Introduction

Scott & White Hospital– College Station (“the Hospital” hereafter) participated in a community health needs assessment (a “CHNA”) of the community served by the Hospital pursuant to requirements of Section 501(r) of the Internal Revenue Code (“Section 1.501 (r)(3)”. The CHNA findings were published along with this document on the Hospital’s website at http://chna.sw.org in May 2014.

The implementation strategy outlines the actions through which the Hospital intends to address a number of identified needs that are aligned with the Hospital’s mission during its 2014–2016 fiscal years as part of its community benefit programs and services. Beyond the services discussed in the strategy, the Hospital is also addressing many other health needs through the daily commitment of providing care to all regardless of their ability to pay.
The Hospital anticipates the strategies may change because of resources and situations needing immediate action and therefore, intends to maintain a flexible approach in developing this response to the 2013 CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives previously identified by the Hospital in the strategy. Over the next three years, other community organizations may address certain needs, indicating that the hospital’s strategies should be refocused on alternative community health needs or assume a different focus on the needs identified in the 2013 CHNA. In addition, changes may be warranted based on the publication of final regulations by the Internal Revenue Service.¹

¹ Final guidance as to the substance and format of a CHNA and implementation strategy has not been published and has been provided only on an anticipatory basis as of the publication of this document.
Overview of the Strategy

The Strategy Document includes the following information:

1. Mission and Vision Statement                          page 4
2. Community Served by the Hospital                      page 7
3. Implementation Strategy Development                  page 10
4. Priority Community Health Needs                      page 14
6. Needs Beyond the Hospital’s Mission or Service Programs page 25
7. Implementation Strategy Development Coordinators      page 26
1. Mission and Vision Statement

Scott & White Hospital – College Station, part of Scott & White Healthcare, now Baylor Scott & White Health, shares the System’s goal of empowering patients and communities to live better lives.

Our Mission
To provide the most personalized, comprehensive, and highest-quality health care, enhanced by medical education and research.

Our Vision
Scott & White will be the most Trusted and most Valued name in American Health Care.

Serving a great purpose: Scott & White’s Community Benefit Program
For more than a century, Scott & White Healthcare has assembled the right resources to diagnose and treat thousands of patients, earning our reputation as a comprehensive and dependable healthcare resource. We take very seriously our commitment to clinical patient care and academic advancement through medical training and scientific inquiry. In a rapidly changing healthcare environment, we bring each patient best-in-class medicine in convenient settings to ensure the best possible healthcare outcome and experience.
Yet, it’s not enough to care for one person at a time. We understand that the health of individuals is strongly influenced by personal behaviors, family and friends, and the broader environment in which they live day-to-day. To promote healthy living at the individual level, we must also promote the health of our community.

The goal of the Scott & White Healthcare Community Benefit Program is to improve access to healthcare and empower citizens to make healthy life choices. To help people live better lives, Scott & White maintains ongoing relationships with our community groups, businesses, and individuals; assessing and addressing local needs to improve the community’s health profile. We impact community health by increasing access to healthcare services for all, including at-risk and underserved people, and help community members make choices that enhance their well-being.

Scott & White helps remove barriers to care by sponsoring programs and forming partnerships with local community organizations who share the goal of improving community health. By leveraging resources effectively, we meet identified and emerging local health needs collaboratively. By expanding access to health information and services, we engage individuals in their own health management, and improve workplace and other environmental conditions that impact health.

As the largest non-profit organization and one of the largest employers in Central Texas, Scott & White Healthcare takes a leadership role in ensuring the health and well-being of our communities.
A National Reputation for Excellence

Committed to patient care, education and research, Scott & White Healthcare has earned a reputation for excellence in cancer, orthopedics, neuroscience, pediatrics and cardiovascular care. Our dedicated physicians have built a nationally-acclaimed healthcare organization, recognized by organizations including *U.S. News & World Report*, *Thomson Reuters* and *Newsweek*. 
2. Our Community Served

Scott & White Hospital–College Station identifies Brazos County as its primary community served because it is where the hospital facility is located and from where most of its patients reside.

