METHODIST AMBULATORY SURGERY HOSPITAL

"Serving Humanity to Honor God" www.SAHealth.com Methodist Ambulatory Surgery Hospital 2017-2019

Community Health Needs Assessment and Implementation Strategy Contents

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Organizational Profile

Methodist Ambulatory Surgery Hospital is part of the Methodist Healthcare¹ family of hospitals. Specializing in outpatient and elective inpatient surgery, Methodist Ambulatory Surgery hospital offers an atmosphere and environment that promotes wellness and rapid recovery. With nine fully-equipped operating rooms, this 31-bed facility provides patients with the latest technology and all the ancillary services associated with larger, full-service hospitals.

Our Mission: Serving Humanity to Honor God by providing exceptional and cost-effective health care accessible to all.

Our Vision: To be world-class

Our Values: I-CARE: Integrity, Compassion, Accountability, Respect, Excellence

Our Core Competency: Building partnerships to serve our community.

Community Benefits Committee – Guiding Community Outreach

The Methodist Healthcare System Core Competency, *building partnerships to serve our community*, enables achievement of the mission of service to the community (Serving Humanity) through compassionate service, efficiency, and effectiveness with a servant leadership attitude (being responsible stewards of Methodist Healthcare's assets while honoring God). The Mission supports regular, consistent impactful contributions to strengthen the health of the community guided by the Community Benefits Committee. Formed in 1995 as a result of the partnership agreement, the Community Benefits Committee is a standing committee of Methodist Healthcare. The committee meets quarterly to review community benefits provided by Methodist Healthcare. Members include representatives from Methodist Healthcare's Community Board, Board of Governors and leadership from Methodist Healthcare and Methodist Healthcare Ministries, as well as key staff members from each organization. An annual community report is submitted by the president and CEO of Methodist Healthcare, to the Community Benefits Committee, Board of Governors, Community Board, and MHM recapping the complimentary programs offered to the community, a great many of them directed to those less fortunate. The report includes a summary trend chart of actual services. In addition to the

¹ Methodist Healthcare is comprised of 28 facilities, including eight hospitals. Methodist Healthcare was formed as a 50-50 co-ownership between the Methodist Healthcare Ministries of South Texas (MHM) and HCA. MHM is a private, faith-based, not-for-profit organization dedicated to providing medical and health-related human services to low-income families and the uninsured in South Texas. MHM is second only to the government in providing health care to the indigent population in a 72-county area. HCA, based in Tennessee, is the nation's leading provider of health care services, composed of more than 250 hospitals and freestanding surgery centers in 20 U.S. states and in the United Kingdom

annual report, a quarterly report is presented on various aspects of Methodist Healthcare's community involvement focused on measuring community activity that benefits the underserved.

Population Served

In 2015, Methodist Ambulatory Surgery Hospital served

Emergency Department Patients	Inpatients	Outpatients	Outpatient Surgery	Total
699	451	1,550	4,165	6 <i>,</i> 865

In 2016, Methodist Ambulatory Surgery Hospital budgeted for

Emergency Department Patients	Inpatients	Outpatients	Outpatient Surgery	Total
715	416	1,620	4,252	4,604

Methodist Ambulatory Surgery Hospital's service area of 55 ZIP codes located in eight counties (Bandera, Bexar, Comal, Gillespie, Guadalupe, Kendall, Kerr, Medina and Wilson) serves an estimated population of just over 1.8 million² in Bexar and 26 South and Central Texas counties. Since the majority of this geographic area is Hispanic, we see this reflected in our patient population. Our service area also includes underserved rural areas.

² Based on PCensus a trademark of tetrad Computer Applications Inc. Utilizing US Census Data

