2024 - 2026

COMMUNITY HEALTH IMPROVEMENT PLAN

Covenant Health Hobbs Hospital

Hobbs, NM

To provide feedback on this CHIP or obtain a printed copy free of charge, please email Shannon Bush at shannon.bush@providence.org

CovenantHealth

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EXECUTIVE SUMMARY

Providence continues its Mission of service in Lea County, New Mexico through Covenant Health Hobbs Hospital. Covenant Health Hobbs Hospital is an acute-care hospital founded in 2021 through an acquisition of Lea Regional Medical Center and is in Hobbs, NM. The hospital's service area is the entirety of Lea County, NM including 72,743 people.

Covenant Health Hobbs dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of people experiencing social inequities and health disparities. The Community Health Needs Assessment (CHNA) is an opportunity for Covenant Health Hobbs to engage the community every three years with the goal of better understanding community strengths and needs. The results of the CHNA are used to guide and inform efforts to better address the needs of the community. Through a mixed-methods approach, using quantitative and qualitative data, the CHNA process relied on several sources of information: state and national public health data, qualitative data from interviews and focus groups with community stakeholders, listening sessions with community members, available secondary data, and hospital utilization data.

Covenant Health Hobbs Community Health Improvement Plan Priorities

As a result of the findings of our 2023 CHNA and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Covenant Health Hobbs will focus on the following areas for its 2024-2026 Community Benefit efforts:

MENTAL/RELATIONAL HEALTH

Mental and behavioral health treatment, intervention, and prevention services for the community; including social and relational health, stigma reduction, and community education.

SUBSTANCE MISUSE

Substance misuse including the use of illegal drugs and the inappropriate use of legal substances, such as alcohol, prescription drugs and tobacco; community education and awareness through partnerships with non-profits, law enforcement, and schools; support for accessibility and availability of addiction treatment options.

ACCESS TO CARE AND HEALTH RESOURCES

Issues related to accessing health services and resources including social determinants of health with an emphasis on vulnerable populations and health equity; includes but is not limited to the following areas of focus: Dental Care for the Uninsured, Mental Health and Counseling Services, Health Education (preventative care and chronic diseases), Women's Health, and social determinants of health.

HOUSING INSTABILITY

Support for safe, affordable, stable housing through community partnerships and continued support of permanent supportive housing solutions for people experiencing chronic homelessness.

FOOD INSECURITY

Access to healthy food, nutrition education, and healthy lifestyle support with an emphasis on health equity; supporting current food solution partners and options to meet growing needs and to address root causes.

INTRODUCTION

Who We Are

Our Mission	As expressions of God's healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.
Our Vision	Health for a Better World.
Our Values	Compassion — Dignity — Justice — Excellence — Integrity

Covenant Health Hobbs Hospital is an acute care hospital founded in 2021 through and acquisition of Lea Regional Medical Center and is located in Hobbs, NM. A new Hobbs facility was opened in 2022. This facility has 60 beds, 44 for surgery, 8 for intensive care and 8 for women's services. The team at Hobbs is honored to provide comprehensive, compassionate and personal care including delivering babies, caring for children, and treating adults with chronic disease.

Our Commitment to Community

Covenant Health Hobbs Hospital dedicates resources to improve the health and quality of life for the communities we serve. For more information on the resources invested to improve the health and quality of life for the communities we serve, please refer to our Annual Report to our Communities: https://www.providence.org/about/annual-report.

Health Equity

At Providence, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is "Health for a Better World," and to achieve that we believe we must address not only the clinical care factors that determine a person's length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospital will implement when completing a CHIP. These practices include, but are not limited to the following:

Figure 1. Best Practices for Centering Equity in the CHIP

Planning for the Uninsured and Underinsured

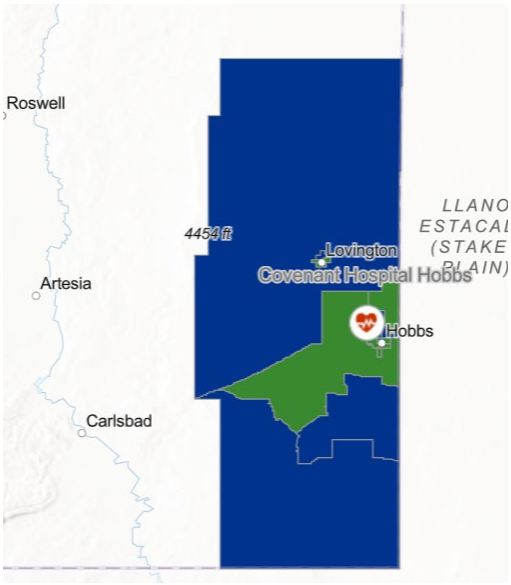
Our Mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why Covenant Health Hobbs Hospital has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients.

One way Covenant Health Hobbs Hospital informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program New Mexico Billing Support | Covenant Health | Providence

OUR COMMUNITY

Description of Community Served

Covenant Health Hobbs Hospital service area is Lea County, NM and includes a population of approximately 72,743 people.



To facilitate identifying health disparities and social inequities by place, we designated a "high need" service area and a "broader" service area, which together make up the Lea County Service Area. Based on work done by the Public Health Alliance of Southern California and their Healthy Places Index (HPI) tool, we identified the high need service area based on income, education, English proficiency, and life expectancy.[1]

Community Demographics

The following demographics are from the American Community Survey, 2021, 5-year estimates.

POPULATION AGE, RACE, AND ETHNICITY DEMOGRAPHICS

The largest age group in Lea County is under 18, constituting 30.4% of the population. There is a slightly higher percentage of males in Lea County with a higher number of males represented in the high need service area at 53.5% male. The high-need service area has a higher percentage of the population with two or more races compared to the broader service area and Lea County. The Hispanic population is significant in all areas, constituting 60.7% of Lea County, 50.7% of the broader service area, and 74.9% of the high-need service area. The high-need service area has a significantly higher percentage of Hispanic residents compared to the broader service area and Lea County. It is of importance to note, the total Black or African American population for Lea County is 3,038 with a total of 1,473 in the high need service area and 1,565 in the broader service area. Likewise, persons identifying as Hispanic in Lea County total 44,185 with 22,552 of those living within the high need service area.

[1] The following variables were used for the PNI analysis: Population below 200% the Federal Poverty Level (American Community Survey, 2021); Percent of population with at least a high school education (American Community Survey, 2021); Percent of population, ages 5 Years and older in Limited English Households (American Community Survey, 2021); Life expectancy at birth (estimates based on CDC, 2010 – 2015 data)

SOCIOECONOMIC INDICATORS

Table 1. Income Indicators for Lea County Service Area

Indicator	Lea County	Broader Service Area	High Need Service Area	New Mexico
Median Household Income	**$61,449**	**$71,481**	**$51,245**	**$53,722**
Severe Housing Cost Burden	**19.8% (1,491 renter households)**	**21.0% (964 renter households)**	**20.9% (527 renter households)**	**21.7% (54,983 renter households))**

Source: 2021 American Community Survey, 5-Year Estimate

Household median incomes includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one-person, average household income is usually less than average family income.

Renter households experiencing severe housing cost burden are households spending 50% or more of the income on housing costs. County Health Rankings and Roadmaps explain the link between health and housing in the following way: "There is a strong and growing evidence base linking stable and affordable housing to health. As housing costs have outpaced local incomes, households not only struggle to acquire and maintain adequate shelter, but also face difficult trade-offs in meeting other basic needs. When the majority of a paycheck goes toward the rent or mortgage, it makes it hard to afford doctor visits, healthy foods, utility bills, and reliable transportation to work or school. This can, in turn, lead to increased stress levels and emotional strain."

Full demographic and socioeconomic information for the service area can be found in the 2023 CHNA [Covenant Health Hobbs Hospital CHNA]

COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

After a careful review of the qualitative and quantitative data, we developed a preliminary list of identified community health needs. These needs were identified by key informants through a ranking process and by community members through discussion and theming of the data. Additionally, needs were identified after reviewing the quantitative data.

The Covenant CHNA Advisory and Community Benefit Committee reviewed the quantitative and qualitative data collected for each of the following community health-related needs:

- Mental Health
- Substance Abuse
- Access to Care and Health Resources
- Housing
- Food Insecurity
- Economic Insecurity
- Crime/Safety/Safe Public Spaces
- Homelessness
- Chronic Conditions/Obesity
- Civic Issues
- Transportation
- Racial and Health Equity Issues
- Support to Schools
- Support to Aging Populations
- Teen and Youth Support Programs

Significant Community Health Needs Prioritized

The Covenant CHNA Advisory and Community Benefit Committees reviewed the medium and high need issues identified within the community input. Additionally, primary data was examined with an emphasis on the high need service areas. The committee also considered Covenant Community Outreach staff input.

The following criteria were used in the prioritization process:

2023 Priority Needs

The list below summarizes the significant health needs identified through the 2023 Community Health Needs Assessment process (listed in no order):

MENTAL/RELATIONAL HEALTH

Mental and behavioral health treatment, intervention, and prevention services for the community; including social and relational health, stigma reduction, and community education.

