

PETERSON HEALTH

Community Health Needs Assessment

KERR COUNTY, TEXAS

TABLE OF **CONTENTS**

INTRODUCTION

- 3 About Peterson Health
- 6 Community Health Needs Assessment Goals

LISTENING TO THE COMMUNITY

- 7 Input and Collaboration
- 8 Information Gaps
- **9** Participation by Those Representing the Broad Interests of the Community
- **10** Community Engagement and Transparency
- **11** Community Selected for Assessment

UNDERSTANDING THE COMMUNITY

- 12 Key Findings
- **12** Process and Methods
- **13** Description of Community Served
- 17 Business Profile
- **18** Tapestry Segmentation
- **19** Interview and Focus Group Results
- 23 Health Status Data, Rankings, and Comparisons

ELEVATING THE COMMUNITY

- **39** Assessment Results and Prioritization
- 40 Community Health Summit Brainstorming

2018 ASSESSMENT ANALYSIS

42 2018 CHNA Impact and Implementation

APPENDIX

2

45 Community Asset Inventory

Paper copies of this document may be obtained at Peterson Health

ABOUT PETERSON HEALTH

WORLD-CLASS CARE IN KERRVILLE!

Peterson Health, a medical health network serving patients and the community in the Texas Hill Country, has grown to be so much more than a hospital.

What started as a single facility in 1949 has quickly expanded to a dozen rooftops serving more than nine counties, each united with a singular purpose: to elevate the health of our region.

Peterson Health's flagship hospital, Peterson Regional **THE TEXAS** Medical Center, a 124-bed, not-for-profit rural **HILL COUNTRY** community hospital located in Kerrville, began as a legacy of exceptional, compassionate, patient-centered care – forming the foundation of Peterson's inspired mission to offer world-class care, today, tomorrow, and always.

Home to more than 1,300 full time employees and 250 medical professionals, Peterson Health remains the largest employer in Kerr County for decades. Peterson Health is alive and thriving thanks to the tireless dedication of individuals who see healthcare as their calling and their efforts have not gone unnoticed both here at home and on a national scale as they care for more people in more places every day. Proof positive that our employees live and love their calling – for the second year in a row, Peterson Health has been named "Best Places to Work" by Modern Healthcare.

Peterson Health's commitment to Elevating Health has earned numerous national, state, and regional awards to include being named a Top 100 Rural Community Hospital for the seventh consecutive year – the ONLY one in Texas in 2017. This honor elevated Peterson Health's status in the healthcare arena on a national scale, setting the bar for other rural hospitals as they strive to successfully navigate the future of healthcare. While proud of numerous other awards for quality, safety, and patient experience, Peterson Health never loses focus on meeting the true healthcare needs of the region.

Peterson Health continues to expand access to quality healthcare through additional service lines, locations, and state-of-the-art equipment. The main campus in Kerrville offers more than 40 key service lines, including the Emergency Department, Acute Rehabilitation Unit, The Baby Place (Texas Ten Step designated maternity unit), Women's Services, Intensive Care Unit, Heart and Vascular Clinic, seven surgical suites, and an award-winning joint replacement program, "Back to Life." Peterson Health is a designated Level 4 Trauma Center, Stroke certified, and has reached an elite cardiac designation. Recently Peterson Urgent Care was awarded the highest certification for urgent care operations nationally.

Peterson's neighboring Pevehouse Ambulatory Care Center offers outpatient surgical services, radiology, imaging, labs, outpatient rehabilitation, and an advanced Wound Healing Center featuring two hyperbaric oxygen chambers.

INTRODUCTION

AUSTIN

SAN ANTONIO

Peterson's roster of services include Peterson Hospice and Home Care, to include Transitional and Palliative Care, recently merging as Providers at Home. Peterson also oversees Peterson Medical Associates, Peterson Women's Associates, Peterson's Outreach Lab, Peterson Community Care, and Peterson Urgent Care. Recently, Peterson added physical therapy at the established Center for Fitness in Kerrville.

Proudly, Peterson has expanded its footprint in neighboring counties to include family practice clinics in Bandera, Fredericksburg, and Comfort, with outpatient rehabilitation in Comfort too.

Peterson Health is meeting their mission on all fronts to provide the highest level of quality healthcare and serve the growing needs of the region. View their evolving services and offerings, as well as meet their providers at PetersonHealth.com.



CREATING **A CULTURE OF HEALTH**



Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings website: http://www.Countyhealthrankings.org/roadmaps/action-center

The Community Health Needs Assessment (CHNA) uses systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of Kerr County, Texas.

The Action Cycle shows how to create healthy communities. The rankings later in the document assist in understanding what makes a healthy community.

2022 COMMUNITY HEALTH NEEDS ASSESSMENT

This document is a hospital facility-specific Community Health Needs Assessment (CHNA) for Peterson Regional Medical Center known locally as Peterson Health (PH).

Peterson Health, as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and services company based out of Nashville, Tennessee, provided the analysis of community health data, facilitated the focus groups, conducted the interviews, and facilitated a community health summit to receive community input into the priorities and brainstorm goals and actions the community could take to improve health.

Starting on July 1, 2022, this report is made widely available to the community via Peterson Health's website (www.PetersonHealth.com) and paper copies are available free of charge at Peterson Health, 551 Hill Country Drive, Kerrville, TX 78028 or by phone at 830.896.4200.

PROJECT GOALS

- To continue a formal and comprehensive community health assessment process which allows for the identification and prioritization of significant health needs of the community to assist with resource allocation, informed decision-making, and collective action that will improve health.
- 2 To continue a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community.
- 3 To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

We initiated the Community Health Needs Assessment with the goal to assess the health and needs of the community. This process is an affirmation of what we've been doing to improve health and has jumpstarted our next implementation plan," said Cory Edmondson, President and CEO, Peterson Health.

The information gathered both from public health data and from community stakeholders provided insight the community needed to set priorities for significant health issues and will be used to inform and support our implementation plans," added Lisa Winters, Director of Marketing and Community Relations, Peterson Health.

INPUT AND COLLABORATION

DATA COLLECTION AND TIMELINE

In March 2022, Peterson Health began a Community Health Needs Assessment for Kerr County and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in April and May 2022.
- Community members participated in focus groups and individual interviews for their perspectives on community health needs and issues on April 5, 2022.
- A Community Health Summit was conducted on May 19, 2022 with community stakeholders. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-for-profit organizations, employers, and other community members.



LISTENING TO THE COMMUNITY



Photo Credit: Thanks to the pride and passion of the Environmental Services team, Peterson Health consistently ranks in the nation's top decile for cleanliness, keeping our patients safe, and raising our standards of quality.

INFORMATION GAPS

While this assessment was quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all the community's health needs.

PARTICIPANT OVERVIEW

Thirty-nine individuals from twenty-nine community organizations collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Kerr County.

The three-month process centered on gathering and analyzing data, as well as receiving input from persons who represented the broad interests of the community, to provide direction for the community and hospital to create a plan to improve the health of the communities.

PARTICIPATION BY THOSE REPRESENTING THE BROAD INTERESTS OF THE COMMUNITY

Participation in interviews and the Community Health Summit creating the Kerr County Community Health Needs Assessment and Improvement Plan included:

ORGANIZATION	POPULATION REPRESENTED	PARTICIPATION	
Art2Heart	Children/Youth, Kids	Focus Groups/Interviews, Summit	
Christian Assistance Ministry	Low-income	Summit	
Chamber of Commerce	Businesses	Summit	
City of Kerrville, TX	Kerrville	Summit	
Community Leader	All	Focus Groups/Interviews	
Doyle Community Center	Low-income	Summit	
DSHS Kerrville	All, access to care	Summit	
Family Practice Associates	All	Summit	
Hill Country Community Journal	All	Focus Groups/Interviews	
Hill Country MHDD	Crisis	Summit	
KCWC - KCPAA	Businesses, All	Summit	
Kerr County Commission	All	Focus Groups/Interviews, Summit	
Kerr Welcome Wagon	Community	Summit	
Kerrville City Government	All	Focus Groups/Interviews	
Kerrville Fire Dept.	All	Summit	
Kerrville ISD	Children/Youth	Focus Groups/Interviews	
Kerrville Police Dept.	All, Mental Health	Focus Groups/Interviews, Summit	
Light on the Hill	Low-income, Children, Counseling	Summit	
Mental Health & Development Disabilities Center	Mental Health	Focus Groups/Interviews	
New Hope Counseling	Mental Health	Focus Groups/Interviews, Summit	
Peterson / USACS	All	Summit	
Peterson Health	All	Focus Groups/Interviews, Summit	
PRMC at Doyle Community Center	Low-income	Summit	
School Nurse	Children/Youth	Focus Groups/Interviews	
The Dietert Center	Seniors	Focus Groups/Interviews, Summit	
TX A&M AgriLife Extension Service	All	Summit	
Ultimate Gift of Life	All	Focus Groups/Interviews, Summit	
Wesley Nurse	All	Focus Groups/Interviews, Summit	
West Kerr Chamber	Businesses	Summit	
	n	D	

In many cases, several representatives from each organization participated.

