

Community Health Implementation Plan

CHI St. Luke's Health Memorial Market Lufkin, Livingston, & San Augustine 2019







Approved by the Board of Directors on October 28, 2019

Mission and Vision of Catholic Health Initiatives

Mission

The Mission of Catholic Health Initiatives is to nurture the healing ministry of the Church, supported by education and research. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

CHI St. Luke's

Vision

Our Vision is to live up to our name as one CHI:

- Catholic: Living our Mission and Core Values.
- *Health*: Improving the health of the people and communities we serve.
- *Initiatives*: Pioneering models and systems of care to enhance care delivery.

Core Values

The foundation of our organization is comprised of four key pillars (our core values):

- *Reverence*: Profound respect and awe for all of creation, the foundation that shapes spirituality, our relationships with others and our journey to God.
- *Integrity*: Moral wholeness, soundness, fidelity, trust, truthfulness in all we do.
- *Compassion*: Solidarity with one another, capacity to enter into another's joy and sorrow.
- *Excellence*: Preeminent performance, becoming the benchmark, putting forth our personal and professional best.

Community-Focused

Fostering healthy community is a central focus of the healing ministry of Jesus. Servant leadership demands that we prioritize hospitality, care, unity, and good neighboring as it aligns with the Gospel. Our aim is to be deeply imbedded within our community by providing support and service in the utmost regard. Continuing our efforts as a non-profit healthcare provider, we seek to offer quality healthcare for all people – especially the poor and vulnerable. In addition, we champion the work of other non-profit organizations through sponsorship and collaboration as we seek to make our community a better place to work and live.

Intro to the Community Health Implementation Plan

Ministry Priority

In alignment with CHI St. Luke's organizational commitment to creating healthier communities in Deep East Texas, Assessment planning was initiated in November 2018, data collection began in January 2019, and the final report was completed in March 2019. The Board of Directors approved the final revision of the CHNA in June 2019.

Non-Profit Accountability

The 2019 CHI St. Luke's Community Health Needs Assessment (CHNA) was conducted in compliance with the nationally-mandated Patient Protection and Affordable Care Act for nonprofit hospitals, which occurs on a three-year cycle.

Research Details

The 2019 CHI St. Luke's Health-Memorial Regional Health Assessment (conducted by Texas A&M's Center for Community Health Development - https://cchd.us/) combined data which comes from existing sources, known as secondary data, with qualitative data collected through community discussion groups with a broad cross-section of community members, and interviews with key community stakeholders. Collectively, this data is used to describe key characteristics of the population, the most prevalent local health conditions and issues, and the availability of health care resources.

The information from community discussion groups (CDGs) and secondary data analysis can be used by St. Luke's Health and other community organizations as a road map to determine: 1) local priority issues; 2) available or needed local resources to help address identified priority issues; and 3) how and with whom to work to address community issues and/or to take advantage of community opportunities to improve population health.

Implementation Plan Process

The Community Health Implementation Plan Process is comprised of four strategic stages:

- Assessment Survey the immediate and surrounding communities in order to determine prevalent needs and social determinants of health.
- Strategy The Senior Management team brainstorms and creates a tentative action plan for addressing these needs over the course of the three-year cycle.
- Action Throughout the duration of the three-year cycle, the Senior Management team initiates deliverables, fosters collaboration, updates and tracks the progress of the plan.
- Reporting In May, CHI St. Luke's will report our involvement and spending for the plan.

Implementation Plan Philosophy and Rationale

Philosophy

- *Commonality*. Since the Memorial Market serves a greater population spanning across counties and communities, CHI St. Luke's Memorial will be focus on the common, overlapping health needs shared among the three primary communities of Lufkin, Livingston, and San Augustine.
- *Tangibility*. Since the needs expressed in the assessment are long-standing, complex, and systemic issues, efforts in moving the needle toward progress must be both tangible and collaborative. CHI St. Luke's also chose to focus on the key issues related to health.
- *Adaptability*. CHI St. Luke's expects our initial solutions and deliverables to evolve, adapt, and be refined over the course of the three year cycle.

Approach

Our Senior Management Team is committed to ensuring that the Community Health Implementation Strategy is not merely a project but rather, the actual culture of our organization. Our aim is to reach out deeply within our organization but also widely into our community as well. Community Health Implementation Strategy is something we desire every employee to champion. Our Senior Management Team is committed to total transparency both within and outside the walls of our organization as it relates to our touch points with the community.



COMMUNITY BENEFIT

IN-HOUSE APPROACH

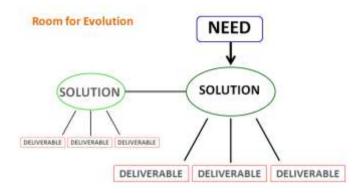
- Ownership by Senior Team
- Regular Visibility & Tracking
- > 3-Year Cycle Rhythm
- External Transparency
- Internal Culture

Process

The basic strategic framework for creating the action plan dials in on three specific elements: the *needs* (as it is addressed in the CHNA), the *solution*s (drafted from our Senior Management Team), and the *deliverables* (drafted in collaboration with our Senior Team and community partnerships).



As mentioned above, CHI St. Luke's fully anticipates both the solutions and deliverables to morph with time as we uncover new or more accurate needs or as our plan evolves.



