



# Baylor Scott & White Health Irving/Las Colinas Health Community

Community Health Implementation Strategies 2022

An Action Plan for the Community Health Needs Assessment



# Irving/Las Colinas Health Community hospitals

- ▼ [Baylor Scott & White Medical Center - Irving](#)
- ▼ [Baylor Scott & White Surgical Hospital - Las Colinas](#)

## Table of contents

Executive summary .....	4
Letter to the community .....	5
Irving/Las Colinas Health Community implementation strategies .....	6
Irving/Las Colinas Health Community needs .....	7
Implementation strategies addressing:	
Priority need 1: Food insecurity/diabetes .....	8
Priority need 2: Insurance .....	10
Priority need 4: Mental health/behavioral health services .....	12
Priority need 5: Cancer incidence – all causes .....	13
Community needs not addressed .....	14
Program evaluation .....	15

# 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.

The Irving/Las Colinas Health Community is home to a number of these hospitals with overlapping communities, including:

- ▶ Baylor Scott & White Medical Center - Irving
- ▶ Baylor Scott & White Surgical Hospital - Las Colinas

The community served by the hospital facilities listed above is Dallas and Tarrant counties and was determined based on the contiguous ZIP codes within the associated counties that made up nearly 80% of the hospital facilities' 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 Irving/Las Colinas 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 facilities 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](https://www.bswhealth.com/CommunityNeeds).

As part of the largest not-for-profit health system in Texas, we take our commitment to the Irving/Las Colinas 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,

**Irving/Las Colinas Health Community Hospitals**

# Irving/Las Colinas Health Community implementation strategies

The overall purpose of the implementation strategies is to align the hospitals' 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

# Irving/Las Colinas 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	Food insecurity/diabetes	Environment/ conditions/diseases
2	Insurance	Access to care
3	Access to primary healthcare providers	Access to care
4	Mental health/behavioral health services	Mental health
5	Cancer incidence - all causes	Conditions/diseases

The facilities listed below collaborated to develop these joint implementation strategies addressing the significant health needs identified above. Hospital leadership selected the following health needs to confront in collaboration with the community and based on the anticipated impact, available hospital and clinic resources, and the expertise of the respective facilities.

## Community needs addressed

Facility	Food insecurity/ diabetes	Insurance	Mental health/ behavioral health services	Cancer incidence - all causes
Baylor Scott & White Medical Center - Irving				
Baylor Scott & White Surgical Hospital - Las Colinas				

# Implementation strategies

Baylor Scott & White Medical Center – Irving

## Priority need 1: Food insecurity/diabetes

<b>Planned programs/strategies</b>	<ul style="list-style-type: none"><li>▼ Referrals to community resources, including SNAP and local food pantries</li><li>▼ Referrals for uninsured patients to Irving Community Clinic to serve as their medical home to manage chronic conditions such as diabetes</li><li>▼ Online diabetes support class available on BSWHealth.com</li><li>▼ Partnership with St. Vincent de Paul Pharmacy to qualify uninsured patients for no-cost prescriptions for chronic conditions such as diabetes</li><li>▼ Cash and in-kind contributions to other not-for-profit community organizations</li></ul>
<b>Anticipated impacts</b>	<ul style="list-style-type: none"><li>▼ Increased access to healthy foods for underserved populations</li><li>▼ Improved health outcomes</li><li>▼ Improved access to medications to manage diabetes</li></ul>
<b>Hospital resources</b>	<ul style="list-style-type: none"><li>▼ Financial support</li><li>▼ In-kind donations</li><li>▼ Outreach/health education materials</li><li>▼ Staff time</li><li>▼ Supplies</li></ul>
<b>Community partner(s) involved in the work</b>	<ul style="list-style-type: none"><li>▼ Irving Cares</li><li>▼ Irving Community Clinic</li><li>▼ VNA Meals on Wheels</li><li>▼ St. Vincent de Paul Pharmacy</li></ul>
<b>Outcome measures</b>	<ul style="list-style-type: none"><li>▼ Referrals to community resources</li><li>▼ People served</li><li>▼ Number and value of medications filled</li><li>▼ Amount of financial and in-kind contributions</li></ul>



**Priority need 1: Food insecurity/diabetes**

<b>Planned programs/ strategies</b>	<ul style="list-style-type: none"><li>▼ Food drive</li><li>▼ Cash and in-kind contributions to other not-for-profit community organizations</li></ul>
<b>Anticipated impacts</b>	<ul style="list-style-type: none"><li>▼ Increased access to healthy foods for underserved populations</li><li>▼ Improved health outcomes</li></ul>
<b>Hospital resources</b>	<ul style="list-style-type: none"><li>▼ Financial support</li><li>▼ In-kind donations</li><li>▼ Staff time</li></ul>
<b>Community partner(s) involved in the work</b>	<ul style="list-style-type: none"><li>▼ Family Promise of Irving</li><li>▼ Crisis Ministries</li></ul>
<b>Outcome measures</b>	<ul style="list-style-type: none"><li>▼ Amount of food donated</li><li>▼ People served</li><li>▼ Amount of financial and in-kind contributions</li></ul>

**Priority need 2: Insurance**

<p><b>Planned programs/ strategies</b></p>	<ul style="list-style-type: none"> <li>▼ Community Care Clinics provide a medical home for patients needing comprehensive primary care services, chronic disease education and management, and community-based care coordination</li> <li>▼ To help address the state’s healthcare workforce shortage, BSWH provides a clinical training program to prepare physicians and nurses for the medical workforce</li> <li>▼ Conduct enrollment services to assist in the qualification of the medically underserved</li> <li>▼ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy</li> </ul>
<p><b>Anticipated impacts</b></p>	<ul style="list-style-type: none"> <li>▼ Increased access to care for uninsured population under age 65</li> <li>▼ Increased availability of healthcare providers in a medically underserved area</li> <li>▼ Enable access to care, such as Medicaid, Medicare, SCHIP and other government programs or charity care programs for use in any hospital within or outside the hospital</li> <li>▼ Increased access to primary care and/or specialty care for indigent people regardless of their ability to pay</li> </ul>
<p><b>Hospital resources</b></p>	<ul style="list-style-type: none"> <li>▼ Financial support</li> <li>▼ Outreach/health education materials</li> <li>▼ Staff time</li> <li>▼ Supplies</li> </ul>
<p><b>Community partner(s) involved in the work</b></p>	<ul style="list-style-type: none"> <li>▼ Irving Community Clinic</li> <li>▼ Area colleges and universities</li> <li>▼ Local churches</li> </ul>
<p><b>Outcome measures</b></p>	<ul style="list-style-type: none"> <li>▼ Number of patients served</li> <li>▼ Number of students trained</li> <li>▼ Number of people certified for insurance programs</li> <li>▼ Number of people receiving assistance; unreimbursed cost of care</li> </ul>

**Priority need 2: Insurance**

<b>Planned programs/ strategies</b>	<ul style="list-style-type: none"><li>▼ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy</li></ul>
<b>Anticipated impacts</b>	<ul style="list-style-type: none"><li>▼ Increased access to primary care and/or specialty care for indigent people regardless of their ability to pay</li></ul>
<b>Hospital resources</b>	<ul style="list-style-type: none"><li>▼ Financial support</li><li>▼ Staff time</li><li>▼ Supplies</li></ul>
<b>Outcome measures</b>	<ul style="list-style-type: none"><li>▼ Number of people receiving assistance; unreimbursed cost of care</li></ul>

**Priority need 3: Mental health/behavioral health services**

<p><b>Planned programs/strategies</b></p>	<ul style="list-style-type: none"> <li>➤ Mental health screening in the emergency department; tele-psych services available for evaluations</li> <li>➤ Partnership with Integrated Psychotherapy Services—IPS staff member on-site at the hospital to connect patients to mental/behavioral services post-discharge</li> <li>➤ Support of the IPS Community Partner Support Line—a phone number for referrals and inquiries for healthcare providers</li> <li>➤ Contract with Mobile Assessment Team—assesses suicidal ideation patients for appropriate disposition options</li> <li>➤ Partnership with Irving Police Mental Health Response Team—answers calls for service, assists patrol and other units with in-progress calls, and conducts follow-up outreach to individuals who have intersected with emergency services at local hospitals</li> <li>➤ Telehealth services addressing mental health needs available virtually 24/7 via the MyBSWHealth app</li> <li>➤ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy</li> </ul>
<p><b>Anticipated impacts</b></p>	<ul style="list-style-type: none"> <li>➤ 24/7 access to appropriate psych evaluation</li> <li>➤ Appropriate care provided to and referrals for behavioral health patients</li> <li>➤ Improved ease of access</li> <li>➤ Improved patient outcomes</li> <li>➤ Reduction in ED visits for those in need of mental health services</li> <li>➤ Appropriate care provided to and referrals for behavioral health patients</li> </ul>
<p><b>Hospital resources</b></p>	<ul style="list-style-type: none"> <li>➤ Financial support</li> <li>➤ Outreach/health education materials</li> <li>➤ Staff time</li> <li>➤ Supplies</li> </ul>
<p><b>Community partner(s) involved in the work</b></p>	<ul style="list-style-type: none"> <li>➤ Integrated Psychotherapy Services (IPS)</li> <li>➤ Mobile Assessment Team</li> <li>➤ Irving Police Department</li> </ul>
<p><b>Outcome measures</b></p>	<ul style="list-style-type: none"> <li>➤ Referrals to community resources</li> <li>➤ Number of tele-psych referrals and visits</li> <li>➤ Number of behavioral health Telehealth referrals and appointments via the MyBSWHealth app</li> <li>➤ Contract amounts</li> <li>➤ Number of people receiving financial assistance; unreimbursed cost of care</li> </ul>

**Priority need 5: Cancer incidence – all causes**

<p><b>Planned programs/ strategies</b></p>	<ul style="list-style-type: none"> <li>▼ Cancer support groups for cancer patients and their families</li> <li>▼ Art in Medicine—art therapy program for cancer patients</li> <li>▼ Oncology patient navigator serves patients from diagnosis, throughout treatment and into survivorship</li> <li>▼ Increase low-dose CT screenings for lung cancer</li> <li>▼ Provide community health education to educate community on appropriate cancer screenings for all age groups</li> <li>▼ Partnership with Parkland Plus to navigate uninsured patients to comprehensive cancer services</li> <li>▼ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy</li> </ul>
<p><b>Anticipated impacts</b></p>	<ul style="list-style-type: none"> <li>▼ Provide a holistic and innovative approach to healing</li> <li>▼ Increase percentage of patients who are screened within guidelines</li> <li>▼ Improve access to cancer care</li> </ul>
<p><b>Hospital resources</b></p>	<ul style="list-style-type: none"> <li>▼ Financial support</li> <li>▼ Outreach/health education materials</li> <li>▼ Meeting space/virtual platform</li> <li>▼ Staff time</li> <li>▼ Supplies</li> </ul>
<p><b>Community partner(s) involved in the work</b></p>	<ul style="list-style-type: none"> <li>▼ Parkland Health</li> <li>▼ Art in Medicine</li> <li>▼ American Cancer Society</li> </ul>
<p><b>Outcome measures</b></p>	<ul style="list-style-type: none"> <li>▼ Number of people served</li> <li>▼ Number of events</li> <li>▼ Number of patients referred to Parkland Health cancer services</li> <li>▼ Number of people receiving financial assistance; unreimbursed cost of care</li> </ul>

# 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:

- ▾ Access to primary healthcare providers

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](mailto:CommunityHealth@BSWHealth.org).

This document may be accessed at [BSWHealth.com/CommunityNeeds](https://BSWHealth.com/CommunityNeeds).



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