

Ascension Seton Edgar B. Davis

Implementation Strategy for the 2021 CHNA



Ascension



The purpose of this Implementation Strategy is to describe how the hospital plans to address prioritized health needs from its current Community Health Needs Assessment. The significant health needs that the hospital does not intend to address are identified and a rationale is provided. Special attention has been given to the needs of individuals and communities who are more vulnerable, unmet health needs or gaps in services, and input gathered from the community.

Ascension Seton Edgar B. Davis

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<https://healthcare.ascension.org/locations/texas/txaus/luling-ascension-seton-edgar-b-davis>

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The 2021 Implementation Strategy was presented, approved and adopted by the Ascension Seton and Ascension Texas Boards of Directors on August 24th and 25th, 2022, respectively (2021 tax year), and applies to the following three-year cycle: August 2022 to August 2025. This report, as well as the previous report, can be found at our public website.

We value the community's voice and welcome feedback on this report. Please visit our public website (<https://healthcare.ascension.org/chna>) to submit your comments.



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Introduction

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

Ascension Seton

As a Ministry of the Catholic Church, Ascension Seton is a non-profit hospital governed by a local board of trustees represented by residents, medical staff, and sister sponsorships, and provides medical care to patients from Central Texas and beyond. Ascension Seton operates 12 hospital campuses, six joint ventures that are licensed as hospitals, 120 related healthcare facilities, and employs more than 3,000 primary and specialty care clinicians.

Serving Texas since 1902, Ascension Seton is continuing the long and valued tradition of addressing the health of the people in our community, following in the footsteps of legacy Seton Hospitals. Ascension Seton is a faith-based nonprofit healthcare system founded by the Daughters of Charity. Called to be a sign of God's unconditional love for all, Ascension Seton has consistently strived to expand access to high-quality, low-cost, person-centered medical care and services.

For more information about Ascension Seton, visit <https://www.seton.net/mysetonhealth/>

Ascension Seton Edgar B Davis

Ascension Seton Edgar B. Davis is a part of Ascension Seton, formerly known as Seton Family of Hospitals, a 501(c)(3) nonprofit organization, and an affiliate of Ascension Texas and Ascension Health, with a longstanding 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.

Located in Luling, 50 miles southeast of Austin, Ascension Seton Edgar B. Davis is a general acute care facility committed to providing quality inpatient and outpatient services for residents of Caldwell and surrounding counties. The hospital offers 24-hour emergency care, plus comprehensive diagnostic and treatment services, health education and wellness programs.



Overview of the Implementation Strategy

Purpose

This Implementation Strategy (IS) is the hospital's response to the health needs prioritized from its current Community Health Needs Assessment (CHNA). It describes the actions the hospital will take to address prioritized needs, allocate resources, and mobilize hospital programs and community partners to work together. This approach aligns with Ascension Texas's commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable.

IRS 501(r)(3) and Form 990, Schedule H Compliance

The CHNA and IS satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all not-for-profit hospitals are required to conduct a CHNA and adopt an IS every three years. Requirements for 501(c)(3) Hospitals Under the Affordable Care Act are described in Code Section 501(r)(3), and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, electronic reports of both the CHNA and the current IS can be found at <https://healthcare.ascension.org/CHNA> and paper versions can be requested at Ascension Seton Edgar B Davis Administrative Offices.

Process to Prioritize Needs

Ascension Seton Edgar B. Davis, with contracted assistance from Alpinista Consulting, applied a phased prioritization process, described below, to identify the priority needs in the Ascension Seton service area in the CHNA.

The first step was to gather data from a variety of quantitative and qualitative sources to understand the raw data in terms of trends, gaps, perceptions and opinions. Quantitative needs were categorized into groups such as health behaviors, social determinants of health, length of life, quality of life, clinical care, and systemic issues in order to better develop measures and evidence-based interventions that respond to the determined condition.

From there, with guidance from Alpinista consulting, quantitative and qualitative data were reviewed and analyzed through a "validation" process, whereby themes that emerged from the qualitative data gathering process were matched against analysis of trends and stark gaps in key indicators of the County Health Rankings Data (the primary source of the quantitative data). Specifically, Ascension Seton compared themes that emerged from the qualitative data gathering activities to various data "filters" of quantitative data, including: 1) Quantitative indicators of health and social needs that were worse by greater than one standard deviation compared to Texas and/or national indicators, 2) Analysis of trends over time that revealed worsening conditions related to health and social needs, 3) Analysis of significant gaps in health and social indicators among geographies within the service region as well as socio-economic and demographic (including racial and ethnic) indicators.



