

LMH

LILLIAN M. HUDSPETH MEMORIAL HOSPITAL



Community Health Needs Assessment

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Special Thanks

- Steve Smith, CEO
- Joe Marshall, COO
- Sutton County Hospital District Board of Directors
- LMH Medical Staff
- LMH Leadership & Management Team
- Community Focus Group Participants
- Area Health Providers

Overview of Community Health Needs Assessment

- In 2014 the Affordable Care Act required all 501 (c) (3) hospitals to conduct a CHNA every 3 years
- The main purpose is to provide a comprehensive review of health needs among diverse constituents, how well those needs are being met, and identify any gaps in services available or constituent groups who receive those services
- Another purpose is to identify partnership opportunities with other providers or agencies
- CHNA serves as basis for development of a required action plan that must be developed with an intent to improve community health and reduce gaps among those who receive services

Data Sources

Public data sources

- CMS, U.S. Census Bureau, County Health Rankings, Sparkmap, and other public and private sources as documented

Written questionnaire

- Comments from a written questionnaire were gathered from diverse public and private stake holders residing or working in the hospital service area

Personal Contact Interviews

- 18 Focus Group Participants
 - Boards of Directors, Medical Staff, Leadership Team, Department Leaders, Community Residents representing diverse occupations and experiences

Overview of Sutton County and Surrounding Service Area

Sutton County is located on the western edge of the Edwards Plateau, approximately 130 miles northwest of San Antonio. The county seat is Sonora.

Indian tribes were among the earliest inhabitants of Sutton County, dating back approximately 10,000 years. After 1870 Anglo American settlers began moving into the area for the abundance of land after the Indian population began to dissipate.



Overview of Sutton County and Surrounding Service Area

During the 1880's access to land and well water led to the introduction of cattle ranching. Cattle, however, began to be displaced by sheep and Angora goats between 1890 and 1900. Sutton County became one of the leading producers of sheep wool and Angora Mohair wool in Texas throughout the 1900's.

Oil and Natural Gas production became a leading economic contributor from 1920 through the remainder of the century, peaking in 1977.



Overview of Sutton County and Surrounding Service Area

The Sonora Caverns comprise about seven miles of caves that attract thousands of visitors each year. The Caverns and hunting are the leading attractions that draw tourists to Sutton County each year.

Source: [Brian C. Hosmer](#). Texas State Historical Association. Handbook. Updated February 19, 2021. [Sutton County \(tshaonline.org\)](#)



A black stethoscope with a silver metal chest piece and two black ear pieces lies diagonally across a white surface. In the background, a silver Apple keyboard is visible, showing keys like S, D, F, G, H, J, K, L, P, and the command key. The lighting is soft, creating a professional and medical atmosphere.

Overview of Lillian M Hudspeth Memorial Hospital

Our Mission:

To provide quality health care and services which are responsive to the needs of our community in the spirit of our founders.

Our Vision:

To commit our compassion to significantly improving every dimension of healthcare in the community we serve.

Source: Lillian M. Hudspeth Memorial Hospital Website
www.Sonora-hospital.org/about/#chna



Overview of Lillian M. Hudspeth Memorial Hospital

Critical Access Hospital

Lillian M. Hudspeth Memorial Hospital is a licensed 12-bed Critical Access Hospital. It is a public Hospital District governed by a 7-person board of directors.

LHMH serves as a primary medical and 24-hour emergency care provider for a remote rural population that includes the entire county.

Each hospital bed can also be used as a Swing Bed to provide extended care to patients who qualify for longer lengths of stay or rehabilitation.



Overview of Lillian M. Hudspeth Memorial Hospital

Critical Access Hospital

The hospital is a critical resource to serve high volume highway transportation on IH-10 and U.S. Hwy 277 which both run right through town.

LMH has earned Level IV Trauma Center designation, serving as part of the Texas Trauma Network.

The next nearest hospital offering a higher level of care is San Angelo, located 67 miles away.



Overview of Lillian M. Hudspeth Memorial Hospital

Community Focused

Hospital and clinic services are open and accessible to all who present for care without discrimination for race, ethnicity, or other legal qualifying factors. This claim was affirmed by the diverse constituents who participated in the focus groups as well as randomly selected local residents.

Appointments for unfunded patients with specialists and for non-emergent care may be delayed due to income constraints. The hospital maintains an indigent care program, seeks to qualify low-income patients for charity, discounted charges, extended installment payments, and various other programs that provide funding assistance.



Overview of Lillian M. Hudspeth Memorial Hospital

Community Focused

LMH continually strives to improve services, quality, technology, cost-effectiveness, and local access for every person who lives, works, or travels in the service area. Distantly located from larger towns with greater resources, the community culture is to value what they have and use their resources to meet the needs of themselves and others.

One evidence of this commitment is conducting this community health needs assessment. As a public hospital LMH is not required to conduct a CHNA but chooses to do this in fulfillment of its mission and vision to “improving every dimension of healthcare in the community we serve.”



Overview of Lillian M. Hudspeth Memorial Hospital

Community Focused

More than a town, Sonora reflects community in their relationships and positive spirit of determination.

LMH employees take great pride in living in the community and working for the local hospital that provides care for their families and neighbors. The residential population is quick to express their support and appreciation for their hospital.

The Board and leadership team at LMH are diligent in striving to fulfill its mission “to provide quality health care and services which are responsive to the needs of our community”.

Despite challenges of maintaining a rural hospital amidst declining population and shrinking reimbursement, this “community” pulls together to do whatever it takes to serve others.



Overview of Lillian M. Hudspeth Memorial Hospital

Hospital Employment and Patient Utilization (2023)

- # ER Registrations 1,450
- # Outpatient Registrations 5,118
- # RHC Clinic Visits 8,134
- # Inpatient and Swing Bed Discharges 82
- # Patient Observation Days 87
- # Full-Time Equivalent Employees 72
- Annual Payroll \$4,037,655



Overview of Lillian M. Hudspeth Memorial Hospital

Hospital Service Lines

- Emergency Department
- Radiology
- Lab
- Physical Therapy and Rehabilitation
- Inpatient Services
- Swing Bed
- Rural Health Clinic
- Cardiac Rehab
- Cardiovascular Services
- Pulmonary Rehab
- Hospice
- Sonora Medical Clinic



Overview of Lillian M Hudspeth Memorial Hospital

Medical Staff

- Primary Care Physicians 2
 - William Griffin, DO
 - Charles Pajestka, MD
- Family Nurse Practitioners 2
 - Rebecca Simmons-Rios, FNP-C
 - Sonia Castro, FNP-C
- Physician Assistant 1
 - Diana Arteaga, PA-C



Overview of Lillian M. Hudspeth Memorial Hospital

Medical Specialty Clinic Services Provided Locally

- Cardiology
- Urology
- Orthopedics
- General Surgery



Overview of Lillian M. Hudspeth Memorial Hospital

Nearest Area Hospitals

• Schleicher County Medical Center	El Dorado	14 beds	22 miles
• Kimble Hospital	Junction	15 beds	59 miles
• Shannon West Texas Mem. Hosp.	San Angelo	403 beds	67 miles
• Shannon South	San Angelo	171 beds	64 miles
• Val Verde Regional Medical Center	Del Rio	93 beds	91 miles
• Peterson Regional Medical Center	Kerrville	124 beds	110 miles
• Methodist Hospital	San Antonio	2,885 beds	165 miles

