

COVENANT HEALTH SPECIALTY HOSPITAL 2014 Community Health Assessment Report



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EXECUTIVE SUMMARY

OVERVIEW OF COMMUNITY HEALTH NEEDS ASSESSMENT

Covenant Health's Community Health Outreach Department (CHO) conducts a community needs and assets assessment every three years. The assessment process includes secondary data analysis, review of community assets, community needs mapping, focus groups, interviews and surveys. The information is used by the CHO department and the Covenant Community Benefit Committee to select FY 15- FY 17 community health outreach priorities for Covenant Health.

COLLABORATING ORGANIZATIONS

This needs assessment is conducted as a collaborative effort between the following Covenant Health facilities (ministries): Covenant Medical Center, Covenant Children's Hospital and Covenant Specialty Hospital (Joint Venture) all located in Lubbock, TX.

COMMUNITY INPUT

Community input was gathered through focus groups, interviews and on-line surveys. Findings include significant concerns in the community surrounding lack of: mental/behavioral health services, prevention/wellness programs particularly for lower income families and dental services particularly for adults. Additionally the need for more coordination of services among providers and agencies was expressed.

COMMUNITY NEED

Community health and wellness needs identified in this assessment include:

- 1. Mental/Behavioral Health
- 2. Obesity reduction and prevention
- 3. Diabetes
- 4. Wellness and Prevention
- 5. Cardiovascular
- 6. Dental
- 7. Substance Abuse all ages
- 8. Women's Health

- 9. Children's Health
- 10. Cancer
- 11. Access to care for low income (including prescriptions)
- 12. Childhood Asthma
- 13. Domestic Violence (including child abuse)
- 14. Healthy food for low income

INTRODUCTION

MISSION, VISION, AND VALUES

Our Mission

To extend Christian ministry by caring for the whole person—body, mind and spirit—and by working with others to improve health and quality of life in our communities.

Our Vision

We bring people together to provide compassionate care, promote health improvement, and create healthy communities.

Our Values

The four core values of St. Joseph Health -- Service, Excellence, Dignity, and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

INTRODUCTION – WHO WE ARE AND WHY WE EXIST

Covenant Health, located in Lubbock, Texas is a member of the St. Joseph Health, sponsored by the St. Joseph Health Ministry, and is the largest health care institution in the West Texas and Eastern New Mexico region, with 4,000 employees and more than 600 admitting physicians. Covenant Health was created in 1998, through the merger of Lubbock Methodist Hospital System and St. Mary Hospital. Cornerstone facilities in Lubbock include Covenant Medical Center, Covenant Children's Hospital, Covenant Specialty Hospital and Hospice of Lubbock. Covenant Medical Group offers a wide array of primary care and specialists throughout Lubbock, West Texas and New Mexico.

Covenant Health is committed to offering accessible, affordable care to Lubbock's surrounding areas through 2 leased and 12 affiliated regional hospitals, including Covenant Hospital Levelland and Covenant Hospital Plainview, and Covenant Medical Group, a large employed physician group comprised of approximately 150 primary care and specialist physicians across West Texas and Eastern New Mexico.

ORGANIZATIONAL COMMITMENT

Community Benefit Governance and Management Structure

Our Community Benefit Committee, a subcommittee of CH's Board of Trustees, is made up of hospital leadership and local community professionals. Our Executive Management Team (EMT) is involved in community benefit planning, prioritization of programs and reporting through the participation of the Vice President of Mission Integration, the CEO, COO, Vice President of Regional Services/Advocacy and the Board Liaison at the monthly Community Benefit Committee meetings. In addition, the Chair of the Community Benefit committee reports monthly at Board of Director's meetings, keeping them informed about program progress.

The Community Benefit Committee consists of seven CH Board of Director's members and five at-large community members. Each has a unique insight to the communities we serve. The role of the Community Benefit Committee of Covenant Health is to support the Board of Directors in providing oversight of achievement of the Healthiest Communities goals and initiatives, community outreach activities, and assuring the accuracy of information included in the community benefit reports approved by the Board and submitted as required to state and federal agencies. The Community Benefit Committee works with Covenant's Strategic Planning and Advocacy departments to insure goals alignment. The Community Benefit Committee achieves this role through fulfilling the following functions as outlined in the committee charter:

- Monitor Healthiest Communities (Childhood Obesity) initiatives.
- Develop policies and programs that address the identified needs in the CH service area with particular attention to vulnerable populations with disproportionate unmet needs.
- Oversee the development and implementation of the Community Needs Assessment and Community Benefit Plan every three (3) years.
- Monitor annual progress against Community Benefit Plan goals.
- Review all Community Benefit expenditures annually.
- Review and approve annual Care for the Poor budget and recommend approval to CH Board of Directors.
- Review and approve program design to assure that it best meets the needs of the population served.
- Ensure that Community Benefit programs target the populations with the greatest disproportionate unmet health related needs in the CH service area.
- Review and recommend programs for continuation/discontinuation annually.
- Review community benefit reports to assure accuracy of information before being approved by the Board and submitted to state and federal agencies.
- Identify potential sources and partnerships for Community Benefit programs. Provide letters of support or introduction, as appropriate.
- Assure effective communication and engagement of diverse stakeholders in Community Benefit planning and implementation.

