



2019

Community Health  
Needs Assessment

 HENDRICK  
HEALTH SYSTEM

crescendo 



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## Introduction and Background

Every three years, Hendrick Health System conducts an assessment of the wellness and health needs of community members, as well as of the available resources to fulfill their needs. The resulting document, which follows, is the Community Health Needs Assessment. It is used as a blueprint to develop or support programs and services aimed at fulfilling the identified needs.

Internal Revenue Code (IRC) Section 501(r), requires non-profit healthcare organizations maintain compliance with federal tax-exemption requirements by assessing the health needs of their communities and adopting implementation strategies to address identified needs. Per IRC Section 501(r), a by-product of the *Affordable Care Act*, to comply with federal tax-exemption requirements, a tax-exempt hospital facility must:

- Conduct a community health needs assessment (CHNA) every three years;
- Adopt an implementation strategy to meet the community health needs identified through the assessment;
- Report how it is addressing the needs identified in the CHNA;
- Report the rationale as to why it is not feasible for the hospital to address some identified needs.

The CHNA must take into account input from:

- Persons with special knowledge or expertise in public health;
- Persons who serve or interact with vulnerable populations;
- Persons who represent the broad interest of the community served by the health system.

In addition, the CHNA and the Implementation Plan must be made widely available to the public. To assist with this assessment and implementation process, Hendrick Health System engaged Crescendo Consulting Group (Crescendo) to conduct the formal CHNA and to help develop the Implementation Plan.

### How to Use This Study

This study provides information about the approach and findings from the Hendrick Health System Community Health Needs Assessment (CHNA). It includes a comprehensive review of health data and community input on issues relevant to community health in the Abilene and greater Taylor County region Hendrick Health System serves. The assessment covers a wide range of topics, and with community input helps to foster on-going community discussion. We invite the reader to investigate and use the information in this report to help move toward solutions, the creation of goals and the implementation of activities leading to improved community health.

## Hendrick Health System Overview

Hendrick Health System was founded in 1924 as a not-for-profit healthcare institution in response to a community need for quality healthcare. Today, Hendrick Health System includes Hendrick Medical Center, licensed for 564 beds, and a comprehensive range of healthcare services, including centers of care in women's, cancer, orthopedics, rehabilitation, neuroscience, cardiovascular, neonatal intensive care and children's services. With more than 3,500 employees, Hendrick serves 24 counties in the Texas Midwest area. The Hendrick system has also recently expanded its service area opening both the Hendrick Surgery Center and Hendrick Medical Plaza in Brownwood to increase access to care.

**Hendrick Mission** - To deliver high quality healthcare emphasizing excellence and compassion consistent with the healing ministry of Jesus Christ.

**Hendrick Vision** - To be the leading healthcare provider of choice, in our region and beyond, recognized for enhancing quality, expanding access and excelling in patient engagement.

### Core Values

- **Integrity:** Reflect honesty, transparency and trust
- **Teamwork:** Value our diverse talents, backgrounds, ideas, and experiences to improve outcomes and create solutions
- **Compassion:** Treat patients with dignity, sensitivity and empathy
- **Excellence:** Demonstrate efficient stewardship of our resources that consistently results in quality improvement and outstanding customer service
- **Positive Attitude:** Expect the best possible outcomes while performing responsibilities and interacting with patients, visitors and fellow employees
- **Engagement:** Cultivate an environment of commitment, communication, personal and professional growth, and a shared vision for success

## Summary of Activities Since the Prior Community Health Needs Assessment and Implementation Plan

In 2016, Hendrick Health System completed a CHNA and Implementation Plan in which three core areas of focus and related goals were identified. Since that time, Hendrick has actively worked to address needs identified in the 2016 CHNA. They are listed below.

- **Creating A Culturally Sensitive Community**  
Goal: To increase education/public awareness of cultural differences in our community to improve relationships, as well as access to healthcare and social services for populations in need.
- **Improving Access to Healthy Foods And Nutritional Knowledge**  
Goal: To increase public awareness of the importance of healthy eating and nutrition to improve the overall health of the community.
- **Addressing Mental Health In Our Community**  
Goal: To increase community access to educational materials and resources providing assistance with mental health needs.

The 2016 Implementation Plan and activities conducted to address areas of focus and work toward goals is shown in Appendix E.

## Highlights of the 2019 Community Health Needs Assessment

Several methodologies were combined to develop a comprehensive and prioritized list of community needs – secondary research, literature review, focus group discussions, one-on-one stakeholder interviews, a review of digital and social media trends, a community survey, and a quantitative and qualitatively-based prioritization process. The resulting prioritized list of community needs falls into three broad categories: Access to Appropriate Healthcare, Crisis Services, and Awareness / Prevention / Screening.

The breadth of the categories of needs allows Hendrick Health System to continue (or possibly expand) successful existing programs and to develop innovative approaches to possibly addressing multiple needs simultaneously. The list of the top need categories and more detailed opportunities for improvement are shown below.

Prioritized Community Needs	
Rank	Health Need
<b>1</b>	<p><b>Access to Appropriate Care</b></p> <ul style="list-style-type: none"> <li>• Mental health and substance abuse</li> <li>• Primary care services (such as a family doctor or other provider of routine care)</li> <li>• Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers</li> <li>• Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children (including children with developmental disabilities)</li> <li>• Affordable healthcare services for individuals or families with low income (including prescription drugs)</li> <li>• Services for families facing homelessness</li> </ul>
<b>2</b>	<p><b>Crisis Services</b></p> <ul style="list-style-type: none"> <li>• Crisis or emergency care programs for mental health</li> <li>• Drug and other substance abuse early intervention services</li> </ul>
<b>3</b>	<p><b>Awareness / Prevention / Screening</b></p> <ul style="list-style-type: none"> <li>• Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare</li> <li>• Programs to help recovering drug and other substance abuse patients stay healthy</li> </ul>
<p><b>NOTE: All community needs identified in the research are important and deserve thoughtful consideration. The higher-priority ones noted above represent a consensus opinion of community members and Hendrick leadership.</b></p>	

The following information provides details regarding the Assessment methodology and results.

## Detailed 2019 Community Health Needs Assessment Report

### Assessment Methodology and Data Limitations

#### Community Health Needs Assessment Participants

Hendrick Health System reached out to a group of individuals to participate in its CHNA to contribute insight from community service organizations. Each member provided project insight, feedback regarding perceptions of area health needs, data evaluation, and other guidance during the CHNA process. The individuals had a breadth of community health vision, knowledge, and leadership to impact the well-being of the service area.

#### Methodology Components

The Hendrick Health System CHNA methodology includes a combination of quantitative and qualitative research methods designed to evaluate perspectives and opinions of area stakeholders and healthcare consumers – especially those from underserved populations. The methodology that was used helped prioritize the needs and establish a basis for continued community engagement – in addition to simply developing a broad, community-based list of needs.

The major sections of the methodology include the following:

- **Strategic Secondary Research.** This type of research includes a thorough analysis of previously published materials that provide insight regarding the community profile and health-related measures. The “Demographics and Key Indicators” table follows.
- **Qualitative Interviews and Discussion Groups.** This primary research includes discussion groups and interviews with Hendrick Health System leadership, other community service providers, and healthcare consumers who represent a span of healthcare consumers in the service area.
- **Community Survey.** Crescendo conducted an online survey with more than 380 community members. Data was analyzed, and tables / graphs were created to illuminate the results found in this report. The survey is contained in the appendices.
- **Digital and Social Media Analysis.** Crescendo examined online activity for key general health, chronic disease, and urgent health-related trends. The results highlight specific “urgent or emergent” community health topics facing the Abilene service area.
- **Two-phase Needs Prioritization Process.** Following the secondary research, qualitative interviews, focus group discussions, community survey, and social and digital analysis, a list of 34 community health issues was generated. Leadership group members participated in a two-phase prioritization process. In Phase 1, leadership group members were asked to complete a quantitative and qualitative survey in which they indicated: “What community needs require more focus and attention?” After analysis of the Phase 1 survey, leadership group members reviewed the Phase 1 responses and generated a final list of prioritized needs using a second (Phase 2) survey. Results were used to arrive at the key areas of priority emphasis.

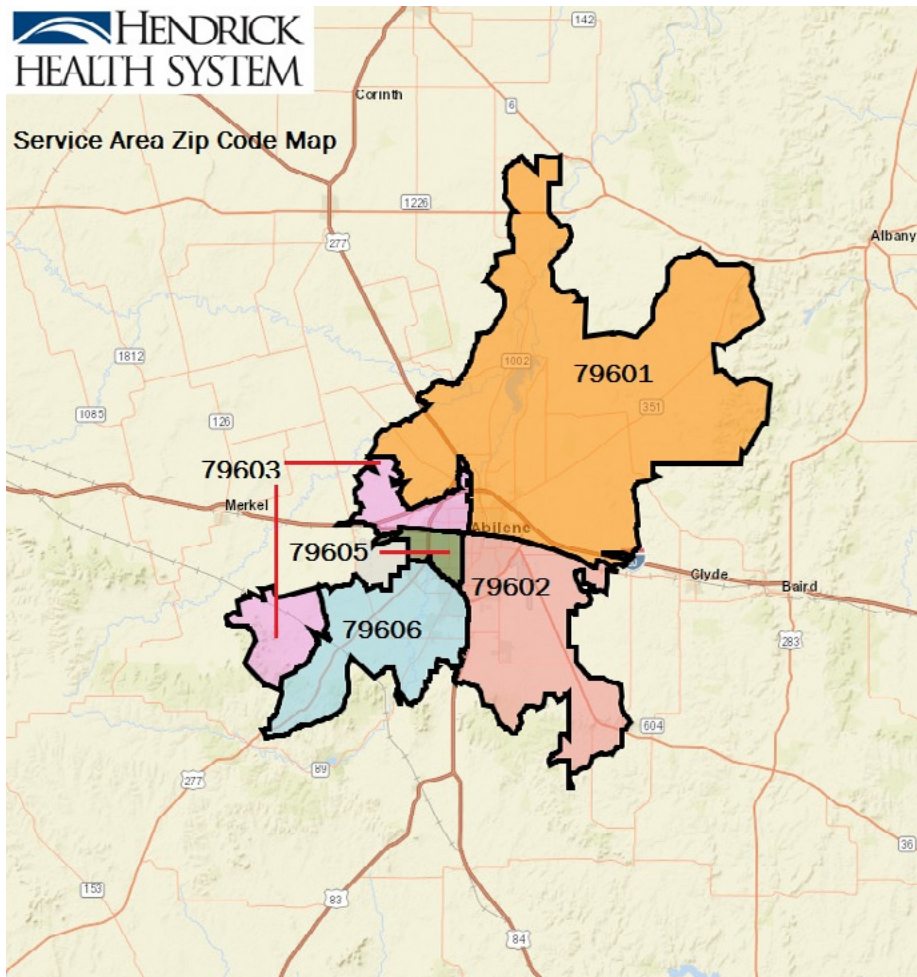


## Secondary Research

### Description of the Community Served

Hendrick Health System (Abilene, Texas) is located in Taylor County. The service area includes the following zip codes:

- 79601
- 79602
- 79603
- 79605
- 79606



The service area includes 131,783 people – over 94% of the Taylor County total (139,972). The area has a very low median age (about 32 years) and reflects high level of racial, economic, and health status diversity. The following section provides an in-depth statistical profile of the service area.

*Demographic Summary*

The table below provides an overview of some of the key demographic measures that describe the Hendrick Health System service area.

*Exhibit 1. Key Measures*

Key Measures								
Measure	United States	Texas	Taylor County	Abilene 79606	Abilene 79605	Abilene 79603	Abilene 79602	Abilene 79601
Population	330,088,906	28,954,616	139,972	26,022	29,634	25,311	24,117	26,699
Median Age	37.8	34.3	32.2	33.8	33.6	32.9	33.3	30.0
Median Household Income	\$57,652	\$57,051	\$49,161	\$60,686	\$45,043	\$38,427	\$60,957	\$38,691
<b>Race/Ethnicity</b>								
% White	70.0%	67.6%	77.1%	79.4%	76.7%	67.0%	79.4%	68.0%
% Black or African American	12.9%	12.3%	7.6%	6.7%	7.8%	11.6%	5.6%	13.9%
% Hispanic or Latino	18.3	39.7%	24.5%	15.2%	24.2%	43.4%	23.2%	25.0%
% Asian	5.7%	4.9%	2.3%	4.3%	2.0%	1.0%	2.2%	2.0%
% Native American	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	0.0%
% Other	6.0%	11.0%	8.0%	4.0%	7.0%	14.0%	7.0%	12.0%
Below Poverty	10.5%	12.4%	11.4%	7.8%	12.2%	19.0%	9.4%	12.8%
Unemployed	4.8%	4.8%	4.0%	2.4%	3.7%	5.6%	3.6%	4.8%
Households with Disability	9.0%	7.9%	10.7%	9.0%	12.1%	11.9%	9.7%	9.3%
Don't Speak English	0.9%	2.0%	0.2%	0.0%	0.3%	0.5%	0.3%	0.4%
No Vehicle	8.8%	5.5%	5.4%	5.1%	4.1%	8.0%	4.2%	6.8%
Group Quarters	2.0%	2.1%	4.0%	1.0%	2.7%	2.0%	3.0%	27.0%
Uninsured Population	10.5%	18.2%	14.6%	10.1%	15.0%	22.3%	14.2%	15.4%

**SOURCE:** ESRI Data 2018, American Community Survey 2018.

- The median age (32.2 years) in Taylor County is much younger than the Texas (and U.S.) average and may reflect enhanced needs of young families and required services for youth and young adults.

### Total Population and Age Groups

While Abilene and Taylor County have a young median age compared to Texas and the United States as a whole, parts of Abilene have seen a greater population growth in ages 65 and older. Different age groups have different health and social needs. Seniors often need more health care services and specialty providers than other age groups.

Exhibit 2. Age Demographics

Age Demographics								
Measure	United States	Texas	Taylor County	Abilene 79606	Abilene 79605	Abilene 79603	Abilene 79602	Abilene 79601
<b>2018 Population</b>	330,088,906	28,954,616	139,972	26,022	29,634	25,311	24,117	26,699
<b>19 and Under</b>	25.7%	29.1%	28.5%	27.0%	26.5%	29.7%	30.3%	20.9%
<b>20-44</b>	33.4%	35.3%	36.0%	35.7%	35.7%	33.5%	34.7%	49.1%
<b>45-64</b>	26.1%	23.9%	21.6%	22.0%	23.0%	22.4%	22.8%	18.6%
<b>65+</b>	14.9%	11.7%	13.9%	15.3%	14.3%	14.4%	12.5%	11.4%
<b>65+ Percent Change, 2010 to 2018</b>	2.0%	1.4%	0.8%	2.6%	-0.9%	0.2%	2.3%	0.9%
<b>Median Age</b>	37.8	34.3	32.2	33.8	33.6	32.9	33.3	30.0

SOURCE: American Community Survey, 2017

- Taylor County has a greater percentage of seniors (13.9%) than the state average (11.7%).
- The median ages of Abilene (33.8) and Taylor County (32.2) are lower than the state (34.3) and national (37.8) averages.
- The senior population is growing at national and local levels. But Abilene, as a whole, has experienced greater growth in senior population (2.6%) when compared with Taylor County (0.8%) and Texas at large (1.4%).
- One area of Abilene, zip code area 79605, saw its senior population decrease by 0.9%.

*Cost of Living and Wage Profile*

The cost of living in Taylor County is lower than other parts of the United States, but poverty in some parts of Abilene is comparatively high. Housing, transportation, and childcare are typically the greatest annual expense for Taylor County Residents. Residents, especially those with children, must earn significantly higher wages than the Texas minimum wage (\$7.25) to meet typical annual expenses.

*Exhibit 3. Living Wage Calculator and Annual Expenses*

Typical Expenses, Taylor County						
Annual Expenses	1 Adult	1 Adult 1 Child	1 Adult 2 Children	2 Adults	2 Adults 1 Child	2 Adults 2 Children
<b>Food</b>	\$3,573	\$5,267	\$7,929	\$6,551	\$8,154	\$10,529
<b>Child Care</b>	\$0	\$6,904	\$12,809	\$0	\$6,904	\$12,809
<b>Medical</b>	\$2,262	\$7,455	\$7,112	\$5,156	\$7,112	\$7,194
<b>Housing</b>	\$8,208	\$12,156	\$12,156	\$8,208	\$12,156	\$12,156
<b>Transportation</b>	\$4,206	\$7,664	\$9,011	\$7,664	\$9,011	\$10,425
<b>Other</b>	\$2,976	\$4,951	\$5,375	\$4,951	\$5,375	\$6,256
<b>Required annual income after taxes</b>	\$21,225	\$44,396	\$54,392	\$32,529	\$48,712	\$59,369
<b>Annual taxes</b>	\$3,532	\$7,458	\$9,276	\$5,367	\$8,243	\$10,182
<b>Required annual income before taxes</b>	\$24,757	\$51,854	\$63,668	\$37,896	\$56,955	\$69,551
<b>Living Wage</b>	\$10.62	\$22.20	\$25.80	\$8.70	\$12.19	\$14.18
<b>Poverty Wage</b>	\$5.84	\$7.91	\$9.99	\$3.96	\$5.00	\$6.03
<b>Minimum Wage</b>	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25

Living Wage Calculator. MIT. Available at [livingwage.mit.edu](http://livingwage.mit.edu)

- Housing and Transportation are typically the greatest annual expense for Taylor County Residents.
- Low wages in Taylor County can easily be outpaced by cost of living expenses.
- A household comprised of one working parent and 3 children would need to earn approximately \$12 dollars an hour to earn a “poverty wage” and \$31 dollars an hour to make a “living wage.”

*Household Income*

Within Abilene, there is great socioeconomic diversity. For example, in zip code 79606, only 6.8% of residents have an annual income of less than \$15,000. However, in zip code 79601, 17.2% of residents live on an annual income of less than \$15,000. Residents living in poverty, such as many who live on less than \$15,000 annually, may be struggling to make ends meet or have unique health care needs compare to those who make a high annual income.

*Exhibit 4. Income*

Income Breakdown								
Measure	United States	Texas	Taylor County	Abilene 79606	Abilene 79605	Abilene 79603	Abilene 79602	Abilene 79601
<\$15,000	11.6%	11.3%	12.4%	6.8%	12.2%	17.1%	11.5%	17.2%
\$15,000-\$24,999	9.8%	9.9%	11.1%	7.8%	11.4%	12.7%	10.5%	14.8%
\$25,000-\$34,999	9.5%	9.8%	11.7%	8.7%	14.6%	13.5%	9.2%	12.9%
\$35,000-\$49,999	13.0%	13.2%	15.2%	14.5%	16.6%	18.3%	10.3%	17.2%
\$50,000-\$74,999	17.7%	17.9%	19.2%	24.0%	18.3%	18.5%	18.0%	15.6%
\$75,000-\$99,999	12.3%	12.0%	11.3%	11.8%	9.7%	9.3%	15.0%	9.9%
\$100,000+	26.2%	26.0%	19.0%	26.3%	17.0%	10.6%	25.5%	12.6%

SOURCE: American Community Survey, 2017

- The most represented annual income brackets in Taylor County are households earning \$50,000-\$74,000 (19.2%) and \$100,000+ (19.0%).
- The least represented annual income bracket in Taylor County is households earning \$15,000-\$24,000 (11.1%).
- Over 35% of Taylor County households earn less than \$34,000 annually.

