CHRISTUS Santa Rosa – Health System
Community Health Improvement Plan (CHIP) FY20

CHRISTUS Santa Rosa Health System responds to the health care needs of the community through services provided throughout San Antonio, New Braunfels and South Texas. This Plan encompasses Community Health Improvement activities at the regional level in communities served by various facilities within the CHRISTUS Santa Rosa Health System.

- The Children’s Hospital of San Antonio
- Children’s Hospital of San Antonio – Stone Oak
- CHRISTUS Santa Rosa Hospital – Medical Center
- CHRISTUS Santa Rosa Hospital – Westover Hills
- CHRISTUS Santa Rosa Hospital – North New Braunfels
- CHRISTUS Santa Rosa Hospital – Alamo Heights
- CHRISTUS Santa Rosa Hospital – Alon
- CHRISTUS Santa Rosa Hospital – Creekside

Each of the facilities of CHRISTUS Santa Rosa Health System shares the mission of CHRISTUS Health, which is to extend the healing ministry of Jesus Christ.

CHRISTUS Santa Rosa Health System primarily serves Bexar and Comal counties, as well as several counties located south of San Antonio extending to the border of Texas and Mexico. This area of South Texas comprises a population of more than 2.8 million.

MISSION FOR IMPLEMENTATION
CHRISTUS Health, a Catholic, faith-based ministry’s mission is to extend the healing ministry of Jesus Christ. Our vision is to be a leader, a partner, and an advocate in the creation of innovative health and wellness solutions that improve the lives of individuals and communities so that all may experience God’s healing presence and love.

ORGANIZATIONAL COMMITMENT
CHRISTUS Santa Rosa Health System is a founding member of The Health Collaborative (formerly, The Bexar County Health Collaborative). In collaboration with the other local healthcare systems, universities, non-profits, and government entities, the community health needs assessment is completed every three years.

The CHRISTUS Santa Rosa Health System’s Regional Vice President of Mission Integration has maintained membership on the Board of Directors of The Health Collaborative to support their work and participate in the process at all points including budgeting, content, design, and program management decisions.

In addition, the CHRISTUS Santa Rosa Health System’s Manager of Community Health has been appointed as a proxy Board member. As such, the Manager regularly attends board meetings and is a voting member in the absence of the Regional Vice President. CHRISTUS Santa Rosa Health System’s Manager of Community Health, together with the Director of Mission Services, is responsible for identification and reporting of all eligible Community Benefit Programs for the CHRISTUS Santa Rosa Health System.
COMMUNITY HEALTH NEEDS ASSESSMENT

HEALTH COLLABORATIVE BOARD OF DIRECTORS MEMBERSHIP

- CHRISTUS Santa Rosa Health System
- University Health System
- San Antonio Metropolitan Health District
- Bexar County Dept. of Economic Dev. & Community Resources
- Methodist Healthcare Ministries of South Texas
- Methodist Healthcare System
- Baptist Health System
- YMCA of Greater San Antonio
- Appdiction Studios
- Community First Health Plans
- Our Lady of the Lake University
- University of the Incarnate Word School of Osteopathic Medicine
- UT Health San Antonio
- San Antonio Clubhouse
- Community Members: Pilar Oates, Charles Kight and Doug Beach

TARGET AREA/ POPULATION

Population growth and geographic distribution – where people live in each county – are both extremely important drivers of needs for physical infrastructure, human services assets like schools and health clinics, and businesses and amenities. Strong population growth in Bexar is old news, but Atascosa is growing as well. While the population size and growth in absolute numbers are vastly different, the rate of growth from 2012 to 2017 differs much less. Bexar added about 173,000 people over the past five years alone – a 10% increase – while Atascosa added an estimated 1,200, a roughly 2.5% increase. While Atascosa’s rate of growth is not as steep as that of Comal, Guadalupe, and other historically rural and semi-rural counties in metro areas along and east of the I-35 corridor, it does buck the overall trend of continued population decline in rural and semi-rural Texas counties.