The mean age of survey respondents from Brazos County was 40.5 years. Compared to the region, Brazos County has a younger population than the other rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S. which can in part be attributed to the student body at Texas A&M University and Blinn College’s Bryan Campus.

Table 1: Age Distribution Comparison

<table>
<thead>
<tr>
<th></th>
<th>65 years and above</th>
<th>45–64</th>
<th>25–44</th>
<th>18–24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brazos County</td>
<td>7%</td>
<td>4%</td>
<td>6%</td>
<td>14%</td>
</tr>
<tr>
<td>Rural Brazos County</td>
<td>9%</td>
<td>21%</td>
<td>37%</td>
<td>34%</td>
</tr>
<tr>
<td>Brazos Valley Region</td>
<td>15%</td>
<td>27%</td>
<td>52%</td>
<td>39%</td>
</tr>
<tr>
<td>Texas</td>
<td>14%</td>
<td>33%</td>
<td>35%</td>
<td>35%</td>
</tr>
<tr>
<td>U.S.</td>
<td>17%</td>
<td>35%</td>
<td>35%</td>
<td>13%</td>
</tr>
</tbody>
</table>

2 http://quickfacts.census.gov/qfd/states/48000.html
Race and Ethnicity

A majority of Brazos County survey respondents identified themselves as White/Caucasian (80.7%), 4.3 percent indicated Black/African American, and 9.7% indicated Hispanic/Latino. Other respondents identified themselves as Asian or Pacific Islander, Native American, and as more than one race. Because of these relatively small numbers, these last three categories were combined into a single group called “All Other Races” for the purpose of analysis (total of 5.3%). Comparing these figures to 2013 Census estimates indicates that minority groups are underrepresented in this survey sample.

<table>
<thead>
<tr>
<th>Race</th>
<th>% of Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>73.89%</td>
</tr>
<tr>
<td>Black/Af Amer</td>
<td>17.30%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>14.99%</td>
</tr>
<tr>
<td>Other Race</td>
<td>5.43%</td>
</tr>
<tr>
<td>2+ Races</td>
<td>1.70%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.33%</td>
</tr>
<tr>
<td>Am Ind/AK Native</td>
<td>0.31%</td>
</tr>
<tr>
<td>Native HI/PI</td>
<td>0.03%</td>
</tr>
</tbody>
</table>

2013 Census: Brazos County Population by Race

Education

Education is an important social factor that influences health status. The mean years of education attained for survey respondents in Brazos County is 15.2, the equivalent of a high school diploma plus over three years of college.

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3 Healthy Communities Institute. (2013) Claritas Inc., Retrieved on November 11, 2013. Retrieved from [http://www.sw.org/community-benefit/community-health-needs-assessment?hcn=%2Findex.php%3Fmodule%3DDemographicData%26type%3DUser%26func%3Dddview%26varset%3D1%26view%3Dtext%26pct%3D2%26levels%3D1%26hcnembedredirect_%3D1](http://www.sw.org/community-benefit/community-health-needs-assessment?hcn=%2Findex.php%3Fmodule%3DDemographicData%26type%3DUser%26func%3Dddview%26varset%3D1%26view%3Dtext%26pct%3D2%26levels%3D1%26hcnembedredirect_%3D1)
Table 2: Educational Attainment Comparison

<table>
<thead>
<tr>
<th></th>
<th>More than High School</th>
<th>High School</th>
<th>Less than high school</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brazos County</td>
<td>83%</td>
<td>11%</td>
<td>7%</td>
</tr>
<tr>
<td>Rural Brazos</td>
<td>62%</td>
<td>29%</td>
<td>10%</td>
</tr>
<tr>
<td>Valley</td>
<td>75%</td>
<td>17%</td>
<td>8%</td>
</tr>
<tr>
<td>Brazos Valley</td>
<td>56%</td>
<td>26%</td>
<td>19%</td>
</tr>
<tr>
<td>Region</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Texas</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>U.S.</td>
<td>58%</td>
<td>28%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Household Income and Poverty Status

The median household income was $37,638 for 2012, which is lower than the census estimates for Texas ($51,563) and the percent of persons living below the poverty level was 30%; higher than the State’s 17.4%. The Federal Poverty Guidelines set the federal poverty level (FPL) for 2012 at $23,050 for a family of four.