Figure 1 Geographical Illustration of Population Served³

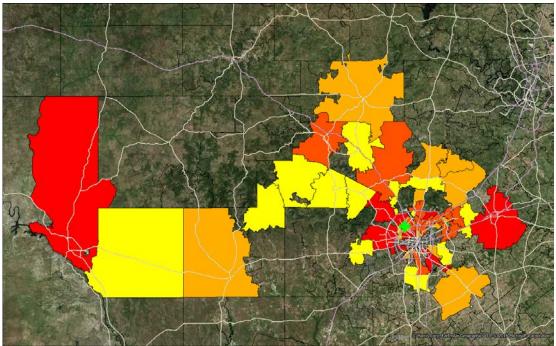


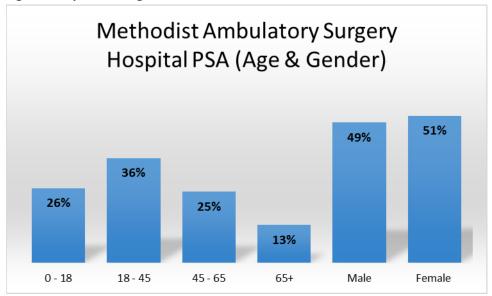
Figure 2 Population Ethnicity⁴

2015 Estimated Population by Ethnicity White Black Asian Other	1,817,104 1,404,096 105,684 43,741 263,583
2015 Estimated Population Hispanic or Latino	913,062 (50%)

³ Based on PCensus a trademark of tetrad Computer Applications Inc. Utilizing US Census Data

⁴ Based on PCensus a trademark of tetrad Computer Applications Inc. Utilizing US Census Data

Figure 3 Population Age and Gender⁵



To help meet the needs of our rural communities, Methodist Healthcare manages Medina Regional Hospital in Hondo, Texas, Val Verde Regional Medical Center in Del Rio, Texas, Cuero Community Hospital in Cuero, Texas, and Frio Regional Hospital in Pearsall, Texas. This enables these hospitals to provide the community with resources that otherwise may not be available. Methodist Healthcare provides a neuro telemedicine program, Tele-Stroke, to Connally Memorial Medical Center (Floresville, Texas), Guadalupe Valley Regional Medical Center (Seguin, Texas), Fort Duncan Regional Medical Center (Eagle Pass, Texas), Dimmitt Regional Hospital (Carrizo Springs, Texas), Laredo Medical Center (Laredo, Texas), Peterson Regional Hospital (Kerrville, Texas), Medina Regional Hospital (Hondo, Texas), Frio Regional Hospital (Pearsall, Texas), South Texas Regional Hospital (Jourdanton, Texas), Memorial Hospital (Gonzales, Texas) and Cuero Community Hospital (Cuero, Texas). The Tele-Stroke program provides these rural Texas hospitals access to Methodist Healthcare neurologists who can remotely diagnose and treat stroke patients when minutes count. Methodist Healthcare also has abdominal transplant program satellite clinics in numerous Texas cities including Lubbock, Corpus Christi, McAllen, Laredo, Temple, Austin and will open another clinic in El Paso.

The majority of the population Methodist Ambulatory Surgery Hospital serves is Hispanic. In order to meet the needs of those whose primary language is not English, Methodist Ambulatory Surgery Hospital offers:

• Language interpretation – 200 languages available 24/7, 365 days a year through a relationship with STRATUS. Methodist Healthcare has video remote interpretation (VRI) throughout the organization, for patients and families requiring language assistance.

⁵ Based on PCensus a trademark of tetrad Computer Applications Inc. Utilizing US Census Data

• Methodist Ambulatory Surgery Hospital provides materials and forms in Spanish (additional languages upon request). As a large percentage of the population turns to the internet for health and wellness information, Methodist Healthcare's website, SAHealth.com, is available in Spanish.

Community Needs Assessment Methodology, Process and Community Involvement

Methodology

Methodist Healthcare is a founding member of The Health Collaborative (THC), a nonprofit convening organization that brings together hospital systems, other health care organizations, local government and nonprofit organizations in Bexar County to identify and solve community health issues through collaboration. THC has conducted its Bexar County Community Health Needs Assessment (BCCHNA), an in-depth look at local health, since 1998 and Methodist Healthcare has used this assessment to analyze, prioritize and act on the health-care needs of the community. Conducted every three years, the BCCHNA has evolved into a national model recognized for its comprehensiveness and for the community engagement and collaboration it has fostered.

Members of THC include: Methodist Healthcare, MHM, Appddiction Studio, Baptist Health System, Bexar County Department of Community Resources, CHRISTUS Santa Rosa Health System, Community First Health Plans, Our Lady of the Lake University, the City of San Antonio Metropolitan Health District, University Health System, University of Texas Health Science Center at San Antonio Department of Family and Community Medicine, SA Clubhouse, ILX Health Strategies Group and the YMCA of Greater San Antonio. Funders of the THC Community Health Assessment are Baptist Health Foundation, Bexar County, the Kronkosky Charitable Foundation, the United Way of San Antonio, San Antonio Metro Health Department and MHM.