Because Texas’ recent growth has been so great and demographic shifts have been so rapid, The Texas Demographic Center’s (TDC) population projections for the current year are considered by many to be a better inter-censal population estimate. The population estimates for 2017 are virtually identical to the American Community Survey estimates presented. TDC projections put Atascosa’s 2019 population at 51,048 and Bexar’s at 2,053,206, an increase over 2017 of 4% and 5%, respectively. TDC currently projects that Atascosa’s population will grow to 60,111 by 2030 and 73,187 by 2050. Bexar’s population is expected to grow to 2,502,208 by 2030 and 3,343,929 by 2050.

STAKEHOLDER MEETINGS AND FOCUS GROUPS

Issues to be highlighted were selected by the Community Health Needs Assessment Steering Committee, with discussion and consensus following individual selection. This work was informed both by a large volume of preliminary assessment data and each member’s own understanding of health and well-being in Bexar and Atascosa Counties.
In addition, a series of focus group discussions were organized with community members from different sectors of the city in March 2019. The purpose of these focus groups was to ensure that the community’s voice and needs were well represented in the 2019 CHNA. Participants were asked questions about their understanding, needs and barriers for six priority areas: healthy child and family development, healthy eating, active living, safe communities, behavioral and mental well-being, and sexual health. Then they were asked to describe existing programs and needed programs to meet their needs. The qualitative data identified the following issues:

Living Conditions (3 rise to the top)
- Access to health care, including mental health care
- Housing stability and homelessness
- Income and poverty
- Education and literacy
- Mobility and transportation
- Crime and violence

Health Behaviors & Risks
- Healthy eating and physical activity
- Vaccinations
- Overweight and obesity

Disease & Injury
- Quality of life
- Mental illness
- Substance use and abuse

Mortality
- Life expectancy
- Premature mortality

**PRIORITY HEALTH NEEDS FOR COMMUNITY-AT-LARGE**
The 2019 Community Health Needs Assessment has identified the following five focus areas as the community-identified priorities:
1. Healthy Eating and Active Living
2. Healthy Child and Family Development
3. Safe Communities
4. Behavioral Health and Mental Well-Being
5. Sexual Health
CHRISTUS SANTA ROSA IDENTIFIED PRIORITIES

Based on the data in the Community Health Needs Assessment produced in June 2019 and feedback provided by the CHRISTUS Santa Rosa Community Benefit Council, the CHNA Advisory Board, CHRISTUS Health leadership, and the many community partners and organizations who participated in the CHNA process, the priority health needs for the communities served by the CHRISTUS Santa Rosa Health System are:

1. Healthy Eating and Active Living
2. Healthy Child and Family Development
3. Behavioral and Mental Well-Being

SELECTED IMPLEMENTATION STRATEGY

The following implementation strategies outline actions the CHRISTUS Santa Rosa Health System will take over the next three years to address the priority health needs listed above.

PRIORITY STRATEGY STATEMENT: Improve access to appropriate care for the economically disadvantaged by reducing inappropriate admissions / readmissions to the emergency room.