SUBSTANCE MISUSE

Substance misuse including the use of illegal drugs and the inappropriate use of legal substances, such as alcohol, prescription drugs and tobacco; community education and awareness through partnerships with non-profits, law enforcement, and schools; support for accessibility and availability of addiction treatment options.

ACCESS TO CARE AND HEALTH RESOURCES

Issues related to accessing health services and resources including social determinants of health with an emphasis on vulnerable populations and health equity; includes but is not limited to the following areas of focus: Dental Care for the Uninsured, Mental Health and Counseling Services, Health Education (preventative care and chronic diseases), Women's Health, and social determinants of health.

HOUSING INSTABILITY

Support for safe, affordable, stable housing through community partnerships and continued support of permanent supportive housing solutions for people experiencing chronic homelessness.

FOOD INSECURITY

Access to healthy food, nutrition education, and healthy lifestyle support with an emphasis on health equity; supporting current food solution partners and options to meet growing needs and to address root causes.

Needs Beyond the Hospital's Service Program

No hospital facility can address all the health needs present in its community. We are committed to continuing our Mission through providing Wellness and Prevention Community Grants and sponsorships/donations to non-profits addressing identified needs.

The following community health needs identified in the CHNA will not be directly addressed due to resource constraints, lower priority assigned to the needs, duplication of efforts with other community or civic organizations and/or lack of effective methods for hospitals to intervene.

- Economic insecurity, crime/safety/safe public spaces, workforce issues, civic issues, and transportation.

Many of the identified needs will be indirectly addressed through outreach efforts and internal programming; however, Covenant Health Hobbs Hospital did not select these as priority focus areas. Covenant Health Hobbs Hospital works closely with community non-profits, agencies and organizations that provide more direct outreach and have the resources and expertise to lead initiatives to address these needs. In addition, Covenant Health Hobbs Hospital will collaborate with local FQHCs, community clinics, House of Hope, Lea County United Way, Palmer Drug Abuse Program, City of Hobbs, Lea County Health Department, The Maddox Foundation, and other local non-profits that address the aforementioned community needs to coordinate care and referrals to address these unmet needs.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

Covenant Health Hobbs Hospital engaged our community in the Needs Assessment process through stakeholder listening sessions, stakeholder interviews and community listening sessions. That data was used to set priorities and guide the Community Health Improvement Plan (CHIP). Due to a shared service area, close geographic proximity to one another, and many shared community-outreach programs, the Covenant Health Hobbs Hospital consulted with the Covenant Health Texas Hospitals to develop the Covenant Health Hobbs 2024-2026 CHIP.

A Covenant Health CHIP workgroup was established to include Covenant Health Plainview, Covenant Health Levelland and Covenant Health Hobbs, therefore the full Covenant Health Region discussed CHIP strategies. This encourages more effective leveraging of resources and investments in the region to meet identified community needs in common. The Covenant Health Community Benefit Committee for Lubbock hospitals and the Covenant Health Levelland, Covenant Health Hobbs Hospital and Covenant Health Plainview boards provided additional input, reviewed, and approved the respective Community Health Improvement Plans.

Addressing the Needs of the Community: 2024- 2026 Key Community Benefit Initiatives and Evaluation Plan

COMMUNITY NEED ADDRESSED #1: MENTAL/RELATIONAL HEALTH

Population Served

Community members in need of mental and behavioral health treatment, intervention, and prevention services for with a focus those that are vulnerable due to economic, social, and other factors.

Long-Term Goal(s)/ Vision

- To ensure equitable access to high-quality, culturally responsive, and linguistically appropriate mental health services, especially for populations with low incomes.
- An improved workforce of mental health professionals that is representative of the community served and can effectively and compassionately respond to the community's mental health and substance use needs.

Table 2. Strategies and Strategy Measures for Addressing Mental Health

Strategy	Population Served	Strategy Measure	Baseline	2026 Target
Expand counseling intern program to serve Lea County	Low-income families and individuals in the community with difficulties accessing counseling services	Total LPC interns serving Lea County	0	2
Create Mental Health First Aid (MHFA) Outreach Team to offer evidence-based, early-intervention education and resources for mental health and substance use	Lea County community members, schools, and non-profit organization	# of certified trainers in Lea County # of community-based courses	0 0	2 4
5% increase individuals receiving community-based MH/SU services through partnerships and community investments	Low-income families and individuals in the community with difficulties accessing counseling services	Persons Served Covenant Health Combined Service Area	3,868	4,062
The Guidance Center program expansion for Spanish-speaking population	Spanish speaking community members in need of mental health support	Persons Served	2024 baseline collection	TBD