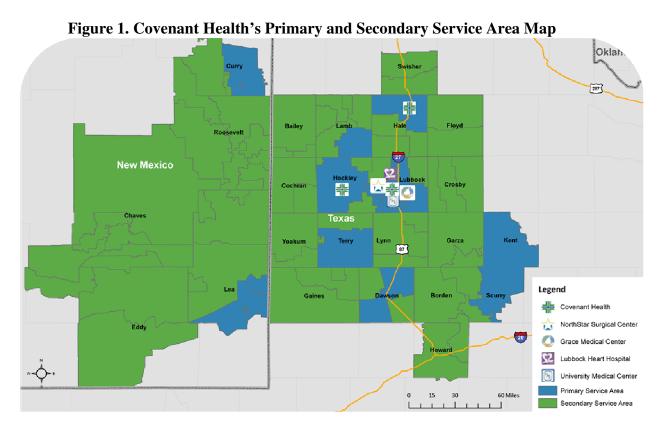
COMMUNITY

COMMUNITY SERVED

Covenant Health (CH) is a member of the St. Joseph Health, sponsored by the St. Joseph Health Ministry, and is one of the largest non-profit healthcare organizations in the West Texas/Eastern New Mexico region, serving a 62 county area. Many of the counties in the service area are considered Medically Underserved. We consist of 1,154 licensed beds, approximately 4,000 employees, and over 600 admitting physicians. Covenant Health has an average daily census of 409, over 28,000 annual patient discharges, and more than 85,000 annual Emergency Room visits.

Covenant Health – Covenant Medical Center, Covenant Children's Hospital and Covenant Specialty Hospital (Joint Venture) are all located in Lubbock, TX. Lubbock is the county seat of Lubbock County. The city is located in the northwestern part of the state at the base of the Panhandle in a region known as the Llano Estacado. Lubbock is home to Texas Tech University, Lubbock Christian University and has satellite campuses of South Plains Jr. College and Wayland Baptist University. The Lubbock Metropolitan Statistical Area is comprised of Lubbock and Crosby Counties. Lubbock serves as an economic center with an economy based in agriculture, healthcare, education, and manufacturing.

Figure 1 (below) depicts the Hospital's PSA and SSA. It also shows the location of the Hospital as well as the other hospitals in the area that are a part of Covenant Health.



COMMUNITY PROFILE

Covenant 1	Health	Total	Service A	rea
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Characteristics		2012	
Total Population		754,196	
Average Household Size		2.63	
Median Household Income		38,444	
Male		382,993	
Female		371,203	
Age Groups	2012		%
0-19	222,599		29.5
20-44	259,057		34.3
45-64	177,061		23.5
65+	95,479		12.6
Race/Ethnicity	2012		%
White Alone	566,473		75.1
Black Alone	39,552		5.2
Asian Alone	8,666		1.1
All Other	139,505		18.5
Total	754,196		100
Hispanic Origin	319,794		42.4
Household Income	%		
<\$15K	17.6		
<i>\$15K-\$25K</i>	14.7		
\$25K-\$35K	13.0		
\$35K-\$50K	15.8		
\$50K-\$100K	27.0		
Over \$100K	12.0		
Adult Education Level *	%		
Less than High School	23.3		
High School Graduate	29.7		
Some college no degree	21.7		
Associates Degree	6.1		
Bachelor Degree or Greater Source: EBSI based on 2010 Cansus *N	19.2		

Source: ERSI based on 2010 Census *Most current data through American Community Survey

COMMUNITY BENEFIT SERVICE AREA

The FY 15 – FY 17 Community Benefit Service Area (CBSA) addresses specific populations within both Covenant Medical Center's primary and secondary service areas. The Covenant Community Health Outreach program is located in the city of Lubbock where the three hospital facilities are also located. Due to the vast geographical area served by the Covenant Health hospitals the community outreach programs focus on high need areas within the city of Lubbock and a 60 mile radius. However, persons living outside of the primary service area for the Covenant Community Health Outreach programs are able to participate in any program.

Covenant Health Community Benefit Primary Service Areas

	3
Zip Code	County
79241	Lockney
79329	Idalou
79331	Lamesa
79339	Littlefield
79363	Shallowater
79364	Slaton
79366	Ransom Canyon
79373	Tahoka
79382	Wolfforth
79401	Lubbock
79403	Lubbock
79404	Lubbock
79407	Lubbock
79410	Lubbock
79411	Lubbock
79412	Lubbock
79413	Lubbock
79414	Lubbock
79415	Lubbock
79416	Lubbock

COMMUNITY NEEDS INDEX

The following additional geographic analysis was conducted to get an understanding of the geographic needs in the Lubbock County area.

Community Need Index (Zip Code Level) Based on National Need

The Community Need Index (CNI) was developed by Dignity Health (formerly known as Catholic Healthcare West (CHW)) and Truven Health Analytics. The Community Needs Index (CNI) identifies the severity of health disparity for every zip code in the United States and demonstrates the link between community need, access to care, and preventable hospitalizations.

