


Baylor Scott & White Health Dallas Metropolitan Health Community

Community Health Implementation Strategies 2022

An Action Plan for the Community Health Needs Assessment

BaylorScott&White HEALTH

Dallas Metropolitan Health Community hospitals

- Baylor Scott & White Institute for Rehabilitation – Dallas
- Baylor Scott & White Heart and Vascular Hospital – Dallas
- Baylor Scott & White Medical Center – Uptown
- Baylor University Medical Center
- North Central Surgical Center
- Baylor Scott & White Medical Center – Sunnyvale

Baylor Scott & White HEALTH

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Executive summary

As the largest not-for-profit healthcare system in Texas, Baylor Scott & White Health (BSWH) understands the importance of serving the health needs of its communities. To do that successfully, BSWH is constantly surveying patients, their families and neighbors to understand the issues they face when it comes to making healthy life choices and healthcare decisions.

In early 2022, a BSWH task force led by the community benefit, tax compliance and corporate marketing departments began assessing the current health needs of all the communities served by BSWH hospitals. IBM Watson Health analyzed the data for this process and prepared a final report made publicly available in June 2022.

The Dallas Metropolitan Health Community is home to a number of these hospitals with overlapping communities, including:

- Baylor Scott & White Institute for Rehabilitation – Dallas
- Baylor Scott & White Heart & Vascular Hospital - Dallas
- Baylor Scott & White Medical Center – Uptown
- Baylor University Medical Center
- North Central Surgical Center
- Baylor Scott & White Medical Center - Sunnyvale

The community served by the hospital facilities listed above is Collin, Dallas, Ellis, Henderson, Hunt, Kaufman, Navarro, Rockwall, Tarrant and Van Zandt counties. The community served was based on the contiguous ZIP codes within the associated counties that made up nearly 80% of the hospital facilities' inpatient admissions over the 12-month period of FY20.

BSWH and IBM Watson Health examined more than 59 public health indicators and conducted a benchmark analysis of this data, comparing the community to overall state of Texas and US values. A community focus group, including a representation of minority, underserved and indigent populations, provided input for a qualitative analysis. Group interviews with key community leaders and public health experts provided depth and context to the report.

Any community needs that did not meet state benchmarks were included in a magnitude analysis index. Understanding the degree of difference from the benchmark helped determine the relative severity of the issue. The outcomes of this quantitative analysis were aligned with the qualitative findings of the community input sessions to elicit a list of health needs in the community. These health needs fell into one of four quadrants within a health needs matrix: high data/low qualitative, low data/low qualitative, low data/high qualitative or high data/high qualitative.

Hospital and clinic leadership, along with community leaders, reviewed the matrix in a session that established a list of significant prioritized needs. The session included an overview of the community demographics, a summary of health data findings and an explanation of the quadrants of the health needs matrix.

Those health needs falling into the "high data/high qualitative" quadrant were considered the most significant and in need of the most attention. Each session attendee identified and prioritized six needs. The most significant health needs emerged from this process.

Letter to the community

Baylor Scott & White is committed to improving health in the communities we serve. As part of that commitment, we conduct a Community Health Needs Assessment (CHNA) every three years and report on our community's current health needs. We also provide the Community Health Implementation Strategies report, which is our plan for addressing the identified needs.

We are pleased to present the 2022 implementation strategies for the Dallas Metropolitan Health Community, a companion piece to the CHNA that provides plans for addressing our most pressing health needs. The CHNA for the health community hospital facilities incorporates input from influencers such as key stakeholders, area residents, faith-based organizations, healthcare providers, neighborhood association leaders, elected officials, health professionals, hospital and system leaders, the medically underserved, and others.

The full report can be found at **BSWHealth.com/CommunityNeeds**.

As part of the largest not-for-profit health system in Texas, we take our commitment to the Dallas Metropolitan Health Community very seriously. By working with community organizations and residents, we have identified and will focus on some of the toughest problems plaguing our most vulnerable residents.

