Community Health Needs Assessment
South Region 2: Caldwell County

Ascension Seton Edgar B. Davis

May 2019
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Introduction

Ascension Seton, formerly known as Seton Family of Hospitals, 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 Caldwell County 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 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 Caldwell County, Ascension Seton’s South Region 2. Caldwell County is the focus of this CHNA because it is part of Ascension Seton’s primary service area. Ascension Seton Edgar B. Davis, a rural Critical Access Hospital, is located in Caldwell County.

CHNA – South Region 2
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 St. David’s Foundation (“SDF”), which both serve Caldwell County, 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 Caldwell County. Ascension Seton used a Z-score methodology to compare Caldwell County 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 SDF worked with an external consultant, Shared Strategy Group, LLC, to gather qualitative feedback from the broader Caldwell community using several methods, including one-on-one stakeholder interviews using a standardized interview guide and focus groups. Shared Strategy Group is a national consulting firm based led by Lolita Ross, MPPA, PMP, who previously served as the Chief Program Officer for the National Network of Public Health Institutes. Shared Strategy Group has extensive experience gathering stakeholder input from diverse communities and working with non-profit organizations, government and philanthropic organizations across the nation.

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 and potential solutions.
On behalf of Ascension Seton and SDF, Shared Strategy Group facilitated two focus groups in Caldwell County in August 2018. The first focus group was held at the Dr. Eugene Clark Central Library and had 12 participants who represented or were members of medically underserved, low-income and minority populations or populations with chronic disease needs. The second focus group, held at the Lockhart WIC Program Clinic included eight participants representing the same communities as above.

Key informant interviews were held in Caldwell County in December 2018 with representatives of organizations that represent the diverse economy and racial and ethnic interests of the region. Interviews included the following: Elsie Lacey, County Extension Agent with Texas A&M University; Mayor Mike Hendricks and Councilman John Wells with the City of Luling and Joe Melgar and Rafael De La Paz with Community Health Centers South Central Texas.

For more information on 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, the firm 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 Caldwell County 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**

Between 2018 and 2030, the population is expected to grow about 19 percent from 43,054 persons to 51,237 in Caldwell County. Some of this growth is due to the 2012 opening of TX 130, the high-speed arterial from Seguin to Georgetown.

The population in Caldwell County is aging, but not at the same pace as other areas in Central Texas. The 2018 population is about 14.8 percent over the age of 65 and is projected to climb to just under 19.4 percent by 2030.

The population in Caldwell County is aging, but not at the same pace as other areas in Central Texas. The 2018 population is about 14.8 percent over the age of 65 and is projected to climb to just under 19.4 percent by 2030.
Population growth is highest among Hispanics, comprising 50.6 percent of the population in 2018 and projected to grow to 56 percent by 2030.

At 18.6 percent, the poverty rate in Caldwell County is only slightly higher than the state average (16.7 percent) but is more than three percentage points higher than the national average (15.1 percent).
When the last CHNA was published, Caldwell County’s insurance coverage rate was better than statewide averages. However, in the three years since the last CHNA, insurance coverage has dropped to the statewide average. Moreover, the uninsured rate among adults in Caldwell County is twice the national average, while the uninsured rate among children is nearly three times higher than the national average.

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

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

After reviewing the data and community input and using the methodology outlined above, Ascension Seton identified two main categories of health priorities for Caldwell County: (1) access to care and (2) mental health.

Access to Care

Community members and local leaders identified improving access to care as a primary need in Caldwell County. According to the key informant interviews, access to specialty care is extremely limited in Caldwell County and residents must often travel to other towns for diagnostic testing and other services. Key informants also shared that some immigrants may not seek care or publicly-funded health care services for fear of being declared a “public charge” and face possible deportation.

Focus group participants at both locations also identified access to care as a critical issue facing Caldwell County. Participants sited the following four key barriers for accessing non-specialty care: (1) lack of insurance; (2) long wait times; (3) limited selection of doctors and (4) high demand for pediatric doctors. One focus group participant described the difficulty she and her family had experienced navigating what she described as a very disjointed, spread out, and non-communicative specialty healthcare system.

Providers per 100,000 Population

Source: RWJ Foundation/Univ of Wisconsin Institute County Health Rankings (countyhealthrankings.org); data pulled June 2018
The data support the concerns of local residents, leaders and experts. When the last CHNA was published in 2016, Caldwell County was a Health Professional Shortage Area and in 2019 that designation remains. Caldwell County seriously lags behind the state and national average for numbers of primary care physicians per 100,000 population. The same holds true for other primary care providers, mental health providers and general dentists. Key informants also indicated that they have seen an increase in demand for dental services among patients at Caldwell County community health centers.

Limited access to primary care physicians can contribute to a higher rate of preventable hospital stays since minor medical issues can sometimes spiral into more serious concerns. That scenario appears to be playing out in Caldwell County with a rate of preventable hospital stays significantly higher than both state and national average.