THC bases its community health assessment on the social determinant model which views outcomes as a product of health-related behaviors and the behaviors themselves as a likely product of social dynamics at the level of the social context of the neighborhood. The BCCHNA uses data from the San Antonio Metropolitan Health District's annual Health Profiles, a report which looks at health trends, area demographics, information on prevalence of disease, and other findings. Health Profiles looks at the population by age, by gender and by race/ethnicity as it relates to current population, projected population, birth, education, ZIP code and census tract. It also provides an in-depth look at birth trends, including fertility rates, maternal health, maternal age and ethnicity, teen births, low birth weight and premature trends and mother's BMI and weight gain. Youth indicators examined include juvenile probation, family violence, immunization rates, and child abuse. Deaths are examined by infant mortality rate and causes, life expectancy by race/ethnicity and gender, all causes of death, and years of potential life lost. The BCHNA also draws from the following data sources: Population and housing data from the U.S. Census Bureau; population estimates and projections from the Texas State Demographic

Center at the University of Texas at San Antonio; social and economic conditions data from the U.S. Census Bureau American Community Survey; crime data from the U.S. Department of Justice Uniform Crime Report; vital statistics, Behavioral Risk Factor Surveillance System (BRFSS), injury, hospital discharge, hospital bed, and health professions data from the Texas Department of State Health Services; Medicaid and public benefits data from The Texas Health and Human Services Commission; and communicable disease and vital statistic data from the San Antonio Metropolitan Health District.

Finally, data is collected at the neighborhood level with the intent of describing the social contexts that possibly give rise to health-related behaviors described in the Health Profiles and BRFSS survey data. Discussion groups and interviews were conducted city-wide with over 160 participants, ranging from community residents, service providers, government staff and officials, and advocates for the health of Bexar County's low-income, medically-underserved and minority populations (See Community Partners). These interviews and meetings took place during March and April of 2016. The Health Collaborative contracted with Community Information Now (CI:Now), a local data intermediary serving south central Texas, for quantitative data collection and analysis and for development of the assessment narrative.

The final assessment was released by THC and local city and county officials at a breakfast meeting whereby a cross section of grassroots and city leaders were invited as well as participants from the focus groups and one-on-one interviews conducted for the assessment. The Executive Summary of the assessment was provided to all attendees.

Figure 4 CHNA Timeline

	Sept 2015	Oct 2015	Nov 2015	Dec 2015	Jan 201 6	Feb 2016	Mar 2016	Apr 2016	May 2016	Jun 2016	July 2016	Aug 2016	Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017
Community Health Ass	sessment	t																
Building Relationships	Х	Х	Х	Х	Х	Х	Х	Х	Х									
Qualitative Data Collection • Key Informant Interviews • Focus Groups • Community Dialogues • Photovoice • Data analysis Draft CHA Qualitative Report CHA Community					X	X X	X X X X	X X	X X	X	X							
Release		t Diam																
Community Health Imp	rovemen	it Plan		1	1													
Project Mgmt & Partnership Dev									Х	Х	Х	Х	Х	Х				
CHIP Planning Sessions											Х	Х	Х	Х	Х			
CHIP Report Development																Х		
CHIP Community Release																	Х	
CHA/CHIP Evaluation																		
Planning Sessions																Х	Х	Х
Plan Development																	Х	Х

In order to assess the rural areas Methodist Healthcare serves, University Health System's (UHS) Regional Healthcare Partnership (RHP) 6 plan was utilized. Thee Texas Health and Human Services Commission established geographic boundaries for new Regional Healthcare Partnerships (RHP). Each RHP has developed a plan that identified the participating partners, community needs, proposed projects and funding distribution. RHP 6 is anchored by University Health System and includes the following counties: Atascosa, Bandera, Bexar, Comal, Dimmit, Edwards, Frio, Gillespie, Guadalupe, Kendall, Kerr, Kinney, La Salle, McMullen, Medina, Real, Uvalde, Val Verde, Wilson, and Zavala.