Next, “sensemaking” teams were convened with internal and external stakeholders to review the validated data and identify, through the lens of impact and alignment with Ascension Seton capacities and strategic priorities, which of the data points, or themes might be appropriate for prioritization. The sensemaking process, completed through a series of six sessions with three internal groups and three external groups, asked participants to consider the identified needs through various criteria, including the following:

- Alignment of problem with Ascension Seton’s strengths, capacities and priorities
- Impact on vulnerable populations
- Importance of problem to the community
- Organizational resources available to address problem

Based on the results of the sensemaking sessions, the CHNA Steering Committee¹ prioritized which of the identified needs were most significant.

Ascension Seton has selected those needs determined by the CHNA Steering Committee as the prioritized needs to develop a three-year iIS for each of the 12 hospitals in the Ascension Seton network, as well as the six joint ventures in its service area. Although each hospital may address many more needs, the prioritized needs will be at the center of a formal CHNA IS and corresponding tracking and reporting.

Through the prioritization process for the 2021 CHNA, the prioritized needs are as follows:

- **Mental and Behavioral Health** - This need was selected because a number of key indicators reveal the significant and growing concerns over mental and behavioral health needs in our region. Many of these concerns are long standing, including reported numbers of poor mental health days and upward trending suicide rates and substance use and abuse. Coupled with the effects of the pandemic, concerns around isolation, anxiety and depression heightened needs around mental and behavioral health.
- **Access to Care** - This need was selected because both qualitative and quantitative data revealed significant and increasing needs around issues of accessing care, particularly regarding affordability and insurance coverage for care, transportation- especially in the rural parts of Ascension’s service area, telemedicine and access to sufficient broadband infrastructures, and navigation of the complex medical system and services.
- **Social Determinants of Health** - This need was selected because many of the counties in the Ascension Seton service area have multiple indicators related to social needs that are significantly worse than averages for Texas and the United States, including lower access to exercise opportunities, lower rates of home ownership, very high rates of childhood poverty and low median household incomes, among others. Focus groups also mentioned food security and housing as significant barriers to healthy living.

¹ The CHNA Steering Committee is comprised of internal leaders Ray Anderson (Chief Strategy Officer), Lauren Baker (VP of Academic Integration & Chief of Staff), Derek Covert (Chief Mission Integration Officer and VP Canonical Affairs), and Kate Henderson (President - Regional Hospitals and Strategic Community Partnerships), and community partners Dr. Jewel Mullen (Associate Dean for Health Equity and Associate Professor, Department of Population Health at The University of Texas), and Dr. Andrew Springer (Associate Professor, Health Promotion and Behavioral Sciences at The University of Texas School of Public Health).



- Health Equity - This need was selected because significant gaps in health indicators and outcomes exist in the Ascension Seton service region according to County Health Rankings data and focus groups revealed narratives of cultural and language barriers to receiving care.

Ascension Seton understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. For the purposes of this CHNA, Ascension Seton has chosen to focus its efforts on the priorities listed above.

Needs That Will Be Addressed

The prioritized health needs that were identified in the 2021 CHNA were mental health, access to care, social determinants of health and health equity. Ascension Seton Edgar B. Davis will address all four of these needs in these implementation plans.

Needs That Will Not Be Addressed

Ascension Seton Edgar B. Davis will address all of the needs identified in the 2021 CHNA.

This report does not encompass a complete inventory of everything Ascension Seton Edgar B Davis does to support health within the community.

Acute Community Concern Acknowledgement

A CHNA and IS offer a construct for identifying and addressing needs within the community(s) it serves. However, unforeseen events or situations, which may be severe and sudden, may affect a community. At Ascension, this is referred to as an acute community concern. This could describe anything from a health crisis (e.g., COVID-19), water poisoning, environmental events (e.g., hurricane, flood) or other event that suddenly impacts a community. If adjustments to an IS are necessary, the hospital will develop documentation to inform key internal and external stakeholders.

Written Comments

This IS has been made available to the public and is open for public comment. Questions or comments about this IS can be submitted via the website: <https://healthcare.ascension.org/chna>.