<table>
<thead>
<tr>
<th>CHNA Priority Area</th>
<th>Major Actions</th>
<th>Description</th>
<th>Anticipated Outcome</th>
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<tbody>
<tr>
<td>Healthy Eating and Active Living</td>
<td>Community Health Worker Program</td>
<td>Coordinated care management and navigation programs for the uninsured to increase access to health care services for those with chronic conditions and those without access to regular primary health care services</td>
<td>Document the number of persons who receive appropriate care in the appropriate setting as a percentage that contributes toward the goal of a 10% reduction in the inappropriate use of the ED by the economically disadvantaged.</td>
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<tr>
<td>Healthy Child and Family Development</td>
<td>Children’s Mobile Unit</td>
<td>Provide well child, sick child, and immunizations primarily in the Harlandale, Edgewood, and South San Antonio Independent School Districts. The Mobile Unit also attends targeted and strategic community-based wellness events to address lack of access among vulnerable populations</td>
<td>Document the number of persons who receive appropriate care in the appropriate setting as a percentage that contributes toward the goal of a 10% reduction in the inappropriate use of the ED by the economically disadvantaged.</td>
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| Behavioral and Mental Well Being | The Southwest Texas Regional Advisory Council (STRAC) has launched the Southwest Texas Crisis Collaborative (STCC) | An innovative new public/private partnership aimed at transforming health care delivery, improving care, and reducing the cost of care for the Safety Net population (unfunded or underfunded patients), with particular focus on the subset of Homeless, Mental Illness and Super Utilizers. | Law Enforcement Navigation - Directs law enforcement to the most appropriate Behavioral Health services when they encounter a patient in the field who needs treatment but is medically stable. This bypasses the ER and helps patients get the care and treatment they need sooner.  
Haven for Hope Acute Care Station – Staffed by Paramedics, with the goal of reducing the after-hours EMS transports from Haven for Hope.  
Psychiatric Emergency Services (PES) beds – For ER patients who have been medically cleared but need Behavioral Health treatment. The hospital calls to request a PES beds (currently located at Southwest General and San Antonio Behavioral Health, and soon to be adding beds at Methodist Specialty & Transplant Hospital)  
Program for Intensive Care Coordination (PICC) – Working to help navigate the top 100 super users (as defined by number of ER visits). Goal is to reduce ER visits and inpatient admissions by ensuring these patients get connected to the appropriate outpatient services. |
**PRIORITY STRATEGY STATEMENT:** Improve health of children and promote healthy family development.

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<tr>
<td>Healthy Child and Family Development</td>
<td>Women, Infant, and Children (WIC) Program</td>
<td>Supplemental nutrition and breastfeeding education and support program that provides supplemental nutritious food products to participants through use of an Electronic Balance Transfer Card. Services are available for pregnant and breastfeeding women, infants up to one year old, and children five years of age and younger</td>
<td>Document number of family participants, Document number of families, Achieve 99% breastfeeding rate, Achieve 90% rate of mothers who receive services in 1st trimester of pregnancy.</td>
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<tr>
<td>Healthy Child and Family Development</td>
<td>Center for Miracles</td>
<td>Provide the timely and accurate medical assessments of children who are suspected victims of abuse or neglect</td>
<td>Document number of children assessed for abuse or neglect</td>
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<td>Healthy Eating and Active Living</td>
<td>Culinary Health Education for Families Program (CHEF)</td>
<td>Teaches children and families common sense nutrition and practical cooking skills. Through engaging, hands-on experiences, CHEF educates and inspires individuals to adopt and sustain healthy eating habits</td>
<td>Increase healthy eating and cooking behaviors among clients of the CHEF Program</td>
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<td>Healthy Child and Family Development</td>
<td>Ronald McDonald House</td>
<td>In-kind Space dedicated to Ronald McDonald house residential and other services</td>
<td>Document total in-kind expenses to CSRHS in FY17</td>
</tr>
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<td>Healthy Child and Family Development</td>
<td>Children’s Mobile Unit</td>
<td>Provide well child, sick child, and immunizations primarily in the Harlandale, Edgewood, and South San Antonio Independent School Districts. The Mobile Unit also attends targeted and strategic community-based wellness events to address lack of access among vulnerable populations</td>
<td>5% increase in immunizations provided at no cost to community members</td>
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<td>Healthy Child and Family Development</td>
<td>Physician Recruitment</td>
<td>Recruitment of physicians to fill need in Medically Underserved Area (MUA) and Health Professions Shortage Area (HPSA)</td>
<td>Document number and specialty of physicians recruited to fill need in MUA and HPSA</td>
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<td>Healthy Child and Family Development</td>
<td>CMS Innovation Center Accountable Health Communities (AHC) Grant</td>
<td>The purpose of the AHC model is to incorporate screening for social determinants of health into health-related, onsite screening activities, refer Medicare or Medicaid beneficiaries to an online inventory of community-based services and to navigate high-risk patients to community-based programs and services.</td>
<td>This model is based on research that estimates that 40% of health care utilization is driven by unmet social needs. Screening for social determinants of health will, at minimum, include the following five domains: transportation, housing, food insecurity, interpersonal violence and utilities assistance. CSRHS is expected to offer screening to 75,000 Medicare or Medicaid beneficiaries each year (all sites combined).</td>
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**PRIORITY STRATEGY STATEMENT:** Improve healthy eating and active living behaviors