Local Economic Impact to Service Area of LMH

- **Economic Impact of Operations for a Critical Access Hospital**
- *(Using Actual LMH numbers)*
- **Employment**
 - Direct Impact fte's: 72 (number of full-time equivalent employees by LMH)
 - Multiplier 1.34
 - Secondary Impact fte's: 24 (additional job creation impact within service area)
 - Total Impact fte's: 96 (total employment impact of LMH)
- **Wages, Salaries, and Benefits**
 - Direct Impact: \$4.1 Million (total WSB provided by LMH)
 - Multiplier 1.19
 - Secondary Impact \$780k (additional WSB benefit created within service area)
 - Total Impact \$4.88 Million (total WSB generated in service area as result of LMH and LMH)
- **Average retail sales impact (.25 WSB):** (\$1.02 Million retail sales generated in service area resulting from LMH)
- *SOURCE: National Center for Rural Health Works. Research Study. October 2016. Data from National Center, Oklahoma Office of Rural Health, and IMPLAN*

Local Economic Impact of Construction Activities of a Critical Access Hospital

(Example based on research average)

Employment Impact					
<u>Construction (\$ millions)</u>	<u>Average Employment</u>	<u>Multiplier</u>	<u>Secondary Impact</u>	<u>Total Jobs Impact</u>	
\$1	9	1.23	2	11	
		WSB Impact			
<u>Construction (\$ millions)</u>	<u>Average WSB</u>	<u>Multiplier</u>	<u>Secondary Impact</u>	<u>Total Impact</u>	<u>Retail Sales Impact</u>
\$1	\$332,551	1.25	\$80,638	\$403,189	\$100,797

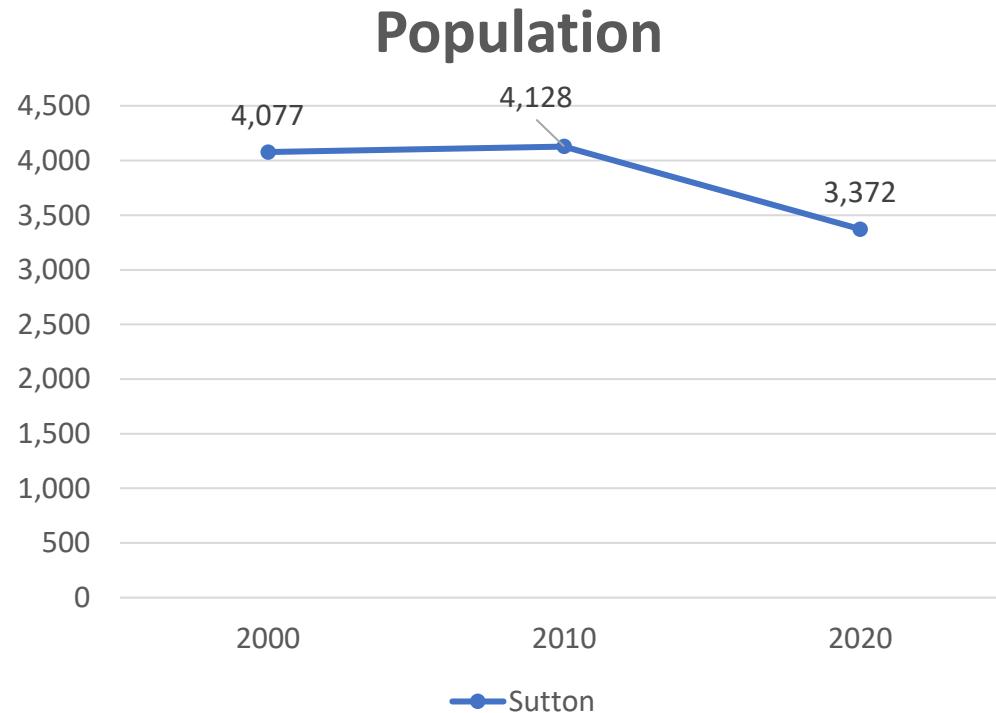
Summary of Economic and Employment Impact of LMH on the Service Area

- 96 Jobs within the service area attributed to LMH
- \$4.88 Million creation of area wages, salaries, and benefits
- \$1.02 Million impact on retail sales within the service area
- Every \$1 Million construction contributes to 11 new jobs with total wage, salary, benefits generated \$403,000 (*old 2016 numbers, higher today*)
- What is the Importance of Jobs and Wages on the Health and Wellness of a Community?
 - Jobs create income and benefits. Income and benefits is one key factor impacting individual health and wellness.

Demographic and Social Factors

Population

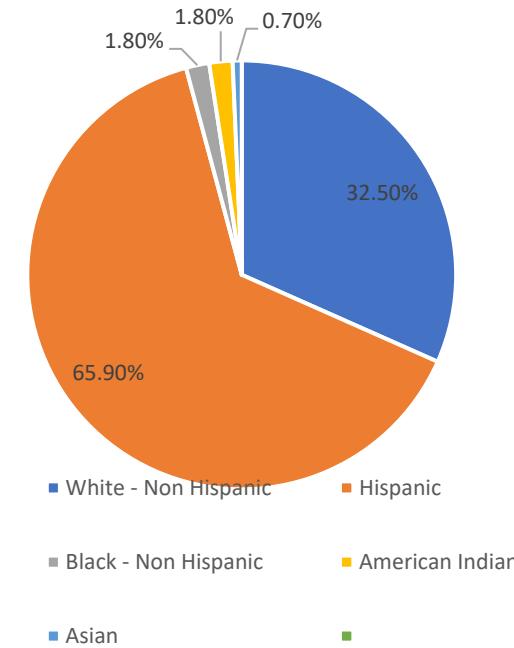
Source: U.S. Census.gov/quickfacts. 2023.
<https://www.census.gov/quickfacts/suttoncountytexas>



Races

Source: U.S. Census.gov/quickfacts. 2023
<https://www.census.gov/quickfacts/suttoncountytexas>