CNI aggregates five socioeconomic indicators that contribute to health disparity (also known as barriers):

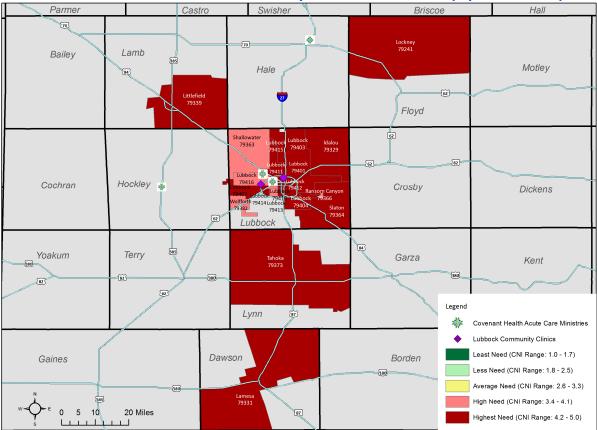
- Income Barriers (Elder poverty, child poverty and single parent poverty)
- Culture Barriers (non-Caucasian limited English);
- Educational Barriers (% population without HS diploma);
- Insurance Barriers (Insurance, unemployed and uninsured);
- Housing Barriers (Housing, renting percentage).

This objective measure is the combined effect of five socioeconomic barriers (income, culture, education, insurance and housing). A score of 1.0 indicates a zip code with the fewest socioeconomic barriers, while a score of 5.0 represents a zip code with the most socioeconomic barriers. Residents of communities with the highest CNI scores were shown to be twice as likely to experience preventable hospitalizations for manageable conditions such as ear infections, pneumonia or congestive heart failure compared to communities with the lowest CNI scores.(Ref (Roth R, Barsi E., Health Prog. 2005 Jul-Aug; 86(4):32-8.) The CNI is used to a draw attention to areas that need additional investigation so that health policy and planning experts can more strategically allocate resources.

For example, the ZIP code 79415 on the CNI map is scored between 4.1-5, making it a High Need community.

Figure 2 (page 11) depicts the Community Need Index for Covenant Health's geographic service area based on national need. It also shows the location of the Hospital as well as the other hospitals in the area that are a part of St. Joseph Health.

Covenant Health Lubbock Community Benefit Service Are (Zip Code Level)



METHODOLOGY

The Covenant Health Community Health Needs Assessment is a follow-up to the study conducted in 2011. It is a systematic, data-driven approach to determining the <u>health status</u>, <u>behaviors</u> and <u>lifestyles</u> of residents in the Community Benefit Service Areas. Subsequently, this information will be used to formulate strategies to improve community health and wellbeing. A Community Health Assessment provides information used by communities to identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status. This Community Health Assessment will serve as a tool toward reaching three basic goals:

- 1. To improve community residents' self-reported health status, functional health and their overall quality of life.
- 2. To reduce the health disparities among residents.
- 3. To increase accessibility to preventive services for all community residents.

In addition to these goals, data from this report will assist in completing the Community Health Needs Assessment (CHNA) report as part of the Federal 501(r) requirements.

ANALYTIC METHODS

Community needs and assets assessment process

The CHNA process included secondary and primary data analysis, mapping of needs, review of community assets and prioritization of health needs focus area for Covenant Health Community Outreach. Covenant Health utilized the PRC secondary data (see appendix 7) to identify health issues for the economically poor in community benefit service area (CBSA). The CBSA is identical for Medical Center, Children's Hospital and Specialty Hospital. The analysis included a review of current community assets to further identify the issues/needs for which there are not adequate resources (assets) in place by other community providers.

Secondary Data Collection and Analysis

- Demographic data for service area
- PRC Data
- County Health Ranking Data (appendix 6)
- United Way 2013 Community Status Report

Primary data collection:

- Analyzed existing community assets and programs
- Conducted community focus groups with questions developed based on PRC Secondary Data
- Conducted interviews and on-line surveys

PRIORITIZATION PROCESS AND CRITERIA

All identified health needs were presented to focus groups comprised of community health leaders from the Lubbock area, representatives from local community service agencies, local public school representatives, governmental agencies, and local clergy. In addition internal Covenant department leaders and the CB Committee also provided input into the priority setting process. Local healthcare providers were also asked to complete an on-line survey to rank the identified needs. The feedback received from these groups combined with the secondary data analysis helped shape the final priorities. Priorities were then assigned rankings by the CHO program team according to how well they met the following elements listed below.

Elements Considered When Ranking Priorities:

- Local secondary and primary data and national evidence have identified this problem as an important one in affecting residents' health status
- All priorities will be focused on the economically poor Local secondary and primary data have identified this problem as affecting a substantial number of persons
- Available local resources to address the problem are not adequate
- Issue can be effectively addressed within the mission, vision, and values
- Focus on this area will help the Emergency Department and inpatient areas
- Focus on this area will help insure that the economically poor receive services in areas of clinical excellence
- Focus on this area will help address other strategic priorities
- Other community service providers agree that there is a need for additional services and providers
- Other community service providers support being a provider in this arena
- There would be a negative impact on community if CHO discontinued a current program or service
- Can provide this service as efficiently as other providers of this service in the community
- Has or will develop the competencies/expertise needed to address this need effectively
- Will focus on primary and/or secondary prevention approaches to this problem, rather than tertiary prevention
- Will address this problem through an integrated/coordinated approach working with other providers to meet consumers' needs and "best practice" standards
- Scope and seriousness of the issue
- Evaluation of community resources that currently address the issue
- Overall Alignment with internal strategic plans

INFORMATION GAPS

Demographic and health data is not available at the city or zip code level for Lubbock and the surrounding areas. Very little secondary data is available on oral health in Texas. However, this did not impact Covenant Health, Covenant Medical Center's ability to reach reasonable conclusions regarding community health needs.