Community Partners

2	
	Scott Ackerson - Haven for Hope
	 Bryan Alsip, MD - University Health System
	 Doug Beach - National Alliance on Mental Health Illness
	Eric Cooper - San Antonio Food Bank
0.000 0.000	David Marquez - Bexar County Economic Development
One-on-One	Richard Milk - San Antonio Housing Authority
Setting Interviews	Carlos Moreno, MD - CommuniCare
with Key Regional	Vincent Nathan, PhD - San Antonio Metropolitan Health District
and City Officials	Paul Nguyen, MHA - CommuniCare
	Janet Realini, MD - Healthy Futures of Texas
	Bob Rivard - The Rivard Report
	Bill Wilkinson, MA - Roy Maas Youth Alternatives
	Nelson Wolff, JD - Bexar County
	Brian Woods, EdD - Northside Independent School District
	Melinda Abrego - CSRA
	Linda Aguero - Laurel Ridge Treatment Center
	Magdalena Alvarado
	Nadia Alvarez - San Antonio Area Foundation
	Carmen Amador - Community member
	Alberto Barragan - San Antonio AIDS Foundation
	Oralia Bazaldua - University of Texas Health Science Center San Antonio
	Brian Bowser - American Heart Association
	Mercedes Bristol - Community member
	Jacqueline Burandt - University Health Systems
	Rose Caballero - Community member
	Jessica Campbell - CommuniCare
	Velma Cantu - Community member
Discussion Group	 Hortencia Carmona - Prevention Resource Center, Region 8
Participants	Margaret Carter - Presa Community Center
	Sofia Castillo - CentroMed
	David Clear - San Antonio Metropolitan Health District
	Debra Colorado
	 Jennifer Cook - University of Incarnate Word
	Dawn Cook - Alamo Area Resource Center
	Keeley Cooper - University of Texas at San Antonio
	Guadalupe Cornejo
	Marisol Cortez - CommuniCare
	Michelle Dado - San Antonio Healthy Start/San Antonio Metropolitan Health
	District
	 Ashley Davalos - University of Texas at San Antonio
	Maria Del Carmen Martinez - Community member
	Elisabeth DeLaRosa - University of Texas Health Science Center San Antonio
	Rosita Deleon - Community member

Nicole Adele Dierschke - University of Texas Health Science Center San Antonio
Diana DiMeglio - University of Texas at San Antonio
Charlene Doria-Ortiz - Bexar County Department of Community Resources
Veronica Drake - San Antonio Behavioral Health Hospital
 Sister JT Dwyer - Daughters of Charity
Maria Escamilla - Community member
Laura Esparza - Community member
 Bethany Evans - Healthy Futures of Texas
Mary Falcon - Alamo Area Resource Center
Andrea Figueroa - Martinez Women Center
 Penny Flores - University of Texas Health Science Center San Antonio
Vince Fonseca - Population Health Institute of Texas
Martha Garcia - Community member
Guadalupe Garcia - Community member
Stephanie Garza - Presa Community Center
Martha Gonzales - Community First Health Plans
Gilbert Gonzales - Bexar County Mental Health Department
Nora Gonzales - San Antonio Metropolitan Health District
Ernesto Guajardo - University of Incarnate Word
Kristine Gusman - YMCA of Greater San Antonio
Susan Hancock - Community member
Clarissa Holloway - University Health System
• Carmona Hortencia - San Antonio Council on Alcohol and Drug Abuse/PRC Region 8
Danielle Housley - Northside Independent School Districts
Meredith Howe - Project Worth
Joe Ibarra - Community member
Judy Johnson - Community member
Courtney Kukes - University of Texas at San Antonio
Yen Le - University of Texas at San Antonio
Maria Lee - Community member
Marissa Lira - Bexar County Department of Community Resources
Juan Lopez - San Antonio Metropolitan Health District
Elizabeth Lutz - The Health Collaborative
Terri Mabrito - Voices for Children
Elizabeth Manrrique - University of Texas Health Science Center San Antonio
Kate Martin - UTHealth School of Public Health, San Antonio Regional Campus
Mario Martinez - Project Worth
Delia Martinez - Community member
Selma Martinez - Community member
Jerry Mauricio - Healthy Futures of Texas
Amanda Merck - Community member
Nilda Molinas - Community member
Kaela Momtselidze - American Cancer Society
Alan Montemayor - Community member
Sylvia Montes de Oca - Cal Farley's