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4 [http://quickfacts.census.gov/qfd/states/48000.html](http://quickfacts.census.gov/qfd/states/48000.html)
3. Implementation Strategy Development

Scott & White Healthcare established a Community Benefit and Community Health Needs Assessment (CHNA) Task Force to advise hospitals in the System, including Scott & White Hospital – College Station, on the development of local Implementation Strategies to address unmet community health needs. The Task Force is responsible for overseeing the CHNA process including the integration of the community benefit priorities into the System-wide strategic planning process.

The Task Force objectives include:

- Review and provide support for local hospital community benefit plans
- Ensure alignment of plans to System culture and strategies
- Provide guidance on tactics to address community health needs
- Ensure compliance with federal and state guidelines, regulations and filings
- Oversee program evaluation and tracking
- Secure successful adoption of plan by hospital board of directors
The Task Force relied on valuable input from key hospital leaders throughout the process to support the Hospital in planning for implementation:

- The System CEO served as the Executive Sponsor
- VP of Strategic Planning served on the task force providing regular feedback between strategic planning process for the System and the needs identified by the CHNA
- The Hospital CEO stayed informed of deadlines and government regulations.
- Hospital representatives who had a deep understanding of hospital operations and strategic goals were appointed by the CEO to help develop and implement a plan to address identified community health needs.

The task force reviewed the CHNA findings for Brazos County and recommended priority areas to address to representatives of Scott & White Hospital – College Station.
From the Health Assessment, 8 areas of need were identified as needing particular attention and action.

1. Obesity
2. Chronic Diseases
3. Transportation/ Access to Care
4. Mental Health Services
5. Risky Behavior of Young Adults
6. Services for the Elderly
7. Infrastructure to keep up with population growth
8. Disparities in access for low-income and minority populations

The following criteria were utilized to determine the four priority areas to address:

- Severity or prevalence of the issue
- Notable health disparities in specific populations
- Readiness of community population to change
- Resources available to impact the need
- Feasibility of possible interventions to affect change
- Ability to evaluate outcomes
By stewarding existing resources, strengthening partnerships, and creating innovative programs both on the Hospital campus and within the community, Scott & White Hospital – College Station hopes to make a positive impact on the following 3 significant community health needs:

1. Obesity
2. Chronic disease
3. Mental Health Services
4. Priority Community Health Needs

**Obesity and Chronic Disease**

Obesity is a prioritized need that is included as part of our System-wide plan to improve population health. Reaching and maintaining a healthy weight through physical activity and nutrition and potentially weight loss is one area of need that the Hospital will address in the community. According to the Texas Behavioral Risk Factor Surveillance System, 67.1 percent of adults living in Public Health Region 7 are overweight or obese.\(^6\) Texas Public Health Region 7 is comprised of 31 counties including Brazos County. The percentage of overweight and obese adults is an indicator of the overall health and lifestyle of a community. This measurement is based on the Body Mass Index (BMI) which is calculated by taking a person’s weight and dividing it by their height squared in metric units. A BMI between 25 and 29.9 is considered overweight and a BMI greater than or equal to 30 is considered obese.

In Brazos County, only 37.1% of residents were assessed to be at a normal weight for their height. Nearly half of survey respondents were overweight or obese; one-third were overweight (33.8%), nearly one in seven was obese (13.6%), and alarmingly, the same percentage was morbidly obese.

Being overweight or obese affects quality of life and puts individuals at risk for developing many diseases, especially heart disease, stroke, diabetes, and

Losing weight helps to prevent and control these diseases as well as reducing economic costs due to increased healthcare spending and lost earnings.