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<td>Community Health Worker Program (promotoras)</td>
<td>Coordinated care management and navigation programs for the uninsured to increase access to health care services for those with chronic conditions and those without access to regular primary health care services</td>
<td>Document number and type of referral to community-based services including social determinants, prevention, disease management, and education programs</td>
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Healthy Eating and Active Living

Culinary Health Education for Families Program (CHEF)

Teaches children and families common sense nutrition and practical cooking skills. Through engaging, hands-on experiences, CHEF educates and inspires individuals to adopt and sustain healthy eating habits.

Increase healthy eating and cooking behaviors among clients of the CHEF Program

Healthy Eating and Active Living

Mobile Mammography Unit

Provides free mammograms to women without insurance or the ability to pay and serves as a link to the greater health care community by partnering with other organizations to provide education, outreach and access to treatment.

Document number of women who receive a mammogram at no cost

Document number of women referred to partner organizations

Healthy Eating and Active Living

Enroll SA Coalition

County-wide community-based coalition focused on maximizing enrollment in the Health Insurance Marketplace created by the Affordable Care Act.

Increase enrollment in the health insurance marketplace

Provide in-person assistance with applications to the Health Insurance Marketplace

PRIORITY STRATEGY STATEMENT: Improve behavioral and mental well-being

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<td>Behavioral and Mental Well-Being</td>
<td>The Southwest Texas Regional Advisory Council (STRAC) has launched the Southwest Texas Crisis Collaborative (STCC)</td>
<td>An innovative new public/private partnership aimed at transforming health care delivery, improving care, and reducing the cost of care for the Safety Net population (unfunded or underfunded patients), with particular focus on the subset of Homeless, Mental Illness and Super Utilizers.</td>
<td>Law Enforcement Navigation - Directs law enforcement to the most appropriate Behavioral Health services when they encounter a patient in the field who needs treatment but is medically stable. This bypasses the ER and helps patients get the care and treatment they need sooner. Haven for Hope Acute Care Station – Staffed by Paramedics, with the goal of reducing the after-hours</td>
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EMS transports from Haven for Hope.

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<th>In addition to these specific strategies for community health improvement, Community Health and Mission Integration staff represent the mission of CHRISTUS Santa Rosa Health System through local non-profit boards committees. The CHRISTUS Santa Rosa Regional Vice President for Mission Integration also serves as the Advocacy Leader for the Region, along with the CEO of The Children’s Hospital of San Antonio. These board commitments enable CHRISTUS Santa Rosa to participate in issue-based conversations and to serve as a collaborative partner in the community. The priority areas for these boards, committees and advocacy initiatives include:</th>
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<td>• Access to health insurance and services</td>
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<td>• Protection of Medicare, Medicaid and CHIP</td>
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<td>• Spiritual and physical health</td>
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<td>• Obesity and hypertension</td>
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<td>• Drug costs</td>
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<td>• Immigration reform</td>
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<td>• Child safety</td>
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• Preventative care
• Health literacy
• Care for the environment

Examples of these organizations:

• American Heart Association
• San Antonio Food Policy Council
• Mayor’s Fitness Council
• Humana Diabetes Coalition
• Ettling Center for Civic Leadership (UIW)
• The Health Collaborative
• SA2020
• Enroll America
• Alamo Area Council of Governments
• Catholic Charities
• Local Chambers of Commerce

CHRISTUS Santa Rosa Health System continues to seek innovative strategies for improving the health of the San Antonio/Bexar County region. Within this document, the ministry reaffirms its commitment to population health and culturally appropriate interventions while remaining steadfastly faithful to the mission of extending the healing ministry of Jesus Christ. Reliable and rigorous impact evaluation enables CHRISTUS Santa Rosa Health System to continue to contribute to the health of the community and to provide effective stewardship of valuable ministry resources.