Overtime, our initial plan would evolve as a result of actively engaging with both the CHNA as well as the consistent efforts toward creating a progressively healthier community.



The key is to maintain momentum as we conduct this plan and thus to further benefit the community.

Population Served

St. Luke's maintains hospitals in Angelina, Polk, and San Augustine counties, and clinics in Angelina, Houston, Jasper, Polk, Sabine, and San Augustine Counties.

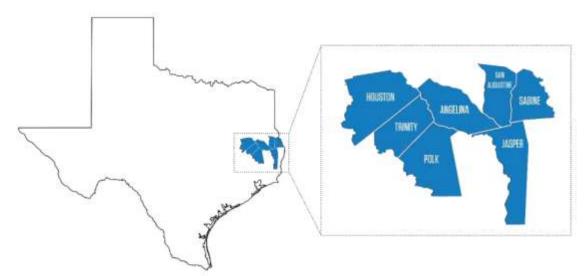


Figure 1. Map of CHI St. Luke's Health Assessment Region

Summary of the Assessment Findings

Health Need #1 - Insufficient transportation in accessing care for residents.

- In every community, public transportation was described as inadequate.
- Angelina County was the only county to list public transportation as an option and this service is only available in Lufkin and Diboll.
- Individuals living in the more remote areas of the region reported the travel approximately 50-60 miles to obtain medical care, with some residents in Jasper County finding it easier to travel to Beaumont or Louisiana for care.
- Residents living in the southern half of Jasper County often travel to Beaumont to receive health care.

Health Need #2 – The rural communities face substantial disparities in access to resources and services, as well as in health outcomes.

- With respect to health behaviors such as smoking, obesity, food environment, physical activity, substance use, and reproductive health, Angelina County was ranked last in Texas.
 Simultaneously, Angelina County was ranked high for clinical care, coming in 50th out of 242 counties.
- Throughout the region, diabetes was an issue with current prevalence rates higher in all counties than Texas.

- Mortality rated health status indicators reveal a strong disparity in deaths to Blacks in Angelina, Sabine, San Augustine, and Trinity Counties, with rates more than double that of the state of Texas.
- Several counties in the St. Luke's assessment region have the highest rates of cancer in Texas,
 often landing in the top five or top 10 highest rates of morbidity and/or mortality for various types
 of cancers.

Health Need #3 - Mental health needs exceed the resources and services currently available.

- Although the region had notable mental health facilities located in every county, with the
 exception of Trinity County, the demand for services largely exceeds the capacity available.
- With limited facility space and the lack of transportation services, law enforcement resources were reported as often overburdened by caring for mental health patients. They are often called on to transfer patients to county or state facilities which may take hours in drive and wait time.

Health Need #4 – Substance abuse, particularly methamphetamine and opioid use are significant concerns.

- Individuals who have substance abuse disorder are often also diagnosed with mental health disorders and vice versa. This co morbidity increases the need for both substance abuse treatment and mental health care in the region.
- The unique landscape of the region provides users with remote areas in which to participate in drug abuse and production.
- Methamphetamine use was considered the most problematic of all substance abuse in Houston and Jasper Counties and was repeated in many CDGs.

Link to the Assessment

https://www.chistlukeshealthmemorial.org/about/health-needs-assessment

| CHI St. Luke's Healthy Communities Impleme | entation Strategy 2019 – 1 st Evolution | | |
|---|---|--|--|
| Lufkin, Livingston, and San Augustine | | | |
| Restricted Transportation | | | |
| Increase community (and patient) awareness of transportation services in our surrounding communities. | Research the full scope of transportation services including their current promotion strategy Create promotion plan and materials to better equip our patients and providers with the resources of local care etc.) in English and Spanish | | |
| Help increase Medicaid transportation service provision in San Augustine | Partner with Medicaid to increase services provided in San Augustine Explore creation of benevolent-based rideshare programming | | |
| Awareness/Access of Resources | | | |
| Focus on preventative health measures through children education | - Explore partnership with local schools Target school-age children and their parents/ guardians for primary/special educational efforts. Reach out to the school districts to help meet their needs for school-based health education | | |
| Raise community awareness for preventative lung cancer measures Serve at-risk mother population through the implementation of MFM services | Increase physician referrals to additional services including promotion/partnership of smoking cessation classes Increase information on web page/social media outlets about health services and educational opportunities in our community including outreach | | |
| | - Launch MFM services in our region | | |
| Mental Health Needs Access and Resourcing | | | |
| Help increase community awareness of available resources | - Continue and expand on outreach through educational events and strategic promotion | | |
| Help increase community access to mental health services | - Partner with Burke Center Mobile Response services by increasing reach across counties | | |
| Strengthen support and partnership with Burke Center through strategic services | - Explore innovation of new treatment and services through physician referrals | | |
| Substance Abuse | | | |
| Raise the importance of the prevention of substance abuse through healthy living coping strategies | Refocus our education toward opioid alternativesIncrease healthier referral optionsExplore community education through our three facilities | | |
| Increase collaborative partnerships with local | - Explore partnership with ADAC | | |
| taskforces including ADAC | - Assist ADAC in opioid grant initiative, research, and | | |

- Assist ADAC in opioid grant initiative, research, and implementation plan