The 2013 assessment reports that the top chronic disease conditions in Brazos County include:

1) Hypertension 29.5%
2) Depression 27.3%
3) High Cholesterol 26.3%
4) Anxiety 24.7%
5) Asthma 19.6%
6) Arthritis/rheumatism 14.6%

Of the seven Brazos Valley counties, Brazos County reported the lowest rates of a number of chronic diseases common among older adults including congestive heart failure, high cholesterol, stroke, diabetes, and arthritis. However, Brazos County had the highest rate of asthma in the Brazos Valley region.

<table>
<thead>
<tr>
<th>Disease/Condition</th>
<th>Brazos County</th>
<th>U.S.(^7)</th>
<th>U.S.(^8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety</td>
<td>24.7%</td>
<td>17%</td>
<td></td>
</tr>
<tr>
<td>Arthritis/rheumatism</td>
<td>14.6%</td>
<td>22%</td>
<td></td>
</tr>
<tr>
<td>Asthma</td>
<td>19.6%</td>
<td>13%</td>
<td></td>
</tr>
<tr>
<td>Cancer (all kinds)</td>
<td>4.8%</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>Congestive Heart Failure</td>
<td>1.9%</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>27.3%</td>
<td>12%</td>
<td></td>
</tr>
</tbody>
</table>

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The survey asked residents if their health care providers had ever referred them to a chronic disease management program. The majority of respondents (93.2%) said no, and only 8.6% reported attending a program to prevent or manage a chronic illness.

**Mental Health Services**

As is common in many communities, mental health needs continue to exceed the resources and services currently available. Often accompanying mental health issues, alcohol and substance abuse are significant concerns that many residents feel are unacknowledged and unaddressed.

According to the Centers for Medicare and Medicaid Services, 15.5% of Medicare beneficiaries living in Brazos County were treated for depression in one year's time. Depression is a chronic disease that negatively affects a person's feelings, behaviors and thought processes. Depression has a variety of symptoms, the most common being a feeling of sadness, fatigue, and a marked loss of interest in activities that used to be pleasurable. Many people with depression never seek treatment; however, even those with the most

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severe depression can improve with treatments including medications, psychotherapies, and other methods.\textsuperscript{11}

Among Brazos County survey respondents, when asked how many days of the past 30 days was your mental health not good, the mean number of poor mental health days was 4.1. Nearly one-fifth of respondents (19.2\%) reported between one and five days of poor mental health in the past month. 12.1\% indicated more than 10 days of poor mental health and additionally, 27.3\% report having been diagnosed with depression and 24.7\% with anxiety.


How Scott & White Hospital – College Station will address specific community needs:

Priority Need #1: Obesity

**Strategy #1: Educate the community, patients, and staff on healthy living**

**Expected Impact:** Engage at least 1000 people annually through community health education.

**Objectives/Actions**

- Hold at least one Community Health Fair annually to provide health and safety demonstrations
- Provide a variety of cooking demonstrations with healthy recipes and healthy snacks for kids
- Provide on-site physicals to local businesses under Scott & White Health Plan
- Host Weekly Farmers Market in hospital parking lot throughout the year on Fridays

**Strategy #2: Promote Exercise and Health Living**

**Expected Impact:** Engage over 3000 people annually to promote fitness, exercise, and nutrition.

**Objectives/Actions**

- Continue as the title Sponsor of Scott & White BCS Marathon and Health Expo
- Support the Annual Kids Marathon to promote healthy active lifestyles for children and to avoid obesity. This event is promoted through the school districts.
- Offer onsite Yoga, Zumba, Kickboxing, and Fitness Camp Classes to staff and families in the community
- Offer Nutrimed Weight Loss System through clinics

**Strategy #3: Step Up and Scale Down**

**Expected Impact:** Train up to 20 staff and community members, per 12 week session, on a nutrition program that promotes physical activity and healthy eating

**Objectives/Actions**

- Participants will learn healthy eating, snacking, and nutrition planning
- Hydration and exercise instruction will be provided
- Participants will learn the importance of knowing your numbers and setting goals for continuing a healthy lifestyle.