Sincerely,

Dallas Metropolitan Health Community Hospitals

Dallas Metropolitan Health Community implementation strategies

The overall purpose of the implementation strategies is to align the hospitals' charitable mission, program services and limited resources with the findings of the CHNA. To meet the requirements under IRC Section 501(r)(3) and the Texas Health and Safety code Chapter 311, the written implementation strategies include the following:

- A list of the prioritized needs the hospital plans to address and the rationale for not addressing other significant health needs identified
- Actions the hospital intends to take to address the chosen health needs
- The anticipated impact of these actions and the plan to evaluate such impact (e.g., identify data sources that will be used to track the plan's impact)
- Identification of programs and resources the hospital plans to commit to addressing the health needs
- Description of any planned collaboration between the hospital and other facilities or organizations in addressing the health needs

Dallas Metropolitan Health Community needs

The following health concerns are identified in priority order based on the results of the CHNA.

Priority	Need	Category of need
1	Obesity/physical inactivity	Conditions/diseases
2	Diabetes	Conditions/diseases
3	Access to primary healthcare	Access to care
4	Gaps in behavioral health/ substance abuse services	Health behaviors/mental health conditions/diseases
5	Access to mental healthcare (providers/services)	Access to care/mental health
6	Food insecurity/access to healthy food	Environment
7	Infant mortality rate	Injury and death
8	Transportation	Environment

The facilities listed on the next page collaborated to develop these joint implementation strategies addressing the significant health needs identified above. Hospital leadership selected the following health needs to confront in collaboration with the community and based on the anticipated impact, available hospital and clinic resources, and the expertise of the respective facilities.

Community needs addressed

Facility	Obesity/ physical inactivity	Diabetes	Access to primary care	Gaps in behavioral health/substance abuse services	Access to mental healthcare (providers/ services)	Transportation
Baylor Scott & White Institute for Rehabilitation – Dallas			✓		✓	✓
Baylor Scott & White Heart & Vascular Hospital – Dallas	✓	✓	✓			
Baylor Scott & White Medical Center – Uptown	✓		✓	✓	✓	
Baylor University Medical Center	✓	✓	✓			
North Central Surgical Center	✓	✓	✓	✓		
Baylor Scott & White Medical Center – Sunnyvale		✓	✓			✓

Implementation strategies

Baylor Scott & White Heart and Vascular Hospital – Dallas

Priority need 1: Obesity/physical inactivity

Planned programs/ strategies	◥ Cardiac rehab program ◥ Referrals to Power of Ten—weight management center at Baylor University Medical Center ◥ Referrals to BSW Health and Wellness Center, CitySquare and BSW Community Care Clinics for chronic disease management ◥ Leap for Life educational webinars ◥ Re-establish relationships with South Dallas churches and other organizations to provide health education programs focusing on nutrition and physical activity ◥ Standardize education for patients with BMI >30 ◥ Add BMI screenings to community outreach events ◥ Baylor Heart Center app provides at-home exercises
Anticipated impacts	◥ Raise awareness for the risks associated with BMI >30 ◥ Provide resources to help patients get to goal ◥ Lower risk for cardiovascular disease ◥ Increased utilization of weight management program ◥ Improved community awareness and knowledge level
Hospital resources	◥ Financial support ◥ In-kind donations ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Power of Ten ◥ BSW Health and Wellness Center ◥ Worth Street Clinic ◥ CitySquare ◥ American Heart Association ◥ CycleNation ◥ Concilio ◥ Nancy Liberman's basketball camp
Outcome measures	◥ Number of referrals ◥ Number of outreach events ◥ Number of screenings ◥ Reported health outcomes from partnering organizations

Baylor Scott & White Medical Center – Uptown

Priority need 1: Obesity/physical inactivity

Planned programs/ strategies	◥ Maintain Center of Excellence designation with the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP)
Anticipated impacts	◥ Increase avenues for obesity treatment
Hospital resources	◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Outcome measures	◥ Reaccreditation with the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) ◥ Number of bariatric surgeries provided

