Community Health Needs Assessment

West Region: Burnet, Blanco & Llano Counties

Ascension Seton Highland Lakes

May 2019

Ascension Seton

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Introduction

Ascension Seton, formerly known as Seton Healthcare Family, is a 501(c)(3) nonprofit organization with a long-standing history of serving Central Texas, not only as a health care provider, but as a leader and advocate for improving the health of the population as a whole.

Ascension Seton's Mission

Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and words.

Ascension Seton's philosophy is that "We serve each person as a Christian would serve Christ Himself. As a caring community, we respect the dignity and needs of one another." Our values include the following:

Dedication: Affirming the hope and joy of our ministry
Reverence: Respect and compassion for the dignity and diversity of life
Wisdom: Integrating excellence and stewardship
Integrity: Inspiring trust through personal leadership
Service to the Poor: Generosity of spirit, especially for the persons most in need
Creativity: Courageous innovation

What is a Community Health Needs Assessment?

A Community Health Needs Assessment (CHNA) is a tool used to identify and prioritize health issues and develop targeted interventions to build healthier communities. A CHNA provides important information to policymakers, public health leaders, health care providers and the general public about the overall health status of a community and the unmet needs or challenges that warrant further attention and resources.

This CHNA provides a snapshot of local health care needs in Ascension Seton's West Region and helps inform Ascension Seton's decisions about how to best serve the community.

Why do a Community Health Needs Assessment?

A CHNA is used to gather diverse perspectives, mobilize resources and target those resources to areas of greatest need identified by the community and validated by data.

The 2010 Patient Protection and Affordable Care Act further reinforced the importance of community health needs assessments by requiring hospitals designated as tax exempt 501(c)(3) nonprofit organizations to complete to complete an assessment every three years.

This CHNA is intended to meet the requirements for community benefit planning and reporting established in, but not limited to: Texas Health and Safety Code Chapter 311 and Internal Revenue Code Section 501(r).

How did we define the community?

This CHNA addresses the health care needs of Blanco, Burnet and Llano counties, Ascension Seton's West Region. These three counties are the focus of this CHNA because they are part of Ascension Seton's primary service area. Ascension Seton Highland Lakes, a rural Critical Access Hospital, is located in Burnet County.

CHNA – West Region
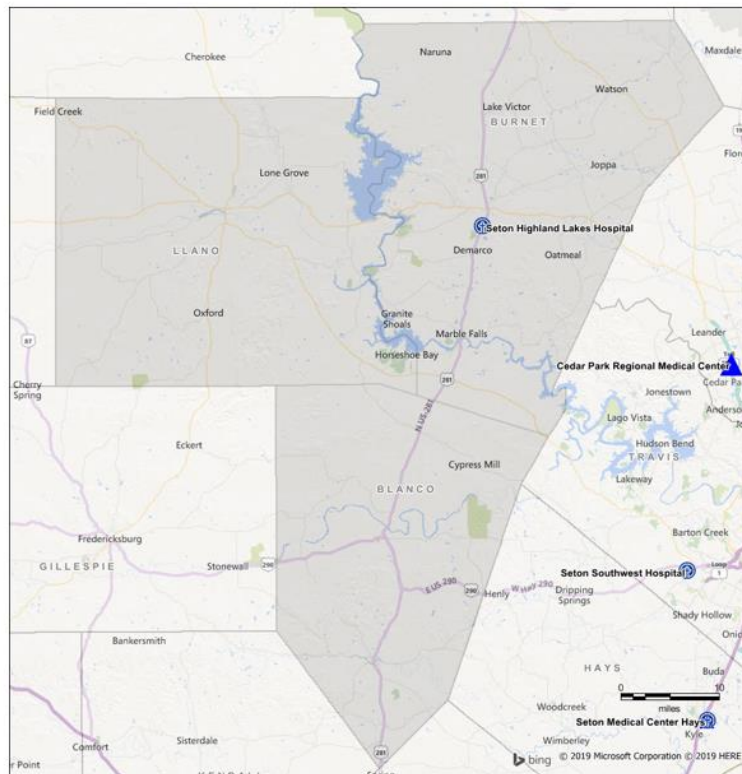
Methodology

How did we conduct this Community Health Needs Assessment?

The Internal Revenue Service (IRS) allows local health care organizations to work together to avoid duplication of effort. In this spirit of collaboration, Ascension Seton and Baylor, Scott & White ("BSW"), which both serve this region, shared information collected during the CHNA process and developed their own CHNA reports.

The CHNA process included two distinct but connected phases of analysis.

Phase One:

During the first phase of the project, Ascension Seton gathered and analyzed the most recent quantitative data available for the 3 counties located in the West Region. Ascension Seton used a Z-score methodology to compare the three counties in the West Region to ten Central Texas counties, Texas, and the United States across 68 different health measures. Z-scores are a way to standardize different types of data for comparison purposes. This process helped identify and prioritize major health care needs highlighted in this report.

Phase Two:

For the second phase of the project, Ascension Seton and BSW worked with an external consultant, IBM Watson Health, to gather qualitative feedback from the broader West Region community using several methods, including focus groups and one-on-one stakeholder interviews using a standardized interview guide. IBM Watson Health (formerly Truven Health Analytics) is a nationally-recognized research firm with extensive experience conducting CHNAs.

The consulting team solicited input from individuals with a broad understanding of the community and its health needs. Key stakeholders included public health officials, individuals representing the interests of medically underserved, low-income and minority populations, health care providers, educators, public officials and many others.

During the interviews and focus groups, participants were asked to identify the most significant health needs facing their community, barriers to meeting those needs, gaps in service and potential opportunities for improving health.

On behalf of Ascension Seton and BSW, the consulting firm, IBM Watson Health, conducted five key informant interviews in August 2018. The interviewees represented organizations that reflect the diverse economy and racial and ethnic interests of the region, including the following entities: Central Texas Catholic Charities, Texas Department of State Health Services, Central Texas Food Bank, Seton Highland Lakes and Community Resource Center of Texas. All of the interviewees have a background in either public health or work with medically underserved, chronic disease, low-income, or minority populations.