**Priority Need #2: Chronic Disease Management**

**Strategy #1: Diabetes Education, Prevention, and Management**

**Expected Impact:** Each month achieve 20 to 25 individual encounters through diabetes education, prevention, and management programs

**Objectives/Actions**

- Diabetes education provided at clinics and hospital to patients
- Provide three Diabetes Day’s throughout the year administered through Scott & White Health Plan with A1C, eye exam, and podiatry exam
- Promote Diabetes screening and management through our clinics

**Strategy #2: Educate the community, patients, and staff on chronic disease management**
### Expected Impact: Each month achieve 20 to 25 individual encounters through diabetes education, prevention, and management programs

<table>
<thead>
<tr>
<th>Objectives/Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Hold Community Health Fair to provide blood pressure screenings</td>
</tr>
<tr>
<td>• Smoking Cessation education provided at hospital through Skylight</td>
</tr>
<tr>
<td>• Diabetes, hypertension, high cholesterol, and arthritis patient education</td>
</tr>
<tr>
<td>provided through clinics and hospitals</td>
</tr>
<tr>
<td>• Cooking and health recipe demonstrations at Health Fair</td>
</tr>
<tr>
<td>• Nutritional and Diabetes Education provided to patients through our dieticians</td>
</tr>
</tbody>
</table>

### Priority Need #3: Mental Health Services

### Strategy #1: Provide Behavioral Health services for children, adolescents, adults and geriatrics in a seven county region

<table>
<thead>
<tr>
<th>Expected Impact: Counsel at least 1500 patients a month through our behavioral health clinic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectives/Actions</td>
</tr>
<tr>
<td>• Provide services for patients living with Alzheimer’s disease, Anxiety, Autism, ADD/ADHD, bipolar, personality, dissociative, eating, obsessive-compulsive, panic, posttraumatic stress, and schizoaffective disorders.</td>
</tr>
<tr>
<td>• Provide support and counseling for people dealing with depression, substance abuse, Tourette’s Syndrome, etc.</td>
</tr>
</tbody>
</table>
**Strategy #2: Collaborate with local entities to ensure the safety, treatment and recovery of people living with mental illness**

**Expected Impact:** Participate in collaborative efforts to address and enhance mental illness services to community

<table>
<thead>
<tr>
<th>Objectives/Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Work with Brazos County Jail, Crisis Intervention Team, and Brazos Valley Council for Alcohol &amp; Substance Abuse to ensure clients receive mental health services needed</td>
</tr>
<tr>
<td>• Work with MHMR of Brazos Valley to provide much needed resources and care to community members</td>
</tr>
<tr>
<td>• Work in collaboration with new Psychiatric Hospital in College Station to address mental health needs</td>
</tr>
<tr>
<td>• Work with School Districts to provide specialty care for children and their families</td>
</tr>
</tbody>
</table>
Community Benefit Oversight and Evaluation

In order to ensure there is appropriate governance of the activities outlined in this implementation strategy for Community Benefit purposes, policies and procedures will be adhered to so that all community benefit activities remain aligned with Scott & White Healthcare System’s community benefit mission.

Additionally, regular evaluation of programs and activities will be conducted to ensure they remain an appropriate use of staff time and Scott & White resources and that the activities are achieving the desired impact. This will be managed with help from the Community Benefit Inventory for Social Accountability (CBISA) program in which community benefit program expenses and impact are tracked.

In an effort to support the hospital’s community benefit objectives, requests for contributions from outside organizations that are managed by the Community Benefit Department will be amply considered and those activities that address a priority need in the community will be given preference.
Population Health Management Strategy

As a not-for-profit healthcare organization, Scott & White Healthcare has a long history of meeting the needs of the residents of Central Texas. Each year as Scott & White begins its annual planning cycle, the Community Health Needs Assessment is reviewed to guide decision-making at the strategic level.

Scott & White has adopted System-wide strategic initiatives targeted at improving the care of diabetics. We’ve committed to reducing the rate of obesity in our communities, starting with our own employees as obesity is the leading cause of diabetes and other serious health issues.