Baylor University Medical Center

Priority need 1: Obesity/physical inactivity

Planned programs/ strategies	◥ Provide health education covering topics such as nutrition, physical activity and wellness in ZIP codes with high needs ◥ Referrals to BSW Health and Wellness Center for access to exercise classes, fitness and aerobic room ◥ Expanded model of care for other communities in the southern sector of Dallas ◥ Provide screening for chronic diseases such as kidney, high blood pressure, cardiovascular disease and diabetes ◥ Expand access to low-cost produce through community farm stands
Anticipated impacts	◥ Provide resources to help patients get to goal ◥ Improved access to healthcare and education ◥ Improved health outcomes
Hospital resources	◥ Financial support ◥ In-kind donations ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Frazier Revitalization ◥ Foremost Health Center ◥ American Diabetes Association ◥ American Heart Association ◥ City of Dallas ◥ City of Dallas Parks and Recreation ◥ Bonton Farms ◥ Jubilee Park and Community Center ◥ Ministerial Advisory Board – 30 churches ◥ National Kidney Foundation ◥ Parkland Healthcare ◥ Concilio
Outcome measures	◥ Number of events ◥ Number of attendees ◥ Improved biometrics

North Central Surgical Center

Priority need 1: Obesity/physical inactivity

Planned programs/ strategies	◥ Dietitian to offer menu items for patients identified as obese (BMI) and healthy offerings at the bistro for visitors/employees ◥ Physical therapy to offer specific exercises to these patients to increase their activity post-surgery ◥ Incorporate education through our Total Joint Program ◥ Referrals to free or low-cost community programs focused on weight management and exercise
Anticipated impacts	◥ Improved health outcomes over time ◥ Reduced readmissions for surgical patients ◥ Reduce complication rates for surgical patients with higher BMI
Hospital resources	◥ Financial support ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Camp Gladiator ◥ Planet Fitness ◥ Other community resources that serve those at risk
Outcome measures	◥ Number of patients identified at risk ◥ Referrals to community resources

Baylor Scott & White Heart and Vascular Hospital – Dallas

Priority need 2: Diabetes

Planned programs/ strategies	◥ Hispanic Cardiovascular Institute's involvement in community health fairs in Dallas ◥ Discharge education on the importance of glucose monitoring and following a heart-healthy diet ◥ HeartSpeak podcast (offered in English and Spanish) for topics associated with diabetes management and heart health ◥ Leap for Life educational webinars ◥ Cardiac rehabilitation team provides education regarding diabetes, including the importance of regular glucose monitoring, A1C checks, and the role of exercise, weight maintenance and healthy eating ◥ Diabetes-focused articles in the monthly e-newsletter distributed to 63,000 emails ◥ Collaboration with Texas Vascular Associates and its population of people with diabetes and limbs at risk to provide educational materials and/or resources ◥ Referrals to community resources, including the BSW Health and Wellness Center and BSW Community Care Clinics	
Anticipated impacts	◥ Increased awareness of the risks of diabetes ◥ Provide resources to help patients get to goal	◥ Lower risk for diabetes ◥ Improved community awareness and knowledge level
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Meeting space/virtual platform	◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ BSW Health and Wellness Center ◥ BSW Community Care Clinics ◥ Dallas Independent School District	◥ American Heart Association ◥ Concilio
Outcome measures	◥ Number of referrals ◥ Number of outreach events	◥ Number of screenings ◥ Partnering organizations reported health outcomes