In addition to the interviews, IBM Watson Health conducted a focus group in the community of Marble Falls in July 2018 that included thirteen participants. The focus group included health agency administrators, healthcare providers, and representatives from various community organizations. Most of the participants work with at-risk populations and serve low-income populations, minorities, the medically under-served, and populations with chronic diseases.

For more information on the interviews and focus groups, please consult Appendix Two.

How were Community Health Needs Prioritized?

Ascension Seton worked with a highly experienced local health care consultant, Management Information Analytics (MIA) to analyze the quantitative and qualitative data gathered during phases one and two of this project. Since 1990, MIA has worked with a wide range of health care clients including the Community Care Collaborative in Austin and the South Texas Crisis Collaborative in San Antonio. MIA has worked with Ascension Seton on CHNAs since the early 1990's and assisted with data collection and analysis for the 2016 CHNA report.

This report synthesizes the findings from both the quantitative and qualitative phases of the community health assessment process and identifies significant health care needs in the West Region where Ascension Seton, as a major health care system, can have the most influence and impact.

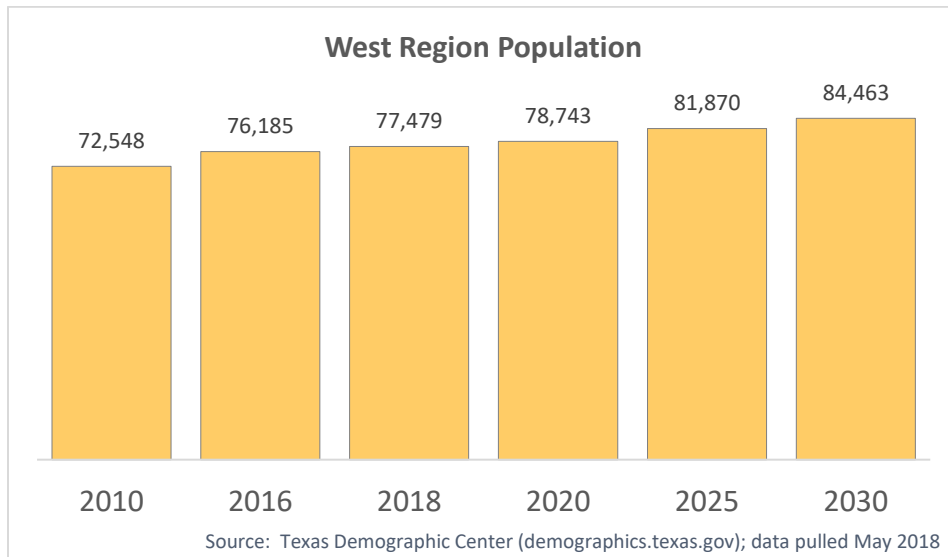The prioritized needs that are described in the following report were either:

(1) Raised consistently during focus groups, interviews and surveys as significant community concerns,

(2) Identified in county-level health data as a glaring issue or

(3) Discussed by the community on some level and validated by county-level data.

The proposed prioritized health needs were presented on February 1, 2019 and February 11, 2019 to the Ascension Texas Executive Committee and President's Council respectively for input and approval.

The prioritized list of significant health needs was presented and approved by the hospital's governing body and the final CHNA is available on each of Ascension Seton hospital's websites at www.seton.net.

Demographic Snapshot

Overall population growth in the West Region (Blanco, Burnet and Llano counties combined) is projected to be nine percent between 2018 and 2030.

West Region Population

Year	Population
2010	72,548
2016	76,185
2018	77,479
2020	78,743
2025	81,870
2030	84,463

Source: Texas Demographic Center (demographics.texas.gov); data pulled May 2018

In 2018, 26.4 percent of the West Region population was 65 and older. That proportion is expected to rise to 31 percent by 2030. During that same period, the 45-64 age group is expected to drop from 27.7 percent of the population to 21.4 percent of the population.

West Region Population by Age

Source: Texas Demographic Center (demographics.texas.gov); data pulled May 2018
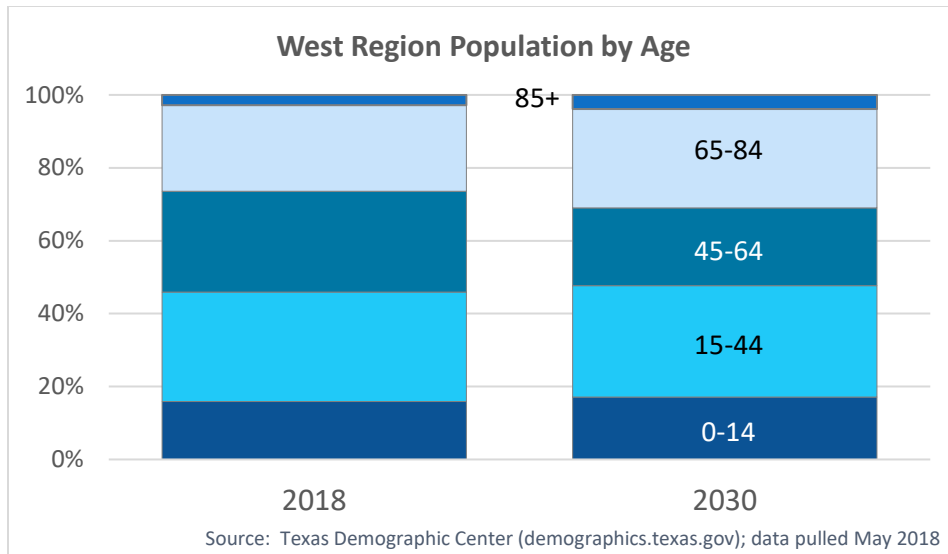
The West Region was predominantly white at 77.1 percent of the population in 2018 and is projected to drop slightly to 71.9 percent by 2030. Hispanics are currently 19.6 percent of the population in West Region and projected to increase to 24.6 percent by 2030.