*Poverty Factors*

Many factors, such as education, employment status, and housing, may impact poverty. While fewer individuals in Taylor County live in poverty compared to the state average, poverty and the related care for those facing economic challenges remains a notable need in the county.

*Exhibit 5. Poverty*

Poverty Related Factors		
Measure	Texas	Taylor County
No High School Diploma	16.7%	12.5%
Unemployed	4.8%	4.0%
Living Below Poverty Level	12.4%	11.4%
Uninsured Population	18.2%	14.6%

SOURCE: American Community Survey, 2017

- More than one in ten (11.4%) residents in Taylor County live in poverty.
- Taylor County residents are less likely to experience poverty related factors than the Texas average.

*Exhibit 6. Core Poverty Measures*

Core Poverty Measures		
Measure	Texas	Taylor County
Population in Poverty	12.4%	11.4%
Under 18 Living in Poverty	21.0%	21.0%
Severe Housing Problems	18.0%	16.0%

SOURCE: American Community Survey, 2017 County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Over 20% of children in Taylor County live in poverty.
- 16% of Taylor County residents experience severe housing problems.

Hendrick Health System, Community Health Needs Assessment

### Educational Attainment

There is a strong correlation between education attainment and lifetime income potential. Those who earn only a high school diploma typically earn far less money than those with at least a college degree. Zip code 79603 is one of Abilene's poorest neighborhoods and also one of the least educated areas of the city compared to other city zip codes.

#### Exhibit 7. Education

Highest Level of Educational Attainment								
Measure	United States	Texas	Taylor County	Abilene 79606	Abilene 79605	Abilene 79603	Abilene 79602	Abilene 79601
No High School Diploma	12.3%	16.7%	12.5%	6.4%	12.5%	23.3%	10.5%	19.0%
High School Diploma or Equivalent	27.0%	25.1%	29.9%	24.8%	31.5%	36.3%	27.6%	35.0%
Some College, No Degree	20.5%	21.6%	24.5%	27.4%	24.8%	20.6%	24.0%	22.0%
Associate Degree	8.5%	7.2%	7.9%	8.4%	7.9%	6.5%	9.7%	4.6%
Bachelor's Degree	19.6%	19.2%	17.2%	21.6%	16.2%	11.2%	18.7%	12.3%
Graduate Degree	12.2%	10.2%	8.0%	11.4%	7.2%	2.3%	9.6%	7.0%

**SOURCE:** ESRI Data, 2018

- A strong correlation between education and income is apparent in Abilene; zip code area 79603, where only 2.3% of residents have earned a graduate degree, also is Abilene's poorest zip code area, with 10.6% of residents earning \$100,000+ annually.
- The most common level of education of Taylor County residents is High School Graduate (29.9%).

*Race, Ethnicity, and Gender*

Taylor County is a primarily white population with approximately a quarter of the population identifying as Hispanic or Latino. The largest percentage of Hispanic or Latino residents resides in the 79603 zip code, which is also the poorest and least educated neighborhood in Abilene. The highest percentage of white residents live in the 79606 zip code. A large Hispanic or Latino population may indicate the need for healthcare and social services available in the Spanish language or other unique needs.

*Exhibit 8. Race, Ethnicity and Gender*

Race, Ethnicity, and Gender								
Measure	United States	Texas	Taylor County	Abilene 79606	Abilene 79605	Abilene 79603	Abilene 79602	Abilene 79601
<b>Male</b>	49.2%	49.7%	48.9%	50.3%	48.8%	48.2%	47.3%	60.3%
<b>Female</b>	50.8%	50.3%	51.1%	49.7%	51.2%	51.8%	52.7%	39.7%
<b>White</b>	69.9%	67.6%	77.1%	79.4%	76.9%	67.0%	79.4%	68.0%
<b>Black/African American</b>	12.9%	12.3%	7.6%	6.7%	7.8%	11.6%	5.6%	13.9%
<b>Hispanic or Latino</b>	18.3%	39.7%	24.6%	15.2%	24.2%	43.4%	23.2%	24.8%
<b>Asian</b>	5.7%	4.9%	2.3%	4.3%	2.0%	1.0%	2.2%	2.0%
<b>Other</b>	6.0%	10.0%	8.0%	4.0%	7.0%	14.0%	7.0%	12.0%

**SOURCE:** ESRI Data, 2018

- Taylor County is comprised of 77.1% white residents, with Hispanic or Latino residents making up the second highest ethnic group (24.6%).
- Abilene’s zip code area 79603 has a disproportionately high percentage of Hispanic or Latino residents (43.4%) when compared with other Abilene tracts.



### General Health Status

General Health Status measures adults ages 18 and older who self-report having poor or fair health after being asked the question, “Would you say that in general your health is excellent, very good, good, fair, or poor?” Taylor County residents have self-identified as having slightly poorer health than Texas residents for both physical and mental health. General Health Status may provide insight on how local residents view their own health and what the health of the community is as a whole.

#### Exhibit 9. Health Status Indicators

Population Health and Lifestyle Indicators				
Measure	United States	Texas	Taylor County	Taylor County Variance (%) to Texas
Poor or Fair Health Status <sup>1</sup>	17%	18%	19%	5.6%
Poor Physical Health Days	3.9	3.5	3.9	11.4%
Poor Mental Health Days	3.9	3.4	3.6	5.9%
Preventable Hospital Stays <sup>2</sup>	4,648	4,966	4,187	-15.7%

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Taylor County has slightly poorer physical health ratings than the Texas average, averaging higher rates of poor or fair health status (Taylor County 19%, Texas 18%) and more poor physical health days per month (Taylor County 3.9, Texas 3.4).
- However, Taylor County hospitals average less preventable stays (4,187) than the national (4,648) and state (4,966) average.

<sup>1</sup> Poor or Fair Health measures the percentage of adults in a county who consider themselves to be in poor or fair health.

<sup>2</sup> Per 100,000 Population

### More Common Causes of Death

Overall, Taylor County has a higher death rate than Texas. Similar to the state, heart disease and cancer are the top leading causes of death. Taylor County has a disproportionately high number of deaths due to Alzheimer’s Disease, influenza and pneumonia, and suicide. The leading causes of death for Taylor County may help indicate what healthcare services and providers are needed for the county.

#### Exhibit 10. Leading Causes of Death

Leading Causes of Death – Rates Per 100,000 Population <sup>3</sup>			
Measure	Texas	Taylor County	Taylor County Variance (%) to Texas
All Causes	749.2	841.9	12.4%
Heart Disease	170.7	167.9	-1.6%
Cancer	156.1	163.2	4.5%
Stroke	40.1	53.0	32.2%
Alzheimer’s Disease	24.4	43.8	79.5%
Chronic Lower Respiratory Disease	42.3	43.2	2.1%
Accidents	36.8	33.1	-10.1%
Septicemia	16.4	22.3	36.0%
Influenza and Pneumonia	14.4	20.2	40.3%
Suicide	11.6	17.3	49.1%

SOURCE: Texas Department of State Health Services, <http://healthdata.dshs.texas.gov/HealthFactsProfiles>

- Suicide rates in Taylor County are nearly 50% higher than the Texas average.
- The death rates from stroke, septicemia, and influenza / pneumonia are more than 30% above the Texas average.
- Taylor County has a much higher (79.5%) rate of deaths due to Alzheimer’s (43.8) than the state average (24.4).
- In total, Taylor County has a higher death rate (841.9) than the state average (749.2), and, except for heart disease, the only cause of death which occurs at a lower rate in Taylor County than the state average is accidental death (Taylor County 33.1, Texas 36.8).

<sup>3</sup> Per 100,000 Population

### Chronic Disease Incidence

Individuals living with chronic diseases often require more specialized healthcare services and providers than those who do not have chronic diseases. Taylor County has a high percentage of residents living with arthritis, COPD, and depression.

Exhibit 11. Chronic Disease Incidence

Chronic Disease Incidence			
Measure	Texas	Taylor County	Taylor County Variance (%) to Texas
Alcohol Abuse	2.3%	2.6%	13.0%
Alzheimer's Disease/Dementia	12.8%	14.0%	9.4%
Arthritis	34.3%	38.7%	12.8%
Asthma	5.0%	5.2%	4.0%
Atrial Fibrillation	7.7%	8.3%	7.8%
Cancer	7.5%	7.2%	-4.0%
COPD	11.4%	13.4%	17.5%
Chronic Kidney Disease	26.4%	27.1%	2.7%
Depression	17.9%	20.4%	14.0%
Diabetes	29.1%	28.4%	-2.4%

**SOURCE:** Centers for Medicare and Medicaid Services, Chronic Conditions Prevalence, <https://cms-oeda.maps.arcgis.com/apps/MapSeries/index.html?appid=2653fc1758474036a46c1a2f47d4d243>

- Taylor County averages higher rates of chronic disease than Texas across all categories, except for diabetes (Taylor County 28.4%, Texas 29.1%) and cancer (Taylor County 7.2%, Texas 7.5%).
- While Taylor County averages a slightly lower rate of cancer (7.2%) than the Texas average (7.5%), Taylor County has a higher cancer deaths rate (163.2) than the Texas average (156.1).

## Health and Health Care

Access to affordable health care is important for individuals to remain both physically and mentally healthy. Overall, Taylor County has more providers per 100,000 than the state average. Additionally, Taylor County has a higher number of individuals, both adults and children, with health insurance coverage.

*Exhibit 12. Access to Care*

Providers Concentration <sup>4</sup>		
Measure	Texas	Taylor County
Primary Care Physicians	1,660:1	1,450:1
Dentists	1,760:1	1,270:1
Mental Health Providers	960:1	670:1

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Taylor County has a better ratio of primary, dental, and mental health providers to population than the state average.

*Exhibit 13. Health Insurance*

Health Insurance Coverage		
Measure	Texas	Taylor County
Adults with Medical Insurance	81.8%	85.4%
Children with Medical Insurance	88.0%	92.0%
Uninsured Adults	18.2%	14.6%
Uninsured Children	12.0%	8.0%

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Over 90% of children in Taylor County have health insurance coverage.
- More residents of Taylor County have health insurance coverage compared to the Texas average.

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<sup>4</sup> Ratio of population to provider

### Health-Related Screenings and Other Behaviors

Routine preventative health screenings and services, such as mammograms and flu shots, are important preventative services to ensure individuals and the community as a whole are healthy. Approximately 75% of all Taylor County residents have seen their healthcare provider within the past 12 months indicating that most residents are accessing healthcare services.

Exhibit 14. Health Behaviors

Health Behaviors		
Measure	Texas	Taylor County
Mammogram Screening	37.0%	38.0%
Influenza Vaccinations	43.0%	40.0%
Preventable Hospital Stays <sup>5</sup>	4,966	4,187
Visited Doctor in Last 12 Months	74.9%	75.4%

SOURCE: ESRI Data 2018, County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Many health behaviors in Taylor County are similar the state averages, yet Taylor County has a much lower rate of preventable hospital stays.

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<sup>5</sup> Per 100,000 Medicare Enrollees

### Substance Use

Substance use disorders are increasingly becoming a top healthcare need across the United States. Since 2016, the Opioid epidemic has brought prescription drug addictions and overdose death rates to the forefront. While Texas might have one of the lowest opioid overdose death rates in the country<sup>6</sup>, Texas and Taylor County are still faced with increasing substance use issues.

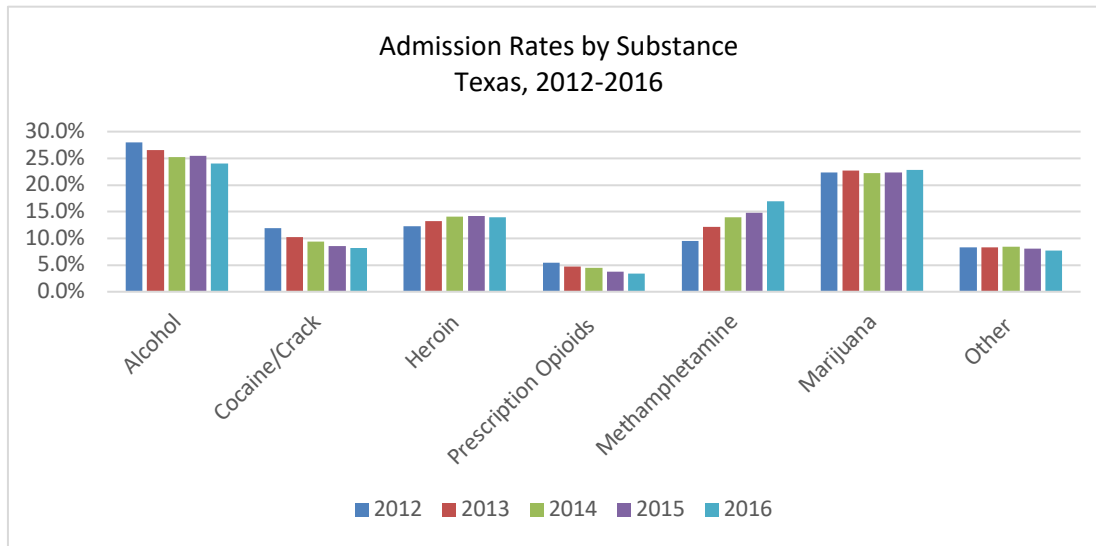
Exhibit 15. RX Drug Use

Prescription Drug Use		
Measure	Texas	Taylor County
Using RX Drugs for Depression	7.0%	6.3%
Using RX Drugs for Anxiety or Panic Attacks	4.8%	5.0%
Used RX Drug for Asthma	4.0%	4.4%
Used RX Drug for Diabetes (Insulin Dependent)	1.8%	2.1%
Used RX Drug for High Blood Pressure	12.4%	13.0%
Used RX Drug for High Cholesterol	8.2%	9.0%

SOURCE: ESRI Data 2018

- Taylor County averages a higher rate of residents using prescription drugs for all measures except depression.
- Over one in ten (13.0%) Taylor County residents take prescription drugs for high blood pressure.

Exhibit 16. Substance Misuse



SOURCE: UT Austin School of Social Work, Substance Abuse Trends in Texas Report, 2017 <https://socialwork.utexas.edu/dl/ari/texas-drug-trends-2017.pdf>

- Methamphetamine use is on the rise in Texas.
- Alcohol related substance use admissions have gone down slightly since 2012.

<sup>6</sup> National Institute on Drug Abuse. Texas Opioid Summary. <https://www.drugabuse.gov/opioid-summaries-by-state/texas-opioid-summary>

*Exhibit 17. Select Substance Use Measures*

Select Substance Use Measures		
Measure	Texas	Taylor County
Alcohol Abuse	19%	19%
Current Smokers	14%	18%
Alcohol Related Driving Deaths	28%	19%

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- While Taylor County and Texas both average the same rates of alcohol abuse (19%), Texas has a much higher rate of alcohol related driving deaths (28%) than Taylor County (19%).
- One in five (18%) Taylor County residents is a smoker.

*Mental Health Profile*

Often stigmatized, mental health issues are slowly becoming a public health crisis. With the rise in substance use disorders, drug overdose deaths, and suicide deaths, mental health issues are becoming some of the top health needs in communities across the country. While Taylor County has a higher number of mental health providers per 100,000 residents, the suicide rate is higher than both the state and national average.

*Exhibit 16: Mental Health*

Mental Health			
Measure	United States	Texas	Taylor County
Using RX Drugs for Depression	6.3%	7.0%	6.3%
Using RX Drugs for Anxiety or Panic Attacks	4.7%	4.8%	5.0%
Poor Mental Health Days <sup>7</sup>	3.9	3.4	3.6
Mental Health Providers <sup>8</sup>	970:1	960:1	670:1
Suicide Rate <sup>9</sup>	11.6	11.6	17.3

SOURCE: ESRI Data 2018, County Health Rankings, <http://www.countyhealthrankings.org/app/texas/2019/measure/factors/62/map>  
Centers for Disease and Control, <https://www.cdc.gov/vitalsigns/suicide/index.html>

- Taylor county averages a higher suicide rate (17.3) than the Texas (11.6) and national average (13.0).
- However, Taylor County residents use prescription drugs for depression at the same rate (6.3%) as the national average, and a lower rate than the Texas average (7.0%).
- Taylor County has a higher rate of mental health providers (670:1) than the U.S. (970:1) and Texas rates (960:1).

<sup>7</sup> Reported Per Month

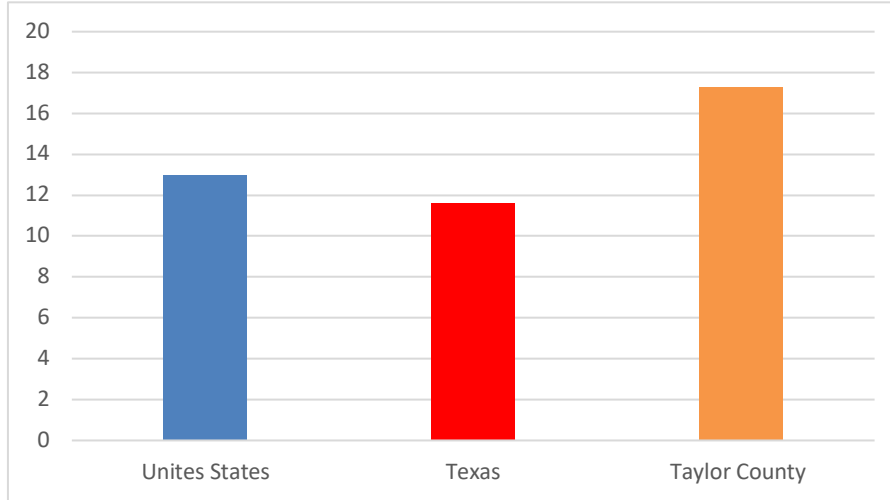
<sup>8</sup> Ratio of Population to Mental Health Providers

<sup>9</sup> Per 100,000 Population

### Suicide Rates

From 1999 through 2017, the age-adjusted suicide rate in the United States increased by 33 percent<sup>10</sup>. The suicide rate in Texas, especially in more rural areas, has been increasing since 2000. Taylor County has a higher rate of suicide compared to Texas and the United States.