 Dianna Morganti - Community member
 Ginger Mullaney - Healthy Futures of Texas
 Velma Muñiz - Bexar County Mental Health Department
 Michelle Mutchler - University of Texas at San Antonio
 MaryKay Newman - Bexar County Ryan White Program
Denholm Oldham - Maximus
Kelsey Olson - Healthy Futures of Texas
Lisa Ortega - Methodist Healthcare Ministries
 John Osten - San Antonio Metropolitan Health District
Dean Parra - Alamo Area Resource Center
George Patrin - Serendipity Alliance
 Jocabed Peña - Presa Community Center
 Jeannette Peña - San Antonio Council on Alcohol and Drug Abuse
Alice Perez - Community member
 Sandra Pett - Bexar County Ryan White Program
Caleb Rackley - Community member
 Norma Ramirez - Daughters of Charity Services San Antonio
Ruben Ramos - Amerigroup
Pamela Ramsey - Brighton San Antonio
 Mrudula Rao - Stone Oak Psychiatry / AFSP
Varda Ratner - The Patient Institute
 Jesse Renteria - San Antonio Council on Alcohol and Drug Abuse
Carolina Reyes - Community member
Eric Reynolds - Community member
Clarissa Rivera - University Health System
 Laurie Rodriguez - Northside Independent School District
Vanessa Rodriguez - San Antonio Healthy Start/San Antonio Metropolitan Health
District
 Roger Rodriguez - San Antonio Independent School District
Javier Roman - Community member
Shirleen Romo - SA Clubhouse
Lea Rosenauer - Girls Inc of San Antonio
 Kendra Royal - Johnson & Johnson
Thomas Schlenker - Interlex
Eric Schoenfeldt - Community member
 Pegeen Seger - University of Texas Health Science Center San Antonio
Kathy Shields - San Antonio Metropolitan Health District
Jeff Skelton - Community member
Sharon Small - Community member
Nicole Solis - Child Protective Services
Luis Solis - Community member
Gloria Soria - Community member
Ellen Spitzen - San Antonio Metro Health District
Teresa Stewart - Community member
Barbara Stocks - San Antonio Independent School District

Mark Stoeltje - SA Clubhouse
Melanie Stone - University of Texas Health Science Center San Antonio
Michelle Swisher - CommuniCare
 JoAnn Tampke - Community member
Judith Temple - Community member
 Bruce Thompson - Center for Health Care Services, Children's Services
Chris Torres - Texas A&M University San Antonio
Amanda Torres - Community member
Melissa Valerio – UTHealth School of Public Health, San Antonio Regional Campus
 Liset Vasquez - Texas A&M University San Antonio
 Juanita Vasquez-Lopez - Methodist Healthcare Ministries
Katherine Velasquez - Community member
Chris Velasquez - San Antonio Metropolitan Health District
Laura Villarreal - Girls Inc of San Antonio
Emily Weatherall - Cal Farley
 Carolyn Welker - Martinez Street Women's Center
 Irene White - Martinez Street Women's Center
Linda Williams - SA Clubhouse
Lauren Witt - Nix Health
 Leslie Wood - Children's Bereavement Center
Christine Yanas - Methodist Healthcare Ministries
 April Yancey - University of Texas at San Antonio
Chris Zapata - Community member
 Vanessa Zuniga - San Antonio AIDS Foundation

In addition, the methodology took into account input from a variety of organizations representing the medically underserved, low-income and minority populations and populations with chronic disease needs, including City of San Antonio Metro Health, Our Lady of the Lake University, South Texas Family AIDS Network, San Antonio Sports, Head Start, United Way, the Food Bank, University Health System Texas Diabetes Institute, American Heart Association, American Diabetes Association, Voices for Children, the Children's Shelter, Haven for Hope, Boys and Girls Clubs, Clarity Child Guidance Center, Alliance for a Healthier generation, Communities in Schools, Catholic Charities, Planned Parenthood, University of Texas School of Public Health, Family Services Association and many more.

