



Community Health Needs Assessment

July, 2017

TORCH Management Services, Inc.

Dick Sweeden

dnmsweeden@gmail.com

254.760.3358

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Executive Summary

A Community Health Needs Assessment (Assessment) was conducted for Golden Plains Community Hospital, (Hospital) on July 10 - 13, 2017, through focus groups that included a number of community members from Borger and Hutchinson County. The value of an Assessment is that it allows healthcare organizations to better understand the needs of the communities they serve, with the ultimate goal of improving the overall health of the local citizens. Whether or not an organization is required by regulation or statute to conduct a Community Health Needs Assessment, it is an extremely valuable tool for fulfilling its role in the community.

The Mission of the Golden Plains Community Hospital is: To provide quality compassionate care to promote the physical and emotional well-being of all citizens of Hutchison and surrounding counties. By listening to members of the community, and by understanding the community demographics, the Hospital can gain information on health status, and on where the gaps in healthcare delivery currently exist. Further, it solidifies the Hospital's role in the community as a partner in improving the overall health status, and in areas beyond health, such as in education and economic development. The Hospital identifies its' primary market area as Hutchinson County, and Carson County. The secondary market extends to all surrounding counties, at a radius of approximately 50 miles from Borger.

In addition to Golden Plains Community Hospital, other hospitals in the area include:

Ochiltree General Hospital

- Hospital District
- 25 beds

Hansford Hospital

- District Hospital
- 25 beds

Hemphill County Hospital

- District
- 26 beds

Parkview Hospital

- Hospital District
- 16 beds

Additionally, BSA Health System operates 445 beds in Amarillo, and Northwest Texas Healthcare System, also in Amarillo, operates 475 beds. Both are investor-owned facilities.

The Association for Community Health Improvement (ACHI) points out that this assessment process provides help in understanding where the needs are, and where and how to spend the available health care dollars in a community. ACHI also describes the importance of the Hospital working together as a partner with other local organizations (Schools, Churches,

Businesses, other Healthcare entities, etc.) to improve the health of all citizens, from the child to the senior adult.

The Assessment included focus groups with representatives of the following constituencies:

1. Business and Industry representatives
2. Chamber Director and Board Members
3. School superintendent, school nurses
4. Members of the City Council, City Manager
5. Hospital District Governing Board Chair
6. District and Community Board members
7. Members of the Rotary Club of Borger
8. Representative of the community college
9. Senior citizens and young adults

The list of questions asked of each group is on page 16 in the Appendix. The focus groups and interviews were held primarily at the Hospital, except for the Rotary Club, with a variety of participants throughout the groups. The participants included individuals of varying ages and races, with a variety of backgrounds. A focus group was also held with the Hospital Department Managers, and several discussions were held with the Chief Executive Officer, as well as with members of the Medical Staff. Topics discussed included the major health needs of the community, participants' perceptions of the Hospital, and what the Hospital needs to do to address those needs.

Results of the focus group interviews were shared with the Chief Executive Officer of the Hospital. The findings were very broad, but common themes were discovered throughout the interviews and from those interviews, a prioritized listing of the most important issues has been developed.

While opportunities for improvement were offered, it is important to point out that positive comments were also made. The community appreciates having a local facility where services are provided that allow patients to stay in town. Additionally, other comments included:

1. Hospital and Providers offer high quality health care
2. Outlying Rural Health Clinics are a major asset
3. Good staff, friendly and courteous
4. Health Fair is well done
5. Good care in Emergency Department, and in Affordable Care Clinic
6. Ground and air ambulance services are very beneficial
7. Beautiful physical plant

Finally, the majority of participants indicated they have used or will use the Hospital or Clinics when needed. Some choose to go elsewhere, for a variety of reasons. One participant stated that people may choose to go out of town if they do not know what is available locally.

Community Demographics

The Census of 2014 showed the population of Borger, Texas, to be 12,978, a decrease of 9.3% since 2000. Hutchinson County showed a population of 21,773, a decrease of 8% since 2000. There were 4,905 households in Borger, with an average household size of 2.65. Hutchinson County showed 8,297 households, with an average size of 2.62. The City of Borger land area is 8.73 square miles, with a population density of 1,486 people per square mile. Hutchinson County land area is 887 square miles, with a population density of 25.0 people per square mile.