COMMUNITY ENGAGEMENT AND TRANSPARENCY

Many members of the community participated in focus group, individual interviews, and the Summit. We are pleased to share the results of the Community Health Needs Assessment with the rest of the community in hopes of attracting more advocates and volunteers to improve the health of our communities. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community, as the findings impact every citizen in one way or another, and join in the improvement efforts.

INPUT OF THE MEDICALLY UNDERSERVED, LOW-INCOME, AND MINORITY POPULATIONS

Input of medically underserved, low-income, and minority populations was received through interviews, focus groups, and the Summit. Agencies representing these population groups were intentionally invited to the focus group, interviews, and the Summit.

INPUT OF THOSE WITH EXPERTISE IN PUBLIC HEALTH

Kerr County is in the Texas Department of State Health Services Region 8 which includes 28 counties in south central Texas. The Regional Medical Director Lillian Ringsdorf, MD, MPH attended the Community Health Summit. Region 8's 2020 annual report included progress on the COVID-19 pandemic surveillance, investigations and contact tracing, symptom monitoring and infection control outreach. They also reported on vaccines and community health improvement during the pandemic.

Other priorities included Tuberculosis monitoring, preventing HIV and STDs, social services support for those affected by the pandemic, and oral health.

COMMUNITY SELECTED FOR ASSESSMENT

Kerr County was the primary focus of the CHNA due to the service area of Peterson Health. Used as the study area, Kerr County provided 72.5% of January 1, 2021, through December 31, 2021, inpatient discharges. The community includes medically underserved, low-income, and minority populations who live in the geographic areas from which Peterson Health draws their patients. All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Peterson Health's Financial Assistance Policy.



PETERSON HEALTH STUDY AREA - 2022



Photo Credit: Peterson Health's Quality Services team receives the Texas Hospital Association's elite Bill Aston Award for Quality for elevating Peterson Health's quality and safety efforts.

KEY FINDINGS

COMMUNITY HEALTH ASSESSMENT RESULTS

Based on the previous CHNA priorities, secondary data, focus groups, and interviews, the summit participants selected the following significant health needs to be the focus over the next three years.

- 1. Substance misuse
- 2. Housing (affordable) and access to health for unhoused population
- 3. Mental Health
- 4. Diabetes
- 5. Education (as a means of escaping poverty and improve health)

PROCESS AND METHODS

Both primary and secondary data sources were used in the CHNA.

Primary methods included:

- Focus groups and individual interviews with community members
- Community Health Summit

Secondary methods included:

- Public health data death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomics population, poverty, uninsured, unemployment
- Psychographics behavior measured by spending and media preferences



Photo Credit: Peterson Health conducts multiple crisis simulations in order to be prepared for emergency situations at all times.

UNDERSTANDING THE COMMUNITY

DESCRIPTION OF COMMUNITY SERVED

DEMOGRAPHICS

The table shows the demographic summary of Kerr County compared to Texas and the U.S.

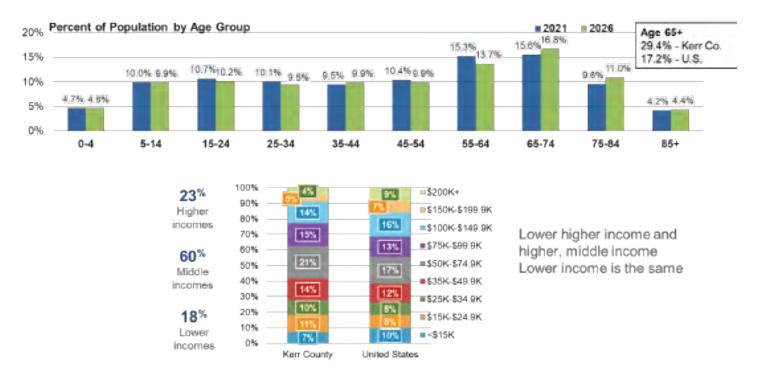
ATTRIBUTE	KERR COUNTY	TEXAS	USA
Population	54,902	29,969,514	333,934,112
Median Age	50.3	35.3	38.8
Median Household Income	\$57,405	\$63,524	\$64,730
Annual Pop. Growth (2021–26)	0.88%	1.54%	0.71%
Household Population	22,559	10,615,809	126,470,675
Dominant Tapestry	Silver & Gold (9A)	Up & Coming Families (7A)	Green Acres (6A)
Businesses	2,650	988,897	12,013,469
Employees	25,060	11,723,194	150,287,786
Health Care Index*	93	99	100
Average Health Expenditures	\$5,807	\$6,149	\$6,237
Total Health Expenditures	\$131.0 M	\$65.3 B	\$788.8 B
RACIAL AND ETHNIC MAKE-UP			
White	86%	67%	69%
Black	2%	13%	13%
American Indian	1%	1%	1%
Asian/Pacific Islander	1%	5%	6%
Other	8%	12%	7%
Mixed Race	3%	3%	4%
Hispanic Origin	28%	40%	19%

Source: Esri

*The Health Care Index is household-based, and represents the amount spent out of pocket for medical services and insurance relative to a national index of 100.

The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.

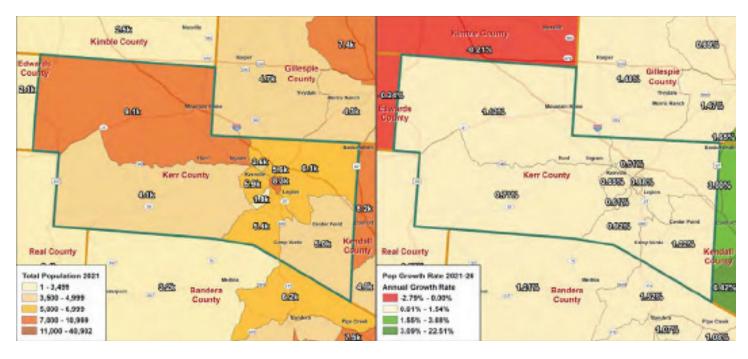
KERR COUNTY



Source: Esri

- The population of Kerr County is projected to increase from 2021 to 2026 (0.88% per year). Texas is projected to increase 1.54% per year. The U.S. is projected to increase 0.71% per year.
- Kerr County had a higher median age (50.3 median age) than TX (35.5) and the U.S. (38.8). In Kerr County the percentage of the population age 65 and over was 29.4%, higher than the U.S. population age 65 and over at 17.2%.
- Kerr County median household income at \$57,405 was lower than TX (\$63,524) and the U.S. (\$64,730). The rate of poverty in Kerr County was 11.6% which was lower than TX (13.4%) and the U.S. (11.9%).
- The household income distribution of Kerr County was 23% higher income (over \$100,000), 60% middle income, and 18% lower income (under \$25,000). The largest income group is the 21% making \$50,000 to \$74,999.
- The health care index measures how much the population spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Kerr County was 93, indicating 7% less spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The racial and ethnic make-up of Kerr County was 86% White, 2% Black, 1% American Indian, 28% Hispanic origin, 3% more than one race, 1% Asian/Pacific Islander, and 8% other. (These percentages total to over 100% because Hispanic is an ethnicity, not a race.)