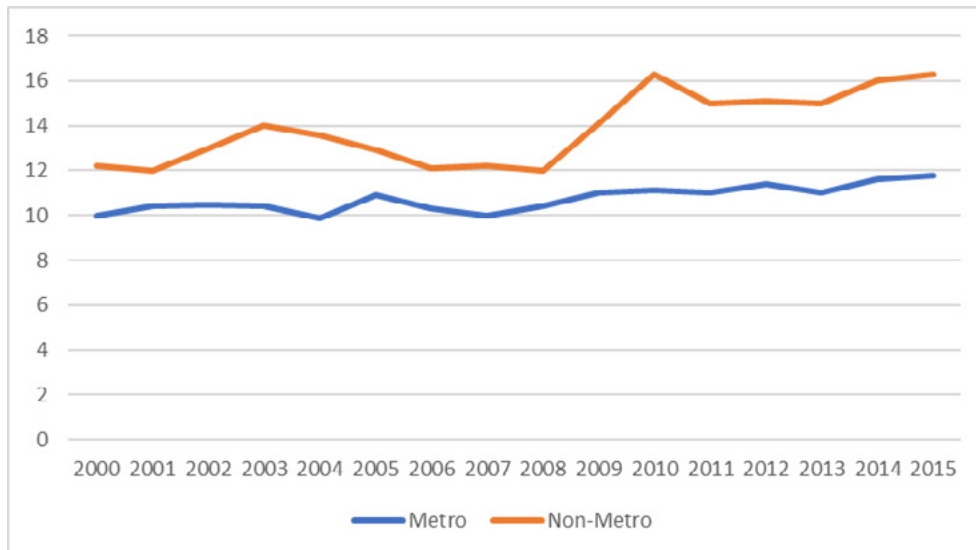
Exhibit 18. Suicide Rates, 2017



**SOURCE:** Centers for Disease and Control, <https://www.cdc.gov/vitalsigns/suicide/index.html>

- Taylor County’s suicide rate was 17.3 in 2017 – higher than the Texas and national rates.

Exhibit 19. Suicide Rates in Texas, Metro vs. Non-Metro, 2000-2015



- Suicides are more likely to occur in Texas’ non-metro areas, and Taylor County’s rural element may account for its high rate of suicides.

<sup>10</sup> Center for Disease Control and Prevention. Suicide Mortality in the United States, 1999-2017. <https://www.cdc.gov/nchs/products/databriefs/db330.htm>



## Physical Environment

The physical environment, such as drinking water and air quality, can have a major impact on the overall health of an individual and community. For example, poor air quality can lead to increases in asthma cases. Overall, Taylor County has a slightly better physical environment than Texas for healthy food and air quality.

*Exhibit 20. Physical Environment*

Physical Environment		
Measure	Texas	Taylor County
Average Density of Particulate Matter Per Cubic Meter (PM2.5) <sup>11</sup>	8.8	8.2
Drinking Water Violations	Yes	Yes
Food Environment Index <sup>12</sup>	6.0	6.4

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Taylor county ranks as having a slightly better Food Environment Index (6.4) compared to Texas (6.0).
- The environmental air quality in Taylor county is better (8.2) than the Texas average (8.8).

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<sup>11</sup> Air Pollution - Particulate Matter is the average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) in a county. Fine particulate matter is defined as particles of air pollutants with an aerodynamic diameter less than 2.5 micrometers. These particles can be directly emitted from sources such as forest fires, or they can form when gases emitted from power plants, industries and automobiles react in the air.

<sup>12</sup> The Food Environment Index ranges from 0 (worst) to 10 (best) and equally weights two indicators of the food environment: Limited Access to Healthy Food and Food Insecurity

## Lifestyle Indicators

Individual's lifestyle and behaviors, such as smoking, alcohol, and lack of exercise, can lead to health conditions such as obesity. Obesity is often linked to other chronic conditions such as diabetes and high blood pressure and, ultimately, a poorer quality of life and a shorter life expectancy. Taylor County has a higher percentage of obese adults than the state of Texas. Additionally, more residents report not exercising frequently and smoking.

*Exhibit 21. Population Lifestyle Indicators*

Population Lifestyle Indicators		
Measure	Texas	Taylor County
Adult Obesity	29%	32%
Physical Inactivity	23%	26%
Binge Drinking	19%	19%
Tobacco Use	14%	18%
Teen Births <sup>13</sup>	37	40

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Over one quarter of Taylor County residents (26%) are not physically active.
- Nearly one in three (32%) Taylor County adult residents are obese.
- Taylor County averages poorer population lifestyle indicator results across all categories compared with the state average.

*Exhibit 22. Healthy Lifestyle/Physical Activity*

Healthy Lifestyle/Physical Activity		
Measure	Texas	Taylor County
Adult Obesity	29%	32%
Physical Inactivity	23%	26%
Access to Recreation and Fitness Facilities	80%	86%
Social Associations <sup>14</sup>	7.6	12.9

SOURCE: County Health Rankings, [http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Despite nearly 9 out of 10 (86%) Taylor County residents have access to recreation and fitness, approximately one quarter (26%) are physically inactive.
- Taylor County averages a much higher rate of social associations (12.9) than the state average (7.6).

<sup>13</sup> Rate per 1,000 Females Aged 15-19

<sup>14</sup> Rate Per 10,000 Population

### Sexually Transmitted Diseases

Sexually transmitted diseases are often transmitted through risky behaviors. Taylor County has a higher rate of Chlamydia than Texas as a whole, but a lower rate of AIDS and Gonorrhea.

Exhibit 23. Communicable Diseases

Communicable Diseases <sup>15</sup>		
Measure	Texas	Taylor County
AIDS	9.2	4.4
Chlamydia	473.1	523.2
Gonorrhea	125.2	107.4

SOURCE: Texas Department of State Health Services, <http://healthdata.dshs.texas.gov/HealthFactsProfiles>

- The rate of AIDS in Taylor County (4.4) is low compared to the Texas rate (9.2).
- Taylor County has a higher rate of Chlamydia (523.2) than the Texas rate (473.1).

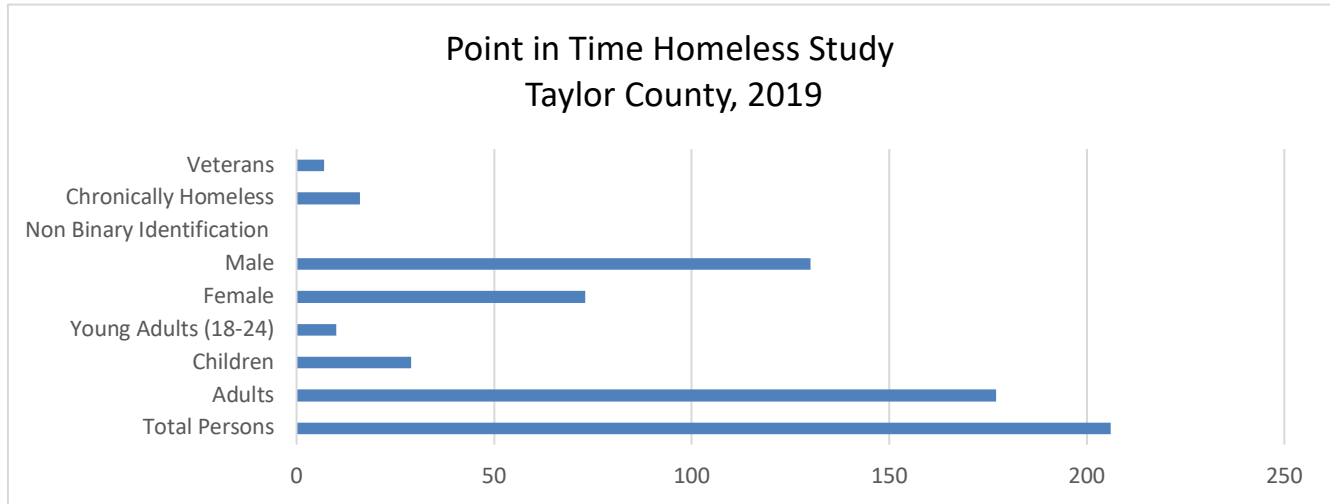
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<sup>15</sup> Per 100,000 Population

### Homelessness

In 2019, over 200 individuals were identified as experiencing homelessness in Taylor County, which is an increase from the previous two years. Homelessness can be the result of many factors, such as rising housing costs, mental health and substance use disorders, and unemployment, among other factors. Homeless individuals may need unique health and social services, such as subsidized housing, food banks, and access to free or low-cost health care.

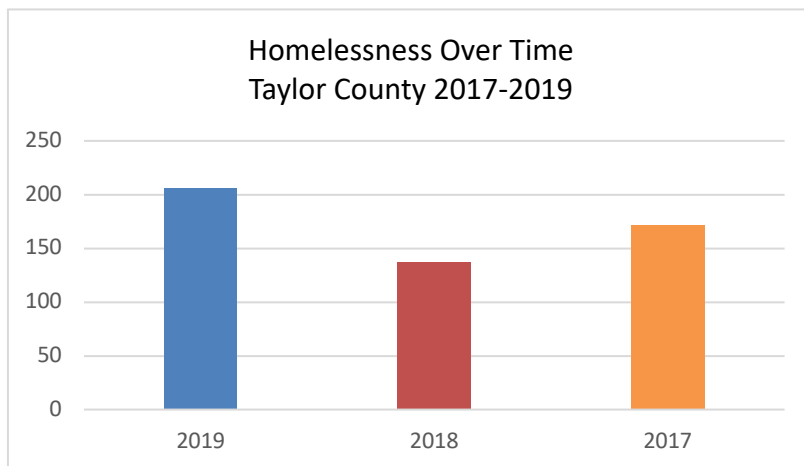
Exhibit 24. Homelessness



**SOURCE:** Home Again West Texas Point-in-Time Study, <https://static1.squarespace.com/static/5a43c8a4d74cffe14ca92c21/t/5c911cb4e5e5f0cac65614c8/1553013945310/PIT-+Combined+Report.pdf>

- Men are nearly twice as likely to experience homelessness in Taylor County than women.
- Over 200 persons in Taylor County were identified as experiencing homelessness in 2019.

Exhibit 25. Homelessness Over Time



**SOURCE:** Home Again West Texas Point-in-Time Study, <https://static1.squarespace.com/static/5a43c8a4d74cffe14ca92c21/t/5c911cb4e5e5f0cac65614c8/1553013945310/PIT-+Combined+Report.pdf>

- Point-in-time homeless counts have fluctuated in Taylor County from 2017-2019, with 2019 being the year the highest number of individuals experienced homelessness.

### Crime Rates

Crime, especially violent crimes like gang-related and murder, has an impact on the health and safety of a local community. Taylor County has a slightly higher violent crime rate compared to Texas.

Exhibit 26. Crime

Violent Crime Rate		
Measure	Texas	Taylor County
Total Population	25,145,561	131,506
Violent Crimes	105,611	560
Violent Crime Rate	420	426

SOURCE: County Health Rankings, American Community Survey 2017

[http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48\\_441](http://www.countyhealthrankings.org/app/texas/2019/compare/snapshot?counties=48_441)

- Taylor County's violent crime rate (426) is slightly higher than the Texas average (420).

## Digital / Social Media Data Analysis

Over 4 billion people across the globe use the internet with approximately 3.2 billion using social media in 2018.<sup>16</sup> The internet and social media have become powerful channels to share information at home and around the world.

Approximately two-thirds of all U.S. adults (68%) are Facebook users; and, 75% of those user's access Facebook at least daily. YouTube, while not considered a traditional social media platform, has increased in popularity in recent years, as nearly three of four (73%) U.S. adults report using the platform<sup>17</sup>. Google continues to be the top search engine with 70% of all search market share.

With an abundance of information at an individual's fingertips, one in three Americans have searched online to diagnosis medical conditions.<sup>18</sup> Of those seeking medical information online, 46% of the individuals sought information from their medical provider. Reviewing online search interest and social media can help identify the most common, emerging, and surging healthcare-related issues in the community.

### **Approach**

As noted, Crescendo deployed data analysis and reporting techniques based on digital communications resources including the following:

- Facebook Business Manager
- Meltwater Social Media Insight
- Google Analytics and Trend Analysis

### **Goal**

To better understand community members' interest in health, behavioral health, and social issues by identifying the most common, emerging, and/or surging issues included in publicly available online discussions.

Digital tools, such as Google Trends, Meltwater Services, and others can help identify health, behavioral health, and social issues that are increasingly pertinent in online discussions across social media and the internet.

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<sup>16</sup> We Are Social. *Digital in 2018: World's Internet User Pass the 4 Billion Mark*. <https://wearesocial.com/blog/2018/01/global-digital-report-2018>

<sup>17</sup> Pew Research Center. *Social Media Use in 2018*. <http://www.pewinternet.org/2018/03/01/social-media-use-in-2018/>

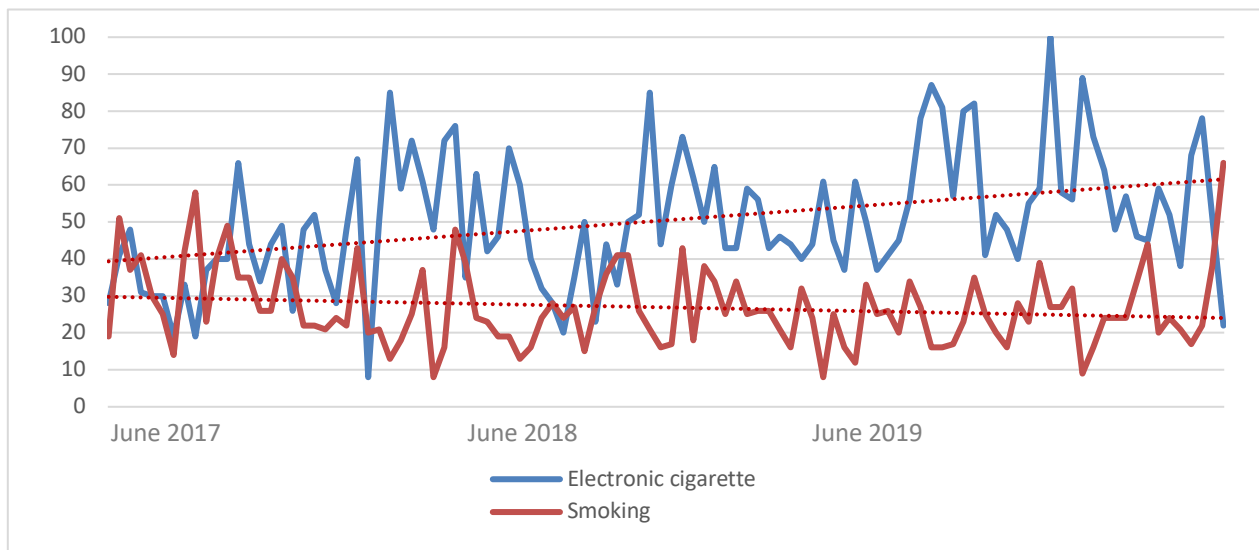
<sup>18</sup> Pew Research Center. *Health Online 2013*. <http://www.pewinternet.org/2013/01/15/health-online-2013/>

## **About Google Trends**

Google Trends is a search trends feature from Google that shows how frequently a given search term is entered into Google's search engine relative to the site's total search volume over a given time period. Google uses a relative score to measure the index of search activity. The maximum value, or peak popularity, is 100. For example, if the value for "Abilene" is 100 and the value for "donut" is 50, the number of searches for "donut" is half as popular as "Abilene." A score of 0 means there was not enough data for the term.

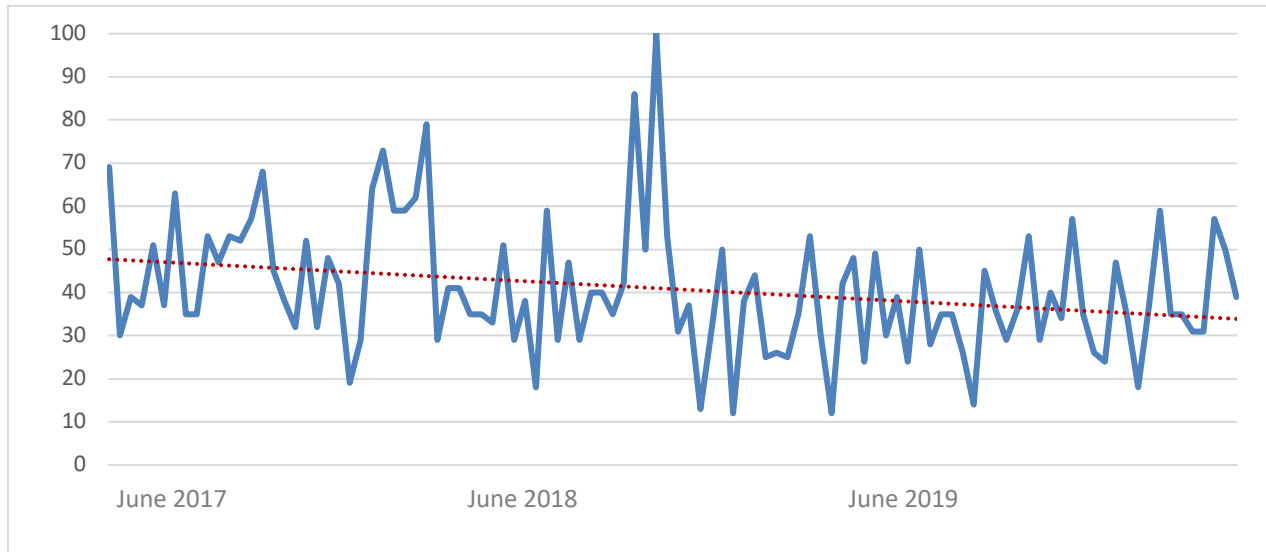
The following charts depict the search interest for health issues in the Abilene area over a specific time period.

### **Exhibit 27. Electronic Cigarettes, Smoking**



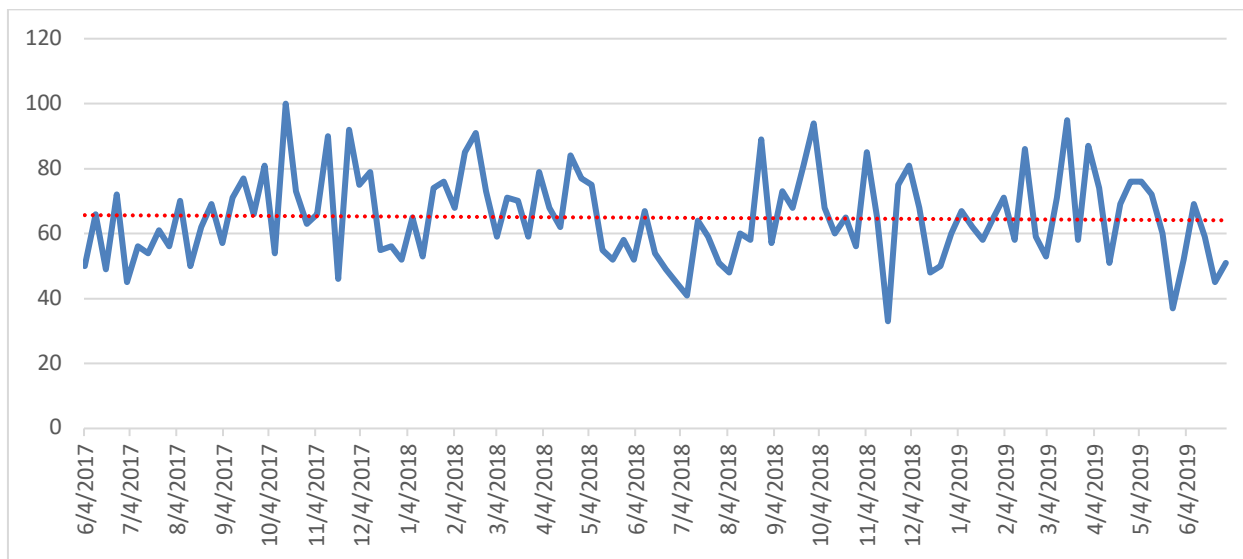
- The rise of electronic cigarette usage locally and nationally is reflected by these search results. Search topics around electronic cigarettes have increased approximately 53% while topics for smoking (and "cigarettes", not shown) have decreased approximately 20%.
- Related search terms for electronic cigarettes include "Cannabidiol," which indicates a connection between E-cig vaping and cannabinoid usage. Other top related search terms include the popular electronic cigarette "Juul" and "nicotine."
- A breakout topic related to e-cigarette search results was "Popcorn," likely related to the health scare around electronic cigarette use known as "Popcorn Lung."
- Related search results for "smoking" showed "Juul" to be the top search term, showing the interlinked relationship between electronic cigarettes and smoking.

### Exhibit 28: Suicide



- On average, “suicide” as a search term decreased about 30% in Abilene over the past three years. The spike during the week of June 3, 2018, is tied to the highly publicized deaths of Kate Spade and Anthony Bourdain, who took their own lives.
- While internet search interest for “suicide” has declined in the Abilene area, Taylor County has a higher suicide rate (17.3) than both the Texas rate (11.0) and the national average (13.0), indicating that suicide prevention and awareness campaigns may be needed.

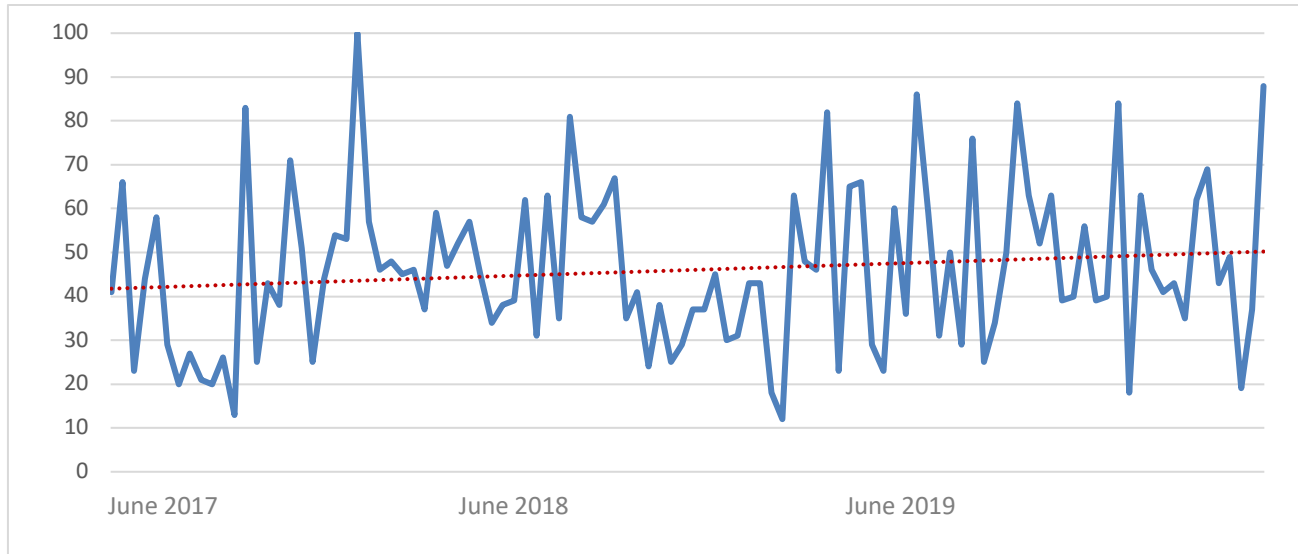
### Exhibit 29: Mental Health



- Search interest for “mental health” overall has remained stable over the past three years.
- Top search terms include depression, anxiety, autism, ADHD, and bipolar. The top search terms indicate that Abilene residents are interested in learning more about specific mental health diagnoses.

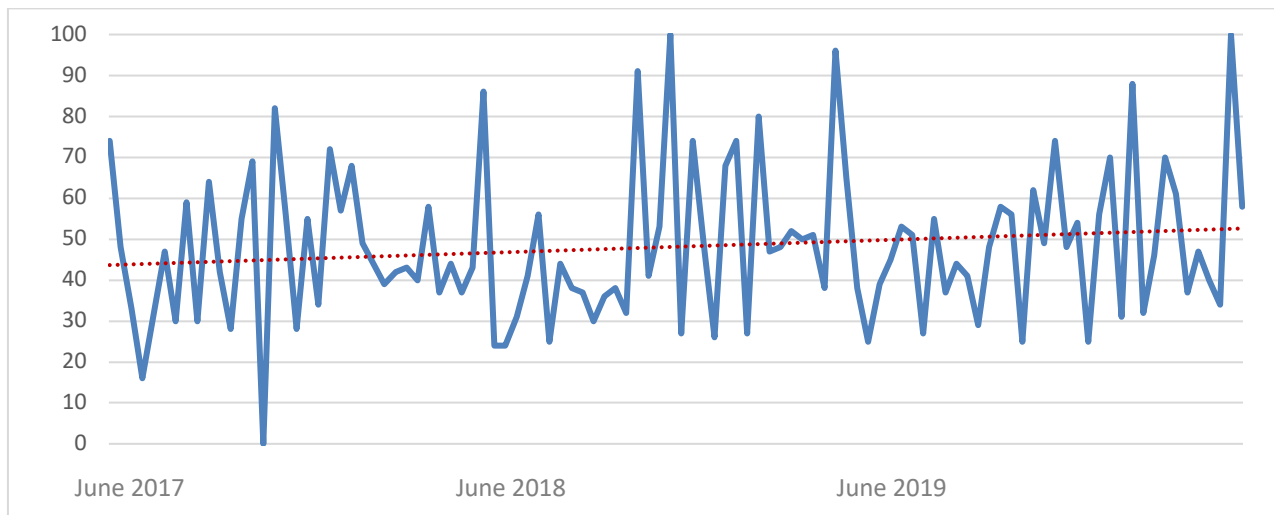


### Exhibit 30: Depression



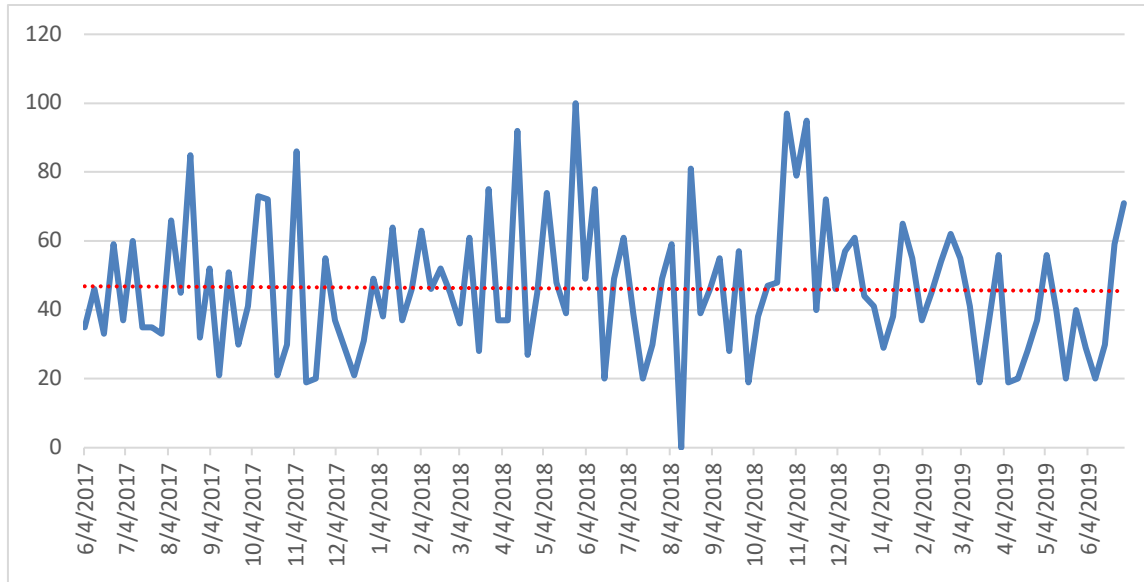
- While search interest in “mental health” topics has remained stable over the past three years, search interest for “depression” has increased approximately 20% over the same time period.
- Taylor County residents average 3.4 days a month of mentally unhealthy days indicating that depression, both diagnosed and undiagnosed, may be an issue in the community.

### Exhibit 31: Anxiety



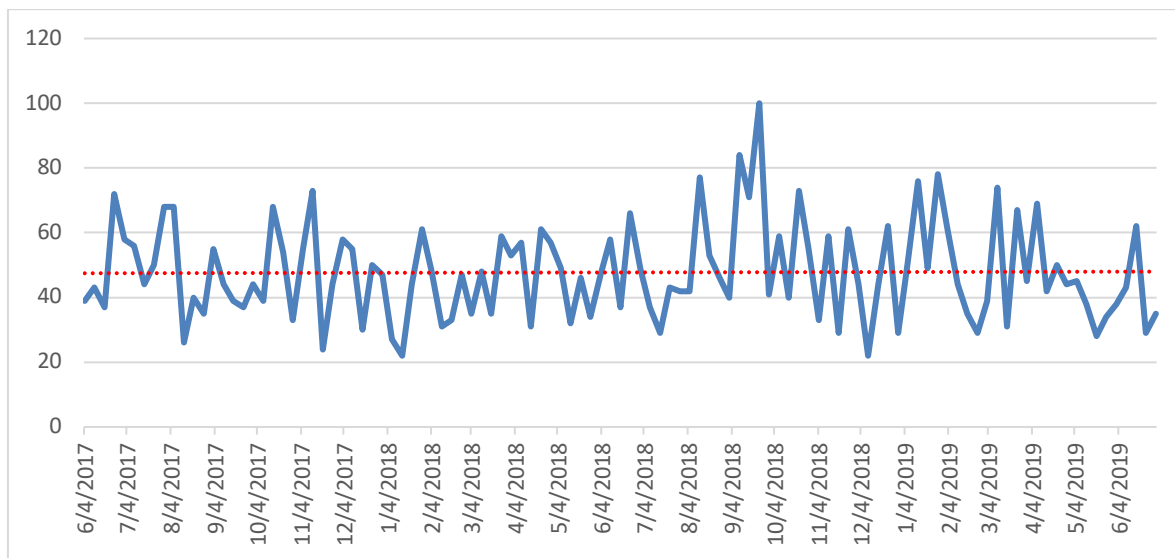
- Since June 2017, search interest for “anxiety” has increased approximately 16% in Abilene.
- Top search terms include “anxiety symptoms” and “anxiety attack.”

### Exhibit 32: Methamphetamine



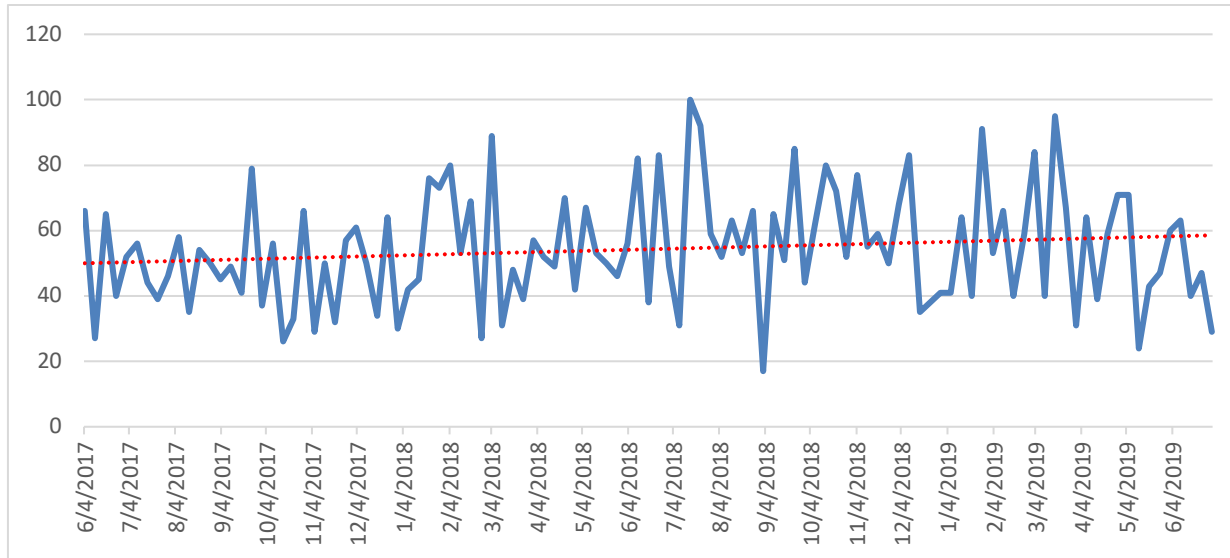
- Search interest for “methamphetamine” has remained stable over the course of the past three years.
- Related search topics for methamphetamine include “urine” and “clinical urine tests,” which indicate many users attempting to figure out how to pass a drug test.

### Exhibit 33: Cancer



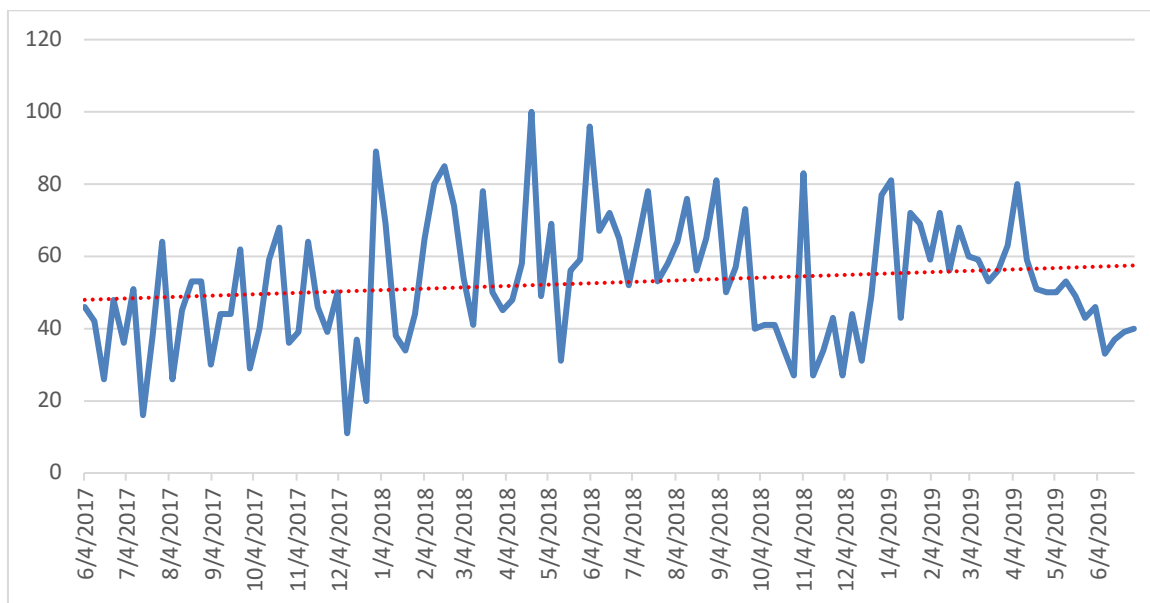
- Search interest for “cancer” has remained stable over the course of the past three years.
- Top search terms include rectal cancer, brain tumor, breast cancer, and treatment of cancer.
- Taylor County has a high number of annual cancer deaths compared to the state of Texas. Google search interest for cancer-related search terms may indicate that cancer patients and/or their family and friends are searching the internet for more information and services.

### Exhibit 34: Heart and Hypertension



- Search interest for heart disease and hypertension has increased approximately 18% in Abilene since June 2017.
- Top search terms include blood pressure, hypertension, congestive heart failure, and aneurysm.
- Heart disease is a leading cause of death in Taylor County so search interest in heart disease-related internet searches indicates that individuals are searching the internet for more information on their chronic conditions.

### Exhibit 35: Diabetes



- Search interest for “diabetes” has increased approximately 31% since June 2017 in Abilene.
- Top search terms include keto diet, type 2 diabetes, keto recipes, and metformin. Search terms may indicate interest in diabetes treatment and prevention.

## **Digital Summary**

The digital analysis of Google search interest trends in the Abilene area reveals some positive correlations between mental health disorder Google searches and diagnoses. Search results for depression have also trended slightly upwards.

Over a two-year period, anxiety disorders and mood disorders diagnoses have increased steadily along with Google search interest traffic. The positive correlation between Google search increase for anxiety, depression, and suicide and increased diagnoses and suicide rate may indicate two things: 1) awareness has increased and more individuals are searching for symptoms and prevention information, and 2) mental health stigma may be preventing individuals from seeking treatment and information from their medical providers and are thus turning to the internet for information. For example, top search terms for suicide include suicide hotline and suicide prevention indicating individuals are interested in learning more information on how to prevent suicide.

An area where a correlation may have been expected but was not found was suicide. Following national trends, suicide mortality rates in Taylor County have increased. Taylor County has a higher suicide rate than the Texas and national average. Yet, Google search traffic for suicide in the Taylor County area decreased by approximately 25% over a two-year period.

Google Trends data can also help public health departments monitor search interest for specific diseases or lifestyle behaviors and develop strategies and programs to address the public health issue. For example, search interest for JUUL has increased significantly since the product was launched in mid-2017. Current national research from the U.S. Centers of Disease Control and Prevention and the New England Journal of Medicine reveal that e-cigarette usage amongst school aged youth is high. Since nicotine is highly addictive and harmful to the brain development of children, programs that educate school aged youth about the harmful effects of nicotine and e-cigarettes could be developed to curb the rise in youth nicotine usage.

## **Qualitative and Quantitative Primary Data Collection**

### **Qualitative Interviews and Discussion Groups**

Qualitative and quantitative data collection are the core of the research portions of the CHNA. The secondary data research provides a framework to build a better understanding of the community. However, the qualitative and quantitative primary research techniques provided insight and color that illuminate the unique aspects of Community Needs in the Hendrick Health System service area.

Crescendo conducted a series of focus group discussions and individual interviews with community members and stakeholders. The purpose of these discussion was to solicit consumers' and stakeholders' opinions, feelings, and expectations regarding the following:

- The current availability and access to health services in the area
- Community health needs in four broad categories: social and physical environment services, disease management and general healthcare, mental health and substance use disorders, and risk prevention / wellness / staying healthy.

The process engaged more than 50 community members in focus group discussions, 15 in stakeholder interviews, and more than 380 in the community survey. During the research, a clear outline of community members' issues

and needs emerged – many supported by insightful observations. The formative summary of primary research interviews and focus group discussions detailed as well as reviewed of community survey results.

### *Community Strengths*

At the start of the discussions, participants were asked what they enjoy about the area. In many discussions, there was clearly a sense of pride about the area. The things people enjoy about the area include:

- *An emerging, rejuvenated Abilene downtown area*
- *Family in the area*
- *Quietness and the pace is a little slower*
- *Low cost of living with both a small town and big town feel*
- *Getting to know your neighbors and Involvement in the community*

*Those who live in Abilene also appreciate:*

- *The socializing and a good community of friends*
- *Supportive people and a sense of security*
- *Health needs that are well met*
- *Available healthcare resources*

### *Initial Top Needs*

Focus group participants and interviewees were asked: “From your perspective, what are the top critical community health-related issues?”

Initially, the top responses across the groups mirrored one-another and were largely consistent with the quantitative data in the subsequent community survey. The initial top areas of need in rank-order across the groups were:

- Access to appropriate care
- Crisis services
- Awareness / prevention / screening of chronic health conditions and available services

### *Consensus Challenges Overall*

Some of these topics and others generated spirited conversation. The following highlights community health need challenges from both consumers and community partners, which were identified during the research. In each case, the topic includes several points that support each theme as well as interview quotations (de-identified) that illuminate respondents’ perspectives. They are presented in alphabetical order.

### *Access to Appropriate Care*

There was much discussion about access and/or the lack of services based upon one's insurance status. Some residents seem overwhelmed by the logistics of navigating the multiple steps required to obtain care, especially in cases where there is no insurance coverage. Access and emergency department utilization continue to be linked due to efforts to change the Affordable Care Act. Some define access as getting in to see the doctor and some defined it as amount of time spent with the doctor.

However, a broader characterization of "access to care" is represented by the acronym CALM (Capacity, Awareness, Logistics, and Motivation). During the interviews and focus groups, CALM-related community needs included the following:

#### *Capacity*

Primary care, mental health services, adult mental health services for children (especially those with developmental disabilities), indigent care services, diabetes care / endocrinology, inpatient care.

- *"Young folks specifically are frequent flyers in the ER."*
- *"We need more MH services. We lack psychiatrists. I'm working with Hendrick. Another thing is drug treatment centers. We only have one small drug use treatment center."*
- *"I know one of our challenges is mental health. We don't have all the resources for that. I've not heard in my brief time here that there is a barrier to folks getting medical care. We work with hope haven; we can call them and say is there anyone we can help?"*
- *"Access to Care - especially awareness - people do not know what's available."*
- *"Oral health is tough; we had some volunteer providers who just retired."*
- *"We have lots of services for people with financial challenges."*

#### *Awareness / Prevention / Screening*

Directory of available community health, support services (e.g., the "first stop" for people in need), and education services.

- *"Community Health Services are key; heart disease, diabetes, the unfunded, cost of care."*
- *"Issues I see are Infant mortality, single parenting, drugs and alcohol."*
- *"There is a horrible drug problem in the community – heroin, meth, and marijuana are the most misused in the area."*
- *"Prevention is a hard concept to sell. Not much money is spent on this. It requires a sustained, long term effort."*
- *"The uninsured are in trouble. Many don't have a doctor, don't have insurance, and then they end up in the ER."*
- *"Texas Tech has an FQHC program which is helpful. We don't get many referrals from there."*

## Logistics

Focus group participants and community stakeholders indicated that insurance is a majority issue for many people in the community. Additionally, many stakeholders recognized that most private insurance plans don't provide robust behavioral health coverage. Financial "handholding" and education regarding financial resource availability and enrollment may be needed. Knowledge about service sites and hours of operations were mentioned, and transportation issues are a key for many (e.g., the city bus routes, UBER, Lyft).

- *"There are many resources available to help the indigent when they need care. The problem is that there is no easy-to-use resource to get the information."*
- *"The change in the bus routes confused a lot of people. There wasn't enough communication."*
- *"Some people tell me that they can't get to a doctor's appointment during regular business hours because they work, and they aren't aware of evening or weekend appointment times."*
- *"Hendrick does a great job at informing patients about available services and payment information, but some patients don't know to ask for help – they assume they can't afford care and never show up for follow-up care."*
- *"[Hendrick Diabetes Center] provides great and highly needed support and information, but a lot of people with diabetes aren't aware that it is there. There might be an opportunity to [have the Diabetes Center] work more closely with the Emergency Department, endocrinologists, and PCPs."*

## Motivation and Support

Care coordination for higher-risk people with chronic conditions, enhanced education through the Diabetes Center, warm handoffs between providers, peer specialists for people with SUD and/or chronic conditions.

- *"We need more aggressive drug education programs and rehab programs, lots of crimes have links to drugs. The resources are likely there, but we need more building around awareness of services."*
- *"Culturally, we see a lot of diabetes in the Hispanic population. But we saw 440 patients in the last year, and only saw around 60 Hispanic folks. Some Hispanic people I see don't understand why they have diabetes, they believe in 'fright' sickness."*

## Crisis Services

Most focus group participants and community stakeholders reported the lack of available crisis services within the service area. While Abilene and Taylor County offer various forms of crisis services, the programs may benefit from increased staff availability and funding, as well as increased awareness of the programs. Specific suggestions (and supporting quotations) included the following:

Urgent care for people experiencing mental health crises was mentioned.

- *"Mental health of course, there's a big push. That was at the forefront last needs assessment, and they did some great work."*
- *"There's a shortage of behavioral health providers."*

Greater/quicker access to Emergency Department (E.D.) services was a leading issue, along with hand-offs for people being discharged from the E.D.

- *"Better ED care could meet needs of people waiting in the waiting rooms and triage areas. The healthcare they provide is very good."*

### *Efficiency and Perceived Quality of Care*

The general opinion regarding the quality of care as reflected in the qualitative research indicates that there is a high level of satisfaction. However, efficiency of getting access to care (e.g., system capacity, financial aspects, and – in some cases – transportation to services) is more of an ongoing challenge, as noted above. Additional specific needs include the following:

In addition, even though the Abilene area has a notable percentage of people living with chronic diseases, community members perceive that chronic disease care is an area strength.

- *“There will always be room to improve care for people with chronic diseases, but care is generally pretty good in Abilene.”*
- *“Diabetes and chronic care are good in town, but not so much for the indigent.”*
- *“The best way to improve care [for people with chronic conditions] is to work on the efficiency with which care is provided – we probably have enough of some services, in general, but not everyone gets the care they need.”*

More integrated services within the Hendrick Health System network and between the network and community health providers.

- *“There isn’t always good referrals between providers – emergency departments, clinics, private practitioners, and community service providers.”*
- *“We need to get mental health and medical health providers to work more closely together.”*
- *“[Community service providers] don’t always know about all of the other available resources in the area. They will often refer to the same providers without a full understanding of the breadth of available providers.”*

Greater collaboration with diverse community members (e.g., schools, businesses, the criminal justice system, healthcare providers, other community organizations, and community members).

- *“There’s a fantastic homeless coalition. The mayor is looking into poverty. There are pockets, and Abilene is aware of it.”*
- *“I look at from a broad range, I see a healthy community and a community that’s engaged. One that’s proactive not reactive. As I grow older, I’m acutely aware of what we have available. I think we’re very healthy, very positive.”*
- *“Great need for affordable housing/homelessness.”*
- *“The poverty rate is increasing. I think we’re seeing folks who are not in poverty leaving the area, as opposed to more folks entering poverty.”*
- *“We work code and with housing, I work with seniors, I work with refugees, they’re seeking support resources and employment. People are struggling with salaries, with aging, poor schools, problems with healthcare, with young mothers and CPS.”*



## Quantitative Community Online Survey

The Community Survey asked residents to evaluate the need for more focus and attention for 34 health-related issues, as identified in the secondary research, focus group discussions, and interviews. See the list below:

### **Total Sample**

381 total respondents who had a primary residence in Hendrick Health System's service area. The sample size yields a total margin of error +/- 5.01%, at the 95% confidence interval.

### **Survey Instrument**

The questionnaire included 34 closed-ended, need-specific evaluation questions; plus a few demographics and communications questions. Research suggests that individuals sharing many of the demographic characteristics of the target population may provide socially desirable responses, and thus compromise the validity of the items. Special care was exercised to minimize the amount of this non-sampling error by a careful assessment design effects (e.g., question order, question wording, response alternatives).



### **Health-related Needs Included in the Community Survey**

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Affordable healthcare services for individuals or families with low income
Affordable prescription drugs
Affordable quality childcare
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children
Counseling services for mental health issues such as depression, anxiety, and others for adults
Crisis or emergency care programs for mental health
Crisis or emergency care services for medical issues
Drug and other substance abuse early intervention services
Drug and other substance abuse education and prevention
Drug and other substance abuse treatment services
Education and job training
Emergency care and trauma services
General public transportation
Healthcare services for people experiencing homelessness
Healthcare services for seniors
HIV / AIDS education and screening
HIV / AIDS treatment services
Long-term care or dementia care for seniors
Parenting classes for the "new Mom" or the "new Dad"
Primary care services (such as a family doctor or other provider of routine care)
Programs for diabetes prevention, awareness, and care
Programs for heart health or cardiovascular health
Programs for obesity prevention, awareness, and care
Programs to help recovering drug and other substance use disorder patients stay healthy
Secure sources for affordable, nutritious food
Services or education to help reduce teen pregnancy
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare
Social services (other than healthcare) for people experiencing homelessness
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.
Support services for adults with developmental disabilities
Support services for children with developmental disabilities
Transportation services for people needing to go to doctor's appointments or the hospital
Women's health services

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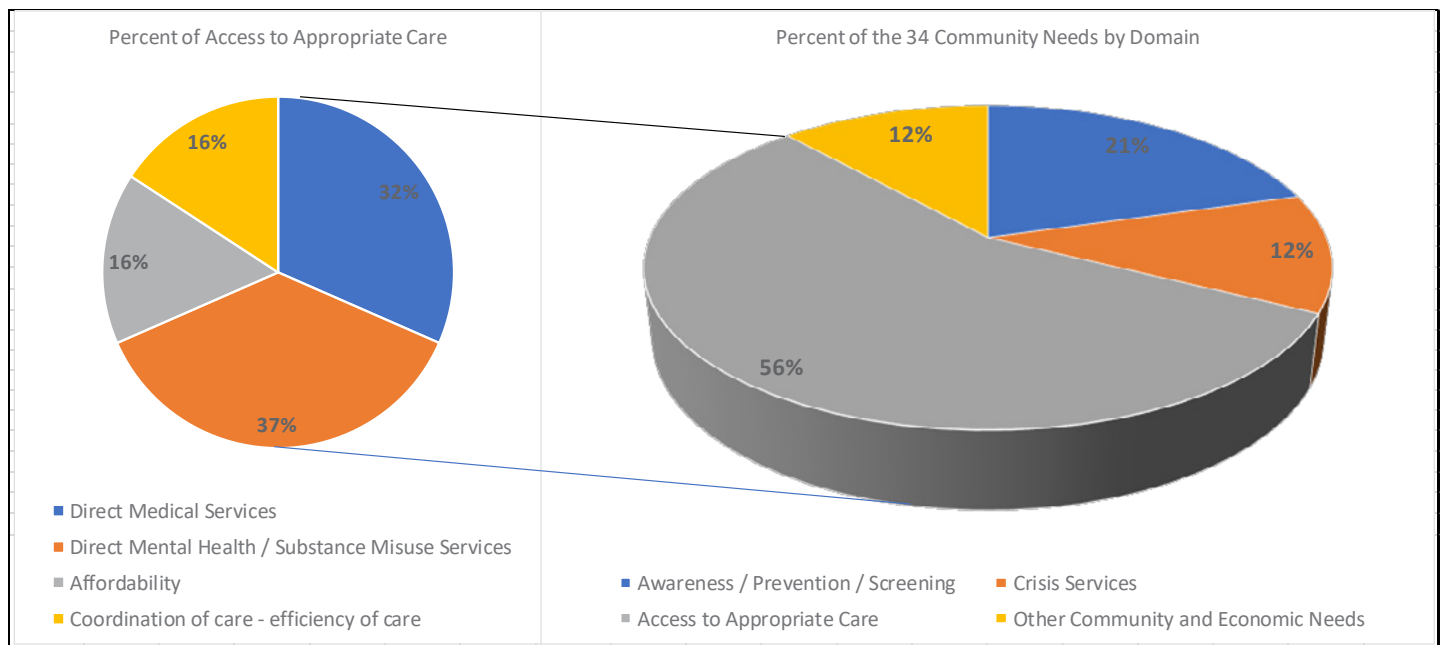
## Survey Results

### *Needs Included in the Survey*

Initial secondary research, as well as stakeholder interviews, identified three broad areas of service gaps – or, “domains.”

- Awareness / prevention / stigma
- Crisis care
- Access to appropriate care

All of the 34 needs identified by community members and supported by the secondary research were included in the Community Survey – falling into the three domains plus an additional category of “Other Community and Economic Needs.” Shown in the charts below, more than half (56%) of the identified needs related to the Access to Appropriate Care domain. Within that domain, Mental Health / Substance Misuse care services represented more than one-third (37%) of the Access to Appropriate Care needs.

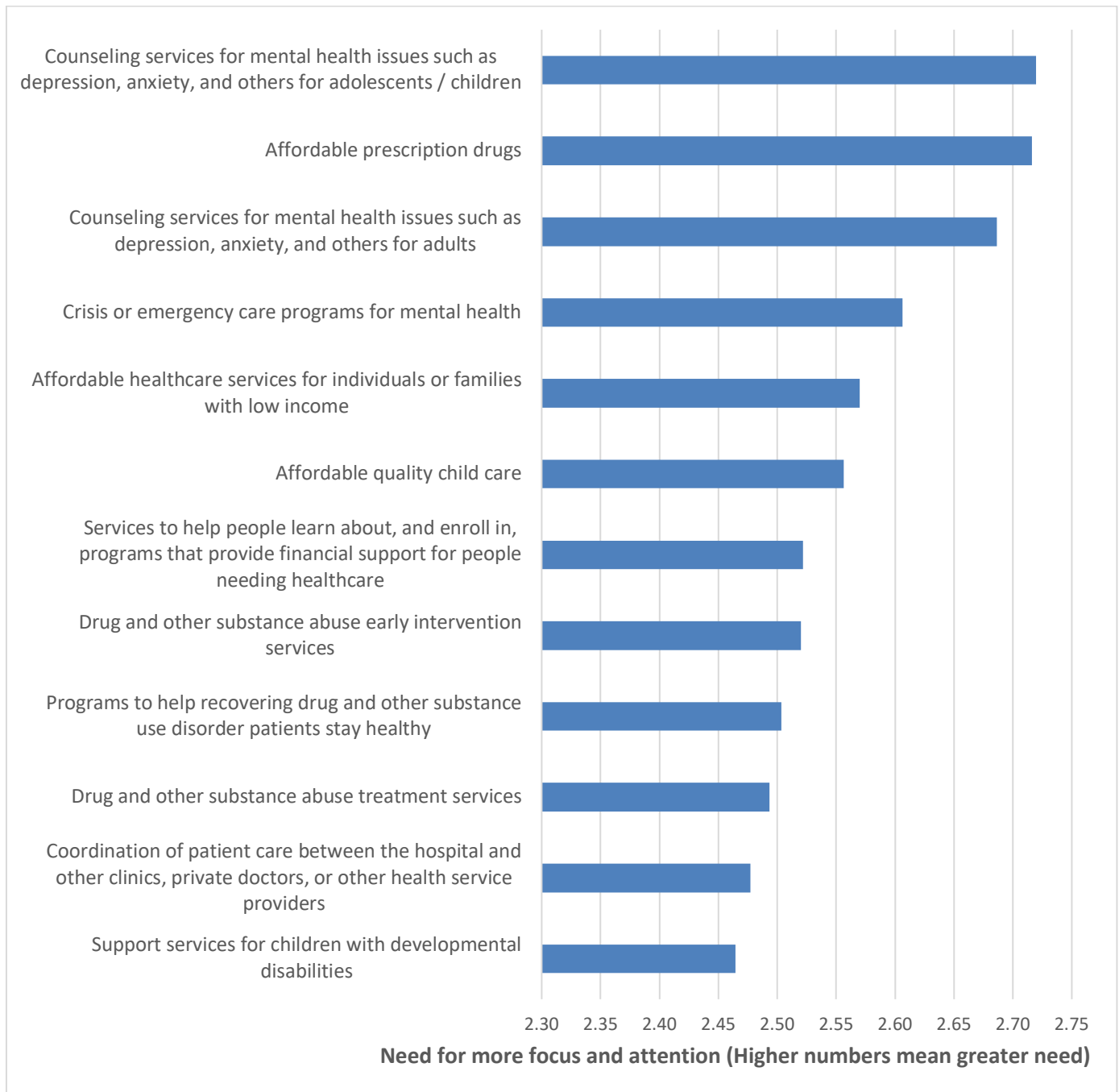


- Access to Appropriate Care includes issues of capacity, awareness / prevention, logistics (e.g., transportation, finances, and others), and motivation of the community member to seek care. See the CALM Model© in the appendices.
- Mental health and substance misuse related needs comprise seven of the 19 (37%) Access to Appropriate Care needs.
- Direct Medical Services comprise an additional six of 19 (32%) of the domain’s needs.
- In addition to conventional health and access to care needs, community members identified four additional needs that impact community health and well-being – social services, education and job training, affordable and nutritious food, and general public transportation.
- The table on the following page presents the 34 needs included in the community survey grouped by Domain and Category of Need.

<b>Domain and Category of Need</b>	<b>Community Need</b>
<b>Awareness / Prevention / Screening</b>	
<i>Awareness of service availability</i>	Programs for obesity prevention, awareness, and care
	Services or education to help reduce teen pregnancy
	Parenting classes for the "new Mom" or the "new Dad"
	Programs for diabetes prevention, awareness, and care
	Programs for heart health or cardiovascular health
<i>Awareness of ways to access services</i>	Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare
<i>Screening</i>	HIV / AIDS education and screening
<b>Crisis Services</b>	
Urgent and crisis services	Crisis or emergency care programs for mental health
	Drug and other substance abuse early intervention services
	Crisis or emergency care services for medical issues
	Emergency care and trauma services
<b>Access to Appropriate Care</b>	
<i>Direct Medical Services</i>	Long-term care or dementia care for seniors
	Healthcare services for people experiencing homelessness
	Healthcare services for seniors
	Primary care services (such as a family doctor or other provider of routine care)
	Women's health services
	HIV / AIDS treatment services
<i>Direct Mental Health / Substance Misuse Services</i>	Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children
	Counseling services for mental health issues such as depression, anxiety, and others for adults
	Programs to help recovering drug and other substance use disorder patients stay healthy
	Drug and other substance abuse treatment services
	Support services for children with developmental disabilities
	Drug and other substance abuse education and prevention
	Support services for adults with developmental disabilities
<i>Affordability</i>	Affordable prescription drugs
	Affordable healthcare services for individuals or families with low income
	Affordable quality childcare
<i>Coordination of care - efficiency of care</i>	Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers
	Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.
	Transportation services for people needing to go to doctor's appointments or the hospital
<b>Other Community and Economic Needs</b>	
	Social services (other than healthcare) for people experiencing homelessness
	Education and job training
	Secure sources for affordable, nutritious food
	General public transportation

### Top Ranked Needs in the Survey

The Community Survey included several questions which facilitated analysis of ranked needs by demographic category. Although some variations exist between genders, age groups and other characteristics, the total dataset analysis indicates that mental health-related issues comprise three of the leading four needs.