Evidence Based Sources

Mental Health First Aid Instructor: https://www.mentalhealthfirstaid.org/become-an-instructor/

Healthy People 2030 Evidence-Based Resources: https://health.gov/healthypeople/objectives-and-data/browse-objectives/mental-health-and-mental-disorders/evidence-based-resources

Resource Commitment

Funding and in-kind staff caregivers to become MHFA trainers by 2026 and staff time to offer free quarterly community MHFA courses, space and equipment needed for on-site or tele counseling community services, Well Being Trust and Covenant Health dedicated grant funding for mental health

Key Community Partners

Palmer Drug Abuse Program, Guidance Center of Lea County, Permian Basin Counseling and Guidance Center, and City of Hobbs

COMMUNITY NEED ADDRESSED #2: ACCESS TO HEALTHCARE AND RESOURCES

Population Served

Community members encountering barriers to accessing care, experiencing health inequities and/or who are disproportionately impacted by issues related to social determinants of health.

Long-Term Goal(s)/ Vision

To improve access to health care and preventive resources for people with low incomes and/or those who are uninsured by deploying programs and forming community partnerships to assist with navigating the health care system.

Table 3. Strategies and Strategy Measures for Addressing Access

Strategy	Population Served	Strategy Measure	Baseline	2026 Target
Engage with 725 Helping Kids and Nurse on Demand to aid in linking community members to care providers and resources to address SDOH	Broader Community in need of resources to address SDOH issues	Total referrals to partner agencies in Lea County	2024 baseline collection	TBD
Hold annual Community Building Session with local non-profits to enhance community partnerships	Broader Community	Total Community Building Sessions	0	1 annually
Refer clients in need to Faith in Action for prescription assistance; Covenant Hobbs	Low-income/uninsured persons	Total Referrals	2024 baseline collection	TBD

case management assists with applications for assistance				
Secure state grant to increase access for prenatal care. Metric will be decreased number of women coming delivering without pre-natal care	Low-income/vulnerable women	Decrease in percentage of women delivering without pre-natal care	2024 baseline collection	TBD

Evidence Based Sources

Healthy People 2030 Evidence-Based Resources: https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality/evidence-based-resources

AHA White Papers on SDOHs: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies

Resource Commitment

Staff time to assist with community referrals, space, staff dedicated volunteer time, resources to support Community Building Sessions, community education classes and resources for pregnant women and Community Outreach operations shared staff support

Key Community Partners

Guidance Center of Lea County, Lea County Department of Health, Unity House, Lea County United Way, and Faith In Action

COMMUNITY NEED ADDRESSED #3: SUBSTANCE MISUSE

Population Served

Community members impacted by substance misuse and experiencing barriers to accessing care, education, support, and treatment services.

Long-Term Goal(s)/ Vision

To increase community knowledge regarding substance misuse and increase access to treatment and recovery support services.

Table 4. Strategies and Strategy Measures for Addressing Substance Misuse

Strategy	Population Served	Strategy Measure	Baseline	2026 Target
Engage with local universities and law enforcement to offer school-based educational outreach on substance use and naloxone	Area schools	Total schools served	0	TBD
Provide grants to support non-profits providing substance misuse programs and treatment	Community members encountering barriers to accessing substance misuse treatment	Percentage of Covenant Health grants funding substance treatment and intervention programs	14%	20%
Palmer Drug Abuse Program: Substance use disorder program expansion	Community members in need of substance misuse program	Referrals into Palmer Drug Abuse Program	Gathering Baseline in 2024	TBD

Evidence Based Sources

Centers for Disease Control and Prevention: https://www.cdc.gov/opioids/naloxone/training/index.html

Healthy People 2030 Evidence-Based Resources: Healthy People 2030 Evidence-Based Resources: https://health.gov/healthypeople/tools-action/browse-evidence-based-resources

Resource Commitment

Staff time, educational resources and space for community education, in-kind staff times for caregivers to become MHFA trainers by 2026 and to staff time to offer free quarterly community MHFA courses, space and equipment needed for on-site or tele counseling community services, Well Being Trust and Covenant Health dedicated grant funding for mental health/substance misuse

Key Community Partners

Palmer Drug Abuse Program, Guidance Center of Lea County, The Maddox Foundation, Lea County Sherifs Department, and Hobbs School District

COMMUNITY NEED ADDRESSED #4: FOOD INSECURITY

Population Served

Food insecure individuals and families within the community who lack reliable access to affordable, safe, and healthy food.