Identified Community Needs: Working Together to Meet the Goals

In order to work collaboratively with other health care systems and organizations, businesses and nonprofits and make a true impact in our community, Methodist Healthcare has adopted the health priority areas based upon the 2016 three-year Bexar County Community Health Assessment. The health priority areas for our hospitals listed in priority order (these same five priority areas have not changed since the last community health improvement plan adopted in 2014):

Community Health Priority No. 1: Healthy Eating and Active Living

The percentage of Bexar County adults who consumed fruits and vegetables five or more times per day has remained flat over recent years, estimated at 17.1% (14.2%-20.5%) in 2011 and 15.4% (11.8%-19.8%) in 2013. Although the point estimate is lower in 2013, the confidence intervals overlap almost completely, meaning there was actually little or no real change among BRFSS respondents. The news is better for sugar-sweetened drinks with the percent of adults reporting that they never drink sugar-sweetened beverages increasing from 22.7% (16.9%-29.7%) in 2012 to 36.0% (31.2%-41.1%) in 2014. Because the confidence intervals do not overlap at all, there clearly was a true increase among respondents

Community Health Priority No. 2: Healthy Child and Family Development

Although the birthrate among females aged 15 to 19 continues to decline, the percentage of births to mothers receiving prenatal care in the first trimester has also declined, leading to an increase in the rate of hospitalizations for complications of pregnancy or childbirth.

Community Health Priority No. 3: Safe Communities

Although the numbers point to crime rate decreasing overall in Bexar County, there are other contributing factors to "Safe Communities". Motor vehicle accidents are a common cause of death among children age one to 14, pointing to the importance of child safety seats and seat belts as well as adult and older teen driver behaviors. Transportation is seen as one of the greatest challenges for the region for those who do not have private vehicles or easy access to public transportation.

Community Health Priority No. 4: Behavioral and Mental Well-Being

Health is about more than the physical body. Mental health is related to how people think, feel and act as they cope with life—how they handle stress, relate to others and make choices. In Bexar County, There is growing clinical recognition of the impact of mental health conditions and disorders on overall health status and costs. There does appear to be a steady increase in the mental illness related hospitalization rate between 2010 and 2014. The goal is to improve comprehensive behavioral health services and access for all.

Community Health Priority No. 5: Sexual Health

One of the most pressing health concerns voiced by Bexar County residents is teen pregnancy. Although the birth rate to teens ages 15-19 has declined in Bexar County, it is still an overwhelming concern. In addition, sexually transmitted infections can threaten people of any age, including unborn babies. While syphilis can be easily detected and treated in the mother, when untreated it can have devastating effects on the health of the baby. Our goal is to ensure that males and females have access to education and resources to promote sexual health.

Area Health Services⁶

A listing of existing health care facilities and other resources:

A listing of existing health care facilities and other resources:							
The Primary and Core Based Statistical Area offers	The Secondary Service Area offers the following						
the following health facilities and resources:	health facilities and resources:						
 Methodist Healthcare System Methodist Healthcare Ministries Wesley Health and Wellness Center Bishop Ernest T. Dixon Jr. Clinic San Antonio Metro Health Department Bexar County Department of Community Resources Atascosa County (South Texas Regional Medical Center) Bandera County Comal County (CHRISTUS Santa Rosa) Guadalupe County (Guadalupe Regional Medical Center) Kendall County Medina County (Medina Healthcare) Wilson County (Medina Healthcare) Wilson County (Connally Memorial Hospital) County Health Departments University Health System Audie L. Murphy Memorial VA Hospital San Antonio Army Medical Center CHRISTUS Santa Rosa Baptist Health System Nix Health Southwest General Hospital San Antonio State Hospital San Antonio State Hospital Barrio Comprehensive Family Health Center Centro Med La Mision Family Health Adolescent Pregnancy and Parenting Program Father Flanagan's Boys Town Center for Health Care Services Child Guidance Center Southwest Mental Health Center 	 health facilities and resources: Caldwell County DeWitt County (Cuero Community Hospital) Dimmit County (Dimmit County Memorial Hospital) Edwards County Frio County (Frio Regional Hospital) Gillespie County (Hill Country Memorial Hospital) Gonzalez County (Gonzalez Health Care) Karnes County (Otto Kaiser Memorial Hospital) Kerr County (Peterson Regional Hospital) Kinney County La Salle County La Salle County (Yoakum Community Hospital/Lavaca Medical Center) Maverick County (Fort Duncan Regional Hospital) McMullen County Real County Uvalde County (Uvalde Memorial Hospital) Val Verde County (Val Verde Regional Hospital) Val Verde County (Doctors Hospital/Laredo Medical Center) Zavala County County Health Departments 						
Warm Springs							

