



## **2022 Community Health Needs Assessment Strategy to Address Identified Needs**

As required by IRS Code 501(r), once the needs of the community have been identified, a strategy must be implemented to address those needs and made public.

UMC has identified per the following those needs that can be addressed with its resources to help or alleviate them.

### **1. Access to Care**

UMC continues to respond to growing demand for access to care. Based on a demographic study performed for Lubbock and the surround area, UMC Health System underwent a master planning project to identify strategic investments in capital to increase capacity and as a result increase access to care. This includes the construction of a new remote campus strategically located in a high growth area in Lubbock County. UMC will also be replacing the existing Cancer Center with a significantly larger Cancer Center in response to continued needs for regional access to cancer care. These projects are necessary to free up critical space on the main campus for the addition of a new inpatient tower to replace outdated facilities and provide a significant increase in the availability of new inpatient capacity. As rural hospitals continue to be at risk of closure, more pressure is being put on urban facilities to fill the gap. In conjunction with each of these expansion projects, UMC is working with Texas Tech University and other providers to strategically increase physician capacity to match facility availability.

### **2. Access to Primary Care Physicians**

UMC is looking to the future and growth of the city and is poising itself to be able to deliver services where the need arises. The System has through its long-term strategic plan, identified by zip code service areas, and needs within them. This may include physician offices, wellness offerings, outpatient procedural areas including lab testing and radiology and EMS stations. The thought is to get the care out to the citizens where they are rather than requiring them to come to a centralized main campus.

### **3. Uninsured/Limited Insurance/Access and Poverty and lack of Financial Resources**

UMC Health System as the County Hospital District provides coverage to eligible County residents through the Lubbock County Medical Indigency program. Additional charity programs include the Trauma Charity program and the Presumptive Charity program. The Trauma Charity Program provides write offs of a full or a portion of patient responsibility for eligible individuals that qualify as a trauma patient. The Presumptive Charity program provides full or partial write



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off of patient responsibility based on the presumed income based on the Federal Poverty guidelines.

- Access to healthcare facilities and practitioners is evidenced by the opening of new clinics within UMC Physicians. Some of which were a direct result of actions needed to address population needs identified in the 1115 Waiver process. Many of our associated clinics provide diabetic care and continued growth in our infusion center allows patients to discharge and return to receive the needed therapies in an outpatient and more convenient setting and potentially saving as many as 3,000 hospital days, annually.
- The system added a hospital based Urgent Care Clinic in close proximity to the Main Campus Emergency Center to provide 24-hour access to patients seeking care that would otherwise be required to go to the Emergency Center. This has been so successful that UMC has already begun the process of creating a second, larger Urgent Care Clinic on the campus of the new Health and Wellness Hospital that is expected to open in early 2024.
- UMC EMS provides in-home consultations aimed at patients who are most vulnerable for unnecessary ambulance transports and ER visits. Patients who habitually request emergent services are managed toward reduced utilization, all under the direction of a MD director. Due to the success of the service an additional full-time paramedic has been added to the service to increase the number of patients that can be served.

#### 4. Chronic Health Issues, Obesity, and Healthy behaviors and healthy lifestyle choices

- The most common causes of death in America (Obesity, Heart Disease, Stroke, Hypertension, Diabetes, etc.) are included in this identified need. These conditions are treated through prevention, screening, and treatment in primary care practices. The Lubbock area suffers under a primary care physician shortage. To address this deficit, UMC has worked with UMC Physicians to recruit additional primary care physicians and advanced practice professionals to Lubbock to support care for patients with these health issues. This work will continue into future as the physician/provider shortage though better after these recruitments persists. See the item for Access to Primary Care Physicians section for more details.
- UMC will continue the wrap around services with focused care coordination efforts for all diabetics but especially uncontrolled diabetics (>9 A1C). This initiative will include home visits by a community health worker, complete health assessment, regular



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communication, scheduling of appointments, connection with community resources to address social influencers and more. UMC will also continue the diabetic patient education sessions (offered a minimum of 6 times per year and on demand). These education sessions are open to our community, and we partner with the Lubbock Food Bank. The Food Bank provides the space and a food box for all participants at the end of each session. During the sessions, attendees receive diabetic specific education including food prep demos for healthy meals and portions. This education is empowerment for these patients.

