Baylor Scott & White Health

Annual Report of Community Benefits

Baylor Scott & White - Garland

2300 Marie Curie Blvd.,

Garland, Texas 75042

Taxpayer ID # 75-1037591

For the Fiscal Year Ended June 30, 2017
Letter from the President

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June 30, 2017

Dear Fellow Texan:

Baylor Scott & White Medical Center – Garland (Hospital) has served residents of Garland and surrounding communities since 1964, and we are proud of the community support that helped build and sustain a facility with a wide array of specialists and services to meet the health care needs of the community.

In support of its mission, the Hospital exists to serve all people by providing personalized health and wellness through exemplary care, education and research as a Christian ministry of healing. The Hospital is dedicated to providing advanced, quality health care, as well as subsidized services to the community such as health education and screenings, training for nurses, patient care assistants and other health care workers.

The Hospital is also committed to promoting the healthy well-being of individuals and families beyond the health activities of the traditional hospital or clinic setting through its community outreach programs. For example, the medical center provides free community health seminars throughout the year at the hospital and local community centers. The Hospital also has a tradition of collaborating with key community groups like the school district by offering education programs to employees on a variety of health and wellness topics at no cost.

I encourage you to give me feedback for this report. Please address comments to me, in care of Niki Shah, Vice President Care Redesign & Equitable Health, 8080 North Central Expressway, Suite 700, Dallas, Texas 75206.

Sincerely,

Donas Cole
Interim President
Baylor Scott & White Health
Baylor Scott & White Medical Center – Garland
Annual Report of Community Benefits
2300 Marie Curie Blvd., Garland, Texas 75042
Taxpayer ID# 75-1037591
For the Fiscal Year Ended June 30, 2017

I. Effective Dates of the Report
The annual report of community benefits provided is for the fiscal year ended June 30, 2017 (Fiscal Year 2017).

II. Hospital Description
Baylor Scott & White Medical Center – Garland (Hospital), an affiliate of Baylor Scott & White Health (BSWH), is a leading community and safety-net hospital in its service area. In 1958, the Garland Chamber of Commerce appointed a hospital board to investigate the need for a community hospital. Incorporation papers were submitted to the State in April 1958, and were accepted in May of the same year. The hospital was named Memorial Hospital of Garland in memory of the veterans of World War II. Plans were to raise $1,000,000 locally and that was to be matched by the federal government under the Hill-Burton Act. This would provide for a one hundred bed hospital. Groundbreaking for that hospital began in January 1963. Memorial Hospital of Garland opened its doors in March 1964. The first expansion was the emergency department in 1970. Bed capacity was raised to 176, with an addition of a patient tower in 1972. In 1980, Phase I was built with a nursery and new labor and delivery areas. In November 1988, the $4.7 million professional office building and Day Surgery area was opened. In 1991, Memorial Hospital joined Baylor Health Care System (BHCS) and was renamed Baylor Medical Center at Garland (Hospital). In 2013, Baylor Scott & White Health (BSWH) was formed from the merger of Baylor Health Care System and Scott & White Healthcare to form the largest not-for-profit health care system in the state of Texas. Subsequently, the Hospital was renamed Baylor Scott & White Medical Center – Garland in December 2015. The Hospital is a 113-bed acute care facility located at 2300 Marie Curie Blvd., in Garland. An affiliate of BSWH and guided by its values, the Hospital strives to make a positive difference for patients, the workforce and the community every day.

In August 2004, the hospital opened the Don and Ruth Buchholz Pavilion, a 105,000-square-foot addition that united the Hospital and the adjacent Baylor Medical Plaza I office building, into a streamlined medical complex. The four story addition was designed not only to provide additional clinical capacity, but to encourage the community to seek out the Hospital in new ways as a health care resource. In recent years, Baylor Medical Plaza III and IV have expanded the space for outpatient health services and physician offices, further underscoring the Hospital’s goal to provide quality health care close to home.
In the summer 2010, the Hospital completed a 4,300-square-foot expansion and renovation of the Emergency Department (ED) with a goal of expanding access to care and reducing wait times. The Hospital ED now offers a dedicated ambulance entrance, eight medical screening exam rooms, new lobby, check-in and waiting areas, twenty treatment rooms and seven critical care rooms. Laboratory and pharmacy services, as well as expanded radiology capabilities, have been added including a dedicated radiology room and a 16-slice computed tomography scanner.

