



Strengthening Public Health in the Mountains of Colorado

THE CHALLENGE

The counties of Gunnison, Hinsdale, Ouray, San Miguel, Montrose and Delta comprise West Central Colorado, a sparsely populated area of about 9,568 square miles. Many residents live in largely remote areas that are somewhat isolated by mountainous terrain and difficult to reach in harsh weather conditions.

In 2005, five of the counties were served by “county nursing agencies” and only one was served by a county health department that provided a larger array of traditional public health services including environmental health services delivered in partnership with the local environmental health agency. At the time, the public health directors struggled to complete new state-mandated community health improvement plans and disaster preparedness plans. The demands of their jobs were growing and yet their capacity was not.

FORMALIZING PARTNERSHIPS AND PLANS

In 2005, under the leadership of the then-director of Gunnison County Public Health, the six counties were awarded the first of a series of grants from the Colorado Trust to develop and launch a regional public health/environmental health collaboration. The effort to pull together six jurisdictions, each with its own health department, governing board, political climate, economic resources, health issues and internal priorities was quite daunting. Tensions existed, with smaller health departments fearing a loss of local control and a threat of consolidation, and larger health departments fearing their resources would be directed away from their constituents.

Despite these challenges, an inclusive planning process was completed with all major stakeholders at the table: public health directors and staff, environmental health directors and staff, county commissioners (who serve as the board of health) and representatives from the Colorado Department of Public Health and Environment (CDPHE). The initial goals of the group were to formalize the regional partnership, conduct a regional health assessment, decrease the incidence of foodborne illness, and maximize public health resources for pandemic planning.

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One of the partnership's greatest accomplishments is a new interactive map of the quality of water from unregulated, private well water throughout our region. None of our counties could have offered this on their own.”

—MARGARET WACKER

Community Services Supervisor,
Gunnison County Health and Human Services

THE RESULTS

The West Central Public Health Partnership (WCPHP) was formalized in 2008 through intergovernmental agreements and later was bolstered with an operating agreement defining members, their roles and decision-making processes. Also in 2008, the state began to require all public health entities to provide core services¹ that included comprehensive environmental health functions. WCPHP members could not provide all the core services on their own and entered into contractual agreements to fulfill these new requirements. The regional health assessment that had begun and the planned hiring of an environmental health staff member proved quite timely as the health departments adjusted to their new responsibilities.

The WCPHP secured several new grants in the ensuing years for a range of public health issues. Different health departments served as the fiscal agent and the model to share services varied to ensure that “form followed function.” For example, a well water grant from the Centers for Disease Control and Prevention supported a staff member in one county to develop an [interactive map](#) of all contaminants found in wells throughout the region.² In another example, a chronic disease prevention grant from CDPHE was allocated among all six counties, and each one created a full-time health educator by pooling these funds with other resources.

In 2017, the WCPHP won a competitive small grant from the Center for Sharing Public Health Services (the Center) to refresh its approach to the partnership’s shared services grants. The partnership developed a communications plan that established routine, frequent contacts to ensure that all directors understood the requirements of shared services grants and had built-in opportunities to receive any needed technical assistance.

The Center grant also supported a regional capacity assessment to guide strategic decisions about future opportunities to collaborate. The Center provided a capacity assessment tool and connected partnership members to peers across the country working on similar issues. Talks with the Center also prompted the WCPHP to develop an orientation packet for new public health directors about the partnership and its importance.

KEYS TO SUCCESS

Strong leadership is essential. In the WCPHP, this meant having a champion (the Gunnison Public Health director) who worked tirelessly to ignite interest, generate enthusiasm and maintain momentum. Without her time and energy, collaborations would have continued to occur only on an informal, as-needed basis.

Early buy-in from governing boards helps facilitate the planning process. Regularly demonstrating how their investment results in a benefit without a loss of identity or control over resources helps sustain their support; for example, providing routine updates on services that could not have been delivered on their own and reminding them of the benefits of a stronger regional public health infrastructure for all counties.

There are no shortcuts in the process of establishing a partnership, and the process itself is critical in building trust, forming interpersonal bonds and establishing mutually beneficial operational agreements. Using an external facilitator can help all stakeholders more fully participate in relationship-building.

Relationships are at the heart of this success story. When group members are invested in the people in the room as well as in the projects, a need to not “let down” the others can serve as an extra motivation for follow-through and commitment.

¹ Centers for Disease Control and Prevention. (2018). *The Public Health System & the 10 Essential Public Health Services*. Retrieved October 27, 2019, from <http://bit.ly/32HywUb>

² University of Colorado Boulder, College of Engineering and Applied Science. (2019). *Partnership Puts Valuable Water Quality Information from Western Slope Online*. Retrieved November 13, 2019, from <http://bit.ly/34XojRX>

Reference:

The Colorado Trust. (2012). *The West Central Public Health Partnership: A Case Study in Public Health Collaboration*. Retrieved October 1, 2019, from <http://bit.ly/2CLlvgx>

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The Center for Sharing Public Health Services provides access to tools, techniques, expertise and resources that support better collaboration and sharing across boundaries. We help public health departments across the country work together to protect and promote the health of the people they serve.

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