Another critical initiative is improving access to health care. Many of our communities’ health issues can be controlled when caught in the earliest stages. Over the past year, we’ve achieved a dramatic improvement with nearly 80% of external referrals seen within 3 days of an appointment request.

With our ACO (Accountable Care Organization), which began January 1, 2013, as a partnership with Walgreens, we are targeting improvements in the care of patients with high blood pressure, COPD (Chronic Obstructive Pulmonary Disease) and CHF (Congestive Heart Failure). Recognizing that timely breast cancer screening has been an issue in our communities, we are putting in place processes to reach out to eligible women each Fall to coincide with breast cancer awareness month in October. And we are standardizing immunization practices to improve flu and pneumonia vaccination rates. Once these initiatives are in place, the ACO will focus on closing other gaps in care for the Medicare population based on predictive models that identify areas of the greatest risk and opportunity.
Over the next few years, Scott & White’s strategic plan will continue the work begun in 2013 and expand its focus on improving the health of its communities with a five year System strategy around Population Health. To support this strategy, Scott & White will establish processes for two-way conversations with community members to gather actionable ideas, solicit feedback to refine initiatives, and effectively connect patients to community resources in ways that will improve community health, reduce unnecessary healthcare costs and improve the care it delivers.

One of our newest strategic programs, CHASM (Coordinating Healthcare delivery Across a SysteM), will develop System wide, best practice clinical pathways for multi-disciplinary diseases. CHASM will use evidence based, best practice clinical guidelines to provide consistent care across all Scott & White sites of care. The program will initially concentrate on COPD, Lower Back Pain, and Colorectal Cancer. By establishing physician lead standardized clinical pathways, CHASM will improve efficiency of care, lower cost of care, and improve the health of populations. Each year, the CHASM Steering Committee will evaluate community health needs as it identifies the diseases to focus on in the coming year.
6. Identified Needs Beyond the Hospitals Mission or Service Programs

Community Needs Not Being Addressed and Reasons Why

Scott & White Hospital – College Station recognizes the importance of all needs identified in the community, but will not directly address the priority needs identified in the CHNA at this time as other organizations are better equipped to address them.

1. Transportation/ Access to Care
2. Risky Behavior of Young Adults
3. Services for the Elderly
4. Infrastructure to keep up with population growth
5. Disparities in access for low-income and minority populations

These priorities did not meet the defined evaluation criteria, as described on page 12, and it was determined internally that the hospital does not have the ability to directly affect change within these needs nor are there resources available to influence change. It was also determined there are other community organizations better aligned to address these priorities.
7. Implementation Strategy

Development Coordinators

The following people were involved in the development and approval of the implementation strategy to address needs identified in the community health needs assessment. The same parties and others not named will work to ensure the outlined services and community benefit programs are implemented over the course of the coming years to impact change in our community and improve the overall health of the people that live here.

- Dr. Robert Pryor, President and CEO, Scott & White Healthcare
- Patricia Currie, Chief Operating Officer, Scott & White Healthcare
- Jason Jennings, Chief Executive Officer, Scott & White Hospital – College Station
- William L. Rayburn, M.D., Chief Medical Officer, Scott & White Hospital – College Station
- Tara Stafford, Director of Community Benefit, Scott & White Healthcare
- Alicia Dunn, Chief of Staff to the President and CEO, Scott & White Healthcare
- Clayton Wilber, Director of Corporate Tax, Scott & White Healthcare
- Maureen Halligan, Vice President of Strategic Planning, Scott & White Healthcare
- Angela Hochhalter, PhD, Research Scientist, Quality and Safety, Scott & White Healthcare
- Gentry Woodard, Director of Development, Scott & White Hospital – College Station
- Gwen Engel, Sr. Supervisor of Clinic Operations, Behavioral Health Clinic – College Station
- Cambi Bruegger, Director of Scott & White Health Plan Regional Sales
- Lorie Thibodeaux, Program Manager, Patient Engagement & Safety
- Brittney Bernard, Student Worker, Patient Engagement & Safety