West Region Population by Race/Ethnicity

Source: Texas Demographic Center (demographics.texas.gov); data pulled May 2018
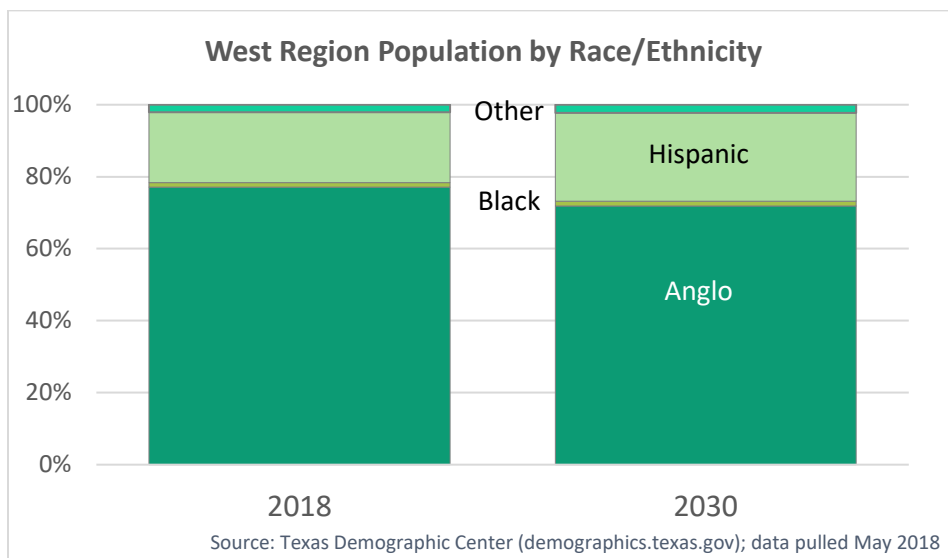
Poverty was below state averages in Blanco County at 9.7 percent and average in Burnet County (14.4 percent) and Llano County (13.8 percent).

Poverty Rate, 2012-2016

Percent of Population in Households With Income
Below 100% of Federal Poverty Level
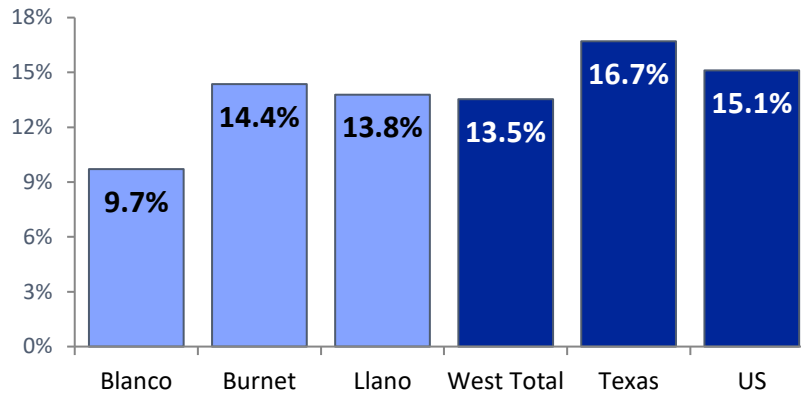
Location	Rate
Blanco	9.7%
Burnet	14.4%
Llano	13.8%
West Total	13.5%
Texas	16.7%
US	15.1%

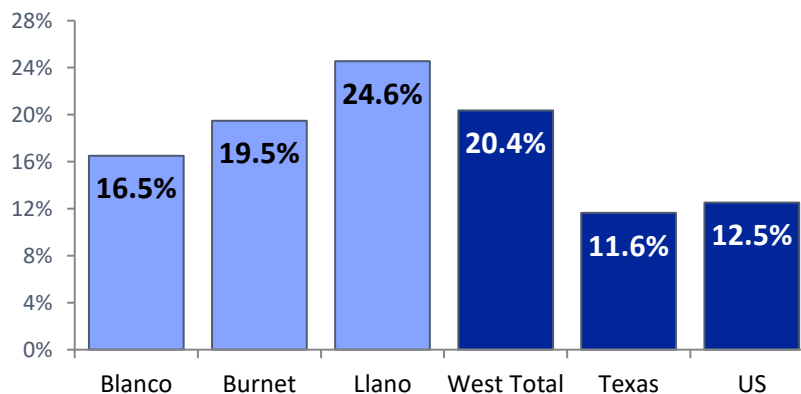Source: Institute for People, Place and Possibility - Community Commons
(communitycommons.org), data pulled June 2018

The prevalence rate for disabilities in the West Region (20.4 percent) is substantially higher than the state (11.6 percent) and national (12.5 percent) averages. The disability rate in Llano County (24.6 percent) is more than double the state average (11.6 percent). This higher rate of disability is not surprising given the large elderly population in the West Region.

Disability Prevalence, 2012-2016

Percent of Civilian Non-Institutionalized Population
With Any Disability

Location	Rate
Blanco	16.5%
Burnet	19.5%
Llano	24.6%
West Total	20.4%
Texas	11.6%
US	12.5%

Source: Institute for People, Place and Possibility - Community Commons
(communitycommons.org), data pulled June 2018

Community Health Needs

After reviewing the data and community input and using the methodology outlined above, Ascension Seton identified three main categories of health priorities for the West Region: (1) mental health, (2) access to care and (3) chronic diseases.

Mental Health

The lack of mental health care services was identified during the focus group as a significant need in the region. Focus group participants were aware of the national shortage of mental health providers and the challenge of recruiting psychiatrists and others to the region. Focus group participants highlighted the need for specialized mental health services focused on geriatric and pediatric populations and expressed concerns about long wait lists for inpatient psychiatric care and the necessary practice of transporting patients to larger regional providers to have their mental health needs addressed. Cultural and social factors were cited as a possible barrier to seeking care since stigma is more prevalent among certain ethnic populations.

The interviews with local leaders also highlighted the lack of mental health services and providers as serious areas of concern for the West Region for all socioeconomic and age groups. Although each county has a local Mental Health and Mental Retardation office, the scope of services they provide is reported to be limited and there are no inpatient mental health facilities in the three counties that comprise the West Region. Jails were mentioned as a default way of dealing with mental health issue given the lack of other resources available within the region.

The quantitative data supports the concerns raised during the focus group and interviews about mental health in the West Region. The number of mental health providers per 100,000 population declined between 2015 and 2017. At 50.2 mental health providers per 100,000 residents, the West Region has about half the number of providers as the state average (98.8) and more than seven times fewer than the national average (370.4). This disparity is caused in part by the low population density but is still of concern.