Baylor University Medical Center

Priority need 2: Diabetes

Planned programs/ strategies	◥ Referrals for uninsured patients to community resources, including the BSW Health and Wellness Center and BSW Community Care Clinics, to manage chronic conditions such as diabetes ◥ Offer free diabetes education classes, including Healthy Eating, Exercise and Lifestyle Program (H.E.L.P.) ◥ Online diabetes support class available on BSWHealth.com ◥ Partnership with St. Vincent de Paul Pharmacy to qualify uninsured patients for no-cost prescriptions for chronic conditions such as diabetes ◥ Provide glucose screenings and diabetes health education at the BSW Health and Wellness Center ◥ Expand access to low-cost produce through community farm stands ◥ Cash and in-kind contributions to other not-for-profit community organizations
Anticipated impacts	◥ Provide resources to help patients get to goal ◥ Improved access to healthcare and education ◥ Improved health outcomes
Hospital resources	◥ Financial support ◥ In-kind donations ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Frazier Revitalization ◥ Foremost Health Center ◥ American Diabetes Association ◥ American Heart Association ◥ City of Dallas ◥ City of Dallas Parks and Recreation ◥ Bonton Farms ◥ Jubilee Park and Community Center ◥ Ministerial Advisory Board – 30 churches ◥ National Kidney Foundation ◥ Parkland Healthcare ◥ Concilio
Outcome measures	◥ Number of events ◥ Number of attendees ◥ Improved biometrics in program participants ◥ Number and value of medications filled ◥ Amount of financial and in-kind contributions

North Central Surgical Center

Priority need 2: Diabetes

Planned programs/ strategies	◥ Implement A1C testing on all patients through pre-admission testing ◥ Increase glucose monitoring on the post-surgical unit ◥ Discharge phone calls for diabetes patients to reduce rates of complications ◥ Offer and encourage diabetic menu for patients identified at risk during their stay on the post-surgical unit ◥ Referrals to free or low-cost community diabetes management programs
Anticipated impacts	◥ Improved health outcomes over time ◥ Reduced readmissions for surgical patients with a diabetes diagnosis ◥ Reduce infection rates for surgical patients with a diabetes diagnosis
Hospital resources	◥ Financial support ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ American Diabetes Association ◥ Other community resources that serve those at risk
Outcome measures	◥ Number of patients identified at risk ◥ Referrals to community resources

Baylor Scott & White Medical Center – Sunnyvale

Priority need 2: Diabetes

Planned programs/ strategies	◥ Develop and facilitate a free diabetes education class ◥ Provide health education outreach to local community organizations ◥ Partner with the American Diabetes Association local liaison and other medical vendors for educational events ◥ Offer wound care services to patients with diabetes regardless of their ability to pay as outlined in the BSWH financial assistance policy ◥ Referrals to free or low-cost community diabetes management programs
Anticipated impacts	◥ Improved health outcomes over time
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ American Diabetes Association ◥ Other community resources that serve those at risk
Outcome measures	◥ Number of community events ◥ Number served ◥ Referrals to community resources

Baylor Scott & White Institute for Rehabilitation – Dallas

Priority need 3: Access to primary healthcare

Planned programs/ strategies	◥ Ensure patients have primary care follow-up within 30 days of discharge ◥ Referrals for uninsured patients to community resources, including BSW Community Care Clinics, to serve as their medical home ◥ Provide free or discounted care as outlined in the BSWH financial assistance policy
Anticipated impacts	◥ Improved health outcomes over time ◥ Reduced hospital readmissions
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ BSW Community Care Clinics
Outcome measures	◥ Referrals to community resources ◥ Number of people receiving assistance; unreimbursed cost of care

Baylor Scott & White Heart and Vascular Hospital – Dallas

Priority need 3: Access to primary healthcare

Planned programs/ strategies	◥ Referrals for uninsured patients to community resources, including BSW Community Care Clinics, to serve as their medical home ◥ Provide clinical training program to prepare nurses and other healthcare professionals for the medical workforce ◥ Conduct enrollment services to assist in the qualification of the medically underserved ◥ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
Anticipated impacts	◥ Increased availability of healthcare providers in a medically underserved area ◥ Enable access to care, such as Medicaid, Medicare, SCHIP and other government programs or charity care programs for use in any hospital within or outside the hospital ◥ Increased access to primary care and/or specialty care for indigent people regardless of their ability to pay
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ BSW Community Care Clinics ◥ Area colleges and universities
Outcome measures	◥ Number of patients served ◥ Number of students trained ◥ Number of people certified for insurance programs ◥ Number of people receiving assistance; unreimbursed cost of care

