



Baylor Scott & White Health Irving/Las Colinas Health Community

Community Health Implementation Strategies 2019

An Action Plan for the Community Health Needs Assessment





Irving/Las Colinas Health Community Hospitals

- **Baylor Scott & White Medical Center – Irving**
- **Baylor Surgical Hospital at Las Colinas**



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Executive Summary

As the largest not-for-profit healthcare system in Texas, Baylor Scott & White Health (BSWH) understands the importance of serving the health needs of its communities. In order to do that successfully, the System is constantly surveying patients, their families and neighbors to understand the issues they face when it comes to making healthy life choices and healthcare decisions.

Earlier in 2019, a BSWH task force led by the community benefit, tax compliance and corporate marketing departments began assessing the current health needs of all the communities served by System hospitals. IBM Watson Health (formerly known as Truven Health Analytics) analyzed the data for this process and prepared a final report made publicly available in June 2019.

For the 2019 assessment, the collaborating BSWH hospital facilities served Dallas and Tarrant counties. At least 75% of the hospital facilities' admitted patients live in this geographic area.

BSWH and IBM Watson Health examined more than 102 public health indicators and conducted a benchmark analysis of this data, comparing the community to overall state of Texas and U.S. values. Community focus groups, including a representation of minority, underserved and indigent populations provided input for a qualitative analysis. Group Interviews with key community leaders and public health experts provided depth and context to the report.

Any community needs that did not meet state benchmarks were included in a magnitude analysis index. Understanding the degree of difference from benchmark





helped determine the relative severity of the issue. The outcomes of this quantitative analysis were aligned with the qualitative findings of the community input sessions to elicit a list of health needs in the community. These health needs fell into one of four quadrants within a health needs matrix: high data/low qualitative; low data/low qualitative; low data/high qualitative; or high data/high qualitative.



A community focus group, including a representation of minority, underserved and indigent populations, provided input for a qualitative analysis.



Hospital and clinic leadership, along with community leaders, reviewed the matrix in a session that established a list of significant prioritized needs. The session included an overview of the community demographics, a summary of health data findings and an explanation of the quadrants of the health needs matrix.

Those health needs falling into the “high data/high qualitative” quadrant were considered the most significant and in need of the most attention. Each session attendee identified and prioritized five needs. The most significant health needs emerged from this process.

Dear Community Members:

Baylor Scott & White is committed to improving health in the communities we serve. As part of that commitment, every three years we conduct a Community Health Needs Assessment (CHNA) and report on our community's current health needs. We also provide the Community Health Implementation Strategies report, which is our plan for addressing the identified needs.

We are pleased to present the 2019 Implementation Strategies for Irving/Las Colinas Health Community, a companion piece to the CHNA that provides plans for addressing our most pressing health needs. The CHNA for the health community hospital facilities incorporates input from influencers such as key stakeholders, area residents, faith-based organizations, healthcare providers, neighborhood association leaders, elected officials, health professionals, hospital and System leaders, the medically underserved and others.

The Implementation Strategies address the most severe health concerns that negatively impact community health. Hospital leadership selected the following priorities to focus on in the Strategies:

- **Food Insecurity**
- **Percentage of Population Under Age 65 Without Health Insurance**

The full report can be found at <http://BSWHealth.com/CommunityNeeds>.

As part of the largest not-for-profit health system in Texas, we take our commitment to Irving/Las Colinas Health Community very seriously. By working with community organizations and residents, we have identified and will focus on some of the toughest problems plaguing our most vulnerable residents.

Sincerely,

Baylor Scott & White Facility Presidents
Irving/Las Colinas Health Community

Irving/Las Colinas Community Health Implementation Strategies

The Community Health Implementation Strategies for Irving/Las Colinas Health Community is the companion piece to the CHNA. Public and hospital data and input gleaned from stakeholders representing the broad interests of the community are the foundation for this report, which offers realistic solutions to the community's priority health needs (see CHNA Report

www.BSWHealth.com/CommunityNeeds).

The community served by the collaborating BSWH hospital facilities includes Dallas and Tarrant counties and includes the geographic area where at least 75% of the hospital facilities' admitted patients live.