These findings are consistent with the Health Resources & Services Administration's designation of Blanco and Llano counties as rural Health Professional Shortage Areas (HPSAs) for mental health.

Mental Health Providers

Providers per 100,000 Population
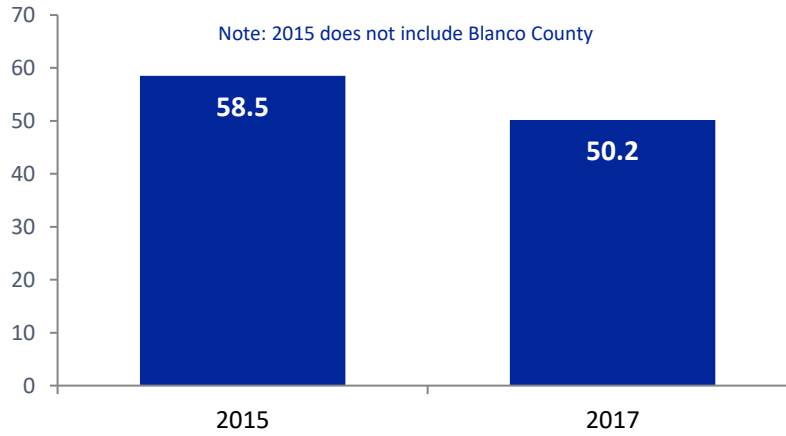
Note: 2015 does not include Blanco County

- 2015: 58.5
- 2017: 50.2

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings
(countyhealthrankings.org); data pulled June 2018

Mental Health Providers, 2017

Providers per 100,000 Population

- Blanco: 8.8
- Burnet: 62.7
- Llano: 44.2
- West Total: 50.2
- Texas: 98.8
- US: 370.4

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings
(countyhealthrankings.org); data pulled June 2018

At 3.6 days, the West Region has a slightly higher number of poor mental health days (as measured in the past 30 days) than the state average of 3.4 days but remains below the national average of 3.8 days. The West Region also has a higher than state average suicide rate.

Poor Mental Health Days, 2016

Average in Past 30 days, Age-Adjusted

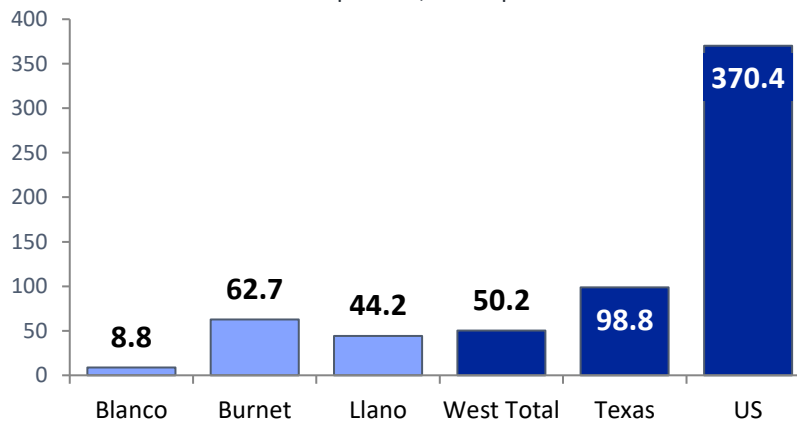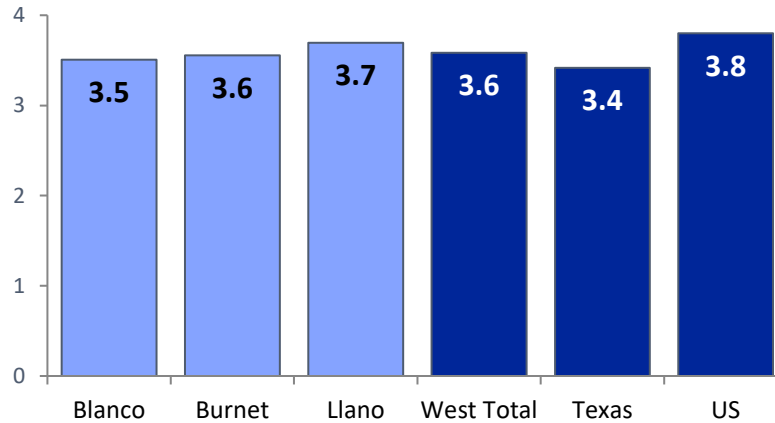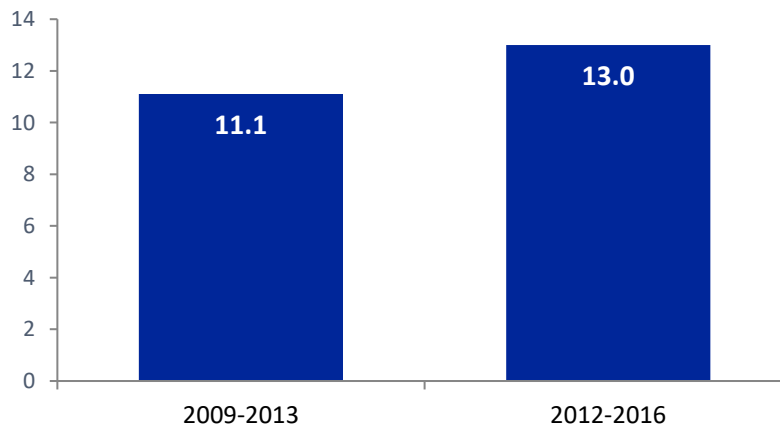| Blanco	Burnet	Llano	West Total	Texas	US
3.5	3.6	3.7	3.6	3.4	3.8

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018

Suicide Mortality (Burnet County Only)

Deaths per 100,000 Population, Age-Adjusted

2009-2013	2012-2016
11.1	13.0

Source: Institute for People, Place and Possibility - Community Commons (communitycommons.org), data pulled June 2018