Baylor University Medical Center

Priority need 3: Access to primary healthcare

Planned programs/ strategies	◥ Increase access to care through the Community Health Worker Program ◥ Referrals for uninsured patients to community resources, including BSW Community Care Clinics, to serve as their medical home ◥ Provide clinical training programs to prepare nurses and other allied health professionals for the medical workforce ◥ Provide clinical training through the department of Graduate Medical Education, including a host of residency and fellowship programs, to prepare physicians for the medical workforce ◥ Recruitment of physicians and other health professionals to serve in areas identified as medically underserved ◥ Conduct enrollment services to assist in the qualification of the medically underserved ◥ Research that includes clinical and community health research and studies on healthcare delivery that are generalizable, shared with the public and funded by the government or a tax-exempt entity, including any of the entities in this health community ◥ Cash and in-kind contributions to other not-for-profit community organizations existing to increase access to care for the community ◥ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
Anticipated impacts	◥ Increased availability of healthcare providers in a medically underserved area ◥ Increase number of healthcare providers in the community ◥ Enable access to care, such as Medicaid, Medicare, SCHIP and other government programs or charity care programs for use in any hospital within or outside the hospital ◥ Increased access to primary care and/or specialty care for indigent people regardless of their ability to pay
Hospital resources	◥ Financial support ◥ In-kind donations ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ BSW Community Care Clinics ◥ Community social service organizations ◥ Area colleges and universities
Outcome measures	◥ Number of patients served ◥ Number of people certified for insurance programs ◥ Number of students trained ◥ Number of people receiving assistance; unreimbursed cost of care

Baylor Scott & White Medical Center – Uptown
North Central Surgical Center

Priority need 3: Access to primary healthcare

Planned programs/ strategies	◥ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
Anticipated impacts	◥ Increased access to primary care and/or specialty care for indigent people regardless of their ability to pay
Hospital resources	◥ Financial support ◥ Staff time ◥ Supplies
Outcome measures	◥ Number of people receiving assistance; unreimbursed cost of care

Baylor Scott & White Medical Center – Sunnyvale

Priority need 3: Access to primary healthcare

Planned programs/ strategies	◥ Develop and open a primary care clinic ◥ Provide free and/or discounted care to financially or medically indigent patients as outlined in the financial assistance policy
Anticipated impacts	◥ Primary care office is at full capacity within 12 months of opening ◥ Increase access to care to primary care and/or specialty care for indigent people regardless of their ability to pay
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Meeting space/virtual platform ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Kairos
Outcome measures	◥ Opening of new primary care clinic ◥ Number of people receiving assistance; unreimbursed cost of care

Baylor Scott & White Medical Center – Uptown

Priority need 4: Gaps in behavioral health/substance abuse services

Planned programs/ strategies	◥ Create transfer agreements and relationships with services/providers for education and treatment
Anticipated impacts	◥ Increase access to behavioral health/substance abuse services via an increased pathway to care upon emergency presentation or medical history review
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Dallas Police Department ◥ Non-profit shelters ◥ Organizations existing to increase access to behavioral healthcare and substance abuse services
Outcome measures	◥ Execution of transfer agreements ◥ Number of referrals

North Central Surgical Center

Priority need 4: Gaps in behavioral health/substance abuse services

Planned programs/ strategies	◥ Update screening guidelines and training for emergency department, pre-admit testing and post-surgical unit staff to identify patients at risk ◥ Social worker on-site to provide referrals for services at discharge ◥ Partner with Texas Health Resources through contractual agreement for transfers or referrals when needed
Anticipated impacts	◥ Improve health outcomes over time ◥ Provide resources need for patients identified at risk
Hospital resources	◥ Financial support ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Texas Health Resources
Outcome measures	◥ Number of patients identified at risk ◥ Number of referrals to community resources

