

## Strengthening Provider-Public Health Collaboration in Rural Colorado

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**Background:** In rural Colorado, physicians often serve as the sole access point for healthcare, managing not only medical conditions but also social needs. Although public health departments provide essential services such as immunizations, outbreak investigation, housing, and food assistance, they remain underutilized by clinicians. A Colorado Department of Public Health and Environment (CDPHE) survey revealed that only 29% of physicians could name three or more public health services available in their county. This lack of awareness contributes to fragmented care, missed opportunities to address social determinants of health, and delayed outbreak detection. Barriers to collaboration span multiple levels: *institutional* (high workload, limited staffing), *systemic* (disconnected electronic health records, minimal public health training), and *interpersonal* (limited familiarity between providers and public health personnel).

**Objectives:** This project aimed to (1) increase rural clinicians' awareness of local public health services and reporting requirements; (2) strengthen collaboration between healthcare providers and public health departments; (3) identify systemic, institutional, and interpersonal barriers to integration; (4) empower clinicians to leverage public health resources in addressing social determinants of health; and (5) measure impact through pre- and post-intervention assessments of knowledge, confidence, and collaboration readiness.

**Methods:** The initiative was implemented in Steamboat Springs, Colorado (Routt County), a rural Longitudinal Integrated Clerkship site where physicians often provide comprehensive community care. The project involved multiple meetings with the Routt County Public Health Director and public health nurse to identify communication gaps and unmet needs. Local clinic–public health interactions were reviewed to understand existing workflows and barriers. A targeted educational intervention was delivered at the Routt County Outpatient Service Line Meeting, introducing public health functions, reportable conditions, and collaboration tools. Pre- and post-session surveys were administered to evaluate changes in clinician knowledge and perceived readiness to engage with public health resources.

**Results:** Preliminary findings demonstrated improved clinician awareness of local public health services and increased confidence in communicating with public health officials. Qualitative feedback highlighted appreciation for direct connections between clinics and the public health team, with participants expressing intent to integrate public health referrals into patient care workflows. Barriers identified included lack of EHR interoperability and limited protected time for inter-organizational communication.

**Conclusions:** When rural providers and public health departments collaborate—not simply coexist—patients and communities thrive. Education, awareness, and shared communication tools can transform fragmented care into coordinated, population-level impact. Strengthening these partnerships helps rural clinicians address the upstream social and environmental factors that drive health outcomes.

**Future Directions:** Routt County Public Health will assume leadership of this initiative to ensure sustainability, integrating regular educational updates into service line meetings (including the forthcoming 2026 CDPHE Reportable Conditions update). Regional expansion to Moffat County and neighboring areas is planned, as many residents seek care at Steamboat-based clinics, creating opportunities for broader inter-county collaboration.