Long-Term Goal(s)/ Vision

To reduce the percentage of households experiencing food insecurity.

Table 5. Strategies and Strategy Measures for Addressing Food Insecurity

Strategy	Population Served	Strategy Measure	Baseline	2026 Target
Provide grants to expand food access through key community partner agencies	Community members encountering food insecurity	Percentage of Covenant Health grants funding food insecurity	28%	30%
Partner with Weekend Hunger Initiative (WHI) Hobbs	Community members experiencing food insecurity	Package Food Boxes Conduct annual food supply drive	1 event 1 event	2 events 2 events
Screen for food insecurity within all Covenant Community Outreach Programs and Navigation programs	Low-income vulnerable accessing Covenant Health Outreach Programs and/or navigation services	Total screenings with documented interventions	0	70% screened have documented interventions in place

Evidence Based Sources

Healthy People 2030 Evidence-Based Resources: Healthy People 2030 Evidence-Based Resources: https://health.gov/healthypeople/tools-action/browse-evidence-based-resources

Resource Commitment

Covenant Health Partners supporting all Covenant Health Hospitals through screening for food insecurity, staff time and space to create food boxes, grant and sponsorship support to non-profits addressing food insecurity in the community, shared Covenant Health Community Outreach operations staff

Key Community Partners

WHI Hobbs, Faith In Action, Lea County United Way, and the Maddox Foundation

COMMUNITY NEED ADDRESSED #5: HOUSING INSTABILITY

Population Served

Housing insecure individuals and families within the community who lack reliable access to affordable, safe, and stable housing.

Long-Term Goal(s)/ Vision

A coordinated and holistic community approach to providing increased linkages to supportive services for people experiencing housing instability and/or homelessness.

Table 6. Strategies and Strategy Measures for Addressing Housing Instability

Strategy	Population Served	Strategy Measure	Baseline	2026 Target
Increase provision of in-kind staffing support for wrap-around services to non-profits addressing housing and homelessness	Homeless and housing unstable community members	Persons served	Collect in 2024	TBD
Screen every client enrolled in navigation services for SDOH and refer to social services to connect to housing and SNAP benefits as needed	Low-income	Number of clients referred	Collect in 2024	TBD
Provide grants to support housing programs through key community partner agencies	Housing unstable and homeless	Percentage of grants funding food insecurity	14%	20%

Evidence Based Sources

Department of Housing and Urban Development:
https://www.huduser.gov/portal/periodicals/em/spring-summer-23/highlight2.html

Resource Commitment

Covenant Health Partners supporting all Covenant Health Hospitals through screening for housing insecurity, staff time volunteering with Habitat for Humanity, grant and sponsorship support to non-profits addressing housing, and shared Covenant Health Community Outreach operations staff

Key Community Partners

Unity House, Lea County United Way, Faith in Action, Salvation Army, and Habitat for Humanity

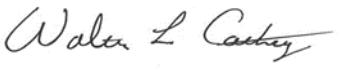
Other Community Benefit Programs

Table 7. Other Community Benefit Programs in Response to Community Needs

Community Need Addressed	Program Name	Description	Population Served (Low Income, Vulnerable or Broader Community)
1. Habitat for Humanity – Housing Instability	Covenant Health Hobbs Habitat Volunteer Days	Send teams to volunteer	Low Income/Vulnerable
2. Access	Community Blood Drive	Covenant Hobbs Hospital donated space and staff support for community blood drives	Broader Community
3. Access	Free Community Childbirth classes	Monthly classes offered free of charge	Broader Community
4. Access	Feria de Salud/Health Fair	Host community health and education fair	Broader Community

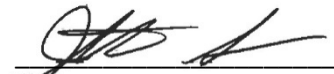
2024- 2026 CHIP GOVERNANCE APPROVAL

This Community Health Improvement Plan was adopted by the Covenant Health Hobbs Board of Directors on March 26th, 2024. The final report was made widely available by May 15, 2024.



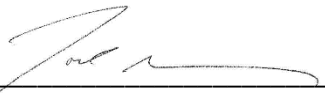
3/26/24

Walter L. Cathey FACHE — Date
CEO Covenant Health
Providence Regional Chief Executive Texas/New Mexico



3/26/24

Jonathan Sena — Date
Chair, Covenant Health Hobbs Board of Directors



4/24/24

Joel Gilbertson — Date
Divisional Chief Executive
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CHNA/CHIP Contact:

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To request a printed copy free of charge, provide comments, or view electronic copies of current and previous Community Health Improvement Plans please email CHI@providence.org.