Baylor Scott & White Institute for Rehabilitation – Dallas

Priority need 5: Access to mental healthcare (providers/resources)

Planned programs/ strategies	◥ Partner with mental health providers for referrals for patients at risk
Anticipated impacts	◥ Increased access to mental healthcare
Hospital resources	◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ BSW Community Care Clinics ◥ Local mental health providers
Outcome measures	◥ Number of referrals to community resources

Baylor Scott & White Medical Center – Uptown

Priority need 5: Access to mental healthcare (providers/resources)

Planned programs/ strategies	◥ Partner with mental health providers for referrals for patients at risk ◥ Create transfer agreements and relationships with services/providers for education and treatment
Anticipated impacts	◥ Increased access to mental healthcare
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Dallas Police Department ◥ Non-profit shelters ◥ Organizations existing to increase access to behavioral healthcare and substance abuse services
Outcome measures	◥ Number of referrals to community resources

Baylor Scott & White Institute for Rehabilitation – Dallas

Priority need 8: Transportation

Planned programs/ strategies	◥ Provide or refer patients to appropriate transportation services for pre-admit, discharge and follow-up appointments
Anticipated impacts	◥ Improved health outcomes over time
Hospital resources	◥ Financial support ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Vetted community transportation vendors
Outcome measures	◥ Number of rides provided ◥ Decrease in appointment cancellations

Baylor Scott & White Medical Center – Sunnyvale

Priority need 8: Transportation

Planned programs/ strategies	◥ Increase collaboration with the facility staff, medical staff and system partners, including Faith Community Health, to better serve patients in need of transportation and other social issues limiting access to care ◥ Contracts with transportation vendors
Anticipated impacts	◥ Increased access to transportation resources ◥ Decrease avoidable inpatients days due to a lack of transportation from the hospital to a discharge destination ◥ Help patients foster and develop long-term relationships with local community partners, including churches and Faith Community Health, which helps empower the patient to take increased ownership in their care
Hospital resources	◥ Financial support ◥ Outreach/health education materials ◥ Staff time ◥ Supplies
Community partner(s) involved in the work	◥ Vetted community transportation vendors ◥ Faith Community Health ◥ Local churches
Outcome measures	◥ Number of referrals ◥ Volume of transports via contracted vendors

Community needs not addressed

BSWH provides a wide range of needed healthcare services and community benefits through adherence to its mission, using its resources and capabilities, and remaining a strong organization. By focusing on our strengths and allocating our resources appropriately, we can achieve a greater impact in the communities we serve.

Needs not addressed:

- Food insecurity/access to healthy foods
- Infant mortality rate

There are multiple community and state agencies whose expertise and infrastructure are better suited for meeting the needs not addressed in the Community Health Implementation Strategies. Therefore, BSWH leadership has opted to focus its resources on the listed priorities for the betterment of the community.

Program evaluation

All community benefit activities align with community benefit goals by adhering to BSWH's policies and procedures. This ensures appropriate governance of the activities outlined in these Community Health Implementation Strategies. The hospitals evaluate programs and activities on a regular basis to ensure the appropriate use of staff time and hospital resources.

To support the hospital's community benefit objectives, requests for contributions from other unrelated 501(c)(3) charitable organizations managed by the community benefit department are considered, and those activities addressing a priority need in the community are given preference. All charitable giving is reviewed and approved annually by hospital leadership and the BSWH governing board.

BSWH regularly assesses, evaluates and reports on the programs addressing the significant needs found in identified communities. Regular conversations with community members, feedback on this plan, and modifying programs and services enhance the opportunities patients have to connect to community resources. As a result, these hospital facilities achieve a reduction in unnecessary healthcare costs and improved delivery of overall quality of care.

Please direct any feedback on the assessment or implementation plan to **CommunityHealth@BSWHealth.org**.

This document may be accessed at **BSWHealth.com/CommunityNeeds**.