This written plan satisfies the requirements set forth in Internal Revenue Code (IRC) Section 501(r) (3) and the Texas Health and Safety Code Chapter 311 and is widely available to the public.

The overall purpose of the Implementation Strategies is to align the hospitals' charitable mission, program services and limited resources with the findings of the CHNA. To meet the requirements under IRC Section 501(r) (3), the 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)

The focus group recommended using the following prioritization criteria to rank the most significant health needs:

1

Root Cause: the need is a root cause of other problems, thereby addressing it could possibly impact multiple issues

2

Vulnerable Populations: there is a high need among vulnerable populations and/or vulnerable populations are adversely impacted

3

Community Capacity: the community has the capacity to act on the issue, including any economic, social, cultural or political consideration

4

Community Strength: extent that initiatives to address the issue can build on existing community strengths and resources

- Identify programs and resources the hospital plans to commit to address the health needs
- Describe any planned collaboration between the hospital and other facilities or organizations in addressing the health needs

Irving/Las Colinas Health Community Needs

The following health concerns are identified in priority order based on the results of the CHNA.

Priority	Need	Category of Need
1	Food Insecurity	Environment - food
2	Individuals Living Below Poverty Level	SDH* - Income
3	Percentage of Population Under Age 65 Without Health Insurance	Access to Care
4	No Vehicle Available	Access to Care
5	Severe Housing Problems	Environment - Housing

*SDH – Social Determinant of Health

The hospital facilities listed below collaborated to conduct this joint implementation strategy and have reviewed the significant health needs identified above. Hospital leadership selected the following health needs as the most important to confront in collaboration with the community based on the anticipated impact to the community, hospital resources available, and the expertise of each respective hospital facility.

COMMUNITY NEEDS ADDRESSED		
Facility	Food Insecurity	Percentage of Population Under Age 65 Without Health Insurance
Baylor Scott & White Medical Center – Irving	✓	✓
Baylor Surgical Hospital at Las Colinas	✓	✓

Implementation Strategies

Priority 1: Food Insecurity – Food insecurity is a measurement of the prevalence of hunger in the community; it reflects the percentage of the population who did not have access to a reliable source of food. Lacking consistent access to food is related to negative health outcomes such as weight- gain and premature mortality. Individuals and families with an inability to provide and eat balanced meals create additional barriers to healthy eating.

It is equally important to eat a balanced diet that includes fruits and vegetables as well as to have adequate access to a consistent supply of food. In Tarrant County 17.4% of the population lacked adequate access to food within the preceding year. This value was 11% higher than the state benchmark and may indicate a greater need or vulnerability within the population. The U.S. benchmark is 13%, this was lower than the state of Texas as well as Denton and Tarrant counties.

BAYLOR SCOTT & WHITE MEDICAL CENTER – IRVING

Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
Cash and in-kind contributions to other not-for-profit community organizations existing to increase access to care for the community	Increased access to healthy food for underserved populations	Community Support Fund	Persons served Health outcomes	Heritage Senior Center daily meal program Irving Cares VNA Meals on Wheels
Nutrition education programs	Increased awareness of chronic conditions Management and locations of available food sources (diabetes, CHF)	Staff Budget	Number of persons served Number of referrals made to food sources	Irving Community Clinic Heritage Senior Center Irving ISD
Disseminate and update community resource guide	Increased awareness of food distribution/ access community resources	Irving Community Benefit team and Care Coordination	Number of guides distributed	

Priority 1: Food Insecurity

Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
Collaboration with local farmer's markets	Increased access to healthy food for underserved populations	Care Coordination	Persons served Cost of service provision Health outcomes	Farmer's Market vendors

BAYLOR SURGICAL HOSPITAL AT LAS COLINAS

Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
Cash and in-kind contributions to other not-for-profit community organizations existing to increase access to care for the community	Increased access to healthy food for underserved populations	Community Support Fund	Persons served Health outcomes	Family Promise of Irving
Food drive	Increased access to healthy food for underserved populations	Staff Community Collaboration	Amount of food donated	Crisis Ministries

Priority 3: Percentage of Population Under Age 65 Without Health Insurance – Lack of health insurance is a significant barrier in accessing healthcare and overall financial security. A key finding from a recent Kaiser Foundation paper included; “Going without coverage can have serious health consequences for the uninsured because they receive less preventative care, and delayed care often results in serious illness or other health problems. Being uninsured can also have serious financial consequences, with many unable to pay their medical bills, resulting in medical debt.”

