Implementation Strategy
For the 2016 Community Health Needs Assessment
North Texas Zone 4

Baylor Scott & White Medical Center – Waxahachie

Approved by: Baylor Scott & White Health – North Texas Operating, Policy and Procedures Board
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# Table of Contents

1. Baylor Scott & White Health Mission Statement .................................................3

2. Purpose .................................................................................................................4
   a. 2016 Community Health Needs Assessment Summary .................................4
   b. Description of Community Served .................................................................5
   c. Community Health Needs Assessment Findings ...........................................7

3. Implementation Strategies ....................................................................................9
   a. Strategies Addressing Community Health Needs & Expected Impact ...........10
      1. Physician and non-physician primary care providers to population ratio
      2. Mental/behavioral health resources
      3. Chronic disease
      4. Heart failure
      5. Excessive drinking
   b. Collaboration with other Non-Hospital Facilities .........................................13
   c. Community Needs Not Addressed and Rationale for Not Addressing a Need...13
BAYLOR SCOTT & WHITE HEALTH MISSION STATEMENT

_Baylor Scott & White Health exists to serve all people by providing personalized health and wellness through exemplary care, education, and research as a Christian ministry of healing._

“Personalized health” refers to Baylor Scott & White’s (BSWH) commitment to develop innovative therapies and procedures focusing on predictive, preventive, and personalized care. For example, data from the electronic health record helps to predict the possibility of disease in a person or a population. And with that knowledge, measures can be put into place to either prevent the disease altogether or significantly decrease its impact on the patient or the population. Care is tailored to meet the individual medical, spiritual, and emotional needs of the patients.

“Wellness” refers to ongoing efforts to educate the people served by BSWH, helping them get healthy and stay healthy.

“Christian ministry” reflects the heritage of Baylor Health Care’s founders and Drs. Scott and White, who showed their dedication to the spirit of servanthood — to equally serve people of all faiths and those of none.

Who We Are

The largest not-for-profit health care system in Texas, and one of the largest in the United States, BSWH was born from the 2013 combination of Baylor Health Care System and Scott & White Healthcare.

After years of thoughtful deliberation, the leaders of Baylor Health Care System and Scott & White Healthcare decided to combine the strengths of the two health systems and create a new model to meet the demands of health care reform, the changing needs of patients and extraordinary recent advances in clinical care.

Known for exceptional patient care for more than a century, the two organizations served adjacent regions of Texas and operated on a foundation of complementary values and similar missions. Baylor Scott & White Health includes 41 licensed hospitals, more than 900+ patient care sites, more than 6,600 active physicians, 43,750+ employees and the Scott & White Health Plan.

BSWH is a member of the High Value Healthcare Collaborative, the Texas Care Alliance and is one of the best known, top-quality health care systems in the country, not to mention in Texas.

With a commitment to and a track record of innovation, collaboration, integrity, and compassion for the patient, BSWH stands to be one of the nation’s exemplary health care organizations.
Our Core Values & Quality Principles

These values define the BSWH culture and should guide every conversation, decision, and interaction with each other and with patients and their loved ones:

- Integrity: Living up to high ethical standards and showing respect for others
- Servanthood: Serving with an attitude of unselfish concern
- Teamwork: Valuing each other while encouraging individual contribution and accountability
- Excellence: Delivering high quality while striving for continuous improvement
- Innovation: Discovering new concepts and opportunities to advance our mission
- Stewardship: Managing resources entrusted to us in a responsible manner

PURPOSE

2016 Community Health Needs Assessment Summary

As the largest not-for-profit health system in Texas, BSWH understands the importance of serving the health needs of its communities. In order to do that, beginning in the summer of 2015 a task force led by the community benefit, tax compliance and corporate marketing departments undertook an assessment of the health needs of the communities served for all BSWH hospitals. Truven Health Analytics was engaged to help collect and analyze the data for this process and compile a final report outlining significant health needs. These significant needs were identified through the weight of qualitative and quantitative data obtained through the process of the community health needs assessment and that report was made publicly available in June of 2016.

The federal government also requires hospitals to adopt an implementation strategy to address prioritized community health needs identified through the assessment. This written document serves as the implementation strategy addressing the significant community health needs identified through the CHNA for Baylor Scott & White Medical Center – Waxahachie.

This formal written implementation strategy includes the following:

- List of the prioritized needs the hospital plans to address and the rationale for not addressing other significant health needs identified
- Actions the hospital intends to take to address the chosen health needs
- The anticipated impact of these actions and the plan to evaluate such impact (e.g. identify data sources that will be used to track the plan’s impact)
- Identifies programs and resources the hospital plans to commit to address the health needs
• Describes any planned collaboration between the hospital and other facilities or organizations in addressing the identified health needs.

Description of Community Served

For the 2016 assessment, Baylor Scott & White Medical Center – Waxahachie has defined their community to be the geographical area of Ellis County. The community served was determined based on the county that made up at least 75 percent of the hospital facility’s inpatient and outpatient admissions.

BSWH Community Health Needs Assessment
Map of Community Served

Demographic and Socioeconomic Summary

According to population statistics, Ellis County is expected to grow 6%, or 10,029 people in the next five years. That population growth rate is lower than Texas overall (7%) but higher than the country (4%). The community had a slightly higher median household income than both state and national
benchmarks, along with a less racially diverse population. Ellis County had slightly greater proportion of seniors than the other North Texas communities. The community, overall, appears to be at an advantage in terms of fewer social barriers experienced by its population with the exception of a slightly higher unemployment rate than the state benchmark.

The ZIP codes with the highest expected growth rate in the next five years are:

- 76065 Midlothian – 3,119 people
- 75165 Waxahachie – 2,672 people

Growth is projected for every ZIP code in the county, but there is significant variation in the expected change between age groups. The population of children aged 0-17 will not change much, but Ellis County is expected to see a significant (27%) increase in 65+ population over the next 5 years, which is about 5,259 people. The 65+ senior cohort is expected to experience the most growth over the next five years in most markets. Growth in this population will likely contribute to increased utilization of services as the population continues to age.

Diversity in the community is projected to increase. Currently in Ellis County, 70% of the population was white (124,379 people) and 25% were of Hispanic ethnicity (42,289 people). The projected growth of minority populations, including Asian/Pacific Islanders and Hispanics, is expected to outpace all other groups. The Hispanic population will increase by 5,872 people by 2020.

The median household income for the community served is $61,036, greater than both the state and U.S. benchmarks. The current insurance coverage mix in the market will shift significantly by 2020. Sixty-one percent of the population currently had private (commercial) insurance, and that’s projected to increase 7% (7,000 people) over the next five years. Medicare and Dual Eligible insured people (those receiving both Medicare and Medicaid benefits) will see the largest percentage increases of 25% and 19%, respectively. Conversely, there will be decrease in the population of uninsured (-4%) and Medicaid (-3%) populations over the next 5 years.

The community includes three (3) Health Professional Shortage Areas and one (1) Medically Underserved Area as designated by the U.S. Department of Health and Human Services Health Resources Services Administration.

The Truven Health Community Need Index (CNI) is a statistical approach to identifying potential health needs in a community. The CNI takes into account vital socio-economic factors (income, cultural, education, insurance and housing) about a community to generate a CNI score for every populated ZIP code in the United States. The CNI is strongly linked to variations in community healthcare needs and is a strong indicator of a community’s demand for various healthcare services. The CNI score by ZIP code identifies specific areas within a community where healthcare needs may be greater.
The community served was slightly above the community need index national average of 3.0, the overall county had a CNI of 3.5. Several areas of Ellis county scored 4.0 or higher on the index, especially the cities of Ennis, Ferris, Waxahachie, Italy, and Milford.

**Community Health Needs Findings**

**Prioritized Significant Health Needs**

Significant community health needs were identified through the weight of quantitative and qualitative data obtained when assessing the community. Criteria used to identify significant health needs were first, quantitative data about the need showed the community’s results to be worse than the state’s by a greater magnitude, and second, it was a frequent theme during the interviews and focus group.

These significant needs were prioritized based on input gathered from the focus groups and interviews. Participants of these focus groups and interviews were asked to rank the top three health needs of the community based on the importance they placed on addressing the need. Through this process, the health needs were prioritized based on the frequency they were listed as the top health care needs. The prioritized health needs of this community are below.

1. Physician and non-physician primary care providers to population ratio
2. Mental/behavioral health resources
3. Chronic disease
4. Heart failure
5. Excessive drinking

By addressing the above prioritized significant needs via an implementation strategy, Baylor Scott & White Medical Center - Waxahachie aims to impact and elevate the overall health status of the community.

*Description of the Health needs to be addressed*

**Physician and non-physician primary care providers to population ratio**

A shortage of primary care physicians was identified as a priority need through key informant interviews and the focus group session. Specifically, there is an acute shortage of primary care providers and bilingual physicians. Many physicians will not take underinsured, uninsured or Medicaid patients, and this shortage of available doctors causes long wait times and limits access when care is needed.

The quantitative analysis validated the findings from the community’s input. According to the Area
Health Resource File, the population to primary care physician (PCP) ratio in Ellis County is 2,369:1, which is significantly above the state value of 1,708 and the County Health Rankings Top Performer's value of 1,045:1. The ratio population to one non-physician primary care provider ratio was 3,058:1 in the county compared to the state value of 1,893:1.

**Mental/behavioral health resources and excessive drinking**

Community input identified mental and behavioral health as a priority community health need, and it was reiterated through key informant interviews and the focus group session. Specifically, shortages in mental health providers significantly limit access to services. When compounded by delays in care and poor management of conditions, they often lead to a crisis situation for patients and their families. The participants expressed a need to address all categories of mental health, including substance abuse, behavioral health, psychiatric conditions and access to services. There are stigma and cultural barriers that surround the acknowledgment of mental health conditions and subsequent care; the community believes that efforts in these areas could make the biggest impact.

According to the CMS National Provider Identification File, the ratio of population to mental health providers is 1,529:1 in Ellis County. For reference, the state ratio is of 1,034:1 and the County Health Rankings Top Performer’s value of 386:1. Poor mental health days in Ellis County are at 2.9, lower than the state value of 3 but higher than the County Health Rankings Top Performer’s value of 2.3. The Behavioral Risk Factor Surveillance System (BRFSS) reports that in Ellis County, the percentage of adults who have engaged in binge drinking in the last 30 days is 20% compared to the state value of 16%. The Centers for Medicare & Medicaid Services (CMS) report that among the Medicare population in Ellis County:

- 12% have Alzheimer’s disease/dementia on par with the state value
- 16% have depression, which is slightly less than the state value
- 3% were identified with schizophrenia and other psychotic disorders, lower than the state value of 4%

**Chronic disease and heart failure**

A chronic illness or disease is a disease lasting 3 months or more, by the definition of the U.S. National Center for Health Statistics. Chronic diseases generally cannot be prevented by vaccines or cured by medication, nor do they just disappear. Health damaging behaviors - particularly tobacco use, lack of physical activity, and poor eating habits - are major contributors to the leading chronic diseases. Chronic disease prevention and management was frequently discussed in the key informant interviews and focus group. Specifically, participants identified diabetes, chronic lower respiratory disease (CLRD) and heart failure as priorities in the community, and high rates for the community are confirmed by the quantitative data. The participants identified a need for better coordinated services. It was recognized that although there are numerous efforts and programs in place,
communication and care coordination are limited.

According to the Center for Disease Control (CDC) Diabetes Interactive Atlas, 10% of the adults in Ellis County have diabetes, which is above the state average of 9%. Children with diabetes are hospitalized at a higher rate than the rest of the state (32 per 100,000 versus 25 per 100,000).

The National Vital Statistics System identified the chronic lower respiratory disease (CLRD) mortality rate in Ellis County as 45 deaths per 100,000 people compared to the state rate of 37 deaths. The Centers for Medicare and Medicaid Services (CMS) shows that the Medicare beneficiary heart failure rate and atrial fibrillation rates are slightly higher than the state value.

**IMPLEMENTATION STRATEGIES**

This implementation strategy and corresponding CHNA is intended to meet the requirement for community benefit planning and reporting as set forth in state and federal laws, including but not limited to: Texas Health and Safety Code Chapter 311 and Internal Revenue Code Section 501(r).

A Community Benefit and CHNA Task Force, made up of community benefit, tax compliance, and corporate marketing representatives was established to advise hospitals on the development of individual 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 governing bodies.
The Task Force relied on valuable input from key hospital, research, and strategic planning leaders throughout the process to support the Hospital in planning for implementation.

**The following criteria were utilized to determine the 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

**Strategies Addressing Community Health Needs & Expected Impact (Measures)**

BSWH owns and operates multiple individual licensed hospital facilities serving the residents of North and Central Texas. The hospitals have completed an assessment of community health needs and developed an implementation strategies to meet certain federal and state requirements.

For the 2016 assessment process, Baylor Scott & White Medical Center - Waxahachie defined its community to be the geographical area of Ellis County. The community served was determined based on the county that make up at least 75 percent of the hospital’s inpatient and outpatient admissions for Baylor Scott & White Medical Center – Waxahachie.

By appropriately delegating resources within our hospital, strengthening local partnerships, and creating innovative programs both on the Hospital campus and within the community, the hospital seeks to make a positive impact on the following significant community health needs:

1. Physician and non-physician primary care providers to population ratio
2. Mental/behavioral health resources
3. Chronic disease
4. Heart failure
5. Excessive drinking

The completed implementation strategy was adopted by the Baylor Scott & White Health North Texas Operating, Policy and Procedure Board on October 25, 2016.
### NEED 1: PHYSICIAN AND NON-PHYSICIAN PRIMARY CARE PROVIDERS TO POPULATION RATIO

**HOSPITAL: BAYLOR SCOTT & WHITE MEDICAL CENTER - WAXAHACHIE**

**Program Description: Workforce Development** - The recruitment of physicians and other health professionals for areas identified as medically under-served (MUAs) or other community health needs as identified in the Community Health Needs Assessment (CHNA). The age and characteristics of a state’s population has a direct impact on the health care system. The state’s population is growing at an explosive pace—and, like the rest of the country, the Ellis County population is aging and in need of more health care services, which puts added demands on the system. The Hospital seeks to allay the physician shortage, thereby better managing the growing health needs of the community.

**Anticipated Impact:**
- increased access to care for under-served/uninsured
- addition of three primary care physicians

**Committed Resources:**
- financial resources as needed for the support of 3 new physicians in the community

**Measures:**
- # of physicians hired
- # of patients seen by new physicians

**Program Description: Enrollment Services** - The hospital will provide assistance to enroll in public programs, such as SCHIP and Medicaid. These health care support services are provided by the hospital to increase access and quality of care in health services to individuals, especially persons living in poverty and those in vulnerable situations. The hospital provides staff to assist in the qualification of the medically under-served for programs that will enable their access to care, such as Medicaid, Medicare, SCHIP and other government programs or charity care programs for use in any hospital within or outside the hospital.

**Anticipated Impact:**
- overcome access issues for under-served populations

**Committed Resources:**
- annual estimated cost of service provision = $2,000,000

**Measures:**
- # of patients enrolled in program

**Program Description: Medical Education/Nurses** - The Hospital is committed to assisting with the preparation of future nurses at entry and advanced levels of the profession to establish a workforce of qualified nurses. The System maintains strong affiliations with many North Texas schools of nursing. Like physicians, nursing graduates trained at the hospital are not obligated to join the staff although many remain in the Community to provide top quality nursing services to many health care institutions.

**Anticipated Impact:**
- increase in non-physician primary care providers

**Committed Resources:**
- nurse educator supervisor
- average annual estimated cost of program provision = $761,000
**MEASURES:**
- # of nursing students educated per year
- # of schools/universities partnering

## NEED 2: MENTAL/BEHAVIORAL HEALTH RESOURCES

**Program Description: Behavioral Health Connections** – The hospital contracts with Behavioral Health Connections to come to the hospital and interviews patients to determine what resources best meet patients’ needs (inpatient or outpatient) and refers patients to those agencies. The hospital provides Licensed Clinical Social Workers (LCSW) who round on patients, as well as chaplains and sitters who stay with patients to make sure the patient is not of harm to themselves (suicidal patients) while they are waiting for a bed to open up at a mental health facility.

**Anticipated Impact:**
- Increased awareness of mental health needs, stigmas, and community cultural barriers

**Committed Resources:**
- LCSW staffing
- Chaplain staff
- Sitter program

**Measures:**
- # patients served
- # sitters provided
- # referrals made to outside agencies
- Cost of Behavioral Health Connections contract.

**Program Description: Financial Donation - Ellis County Coalition for Health Options/Hope Clinic** – The hospital will provide financial support to Hope Clinic, a not-for-profit Hope Clinic offers medically-certified (FQHC) care for the whole family and the whole person including behavioral health assessment and treatment services to Medicare and Medicaid patients in the community. The hospital’s donation will aid in funding assessment and treatment in the community.

**Anticipated Impact:**
- Increased access to behavioral health services

**Committed Resources:**
- Average estimated annual financial donation of $25,000

**Measures:**
- Annual amount of donation
- % of Hope Clinic patients served who were diagnosed with mental/behavioral health issues

## NEEDS 3 & 4: CHRONIC DISEASE and HEART FAILURE

**Program Description: For Women For Life** - Regular health exams and tests can help find problems before they start. They also can help find problems early, when the chances for treatment and cure are better. Through For Women For Life the Hospital provides health services, screenings, and treatments, assisting women in taking steps that help their chances for living a longer, healthier life. This annual event for women focusing on proactive health care including preventive health screening, seminars and healthy lifestyle information.
## Implementation Strategy

### Collaboration with other Non-Hospital Facilities

The Baylor Scott & White Health system is comprised of many other non-hospital facilities including several nonprofit physician groups and other health care providers. Many of these organizations directly and/or indirectly contribute to these implementation strategies and the

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<th><strong>Program Description: It’s A Guy Thing</strong> - Regular health exams and tests can help find problems before they start. They also can help find problems early, when the chances for treatment and cure are better. Through It's A Guy Thing, the hospital provides health services, screenings, and treatments, assisting men in taking steps that help their chances for living a longer, healthier life. This annual event for men focuses on proactive health care including preventive health screenings, seminars and healthy lifestyle information.</th>
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<tbody>
<tr>
<td><strong>Anticipated Impact:</strong></td>
</tr>
<tr>
<td>• increased awareness of chronic disease conditions</td>
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<tr>
<td>• early detection of multiple chronic diseases</td>
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<tr>
<td><strong>Committed Resources:</strong></td>
</tr>
<tr>
<td>• staffing and supplies for annual For Women For Life Event</td>
</tr>
<tr>
<td>• average annual estimated cost of event = $2,000</td>
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<tr>
<td><strong>Measures:</strong></td>
</tr>
<tr>
<td>• # of persons served</td>
</tr>
<tr>
<td>• # participants identified with or at risk for chronic disease</td>
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<th><strong>Program Description: Community Health Education &amp; Screenings</strong> – The hospital will provide health education and screenings to economically challenged populations within the service area.</th>
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<td><strong>Anticipated Impact:</strong></td>
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<td>• increased access to care</td>
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<td><strong>Committed Resources:</strong></td>
</tr>
<tr>
<td>• average annual estimated costs - $20,000</td>
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<td>• screening and educational supplies</td>
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<tr>
<td><strong>Measures:</strong></td>
</tr>
<tr>
<td>• # of persons screened</td>
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<td>• # of persons out of normative screening value</td>
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<td>• # of persons educated•</td>
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mission of the health system. These organizations include, but are not limited to, HealthTexas Provider Network, Baylor Scott & White Quality Alliance, Century Integrated Partners, and BTDI JV.

Community Needs Not Addressed and Rationale for Not Addressing a Need

Baylor Scott & White Medical Center - Waxahachie is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization which continues to provide a wide range of important health care services and community benefits.

The hospital will address significant community health needs based on its intersection with its stated mission and key clinical strengths. The following identified need has not been addressed in the community benefit implementation plan because there are multiple other community and state agencies whose expertise and infrastructure are better suited for addressing the need:

- Need #5: Excessive Drinking

Any comments or suggestions in regard to the implementation strategy are greatly welcomed and may be addressed to Jennifer Coleman, Senior Vice President, Consumer Affairs, Baylor Scott and White Health, 3600 Gaston Avenue, Suite 150, Dallas, Texas 75246.