2021 POPULATION BY CENSUS TRACT AND CHANGE (2021-2026)



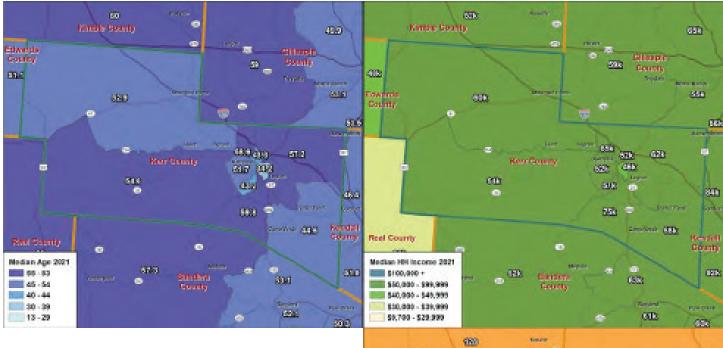
Source: Esri

Red is population decline Yellow is positive up to the TX growth rate Green is greater than the TX growth rate Dark green is twice the TX growth rate

Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people. The higher populated census tracts are smaller geographically and the less populated census tracts are larger in geography. The northwest corner census tract including Mountain Home and Hunt contains over 9,000 people and is very large. The census tract in Kerrville contains 8,300 people and is very small. Adding all the Kerrville area census tracts, there are 21,700 population in four census tracts. These four tracts contain 40% of the population of the county.

Kerr County has fairly uniform growth throughout the county from 0.01% to 1.54% which is positive growth up to the TX growth rate of 1.55% The highest growing census tracts are the upper northwest corner at 1.12% and the lower southeast corner at 1.22%. The other tracts are growing from 0.51% to 0.92% per year.

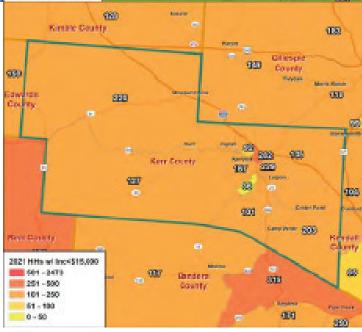
2021 MEDIAN AGE AND INCOME



Source: Esri

The top two maps depict median age and median income by census tract. Looking at age and income by census tract is helpful to demonstrate that not all areas of a county are the same. The health needs may be very different in the census tract in east Kerrville with a lower median age (34.2) and the tract south of Kerrville with a median age of 59.8.

Looking at median household income by census tract also gives insight into health status. The lower income areas may require more assistance than the higher income tracts. The census tract with the lower median age, also has a lower median household income (\$46,000 per year)

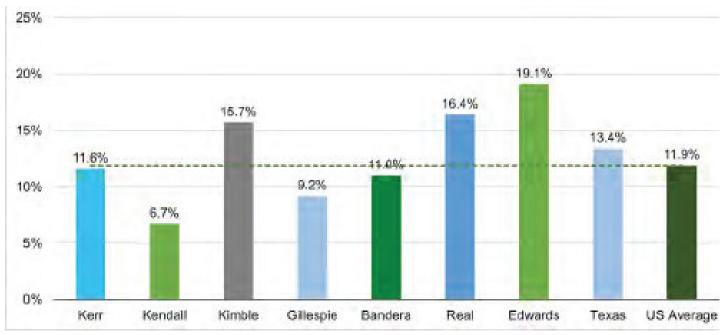


compared to the older census tract south of Kerrville with \$75,000 median household income.

The lower map is the number of households making less than \$15,000 per year. Again, further attempting to identify those areas within the county that may have a lower health status. The census tract south of I-10 in Kerrville had 282 families making less than \$15,000 per year.

Kerr County's 2020 poverty percentage was 11.6% compared to Texas at 13.4% and the U.S. at 11.9%. The cost of living in Kerr County was lower than TX and the U.S.

PERCENT IN POVERTY



BUSINESS PROFILE

65% percent of employees in Kerr County were employed in:

- Health Care & Social Assistance (18.8%)
- Retail Trade (14.6%)
- Accommodation & Food Service (14.6%)
- Other Services (8.8%)
- Education (8.5%)

Source: Esri

Retail, accommodation, and food service offer health insurance at a lower rate than healthcare, public administration, and educational services.

Kerr County's January 2022 preliminary unemployment was 3.6% compared to 4.8% for Texas and 4% for the U.S.

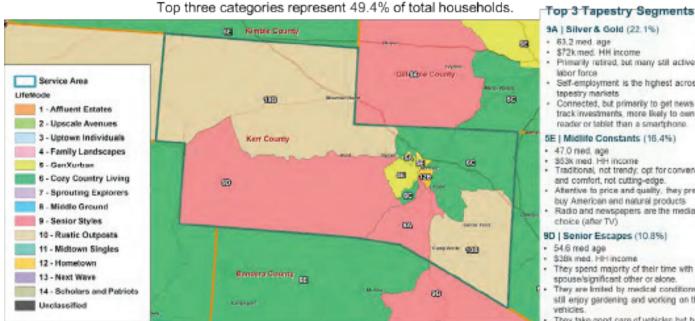
It is beneficial to contact people in groups to improve health. There are three primary places people gather during the week: work, church, and school. These are three excellent places to reach people to create a culture of health.

TAPESTRY SEGMENTATION

Demographics are population, age, sex, and race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. Fifty-three percent of Kerr County are included in three Tapestry Segments. The map below is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly. The dominant Tapestry Segment of each census tract is identified by number.

The dominant Tapestry Segments in the county were Silver and Gold (22%), Midlife Constants (16%), and Senior Escapes (11%). The map below demonstrates the dominant Tapestry Segment by census tract.

There is a very brief description of the segments on the right of the map. There is much more information on Tapestry Segments at http://doc.arcgis.com/en/Esri-demographics/data/tapestry*segmentation.htm*. Analyzing the Tapestry Segments in the study area helps determine health habits and communication preferences of residents, enabling more effective communication and implementation of solutions to improve health. Many spoke of meeting people where they are in the focus group and interviews. Studying their Tapestry Segment can help do that.



Top 3 Tapestry Segments

- 9A | Silver & Gold (22.1%)

- Primarily retired, but many still active in the
- Self-employment is the highest across all tapestry markets
- · Connected, but primarily to get news and track investments, more likely to own an e reader or tablet than a smartphone.

5E | Midlife Constants (16.4%)

- \$53k med. HH income
- Traditional, not trendy; opt for convenience and comfort, not cutting-edge.
- Attentive to price and quality, they prefer to buy American and natural products.
- · Radio and newspapers are the media of choice (after TV)

9D | Senior Escapes (10.8%)

- spouse/significant other or alone. They are limited by medical conditions but
- still enjoy gardening and working on their

They take good care of vehicles but haven't bought a new one in over five years.

INTERVIEW AND FOCUS GROUP RESULTS

INTERVIEWS

Community stakeholders representing the broad interests of the community, as well as those representing low income, medically underserved, and minority populations, participated in individual interviews and focus groups on April 5, 2022, for their input into the community's health. Community participation in individual interviews represented a broad range of interests and backgrounds. Below is a summary of the focus groups and interviews.

How do you define health?

- Mind, body, spirit
- Overall well-being
- Balance emotional, mental, physical, spiritual, financial
- Access to care
- State of happiness

2 For the purposes of this Community Health Needs Assessment, the community is Kerr County. Generally, how would you describe the community's health?

- It depends on social and economic ability to seek out care
- Overall above average, but lower income are challenged
- 50/50 some are more health conscious than others

What are the most significant health issues for the community today?

- Mental Health isolation, fear, depression, bipolar disorder, schizophrenia
- Substance Use Disorder drugs and alcohol due to stress and anxiety
- Access to resources and coordination
- Access to healthcare telemedicine for mental health, ED visits for primary care, home care, cardiology, expand Medicaid
- Employee shortages mental health, nurse practitioners, law enforcement, EMS
- Social determinants of health
- Housing
- Broadband, computer literacy
- Food
- Transportation
- Literacy
- Overweight society are more prone to health problems

4 What are the most significant health issues facing various populations including medically underserved and low-income populations?