Access to Care

During the focus groups and interviews, community members and local leaders identified improving access to care as a top health priority in the West Region. The community defined access to care to include high cost of care, lack of insurance courage, provider shortages and lack of mental health resources.
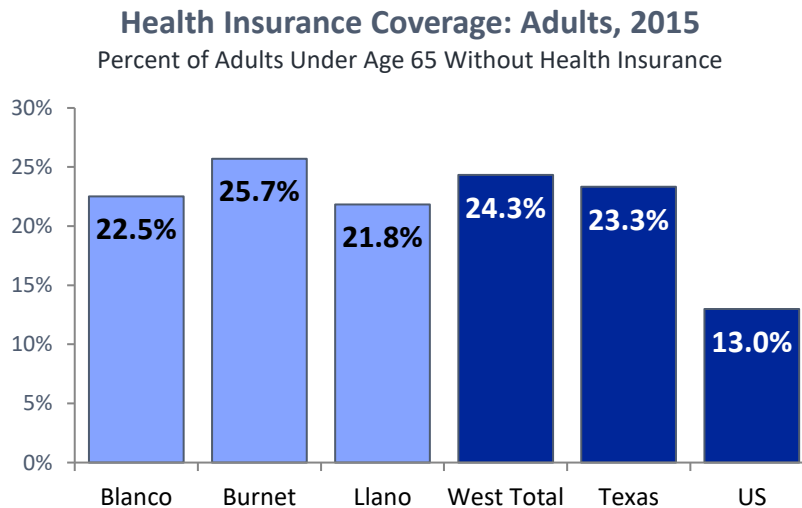
Focus group participants stated that free or low-cost healthcare options for the poor and uninsured were limited in the West Region. Focus group participants also expressed concern about the growing population of uninsured

young adults and seniors who do not qualify for Medicaid or Medicare. Others stated that even individuals with insurance sometimes avoid seeking care because of high copays and deductibles. These concerns were echoed during the stakeholder interviews.
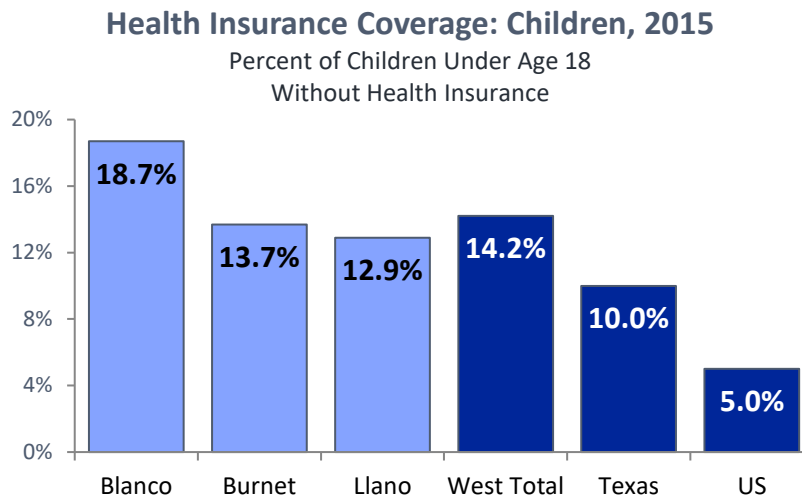
Local leaders who participated in the stakeholder interviews also suggested that language and cultural differences may serve as a barrier to seeking care and that the number of Spanish-speaking providers in the area is limited. Another topic related to access revolved around challenges in making medical care appointments, including difficulty getting time off from work and securing transportation.

The quantitative data validate the concern of both local leaders and community members. In terms of insurance coverage, 24.3 percent of residents in the West Region are uninsured, which is close to the state average of 23.3 percent, but nearly twice the national average of 13 percent.

The rate of uninsured children in the West Region is 14.2 percent, which is higher than both the state (10 percent) and nearly three times the national average of five percent.

Health Insurance Coverage: Adults, 2015
Percent of Adults Under Age 65 Without Health Insurance

Blanco	Burnet	Llano	West Total	Texas	US
22.5%	25.7%	21.8%	24.3%	23.3%	13.0%

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018

Health Insurance Coverage: Children, 2015

Percent of Children Under Age 18
Without Health Insurance

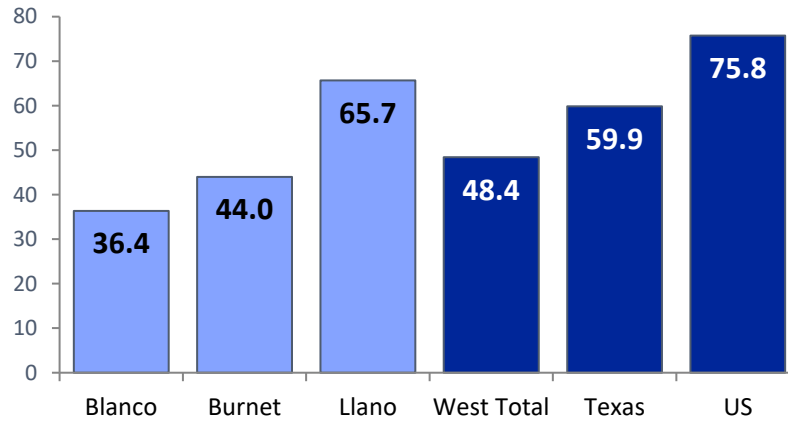| Category	Percent
Blanco	18.7%
Burnet	13.7%
Llano	12.9%
West Total	14.2%
Texas	10.0%
US	5.0%

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings
(countyhealthrankings.org); data pulled June 2018

Concerns about provider availability are also validated by the data. Sixty percent (60 percent) of the West Region has been designated a Health Professional Shortage Area by the Health Resources and Services Administration (HRSA). Blanco County is a rural health professional shortage area for primary care and mental health care (as noted above), while Llano County is a Low-Income Health Professional Shortage Area for primary care. The designation Low-Income Health Professional Shortage Area means that while access to care among the general population may be adequate in Llano county, access to care for the poor and vulnerable is problematic.