According to the 2018 County Health Rankings, the rate of uninsured population under age 65 across Texas is 19.2%, compared to an overall U.S. rate of 11% and top performing U.S. counties rate of 6%. The Irving/Las Colinas Health Community is comprised primarily of Dallas County and had an uninsured rate for the population under age 65 of 22.6%, higher than the overall Texas rate by 18%. The proportion of uninsured in Dallas County points to potential need and a larger vulnerable population for the greater Irving/Las Colinas Health Community.

Priority 3: Percentage of Population Under Age 65 Without Health Insurance

BAYLOR SCOTT & WHITE MEDICAL CENTER – IRVING				
Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
Community Care Clinics provide a medical home for patients needing comprehensive primary care services, chronic disease education and management, and community-based care coordination	Increased access to care for uninsured population under age 65	Budget Staff Supplies Overhead	Number of patients served	Irving Interfaith Clinic
Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy	Increased access to primary care and/or specialty care for indigent persons regardless of their ability to pay	Healthcare infrastructure Supplies Staff	Number of persons receiving assistance Unreimbursed cost of care	
Help all populations reach optimal health by integrating faith communities with healthcare to increase effective patient navigation, education and support to create healthier communities	Increased access to care for uninsured population under age 65	Faith Community Health Dept. Volunteer Training	Number of community partners developed Number of training classes offered Number of persons served	Faith Community Partners

Priority 3: Percentage of Population Under Age 65 Without Health Insurance

Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
To help address the State’s health care workforce shortage BSWH provides a clinical training program to prepare physicians and nurses for the medical workforce	Increased availability of healthcare providers in a medically underserved area	Nurse/Physician Educators Student supervisory staff Budget	Number of students trained Number of specialties Total number of students trained	Area colleges & universities

BAYLOR SURGICAL HOSPITAL AT LAS COLINAS

Action/Tactics	Anticipated Impact	Hospital Resources Contributed (Programs, Staff, Budget)	Outcomes to Measure	Community Organization Collaborators (if applicable)
Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy	Increased access to primary care and/or specialty care for indigent persons regardless of their ability to pay	Healthcare infrastructure Supplies Staff	Number of persons receiving assistance Unreimbursed cost of care	

Community Needs Not Addressed

BSWH provides a wide range of needed healthcare services and community benefits through adherence to its mission, using its resources and capabilities and remaining a strong organization. By focusing on our strengths and allocating our resources appropriately, we can achieve a greater impact in the communities we serve.

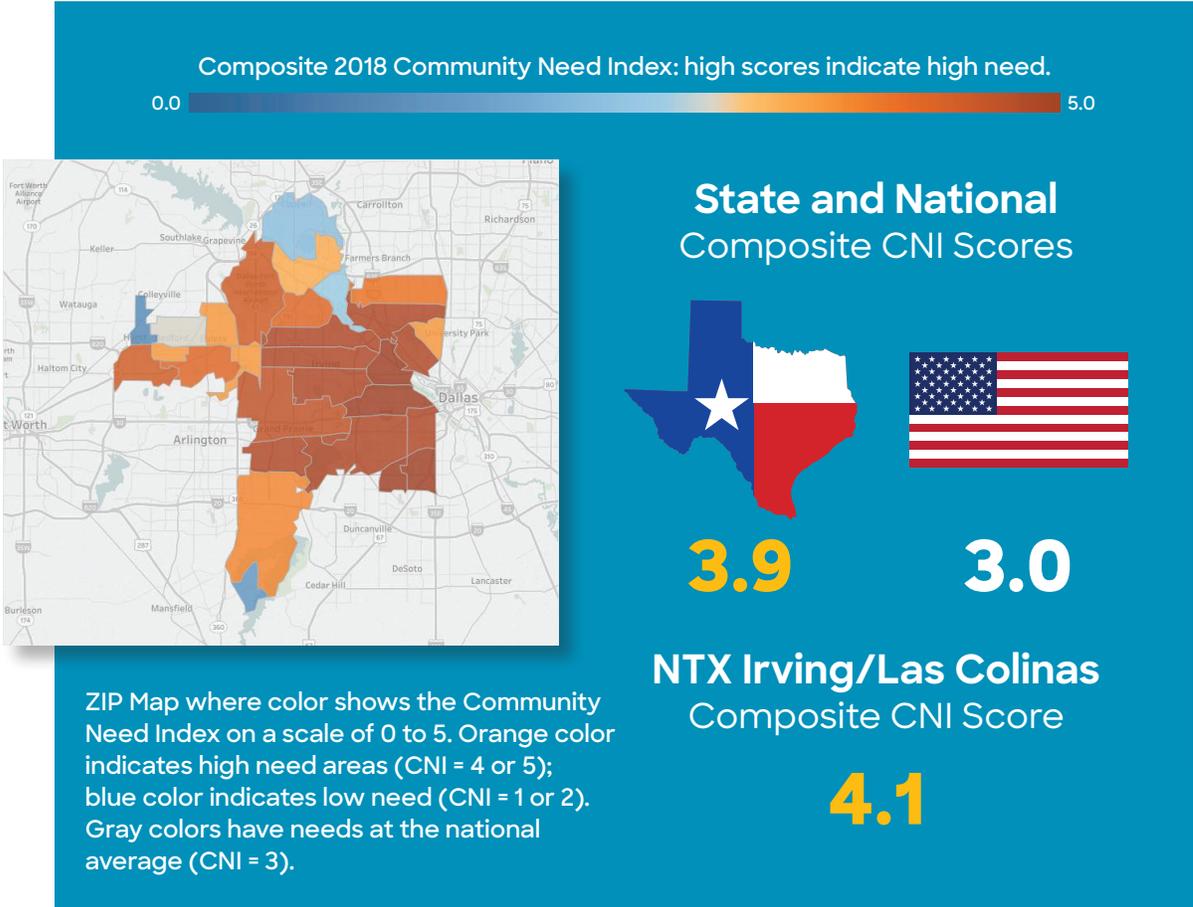
Needs not addressed:

- **Ratio of Population to One Dentist**
- **No Vehicle Available**
- **Severe Housing Problems**

There are multiple community and state agencies whose expertise and infrastructure are better suited for meeting the needs not addressed in the Community Health Implementation Strategies. Therefore, BSWH leadership has opted to focus its resources on the listed priorities for the betterment of the community.

Composite 2018 Community Need Index

The **Community Need Index** shows the high-need areas in Irving/Las Colinas Health Community in contrast to the state of Texas and the U.S.



IBM Watson Health created this CNI, which is a statistical approach to identifying areas within a community where health disparities may exist. 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 strongly linked to variations in community healthcare needs and an 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.

Program Evaluation

All community benefit activities align with community benefit goals by adhering to BSWH's policies and procedures. This ensures appropriate governance of the activities outlined in these Community Health Implementation Strategies. The hospitals evaluate programs and activities on a regular basis to ensure appropriate use of staff time and hospital resources.

To support the hospital's community benefit objectives, requests for contributions from other unrelated 501(c) (3) charitable organizations managed by the Community Benefit Department are considered alongside those activities addressing a priority need in the community given preference. All charitable giving is reviewed and approved annually by hospital leadership and the BSWH governing board.

BSWH regularly assesses, evaluates and reports on the programs addressing the significant needs found in identified communities. Regular conversations with community members, feedback on this plan and modifying programs and services enhance the opportunities patients have to connect to community resources. As a result, these hospital facilities achieve reduction in unnecessary healthcare costs and improved delivery of overall quality of care.

Please direct any feedback on the assessment or implementation plan to CommunityHealth@BSWHealth.org.

This document may be accessed at <http://BSWHealth.com/CommunityNeeds>.