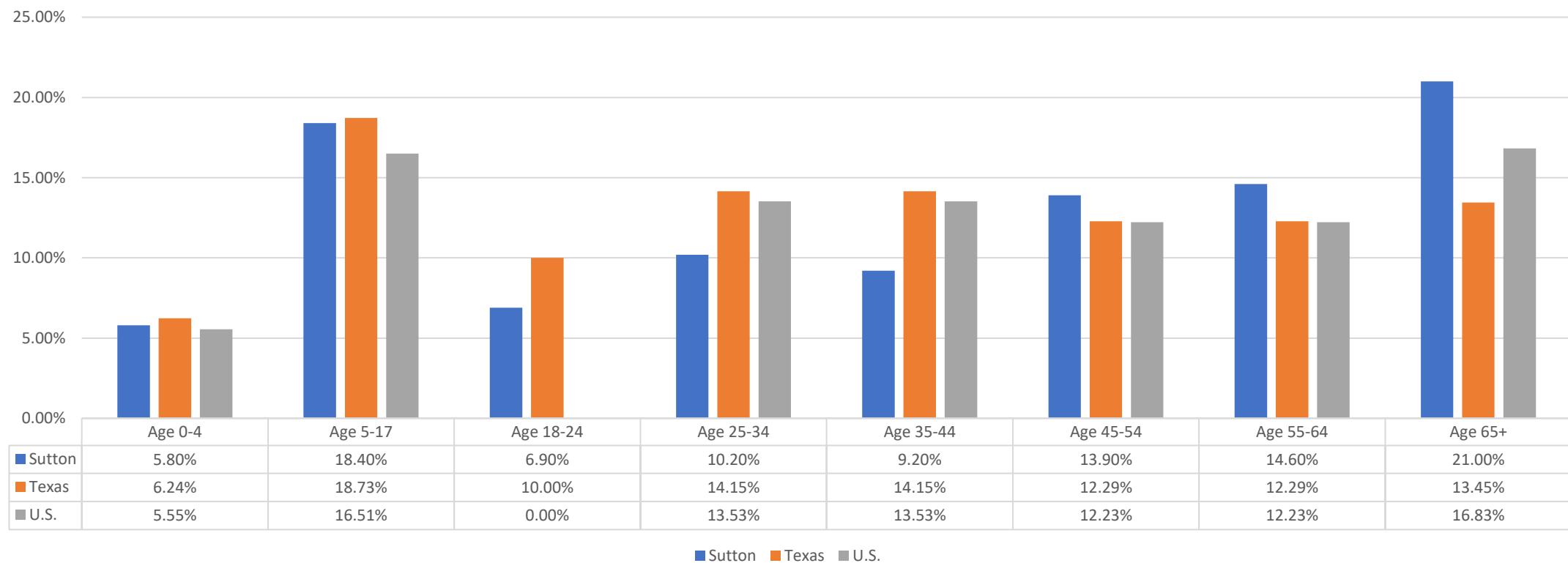
Race in Sutton County



Demographic and Social Factors

Source: Sparkmap. US Census Bureau, [Decennial Census](#). 2020

Population by Age Group



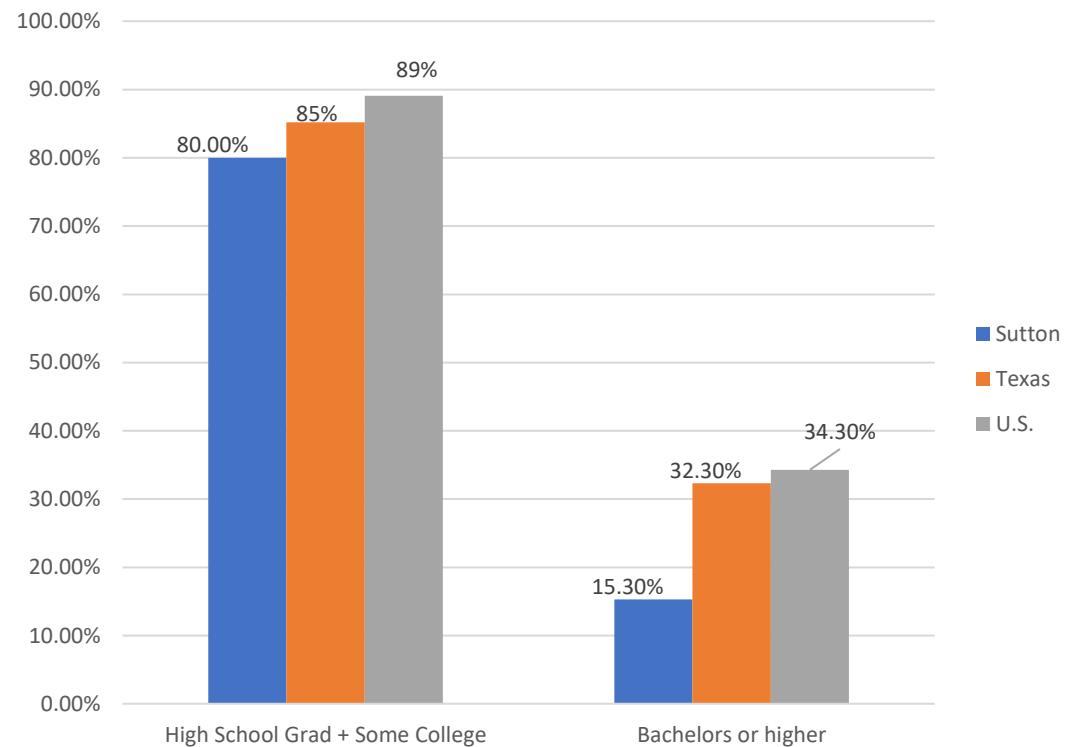
Demographic and Social Factors

Source: *Income: U.S. Census Bureau. Census.gov/quickfacts/suttoncountytx. 2023.*

Median Income

	Sutton	Texas	U.S.
Median Income	\$56,778	\$73,035	\$75,149

Education



Comparison of Health Outcomes and Factors – Texas 244 Counties Included

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

(yellow highlight indicates unfavorable to State and U.S.)

<u>HEALTH OUTCOMES</u>	Sutton County 2023	Texas	U.S.
Overall Health Ranking	#75 / 2 nd Quarter		
Life Expectancy	79.7	79.1	79.1
Diabetes Prevalence	13%	12%	9%
Poor Physical Health Days / last 30 days	3.8	4.2	4.4
Poor Mental Health Days / last 30 days	4.6	2.9	3.0

Comparison of Health Outcomes and Factors – Texas 244 Counties Included

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

(yellow highlight indicates unfavorable to State and U.S.)

<u>Health Behaviors</u>	Sutton County 2023	Texas	U.S.
Adult Smoking	17%	13%	16%
Food Insecurity	14%	13%	12%
Alcohol Impaired Driving Deaths (per 100k)	7%	25%	27%
STI's (per 100k)	132	466	481
Teen Births (per 1,000)	42	29	19
Physical Inactivity	30%	25%	22%
Adult Obesity	38%	36%	32%

Comparison of Health Outcomes and Factors – Texas 244 Counties included

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

(yellow highlight indicates unfavorable to State and U.S.)

Health Factors	Sutton County 2023	Texas	U.S.
Clinical Care			
Uninsured Adults	27%	24%	12%
Uninsured Children	19%	12%	5%
Primary Care Physicians	930:1	1640:1	1310:1
Dentists	1660:1	1610:1	1380:1
Mental Health Providers	Not available	690:1	340:1
Mammogram Screening	33%	34%	37%
Flu Vaccinations	25%	48%	51%

Comparison of Health Outcomes and Factors – Texas 244 Counties Included

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

(yellow highlight indicates unfavorable to State and U.S.)

Health Factors <u>Social and Economic</u>	Sutton County 2023	Texas	U.S.
Median Household Income	\$56,778	73,035	\$75,149
Children in Poverty	21%	20%	17%
Children Eligible for Free Lunch	56%	60%	53%
Child Care Cost Burden	21%	25%	27%
High School Completion Rate	77%	85%	89%
Some College	52%	64%	67%

Comparison of Health Outcomes and Factors – Texas 244 Counties Included

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

(yellow highlight indicates unfavorable to State and U.S.)