The West Region as a whole lags behind the state and national averages in terms of primary care providers and dentists per 100,000 residents. However, Llano County performs better than the state average in the area of primary care physicians. Focus group participants specifically identified poor dental health as an area of concern.
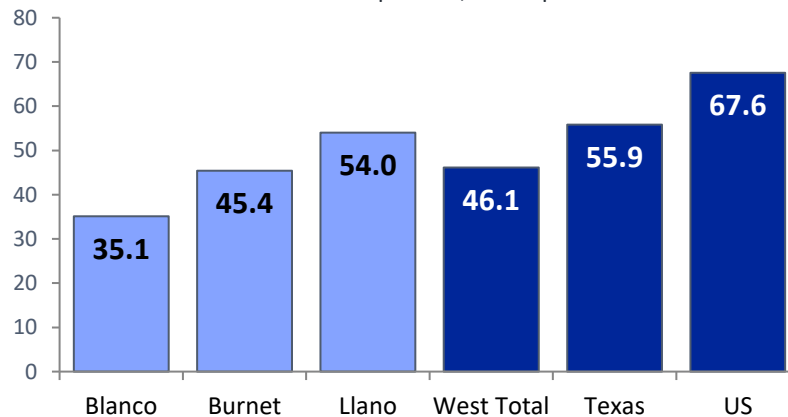
Primary Care Physicians, 2015

Physicians per 100,000 Population

County	Value
Blanco	36.4
Burnet	44.0
Llano	65.7
West Total	48.4
Texas	59.9
US	75.8

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018

General Dentists, 2016

General Dentists per 100,000 Population

County	Value
Blanco	35.1
Burnet	45.4
Llano	54.0
West Total	46.1
Texas	55.9
US	67.6

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018

Chronic Diseases

The West Region has a large elderly population and a high percentage of residents with disabilities. Not surprisingly, chronic disease prevention and management was a key need identified during the focus groups and interviews. Focus group members specifically highlighted cancer, obesity and diabetes as areas of concern. They also suggested that a lack of healthy food options in the area and primary care physician shortages may be factors contributing to the prevalence of chronic illness like diabetes.

Interviewees also noted the prevalence of chronic diseases as a community concern. Leaders noted that education and services to prevent and help residents manage chronic diseases are not readily available, due in part to the rural nature of the community.

The quantitative data confirms that diabetes prevalence is high and increasing. The state average prevalence is 9.7 percent whereas Blanco and Burnet counties are above average at 11.7 percent and 11.3 percent respectively. Llano County is much worse than average at 13.4 percent prevalence.

Diabetes Prevalence

Percent of Population Age 20+ With Diagnosed Diabetes, Age-Adjusted

Sources: CDC Diabetes Interactive Atlas
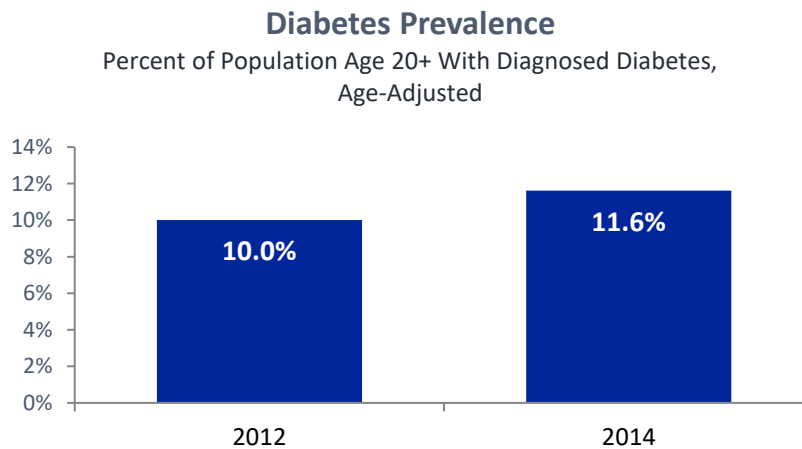(gis.cdc.gov/grasp/diabetes/DiabetesAtlas.html), data pulled Sept 2015
RWJ Foundation/Univ of Wisconsin Institute County Health Rankings,
(countyhealthrankings.org); data pulled June 2018

Diabetes Prevalence, 2014

Percent of Population Age 20+ With Diagnosed Diabetes, Age-Adjusted

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings
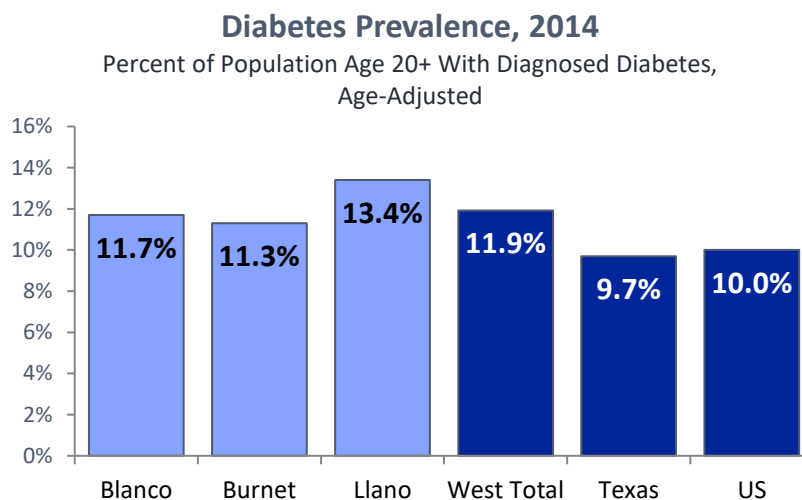(countyhealthrankings.org); data pulled June 2018

Obesity and cancer rates in the West Region are average for Texas. One in three residents of the West Region are obese, which is concerning from a public health perspective as are the higher than state average rates of physical inactivity.
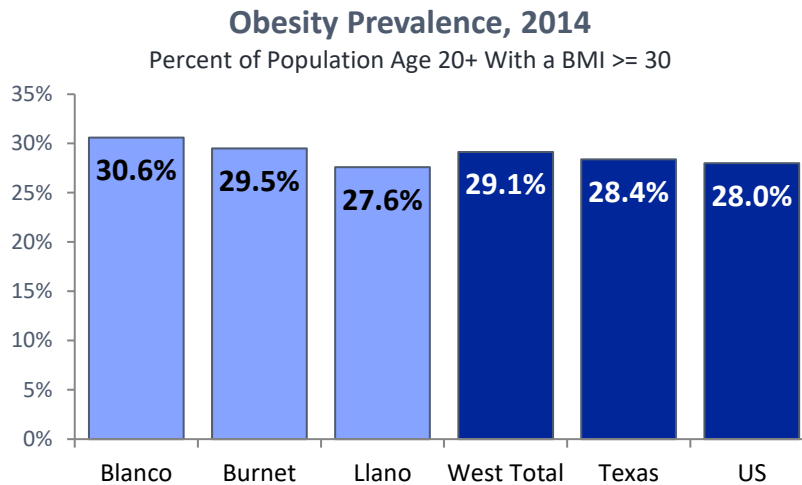
Obesity Prevalence, 2014
Percent of Population Age 20+ With a BMI >= 30

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018

Other Issues

Focus group participants and key informants identified several other key issues in their community that Ascension Seton recognizes as important, including social determinants of health, health literacy, transportation and affordable housing. However, these issues did not raise to the level of prioritized health need for the purpose of this CHNA report.