- Mental health depression, including suicides in children
- Medical issues diabetes, allergies, asthma, dental issues
- Substance misuse drugs, smoking, and alcohol
- Social determinants of health basic needs, housing, transportation, food. Health is going to come after these other needs.

What are the most significant health issues facing the minority populations?

- Language barriers
- Lack of access to healthcare delayed care, chronic illnesses not addressed, dental care
- Immigration status lack of trust, fear
- Diet/exercise leading to obesity and diabetes
- Substance misuse and mental health

What are the most important health issues facing youth and children?

- Mental health stress, depression, grief
- Education positive lifestyle decisions, ready for employment
- Substance Use drugs, vaping, marijuana, alcohol
- Diet, nutrition, exercise game playing, sedentary, expensive healthy food, cheap unhealthy food, leads to diabetes
- Use of electronics and social media how to have conversations, want to be social media influencers
- Others: loss of pediatrician, asthma, parental issues, what's normal?

7 What are the most important health issues facing seniors?

- Mental health still stigma with this group, dementia
- Isolation, loneliness
- Chronic diseases and multiple ailments cardiovascular (heart) health, GI, dementia, cancer, joint replacements, diabetes, vision, hearing, dental
- Mobility/independence fear of losing independence, falls
- Others: substance misuse, lack of understanding of Medicare Advantage plans

8 The community performed a CHNA in 2019 and identified priorities for health improvement:

- A. Access to care and insurance
- B. Obesity healthy eating / active living
- C. Mental health
- D. Children's health issues
- E. Socioeconomics/housing/environmental
- F. Substance misuse
- G. Chronic diseases

9 What has changed most related to health status in the last three years?

- · Access to care has improved slightly
- All are still issues
- Due to COVID, most have gotten worse
- Move socioeconomics and housing up in priority
- Additional
- Dental Care
- Combine mental health and substance misuse; they're related

What, if any, health issues or inequities did the COVID-19 pandemic expose in the community?

- · For those in and near poverty, life was harder, food deliveries increased
- Resources became available economic assistance, food
- · People of color more susceptible to COVID and afraid to seek care
- Low wages for essential workers
- Mental health issues increased depression, suicide
- Lack of access to the Internet
- · Knowledge about the healthcare system
- · When barriers to receive care are dropped, people get care

1 What behaviors have the biggest impact on community health?

- Neglect seeking care
- Drugs, smoking, sugar, and alcohol
- Circle of influence
- Emotional state choice to be happy or sad

12 What environmental factors have the biggest impact on community health?

- Safe places to exercise
- Housing expensive, need low income
- Commute times traffic, transportation
- Air quality dust, wind, rock quarries
- Places for kids to hang out bowling alley, skating rinks

What do you think the barriers will be to improve health in the communities?

- · Communication about available resources
- Suspicion of institutions
- Managing growth taxes, housing values
- Economics disadvantaged
- People of color and immigrants not using the hospital, staying within their own groups, language barriers

14 What community assets support health and wellbeing?

- Great places to exercise, parks, natural beauty, river
- Multiple community nonprofit organizations
- · Community focused leaders and volunteers
- Schreiner University
- Camps
- Churches
- Sports Little League, YMCA leagues
- Peterson Health
- Raphael Clinic
- Philanthropy 2 large foundations, giving community
- Doyle Center
- Chamber of Commerce
- Dietert Center
- Kroc Center

15 If you had a magic wand, what improvement activity should be a priority for Kerr County to improve health?

- Increase access to mental health resources, knowledge, and providers
- Integrate primary care with mental health, mental health home visits
- Need a continuum of care for mental health crisis intervention, short stay, residential
- Police dealing with and transporting mental health patients is not a great use of that resource. Integrate mental health providers with police
- Build more houses and get work force to live in Kerrville
- Increase access to care more clinics, urgent care, providers
- · Work with high schools and colleges to get students to stay here
- Increase funds for area nonprofits. Have joint fundraisers
- · Centralized database to match people with resources
- Create a universal application to qualify for assistance. Decrease the barriers to receive assistance
- · More activities for kids bowling, older, experienced mentors
- A children's wing on the hospital
- Incentives to stop vaping
- Teach life skills cooking, budgeting, doing taxes, grocery shopping, financial literacy

HEALTH STATUS DATA, RANKINGS, AND COMPARISONS

HEALTH STATUS DATA

Based on the 2022 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin, **Kerr County ranked 92nd out of 244 Texas counties ranked for health outcomes and 18th for health factors** (1= healthiest; 244 = unhealthiest). Health outcomes are composed of length of life and quality of life. Health factors are comprised of health behaviors, clinical care, social and environmental factors, and physical environment.

County Health Rankings suggested the areas to explore for improvement in Kerr County were higher adult smoking, higher percentage of adult obesity, higher alcohol-impaired driving deaths, and higher uninsured. The areas of strength were lower population to primary care physician, lower population to mental health professional, lower preventable hospital stays, higher mammography screening, higher high school completion, lower unemployment, and lower income inequality.

When analyzing the health status data, local results were compared to Texas, the U.S. (where available), and the top 10% of counties in the U.S. (the 90th percentile). Where Kerr County's results were worse than TX and U.S., groups and individuals have an opportunity to act and improve these community measures. To become the healthiest community in Texas and eventually the nation, Kerr County must close several lifestyle gaps. For additional perspective, Texas was ranked the 35th healthiest state out of the 50 states. (Source: 2019 America's Health Rankings; lower is better) Texas strengths were low prevalence of multiple chronic conditions, high percentage of households with food insecurity, high teen birth rate, and low prevalence of having a dedicated health care provider.

COMPARISONS OF HEALTH STATUS

Information from County Health Rankings and America's Health Rankings was analyzed in the CHNA in addition to the previously reviewed sociodemographic information and other public health data. Other data analyzed is referenced in the bullets below, such as: causes of death, demographics, socioeconomics, consumer health spending, and interviews. If a measure was better than Texas, it was identified as a strength, and where an indicator was worse than Texas, it was indicated as an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it's important to continually focus on them. Opportunities were denoted with red octagons and strengths were denoted with green stars for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work, and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Texas counties every year since 2003.

In most of the following graphs, Kerr County will be blue, Texas (TX) will be red, U.S. will be grey, and the 90th percentile of counties in the U.S. will be gold.

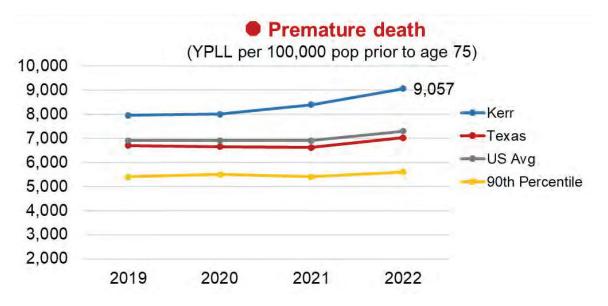
HEALTH OUTCOMES (LENGTH OF LIFE AND QUALITY OF LIFE)

Health Outcomes are a combination of length of life and quality of life measures. Kerr County ranked 92nd in health outcomes out of 254 Texas counties.

LENGTH OF LIFE

Length of life was measured by years of potential life lost per 100,000 population prior to age 75; here, lower is better. For example, a 25-year-old killed in an accident equates to 50 years of potential life lost prior to age 75. Kerr County ranked 137th in length of life in TX. Kerr County lost 9,057 years of potential life per 100,000 population which was higher than TX and the U.S.

Kerr County residents can expect to live 1.5 years less than the average U.S. resident.



• Life Expectancy

(Average number of years a person can expect to live)

	2017-2019	Kerr County	2017-2019
Kerr County	77.3	American Indian & Alaska Native	NA
Texas	78.4	Asian	NA
US Avg*	78.8	Black	NA
	80.6	Hispanic	81.0
90th Percentile	80.6	White	76.0

*US is 2019 data. Due to Covid and impacts of Covid, life expectancy in the US decreased 1.87 years in 2020 to 77.0.

Source: County Health Rankings; National Center for Health Statistics – Mortality File 2018-2020

Cause of Death	Kerr County	Texas	US
Heart Disease	160.0	173.9	168.2
Cancer	154.2	139.8	144.1
COVID-19*	43.6	105.2	85.0
Alzheimer's Disease	32.5	44.6	32.4
Accidents (Unintentional Injuries)	56.1	44.2	57.6
Strokes	39.0	41.1	38.8
Respiratory Diseases	46.8	36.2	36.4
Diabetes	19.4	26.7	24.8
Liver Disease	24.9	15.8	13.3
Hypertension and Hypertensive Renal Disease	11.8	9.3	10.1
Influenza and Pneumonia	11.1	12.2	13.0
Nephritis, nephrosis	11.7	15.1	12.7
Parkinson's disease	7.5	11.3	9.9
Suicide	24.6	13.3	13.5

LEADING CAUSES OF DEATH: AGE-ADJUSTED DEATH RATES PER 100,000 POPULATION

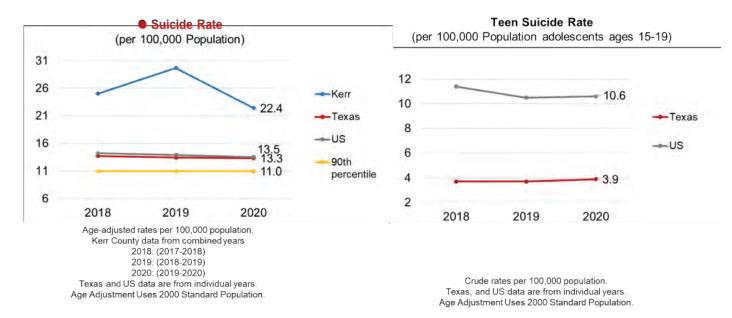
Age-adjusted rates per 100,000 population.

Kerr County data combined from 2018-2020. US and TX data from 2020 Rates that appear in red for a county denote a higher value compared to state data.

.* COVID-19 Data from 2020 only Age Adjustment Uses 2000 Standard Population.

Age Adjustment Oses 2000 Standard T Optiation.

Rates in red had death rates higher than TX. The leading causes of death in Kerr County were heart disease, cancer, followed by accidents, respiratory diseases, COVID-19, strokes, Alzheimer's disease, liver disease, and suicide.



Kerr County's suicide rate was above TX and the U.S., and the trend is down. Teen suicide rate in TX increased slightly in 2020.

Source(s): Wonder CDC.gov (2019) Age-adjusted rates per 100,000 population. Age Adjustment Uses 2000 Standard Population.

LENGTH OF LIFE STRENGTHS

- The Hispanic population had a higher life expectancy than TX.
- Kerr County had lower death rates in 8 of the top 15 causes of death heart disease, COVID-19, Alzheimer's disease, stroke, diabetes, influenza / pneumonia, kidney disease, and Parkinson's disease.

LENGTH OF LIFE OPPORTUNITIES

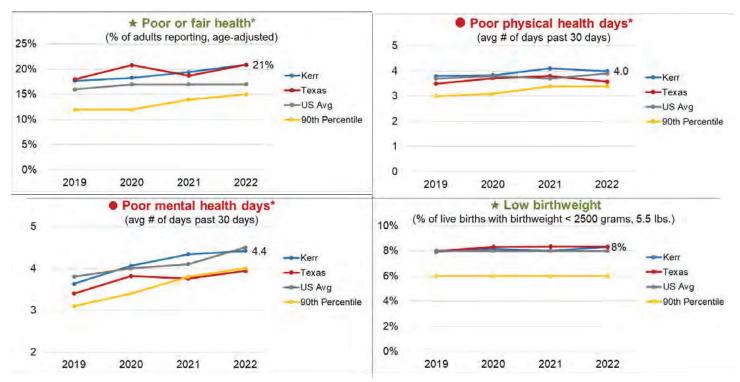
- Kerr County had shorter life expectancy at 77.3 years than TX at 78.4 and the U.S. at 78.8.
- Kerr County had higher number of years of potential life lost prior to age 75 than TX and the U.S.
- Kerr County had higher death rates for cancer, respiratory disease, liver, hypertensive renal disease, and suicide than TX.
- The white population had a lower life expectancy than the Hispanic population.
- Texas' teen suicide rate increased from 2019 to 2020.



Photo Credit: Peterson Health coordinated and offered multiple COVID-19 vaccination clinics to meet the needs of the community.

QUALITY OF LIFE

Quality of life was measured by % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams or 5.5 lbs. **Kerr County ranked 69th in quality of life out of 254 Texas counties.**



Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2019

Source: County Health Rankings: National Center for Health Statistics – Natality files (2014-2020)

QUALITY OF LIFE STRENGTHS

- Kerr County had the same percentage of adults reporting poor or fair health as TX at 21% but higher than the U.S.
- Kerr County had the same percentage of low birthweight babies at 8% as TX and slightly higher than the U.S.

QUALITY OF LIFE OPPORTUNITIES

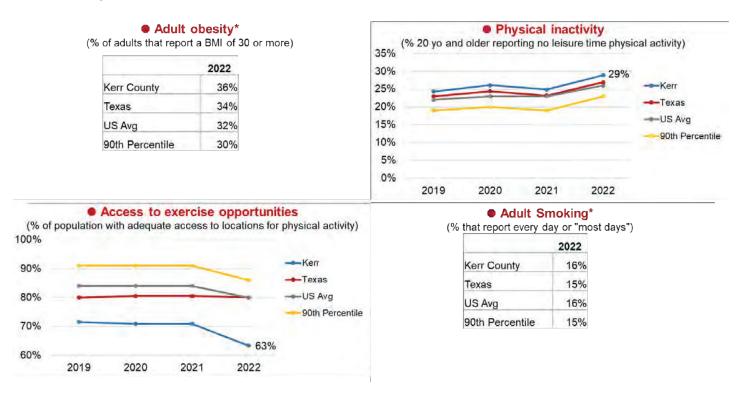
- Kerr County had a higher average number of poor mental health days in the last 30 days than TX at 4.4 but lower than the U.S at 4.5.
- Kerr County had a higher average number of poor physical health days at 4.0 than TX at 3.6 and the U.S. at 3.9.

HEALTH FACTORS OR DETERMINANTS

Health factors or determinants rankings are comprised of measures related to health behaviors (30%), clinical care (20%), social and economic factors (40%), and physical environment (10%). **Kerr County ranked 18th in health factors out of 254 Texas counties.**

HEALTH BEHAVIORS

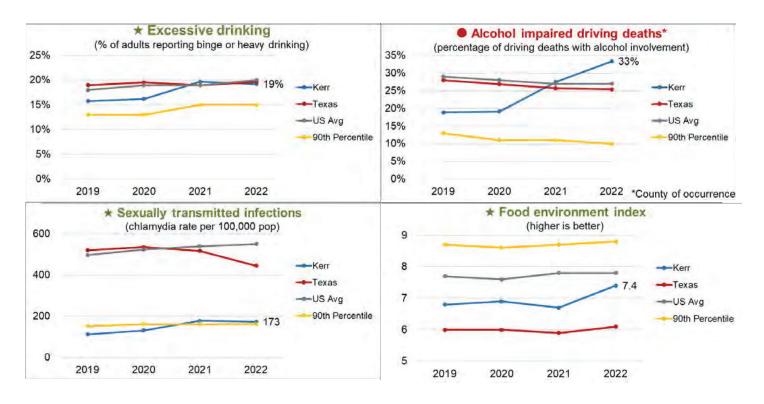
Health behaviors are made up of nine measures and account for 30% of the county rankings. **Kerr County ranked 37th in health behaviors out of 254 counties in Texas.**



Source: Obesity & Physical Inactivity – CHR, Behavioral Risk Factor Surveillance System, 2019