Health Factors Social and Economic	Sutton County 2023	Texas	U.S.
Injury Deaths (per 100k)	Not available	60	76
Violent Crime (per100k)	120	429	416
Drinking Water Violations	No		
Severe Housing Problems	15%	17%	17%
Air Pollution Particulate (micr/m3)	7.2	8.6	7.4

Favorable and Unfavorable Comparative Health Factors for Sutton County v. Texas and U.S.

Source: County Health Rankings & Roadmaps

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

Favorable

Life Expectancy

Poor Physical Health Days

Alcohol Impaired Driving Deaths

Sexually Transmitted Infections (STI's)

Primary Care Physicians available

Dentists available

Mammogram Screening

Child-Care Cost Burden

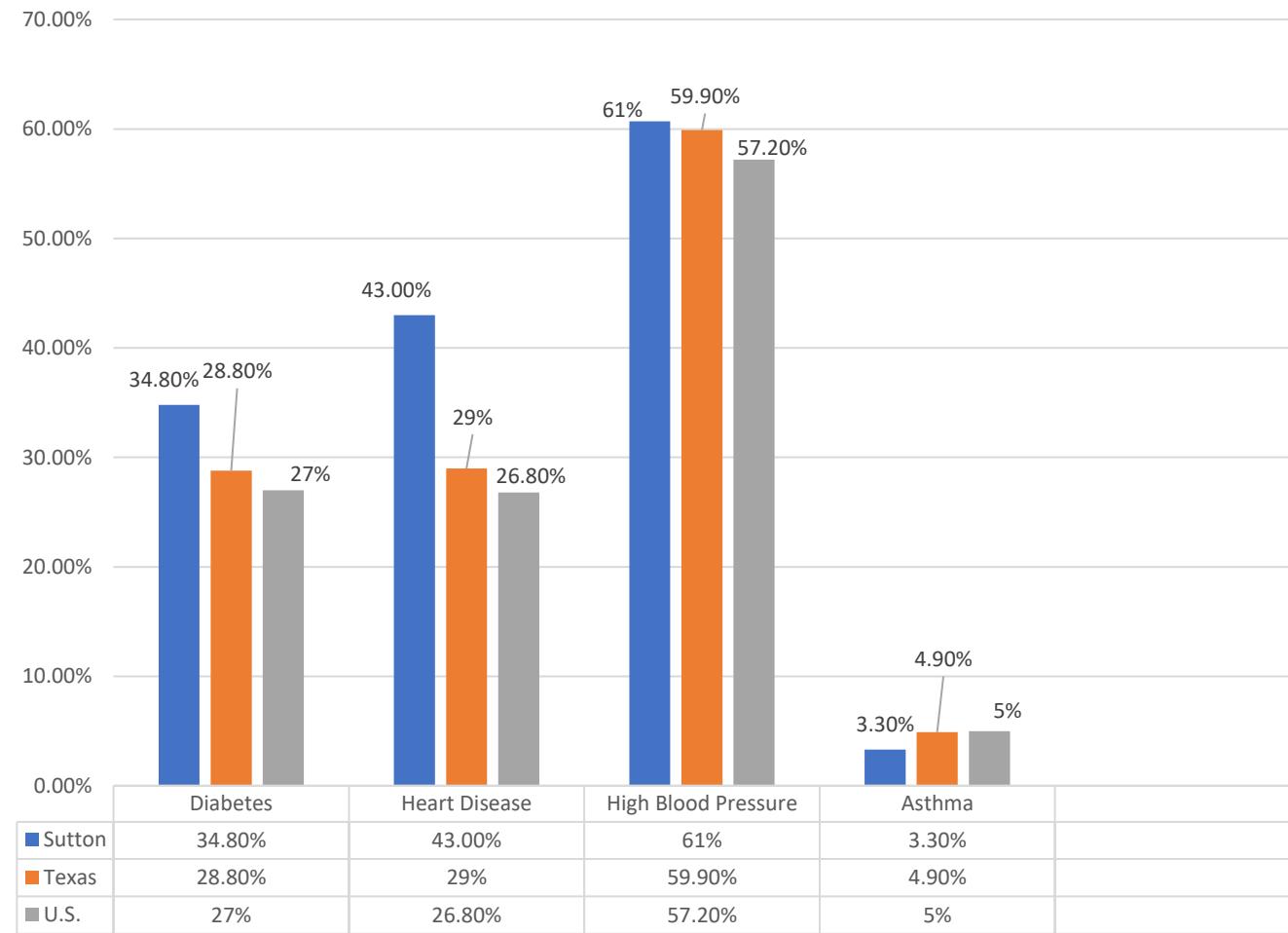
Unfavorable

- Diabetes Prevalence
- Adult Obesity
- Poor Mental Health Days
- Adult Smoking
- Flu Vaccines
- Teen Births
- Physical Activity
- Uninsured Adults and Children
- High School Completion
- Some College
- Household Income

Chronic Disease Prevalence in Medicare Population

- Source: Sparkmap. Data
- Source: Centers for Medicare & Medicaid Services, [Centers for Medicare & Medicaid Services - Chronic Conditions](#). 2018.
- Source geography: County.
- Source: Sparkmap. State Cancer Profiles. 2017-2021

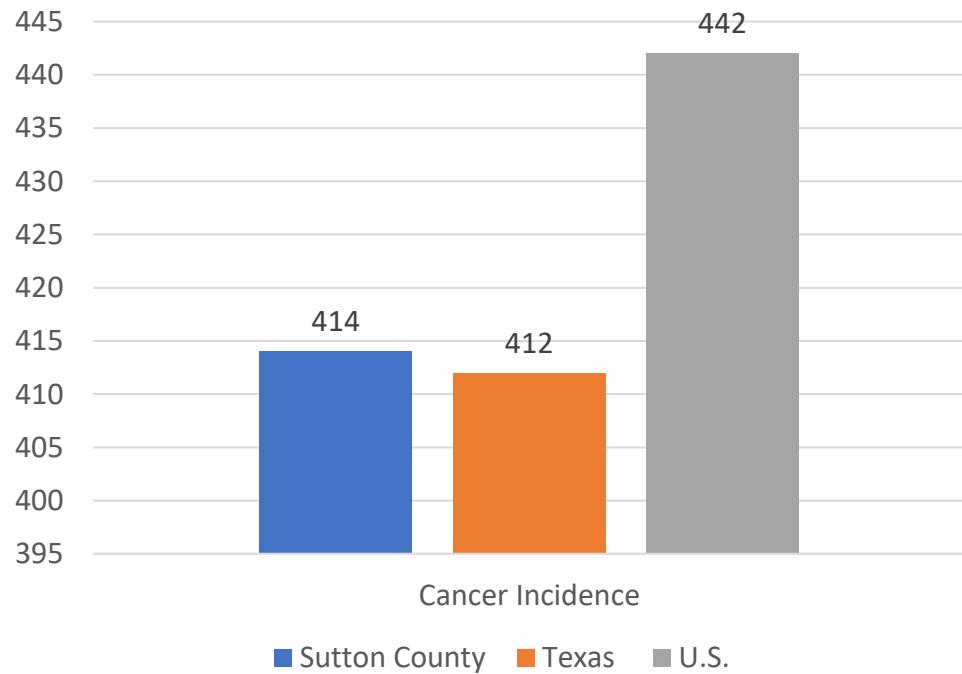
Chronic Disease Prevalence in Medicare Population



Incidence and Mortality of Cancer (per 100k)

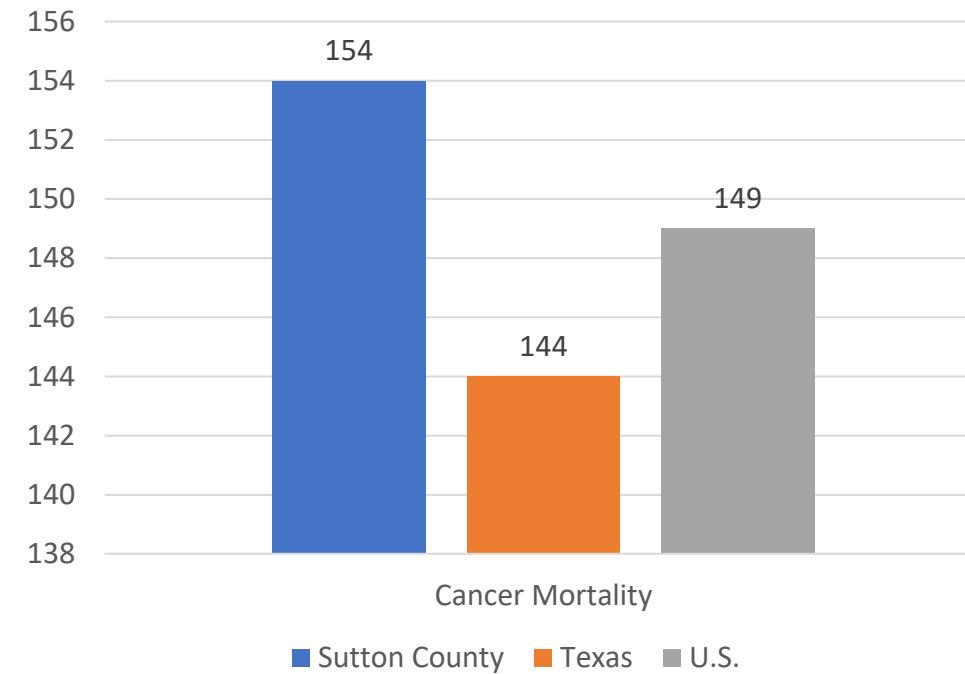
Incidence of Cancer

Source: [Sparkmap.org](https://www.sparkmap.org/). [State Cancer Profiles](#). 2016-20.



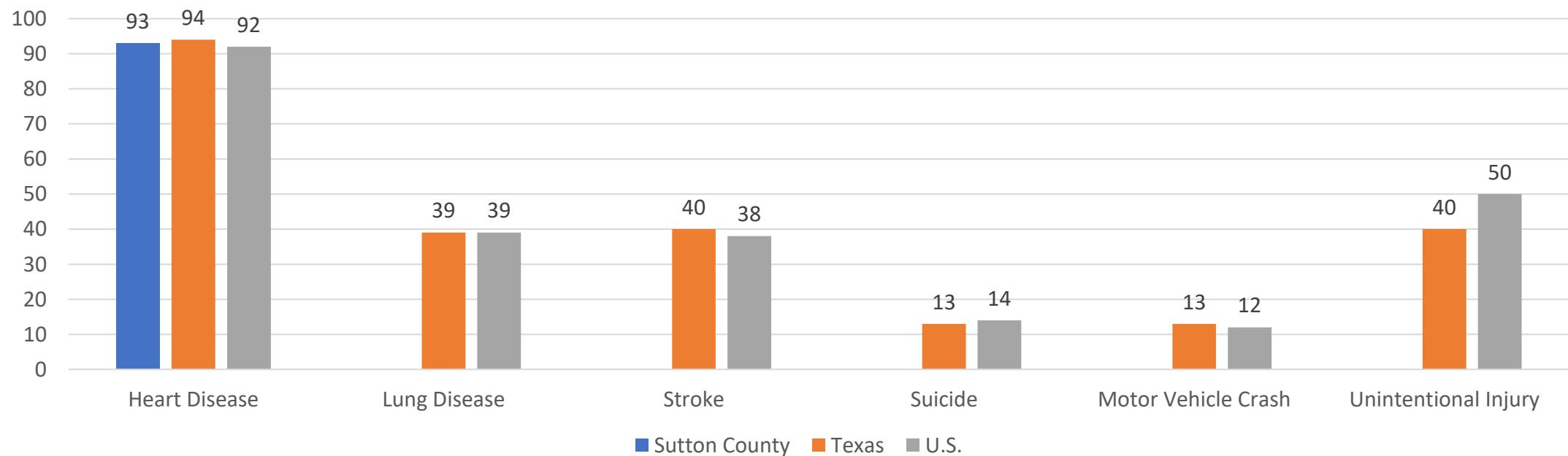
Mortality of Cancer

Data Source: [Sparkmap.org](https://www.sparkmap.org/). Centers for Disease Control and Prevention, [CDC-National Vital Statistics System](#). Accessed via [CDC WONDER](#). 2016-20.



Mortality Rate of Chronic Disease

Source: Centers for Disease Control and Prevention, [CDC - National Vital Statistics System](#). Accessed via [CDC WONDER](#). 2016-2020.



COVID-19 Incidence and Outcomes

Source: [Johns Hopkins University](#). Accessed via [ESRI](#). Additional data analysis by [CARES](#). 2022.

	<u>Sutton County</u>	<u>Texas</u>	<u>U.S.</u>
• Confirmed Cases	943		
• Total Deaths	14		
• COVID-19 Deaths per 100k population	373	325	338
• COVID-19 Fully Vaccinated Adults	54%	73%	74%

Comparison of Health Factors and Outcomes of LMH and Service Area to Texas and U.S.

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton?year=2023>

Favorable

Asthma

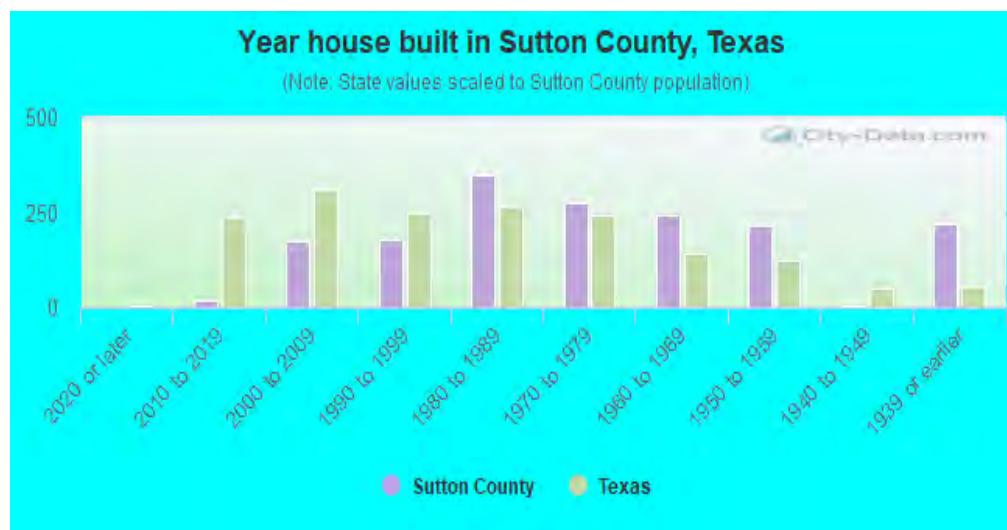
Unfavorable

- Diabetes Prevalence
- Heart Disease Prevalence
- High Blood Pressure Prevalence
- Cancer Mortality

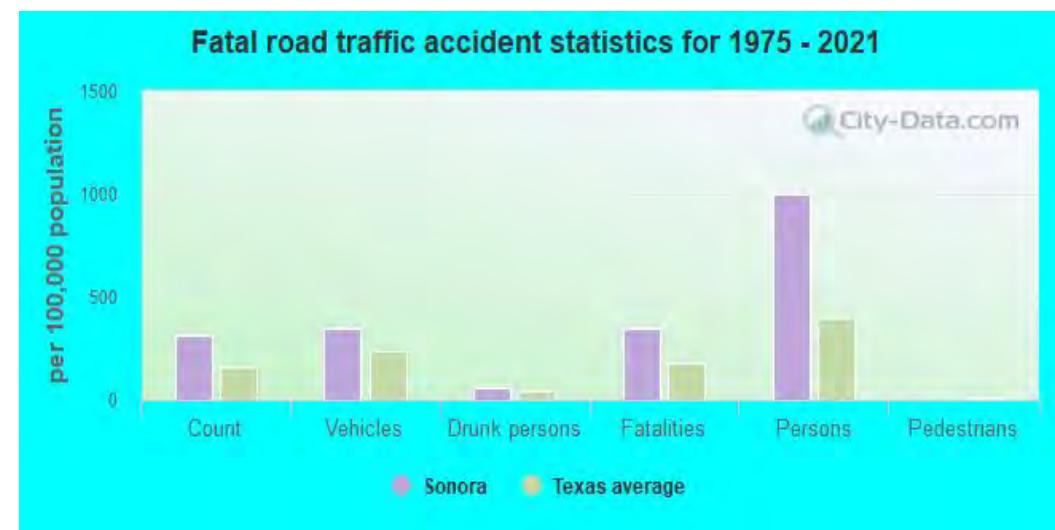
Comparison of Health Factors and Outcomes of LMH and Service Area to Texas and U.S.

<https://www.countyhealthrankings.org/explore-health-rankings/texas/sutton>

New Home Construction

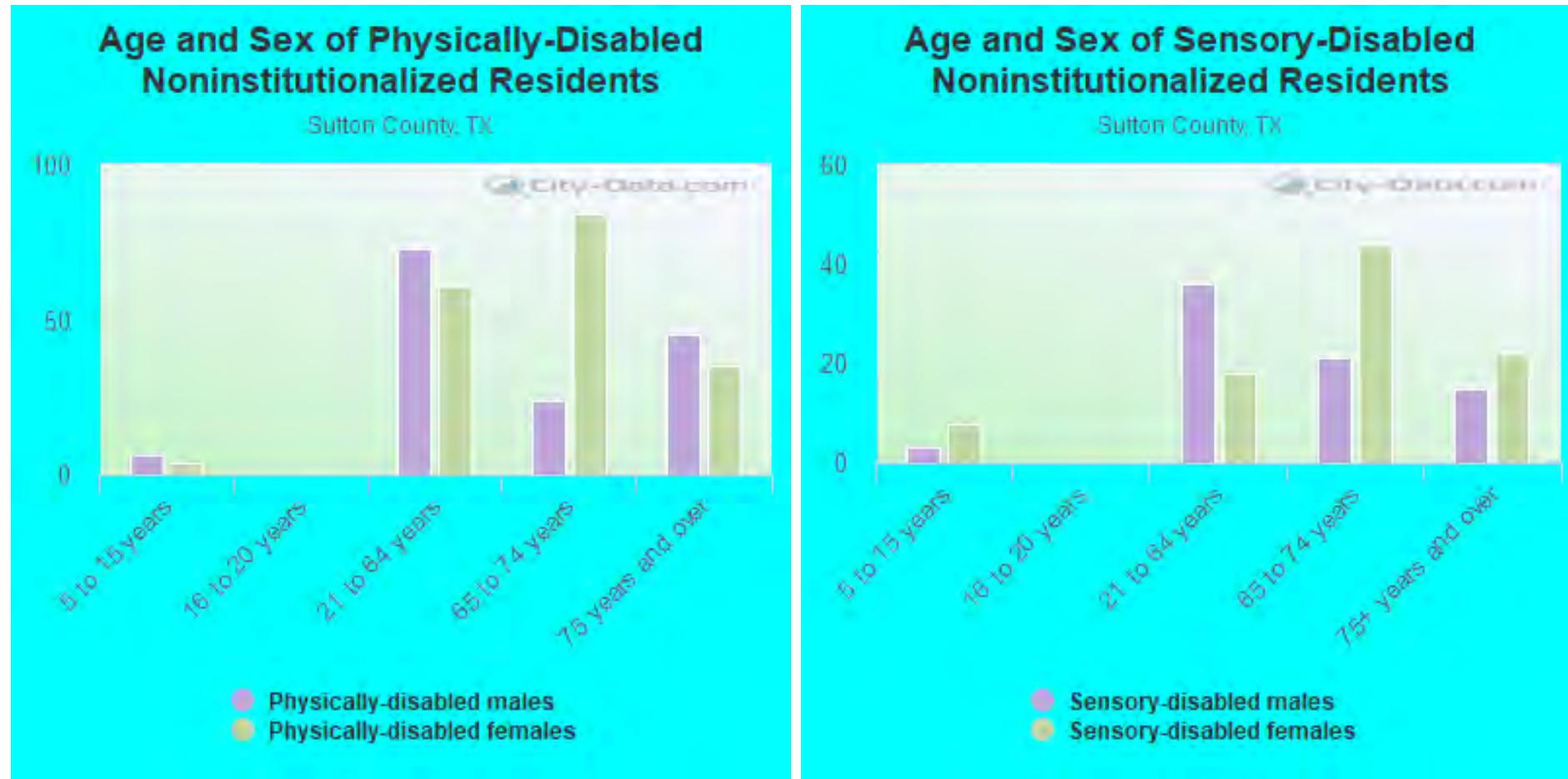


Fatal Road Traffic Crashes



Non-Institutionalized Physically-Disabled Residents

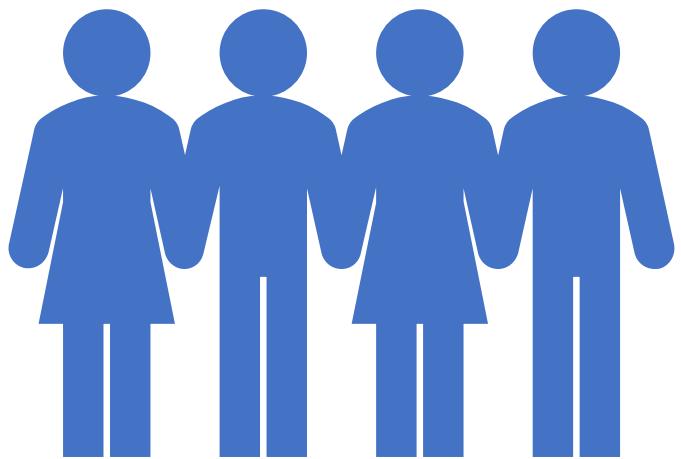
https://www.city-data.com/county/Sutton_County-TX.html. 2021





Community Health & Wellbeing

Survey Interviews



Community Health Survey & Interviews

Community Focus Group Responses

- A Community Health Survey was taken among a diverse cross section of the population living and working in Sutton County. The Survey contained multiple questions related to two components: 1. Access to Healthcare; 2. Chronic Illness and Disease.
- Written Survey – Survey responses from diverse stake holders of Sutton County and service area representing private and public sectors, multi-cultural populations, various occupational classifications, etc.
- Face-to-face Interviews – Interviews took place with focus group participants representing the hospital, medical providers, governing body, and diverse community stakeholders from within the service area.
- Total 18 diverse participants contributed to this Community Health Needs Assessment

Community Health Written Survey Questions

Survey Questions probed responses from the following categories:

Category I

Access to Healthcare Services

- Questions asked pertaining to:
 - Access to healthcare
 - Most critical services that are available
 - Most critical services not available but needed
 - Specialty physician services not available or need improvement
 - Services or specialties people are most likely to travel out of town
 - Confidence rating in locally provided services
 - Area resources available

Category II

Community Health & Wellbeing

- Describe the health and well-being of the community based upon:
 - Social and Physical Environment
 - Chronic Illness and Disease
 - Mental Health and Substance Abuse
 - Lifestyle Behavior

Access to Healthcare Services

Current access and availability of health services	What are most critical health needs in the county	How well are these critical needs being met in the county
<ul style="list-style-type: none">• Very good• Good access to primary care clinics• Good access to 24/7 emergency services• Specialty clinic provides local access to select specialists	<ul style="list-style-type: none">• Geriatric / Elderly care (#1 cited)• Diabetes and other chronic disease mgmt• Mental health• Emergency care	<ul style="list-style-type: none">• Good care provided locally by primary care practitioners, ER, and visiting specialists

Access to Healthcare Services

What service lines provided by the hospital are considered most critical to the community

- ER
- EMS and Air Transportation
- Primary Care Clinics
- Diagnostic Ancillary Services

What would the impact be if these services were not available?

- Life threatening / Unnecessary Deaths
- Travel hardship, especially for older population

What services lines are *not* available that are most needed?

- Mental Health

Access to Healthcare Services

What physician specialties
are not available that are
most needed

- OB/Gyn for pre-natal care
- Endocrinology / Diabetic care
 - Noted that local primary care providers and certified diabetic educator provide good care
- Mental health
- Dialysis

What Physician Specialties
Are Residents Most Likely
to Travel Out of Town?

- OB/Gyn for pre-natal care
- Multiple sub-specialties

Access to Healthcare Services

What Medical Service Lines are Available but Need Improvement

- Business Office customer service improvement
- Telehealth greater utilization

Access to Healthcare Services

Community Confidence in Hospital and Other Local Health Providers

Confidence level expressed in services provided by the hospital

- Broad support and confidence was consistently expressed for the hospital, providers, and services provided

What hospital service lines are considered to be high quality

- Diagnostic ancillary services – Imaging and Lab particularly cited
- Primary Care Clinics
- Wellness Center

Community Perception Rating – Hospital services (scale 1 to 10)

- Perception of hospital services was consistently rated 8 to 10 by all focus group participants

Community Health & Wellbeing

Public Perception of Healthy and Unhealthy Aspects of Living in Sutton County and Service Area

Healthy

Quality and Safe Lifestyle

Slower Pace / Low Congestion

Clean Air

Clean Water

Access to Medical Care

Access to Education

Wellness Center

Golf Course

Unhealthy

- Lack of walking trail and other outdoor activities
- Lack of healthy eating options / too much fast food
- Lack of employment opportunities to retain population

General Aspects of a Healthy Community ... According to Sutton County Focus Groups



Community health education and wellness programs



Community collaboration for wholistic wellness initiatives



Healthy food options



Access to healthcare services

Categories of Community Health & Wellbeing



Social and Physical Environment

Nutrition, Housing, Transportation, Domestic Abuse, others



Chronic Illness and Disease

Diabetes, Hypertension, CHF, COPD, etc.



Mental Health and Substance Abuse



Lifestyle Behaviors

Community Health & Wellbeing

Social and Physical Environment

Biggest Issues cited by focus groups



Community Health & Wellbeing

Social and Physical Environment

Biggest Issues cited by focus groups

Nutrition

Need for healthy food options in restaurants
Local food bank is a good community resource
Senior Center provides meals and other services

Lack of long-term care housing for the elderly

Extended family network often lives away in distant towns

Transportation

Concho Valley Transit provides scheduled transportation to medical appointments in San Angelo. Services are limited.

Community Health & Wellbeing

Chronic Illness and Disease

Biggest Issues cited by focus groups





Community Health & Wellbeing

Chronic Illness and Disease

Biggest Issues cited by focus groups

- Chronic Care Illnesses Most Commonly Identified:
 - Diabetes – Most frequently cited
 - High Blood Pressure



Community Health & Wellbeing

Chronic Illness and Disease

Biggest Issues cited by focus groups

- Sonora Clinic providers are recognized for offering good primary care management of chronic illnesses.
- A Certified Diabetic Educator is employed by LMH and serves as a consultative resource to local providers and patients.
- A desire for more specialists to offer clinic services in Sonora was frequently expressed.



Community Health & Wellbeing

Chronic Illness and Disease

Biggest Issues cited by focus groups

- The need for more community education on chronic disease management was frequently expressed. Public and individual classes teaching nutrition, lifestyle and behavioral adjustments were recommended.
- Opportunities to better utilize the LMH Certified Diabetic Educator within the Sonora community and as outreach into surrounding communities were frequently expressed.



Community Health & Wellbeing

Chronic Illness and Disease

Biggest Issues cited by focus groups

- Community interest for LMH to reinstitute periodic health fairs
- Collaborative efforts to encourage local restaurants and grocery stores to increase or promote healthy food options was recommended.
- A desire for local dialysis services was expressed.

Community Health & Wellbeing

Mental Health and Substance Abuse

Biggest Issues cited by focus groups



Community Health & Wellbeing

Mental Health and Substance Abuse

Biggest Issues cited by focus groups

Shortage of area mental health counseling services

Lack of social workers and licensed professional counselors

Lack of interventional services available for substance abuse

Local and Area Mental Health Area Resources Identified

Local

West Texas Guidance & Counseling – Offered weekly at the Food Pantry

Alcoholics Anonymous Local Chapter

School districts offer certain access to counseling service

LMH formerly offered a counseling program but closed. Consideration is being given to reopening in the rural health clinic to offer more privacy

Surrounding Area

- MHMR Concho Valley – Covers 24 counties. State funded organization providing diverse mental health services to communities within its service area. Headquartered in San Angelo.
- National Alliance for Mental Illness (NAMI) – Provides grant funding to support mental health access

Community Health & Wellbeing

Lifestyle Behaviors

Biggest Issues cited by focus groups



Community Health & Wellbeing

Lifestyle Behaviors

Biggest issues cited by
focus groups

Smoking, Vaping,
Substance Abuse

Lack of collaboration
between LMH and
Sonora ISD – ie.
SHAC (School Health
Advisory Council; RHC
(Rural Health Clinic))

Organized
community wellness
activities such as
walking trail, pickle
ball, etc.

Recommendations

- Mental Health
- Diabetic and other Chronic Disease Management and Education
- Community Health Outreach, Communication and Collaboration
- Specialty Physician Access
- Long Term Care Services for the Elderly

RECOMMENDATION

Mental Health Counseling and Services

It is recommended that LMH pursue efforts to improve access to mental health services

- Mental health was cited by all focus groups in this CHNA as the #1 issue
 - Mental health is continuously shown to be the #1 most underserved health issue in Texas
 - Public data reports the number of poor mental health days in Sutton County exceeds Texas and U.S. averages
- MHMR Concho Valley serves as state-funded mental health resource for Sutton County. They should be contacted about opportunities to improve access to mental health services
- The National Alliance for Mental Illness (NAMI) is a source that seeks grant funding opportunities to help finance mental health projects. NAMI should be considered as a potential funding resource.

RECOMMENDATION

Mental Health Counseling and Services

- **Mental Health Service Ideas for Consideration**
- Expansion of local mental health counseling and integration into primary care is a primary recommendation of this CHNA.
 - Current consideration to locate counseling services into unused Clinic space should be continued
 - Telehealth should be considered as a viable option to expand
 - Engage MHMR Concho Valley for recommendations
 - Consider reaching out to NAMI for defined project funding

RECOMMENDATION

Diabetic and other Chronic Disease Management and Education

It is recommended that LMH pursue efforts to improve diabetic and other chronic disease management

- LMH offers very good medical access to professional and diagnostic services through its providers and clinic.
- Diabetes was mentioned most as the most urgent chronic disease followed closely by cardiac illnesses
 - Public data shows high prevalence of diabetes, heart disease, and high blood pressure
- Contributing factors to chronic disease such as smoking, physical inactivity, nutrition and obesity in Sutton County is generally unfavorable in comparison with the State and U.S. according to public data.
- LMH offers local access to a cardiologist, an employed certified diabetic educator, and a wellness center.
 - Opportunities to expand utilization of the diabetic educator locally and perhaps into surrounding communities is recommended.
- Efforts to implement wholistic and behavioral education into chronic disease management is recommended.

RECOMMENDATION

Community Health Outreach, Communication and Collaboration

It is recommended that LMH pursue efforts to improve community health outreach, communication and collaboration

- Community health involves much more than the hospital and providers
 - It involves social, mental, physical, and spiritual components
 - Hospitals and Providers often become involved only after emergent events take place
- Many Recommendations in this CHNA can best be impacted through a collaborative community approach that includes participation from multiple and diverse stakeholders.
 - Diverse issues such as mental health, substance abuse, housing, employment, recreation, unintentional injury, firearm fatalities, motor vehicle deaths and other social health issues involve multiple public and private stakeholders besides the hospital.

RECOMMENDATION

Community Health Outreach, Communication and Collaboration

Community Outreach Ideas for Consideration:

- Health fairs offering personal screening, education, and communication create awareness of personal health needs and available services. Collaborative participation to include medical, social service, and public health providers is recommended. Provides benefit to individuals and service providers alike.
- Collaborative efforts between LMH and Sonora ISD can promote improved health and wellbeing for students, families, and teachers while generating mutual benefits for both organizations.
 - Potential to reduce absenteeism of students and teachers by expanding access of schools to clinic providers
 - Identify shared opportunities identified by SISD's SHAC and LMH's CHNA (School Health Advisory Counsel and Community Health Needs Assessment) to achieve greater impact than working separately

RECOMMENDATION

Community Health Outreach, Communication and Collaboration

Community Outreach Ideas for Consideration:

- Seek collaborative opportunities with organizations like the Food Pantry, Texas A&M AgriLife, other public and private service providers for ways to improve community health
- Offer community luncheons that feature local providers speaking on various health topics
- Offer health education programs at places where people congregate, such as Senior Centers, churches, etc.
- Identify public and private grant opportunities that can be applied for to pursue community health improvement projects
- Posting links to contemporary health topics from reputable sources on the hospital website
- Utilize local radio station to promote wellness education. Engage local providers to comment on health topics.

RECOMMENDATION

Access to Specialty Physicians

- ❖ ***It is recommended that efforts continue to expand the scope of specialty clinic physician services available locally***
- Specialties commonly requested by focus groups:
 - OB/Gyn offering prenatal care and other women's health services
 - Mental health specialists
 - Endocrinology
 - Nephrology

RECOMMENDATION

Long Term Care Services for the Elderly

- ❖ ***It is recommended that efforts be explored to improve local provision of long-term care services to the elderly***
- The largest demographic age group in Sutton County is 65 and older
 - Many elderly individuals or couples live alone while their adult children live in distant places
- There is a lack of specialty housing or home outreach services for the elderly
- Consideration of conducting a feasibility study to determine the cost, benefit, financing, and sustainability of building long-term care housing is recommended.
- Consideration of dispensing electronic health monitoring devices through the clinic to patients in their home is recommended.

Summary

The residents of Sutton County are fortunate to have the Sutton County Hospital District d/b/a Lillian M. Hudspeth Memorial Hospital. LMH generously provides for the health and medical needs of those living, working, and traveling within the county. Access to health services exceeds those typically found in counties the size of Sutton.

LMH is an essential resource for healthcare, serving a remote population as well as high volume of travelers on busy interstate and U. S. highways. LMH is a good steward of the resources with which it has been provided.

Summary

LMH is guided by a dedicated board of directors, leadership team, medical staff, and employees. The Hospital District works collaboratively with the County to ensure that essential services like EMS are maintained.

LMH has shown progress in advancing recommendations offered in the 2019 CHNA. A new primary care practitioner has been added to the medical staff, and an agreement has been signed with a new physician to join in 2025 following retirement of a long-time local physician. Chronic disease management has advanced through focused provider care, employing a certified diabetic educator, and behavioral lifestyle education.

Summary

This is a Community Health Needs Assessment ... not a hospital needs assessment. The primary issues impacting the health and wellbeing of Sutton County as presented by community focus groups indeed are community issues, not merely hospital issues. LMH can provide leadership and resources to lead improvement efforts, but sustained improvement will take the combined efforts of others in the community working together.

The citizens of Sutton County reflect a proud “can do” attitude in solving problems, looking after each other, and providing for themselves and community. This “can do” and cooperative culture provides a good framework for the community to come together to seek ways to bring tangible improvement to the issues identified in this assessment.



Next Steps

- *Present this CHNA to the hospital Board of Directors and hospital leadership team.*
- *Share this CHNA with all focus group participants who contributed to this assessment.*
- *Post this CHNA on the hospital website for public access. Sharing this assessment with the community is required and often creates synergy leading to combined strategic efforts of individuals and groups.*
- *Prioritize the recommendations of this CHNA based upon urgency, impact, and available resources.*
- *Invite collaborative partners from other service providers to join in reviewing and responding to recommendations*
- *Prepare an action plan and timeline to address these recommendations.*