The median income for a household in Borger was \$46,983, compared to \$55,653 for the Texas average. The median age was 34.9 years, compared to 34.4 years for Texas.

Specific economic measures of Hutchinson County are indicated below:

Figure 1

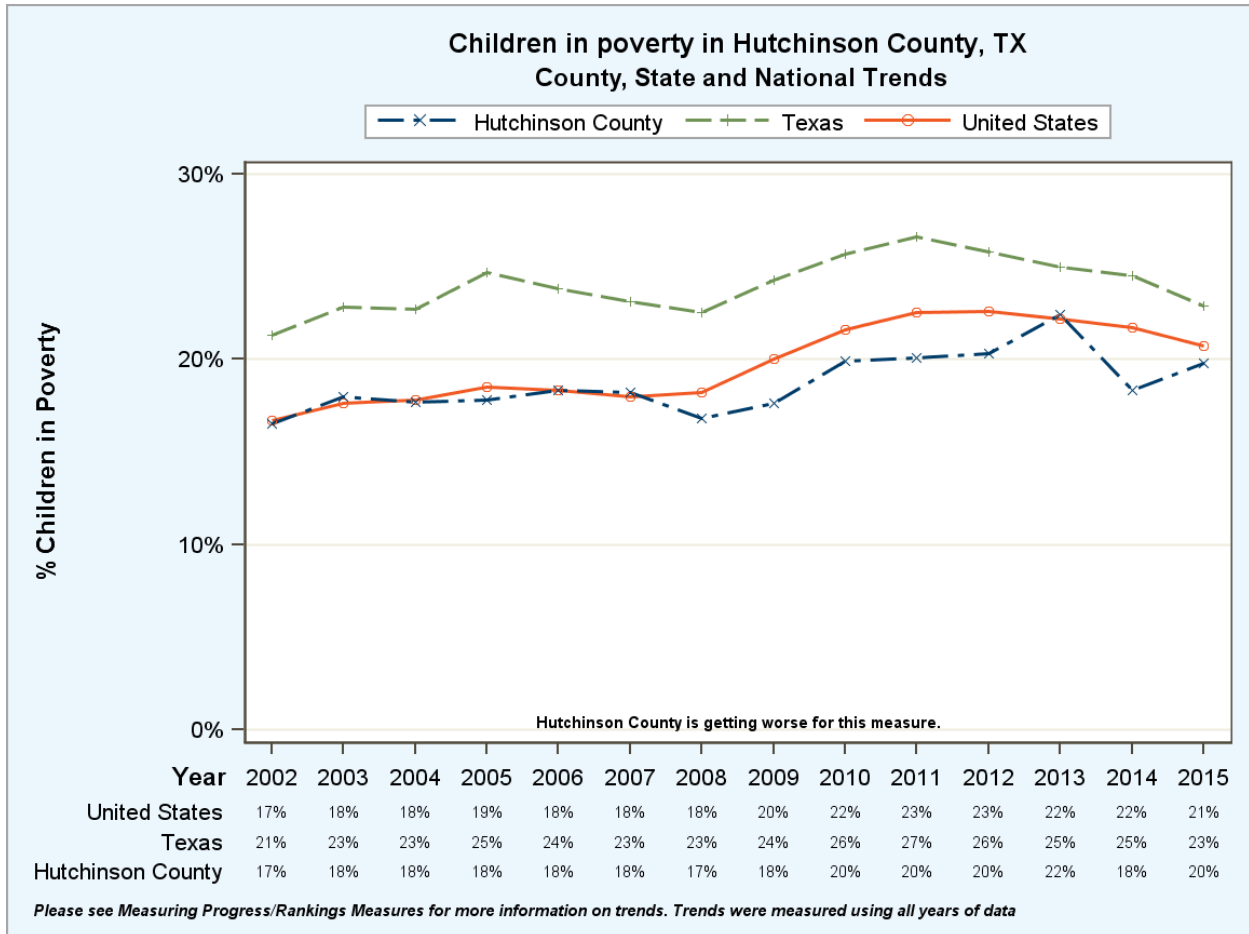
Measure	County	Texas
Unemployment (05/2017)	6.7%	4.4%
Uninsured Adults 2017	25.0%	26.0%
Uninsured Children 2017	15.0%	12.0%
Living in Poverty 2015, all ages	16.1%	15.9%
Children in Poverty 2015	20.0%	23.0%
Children eligible for free lunch program 2015	48.0%	59.0%

www.countyhealthrankings.org; Texas Center for Health Statistics; www.city-data.com; www.homefacts.com

The following graph, (Figure 2), from County Health Rankings shows the trend line for children living in poverty. The percentage for Hutchinson County has been steadily increasing since 2002, as is the case in Texas and in the United States.

County Health Rankings indicates that poverty can result in an increase in the risk of mortality and in prevalence of medical conditions and diseases. The Hospital cannot address poverty on its own, but as a community member, can partner with other groups on this important issue.

Figure 2



www.countyhealthrankings.org

County Health Rankings measures poverty by family, taking into consideration the number of family members and the number of children less than 18 years old. If the total family income is less than the poverty threshold, the family is considered in poverty.

The following chart, (figure 3), with information from Health Facts Profiles, produced by the Texas Department of State Health Services, shows the percentage of residents living below the poverty level, and the percentage of children living below the poverty level, in 2013. It also shows percentages of residents without health insurance in 2013.

Figure 3

County residents below Federal Poverty Level, all ages	15.5%
County residents below Federal Poverty Level, Under 17 years of age	22.4%
<u>County residents without health insurance, Ages 0-64 years</u>	23.2%
<u>County residents without health insurance, Ages 0-17 years</u>	13.3%

Health Facts Profile, TDSHS, 2013

Education levels in Hutchinson County, according to www.census.gov/quickfacts are as follows:

- High School or greater: 81.2%
- Bachelor's degree or greater: 14.9%

Further, www.countyhealthrankings.org reports that 93% of ninth graders graduate in four years, and 59% of adults have some amount of college.

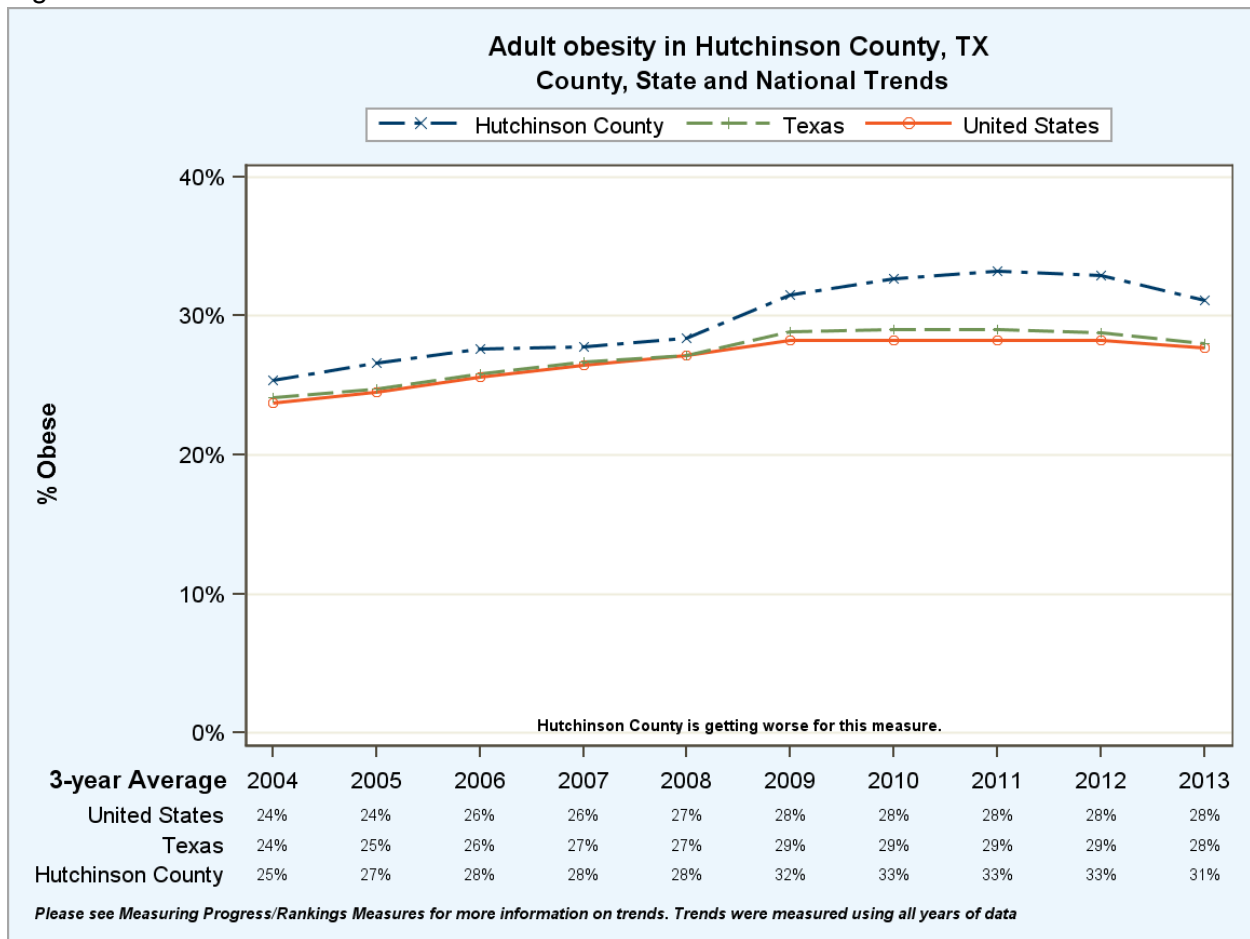
Hutchinson County is a Health Professional Shortage Area (HPSA) for Mental Health and Primary Care Providers, and a Medically Underserved Area (MUA), as designated by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA).

County Health Rankings (www.countyhealthrankings.org) shows the following measures for Hutchinson County for adult diabetes and obesity. Additionally, City-data.com (www.city-data.com) shows the 2013 rate for low-income pre-school obesity:

1. Adult Diabetes rate: 11.0% (9.0% in Texas)
2. Adult Obesity rate: 31.0% (28.0% in Texas)
3. Low-income pre-school obesity rate: 15.4% (15.7% in Texas)

These rates are comparable to other rural counties throughout Texas, and like most other counties, the rates are increasing in Hutchinson County over time. These issues contribute significantly to the cost of health care, and the overall health of the community. Diabetes and obesity were brought up in several of the Focus Groups as participants discussed major health issues in the community. For Hutchinson County, exercise and education can be utilized in many areas to address this issue, both for adults and children. There has to be a willingness on the part of the community to address obesity and diabetes, in order for the health providers to have an impact. Continuing to provide education, and to promote a healthy lifestyle, are ways in which the Hospital can address these issues.

Figure 4



www.countyhealthrankings.org

Obesity is an area of concern, both in adults and in children, as it can lead to Diabetes, Coronary Artery Disease, Circulatory Disease, and many other chronic conditions, as well as premature death. According to the Texas Diabetes Council, 11.0 % of Adults in Texas who are age 18 and above have been diagnosed with Diabetes (approximately 2.0 million people).

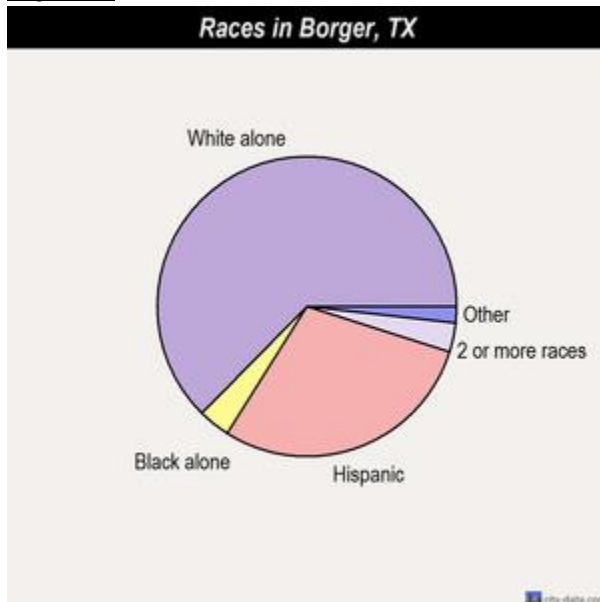
The Council reports that while there is no significant difference between males and females in the prevalence of Diabetes, the rate increases with age, impacting the elderly.

Further, the Council reports that 26,000 Texas youth (less than 18 years of age) have been diagnosed with Diabetes. Approximately one in every 400-600 children and adolescents in Texas has Type I Diabetes. Additionally, there is a rapid increase in the number of children and adolescents who have Type II Diabetes, or are pre-diabetic. Historically, Type II has been most common among adults 45 years and older. This is a major area of concern for healthcare providers and School Districts throughout the State and Nation.

Of significance to Golden Plains Community Hospital, the Diabetes rate among Hispanics is higher than among other ethnic groups. Additionally, the incidence of hypertension tends to run high among Hispanics. The U.S. Census (www.quickfacts.census.gov) reported in 2016 that the

population in Hutchinson County of White (non-Hispanic or Latino) citizens was 70.6%. The African American population in Hutchinson County was 2.9%. By ethnicity, 22.9% of the population in Hutchinson County is of Hispanic or Latino origin. See figure 5 for another source of information on population. Although the sources are not exactly the same, and are from different years, the percentages are comparable.

Figure 5



Races in Hutchinson County, Texas:

- **White Non-Hispanic Alone** (74.4%)
- **Hispanic or Latino** (19.8%)
- **Black Non-Hispanic Alone** (2.3%)
- **Two or more races** (1.6%)
- **American Indian and Alaska Native alone** (1.4%)
- Read more: http://www.city-data.com/county/Hutchinson_County-TX.html#ixzz4nskUwptl

Additional chronic diseases being treated in Borger and Hutchinson County include Cardiovascular and Respiratory illnesses, along with Congestive Heart Failure, Hypertension, and other diseases. According to County Health Rankings, www.countyhealthrankings.org, Hutchinson County ranks number 194 of 243 Texas Counties in terms of Health Outcomes, which is indicative of length of life and quality of life. In looking at Health Factors, which includes health behaviors, clinical care, socio-economic measures, and physical environment, Hutchinson County ranks number 147 of 243 Texas Counties.

The following table from County Health Rankings shows the incidence of certain behaviors, and how Hutchinson County compares to best performers in the United States as well as all counties in Texas. Physical inactivity is related to obesity, diabetes, and other health issues.

Figure 6

Health Behaviors	Hutchinson County	Top US*	Texas
Physical Inactivity	27%	19%	23%
Access to Exercise	77%	91%	84%
Teen Births**	66	17	49
Adult smoking	16%	14%	15%
Adult obesity	31%	26%	28%

*Best performers in US

**Teen births per 1,000 population of ages 15-19

www.countyhealthrankings.org

The Texas Department of State Health Services (TDSHS) reports that the actual number of births to those aged 17 years and younger in 2014 was 13, with that number being 4.2% of all births in the County. Additional information is available from TDSHS.

The Hospital can use the information from County Health Rankings to view a variety of measures, including those above, and compare Hutchinson County to other counties in Texas. The website also provides information on programs that others are using to address such health needs as these.

Some participants were also under the impression that the incidence of cancer in Hutchinson County is high, but data from the State Cancer Profiles (<http://statecancerprofiles.cancer.gov>) indicate that Hutchinson County's incidence rate is declining, is not unusually high, and is similar to the average rate in Texas.

Priorities Identified

In reviewing the information in the 2017 assessment, it is important to remember that many of the comments made are based on perception. Most of the participants have had at least some experience with the Hospital. Even if a comment was only perception and not based on experience, it is reality to that individual and needs to be considered.

The following topics were most often repeated by a significant number of participants, and are listed as priorities for the Board and Administration to consider as future planning is being done.

1. Physician access
 - a. Community generally comfortable with primary and specialty care available, and the addition of the new surgeon from Texas Tech will be an asset
 - b. Consider additional specialty care if and when it makes sense (Urology, Cardiology)
2. Service Needs
 - a. Aging population
 - b. Insure staff are welcoming to patients and families
 - i. Use of scripting for all who interact with patients and families

- c. Mental Health counseling for children and adults
 - i. (Current availability of tele-psych services, and upcoming plans for outpatient geri-psych services are important solutions for these needs)
 - d. Dialysis mentioned several times, but the Hospital's analysis indicated not feasible due to low number of renal patients and financial impact
 - e. Offer some level of cancer care
 - i. (Several believe the rate is unusually high in Borger, but the data from the State indicates otherwise)
 - f. Need to insure public knowledge that lab services and rehab services are available, rather than patients having to drive to Amarillo
 - g. Improve ambulance response times (task force already in place addressing needs throughout the county)
 - h. Continue to provide services appropriate for this Hospital, based on available financing, and maintain transfer capabilities when patients need to be sent to larger facilities
3. Community Outreach
- a. Education on major health topics
 - i. Diabetes awareness
 - ii. Nutrition issues
 - iii. Alzheimer's and dementia
 - 1. Support group has small numbers, but important service to continue
 - iv. Healthy living/preventive health for all ages
 - v. Follow-up with attendees through direct mail, social media, etc
 - vi. Partner with the School District to begin educating high school students on being proactive in maintaining good health
 - b. Market to local industries
 - i. Occupational Health
 - ii. Executive Health for senior management
 - c. Partner with community organizations on major issues and topics
4. Communication needs
- a. Continue to promote services and providers
 - i. Some in community not aware of the Affordable Care Clinic (others who have used it are pleased it is available)
 - b. Publish the positive data, such as quality measures, patient satisfaction, etc.
 - c. Insure in-house skills and knowledge for marketing through social media

Physician Access

Participants in the interviews spoke highly of all the physicians and mid-level providers in the Clinics, as well as of the specialists who are now coming to the Clinic. There were a few suggestions about additional specialists, particularly in Urology and Cardiology. The arrangements for a new General Surgeon in the coming months is seen as an important step for the Hospital.

Participants also pointed out that any specialists who can be made available are helpful in reducing travel time for patients, many of whom are elderly. In general, participants would like to see additional specialists in the community, as practical, but other than Urology and Cardiology, the only other one mentioned was Mental Health, and the Hospital is addressing that need.

Community members are generally pleased with the access to physicians in the Emergency Room, and those who have utilized the Affordable Care Clinic like it. However, some participants were not aware that it exists..

The most important reason to address Physician Access is, of course, to meet the needs of the community. Beyond that, supplementing Primary Care with a good mix of Specialty Clinics is also important for keeping community members in Borger.

Service Needs

While there was an overall appreciation for the Hospital from most participants, there was also a concern for addressing chronic diseases in Borger, including Diabetes, Respiratory, Cancer, and Mental Health. As noted earlier, the rate of Diabetes in Hutchinson County is 11.0%, and Obesity in Adults is 31.0%. These two conditions can lead to many other issues related to the Heart and Vascular systems, as well as other health issues.

The health needs of an aging population were discussed by many. A topic that came up at times was the need for an expanded assisted living center, so that community members can continue to live near home. Participants believe there is a need for support services (education) for the aging population, including topics related to Alzheimers/Dementia, and other chronic diseases.

Mental Health was discussed in several of the focus groups as an important issue in the community, and the need for counseling services was specifically mentioned. Because of the shortage of mental health professionals and the issues of reimbursement, the majority of counties in Texas, and throughout the nation, are facing the same issue. Some are beginning to look to telemedicine as a method for providing rural communities access to mental health providers. Golden Plains Community Hospital has already implemented such a program for the community, and most participants were aware of the plans to develop an outpatient gero-psych program on the Hospital campus.

Several discussed alcohol and drug abuse as issues in the community, and want to see the Hospital help address those issues in any way possible. Mental health and substance abuse are community issues, and require support from more than just the Hospital. The Hospital cannot solve all community health issues by itself, but there may be opportunities to partner with other organizations on these important issues. The Hospital could work with others to help address these needs, perhaps through grants or other sources.

While many rural facilities in Texas are in need of updating and modernization, the community recognizes and appreciates the fact that Borger has an attractive and up-to-date Hospital and Clinic, as well as the expansion/addition of services, to include the Rural Health Clinics in Fritch and Stinnet. The focus of the Board and the leadership to continually improve the health care services in the community is commendable.