## Top Ranked Needs by Age Group

Most of the top 10 needs within each age group are similar. However, a few more subtle differences exist.

Need	18 - 44	45 - 64	65 +	Total
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children	2.81	2.65	2.64	2.72
Affordable prescription drugs	2.67	2.74	2.81	2.72
Counseling services for mental health issues such as depression, anxiety, and others for adults	2.70	2.67	2.67	2.69
Crisis or emergency care programs for mental health	2.59	2.59	2.72	2.61
Affordable healthcare services for individuals or families with low income	2.57	2.57	2.56	2.57
Affordable quality child care	2.66	2.48	2.47	2.56
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare	2.47	2.57	2.56	2.52
Drug and other substance abuse early intervention services	2.44	2.58	2.56	2.52
Programs to help recovering drug and other substance use disorder patients stay healthy	2.43	2.56	2.54	2.50
Drug and other substance abuse treatment services	2.41	2.58	2.46	2.49
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers	2.42	2.52	2.50	2.48
Support services for children with developmental disabilities	2.50	2.43	2.46	2.46
Long-term care or dementia care for seniors	2.33	2.54	2.56	2.45
Social services (other than healthcare) for people experiencing homelessness	2.42	2.42	2.58	2.44
Drug and other substance abuse education and prevention	2.35	2.53	2.39	2.44
Healthcare services for people experiencing homelessness	2.44	2.39	2.59	2.43
Programs for obesity prevention, awareness, and care	2.36	2.44	2.46	2.41
Education and job training	2.32	2.43	2.53	2.40
Healthcare services for seniors	2.24	2.47	2.54	2.39
Support services for adults with developmental disabilities	2.43	2.33	2.44	2.39
Secure sources for affordable, nutritious food	2.42	2.36	2.24	2.37
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.	2.36	2.36	2.43	2.37
Transportation services for people needing to go to doctor's appointments or the hospital	2.32	2.34	2.48	2.35
Primary care services (such as a family doctor or other provider of routine care)	2.25	2.32	2.59	2.32
Services or education to help reduce teen pregnancy	2.26	2.33	2.53	2.32
Parenting classes for the "new Mom" or the "new Dad"	2.27	2.30	2.12	2.26
Programs for diabetes prevention, awareness, and care	2.16	2.16	2.29	2.18
Women's health services	2.19	2.08	2.41	2.17
Crisis or emergency care services for medical issues	2.07	2.13	2.36	2.13
Programs for heart health or cardiovascular health	2.00	2.15	2.18	2.09
HIV / AIDS education and screening	2.08	2.06	2.03	2.07
General public transportation	1.99	2.12	2.15	2.07
HIV / AIDS treatment services	2.06	2.03	2.07	2.05
Emergency care and trauma services	1.73	1.82	2.00	1.80

- Younger individuals (i.e., 18-44 years) tend to rate services for children with developmental disabilities and healthcare services for the homeless higher than others.
- Seniors emphasized coordination of patient care as a top 10 need; younger aged respondents did not.

*Top Ranked Needs by Educational Attainment*

**When broken down by educational attainment, those with higher educational attainment seemed to value preventive care slightly more than the non-college educated.**

Need	Less than 4-year Collage Degree	4-year Degree or Higher	Total
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children	2.72	2.72	2.72
Affordable prescription drugs	2.77	2.80	2.72
Counseling services for mental health issues such as depression, anxiety, and others for adults	2.70	2.68	2.69
Crisis or emergency care programs for mental health	2.58	2.62	2.61
Affordable healthcare services for individuals or families with low income	2.69	2.49	2.57
Affordable quality child care	2.62	2.52	2.56
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare	2.62	2.55	2.52
Drug and other substance abuse early intervention services	2.51	2.53	2.52
Programs to help recovering drug and other substance use disorder patients stay healthy	2.57	2.47	2.50
Drug and other substance abuse treatment services	2.48	2.46	2.49
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers	2.53	2.44	2.48
Support services for children with developmental disabilities	2.53	2.50	2.46
Long-term care or dementia care for seniors	2.60	2.47	2.45
Social services (other than healthcare) for people experiencing homelessness	2.47	2.45	2.44
Drug and other substance abuse education and prevention	2.45	2.45	2.44
Healthcare services for people experiencing homelessness	2.41	2.48	2.43
Programs for obesity prevention, awareness, and care	2.47	2.42	2.41
Education and job training	2.42	2.41	2.40
Healthcare services for seniors	2.52	2.40	2.39
Support services for adults with developmental disabilities	2.46	2.41	2.39
Secure sources for affordable, nutritious food	2.45	2.40	2.37
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.	2.38	2.40	2.37
Transportation services for people needing to go to doctor's appointments or the hospital	2.33	2.36	2.35
Primary care services (such as a family doctor or other provider of routine care)	2.25	2.31	2.32
Services or education to help reduce teen pregnancy	2.33	2.36	2.32
Parenting classes for the "new Mom" or the "new Dad"	2.33	2.33	2.26
Programs for diabetes prevention, awareness, and care	2.34	2.17	2.18
Women's health services	2.24	2.23	2.17
Crisis or emergency care services for medical issues	2.25	2.15	2.13
Programs for heart health or cardiovascular health	2.31	2.06	2.09
HIV / AIDS education and screening	2.22	1.96	2.07
General public transportation	1.99	2.12	2.07
HIV / AIDS treatment services	2.20	1.94	2.05
Emergency care and trauma services	1.95	1.83	1.80

- Affordable prescription drugs were the highest rated need for both college and non-college educated people.
- People without a college degree did not have drug and other substance abuse early intervention services rated as a top 10 need.

*Top Ranked Needs by Household Income Level*

**There are notable variations based on household income regarding high-priority needs. The most valued needs, though (e.g., those relating to mental health and the affordability of care) are consistently among the top needs.**

Need	\$50,000 or less	\$50,000 to \$100,000	More than \$100,000	Total
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children	2.75	2.70	2.70	2.72
Affordable prescription drugs	2.78	2.70	2.68	2.72
Counseling services for mental health issues such as depression, anxiety, and others for adults	2.68	2.72	2.62	2.69
Crisis or emergency care programs for mental health	2.59	2.59	2.64	2.61
Affordable healthcare services for individuals or families with low income	2.68	2.60	2.43	2.57
Affordable quality child care	2.63	2.58	2.39	2.56
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare	2.62	2.55	2.39	2.52
Drug and other substance abuse early intervention services	2.50	2.50	2.48	2.52
Programs to help recovering drug and other substance use disorder patients stay healthy	2.49	2.54	2.44	2.50
Drug and other substance abuse treatment services	2.44	2.48	2.52	2.49
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers	2.51	2.50	2.39	2.48
Support services for children with developmental disabilities	2.52	2.49	2.39	2.46
Long-term care or dementia care for seniors	2.55	2.51	2.31	2.45
Social services (other than healthcare) for people experiencing homelessness	2.49	2.45	2.36	2.44
Drug and other substance abuse education and prevention	2.43	2.43	2.41	2.44
Healthcare services for people experiencing homelessness	2.49	2.46	2.35	2.43
Programs for obesity prevention, awareness, and care	2.42	2.36	2.36	2.41
Education and job training	2.40	2.35	2.44	2.40
Healthcare services for seniors	2.47	2.36	2.28	2.39
Support services for adults with developmental disabilities	2.49	2.35	2.31	2.39
Secure sources for affordable, nutritious food	2.53	2.37	2.22	2.37
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.	2.36	2.40	2.30	2.37
Transportation services for people needing to go to doctor's appointments or the hospital	2.53	2.39	2.18	2.35
Primary care services (such as a family doctor or other provider of routine care)	2.32	2.32	2.24	2.32
Services or education to help reduce teen pregnancy	2.43	2.33	2.15	2.32
Parenting classes for the "new Mom" or the "new Dad"	2.40	2.27	2.12	2.26
Programs for diabetes prevention, awareness, and care	2.25	2.15	2.08	2.18
Women's health services	2.33	2.12	1.97	2.17
Crisis or emergency care services for medical issues	2.24	2.12	1.99	2.13
Programs for heart health or cardiovascular health	2.20	2.03	2.00	2.09
HIV / AIDS education and screening	2.22	2.07	1.80	2.07
General public transportation	2.04	2.11	2.08	2.07
HIV / AIDS treatment services	2.19	2.05	1.81	2.05
Emergency care and trauma services	1.91	1.82	1.67	1.80

- All demographics rated affordable prescription drugs as a top 2 (or 1) priority.
- The area low-income people rated much higher than those from different income brackets was transportation services needing to go to doctor's appointments or the hospital.

### Top Ranked Needs by Gender

Men and women had similar top 10 needs, though their ordering of top 10 issues varied.

Need	Male	Female	Total
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children	2.57	2.77	2.72
Affordable prescription drugs	2.71	2.72	2.72
Counseling services for mental health issues such as depression, anxiety, and others for adults	2.59	2.72	2.69
Crisis or emergency care programs for mental health	2.58	2.61	2.61
Affordable healthcare services for individuals or families with low income	2.47	2.60	2.57
Affordable quality child care	2.31	2.64	2.56
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare	2.36	2.58	2.52
Drug and other substance abuse early intervention services	2.37	2.57	2.52
Programs to help recovering drug and other substance use disorder patients stay healthy	2.35	2.56	2.50
Drug and other substance abuse treatment services	2.39	2.53	2.49
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers	2.34	2.52	2.48
Support services for children with developmental disabilities	2.32	2.51	2.46
Long-term care or dementia care for seniors	2.41	2.47	2.45
Social services (other than healthcare) for people experiencing homelessness	2.22	2.51	2.44
Drug and other substance abuse education and prevention	2.28	2.49	2.44
Healthcare services for people experiencing homelessness	2.24	2.50	2.43
Programs for obesity prevention, awareness, and care	2.34	2.43	2.41
Education and job training	2.31	2.43	2.40
Healthcare services for seniors	2.34	2.40	2.39
Support services for adults with developmental disabilities	2.21	2.44	2.39
Secure sources for affordable, nutritious food	2.18	2.43	2.37
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others.	2.26	2.40	2.37
Transportation services for people needing to go to doctor's appointments or the hospital	2.22	2.39	2.35
Primary care services (such as a family doctor or other provider of routine care)	2.34	2.32	2.32
Services or education to help reduce teen pregnancy	2.13	2.39	2.32
Parenting classes for the "new Mom" or the "new Dad"	2.12	2.31	2.26
Programs for diabetes prevention, awareness, and care	2.15	2.18	2.18
Women's health services	2.06	2.20	2.17
Crisis or emergency care services for medical issues	2.08	2.15	2.13
Programs for heart health or cardiovascular health	2.03	2.11	2.09
HIV / AIDS education and screening	1.94	2.11	2.07
General public transportation	1.96	2.11	2.07
HIV / AIDS treatment services	1.94	2.08	2.05
Emergency care and trauma services	1.84	1.79	1.80

- The highest rated need for women was counseling services for mental health issues such as depression, anxiety, and others for adolescents/children.
- The highest rated need for men was affordable prescription drugs.
- The one need women had in their top ten, but men did not was affordable quality child care.
- The one need men had in their top ten, but women did not was long term care or dementia care for seniors.
- Women appeared to value children's needs slightly higher than men, and men tend to value the needs of seniors slightly higher than their female counterparts.



## Two-phase Needs Prioritization Process

### Phase 1 Prioritized List of Needs

Following the secondary research, qualitative interviews, and the community rating of 34 community health issues, an initial prioritized list of needs was created. Development of the initial list involved asking Hendrick Leadership Team members:

#### Which health issues in the community require more focus and attention?

Community Needs	Leadership Group Rank	Survey Rank
Primary care services (such as a family doctor or other provider of routine care)	1	24
Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers	2	11
Crisis or emergency care programs for mental health	3	4
Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children	4	1
Affordable healthcare services for individuals or families with low income	5	5
Services or education to help reduce teen pregnancy	6	25
Counseling services for mental health issues such as depression, anxiety, and others for adults	7	3
Special care (for example, case workers or "navigators") for people with chronic diseases such as diabetes, cancer, asthma, and others	8	22
Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare	9	7
Drug and other substance abuse early intervention services	10	8
Secure sources for affordable, nutritious food	11	21
Drug and other substance abuse treatment services	12	10
Drug and other substance abuse education and prevention	13	15
Affordable quality childcare	14	6
Healthcare services for seniors	15	19
Programs for obesity prevention, awareness, and care	16	17
Support services for children with developmental disabilities	17	12
Social services (other than healthcare) for people experiencing homelessness	18	14
Transportation services for people needing to go to doctor's appointments or the hospital	19	23
Programs for heart health or cardiovascular health	20	30
Programs for diabetes prevention, awareness, and care	21	27
Education and job training	22	18
Affordable prescription drugs	23	2
Programs to help recovering drug and other substance use disorder patients stay healthy	24	9
Healthcare services for people experiencing homelessness	25	16
Women's health services	26	28
Long-term care or dementia care for seniors	27	13
Support services for adults with developmental disabilities	28	20
HIV / AIDS treatment services	29	33
General public transportation	30	32
HIV / AIDS education and screening	31	31
Crisis or emergency care services for medical issues	32	29
Parenting classes for the "new Mom" or the "new Dad"	33	26
Emergency care and trauma services	34	34

## Phase 2 Prioritized List of Needs

In Phase 2, the top needs were then qualitatively and quantitatively evaluated to arrive at the key areas of priority emphasis for future years. The process included a meeting where project leaders were asked to evaluate the secondary data results, the qualitative discussion results, and the priority needs results from Phase 1.

The resulting prioritized list of community needs fall into three categories: Access to Appropriate Care, Crisis Services, and Awareness / Prevention / Screening. The breadth of the categories of needs allows Hendrick Health System to continue (or possibly expand) successful existing programs and to develop innovative approaches to possibly addressing multiple needs simultaneously. The list of the top need categories and more detailed opportunities for improvement are shown below.

Prioritized Community Needs	
Rank	Health Need
1	<p><b>Access to Appropriate Care</b></p> <ul style="list-style-type: none"> <li>• Mental health and substance abuse</li> <li>• Primary care services (such as a family doctor or other provider of routine care)</li> <li>• Coordination of patient care between the hospital and other clinics, private doctors, or other health service providers</li> <li>• Counseling services for mental health issues such as depression, anxiety, and others for adolescents / children (including children with developmental disabilities)</li> <li>• Affordable healthcare services for individuals or families with low income (including prescription drugs)</li> <li>• Services for families facing homelessness</li> </ul>
2	<p><b>Crisis Services</b></p> <ul style="list-style-type: none"> <li>• Crisis or emergency care programs for mental health</li> <li>• Drug and other substance abuse early intervention services</li> </ul>
3	<p><b>Awareness / Prevention / Screening</b></p> <ul style="list-style-type: none"> <li>• Services to help people learn about, and enroll in, programs that provide financial support for people needing healthcare</li> <li>• Programs to help recovering drug and other substance abuse patients stay healthy</li> </ul>
<p><b>NOTE: All community needs identified in the research are important and deserve thoughtful consideration. The higher-priority ones noted above represent a consensus opinion of community members and Hendrick leadership.</b></p>	

## Implementation Strategy Considerations

The Implementation Plan to be developed by Hendrick Health System (HHS) is considered a required “next step” to follow the CHNA in which a prioritized list of community needs has been developed. As is seen above, the needs list includes a wide range of issues that fall into one of several categories:

- Community needs which HHS is already addressing but may enhance efforts
- Needs which HHS is already addressing to an appropriate degree
- Needs that are not part of HHS’s purview (e.g., better addressed by other organizations), so an appropriate ongoing role for HHS may be minimal.

It is important to note though, that all of the identified needs are important, and HHS is dedicated to its mission “To deliver high quality healthcare emphasizing excellence and compassion consistent with the healing ministry of Jesus Christ.” To the degree possible, HHS will continue working effectively and efficiently to strengthen the community wherever possible.

To do so, HHS will develop the Implementation Plan that identifies which community needs HHS is already addressing, the degree of control it has over the ability to address each need, and the estimated timeline it would take to begin to address each need. The resulting Implementation Plan will show which of the CHNA prioritized needs HHS will address (and how, at a high level) and which ones it will not address (and why not).

The purpose of the Implementation Plan is to support the organization’s efforts to efficiently and effectively deploy resources that address the most pressing community needs.

## Appendices

This document contains the following appendices:

- Appendix A: Community Health Needs Assessment Survey
- Appendix B: Interactive Map of Services
- Appendix C: Table of Community Services
- Appendix D: C.A.L.M. Model of Access to Care
- Appendix E: Activities to Address Needs Identified in the Prior (2016) CHNA

## Appendix A: Community Health Needs Assessment Survey

### Hendrick Health System Health Services

### Community Health Needs Assessment

### *Community Telephone - FINAL*

#### Introduction and Objective

Hello, my name is (caller name). I am conducting a very brief survey on behalf of Hendrick Health System for the purpose of better understanding your perceptions of health needs and services in the area.

We have just a few short questions, and would really value your input.