The Centers for Disease Control and Prevention define the "social determinants of health" as "conditions in the places where people live, learn, work and play that affect a wide range of health risks and outcomes." Common examples of social determinants include transportation, housing and education.

Ascension Seton's primary role in the communities we serve is delivering quality health care. However, our mission as an organization is far-reaching. As part of Ascension, the largest nonprofit health care provider in the country, Ascension Seton is committed to improving the social and economic conditions that affect the diverse populations we serve. We provide financial and in-kind resources to many community partners seeking to address these needs.

In addition, Ascension Seton leaders, physicians and associates are active participants in community-led strategic discussions about the most pressing social and economic issues affecting the communities we serve (e.g., transportation, education, affordable housing).

Focus group participants and key informants in the West Region cited transportation as a significant barrier to better health. Focus group members also highlighted a growing income disparity in the region, along with rising housing prices due to more retirees moving out to the Hill Country. West Region focus group participants stated that the level of health literacy in the area is low and that education and outreach programs to help prevent chronic diseases are limited.

Conclusion

Ascension Seton recognizes it takes the entire community, working together, to improve the health and the wellbeing of individuals. As we have for more than 100 years, we will continue to collaborate and partner to address the needs in our communities.

Developing this CHNA was a collaborative effort. Ascension Seton wishes to acknowledge and thank the many organizations, individuals and experts who participated in the 2019 CHNA process. We appreciate your partnership and look forward to working together to improve the health of the communities we share.

Approval

Prepared by Ascension Seton. Formally adopted by the Ascension Seton Board on May 21, 2019.

Appendix One: County Health Rankings from Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

🔵 Top 5% of US counties
🟢 Top 25% of US counties
⚪ Average
🟠 Bottom 25% of US counties
🔴 Bottom 5% of US counties

Comparison of West Region to Texas and US
Mental and Behavioral Health

			West Region Counties					
	Texas	US		Blanco		Burnet		Llano
Suicide mortality rate per 100,000 age adjusted	6.2	13.0		No Data	⚪	13.0		No Data
Poor mental health days avg past 30 days age adjusted	3.4	3.8	⚪	3.5	⚪	3.6	⚪	3.7
Depression prevalence	17.0%	16.7%	🟢	13.5%	⚪	15.2%	⚪	18.5%
Mental health providers per 100,000	98.8	370.4	🔴	8.8	🔴	62.7	🔴	44.2

Data pulled June 2018

Comparison of West Region to Texas and US
Access to Care

			West Region Counties					
	Texas	US		Blanco		Burnet		Llano
Residents living in a HPSA	16.8%	33.1%	⚪	0.0%	🟠	100.0%	⚪	0.0%
Adults without health insurance	23.3%	13.0%	🟠	22.5%	🔴	25.7%	🟠	21.8%
Children without health insurance	10.0%	5.0%	🔴	18.7%	🔴	13.7%	🔴	12.9%
Primary care physicians per 100,000	59.9	75.8	🟠	36.4	🟠	44.0	⚪	65.7
Preventable hospital stays per 1,000 Medicare enrollees	53.2	49.0	🟢	35.5	⚪	56.5	⚪	44.5
General dentists per 100,000	55.9	67.6	🟠	35.1	🟠	45.4	⚪	54.0
No dental exam past 12 months age 18+	37.4%	30.2%		No Data	⚪	27.2%	⚪	33.0%
Infant mortality w/in 1 yr per 1,000 live births	5.8	6.0		No Data	⚪	6.2		No Data
Child mortality deaths < 18 per 100,000	51.5	50.0		No Data	⚪	43.3		No Data
Mammography screening % Medicare age 67-69	57.9%	63.0%	⚪	60.5%	🟠	56.3%	⚪	64.2%

Data pulled June 2018

Comparison of West Region to Texas and US
Chronic Diseases

			West Region Counties					
	Texas	US		Blanco		Burnet		Llano
Diabetes prevalence	9.7%	10.0%	🟠	11.7%	⚪	11.3%	🟠	13.4%
Diabetes incidence	8.5	No Data		7.7		7.2		8.1
Obesity prevalence	28.4%	28.0%	⚪	30.6%	⚪	29.5%	⚪	27.6%
Physical inactivity % age 20+ no leisure time physical activity	24.3%	23.0%	🟠	28.5%	🟠	27.9%	🟠	27.8%

Data pulled June 2018

Appendix Two: Organizations Represented by Focus Groups and Interviews

As required by the IRS, input was solicited from individuals with a broad understanding of the community and its health needs. The focus groups and/or interviews included public health officials and individuals or individuals representing medically underserved, low-income, chronically disabled and minority communities. Input was also solicited from public officials, educators and community/faith-based organizations.