COLLABORATING ORGANIZATIONS

Covenant Health's Community Health Outreach Department (CHO) conducts a community needs and assets assessment every three years. This needs assessment is conducted as a system which includes Covenant Medical Center, Covenant Children's Hospital and Covenant Specialty Hospital (Joint Venture) all located in Lubbock, TX.

COMMUNITY NEED

Community health and wellness needs identified and ranked based on the process and criteria listed above.

- 1. Mental/Behavioral Health
- 2. Obesity reduction and prevention
- 3. Diabetes
- 4. Wellness and Prevention
- 5. Cardiovascular
- 6. Dental
- 7. Substance Abuse all ages
- 8. Women's Health
- 9. Children's Health
- 10. Cancer
- 11. Access to care for low income (including prescriptions)
- 12. Childhood Asthma
- 13. Domestic Violence (including child abuse)
- 14. Healthy food for low income

Disproportionate Unmet Health Need Group (DUHN), Key Community Needs, and Assets Summary

Communities with Disproportionate Unmet Health Needs (DUHN) are communities defined by zip codes and census tracts where there is a higher prevalence or severity for a particular health concern than the general population within Covenant Health's Service Area. The twenty zip codes (representing ten cities) within the Covenant Health Primary Community Benefit Service Area are considered medically underserved.

COMMUNITY ASSESTS

The Lubbock community has a strong base of agencies and non-profit organizations working to provide social and economic support to residents within the county. Lubbock has a very strong and active United Way which helps fund and support local agencies. There are two large hospitals, a heart hospital, several surgical centers, two cancer centers and numerous healthcare providers within Lubbock. Three universities and one junior college have campuses in Lubbock which provides the community with student interns and student service organizations. Texas Tech University Medical School, Nursing School and Allied Health program all help to boost healthcare services in the region. There are three strong public school districts within the city of Lubbock which provide assistance to low income families through an array of outreach programs. Lubbock received a Promise Neighborhood grant which has provided funding to focus educational and medical outreach efforts in some of the most underserved schools. There is a rich network of churches supporting citizens and assisting with food, clothing, utilities and housing. Below is a list of community organizations identified as providing support in health related services to economically disadvantaged in the Lubbock area.

Community Health Center of Lubbock

The Dream Center
The Garrison Center
The Larry Combest Center
Lubbock Boys and Girls Club
Junior League of Lubbock
AgriLIFE Extension
Lutheran Social Services
Lubbock Children's Health Clinic
TTU Center for Addiction & Recovery
Methodist Children's Home Lubbock

American Cancer Society Alcoholics Anonymous Covenant Health System University Medical Center

Lubbock Impact
City Health Department
TTU Health Sciences Center
Catholic Family Services
Sick Children's Clinic
Catholic Charities
Adult Protective Services
Department of Veterans Affairs

STARR Care Managed Care Lubbock Faith Center

Texas Tech Family Therapy Clinic

Family Counseling Center United Way of Lubbock

Juvenile Diabetes Research Foundation

American Diabetes Association

March of Dimes Parenting Cottage

YWCA

Family Outreach

WIC

Grand Expectations The Stork's Nest Methadone Clinic

Women's Protective Services

Headstart Program

The South Plains Food Bank

Link Ministries

Family Guidance Center

Texas Tech School of Medicine Clinics

PRIMARY DATA

Community Input

Community input was gathered through focus groups, interviews and an on-line survey conducted during January 2014 (appendix 1 and 5). Input was gathered based on the health needs that surfaced in the 2012 PRC Health Needs Assessment (full PDF report available upon request) prepared for Covenant Health. The PRC Needs Assessment analyzed both primary and secondary data for Covenant Health including phone surveys of community residents.

Focus groups, interviews and surveys were conducted by Covenant Health Community Outreach staff. Persons representing broad interests of the community and with special knowledge of public health were asked to participate in one of more of the data gathering sessions. Input was gathered from governmental health agencies, persons representing medically underserved and low income populations, as well as individuals representing minority health needs.

SUMMARY OF FINDINGS

Input from the community indicates there are very few dental resources for uninsured and/or low income adults. This includes those who are elderly. Persons in need of diabetes care, education and prescriptions also face the challenge of limited services particularly for low-income residents. There is a need for early intervention and education focused on prevention of diabetes perhaps through more school partnerships. There are numerous agencies providing a variety of assistance to low-income individuals and families in Lubbock however; more work needs to be done to raise awareness of resources are available. There is a need for case management services for families outside of the hospital and a need for health navigators. Obesity continues to be a concern for Lubbock and the surrounding communities. Collaborative efforts between healthcare, education, non-profits and civic agencies should continue in order to best address obesity reduction. Mental/Behavioral health remains a huge issue for Lubbock and surrounding counties. Mental health services are limited and there are not enough providers. The need is even greater for low-income patients who cannot gain access to continuous care. There is a high need for substance abuse in-patient and outpatient facilities for all ages. Substance abuse and suicide rates are high for Lubbock and the surrounding counties. As the population ages and the Baby Boomers have increased life expectancy there is a need for mental health services specially targeted at the aging population. There needs to be more collective advocacy efforts at the state level for mental/behavioral health services in Texas.

POTENTIAL MEASURES IDENTIFIED THROUGH COMMUNITY INPUT

- Behavioral health services in particular for youth
- Increased dental services for low income adults and elderly
- Care coordination between agencies and providers
- Earlier interventions to prevent diabetes, obesity and heart disease
- Better coordination between non-profit agencies, healthcare organizations and schools to provide health education
- Community wide focused efforts on wellness and prevention

SECONDARY DATA

Secondary health data was analyzed using information from a 2012 PRC Health Needs Assessment (full PDF report available upon request) prepared for Covenant Health. Additionally County Health Rankings (appendix 6), Medically Underserved Index (appendix 3), The United Way 2013 Status Report (http://www.unitedway-lubbock.org/CSR/CSR-2013.pdf) and Health Professionals Shortage Area information (appendix 4) were utilized to gather secondary data. The PRC Community Health Assessment was a follow-up to the study conducted in 2007. The PRC process is a systematic, data-driven approach to determining the health status, behaviors and lifestyles of residents in the Community Benefit Service Areas (CBSA) of Covenant Health.

SUMMARY OF FINDINGS

Based on the PRC study, Covenant Health's Community Benefit Service Area fares much better in several health indicators since 2007. In terms of health outcomes, Covenant CBSA residents report improvements in asthma among adults, skin cancer, chronic heart disease, high cholesterol, and arthritis/rheumatism. Findings also suggest that over the last five years, area residents are engaging in healthier behaviors evidenced by increases in fruits and vegetables consumption, physical activity, colon cancer screening, immunization, as well as lower drinking rates. Furthermore, rates of healthcare access difficulties decreased and more adults are having routine checkups. In spite of these successes, residents continue to experience poor outcomes relative to asthma among children, diabetes, cancer, stroke, hypertension, major depression, and low ratings of general and mental health. In terms of health behaviors more adults and children are obese, a higher proportion of residents report difficulty in accessing grocery stores with affordable and fresh produce, the rate of tobacco smoke increased and fewer women are getting screened for cancer (i.e. breast and cervical). According to the County Health Rankings, Lubbock County is ranked 159 out of 232 Texas counties in health outcomes.

The PRC study found that diabetes has increased considerably in the last five years as evidenced by the following trends: US: 7.5% to 8.7%, TX: 8.0% to 9.7%, Covenant Health CBSA: 11.5% to 15.0%. There are also age and socioeconomic differences in this disease. The prevalence of diabetes is higher among individuals aged 65 and over, individuals living below poverty level and those with lower levels of education.

Concerning mental health the study found that the proportion of Lubbock area residents who rate their mental health as fair or poor has increased from 11.7% to 13.7% over the last five years and is higher than the current national rate of 11.7%. The United Way 2013 Community Status Report finds that more than 1.3 million Texas children or one out of every five kids has a mental illness or disorder during the course of a year. Nearly 60% of these children and teens with a diagnosable mental disorder do not receive services – a rate 20% higher than the national average.

Obesity continues to be a major health issue for the nation, the state and the Covenant CBSA. Since the 2007 PRC study, overweight and obesity among adults have increased in Covenant Health's CBSA (32% to 37.6% and 36.1% to 37%, respectively). The proportion of adults in the service area who are attempting to lose weight through nutrition and exercise has decreased in

the same timeframe. The current rate of 32% is lower than the nation's (38.6%). According to the PRC study the rate of obesity among children has increased in the Covenant Health CBSA going from 23.5% to 34.1% in the past five years. The prevalence is highest among 5 to 12 year olds and those in households with lower levels of income. The United Way 2013 Community Status report details that five of the highest health costs come from problems related to obesity. This includes type 2 diabetes, coronary heart disease and stroke, hypertension, arthritis, and obesity-related cancer

The PRC study reports that about 58.2% of the residents in Covenant Health's CBSA report that they do not have dental coverage. Rates of dental uninsured are higher among individuals living below Federal Poverty Level, over the age of 64, with less than a high school diploma and among minorities. About 49% of Covenant Health's CBSA residents have visited the dentist in the past year; lower than the national rate of 70%. In terms of regular dental checkups, 41.1% have had a dental cleaning in the last year. Since 2007, the proportion of children who have visited the dentist in the last year has increased in the CBSA going from 76.9% to 85.1%. This fares better than the nation at 79.2%.

When comparing the 2007 PRC study to the 2012 PRC study, Covenant Health's CBSA has experienced an increase in uninsured. Uninsured rates increased from 26.7% in 2007 to 33.1% in 2012. The proportion of those with a specific source of ongoing care decreased from 82.4% to 65.2%. On the other hand, fewer individuals in the CBSA report access difficulties (34.9% in 2012 compared to 37.2% in 2007). Populations that fare worse in these indicators include those living below Federal Poverty Level, with less than a high school diploma, those below the age of 40 years, and minorities

Appendix 1: Community Input

Public Health or Other Departments or Agencies

Organization	Nature of Community Input
Texas Health and Human	Provided guidance state and regional
Services Commission	health priorities and information
	concerning Medicaid and the impact of
	healthcare reform on Texas
Texas Tech University Health	Shared information concerning health
Sciences Center	care reform, growing needs of the
	elderly population, information about
	the expansion of a local Federally
	Qualified Health Center, information
	concerning the needs of the uninsured
	and low income, information
	concerning mental health assets and
	needs in the community
Community Health Center of	Shared information about the needs of
Lubbock	low-income and uninsured including
	information about diabetes, obesity
	and mental health
Lubbock Children's Health	Provided input about Medicaid and
Clinic	CHIP, teen pregnancy, adolescent
	mental health needs, and current asset
	for children's health in the community
Amerigroup/Children's	Medicaid and CHIP information
Medicaid	
STARR Care	Mental health issues and gaps in
	service, dental needs for adults and
	elderly, general health needs
Managed Care	Provided input on mental health and
	substance abuse issues

Appendix 1: Community Input (continued)

Community Leaders and Representatives

Nature of Community Input
General information about community
needs with emphasis on very low
income, unemployed and minority
populations
Provided county level statistics for food
insecurity rates and poverty rates
Women's Health
Needs of minority populations in East
Lubbock Neighborhoods
Needs of minority populations in East
Lubbock Neighborhoods
Medicaid and CHIP programs
Information on mobile medical clinic in
Midland, TX
General health and economic needs of
primarily minority neighborhood
Childhood obesity programs available
to local school districts
General community needs information
Needs for young families and children,
mental health needs
Needs in East Lubbock neighborhoods
including access to care and
educational needs
Provided information about programs
for pregnant teens, young moms and
families
General health issues and needs in the
Lubbock area
Health needs for women and children,
mental health needs

Appendix 1: Community Input (continued)

Others which Represent the Broad Interests of the Community

Organization	Nature of Community Input
Lubbock City Council	Shared observations of needs of local community groups
Lubbock Independent School	Needs of families and children,
District	homeless, food needs, obesity reduction needs
Region 17 Education Service Center	Needs for ESL adults and their families, medical literacy issues, access issues for
Center	low income, dental needs for adults
South Plains Association of	General health and community needs
Governments	
YWCA	Women and Children's Health issues,
	cancer after care, health screenings

Contracted Third Party

Organization

Professional Research Consultants (PRC) – professional healthcare research firm located in Omaha NE with over 34 years of healthcare research experience

Appendix 2: Major Healthcare Facilities within Service Area

Name	Address	Description of Services Provided		
Larry Combest Health and Wellness Center (FQHC)	301 40th St. Lubbock TX 79404	Primary medical care services for underserved		
Lubbock Children's Health Clinic	302 N. University and 3101 Redbud, Lubbock TX	Care for medically underserved children in Lubbock		
Lubbock Impact Free Clinic	2707 34 th St Lubbock, TX 79410	Free medical and dental clinic 4 hours/one day a week for uninsured		
Covenant Medical Center	3615 19 th St Lubbock, TX 79410	Region's largest health system full service hospital		
Covenant Children's Hospital	4012 22 nd Pl Lubbock, TX 79410	Region's only Children's hospital		
Covenant Medical Group	Multiple Clinic Locations	Multiple specialty medical group		
STARCARE	Multiple Locations	Provides services for adults, children and adolescence who have a diagnosis of mental illness, substance abuse or development disabilities		
University Medical Center	602 Indiana Ave Lubbock, TX 79415	Full service county hospital and primary teaching hospital for TTUHSC		
Community Health Center of Lubbock (FQHS)	Multiple Clinic Locations	Comprehensive medical, dental and mental health services for all ages		
Texas Tech University Medical School Clinics	Multiple Clinic Locations	Primary care and specialty care		
Managed Care Center	1715 26 th St Lubbock, TX 79411	Substance abuse/chemical dependency services		
Physicians Network Services	Multiple Clinic Locations	Multiple specialty medical group		

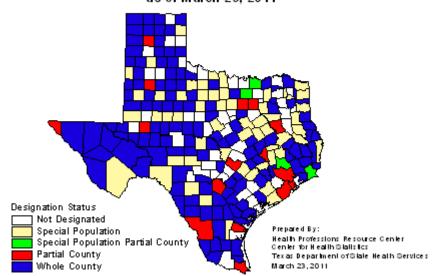
Appendix 3: Medically Underserved Area

County in Covenant Health Community Benefit Service Area	Most Recent IMU Score *
Lubbock County (Partial MUA)	
East Lubbock	58.80
Dawson	50.0
Floyd	41.80
Lamb	51.80
Lynn	35.30

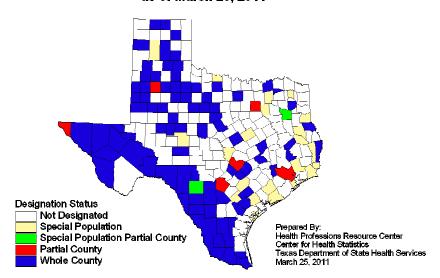
^{*}Medically Underserved Areas/Populations are areas or populations designated by HRSA as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population. Health Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary medical care, dental or mental health providers and may be geographic (a county or service area), demographic (low income population) or institutional (comprehensive health center, federally qualified health center or other public facility). Reference: U.S. Department of Health and Human Services http://muafind.hrsa.gov/

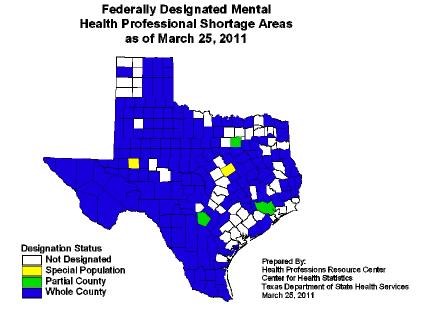
Appendix 4: Health Professions Shortage Area





Federally Designated Dental Health Professional Shortage Areas as of March 25, 2011

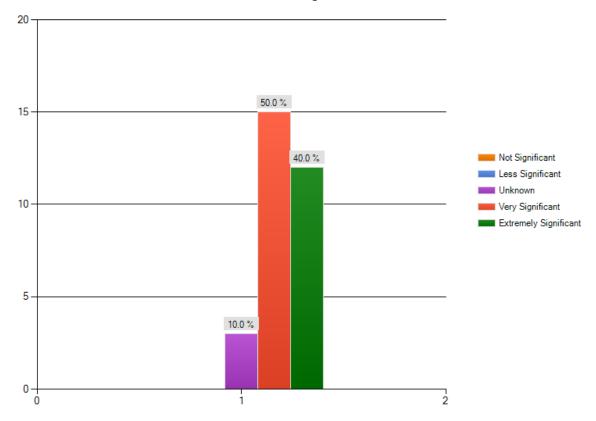




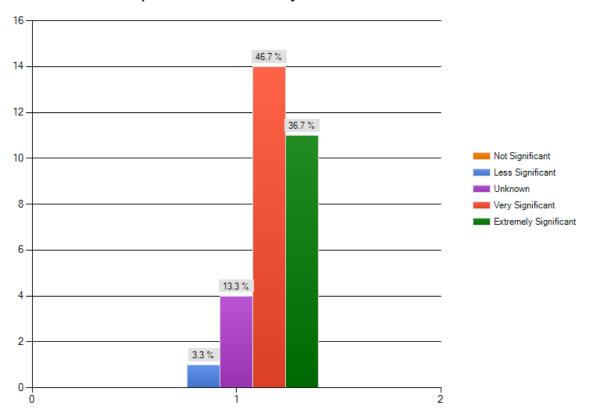
Reference: U.S. Department of Health and Human Services Shortage Designation Branch - Federal HPSA database

Appendix 5: Healthcare Provider Survey Data

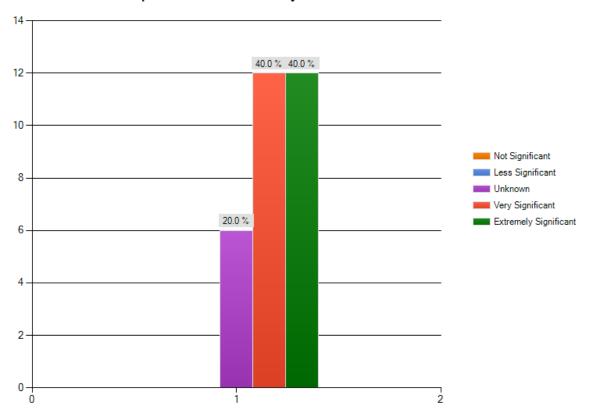
How significant is the health issue of diabetes for low-income families and individuals in Lubbock and the surrounding communities?



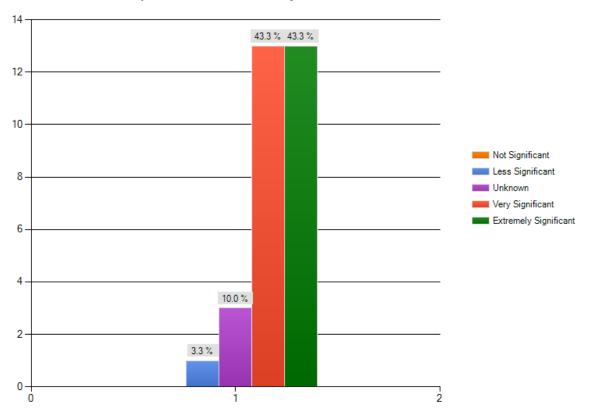
How significant is the health issue of obesity for low-income persons in our community?



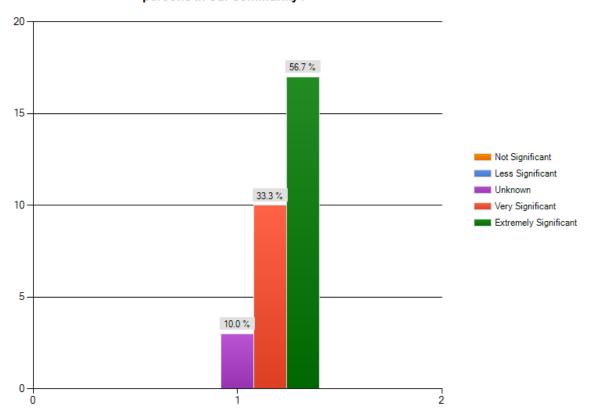
How significant is the need for access to dental care for low-income persons in our community?



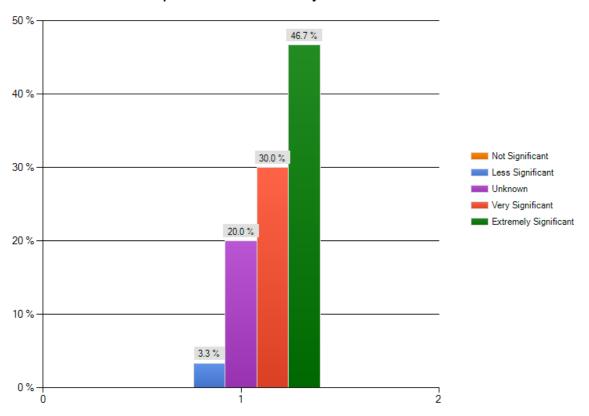
How significant is the health issue of heart disease for low-income persons in our community?