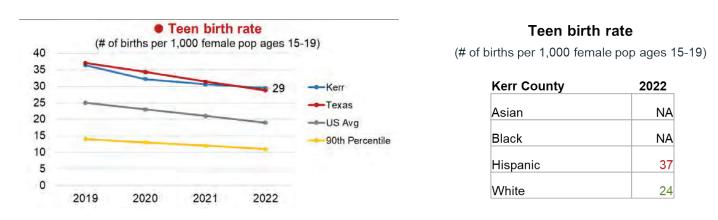
Source: Access to exercise opportunities – CHR, Business Analyst, Delorme map data, Esri, & US Census Tigerline Files, 2010 and 2021. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios, and pools based on SIC codes)

Source: Smoking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019



Source: Excessive drinking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019 Source: Alcohol-impaired driving deaths - CHR; Fatality Analysis Reporting System, 2016-2020 Source: STIs - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2019 Source: Food environment: CHR; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2019

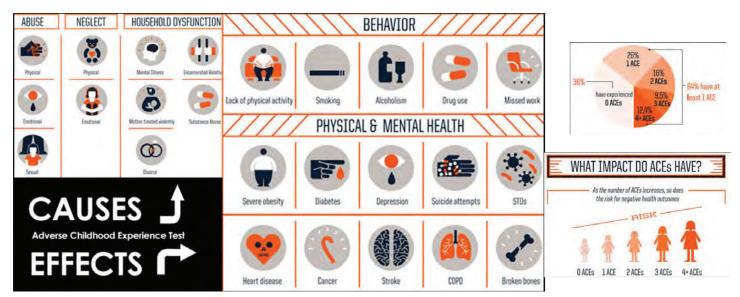
The food environment index is comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food in the past year.



Source: Teen birth rate -CHR; National Center for Health Statistics -Natality files, 2014-2020

ADVERSE CHILDHOOD EXPERIENCES (ACES)

Abuse, neglect, and household dysfunction have the effect of poor health behaviors as well as poor physical and mental health. The more ACEs a child has, the higher risk they are for poor health outcomes. According to the CDC, "Adverse Childhood Experiences have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity." ACEs are strongly associated with social inequities. While present in all populations, females, LGBTQ+, people of color, and those experiencing income disparities are at a greater risk of experiencing multiple ACEs.



	0 ACEs	1 ACEs	2+ ACEs
United States	54%	25%	22%
California	58%	26%	16%

https://www.childhealthdata.org/browse/survey/results?q=4783&r=1&r2=6

Among children from birth through age 17, percentage reported to have had zero, one, and two or more ACEs, nationally and by state.

Data Source: National Survey of Children's Health 2016, Health Resources and Services Administration, Maternal and Child Health Bureau. https://mchb.hrsa.gov/data/national- surveys. Citation: Child and Adolescent Health Measurement Initiative. 2016 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [09/15/21] from [www.childhealthdata.org].

ACEs data is not available for Kerr County. However, Texas had a lower percentage of youth with no ACEs and higher percentages of youth with 1 or 2 ACEs.

HEALTH BEHAVIORS STRENGTHS

- Nineteen percent of Kerr County reported binge or heavy drinking lower than TX and the U.S. both at 20%.
- Sexually transmitted infections measured by chlamydia rate per 100,000 population were lower in Kerr County (173) than TX (445) and the U.S. (551).
- The food environment index was higher (better) in Kerr County (7.4) than TX (6.1) but lower than the U.S. (7.8).

HEALTH BEHAVIORS OPPORTUNITIES

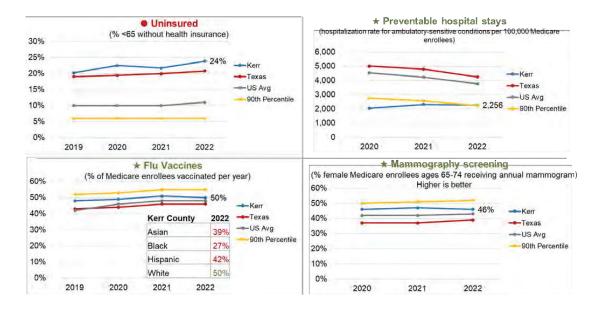
- Adult obesity in Kerr County was 36%, higher than TX at 34% and the U.S. at 32%. Obesity
 puts people at increased risk of chronic diseases including diabetes, kidney disease, joint
 problems, hypertension, and heart disease. Obesity can cause complications in surgery
 and with anesthesia. It has been implicated in Alzheimer's and often leads to metabolic
 syndrome and type 2 diabetes.
- Physical inactivity was higher in Kerr County at 29% than in TX at 27% and the U.S. at 26%.
- Sixty-three percent of Kerr County had access to exercise opportunities compared to 88% of TX and the U.S.
- Sixteen percent of Kerr County smoked, higher than TX at 15% and same as the U.S. at 16%.
- Alcohol impaired driving deaths were higher in Kerr County (33%) than in TX and the U.S. both at 25% and 27% respectively.
- The teen birth rate in Kerr County was 29 births per 1,000 female population ages 15-19, the same TX and higher than the U.S. at 19 births per 1,000. The trend has decreased since 2019.
- The teen birthrate was higher among Hispanics at 37 births per 1,000 female population ages 15-19.



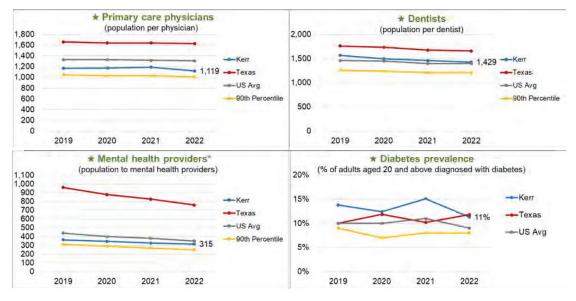
Photo Credit: Peterson Health's dedicated Radiology and Imaging team provide exceptional care around the clock.

CLINICAL CARE

Clinical care ranking is made up of seven indicators that account for 20% of the county rankings. **Kerr County ranked 8th in clinical care out of 254 Texas counties.**



Source: Uninsured - CHR; Small Area Health Insurance Estimates, 2019



Source: Preventable hospital stays, mammography screening, flu vaccinations – CHR, CMS Mapping Medicare Disparities Tool, 2019

Source: Pop to PCP - CHR; Area Health Resource File/American Medical Association, 2019

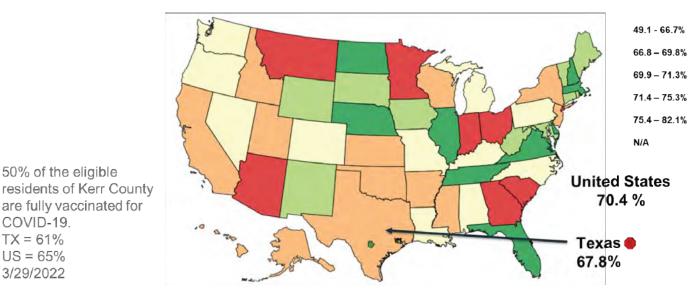
Source: Pop to Dentists - CHR; Area Health Resource File/National Provider Identification file, 2020

Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) CHR; CMS, National Provider Identification, 2021

Source: Diabetes prevalence - Behavioral Risk Factor Surveillance System, 2019

TX had a lower vaccination percentage among children 19-35 months old than the U.S. and lower COVID-19 vaccination rates.

VACCINATION COVERAGE AMONG CHILDREN AND COVID-19 VACCINATION RATES

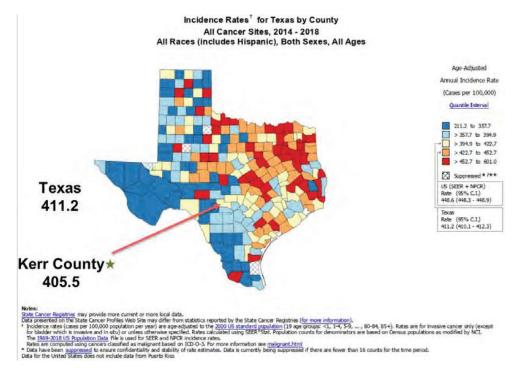


Combined 7-vaccine Series Vaccination % coverage among children 19-35 months by state National Immunization Survey-Child (NIS-Child), 2017

Combined 7 vaccine series (4:3:1:3*:3:1): 4 or more doses of DTaP, 3 or more doses of Polio, 1 or more doses of MMR, Hib full series (3 or 4 doses, depending on product type received), 3 or more doses of HepB, 1 or more doses of Varicella, and 4 or more doses of PCV (In 2013 data, referred to as 4:3:1:4:3:1:4-FS)

Source: CDC, National Center for Immunization and Respiratory Diseases (2017 data posted 2020)

CANCER INCIDENCE RATES – TX COUNTIES



Cancer incidence rates (cases per 100,000 population) were lower in Kerr County (405.5) than in TX at 411.2 and the U.S. (449).