⁶ The area health services listed is a sampling of the represented services available and is not all inclusive

Methodist Ambulatory Surgery Hospital's Community Health Improvement Plan based on the Community Health Needs Assessment

Community Health Priority No. 1: Healthy Eating and Active Living

Community Goal: To foster social change and strengthen positive behaviors around healthy eating and active living to ensure access to nutritious foods and built environments that enable all residents to make healthy choices and lead healthy lives.

Objective: To promote the number of residents in our community who eat healthy and engage in physically active behaviors.

Strategies: To provide education and assistance through literature, speaking seminars, health fairs, programs, and partnering with non-profits in the community.

Tactics: In 2017, Methodist Ambulatory Surgery Hospital will implement the following tactics, with yearly updates through 2019:

• Hold one donation drive for the San Antonio Food Bank each year. Methodist Ambulatory Surgery Hospital anticipates holding one donation drive in 2017.

Impact: Through the tactics listed above, Methodist Ambulatory Surgery Hospital will bring awareness to healthy eating and active living issues as well as contribute to the decrease of obesity, hypertension and diabetes rates.

Measurement:

- Attendance to events, seminars, classes and screenings
- Number of website views
- Percent increase in social media followers
- Percent increase in affinity group members

Key Partners:

- American Heart Association
- San Antonio Food Bank

Community Health Priority No. 2: Healthy Child and Family Development

Community Goal: To make pregnancy and early childhood the focus of system level changes that support healthy child and family development.

Objective: To promote family stability by supporting education classes that promote mental health, community resources and health conditions for children.

Strategy: To provide resources to the community encouraging healthy children.

Tactics: In 2017, Methodist Healthcare will implement the following tactics, with yearly updates through 2019:

• Collect school supplies for TAPAN (Texas Association of PeriAnesthesia Nurses. Methodist Ambulatory Surgery Hospital anticipates one school supply drive in 2017.

Impact: Through the tactics listed above, Methodist Ambulatory Surgery Hospital will bring awareness to childhood development issues.

Measurement:

- Attendance to events, seminars, classes and screenings
- Number of website views
- Percent increase in social media followers
- Percent increase in affinity group members

Key Partners:

TAPAN

Community Health Priority No. 3: Safe Communities

This community health priority is addressed as a system. Please refer to page 19 of the Methodist Healthcare System plan, Community Health Priority No. 3.

Community Health Priority No. 4: Behavioral and Mental Well-Being

This community health priority is addressed as a system. Please refer to page 20 of the Methodist Healthcare System plan, Community Health Priority No. 4.

Community Health Priority No. 5: Sexual Health

This community health priority is addressed as a system. Please refer to page 21 of the Methodist Healthcare System plan, Community Health Priority No. 5.

Implementation of the Strategy

The implementation strategy, including an execution plan and prioritization of health needs, services and metrics for each hospital will be presented to and approved by the Community Benefits Committee, Methodist Healthcare Community Board, Methodist Healthcare Board of Governors and MHM.

The chief executive officer at each facility has appointed an advocate to work with the Methodist Healthcare Strategic Planning and Market Services Department to implement and monitor the plan. The hospital chief financial officer also has appointed a representative to attend the meetings to monitor budget adherence. These individuals form a committee that will meet twice a year.

Methodist Healthcare's implementation strategy for each hospital facility includes:

- Communication plan
- Priority initiative work plans
- Role and responsibility assignments
- Measures/indicators for success along with baseline data

Additional monitoring of the plan will occur through the quarterly community benefits reports to the Community Benefits Committee and the annual charity care report compiled and distributed to the Community Benefits Committee.

Availability of the Community Health Needs Assessment and Implementation Plan

A digital version of the assessment and plan will be available on our website, <u>www.SAHealth.com</u>. A printed version will be distributed to employees and physicians and will be available to the public upon request.

Approval:

Methodist Ambulatory Surgery Hospital Chief Executive Officer By: Scott Davis

Date: