at the beginning and end of each season to assess the changes needed for the next year and to identify each partner's contributions. Each of the core partners believes in and understands the need to recognize gaps in delivery of immunizations and health care access. Our evaluation process has provided further understanding of and access to each partner agency resources in other program areas.
- Our partnership relationships are built on trust: MOUs are institutionally challenging and can be barriers to partnerships. We collaborate based on verbal commitments made possible by a history of working together and trust built over time.
- We make sure we are able to meet diverse needs with the right mix of partners – both hospitals, university, and faith-based partners. Current circle of core partners include: UCCS Bethel School of Nursing, Penrose –St. Francis Health Services, Colorado Springs Fire Department (CSFD), Walgreens, and El Paso County Health Department.
- We go to existing community sites where folks in need come to get help, food assistance, etc. and we go back every year. There is now a 16 year history in the crisis intervention sites of nurse/hospital relationships.
- Our distinctive strength is in a core infrastructure of committed partners that are trusted and willing to flex to community needs and the constant change that happens within organizations. The recognition of the respective organizational strengths and weaknesses add to the respect of the partnership members and their respective organizations.

Environment Context and Barriers to Success

This partnership developed out of the understanding that not all community members were able to access and afford recommended or needed immunizations. Barriers to meeting the community needs included cost of the vaccine, local health department vaccine distribution policy, and immunization for flu being only a small piece of the partners overall mission and programming.

Key Results or Implications of Success

Key Successes:

- Vaccination reach continues to trend upward each year with close to 1400 shots in 2015-16. Increasing health education and providing insurance experts at every clinic is distinctive in the ability to grow the program for the benefit of the targeted population.
- CSFD has emerged as key contributor to community health programs to include immunizations for adult uninsured and underinsured individuals. They recently completed a pilot “CARES” program that targeted high ER recidivism patients for home visitation and connection to community case management.
- Walgreens has reached into targeted populations needing flu vaccinations such as the homeless and ex-offender communities that they were not previously serving.
- Penrose–St. Francis Faith Community Nurse program was highlighted as an exemplar practice in the current MAGNET recognition for the hospital nursing program due to the long term community partnerships. This wholistic program documents 3-4,000 patient visits per year advancing health for the low-income population at crisis intervention sites.

The success of each individual partner in advancing health care into the community does not distract from the community collaborative work but instead underscores the multiplying effect of common missions within a targeted population.

The Circle of Core Partners and the trust that accompanies the long term relationships provides the opportunity for continuous attention to quality improvement. The ability to plan, do, study and act is the work of the collaboration. It does not stop with one program or project, but lends itself to a culture of multi-sectoral attention to quality improvement and priority reach.

Lessons Learned

Never assume: Keeping the mission and goals of the partnership are key to sustaining a collaborative partnership. It means not allowing significant changes in organizations to allow these goals to be lost in politics of change. Some of the key partnerships in the initial IHP initiative changed due to retirements and organizational structures changes. It has been critical to be flexible and identify and develop new relationships of trust that will be able to come to the common table to advance the common goal of eliminating health disparities.

In Colorado Springs there was early realization that health disparities were not just racial, but also included the homeless, unemployed, ex-offenders, those recovering from substance abuse, single parents struggling with one income, and the very low income families. This took time to fully embrace as the priority disparate population. Celebrate each other’s successes as well as that of Colorado Springs IHP.

“Our partner relationships are are built on trust and recognizing each other’s strengths.”

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