CLINICAL CARE STRENGTHS

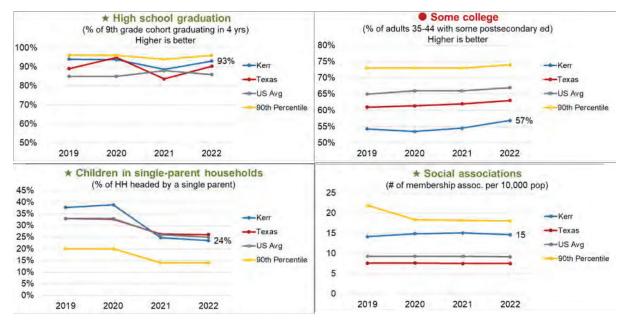
- The percent of Medicare enrollees with flu vaccines per year was higher in Kerr County at 50% than TX (46%) and the U.S. (48%).
- Preventable hospital stays in Kerr County were 2,256 per 100,000 Medicare enrollees which was lower than TX (4,255) and the U.S. (3,767). Hospitalization ambulatory-care sensitive conditions, which are diagnoses treatable in outpatient settings, suggests that the quality of care provided in the outpatient setting was less than ideal. This measure may also represent a tendency to overuse hospitals as a main source of care. Preventable Hospital Stays could be classified as both a quality and access measure, as some literature describes hospitalization rates for ambulatory care-sensitive conditions primarily as a proxy for access to primary health care. *Source: CHR; Brumley R, Enguidanos S, Jamison P, et al. Increased satisfaction with care and lower costs: Results of a randomized trial of in-home palliative care. J Am Geriatric Soc. 2007;55:993-1000.*
- Mammography screening was higher in Kerr County at 46% than TX at 39% and the U.S. at 43%.
- The percentage of adults with diabetes in Kerr County was 11%, lower than TX (12%) and higher than the U.S. (9%).
- The population per primary care physician was at 1,119 in Kerr County lower than TX (1,629) and the U.S. (1,310).
- The population per dentists was 1,429 in Kerr County lower than TX (1,660) and same as the U.S.
- The population per mental health providers was 315 in Kerr County, lower than TX (759) and the U.S. (350).

CLINICAL CARE OPPORTUNITIES

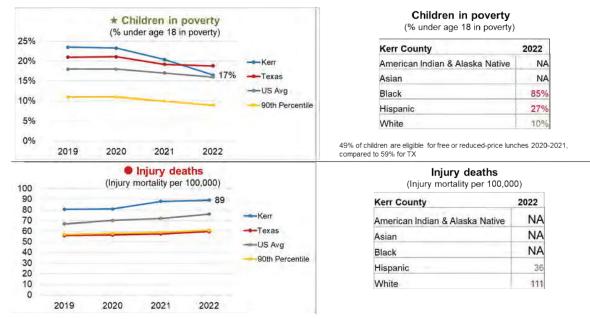
- The percent of population under 65 years old without health insurance was 24% in Kerr County, higher than TX at 21% and the U.S. at 11%.
- COVID-19 vaccinations were lower in Kerr County as TX at 50% and the U.S. at 65%
- The cancer incidence rate in Kerr County was 405.5 cases per 100,000 population which was lower than TX (411.2), and lower than the US (449).
- The percentage of vaccination coverage among children 19-35 months was lower in TX at 67.8% than the U.S. at 70.4%.

SOCIAL AND ECONOMIC FACTORS

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category. **Kerr County ranked 42nd in social and** economic factors out of 254 Texas counties.



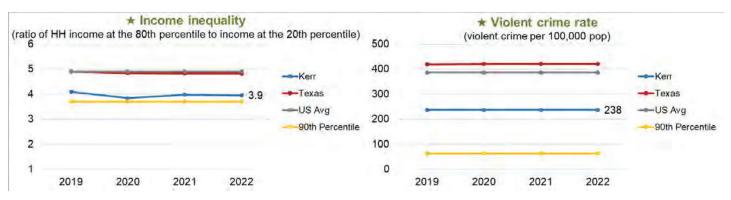
Source: High school completion– CHR, American Community Survey, 5-yr estimates, 2016-2020 Source: Some college CHR; American Community Survey, 5-year estimates, 2016-2020. Source: Children in poverty - CHR; U.S. Census, Small area Income and Poverty Estimates, 2020 Source: Social associations - CHR; County Business Patterns, 2019



Source: Income inequality and children in single-parent households - CHR; American Community Survey, 5-year estimates 2016-2020

Source: Injury deaths – CHR; National Center for Health Statistics – Mortality Files, 2016-2020 Source: Violent crime - CHR; Uniform Crime Reporting – FBI, 2014 & 2016

SOCIAL AND ECONOMIC FACTORS STRENGTHS



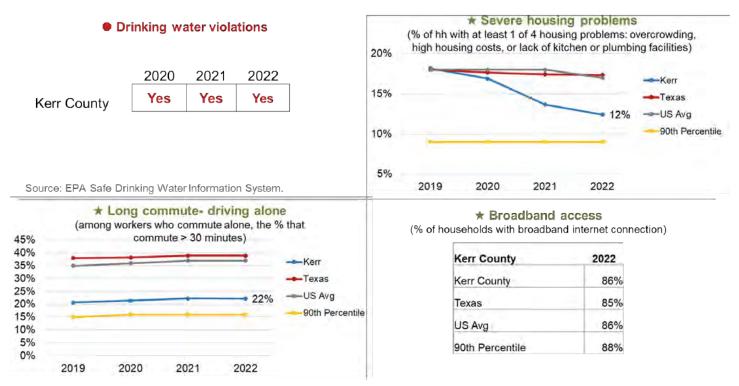
- The high school graduation rate was higher in Kerr County at 93% than TX (90%) and the U.S. (86%).
- The percentage of children in single-parent households was 24% in Kerr County, lower than TX (26%) and the U.S at 25%.
- Social associations were higher in Kerr County at 15 memberships per 10,000 population than TX at 8 and the U.S. at 9 memberships. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations.
- The children in poverty rate was lower for Kerr County at 17% than TX at 19% but higher than the U.S. (16%).
- Income inequality represents the ratio of household income at the 80th percentile compared to income at the 20th percentile. Income inequality was lower in Kerr County at 3.9 than TX at 4.8 and the U.S. at 4.9.
- The violent crime rate in Kerr County was 238 violent crimes per 100,000 population, which was lower than in TX at 420 and the U.S. at 386.
- The poverty estimates for 2020 showed Kerr County at 11.6%, lower than TX (13.4%) the U.S. (11.9%).

SOCIAL AND ECONOMIC FACTORS OPPORTUNITIES

- Fifty-seven percent of Kerr County adults had some post-secondary education which was lower than TX (63%) and the U.S. (67%).
- Injury deaths were higher in Kerr County at 89 per 100,000 population than TX (51) and the U.S. (76). White injury deaths were higher at 111 than Hispanic deaths at 36.
- Higher percentage of Black (85%) and Hispanic (27%) children were in poverty than children in general in the county at 17%.
- The median household income in Kerr County was \$57,405, lower than TX at \$63,524 and the U.S. at \$64,730.