Approval and Adoption by the Ascension Seton and Ascension Texas Boards of Directors

To ensure the Ascension Seton Edgar B Davis's efforts meet the needs of the community and have a lasting and meaningful impact, the 2021 IS was presented, approved and adopted by the Ascension Seton and Ascension Texas Boards of Directors on August 24th and 25th, 2022, respectively. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions in the Affordable Care Act, adoption of the IS also demonstrates that the board is aware of the IS, endorses



the priorities identified, and supports the action plans that have been developed to address prioritized needs.

Action Plans

The IS below is based on prioritized needs from the hospital's most recent CHNA. These strategies and action plans represent where the hospital will focus its community efforts over the next three years. While these remain a priority, the hospital will continue to offer additional programs and services to meet the needs of the community, with special attention to those who are poor and vulnerable.

The IS lists actions that this hospital is taking to address the needs, recognizing that needs are complex and multi-layered. More specific information about how the "Actions" and "Measurement" under each IS are carried out and tracked are in an Evaluation Plan. The information gathered for evaluation will be used to report on each activity listed along with others that may align with the strategies adopted.

STRATEGY 1
Hospital Name Ascension Seton Edgar B. Davis
Prioritized Health Need Access to Care
Strategy Offer hospital and community-based education and assistance with health resources to improve access to services for community members
Collaborators <ul style="list-style-type: none"> • Social workers and clinical care team
Resources <ul style="list-style-type: none"> • Associate time • Lists of and contacts for community service organizations and programs
ACTION STEPS
Assist patients in applying for pharmaceutical assistance programs to obtain reduced cost medication
Provide community outreach including vaccinations and health education
MEASUREMENT
<ul style="list-style-type: none"> • Number of patients receiving education and assistance at each site • Number and types of programs offered at each site
ANTICIPATED IMPACT
<i>Short Term:</i> Increase the number of individuals who receive the recommended treatments for their condition by decreasing the barriers of cost and location to the patient
<i>Long Term:</i> Improve health outcomes and reduce preventable deaths associated with chronic disease



STRATEGY 2
<p>Hospital Name Ascension Seton Edgar B. Davis</p>
<p>Prioritized Health Need Access to Care</p>
<p>Strategy Increase access points and capacity for primary care services at four Rural Health Clinics</p>
<p>Collaborators</p> <ul style="list-style-type: none"> • Ascension Seton Edgar B. Davis • Three Rural Health Clinics in Lockhart • One Rural Health Clinic in Luling
<p>Resources</p> <ul style="list-style-type: none"> • Ascension Seton Edgar B. Davis will provide resources including associate time for rural health clinics
ACTION STEPS
<p>Provide access to primary care services in rural communities through four Rural Health Clinics (RHC)</p>
MEASUREMENT
<ul style="list-style-type: none"> • Rural health clinic visits
ANTICIPATED IMPACT
<p><i>Short Term:</i> Increase access to primary care services in rural areas designated by Centers for Medicaid Services (CMS) as a shortage area</p> <p><i>Long Term:</i> Decrease health emergencies and preventable deaths by providing the right levels of care when and where they are needed including primary care for the prevention, early identification and maintenance of chronic health conditions and fast and easy linkages to needed hospital services</p>



STRATEGY 3
<p>Hospital Name Ascension Seton Edgar B Davis</p>
<p>Prioritized Health Need Access to Care</p>
<p>Strategy Increase access points and capacity for primary care services utilizing an integrated care structure for triage and scheduling for both in person and telehealth visits</p>
<p>Collaborators</p> <ul style="list-style-type: none"> ● Ascension Medical Group ● Accountable Care Organization ● Associated Medical Clinics ● Primary Care Physicians (across Texas) ● Specialty Care Physicians (across Texas) ● Ancillary Services (e.g., lab and imaging services) ● Compassus ● Emergency Room Physicians ● Social Workers for screening and referrals related to social needs
<p>Resources</p> <ul style="list-style-type: none"> ● Time of associates ● Materials used to screen patients for social needs and connect to community organizations ● Relationships/Partnerships with entities that intersect with hospital-based care ● Neighborhood Resource platform ● Support from Clinical Network Services at Ascension National ● Home monitoring kits for variety of health conditions
ACTION STEPS
<p>For program areas including: 1) Remote monitoring of chronic conditions, 2) Post-ER Discharge Monitoring, 3) Post hospitalization monitoring, 4) CHA Remote Monitoring, 5) COPD Remote Monitoring, 6) Diabetic Care Remote Monitoring, create dashboard to measure program impact and establish metrics and goal targets by partnering with hospital emergency departments and Ascension clinics</p>
<p>Optimize remote patient monitoring for a broad array of health conditions, for a broader array of eligible populations.</p>
MEASUREMENT
<ul style="list-style-type: none"> ● Creation of dashboards to measure number of people served in program areas noted above ● Consistent with Ascension strategy, establish metrics and goal targets for reaching new populations in need of care ● Creation of dashboards indicating deployment and use of remote patient monitoring by health condition