IBM Watson Health, on behalf of Ascension Seton and Baylor, Scott & White coordinated a focus group in July 2018 in Marble Falls with representation from the following entities:

Organization	Community Sector
Highland Lakes Family Crisis Center	Low-income and minority populations
Texas Department of State Health Services	Public health
NAMI Texas	Public health; medically underserved, low-income; populations with chronic disease needs; minority populations
Baylor Scott and White Health	Public health; medically underserved, low-income and populations with chronic disease needs,
Texas Home Health Group	Public health; medically underserved, low-income; populations with chronic disease needs; minority populations
CelesteCare of Horseshoe Bay	Public health
Methodist Healthcare Ministries	Medically underserved, low-income; populations with chronic disease needs;
Area Agency on Aging of the Capital Are	Medically underserved, low-income; populations with chronic disease needs; minority populations
Marble Falls EMS	Public health; medically underserved, low-income; populations with chronic disease needs; minority populations

In addition, IBM Watson Health conducted key informant interviews in August 2018 with representatives from the following entities:

Organization	Community Input Sector
Central Texas Catholic Charities	Public health; medically underserved, low-income; populations with chronic disease needs; minority populations
Texas Department of State Health Services	Public health

Central Texas Food Bank	Medically underserved and low-income populations; population with chronic disease needs; minority populations
Community Resource Center of Texas.	Medically underserved and low-income populations; minority populations
Ascension Seton Highland Lakes	Medically underserved and low-income populations, population with chronic disease needs; minority populations

Appendix Three: Summary of Community Health Resources

The chart below provides a high-level overview of the health care resources available in the West Region, including acute care facilities (hospitals), primary and specialty care clinics and practices, mental health providers and other services that address the social determinants of health such as transportation, affordable housing, poverty and nutrition. Many of the facilities and organizations listed below are potential resources to address the health needs identified in this CHNA. In addition to the resources listed below, the following government resources are available in each Texas county: Women, Infant and Children (WIC) nutrition program, Texas Health and Human Services Commission programs, Texas Workforce Commission, Texas Mental Health and Mental Retardation (MHMR) offices.

As part of the CHNA process, Ascension Seton along with community partners identified resources that currently support health. This list is not meant to be exhaustive.

Acute Care	Primary & Specialty Care	Mental Health	Other Resources
Ascension Seton Highland Lakes	Ascension Seton Burnet Healthcare Center	Bluebonnet Trails Community Services (MHMR)	Capital Area Rural Transportation System (CARTS)
Baylor Scott & White Medical Center Marble Falls	Ascension Seton Bertram Healthcare Center	Llano County Mental Health Center	Community Indigent Health Care Program (CICCP)
Baylor Scott & White Llano	Ascension Seton Kingsland Healthcare Center	Ascension Seton Shoal Creek	Catholic Charities of Central Texas
	Ascension Seton Lampasas Healthcare Center		Highland Lakes Partnership
	Ascension Seton Marble Falls Healthcare Center		Highland Lakes Family Crisis Center
	Lone Star Circle of Care Family Care Center-Marble Falls (Federally Qualified Health Center)		The Helping Center
	Baylor Scott & White Clinics in Johnson City, Kingsland, Marble Falls, Burnet		Area Agency on Aging of the Capital Area
	Children's Care-a-Van		

Appendix Four: Evaluation of Impact of Past Action Since 2016 CHNA

Ascension Seton conducted its last CHNA for the West Region in 2016. The West Region includes Burnet, Blanco and Llano counties. The CHNA identified the following prioritized needs for FY 2016-FY 2018.

1. Mental and behavioral health
2. Primary and specialty care
3. Chronic diseases
4. Systems of care
5. Social determinants of health

Ascension Seton and Ascension Seton Highland Lakes have worked to address these needs in the West Region. The summary below includes a summary of the impact Ascension Seton has made on these community needs over the past three years.

Ascension Seton operates the primary teaching hospital where Dell Medical School at The University of Texas (DMSUT) undergraduate and graduate medical students train. Ascension Seton and DMSUT have collaborated on medical resident training as medical students and residents have completed rotations in different specialties at many of the Ascension Seton facilities, including Dell Seton Medical Center at The University of Texas, Ascension Seton Medical Center Austin, Dell Children's Medical Center, and Ascension Seton Shoal Creek.

Ascension's national access and care coordination center, called AscensionConnect, supports the 11 counties that Ascension Seton serves.   This innovative center provides comprehensive access to health and innovative solutions all under one roof. By utilizing one number patients are able to schedule primary and specialty care appointments, access 24/7 nurse advice, utilize the digital urgent care for minor illnesses, access behavioral health through an iPad, and enroll in comprehensive remote care management programs. The center is staffed by teams of multidisciplinary professionals with both clinical and administrative backgrounds that utilize digital technology to extend access to services that traditionally have been very difficult to find.

AscensionConnect's remote care program serves an average of 800 patients per month. Clinicians work with individuals suffering from chronic illness or individuals who are preparing for surgery. Our navigators tailor each care pathway based on the individual's personal needs. This program has been live for three years and has demonstrated a reduction in readmissions to as low as 2.59% for participants of the intervention.

Ascension Seton Highland Lakes made the previous CHNA reports available online. The public was invited to submit comments via email. No comments were received on the 2016 CHNA.

Ascension Seton Highland Lakes

Prioritized Need	Action	Actual Impact
Mental and Behavioral Health	Provide assessments, referrals and short-term stabilization for individual experiencing a mental health crisis in a dedicated space at the Ascension Seton Highland Lakes emergency room (with Bluebonnet Trails).	Emergency Room Leadership worked collaboratively with Law Enforcement toward establishing a "Community Based Mental Health Deputy" program. Provides "In- Field" assessment prior to arrival at Emergency Room. Decreased number of patients presenting in acute crisis. Area Emergency Mental Health Observation Unit established in Georgetown for transfers from SHL Emergency Department after medically stable. Implementation of behavioral health assessment on all clinic patients. Continued relationship with Bluebonnet Trails for patients who show escalation of need on this assessment.
Primary and Specialty Care	Mobile health van (Care-A-Van) providing primary care, immunizations, education, referrals, and other services to children at local schools and churches to reduce transportation barriers.	Multiple weekend health fairs and flu clinics. Participation in Back to School Bonanzas for Burnet and Marble Falls schools.
	Provide primary and specialty health care for low-income residents with extended, convenient hours.	Continued screening for low-income patients in need of pharmaceutical assistance. Access to same day appointments for urgent care patients. DSRIP participation for low income and Medicaid patients. Smoking cessation education, pneumonia vaccine education and advanced directive planning education.
Systems of Care	Implement a patient navigation system to connect indigent and uninsured patients with primary care or medical homes.	Patient navigation moved to City of Burnet with County Indigent. Ascension Seton Highland Lakes trained the staff member and SHL provider cares for those underserved through the charity and indigent programs

Social Determinants of Health		Participated in community collaborative to establish homeless shelter in Marble Falls.