Community Outreach

It was noted that the Hospital offers education currently in the community, either through the Health Fair, periodic classes that are offered, or other means. Community members stated that they would like to see more offered on major health topics, such as diabetes awareness, nutrition, Alzheimer's/dementia, and healthy lifestyles, both on site and in the community

Many participants encouraged the Hospital to seek opportunities to partner with community organizations, such as the city, county, businesses, churches, and schools. Partnership efforts could include education and screening, and access to active lifestyle options for all ages. A suggestion was made to partner with churches as a way to reach a number of community members at the same time.

The majority of participants spoke very highly of the Hospital and its' staff and services. When asked what more the Hospital should be doing to meet the needs of the community, several said that the Hospital should continue doing what it does well, insuring that the community will always have access to the care that it needs.

Communication Needs

It was recognized that the Hospital marketing program is reaching out to the community, but it was suggested by several that more should be done, in order to insure that the community is knowledgeable of services offered. As an example, the Affordable Care Clinic (ACC) is an important asset for Borger, and those participants who have used it spoke favorably of the care received, the cost, and the convenience. However, others were unaware that it exists. While the Hospital has promoted the ACC in a variety of ways, there is still a need for on-going marketing of the ACC and all services. People tend not to be aware of a service until they need it, but a strong, on-going marketing plan will help to minimize that particular issue. It was also suggested that the Hospital follow-up with individuals who attend marketing presentations, in order to answer questions, or encourage utilization of Golden Plains Community Hospital. The Hospital offers many significant services to the community, and it is vital that the marketing program use every possible means to keep the Hospital visible at all times.

Summary and Recommendations

In summary, the feedback from the various participants can be very beneficial to the Hospital, as the future needs of the Hospital are considered. The level of services currently being provided by the Hospital, and its plans for the Gero-Psych facility, are a prime example of what can be done when the Board, Administration, Providers, and Staff work with the community to provide the right services in the right location, at the right time.

Golden Plains Community Hospital is indeed a community-based entity, by virtue of the services it offers, and its current status in the community. Building on what exists today, listening to the community and to the Staff, and seeking innovative ways to deliver care will benefit the community for years to come. The sharing of the findings from this report with members of the community is a very important step, as it shows not only that the Hospital sought out their input,

but that it is listening and willing to address that input. Once this report and an implementation plan have been approved by the Board, it can be posted to the website, or made available by whatever means is most practical.

One of the major areas brought up most frequently the need to address Mental Health. Because the Hospital is already working to implement changes that will meet that need, it is not listed as a recommendation. The foresight of the Board and Hospital leadership in meeting the health needs of the community is obviously of great benefit to the community.

Recommendations are as follows:

1. Continue to assess the needs for specialty care in the community, adding services if needed and feasible.
2. Continue to focus on needs of the elderly in terms of education, screening, and services, particularly related to chronic health issues.
3. Expand other educational offerings in the community, partnering with schools and other organizations to reach audiences of all ages.
4. Seek partnerships with other organizations in order to address important needs.
 - a. Drug abuse
 - b. Health promotion/healthy living
5. Continue to develop and expand the marketing program through a variety of means to key segments of the community.
 - a. Elderly
 - b. Young adults and families
 - c. Industry

I want to thank Don Bates for inviting TMSI, Inc. to conduct this Community Health Needs Assessment. I also offer my thanks to Kathy Welchel for scheduling the participants, and to Marilyn Beard and her Food and Nutrition Services staff for providing refreshments for each of the focus groups . I also appreciate all the individuals who took time to share their insights into the health needs of Borger and the surrounding area. Golden Plains Community Hospital is recognized as a vital part of the community, and shows a strong commitment to its' needs.

Appendix

Focus Group Questions

1. What is healthy about Borger/Hutchinson County?
2. What are the major health issues in your community?
3. What are your perceptions of Golden Plains Community Hospital?
4. Do you use the Hospital? If not, why not?
5. What can the Hospital do to address the health issues in the community?

Major Data Sources

1. www.city-data.com
2. www.countyhealthrankings.org
3. www.quickfacts.census.gov
4. www.hrsa.gov
5. www.dshs.state.tx.us/diabetes/
6. www.dshs.state.tx.us/CHS