**Mental Health**

Focus group participants mentioned mental health as an area of concern, although the issue did not dominate discussions. Nonetheless, the quantitative data in Caldwell County clearly demonstrate: (1) poor access to mental health providers and (2) worsening mental health outcomes over the past few years.
Several trends indicate the need to prioritize mental health care in Caldwell County. Poor mental health days in Caldwell County have worsened from average to above the state average in the past few years. In addition, the suicide rate in Caldwell County, while below the national average, is more than twice the state average. While the suicide rate statewide in Texas declined, the suicide rate in Caldwell County rose from 13 deaths per 100,000 population in 2009-2013 to nearly 15 in 2012-2016.
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 Caldwell County cited transportation as a barrier to better health. Programs like Capital Area Rural Transportation System (CARTS) are not perceived to be family-friendly and lack of transportation contributes to whether individuals seek care. Members of the community also asked for investments in education (the percent of persons with some college education is below the state average in Caldwell County), youth recreational facilities and afterschool programs for children. Focus group participants in Caldwell County also stated that the level of health literacy in the area is low. The data also show low levels of physical activity and high smoking rates.

**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**

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

Comparison of Caldwell County to Texas and US

**Mental and Behavioral Health**

<table>
<thead>
<tr>
<th></th>
<th>Texas</th>
<th>US</th>
<th>Caldwell County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suicide mortality rate</td>
<td>6.2</td>
<td>13.0</td>
<td>Ø</td>
</tr>
<tr>
<td>Poor mental health days</td>
<td>3.4</td>
<td>3.8</td>
<td>Ø</td>
</tr>
<tr>
<td>Depression prevalence</td>
<td>17.0%</td>
<td>16.7%</td>
<td>Ø</td>
</tr>
<tr>
<td>Mental health providers</td>
<td>98.8</td>
<td>370.4</td>
<td>Ø</td>
</tr>
</tbody>
</table>

Data pulled June 2018

**Access to Care**

<table>
<thead>
<tr>
<th></th>
<th>Texas</th>
<th>US</th>
<th>Caldwell County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents living in a HPSA</td>
<td>16.8%</td>
<td>33.1%</td>
<td>Ø</td>
</tr>
<tr>
<td>Adults without health insurance</td>
<td>23.3%</td>
<td>13.0%</td>
<td>Ø</td>
</tr>
<tr>
<td>Children without health insurance</td>
<td>10.0%</td>
<td>5.0%</td>
<td>Ø</td>
</tr>
<tr>
<td>Primary care physicians</td>
<td>59.9</td>
<td>75.8</td>
<td>Ø</td>
</tr>
<tr>
<td>Preventable hospital stays</td>
<td>53.2</td>
<td>49.0</td>
<td>Ø</td>
</tr>
<tr>
<td>General dentists per 100,000</td>
<td>55.9</td>
<td>67.6</td>
<td>Ø</td>
</tr>
<tr>
<td>No dental exam past 12 months</td>
<td>37.4%</td>
<td>30.2%</td>
<td>Ø</td>
</tr>
<tr>
<td>Infant mortality w/in 1 yr</td>
<td>5.8</td>
<td>6.0</td>
<td>Ø</td>
</tr>
<tr>
<td>Child mortality deaths &lt; 18</td>
<td>51.5</td>
<td>50.0</td>
<td>Ø</td>
</tr>
<tr>
<td>Mammography screening</td>
<td>57.9%</td>
<td>63.0%</td>
<td>Ø</td>
</tr>
</tbody>
</table>

Data pulled June 2018

**Chronic Diseases**

<table>
<thead>
<tr>
<th></th>
<th>Texas</th>
<th>US</th>
<th>Caldwell County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes prevalence</td>
<td>9.7%</td>
<td>10.0%</td>
<td>Ø</td>
</tr>
<tr>
<td>Diabetes incidence</td>
<td>8.5</td>
<td>No Data</td>
<td>9.5</td>
</tr>
<tr>
<td>Obesity prevalence</td>
<td>28.4%</td>
<td>28.0%</td>
<td>Ø</td>
</tr>
<tr>
<td>Physical inactivity % age 20+ no leisure time physical activity</td>
<td>24.3%</td>
<td>23.0%</td>
<td>Ø</td>
</tr>
</tbody>
</table>

Data pulled June 2018
Appendix Two: Organizations Represented in 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.

Shared Strategy Group, on behalf of Ascension Seton and St. David’s Foundation, facilitated two Community Input Sessions to gather broad-based input from the community. A summary of the location and participation in these sessions is provided below:

<table>
<thead>
<tr>
<th>Location</th>
<th>Community Input Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Eugene Clark Central Library</td>
<td>Representatives or members of medically underserved, low-income and minority populations, populations with chronic disease needs</td>
</tr>
<tr>
<td>Lockhart WIC Program Clinic</td>
<td>Representatives or members of medically underserved, low-income and minority populations, populations with chronic disease needs</td>
</tr>
</tbody>
</table>

Shared Strategy Group, on behalf of Ascension Seton and St. David’s Foundation, conducted key informant interviews with the following:

<table>
<thead>
<tr>
<th>Leader</th>
<th>Organization</th>
<th>Community Input Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe Melgar</td>
<td>Director of Client Services Community Health Centers of South Central Texas</td>
<td>Special knowledge or expertise in public health; Health care provider; Community Health Center</td>
</tr>
<tr>
<td>Elsie Lacey</td>
<td>County Extension Agent Texas A &amp; M Extension Services University</td>
<td>Academic; Special knowledge or expertise in public health</td>
</tr>
<tr>
<td>Rafael De La Puz</td>
<td>In-transition/Executive Director Texas Association of Community Health Centers/ Community Health Centers of South Central</td>
<td>Special knowledge or expertise in public health; Health care provider; Community Health Center</td>
</tr>
<tr>
<td>Mayor Mike Hendricks</td>
<td>City of Luling</td>
<td>Local government official</td>
</tr>
<tr>
<td>Councilman John Wells</td>
<td>City of Luling</td>
<td>Local government official</td>
</tr>
</tbody>
</table>
Appendix Three: Summary of Community Health Resources

The chart below provides a high-level overview of the health care resources available in Caldwell County, 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 and poverty. 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.

<table>
<thead>
<tr>
<th>Acute Care</th>
<th>Primary &amp; Specialty Care</th>
<th>Mental Health</th>
<th>Other Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ascension Seton Edgar B. Davis</td>
<td>Seton Luling Family Medicine Clinic</td>
<td>Bluebonnet Trails Community Services (MHMR)</td>
<td>Capital Area Rural Transportation System (CARTS)</td>
</tr>
<tr>
<td>Warm Springs Rehabilitation of Luling</td>
<td>Seton Lockhart Internal Medicine</td>
<td>Connections Individual &amp; Family Services in Caldwell County</td>
<td>County Indigent Health Care Program (CIHCP)</td>
</tr>
<tr>
<td></td>
<td>Seton Lockhart Family Medicine</td>
<td>Hays Caldwell Women’s Center</td>
<td>Catholic Charities of Central Texas</td>
</tr>
<tr>
<td></td>
<td>Seton Lockhart Family Health Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lockhart Family Practice Community Health Services - operated by Community Action, Inc. of Central Texas</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Luling Community Health and Dental Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Centers of South Central Texas, Inc.</td>
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<td></td>
<td></td>
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<tr>
<td>----------------------------------------------------</td>
<td></td>
<td></td>
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<tr>
<td>Children’s Care-a-Van</td>
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</tbody>
</table>
Appendix Four: Evaluation of Impact of Actions Since 2016 CHNA

Ascension Seton conducted its last CHNA for Caldwell County in 2016. The CHNA identified the following prioritized needs for FY 2016-FY 2018.

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

Ascension Seton and Ascension Seton Edgar B. Davis have worked to address these needs in Caldwell County. The table 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 Edgar B. Davis 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 Edgar B. Davis

<table>
<thead>
<tr>
<th>Prioritized Need</th>
<th>Action</th>
<th>Actual Impact</th>
</tr>
</thead>
</table>
| **Mental and Behavioral Health** | Intensive outpatient psychiatric program for seniors in Caldwell and surrounding counties. | Added two new vans to increase routes for patient pick up.  
2018 Visits 6735 compared to 2017 6476, an increase of 259 visits. |
| **Primary and Specialty Care**   | Mobile health van providing primary care, immunizations, education, referrals, and other services to children in Caldwell, Hays, Gonzales, Travis, Guadalupe and Bastrop Counties at local schools and churches through transportation barriers. | Increased coverage to 4.5 days per week from 4 days. Additional day is located at a new school in Dale, Texas. |
|                                  | Support for uninsured residents of Caldwell County to apply for free medications from pharmaceutical companies. | Free medications have been provided to uninsured residents  
• 222- unique patients served  
• 344- refills processed  
• $1,680,482.70- value of meds received |
| **Chronic Disease**              | Support for Caldwell County residents diagnosed with diabetes,          | Ascension Edgar B. Davis has added three Primary Care Providers and two Internal Medicine Primary Care Providers to our Rural Health Centers. Services continue to be provided to all Caldwell County residents needing medical care. Additional Rural Health Centers have been added in Smithville and Bastrop. Part-time surgeon at Ascension Seton Edgar B Davis, 58% of cases have been unfunded patients.  
Ascension Seton Edgar B. Davis is accepting unfunded Skilled Nursing patients from other Seton Hospitals. These patients need extended hospitalization wound care, antibiotic therapy, physical and occupational therapy. Average stay is 14 days. |
program provided a part-time dietitian for one year. This service has also ended thus the Caldwell County diabetic education program has ceased. Rural Health Center has hired a Primary Care Provider who specializes in diabetes management. All uncontrolled diabetics are referred to this Primary Care Provider.

<table>
<thead>
<tr>
<th>Systems of Care</th>
<th>Enrollment, navigation and health care services for Caldwell County residents at or below 21% of the federal poverty limit.</th>
<th>Navigation services were provided and people were counseled on their options.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Determinants of Health</td>
<td>Community Meeting with City officials, EMS, Ascension Seton Edgar B Davis, police and MHMR to discuss the growing issues of psychiatric emergencies.</td>
<td>Participated in two community health fairs, geriatric care giver fair.</td>
</tr>
</tbody>
</table>