ANTICIPATED IMPACT
<p><i>Short Term:</i> Increase access to appropriate levels of care through triage, scheduling of virtual and in-person primary-care visits and use of remote health monitoring</p> <p><i>Long Term:</i> Decrease health emergencies and preventable deaths by providing the right levels of care when and where they are needed including primary care for the prevention, early identification and maintenance of chronic health conditions and fast and easy linkages to needed hospital services</p>

STRATEGY 4
<p>Hospital Name Ascension Seton Edgar B. Davis</p>
<p>Prioritized Health Need Mental Health</p>
<p>Strategy Improve network of care for Mental and Behavioral Health through access to psychiatric consultations</p>
<p>Collaborators</p> <ul style="list-style-type: none"> Psychiatrists at Ascension Seton Medical Center Austin and Dell Seton Medical Center at The University of Texas
<p>Resources</p> <ul style="list-style-type: none"> Ascension Seton Edgar B. Davis will maintain and deploy tele-psych cart to bedside of requested consult Associate time
ACTION STEPS
<p>Provide tele-psych consults in ED when requested</p>
MEASUREMENT
<ul style="list-style-type: none"> Number of psychiatric consults provided
ANTICIPATED IMPACT
<p><i>Short Term:</i> Increase access to psychiatric consults and treatment for patients in Ascension Seton hospitals</p> <p><i>Long Term:</i> Improve overall mental wellbeing and decrease mental health crises'</p>

STRATEGY 5
Hospital Name Ascension Seton Edgar B Davis
Prioritized Health Need Social Determinants Of Health
Strategy Connect patients with social needs to community resources through the use of Neighborhood Resource, a platform that connects people in need to community organizations that offer free and reduced cost services, through a simple zip code search.
Collaborators <ul style="list-style-type: none"> ● Social workers ● FindHelp ● Representatives from community organizations ● Clinical and administrative teams across the network
Resources <ul style="list-style-type: none"> ● Time of associates ● Materials used for screening patients ● Neighborhood Resource platform ● Community partner time and resources
ACTION STEPS
Connect patients screened for social needs, with services through Neighborhood Resources
MEASUREMENT
<ul style="list-style-type: none"> ● Number of referrals through Neighborhood Resource ● Number of searches by Ascension Texas associates in Neighborhood Resource ● Top searched needs
ANTICIPATED IMPACT
<i>Short term:</i> Increase identification of healthcare and social needs for all patients and create connections to community resources that address those needs
<i>Long term:</i> Improve health and social conditions in our communities



STRATEGY 6
Hospital Name Ascension Seton Edgar B. Davis
Prioritized Health Need Health Equity
Strategy Identify and address barriers to care within the community, with special attention to persons who are underserved and/or marginalized
Collaborators <ul style="list-style-type: none"> • Ascension Appreciation, Belongingness, Inclusivity, Diversity, Equity (ABIDE) program leaders at the national and local level • Community Impact and Solidarity leaders within Ascension • All Ascension associates
Resources <ul style="list-style-type: none"> • Hospital leadership and associate time • Training materials
ACTION STEPS
Learning opportunities related to understanding poverty and advancing health equity
Training related to awareness of social determinants of health and identifying resources to assist patients in need
MEASUREMENT
<ul style="list-style-type: none"> • Number of internal training and educational opportunities related to equity, barriers to care and social determinants of health • Number of people attending ABIDE and other opportunities addressing health equity and barriers to care
ANTICIPATED IMPACT
<i>Short term:</i> Improved relationships with communities who have been underserved
<i>Long term</i> Improve health outcomes and reduce health disparities for underserved populations

Evaluation

Ascension Seton will develop a comprehensive measurement and evaluation process for the IS. The Ministry will monitor and evaluate the action plans outlined in this plan for the purpose of reporting and documenting the impact these action plans have on the community. Ascension Seton uses a tracking system to capture community benefit activities and implementation. To ensure accountability, data will be aggregated into an annual Community Benefit report that will be made available to the community.