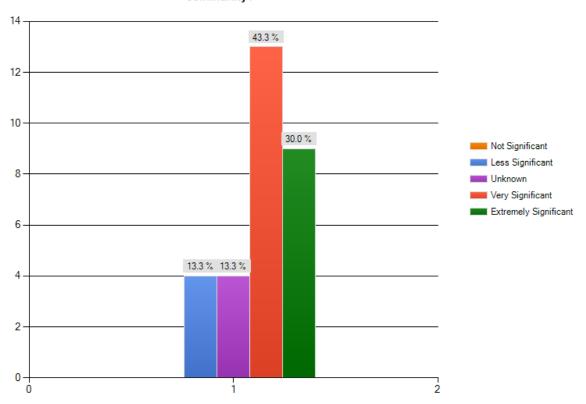
How significant is the issue of mental health for low-income persons in our community?



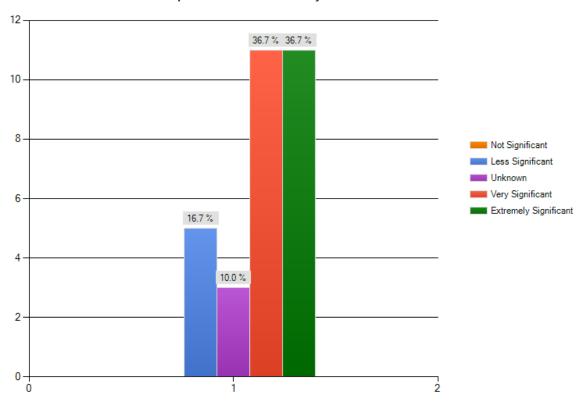
How significant is the need for substance abuse assistance for lowincome persons in our community?



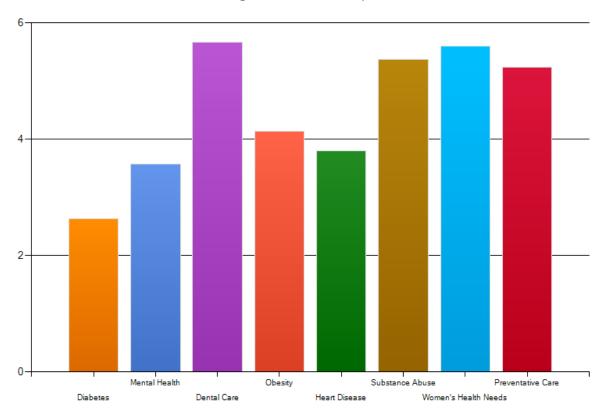
How significant are women's health issues such as access to annual screenings and preventative care for low-income women in our community?



How significant is the need for access to preventative care such as cancer screenings, vaccination clinics, health education/awareness for low-income persons in our community?



Please rank the needs from greatest need to least need (one as the greatest need and eight as the least need).



Appendix 6: County Health Rankings

	Lubbock County	Error Margin	Texas	National Benchmark*	Trend	Rank (of 232)
Health Outcomes						159
Mortality						117
Premature death	8,190	7,815-8,565	6,928	5,317	≈	
Morbidity						195
Poor or fair health	17%	15-19%	18%	10%		
Poor physical health days	3.7	3.3-4.1	3.7	2.6		
Poor mental health days	3.1	2.7-3.5	3.3	2.3		
Low birth weight	10.4%	10.1-10.8%	8.4%	6.0%		
Health Factors					·	82
Health Behaviors						117
Adult smoking	21%	18-24%	18%	13%		
Adult obesity	27%	25-30%	29%	25%	≈	
Physical inactivity	26%	24-28%	25%	21%	≈	
Excessive drinking	16%	13-19%	16%	7%		
Motor vehicle crash death rate	16	14-18	15	10		
Sexually transmitted infections	657		476	92		
Teen birth rate	58	57-60	60	21		
Clinical Care		<u>'</u>	·	<u> </u>	<u>.</u>	24
Uninsured	23%	21-24%	26%	11%		
Primary care physicians**	1,387:1		1,766:1	1,067:1		
Dentists**	2,190:1		2,200:1	1,516:1		
Preventable hospital stays	75	72-79	72	47	≈	
Diabetic screening	83%	80-86%	82%	90%	≈	
Mammography screening	63%	59-66%	61%	73%	≈	
Social & Economic Factors						139
High school graduation**	85%		86%			
Some college	63%	60-65%	57%	70%		
Unemployment	6.1%		7.9%	5.0%	≈	
Children in poverty	26%	21-31%	27%	14%	≈	

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	Lubbock County	Error Margin	Texas	National Benchmark*	Trend	Rank (of 232)
Inadequate social support	21%	18-24%	23%	14%		
Children in single-parent households	36%	33-39%	33%	20%		
Violent crime rate	841		483	66		
Physical Environment	'		'	<u>'</u>	'	110
Daily fine particulate matter	9.7	9.6-9.9	10.2	8.8		
Drinking water safety	5%		6%	0%		
Access to recreational facilities	10		7	16		
Limited access to healthy foods**	10%		9%	1%		
Fast food restaurants	61%		52%	27%		

Source: www.countyhealthrankings.org

^{* 90}th percentile, i.e., only 10% are better.

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data