



Baylor Scott & White Health Waxahachie Health Community

Community Health Implementation Strategies 2022

An Action Plan for the Community Health Needs Assessment





Waxahachie health community hospital

▼ [Baylor Scott & White Medical Center - Waxahachie](#)

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Executive summary

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

In early 2022, a BSWH task force led by the community benefit, tax compliance and corporate marketing departments began assessing the current health needs of all the communities served by BSWH hospitals. IBM Watson Health analyzed the data for this process and prepared a final report made publicly available in June 2022.

For the 2022 assessment, the community served by Baylor Scott & White Medical Center – Waxahachie is Ellis County and was determined based on the contiguous ZIP codes within the associated counties that made up nearly 80% of the hospital facility's inpatient admissions over the 12-month period of FY20.

BSWH and IBM Watson Health examined more than 59 public health indicators and conducted a benchmark analysis of this data, comparing the community to overall state of Texas and US values. A community focus group, including a representation of minority, underserved and indigent populations, provided input for a qualitative analysis. Group interviews with key community leaders and public health experts provided depth and context to the report.



Any community needs that did not meet state benchmarks were included in a magnitude analysis index. Understanding the degree of difference from the benchmark helped determine the relative severity of the issue. The outcomes of this quantitative analysis were aligned with the qualitative findings of the community input sessions to elicit a list of health needs in the community. These health needs fell into one of four quadrants within a health needs matrix: high data/low qualitative, low data/low qualitative, low data/high qualitative or high data/high qualitative.

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

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

Letter to the community

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

We are pleased to present the 2022 implementation strategies for the Waxahachie Health Community, a companion piece to the CHNA that provides plans for addressing our most pressing health needs. The CHNA for the health community hospital incorporates input from influencers such as key stakeholders, area residents, faith-based organizations, healthcare providers, neighborhood association leaders, elected officials, health professionals, hospital and system leaders, the medically underserved, and others.

The full report can be found at BSWHealth.com/CommunityNeeds.

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

Sincerely,

Baylor Scott & White Medical Center - Waxahachie

Waxahachie Health Community implementation strategies

The overall purpose of the implementation strategies is to align the hospital's charitable mission, program services and limited resources with the findings of the CHNA. To meet the requirements under IRC Section 501(r)(3) and the Texas Health and Safety code Chapter 311, the written implementation strategies include the following:

- ▼ A list of the prioritized needs the hospital plans to address and the rationale for not addressing other significant health needs identified
- ▼ Actions the hospital intends to take to address the chosen health needs
- ▼ The anticipated impact of these actions and the plan to evaluate such impact (e.g., identify data sources that will be used to track the plan's impact)
- ▼ Identification of programs and resources the hospital plans to commit to addressing the health needs
- ▼ Description of any planned collaboration between the hospital and other facilities or organizations in addressing the health needs



Waxahachie Health Community needs

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

Priority	Need	Category of need
1	Access to mental healthcare (providers/resources)	Mental health
2	Access to primary healthcare	Access to care
3	Diabetes	Conditions/diseases
4	Obesity/physical inactivity	Conditions/diseases Health behaviors
5	Rate of uninsured in general population	Access to care
6	Binge drinking and substance abuse/ access to treatment	Conditions/diseases
7	Lack of affordable housing	Environment
8	Emergency department use rate in all populations	Utilization

The hospital collaborated to conduct these implementation strategies and has reviewed the significant health needs identified above. Hospital leadership selected the following health needs as the most important to confront in collaboration with the community based on the anticipated impact to the community, hospital resources available and the expertise of the hospital facility.

Community needs addressed

Facility	Access to mental healthcare (providers/resources)	Access to primary healthcare
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Implementation strategies

Baylor Scott & White Medical Center – Waxahachie

Priority need 1: Access to mental healthcare (providers/resources)

<p>Planned programs/strategies</p>	<ul style="list-style-type: none"> ▼ Tele-psych medicine service line ▼ Mobile psych assessment program contract: Behavioral Health Connections ▼ Hope Clinic (FQHC) mental health counseling (women’s grief support group, support group for parents with children with depression, classes on parent/child relationship building, free smoking cessation classes with a mental health component) ▼ Partnership with North Texas Behavioral Health Authority (NTBHA) ▼ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
<p>Anticipated impact</p>	<ul style="list-style-type: none"> ▼ Expand accessibility to readily available mental health services ▼ Reduced avoidable admissions to psychiatric facilities; provide appropriate medication treatments ▼ Provide crisis mental health intervention and facility placement ▼ Provide psychiatric placement funding for unfunded patients
<p>Hospital resources</p>	<ul style="list-style-type: none"> ▼ Financial support ▼ Outreach/health education materials ▼ Meeting space/virtual platform
<p>List community partner(s) involved in the work</p>	<ul style="list-style-type: none"> ▼ Hope Clinic ▼ Behavioral Health Connect ▼ North Texas Behavioral Health Authority (NTBHA) ▼ Baylor Scott & White Quality Alliance (BSWQA)
<p>Outcome measure(s)</p>	<ul style="list-style-type: none"> ▼ Number of people served ▼ Reduced ED bed utilization due to psych-related medical issues ▼ Number of telemedicine psych referrals ▼ Number of people receiving financial assistance; unreimbursed cost of care

Priority need 2: Access to primary healthcare

Planned programs/ strategies	<ul style="list-style-type: none"> ▼ Dedicated inpatient healthcare coordinator to schedule primary and specialty care of patient post-discharge ▼ Virtual Transitions program (system) provides access to nurse practitioners for interim care post-discharge, prior to primary care appointment ▼ Development of GME Family Medicine Residency Program ▼ Focused recruitment of family medicine providers ▼ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
Anticipated impact	<ul style="list-style-type: none"> ▼ Improved continuum of care for patients ▼ Reduced readmissions ▼ Increase family medicine providers within our service area
Hospital resources	<ul style="list-style-type: none"> ▼ Financial support ▼ Outreach/health education materials ▼ Meeting space/virtual platform ▼ Staff time
List community partner(s) involved in the work	<ul style="list-style-type: none"> ▼ Hope Clinic ▼ HealthTexas Provider Network (HTPN) ▼ BSWQA
Outcome measure(s)	<ul style="list-style-type: none"> ▼ Average appointment scheduling wait time for primary care services ▼ Number of readmitted patients who are referred to the Virtual Transitions program ▼ Ratio of PCP/family medicine providers per 1,000 residents within our service area (currently 0.54 providers per 1,000 residents) ▼ Number of people receiving financial assistance; unreimbursed cost of care

Community needs not addressed

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

Needs not addressed:

- ▼ Diabetes
- ▼ Obesity/physical inactivity
- ▼ Rate of uninsured in general population
- ▼ Binge drinking and substance abuse/access to treatment
- ▼ Lack of affordable housing
- ▼ Emergency department use rate in all populations

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

Program evaluation

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

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

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

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

This document may be accessed at BSWHealth.com/CommunityNeeds.



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