- Diabetes and pre-diabetes are especially prevalent and have a major adverse impact on the health of individuals in our community. UMC has now launched the first diabetes prevention program in our area. Preventing diabetes will have a major impact on improvement of the health of our community.
- There is also a focus on high-risk patients. Many of these patients lack any type of formal education regarding their chronic illness. They also lack the resources to manage these diseases. This is extremely prevalent in the under/non-insured patient population. One of the main contributors to this process is medication non-adherence. Many patients do not have the adequate means to pay for medications to help control their chronic diseases. UMC has expanded the Primary Health Care Program (for diabetes, hypertension, and hyperlipidemia) to significantly reduce the monetary burden of prescription medications for chronic conditions for our underserved patients.

### 5. Shortage of HealthCare Workers

- The health care workforce in hospitals and health systems continues to decline. According to the U.S. Bureau of Labor Statistics, employment in the health care field is down by over 80,000 jobs since February 2020. There are nursing and allied professional workforce critical shortages. The need for registered nurses, surgical technicians, respiratory therapists, radiology technician and paramedics in the Lubbock area is critical. There is an increasing demand to replace healthcare workers who are retiring or going into non-healthcare careers. Workforce pressures exist across a variety of health care professions, the annual turnover rate at UMC was the highest in over 15 years at 21.2%. UMC has experienced the use of agency nurses for staffing due to trends that occurred during COVID and have continued due to the high rates of pay for agency nurses. This has also affected the demand increased salaries for staff and



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increased our shortage of nurses. There is a rise in clinician burnout that was accelerated by the COVID pandemic. This has characterized high emotional exhaustion, high cynicism, and a low sense of personal accomplishment from work. UMC has deployed a range of programs and interventions to help assist staff to become more resilient, but the pressure is seen daily by increased call ins, sick time, and extended leaves. Physician shortages are a growing concern in West Texas, as we often have a difficult time recruiting to Lubbock.

- UMC is looking to the future to recruit healthcare workers by being innovative with work hours / shifts and offering increased sign on bonuses. UMC also offers recruitment bonuses to current staff to recruit their friends and family to come work at UMC. UMC provides support to our staff to build resiliency through counseling, virtual support, and a tranquility room. UMC is looking to the future and growth of the city and is poising itself to be able to deliver services where the need arises, such as on the south side of Lubbock at the new Health & Wellness Hospital. This will also give employees the opportunity to work in a new location. Nursing, respiratory, and medical laboratory have utilized foreign recruitment to fill some difficult to recruit positions.
- As a teaching institution, UMC allows students from all disciplines to do clinicals and shadowing to gain experience and knowledge. UMC also participates in a job shadowing program for those who want exposure to the medical field while still choosing a life pathway. UMC leaders participate in a mentoring program for students who are needing clinical sites or healthcare sites for final degree projects, this has been beneficial for recruitment.
- UMC has participated in city wide job fair events and hosted our own recruitment fairs. UMC Human Resources and Nurse Recruitment go to colleges and universities to discuss job opportunities and tell students about UMC Health System.

### 6. Access to Affordable prescription medications

UMC Health System has implemented the use of medication therapy management clinics in an effort to assist patients is not only assessing the full spectrum of medications that they are currently using, but also to help to identify opportunities to access their medications at a lower out of pocket cost. The clinics review all medications and explore the potential use of generics rather than branded pharmaceuticals, pharmaceutical manufacturers assistance programs, and



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potential substitutions that may be lower cost. Additionally, the medication therapy management clinic provides the opportunity to access 340b pricing that can be passed on to patients that potentially have a significant impact on the cost of medications. This program has been very successful and additional locations are being developed to increase capacity and make access easier for patients. All medication decisions are made in coordination with the patient's primary care provider.

UMC Health System has also implemented a Primary Health Care Provider program specifically to help diabetic patients with access to lower cost medications. The program allows patients to access UMC Physicians providers as a fully covered service and then coordinates with the medication therapy management clinics to do a full review of medications. 340b eligible medications are then provided with little or no out of pocket cost to the patients.

The following needs were identified as priorities in the Community Needs Assessment, but are not specific initiatives that UMC Health System is working on at this time.

### **1. Access to Medical Specialists**

UMC Health System continues to work with TTUHSC to address specialist shortages in the Community. Gaps in provider panels have been identified and while UMC does provide funding associated with some specialists, UMC does not have the ability to directly employ most specialists through the hospital or UMC Physicians, its related physician group.