The Women's Center at the Hospital provides for the unique needs of women. The Women's Center features medically advanced facilities and gynecological services including digital mammography screening and diagnostics through the Baylor Women’s Imaging Center, and osteoporosis detection through bone densitometry testing.

The Hospital is now offering gynecologic robotic surgery. The da Vinci® Si™ robotic surgery system for certain gynecologic surgical procedures such as hysterectomy and myomectomy, is now available. Baylor Breast Center offers screening and diagnostic digital mammography services, along with additional testing including ultrasound. Bone densitometry testing to detect osteoporosis is also available.

Dedicated to providing quality health care, the Hospital has received numerous quality awards such as the Get With The Guidelines®—Stroke Silver Plus Quality Achievement Award from the American Heart Association. The award recognizes the Hospital’s commitment and success in implementing a higher standard of care by ensuring stroke patients receive treatment according to nationally accepted guideline processes to improve patient care and outcomes.

The Hospital’s Cardiovascular Rehabilitation Program has been accredited by the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR). Certified AACVPR programs are recognized as leaders in the field of cardiovascular and pulmonary rehabilitation because they offer the most advanced practices available. The Hospital’s cardiac rehab department was recognized for its commitment to improving quality of life by enhancing standards of care.

U.S. News & World Report's annual Best Hospitals for Common Care reported the Hospital as high performing. The report gives consumers information about “high performing” regional hospitals in the U.S. The Hospital is high performing in both Heart Failure and Chronic Obstructive Pulmonary Disease (COPD) for 2016-2017.

In 2015, the Hospital was granted a three-year full accreditation designation by the National Accreditation Program for Breast Centers (NAPBC), a program administered by the American College of Surgeons. Accreditation by the NAPBC is only given to those centers that have voluntarily committed to provide the highest level of quality breast care and undergo a rigorous evaluation process and review of their performance. During the survey process, the center must demonstrate compliance with standards established by the NAPBC for treating women who are diagnosed with the full spectrum of breast disease.
A Breast Center that achieves NAPBC accreditation has demonstrated a firm commitment to offer its patients every significant advantage in their battle against breast disease.

As part of its Christian ministry of healing, community service is a cornerstone of the Hospital’s mission. Patients may access libraries and community centers, offering free educational seminars, health fairs, and screenings. At the Hospital itself, a conference center and community resource center provide an ongoing forum for speakers and community education.

The Hospital uses its revenue after expenses to improve the health of Garland and surrounding communities through patient care, education, research, and community service. In the fiscal year ending June 30, 2017, the Hospital had 14,409 total adult admits resulting in a total of 32,192 days of care; and there were 53,796 emergency department visits.

As part of the Hospital’s commitment to the community, the Hospital provides financial assistance in the form of charity care to patients who are indigent and satisfy certain requirements. Additionally, the Hospital is committed to treating patients who are eligible for means tested government programs such as Medicaid and other government sponsored programs including Medicare, which is provided regardless of the reimbursement shortfall, and thereby relieves the state and federal government of the burden of paying the full cost of care for these patients. Often, patients are unaware of the federal, state and local programs open to them for financial assistance, or they are unable to access them due to the cumbersome enrollment process required to receive these benefits. The Hospital offers assistance in enrollment to these government programs or extends financial assistance in the form of charity care through the Hospital’s Financial Assistance Policy which can be located on the Hospital’s website at BSWHealth.com/Financial Assistance.

In addition to the Hospital’s Financial Assistance Policy, as part of a large faith based integrated health care delivery System the areas of medical education, research, subsidized services and community health education and screenings are initiatives that take place across the System, and also comprise a significant portion of the Hospital’s community benefit program.

Medical education is a crucial part of the Hospital’s mission. Being one of the nation's training programs, the Hospital annually trains residents in family medicine. This quality teaching program adds many dimensions to the Hospital’s ability to serve patients. Residents in the Hospitals’ program graduate with demonstrated competence in population health management, continuous quality improvement, and the importance of patient satisfaction. Residents work with medical assistants and are active managers of the patient-centered medical home, often assuming leadership roles in clinic and hospital operations. To help address the state’s health care workforce shortage, the Texas A&M Health Science Center (TAMHSC) College of Medicine and the Hospital have joined forces to establish a Clinical Training Program in Dallas for students to complete clinical rotations in surgery, internal medicine, family medicine, psychiatry, pediatrics, and obstetrics/gynecology at the Hospital and other clinical affiliates during their last two years of residency. While residents and fellows of the Hospital are not required to work for an affiliate of BSWH, most remain in North Texas upon completion of their program, providing a continuous
supply of well-trained medical professionals for the region. In fiscal year ending in June 30, 2017, the Hospital invested more than $2,881,656 million in training 17 medical residents.

The Hospital is also committed to assisting with the preparation of future nurses at entry and advanced levels of the profession to establish a workforce of qualified nurses. Through the System’s relationships with six North Texas schools of nursing, the Hospital maintains strong affiliations with schools of nursing. In the fiscal year ending June 30, 2017, the Hospital invested in training 50 nurses. Total unreimbursed cost of these programs was $235,019. Like physicians, nursing graduates trained at a System entity are not obligated to join the staff although many remain in the North Texas area to provide top quality nursing services to many health care institutions.

III. Hospital 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 our commitment to develop innovative therapies and procedures focusing on predictive, preventive and personalized care. For example, we’ll use data from our electronic health record to help us predict the possibility of disease in a person or a population. And with that knowledge, we can put measures in place to either prevent the disease altogether or significantly decrease its impact on the patient or the population. We’ll tailor our care to meet the individual medical, spiritual and emotional needs of our patients.

“Wellness” refers to our ongoing effort to educate the people we serve, 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.

IV. Description of Community Served

Located in Dallas County, the Hospital serves the Eastern Region of the System. Its TSA includes zip codes from Wylie, Rowlett, Sachse, Mesquite and Murphy. The service area comprises:
An urban/suburban geographic area
Service area population: 826,616
Service area ethnicity: White Non-Hispanic = 40.8 percent; Black Non-Hispanic = 16.1 percent; Hispanic = 32.2 percent; Asian and Pacific Islanders Non-Hispanic = 8.6 percent; All others = 2.3 percent
Service area payer mix: managed care = 32.1 percent; Medicaid = 24.8 percent; Medicare = 29.1 percent; self-pay/charity = 13.7 percent; other = 0.3 percent
Service area household average income = $84,615
Service area living below the Federal Poverty Level (FPL): 19.7 percent (compared to 18.2 percent living below the FPL in the Dallas/Fort Worth Metroplex.

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Number of other hospitals serving the community: five hospitals other than The Hospital-Methodist Richardson Medical Center, Baylor Scott & White Medical Center – Lake Pointe, Baylor Scott & White Medical Center – White Rock, Medical City Dallas, and Texas Health Presbyterian Hospital of Dallas. Medically underserved: The Hospital service area does not contain any medically underserved areas or population. Service area education: less than high school = 9.1 percent; some high school = 8.8 percent; high school diploma = 21.8 percent; some college/associates degree = 28.1 percent; bachelor’s degree or greater = 32.1 percent. Service area male population = 404,922; service area female population = 421,694. Service area age: 0-14= 22.2 percent; 15-17 = 4.2 percent; 18-24 = 9.0 percent; 25-34 = 14.2 percent; 35-54 = 27.9 percent; 55-64 = 11.3 percent; 65+ = 11.0 percent.

V. Identified Community Health Needs

During the fiscal year ending June 30, 2016, the Hospital conducted a Community Health Needs Assessment (CHNA) to assess the health care needs of the community. The CHNA took into account input from persons who represent the broad interest of the community served by the Hospital, including those with special knowledge of or expertise in public health. The CHNA has been made widely available to the public and is located on the website at the following address, BSWHealth.com/Community. A summary of the CHNA is outlined below including the list of the needs identified in the assessment.

Creating healthy communities requires a high level of mutual understanding and collaboration with community individuals and partner groups. The development of this assessment brings together information from community health leaders and providers along with local residents for the purposes of researching, prioritizing and documenting the community health needs for the geographies served by the Hospital. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

The FY2016 CHNA brings together a variety of health status information. This assessment consolidates information from the recent community health needs assessment conducted for the Texas’ Regional Healthcare Partnership Region 9 (Region 9 RHP), the Dallas County Community Health Needs Assessment and the Consumer Health Report conducted by the National Research Corporation (NRC) for the Hospital, each of which takes into account input from persons who represent the broad interest of the community including those with special knowledge of or expertise in public health.

The identified community health needs as outlined below were reviewed and prioritized with input from the BSHW Senior Leadership, the BSWH Mission and Community Benefit Committee and approved by the BHCS Board of Trustees. The methodology for prioritization can be found in the CHNA executive summary. Although each identified need is prioritized as high, medium or low, the Hospital will address all identified needs in the Plan.

The importance and benefits of compiling information from other recognized assessments are as follows: 1) Increases knowledge of community health needs and resources, 2) Creates a common understanding of the priorities of the community's health needs, 3) Enhances relationships and
mutual understanding between and among stakeholders, 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community, 5) Provides rationale for current and potential funders to support efforts to improve the health of the community, 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital on how it can align its services and community benefit programs to best meet needs.

In developing a plan to address all identified community health needs, the Hospital and the System found that aggregating the needs allows for significant, crosscutting initiatives. Therefore, this community health implementation plan organizes the needs as follows:

Identified Community Needs

- A. Access to Care for Middle to Lower Socio Economic
- B. Drug Abuse
- C. Lack of Dental Providers
- D. Mental/Behavioral Health
- E. Preventable Admissions – Adult Uncontrolled Diabetes
- F. Teen Births

VI. Programs Addressing Identified Community Health Needs

Program Title: Community Benefit Operations
Description: The Hospital has committed marketing staff for the benefit of providing community health care for the identified health care needs of the community. This work is accomplished through the provision of community health education, community health services, and community health needs assessments. The cost associated with this service includes assigned staff and any other costs associated with community benefit strategy and operations.
Persons Served: 13,489
Needs Addressed Under This Program:
  • Access to Care for Middle to Lower Socio Economic

Program Title: Community Outreach and Education
Description: The Hospital provides community health improvement services which extend beyond patient care activities and are subsidized by the hospital. These activities include, but are not limited to, community health education, support groups, pastoral outreach programs, community based clinical services, and education on specific diseases.
Persons Served: 369
Needs Addressed Under This Program:
  • Access to care for Middle to Lower Socioeconomic

Program Title: Donations In Kind – Faith In Action Initiatives
Description: The office of Faith In Action Initiatives 2nd Life Program provides monetary and medical supplies and equipment reclamation from Baylor Health Care System and community
partners for the purpose of providing for the health care needs of populations both locally and internationally whose needs cannot be met through their own organization.

Persons Served: Unknown

Needs Addressed Under This Program:
- Access to care for Middle to Lower Socioeconomic

Program Title: **Donations - Financial**

Description: The Hospital supports several not for profit civic and community events and organizations whose goals and mission enhances the ability to improve the health infrastructure of the communities it serves.

Organizations receiving support:

**Achievement Center of Texas**
- The Achievement Center of Texas is a licensed non-profit day care and day-habilitation center for children and adults with special needs

**American Cancer Society – Relay for Life**
- American Cancer Society works relentlessly to save lives and create a world with less cancer.

**Fashion for the Cure**
- Fashions for the Cure’s mission is to bring awareness to the community the importance of early detection of cancer and how it can perhaps prolong or save a life.

**Galaxy Counseling Center**
- The organization provides children to adults with collaborative and highly personalized individual, couple, family or group therapy counseling sessions to meet the needs of the individual client.

**Garland ISD Education Foundation**
- Garland ISD Education Foundation works to Create and foster partnerships with the community to generate funds that support the education of our students to positively impact the future.

**Hope Clinic**
- Hope Clinic serves as a medical home for the underserved and uninsured residents of Garland.

**Jonathan’s Place**
- The mission of Jonathan’s Place is to provide a safe, loving home and specialized services to children who have been abused, abandoned or neglected.

**Life Message**
- Life Message devotes its energy to passionately providing food & clothing when it's needed. We are here to give assistance when it becomes difficult to provide some of the simple needs of life.

**New Beginnings Center/Hope’s Door**
- New Beginning Center provides education, prevention and intervention programs and services to those affected by domestic violence.

**Wylie ISD Education Foundation**
• To enhance the education of students in the Wylie Independent School District through grants, scholarship, programs and initiatives.

Persons Served: Unknown

Needs Addressed Under This Program:
• Mental/Behavioral Health

Program Title: Donations - In Kind
Description: The Hospital supports other not for profit organizations with in kind donation, such as serviceable equipment or supplies. Also provided are in kind donations such as meeting room overhead and space for not for profit organizations and social service networks; equipment and medical supplies; costs for coordinating events not sponsored by health care organizations; employee costs associated with board and community involvement on work time; food donations; etc. These donations extend the Hospital’s services beyond its walls.

Persons Served: 55

Needs Addressed Under This Program:
• Mental/Behavioral Health

Program Title: Delivery System Reform Incentive Payment
Description: Mental/Behavioral Health - The behavioral health project co-locates and integrates behavioral health services into the outpatient primary care setting. The model consists of providing a Licensed Clinical Social Worker (LCSW) to provide basic counseling services to address behavioral health needs such as: anxiety, depression, and substance abuse issues. The screening tools used are evidence based and will include (but not be limited to): PHQ2 or 9, GAD-7 and alcohol and substance abuse screens. Additionally, the LCSW has the support of a Community Health Worker (CHW) to help with the screening and referral processes. The behavioral health program requires that the LCSW and CHW to work together with the primary care team to: 1) identify the patients who have behavioral health issues, 2) coordinate the patient’s care and appointments to fit both the behavioral health and primary care appointment in the same visit and 3) help the primary care team to identify those patients whose behavioral health issues are impeding the management of their acute/chronic disease management models.

Measurable Results/Outcomes: 721 patients from July 1, 2016-June 30 2017 were enrolled in a behavioral health program at a Garland clinic.

• Description: Chronic Disease Management – The Hospital’s clinic houses a carved out chronic disease management program providing focused and dedicated education and care for patients with diabetes, cardiovascular diseases (CVD) (i.e.: congestive heart failure) and respiratory diseases (asthma/chronic obstructive pulmonary disease) within a primary care setting. Specific staff comprised of Community Health Workers (CHW) and Nurse Care Managers address the complex clinical and prevention needs of these patients and spend time specifically on management of these diseases. The focus of this time and education with patients not only entails clinical counseling, but also includes prevention components to focus on lifestyle issues and self-management. The other key
advantage that patients receive as part of this program is point of care testing for diabetes (Hb A1c testing and glucose testing using test strips) and asthma (peak flow meter assessments). This testing aids in overcoming the barrier of patient non-compliance with completing lab orders and any financial or transportation issues that would arise in obtaining these important lab results. We have leveraged the expertise and experience of both the Diabetes Health and Wellness Institute (Baylor Scott & White entity in South Dallas) and Baylor Scott & White Clinics to provide staff education, develop competencies, and create protocols that result in a complete and robust program tailored for multiple community settings. The Diabetes Health and Wellness Institute houses this staff and appropriately triages and manages providers to see patients at the Hospital’s Baylor Scott & White Clinic based on volume and demand parameters. Baylor Clinics have had previous success in managing patients with chronic disease through the creation and development of a community health worker model. These successes and competencies are leveraged to create programs around CVD and respiratory illnesses.

**Measurable Results/Outcomes:** 204 patients have received chronic disease management services in FY 2017 (July 1, 2016-June 30, 2017).

- **Description - Medication Management** - This project option combines project options 2.11.1- Implement interventions that put in place teams, technology and processes to avoid medication errors and 2.11.2- evidence based interventions that put in place the teams, technology and processes to avoid medication errors. The project option combines the components of both of these project options but focuses on medication management and compliance in the ambulatory setting within the patient’s Baylor Scott & White Clinic Primary Care Medical Home (PCMH). Based on current estimates by providers, it was anticipated that more than 50% of patients in the Baylor Scott & White Clinic have five or more medications. Ensuring that these medications are 1) appropriate, 2) taken correctly, 3) managed and 4) accessible will be important to improve clinical outcomes. By combining two of the project options 2.11.1 and 2.11.2 to create an “other” option encompasses both a process for avoiding medication errors and evidence based interventions to avoid medication errors. The program utilizes a clinical pharmacist who reviews patient medications for those patients who have multiple prescriptions on a regular basis, to ensure that medications are appropriate and to ensure the patient understands how and why they are taking the medications. Additionally, patients are helped to obtain the medications they need through implementing a prescription assistance program to help those who are eligible qualify for medications, and provide medications to those patients who cannot afford prescriptions. Medications are provided at little to no cost for patients who are 150% below the federal poverty level, have one or more chronic diseases and remain compliant with their appointments and care regimens. Through this benefit and clinical pharmacist oversight and management, adherence and compliance to medications is expected to increase. The additional advantage to embedding this team within the PCMH is that patients will receive comprehensive care management to address their needs in one care venue.
**Measurable Results/Outcomes:** 551 patients have received medication management services in FY 2017.

- **Description:** **Primary Care Expansion** - The Baylor Community Care at Garland located on the campus of the hospital expands current capacity by opening patient panels to non-Baylor patients and fully utilizes the space and providers’ capacity. Additional support staff was hired to better coordinate patient care, ensure transition from the hospital to a Baylor Community Care clinic and help to facilitate the care of the complex under-served patients. Additionally, the clinic provides high quality primary care services to a greater number of people. Essentially, through expanding the capacity of the current clinic, adding additional support staff and services, a patient can receive comprehensive and complete services in one primary care location. In addition to receiving primary care, this project also proposes that ancillary services such as labs, imaging (i.e.: CT scans, MRI, mammograms, ultrasound, echocardiograms, and interventional radiology) and diagnostics (i.e.: colonoscopy, stress tests, esophageal diagnostic, retinal screens) would also be provided upon physician request. This project aims to close the loop of care and increase patient compliance by co-locating/协调 many of the essential services that the underserved population often has issues accessing and completing.  
**Measurable Results/Outcomes:** In FY 2017, we have had 8,441 encounters in the Garland primary care clinics.

- **Description:** **Psychiatric consults** - The Hospital’s clinic has developed an arrangement with MetroCare to provide psychiatric physician consults for under-served and under-insured clinic patients with non-urgent mental/behavioral health needs.  
**Measurable Results/Outcomes:** The Hospital provided 1,064 tele-psych consultation to behavioral health patients from the initial launch of the program on October 25, 2016 through June 30, 2016.

- **Description:** **Specialty Care Expansion** - Patients (including Medicaid and Uninsured) who are seen at the Baylor Community Care at Garland clinic have an established primary care medical home (PCMH) there, and can receive the following specialty care services: certain outpatient procedures such as office visits with specialists, wound care, and facility based procedures such as cardiac catheterizations, certain surgeries (i.e.: gall bladder/hernia), excision of masses (breast, lymphoma), and cataract removal. This project excludes transplants, oncology and perinatal services. The specialty care referral and coordination comes from the PCMH clinic per request by the patient’s Primary Care Physician (PCP). Between 90-95% of clinic patients are Uninsured/Medicaid, and it is anticipated that patients served by this Specialty Care program will be at least 95% Uninsured/Medicaid. Much of the value comes from building relationships, contracts and a network with local specialty care providers that can be easily accessible to this population. The Hospital contracted with providers in the community to create this specialty care network for the under-served population. Another facet of the project includes trying to make the specialist part of the primary care team. Through utilizing the electronic health record and specialty care referral coordinator, we hope to engage
specialists that provide procedures to also participate in the screening and educational needs of these patients. Engaging specialists in these types of preventive services helps to integrate them into the primary care team. Sharing feedback through the electronic health record also helps to create a central repository of patient information and allows the care team to track and improve patient outcomes. Lastly, we expect value through avoiding ED visits and more serious specialty care needs due to clinical exacerbation from not receiving timely and effective care.

**Measurable Results/Outcomes:** There were 1,418 specialty care clinic encounters in FY 2017

- **Description:** The Vulnerable Patient Network (VPN) - The VPN program provides home visits to the highest risk (clinically, economically and socially) and vulnerable Medicaid and uninsured patients. Using a combination of the Hot Spotting model developed by Dr. Jeffery Brenner of the Camden Coalition of Healthcare Providers and a validated risk stratification tool, the top 5% of high risk patients in the Medicaid and Uninsured population have been identified. Qualifiers for enrollment in this program include patient characteristics that include but are not limited to: homebound, disabled, multiple chronic diseases, polypharmacy or any other medical or social conditions limiting the patients’ ability to access care in an ambulatory care setting. A multidisciplinary team comprised of an advanced nurse practitioner (APRN) and LVN to see patients in the home and provide acute, primary and chronic care. In addition, social workers address barriers to care and any social issues. Care Coordinators are part of this team to facilitate coordination and continuity of care for patients and have high level oversight for patients; bringing together the necessary components of care for these complex patients. Lastly, a Medical Director has management over the entire project. A full spectrum of services are available in the patient home ranging from examinations and clinical decision making to changing urinary catheters, labs, vaccinations and medication reconciliation, management and education.

**Measurable Results/Outcomes:** 39 home visits were provided through Baylor Garland in FY 2017.

**Persons Served:** 11,374

**Needs Addressed Under This Program:**

- Access to care for Middle to Lower Socioeconomic
- Drug Abuse
- Mental/Behavioral Health
- Preventable Admissions – Adult Uncontrolled Diabetes

**Program Title:** Enrollment Services

Description: 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 underserved 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.

**Persons Served:** unknown

**Needs Addressed Under This Program:**

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• Access to care for Middle to Lower Socioeconomic
• Mental/Behavioral Health
• Preventable Admissions – Adult Uncontrolled Diabetes

Program Title: **For Women For Life Health Screenings**
Description: Similar to national trends, residents in the Hospitals' service area exhibit increasing diagnoses of chronic conditions. It is common that the pathology for one condition may also affect other body systems, resulting in co-occurrence or chronic conditions (CC). The presence of CC's adds a layer of complexity to disease management. The Hospital conducts screenings for CC's including body fat analysis, BMI, and injury prevention.
Persons Served: 148
Needs Addressed Under This Program:
• Access to care for Middle to Lower Socioeconomic

Program Title: **Health Screenings - Wellness**
Description: The concept of ‘managing your health’ or ‘staying healthy’ often translates to eating healthy and regular exercise, while going to the doctor associated with being sick. In an effort to inform the community on maintaining optimal health the Hospital provides health screenings that provide goals for such things as a BMI, appropriate weight and waist measures, and knowing if your physical strength is enough to support physical activity requirements.
Person’s served: 536
Needs Addressed Under This Program:
• Access to care for Middle to Lower Socioeconomic

Program Title: **Health Screenings - Cancer**
Description: The Hospital participates in community health screenings to aid in reducing the number of un-diagnosed cancer cases, as well as illness, disability, and death caused by cancer. Screening tests can help find cancer at an early stage, before symptoms appear. When abnormal tissue or cancer is found early, it may be easier to treat or cure.
Person’s Served: 391
Needs Addressed Under This Program:
• Access to care for Middle to Lower Socioeconomic

Program Title: **Health Screenings - Cardiovascular Disease**
Description: The Hospital provides blood pressure screenings to improve cardiovascular health and quality of life through prevention, detection and treatment of risk factors through focusing particularly on hypertension and cholesterol in men and women and minority groups at high risk for disease development. The key to preventing cardiovascular disease, also called coronary artery disease (CAD), is managing risk factors such as high blood pressure, high total cholesterol or high blood glucose. Regular cardiovascular screening is important because it helps detect risk factors in their earliest stages and identify lifestyle changes and pharmacotherapies, if appropriate, before it ultimately leads to the development of cardiovascular disease.
Persons’ Served: 507
Needs Addressed Under This Program:

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• Access to care for Middle to Lower Socioeconomic

Program Title: **Medical Education - Family Medicine Training**
Description: Medical education is a crucial part of the Hospital’s mission. Being a private teaching hospital, Baylor Scott & White – Garland annually trains residents for family medicine in a three year program. This quality teaching program adds many dimensions to the hospitals ability to serve patients. Residents in the hospitals’ program graduate with demonstrated competence in population health management, continuous quality improvement, and the importance of patient satisfaction. Residents work with physician’s assistants and are active managers of the patient-centered medical home, often assuming leadership roles in clinic and hospital operations.
Persons Served: 17
Needs Addressed Under This Program:
• Access to care for Middle to Lower Socioeconomic

Program Title: **Medical Education - Nursing Students**
Description: 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. Through the System’s relationships with many North Texas schools of nursing, the Hospital maintains strong affiliations with schools of nursing. Like physicians, nursing graduates trained at the Hospital are not obligated to join the staff although many remain in the North Texas area to provide top quality nursing services to many health care institutions.
Persons Served: 50
Needs Addressed Under This Program:
• Access to care for Middle to Lower Socioeconomic

Program Title: **Workforce Development**
Description: Recruitment of physicians and other health professionals for areas identified as medically underserved (MUAs) or other community needs assessment. 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 – twice as fast as the national average. During this 10 year period, Texas had the fourth highest percentage growth and ranked first in the number of residents added during this period. And, like the rest of the country, the Texas 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.
Persons Served: Unknown
Needs Addressed Under This Program:
Access to care for Low Income/Underserved
• Access to care for Middle to Lower Socioeconomic

Program Title: **Translation Services**
Description: The Hospital provides translation/interpreter services that go beyond what is required by state or federal rules or law or for accreditation. For example, translation services for a group that comprises less than 15% of the population.

Persons Served: Unknown

Needs Addressed Under this Program:
- Access to care for Middle to Lower Socioeconomic

VII. Charity Care and Government-Sponsored Indigent Health Care Provided

For Fiscal Year 2017, Baylor Scott & White Medical Center – Garland provided $26,529,701 in unreimbursed costs of charity care and government-sponsored indigent health care.

VIII. Government-Sponsored Health Care Provided

For Fiscal Year 2017, Baylor Scott & White Medical Center – Garland provided $13,504,823 in unreimbursed costs of government-sponsored health care.

IX. Other Types of Community Benefits Provided

Baylor Scott & White Medical Center – Garland is committed to improving the quality of life for the many citizens living and working in its area. Baylor Scott & White Medical Center – Garland was pleased to allocate funds to the following community benefit activities.

A. Community Health and Wellness Improvement Services $ 3,271
B. Community Benefit Operations $ 28,425
C. Financial Donations $ 12,000
D. In Kind Donations $ 214,119
E. Enrollment Services $ 66,283
F. Health Care Support Services $ 131,799
G. Health Screenings $ 25,326
H. Medical Education $3,134,501

X. Report of Community Benefit Provided During Fiscal Year 2017

In a commitment to fulfill its mission, Baylor Scott & White Medical Center – Garland benefit to the community, conservatively estimated, was $43,650,248 for Fiscal Year 2017.

Through community benefit activities, BSWH-affiliated hospitals provided: quality patient care and subsidized services otherwise not available in the community; medical education, training for medical technicians, hospital chaplains, nurses, and future physicians; and medical research that will speed the time between scientific finding and its application to improving medical care.
Any comments or suggestions in regard to the community benefit activities are greatly welcomed and may be addressed to Niki Shah, Vice President Care Redesign & Equitable Care, 8080 North Central Expressway Suite 700, Dallas, Texas 75206.