**Screening** - To begin with I have just a few of demographic questions that help us groups the responses later.

**1. In what year were you born?**

[ENTER 4 DIGIT YEAR] [CODE REFUSE=9999 but terminate] *If "1999" or later, will thank and terminate.*

**2. What is the highest grade or year in school you completed?**

CHECK ONE

- Less than high school
- Graduated high school
- Some college or vocational training
- Graduated college (4-year Bachelor Degree)
- Completed Graduate or Professional school (Masters, PhD, Lawyer)

**3. What is your race?**

- African-American
- American Indian
- Asian
- Caucasian
- Hispanic
- Mixed Race
- Other

**4. Which of the following ranges best describes your total annual household income last year?**

- Less than \$25,000
- \$25,000 to \$50,000
- \$50,000 to \$75,999
- \$75,000 to \$100,000
- \$100,000 or more

**5. Gender** [MARK RESPONSE BASED ON VOICE RECOGNITION; DO NOT ASK]

- Male
- Female

**6. Do you have a family doctor, or a place where you go for care?**

- Yes, family doctor, family health center, or clinic
- Yes, emergency room, or walk-in urgent care
- No
- Other (specify)

<b>CATEGORY</b>	<b>NEEDS</b>	<b>No More Focus Needed (1)</b>	<b>Somewhat More Focus Needed (2)</b>	<b>Much More Focus Needed (3)</b>	<b>Don't know</b>
<b><i>Social, Economic, and Physical Environment Issues</i></b>	Transportation services for people needing to go to doctor's appointments or the hospital	1	2	3	DK
	Secure sources for affordable, nutritious food	1	2	3	DK
	Affordable Quality Child Care	1	2	3	DK
	Transportation	1	2	3	DK
	Homelessness	1	2	3	DK
	Job Readiness	1	2	3	DK
<b><i>Medical / Health Issues</i></b>	Primary Care Services	1	2	3	DK
	Emergency Care and Trauma Services				DK
	Specialty Services	1	2	3	DK
	Long Term Care or Dementia Care	1	2	3	DK
	Affordable healthcare services for people or families with low income	1	2	3	DK
	Prescription Assistance	1	2	3	DK
<b><i>Mental health and Substance Use Disorders</i></b>	Counseling services for Depression or Anxiety	1	2	3	DK
	Counseling services for adolescents / children	1	2	3	DK
	Early intervention for Substance use disorders	1	2	3	DK
	MAT for Opioid Addiction	1	2	3	DK
	Post- Addictions Treatment support Programs	1	2	3	DK
	Crisis Care Programs for mental health	1	2	3	DK
<b><i>Risky and Protective Lifestyle Behaviors</i></b>	Programs for Diabetes and/or Obesity	1	2	3	DK
	Caring for aging parents and resources to help	1	2	3	DK
	Parenting Classes	1	2	3	DK
	HIV AIDS Testing	1	2	3	DK
	Heart Health or Cardiovascular Health	1	2	3	DK

[INTERVIEWER READ] A healthy community can include different things such as the availability of healthcare services including behavioral health to social, economic, and environmental factors to lifestyle topics such as obesity, smoking, substance abuse, and healthy living issues.

7. **Thinking broadly about health – mental, physical or spiritual – when I say a “healthy community” or “improving community health” what is the first thing that comes to mind?**

OPEN ENDED \_\_\_\_\_

8. For the next question, I’m going to read you a number of issues and ask you **Which of the following do you feel need more focus by the community?**

We will use a scale of 1 to 3 --where 1 means that No More Focus is needed, 2 is Somewhat More Focus Needed, and, **3 is Much More Focus Needed**

[INTERVIEWER REPEAT SCALE AS NEEDED]

**[ROTATE CATEGORIES, DO NOT READ**

**KEEP “MEASURES” IN CONSISTENT ORDER WITHIN DOMAIN]**

9. **Of all the issues we just discussed, what do you think are the top one or two greatest health issues in the community?**

[RECORD TOP TWO]

10. **What sources do you normally use to find out about healthcare providers, your own health or to monitor your own health?**

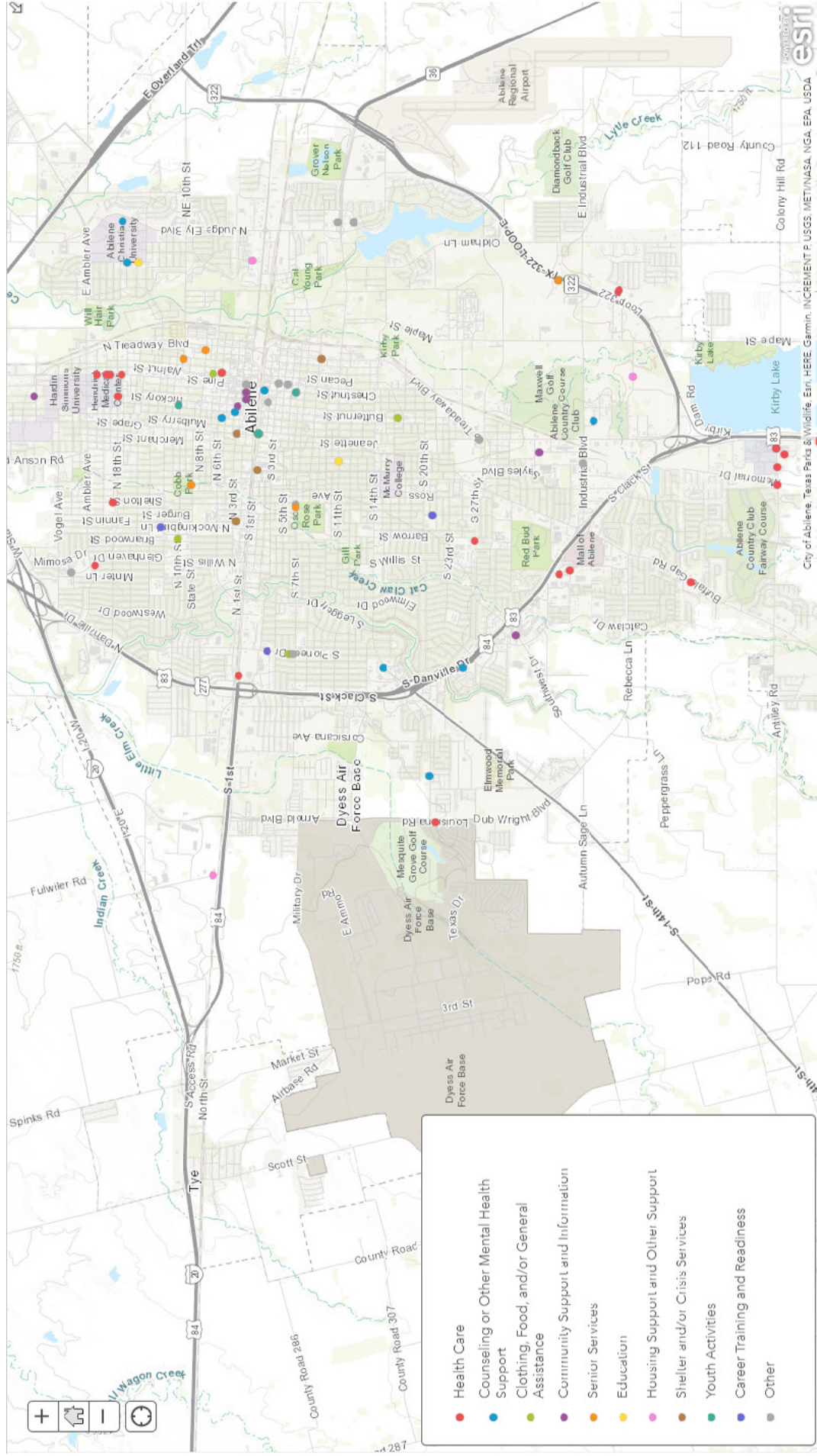
[DON’T READ; RECORD TOP TWO MOST SIMILAR RESPONSE]

- **Social media**
- **A website**
- **A physician’s website**
- **Medical websites such as WebMD or Mayo Clinic**
- **A patient portal**
- **Healthcare.gov**
- **Healthcare rating sites like HealthGrades or US News & World Report**
- **A fitness tracker website like Fitbit or My Fitness Pal**
- **Newspaper**
- **Television**
- **Radio**
- **A physician or other healthcare worker**
- **Magazine**
- **Friends and relatives**

**THIS COMPLETES THE STUDY – THANK YOUR FOR YOUR PARTICIPATION!!**

## Appendix B: Interactive Map of Services

The map below shows the location of Abilene-area community services. Each color represents a different service category, and the following hyperlink allows the reader to interact with the map to enlarge it, click on individual points to see service descriptions and locations, and other actions. Interactive map hyperlink: <https://arcg.is/jlzoq>





Appendix C: Table of Community Services

**Hendrick Health System**  
**Community Health Needs Assessment - Resource List**

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Alliance for Women & Children	Childcare	1350 N 10th St	Abilene	(325) 677-5321	Youth Activities	After-school programs
Big Brothers, Big Sisters	Childcare	547 Chestnut St	Abilene	(325) 677-7839	Youth Activities	Emotional support and activities for children
Boys and Girls Club - Fannin Club House	Childcare		Abilene	(325) 677-5407	Youth Activities	After-school programs
Boys and Girls Club - Highland Branch	Childcare		Abilene	(325) 672-3772	Youth Activities	After-school programs
Boys and Girls Club - Wylie	Childcare		Abilene	(325) 437-4702	Youth Activities	After-school programs
Rolling Plains Management Corp. - Childcare	Childcare	1150 Estates Dr	Abilene	(325) 672-8112	Childcare and Family Support	Childcare, self-sufficiency, housing crisis, utility assistance, head start, & weatherization
West Central Texas Child Care Program Operations (CCPO)	Childcare	500 Chestnut St	Abilene	(325) 795-4283	Childcare and Family Support	Affordable childcare
Abilene ISD Adult Education	Education	1929 S 11th S	Abilene	(325) 671-4419	Education	Offer GED, ESL & reading classes
BCFS - Abilene Transition Center	Education	303 S Pioneer Dr	Abilene	(325) 692-0033	Career Training and Readiness	Youth services (18-23 yrs. old), college prep, life skills, job search skills, counseling
Budgeting: College Cost Calculator	Education		Abilene		Education	Information on the cost of colleges based on degree and time-frame

## Hendrick Health System

### Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
College Affordability Guide	Education		Abilene		Education	Assists college students in finding income affordable schools and tuition assistance
Communities in Schools	Education	1654 Campus Ct	Abilene	(325) 232-8712	Education	Student supportive services in public schools
FAFSA and Financial Aid	Education		Abilene		Education	Information on how to obtain financial aid and apply for the FAFSA
Local Schools	Education		Abilene		Education	List of schools for ages 5-18 in Abilene, Texas
Consumer Credit Counseling Services (Money Management International)	Financial Counseling	241 Pine St	Abilene	(866) 889-9347	Financial Support and Counseling	Free credit counseling, financial education programs, debt management plans, housing counseling and bankruptcy counseling
West Central Texas Center for Economic Opportunity	Financial Counseling		Abilene	(325) 672-8980	Financial Support and Counseling	Financial literacy & management classes
Abilene Baptist Social Ministries	Food and Clothing	618 S Pioneer Dr	Abilene	(325) 672-4193	Clothing, Food, and/or General Assistance	Assist with clothing, food, etc.
Christian Ministries of Abilene	Food and Clothing	701 Walnut St	Abilene	(325) 673-1234	Clothing, Food, and/or General Assistance	Food and commodities
Christian Service Center	Food and Clothing	3185 N 10th St	Abilene	(325) 673-7531	Clothing, Food, and/or General Assistance	Food, clothing, household items

## Hendrick Health System Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Love and Care Ministries	Food and Clothing	233 Fannin St	Abilene	(325) 670-0246	Clothing, Food, and/or General Assistance	Assist with food, clothing, prescriptions, getting birth certificates, IDs, eyeglasses, small household goods, homeless assistance
Meals on Wheels plus (Food and Clothing)	Food and Clothing	717 North 10th Street	Abilene	(325) 672-5050	Clothing, Food, and/or General Assistance	Food / home delivery for seniors and people with disabilities
Salvation Army	Food and Clothing	1726 Butternut Street	Abilene	(325) 677-1408	Clothing, Food, and/or General Assistance	
211 Texas	General Assistance	240 Cypress St.	Abilene	211	Community Support and Information	Community Resource Center
Ben Richey Boy's Ranch - Family Care	General Assistance	501 Ben Richey Dr	Abilene	(325) 692-2500	Housing Support and Other Support	Housing assistance, life skills, resources, counseling, parenting classes
City of Abilene - Adaptive Recreation	General Assistance	2609 S 7th St	Abilene	(325) 676-6575	Disability Support	Recreational activities adapted for persons with disabilities
City of Abilene - Librarian's Web Guide to Local Services	General Assistance	202 Cedar St.	Abilene	325-676-6025	Community Support and Information	General guide to broad-based community services
Connecting Caring Communities	General Assistance	2701 Hickory St	Abilene	(325) 232-8241	Community Support and Information	Neighborhood support services
Rolling Plains Management Corp.	General Assistance	1150 Estates Dr	Abilene	(325) 672-8112	Childcare and Family Support	Childcare, self-sufficiency, housing crisis, utility assistance, head start, & weatherization
Taylor County Social Services	General Assistance	400 Oak St	Abilene	(325) 674-1341	Financial Support and Counseling	Assist with rent, utilities, some prescriptions, vision and dental care and indigent burial costs

## Hendrick Health System

### Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
United Way	General Assistance	240 Cypress St.	Abilene	325 677 1841	Clothing, Food, and/or General Assistance	
West Central Texas Council of Governments	General Assistance	3702 Loop 322	Abilene	(325) 672-8544	Community Support and Information	Information, referral and assistance with other agencies, benefits counseling, care coordination, nutrition program, prescription assistance, respite assistance for caregivers, family caregiver support group and seminars/workshops
Abilene Christian University Marriage and Family Institute	Health and Wellbeing	1850 Teague Blvd	Abilene	(325) 674-3722	Counseling or Other Mental Health Support	Individual marriage and family therapy
Advocates of Abilene	Health and Wellbeing	333 Orange St	Abilene	(325) 676-1400	Counseling or Other Mental Health Support	Mental health support services
Alliance for Women & Children	Health and Wellbeing	1350 N 10th St	Abilene	(325) 677-5321	Health Care	Women's health services
Harmony Family Services, Inc	Health and Wellbeing	305 Grape St	Abilene	(325) 672-7200	Housing Support and Other Support	Therapeutic foster care and emergency shelter care for abused/neglected children, temporary shelter care, support services and family counseling for runaway and homeless youth
Medical Care Mission	Health and Wellbeing	1857 Pine St	Abilene	(325) 677-3455	Health Care	Family clinic, prescriptions, dental clinic, spiritual wellness
Pathways Youth Family Services	Health and Wellbeing	4150 Southwest Dr	Abilene	(325) 692 4048	Community Support and Information	
Safety, Health & Consumer Council	Health and Wellbeing		Abilene	(877) 405-7516	Community Support and Information	Veteran Assistance and Eligibility

## Hendrick Health System

### *Community Health Needs Assessment - Resource List*

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Texas Department of Family & Protective Services (Adult)	Health and Wellbeing		Abilene	(325) 795-5776	Senior Services	Report adult (elderly) abuse or neglect
Texas Department of Family & Protective Services (Child)	Health and Wellbeing	3610 Vine St	Abilene	(325) 691-8100	Community Support and Information	Report child abuse or neglect
Texas Department of Health & Human Services Commission	Health and Wellbeing	4601 S 1st St	Abilene	(325) 795-5999	Health Care	Medicaid, Children's Health Insurance Program (CHIP), Temporary Assistance for Needy Families (TANF), Food Stamps, Nutrition
Texas Family Institute	Health and Wellbeing	100 Chestnut St	Abilene	(325) 676-8963	Counseling or Other Mental Health Support	Counseling - Individual, Family & Marriage
Women, Infants & Children (WIC)	Health and Wellbeing	850 N 6th St	Abilene	(325) 692-1680	Clothing, Food, and/or General Assistance	Food, nutrition education, breastfeeding education & support, referrals for other health and social service programs; income/at-risk based program; for pregnant & breastfeeding women, infants & children up to age 5
Abilene Community Health Center	Healthcare Clinic and Specialized Care Resources	1749 Pine St	Abilene	(325) 696-0600	Health Care	Primary care services
Abilene Diagnostic Clinic	Healthcare Clinic and Specialized Care Resources	1665 Antilley Road	Abilene	(325) 793-5148	Health Care	Urgent care services and after hours medical needs.

## Hendrick Health System Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Abilene Taylor County Public Health District	Healthcare Clinic and Specialized Care Resources	850 North 6th Street	Abilene	(325) 692-5600	Health Care	
Affordacare Urgent Care Clinic	Healthcare Clinic and Specialized Care Resources	4006 Ridgemoor Dr.	Abilene	(325) 232-8830	Health Care	Urgent care services and after hours medical needs.
Affordacare Urgent Care Clinic	Healthcare Clinic and Specialized Care Resources	3101 South 27th	Abilene	(325) 704-5037	Health Care	Urgent care services and after hours medical needs.
Allergy and Asthma Clinic of Abilene	Healthcare Clinic and Specialized Care Resources	2100 Antilley Road	Abilene	(325) 695-7200	Health Care	Respiratory and allergy care
Cook Children's Health Care System	Healthcare Clinic and Specialized Care Resources	410 Lone Star Drive	Abilene	325-690-6680	Health Care	Pediatric specialized medicine clinic
Hendrick Asthma Education Program	Healthcare Clinic and Specialized Care Resources	1857 Pine St.	Abilene	325-670-2112	Health Care	Asthma and respiratory system services
Hendrick Cancer Center	Healthcare Clinic and Specialized Care Resources	2000 Pine St	Abilene	(325) 670-6340	Health Care	Cancer support and services
Hendrick Cardiovascular Care	Healthcare Clinic and Specialized Care Resources	1900 Pine St	Abilene	325-670-2000	Health Care	Heart care and related services

## Hendrick Health System

### *Community Health Needs Assessment - Resource List*

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Hendrick Diabetes Center	Healthcare Clinic and Specialized Care Resources	1742 Hickory St.	Abilene	325-670-2421	Health Care	Diabetes awareness, education, and support
Hendrick Medical Plaza & Hendrick Emergency Care Center South	Healthcare Clinic and Specialized Care Resources	5302 Buffalo Gap Road	Abilene	325-307-6351	Health Care	
Hendrick Surgery Center in Brownwood	Healthcare Clinic and Specialized Care Resources	2401 Crockett Drive	Abilene	325-203-5150	Health Care	
Home Instead Senior Care	Healthcare Clinic and Specialized Care Resources	441 Lone Star Dr	Abilene	(325) 305-0032	Health Care	In-home support for a variety of chronic medical conditions
M.E.R.C.Y. Health Care Center	Healthcare Clinic and Specialized Care Resources	1902 Shelton	Abilene	(325) 676-6634	Health Care	Primary care; services provided regardless of ability to pay.

## Hendrick Health System Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Pregnancy Resources Of Abilene	Healthcare Clinic and Specialized Care Resources	2110 N. Willis Street	Abilene	(325) 672-6415	Health Care	
Texas Oncology - Abilene	Healthcare Clinic and Specialized Care Resources	1957 Antilley Rd	Abilene	325-692-0188	Health Care	Cancer support and services
US Air Force Medical Services	Healthcare Clinic and Specialized Care Resources	697 Louisiana Rd	Abilene	(325) 696-4677	Health Care	
VA Community-Based Outpatient Clinic	Healthcare Clinic and Specialized Care Resources	3850 Ridgemoat Drive	Abilene	325-695-3252	Health Care	Primary care and mental health services to eligible Veterans
Abilene Regional Medical Center	Hospital	6250 Highway 83/84	Abilene	(325) 428-1000	Health Care	
Encompass Health Rehabilitation Hospital	Hospital	6401 Directors Parkway	Abilene	325.691.1600	Health Care	
Hendrick Medical Center - Main Campus	Hospital	1900 Pine St	Abilene	325-670-2000	Health Care	
Abilene Association of Realtors, Inc	Housing	626 S Pioneer Dr	Abilene	(325) 692-9821	Community Services	Publish rental listings (see website: AbileneAoR.com) and assist with complaints against landlords when possible
Abilene Hope Haven, Inc	Housing	801 S Treadaway Blvd	Abilene	(325) 677-4673	Shelter and/or Crisis Services	Homeless shelter (Families)
Big Country Apartment Association	Housing	2401 Willis St	Abilene	(325) 695-7431	Community Services	Process complaints regarding member apartment complexes



## Hendrick Health System Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Carver Plaza Apartments	Housing	233 Washington Blvd	Abilene	(325) 676-1534	Housing Support and Other Support	Housing for people 62+
Habitat for Humanity	Housing	101 A Fulwiler Rd	Abilene	(325) 670-0489	Housing Support and Other Support	Build affordable housing for low-income families
Hendrick Home for Children	Housing	2758 Jeanette St,	Abilene	(325) 692-0112	General Family Support	Orphan services and family care (single parent with children)
New Horizons	Housing	147 Sayles Blvd	Abilene	(325) 437-1852	Shelter and/or Crisis Services	Youth Services - residential treatment, emergency shelter/assessment center, group homes, therapeutic foster homes and in-home family preservation programs
Noah Project	Housing	5802 Texas Ave	Abilene	(325) 676-7107	Counseling or Other Mental Health Support	Center for victims of family violence
West Central Texas Aging and Disability Resource Center	Housing	3702 Loop 322	Abilene	(325) 793-8440	Housing Support and Other Support	Housing Navigator Project; Assistance with locating affordable housing. Specific assistance to the elderly and disabled in locating ADA accessible housing.
Christian Women's Job Corps	Job Training	2058 Marshall St	Abilene	(325) 673-6686 ext 106	Career Training and Readiness	Life and job skills training, educational support
Faith Works of Abilene	Job Training	1229 N Mockingbird	Abilene	(325) 437-2272	Career Training and Readiness	Workforce readiness and other services for all community members in need.
Workforce Solutions of West Central Texas	Job Training	500 Chestnut	Abilene	325-795-4200	Career Training and Readiness	Workforce readiness and other services for all community members in need.
Legal Aid of Northwest Texas	Legal	500 Chestnut St	Abilene	(325) 677-8591	Legal and Governmental Services	Legal assistance for low-income families

## Hendrick Health System Community Health Needs Assessment - Resource List

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
Social Security Office	Legal	1202 E South 11th St	Abilene	(325) 672-0310	Legal and Governmental Services	SSI/Social Security cards
Taylor County Justice of the Peace	Legal	301 Oak St #611	Abilene	(325) 674-1338	Legal and Governmental Services	Landlord/Tenant disputes
U.S. Border Patrol	Legal	1945 Industrial Blvd	Abilene	(325) 698-5552	Legal and Governmental Services	Offer referrals for immigration and travel issues
ACU Psychology Clinic	Mental Health	1750 Campus Ct.	Abilene	325-674-4826	Counseling or Other Mental Health Support	Community counseling and psychological assessment
Betty Hardwick Center MHMR Crisis Hotline	Mental Health	2616 South Clack	Abilene	(325) 690-5100	Counseling or Other Mental Health Support	Mental health crisis hotline
Big Country Mental Health	Mental Health	1665 Antilley Rd	Abilene	(325) 793 5254	Counseling or Other Mental Health Support	Psychiatric, substance abuse, and physical assessment and evaluation services - outpatient.
Mental Health America of Abilene	Mental Health	525 Beech Street	Abilene	325-673-2300	Counseling or Other Mental Health Support	Mental health support groups, advocacy, and education
Oceans Behavioral Hospital	Mental Health	4225 Woods Place	Abilene	(325) 691-0030	Counseling or Other Mental Health Support	
West Texas Autism Center	Mental Health	4606 S. 14th Street	Abilene	325-704-4392	Counseling or Other Mental Health Support	Activities, support, education, and other programs for people with autism-spectrum related issues.
Abilene Hope Haven	People experiencing homelessness	801 S. Treadaway Blvd.	Abilene	325 677 4673	Shelter and/or Crisis Services	Bridge 2 Home program provides emergency/temporary housing for individuals and families with school-age children.

## Hendrick Health System Community Health Needs Assessment - Resource List

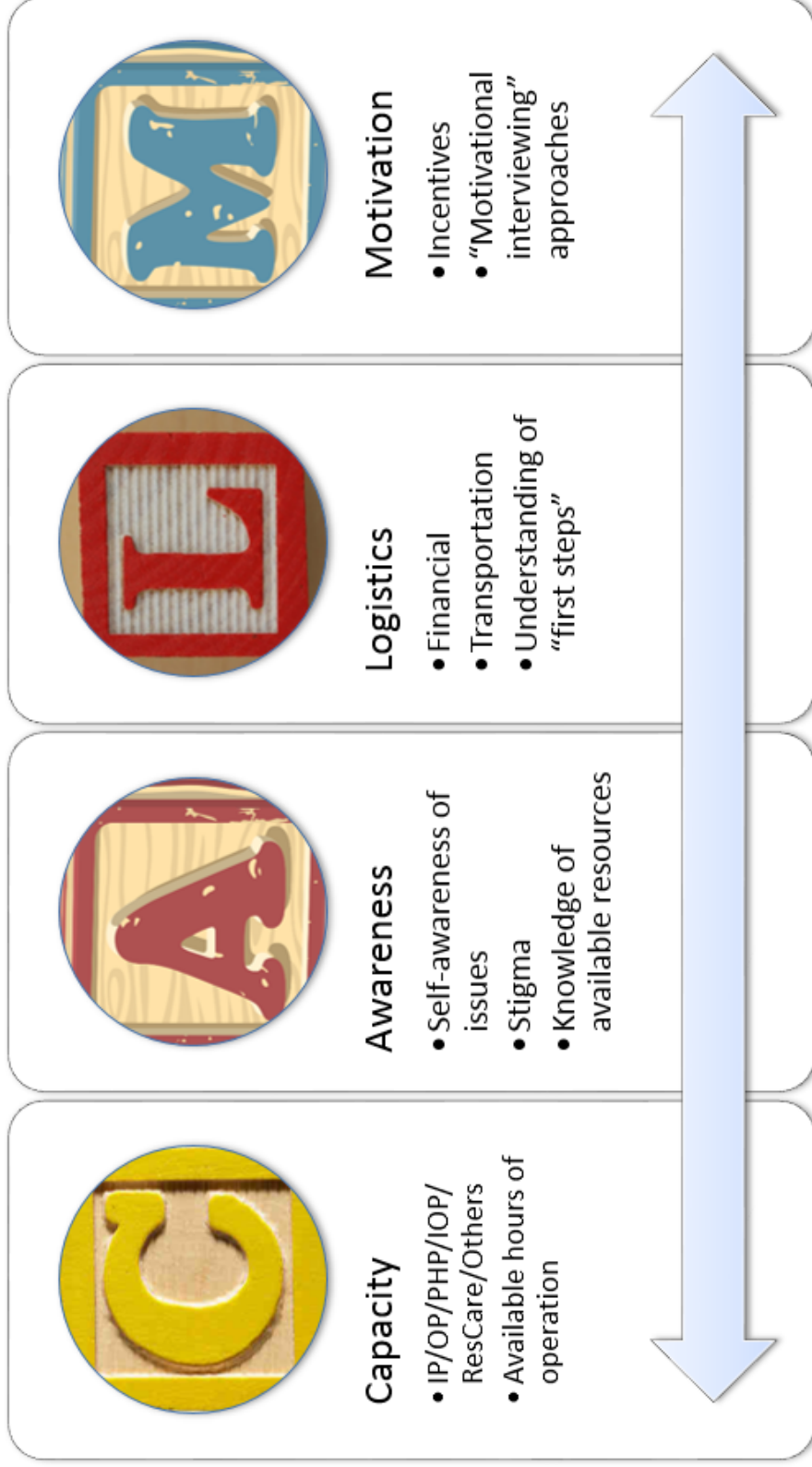
<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
City Light Community Ministries	People experiencing homelessness	336 Hickory ST	Abilene	325 673 6686	Community Support and Information	Provides financial assistance with a utility or rent, gasoline, or local bus passes, when resources are available. Provides a homeless shower and laundry assistance.
Harmony Family Services Emergency Shelter For Children	People experiencing homelessness	305 Grape St	Abilene	325-672-4278	Shelter and/or Crisis Services	Shelter for children
Love & Care Ministries and Homeless Assistance	People experiencing homelessness	233 Fannin St	Abilene	(325) 670-0246	Shelter and/or Crisis Services	
Area Agency on Aging	Senior Services	3702 Loop 322	Abilene	325-793-8417	Senior Services	Senior health and support services
Cobb Park Senior Center	Senior Services	2302 State Street	Abilene	(325) 676-6447	Senior Services	Recreational and Social opportunities for senior citizens
G.V. Daniels Senior Center	Senior Services	541 North 8th St.	Abilene	(325) 676-6217	Senior Services	Recreational and Social opportunities for senior citizens
Meals on Wheels plus	Senior Services	717 North 10th Street	Abilene	(325) 672-5050	Senior Services	Food / home delivery for seniors and people with disabilities
Rose Park Senior Activity Center	Senior Services	2625 S.7th Street	Abilene	325-734-5306	Senior Services	Recreational and Social opportunities for senior citizens
CARR	Transportation	2310 S Concho St	Coleman	(800) 710-2277	Transportation	Public transportation in rural areas

## Hendrick Health System

### *Community Health Needs Assessment - Resource List*

<u>Facility</u>	<u>Type</u>	<u>Street Address</u>	<u>City</u>	<u>Telephone</u>	<u>Category</u>	<u>Other information</u>
City Link Abilene	Transportation	1189 S 2nd St	Abilene	(325) 676-6BUS	Transportation	Public transportation, bus routes, cost to ride, additional information on City Link
City of Abilene Senior Citizen Division Senior Help Line	Transportation		Abilene	(325) 673-4694	Senior Services	Provide transportation for medical appointments grocery shopping, to/from senior centers; for citizens age 60+ (must be mobile)

# Access to Care Model



## Appendix E: Activities to Address Needs Identified in the Prior (2016) CHNA

In 2016, Hendrick Health System completed a CHNA and Implementation Plan in which included three core areas of focus and goals were identified. Since that time, Hendrick has actively worked to address needs identified in the 2016 CHNA. They are listed below.

- **Creating A Culturally Sensitive Community**  
Goal: To increase education/public awareness of cultural differences in our community to improve relationships as well as access to healthcare and social services for populations in need.
- **Improving Access To Healthy Foods And Nutritional Knowledge**  
Goal: To increase public awareness of the importance of healthy eating and nutrition to improve the overall health of the community.
- **Addressing Mental Health In Our Community**  
Goal: To increase community access to educational materials and resources providing assistance with mental health needs.

The 2016 Implementation Plan – and activities conducted to address areas of focus and work toward goals – is shown below.

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**Hendrick Health System  
Community Health Needs Assessment  
Implementation Plan  
2017-2020**

**CREATING A CULTURALLY SENSITIVE COMMUNITY**

**GOAL: TO INCREASE EDUCATION/PUBLIC AWARENESS OF CULTURAL DIFFERENCES IN OUR COMMUNITY TO IMPROVE RELATIONSHIPS AS WELL AS ACCESS TO HEALTHCARE AND SOCIAL SERVICES FOR POPULATIONS IN NEED.**

- Hendrick employees, across a vast array of departments, participated in the Chamber of Commerce’s Business Expo, Business Mercado and the Black Chamber’s Juneteenth event to reach and educate low income or more culturally diverse populations about Hendrick’s programs and services.
- Hendrick’s Business Office and Marketing Team created a “Because of You” campaign to encourage and assist patients without insurance in sign-up process via the Marketplace. The event was held on two Fridays in late November and early December. Fifty community members enrolled.
- Hendrick’s Women’s Services collaborated with the Black Church Alliance for the 2<sup>nd</sup> and 3<sup>rd</sup> Annual Breast Cancer Awareness Luncheons. Patient testimonies on the importance of annual mammograms and keynote addresses by Dr. Amechi and Dr. Enard, Hendrick physicians, provided pertinent information on breast cancer and preventative care.

- Hendrick Women’s Services held its 16<sup>th</sup> and 17<sup>th</sup> annual Bunco for Breast Cancer event, where 1,500 women, across a broad demographic spectrum, came together to play bunco while learning about breast cancer prevention and raising money for the Hope Fund, which provides mammograms for women who cannot afford them.
- Hendrick expanded services offered by The Hope Fund to include lymphedema supplies and lodging for patients receiving multi-day cancer treatments.
- Hendrick partnered with Texas Tech University Health Sciences Center and the Laura W. Bush Institute for Women’s Health to provide breast and cervical cancer screenings through a Cancer Prevention Research Institute of Texas (CPRIT) grant.
- Hendrick representatives met with Hispanic leadership to discuss healthcare needs. It was determined that diabetes across all generations was the #1 issue where educational efforts from Hendrick would be beneficial. A sub-committee with employees from the Hendrick Diabetes Center and Hispanic Community will be established in the fall of 2019 to develop an outreach plan.
- Hendrick’s Marketing Department/Women’s Services launched a “Care for a Lifetime” media campaign with billboards, TV spots, radio, digital and print materials to reach women from ages 20+ messaging the importance healthcare screenings at every age. The print materials were distributed to physician offices, non-profits, churches, and Hendrick special events to reach as many women as possible in our community.
- The *Hendrick Cares* program was developed to provide community grants to needs that aligned with the objectives identified in the Community Health Needs Assessment. One of the grants provided an educational event at the Plum Street United Methodist Church for refugees that relocated to Abilene. Refugees received health education materials and information on community healthcare resources as well as basic medical supplies.
  - *Hendrick Cares* also provides volunteer opportunities for Hendrick employees to engage with existing programs within the community. Through *Hendrick Cares*, Hendrick employees volunteered with Connecting Caring Communities for a community clean-up project, collected clothes and supplies for Love & Care Ministries and Christian Service Center of Abilene, and assisted with tornado relief at the Tornado Resource and Recovery Center through United Way of Abilene.
- With a recognized need of more certified Community Health Workers (CHWs) to reach underserved populations, The CHW Workforce Development Center evolved from the West Texas Area Health Education Center. The new center offers continuing education units (CEUs) for certified CHWs and intermediate level CHW training for motivational interviewing, patient navigation, chronic disease management and quality improvement.
  - Hendrick, in collaboration with Texas Tech’s Federally Qualified Health Center, hired a nurse navigator to assist and coordinate care for patients facing barriers to healthcare due to language, lack of primary care, chronic illness, etc.

## IMPROVING ACCESS TO HEALTHY FOODS AND NUTRITIONAL KNOWLEDGE

**GOAL: TO INCREASE PUBLIC AWARENESS OF THE IMPORTANCE OF HEALTHY EATING AND NUTRITION TO IMPROVE THE OVERALL HEALTH OF THE COMMUNITY.**

- Hendrick collaborated with the Texas Tech School of Public Health to produce a cookbook, “Only a Microwave and a Sink Needed.” The cookbook of simple, healthy recipes was written by Texas Tech’s master’s students in public health and illustrated by the Hendrick Marketing Department. The book will be distributed to the local food pantry, Connecting Caring Communities’ friendship houses and non-profit organizations that serve lower income populations.
- The Hendrick Diabetes Center produced a brochure entitled, “My Plate” to educate diabetes patients as well as the general public on the importance of serving proportions and how serving size correlates to weight and calorie control. The brochure, which also promotes healthy eating, will be distributed to diabetes patients, physician offices, food banks and hospital departments upon request.
- Hendrick Diabetes Center held their annual Texas Diabetes Style seminar to promote healthy eating for pre-diabetic and diabetic patients. Dr. Maharaj-Mikiel, Hendrick physician, spoke about healthy lifestyles. Attendees also enjoyed a “cooking healthy” demonstration from the doc.
- Outreach services to Brownwood were added by the Hendrick Diabetes Center. Classes will be taught in the new Hendrick Medical Plaza in Brownwood.
- Internally, Hendrick administration worked with Aramark, our food service provider, to make nutritional facts on food items readily available to the public.
- Hendrick served as the title sponsor for the American Heart Association’s Go Red Luncheon for the past 3 years. Hendrick cardiologists had the opportunity to share with more than 600 women the importance of a healthy lifestyle and symptoms of heart disease.
- Hendrick Health System and the Laura Bush Institute for Women’s Health partnered to bring Dr. Patricia Sulak to Abilene as part of their Day of the Woman series. Dr. Sulak spoke on the eleven essential elements to living WELLaware.
- Hendrick employees volunteered with established food and nutrition programs in the community including Meals on Wheels, HEB Feast of Sharing, Food Bank of West Central Texas and Highland Church of Christ Kids Eat Free Summer Program through the *Hendrick Cares* program.



## ADDRESSING MENTAL HEALTH IN OUR COMMUNITY

### GOAL: TO INCREASE COMMUNITY ACCESS TO EDUCATIONAL MATERIALS AND RESOURCES PROVIDING ASSISTANCE WITH MENTAL HEALTH NEEDS.

- The Laura Bush Institute for Women’s Health and Hendrick Health System’s Women’s Services partnered with Mental Health America of Abilene to provide a Mental Health Symposium for the women in our community.
- Hendrick Health System and the Laura W. Bush Institute for Women’s Health partnered to bring mental health educator to the community through the “Day of the Woman” series. The keynote for the luncheon was attorney Terry Bentley Hill who spoke about the public’s responsibility to address mental health issues in our community, especially those that could possibly lead to suicide.
- The Ministry of Counseling and Enrichment at First Baptist Abilene added psychiatric services via telemedicine. Hendrick continues with its telemedicine capabilities in the ED.
- Betty Hardwick MHMR Center, in response to CHNA feedback, created a community list to share information on Abilene agencies providing mental health staff and mental health community education/in-services.
- Hendrick collaborates with Federally Qualified Health Center (FQHC) to identify and improve mental health assistance for special populations through our population health/nurse navigator employee.
- Hendrick Health System, the City of Abilene, the Dian Graves Owen Foundation and the Dodge Jones Foundation engaged the Meadows Mental Health Policy Institute to complete an assessment of the behavioral health and criminal justice systems that serve the City of Abilene and Taylor County. The assessment included a review of current practices, service utilization and gaps, and available resources in the City of Abilene and Taylor County.
- In July 2018, representatives from Hendrick joined a local behavioral health leadership collaborative – the Behavioral Advisory Team (BAT) to support assessment findings, address the system needs, and implementation recommendations.
- Hendrick supports and assists with the launching of Mental Health Police Officer program to provide jail diversion for mentally ill victims. The program consists of a police officer, paramedic and a Betty Hardwick MHMR clinician who travel as a team to assess the victim.
- Hendrick also participates in a community response team to review and provide ongoing oversight of BAT activities.







 HENDRICK  
HEALTH SYSTEM

crescendo 