PHYSICAL ENVIRONMENT

Physical environment contains four measures in the category and accounts for 10% of the county rankings. **Kerr County ranked 86th in physical environment out of 254 Texas counties.**



Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 2020 Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2014-2018

Source: Driving alone to work and long commute – County Health Rankings: American Community Survey, 5-year estimates, 2016-2020

Source: Air pollution – County Health Rankings: CDC National Environmental Health Tracking Network, 2018 Source: Broadband access – CHR; American Community Survey, 5-yr estimates, 2016-2020

PHYSICAL ENVIRONMENT STRENGTHS

- Broadband access was higher in Kerr County at 86% than TX (85%) and the same as the U.S.
- Kerr County had a lower percentage of severe housing problems at 12% than TX and the U.S. at 17%.
- 22% of workers in Kerr County who commute alone commute over 30 minutes, lower than TX at 39% and the U.S. at 37%.

PHYSICAL ENVIRONMENT OPPORTUNITIES

• Kerr County reported drinking water violations in each of the last three years.

THERE WERE FOUR BROAD THEMES THAT EMERGED IN THIS PROCESS:

- Kerr County needs to continue to create a "Culture of Health" which permeates throughout the towns, employers, churches, and community organizations to embody commitment to health improvement.
- There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
- While any given measure may show an overall good picture of community health, subgroups such as the lower income census tracts may experience lower health status measures.
- It takes partnerships with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. Kerr County has many assets to improve health.



Photo Credit: Peterson Health nurses consistently rank in the nation's top percentile for providing the highest level of exceptional, compassionate, patient-centered care.

ASSESSMENT RESULTS

PRIORITIZATION OF HEALTH NEEDS

Prioritization Criteria

At the Community Health Summit, the attendees reviewed the community health information and used the criteria below to prioritize the health needs in Kerr County.

Magnitude / Scale of the Problem	How big is the problem? How many people does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues?
Seriousness of the Consequences	What degree of disability or premature death occurs because of this problem? What would happen if the issue were not made a priority? What is the level of burden on the community (economic, social, or other)?
Feasibility	Is the problem preventable? How much change can be made? What is the community's capacity to address it? Are there available resources to address it sustainably? What's already being done and is it working? What are the intrinsic barriers and how big are they to overcome?

MOST SIGNIFICANT COMMUNITY HEALTH NEEDS

The following needs were prioritized by attendees at the Community Health Summit. Using a nominal group technique, each attendee received three sticky notes and selected their top three health needs and posted their ideas on paper at the front of the room.

- 1. Mental health 35 votes
- 2. Access to care and insurance, coordination of resources 29 votes
- 3. Healthy eating / active living decrease obesity, diabetes 24 votes
- 4. Substance misuse 15 votes
- 5. Socioeconomics, housing, environmental issues, social determinants of health 13 votes
- 6. Staffing shortages, work skills 7 votes

ELEVATING THE COMMUNITY

COMMUNITY HEALTH SUMMIT BRAINSTORMING

SIGNIFICANT HEALTH NEEDS: GOALS AND ACTIONS

Once the stakeholders prioritized the most significant health issues, we discussed what might be done to improve the health issue. Below are notes from the brainstorming session.

1 Mental Health

Goal 1 - Organize a Behavioral Health Response Team

Action 1 – Maintain the Mental Health Coalition

Action 2 – Have higher rotation of team members, preventing burnout

Resources/Collaborators Needed: Grants, health navigator in jail, 24/7 rotations

Goal 2 – Funding and Early Intervention

Action 1 – Acquire grants to increase funds for resources and adequately compensate workers

Action 2 – Integrate Juvenile detention center with mental health efforts and law enforcement, providing on-site navigator to conduct mental health assessments

Resources/Collaborators Needed: Grants

2 Access to Care and Insurance, Coordination of Resources

Goal 1 - Centralized Healthcare Resources

- Action 1 Seek funding opportunities for staffing and expenses
- Action 2 Create hotline and centralized office space for staff

Goal 2 – Reduce Barriers for Uninsured to Receive Healthcare

- Action 1 Conduct wellness checks via mobile/pop-up stations during special events
- Action 2 Identify non-profit organizations and other funding sources
- Action 3 Expand Raphael Clinic's capabilities

3 Healthy Eating / Active Living to Decrease Obesity, Diabetes

Goal 1 – Decrease BMI to 31% in 3 Years

Action 1 – Increase community education on affordable, healthy eating

Action 2 – Collaborate with schools and businesses to identify healthy food choices

Resources/Collaborators Needed: Churches, Businesses, Restaurants, KISD, Peterson Health, HEB

Goal 2 – Increase Access to Exercise Opportunities by 80%

Action 1 – Build Wellness Center

Action 2 – Increase access to walking trails, parks, specifically in communities without **Resources/Collaborators Needed:** City, County, HOAs, Schools

4 Substance Misuse

Goal 1 - Reduce Alcohol and Tobacco Use

Action 1 – Increase education of tobacco use, encourage prevention and cessation Action 2 – Increase education on responsible drinking and alcohol impaired driving Resources/Collaborators Needed: City/County, Businesses, Government, Hospitals, Universities, ISDs

Goal 2 – Reduce Other Drug Abuse

Action 1 – Identify at-risk people, groups, or areas

Action 2 – Partner with community resources such as the Recovery Community Coalition, other social assistance groups, law enforcement

Resources/Collaborators Needed: Recovery Community Coalition, Social Assistance Groups, Law Enforcement

5 Socioeconomic, Housing, Environmental Issues, Social Determinants of Health

Goal 1 – Find Affordable Housing under \$250,000, Rentals under \$1,000

Action 1 – Collaborate with employers, city, and county to explore tiny home developments

Action 2 – Provide financial education, improve financial literacy

Resources/Collaborators Needed: Financial Education, Transitional Housing, Schreiner University, Marketing

Goal 2 – Raise Awareness of Resources

Action 1 – Use communication outlets and local political events to inform about resources

Action 2 – Repair homes for those who need assistance, utilize vacation homes for temporary housing

Resources/Collaborators Needed: Home-based childcare, local childcare businesses, KISD, Peterson Health, James Avery, HEB, Parenting Resource Center of Kerrville

6 Staffing Shortages and Work Skills

Goal 1 – Train Existing Workforce Population

Action 1 - Bring workforce and available resources together

Action 2 – Raise awareness of current training programs and implement new ones

Resources/Collaborators Needed: High School Vocational Training, Local Businesses, Schreiner University, Christian Job Corps

Goal 2 – Increase Childcare in the Community

Action 1 – Convene body of employers and childcare providers

Action 2 – Educate employers on advantage of investment in childcare coalition, other social assistance groups, law enforcement

Resources/Collaborators Needed: Schreiner University, Local Government & Planning

2018 IMPACT AND IMPLEMENTATION

COVID-19 impacted implementation in 2020. Groups were unable to meet in person and services were limited in the community. However, progress was made on significant health needs identified in preceding CHNA prior to COVID, as shown below.

GOALS FOR IMPROVEMENT	ACTIVITIES TO ADDRESS HEALTH NEEDS	RESULTS, IMPACT, AND DATA SOURCES
SIGNIFICANT HEALTH NEED 1: ACCES	SS TO CARE AND INSURANCE	
Increase Access to Specialty Care	Investment in physician infrastructure – Employed physicians for the following services: Endocrinology, General Cardiology, Interventional Cardiology, Pain Management, and Rheumatology Medical Director for Hospice, Home Health, Providers at Home, Care Coordination, and Long-term Care	
Increase Access to Primary Care	Extended services to Comfort / Fredericksburg	
	Added clinic to Doyle Community through BUILD grant	
	Expanded Urgent Care services in new facility	
	Created access to COVID-19 testing, vaccine clinics, and treatment	
Increase Access to Dental Care	Access to dental care through SMILES Foundation sponsorship	
Increase Access to Care for the Uninsured	Continued healthcare for uninsured/underinsured through Peterson Community Care (Rural Health Clinic)	
	Continued Steep Discount Program offering to allow community affordable healthcare	
Improve Transportation	Underwriting of Kerr Connect to enable ease of access to medical services	
SIGNIFICANT HEALTH NEED 2: OBES	TY – HEALTH EATING AND ACTIVE LIVING	
Improve Nutrition	Service on Kerrville ISD's Student Advisory Committee with heavy focus on childhood obesity and nutrition	
	Hospital dietitian's frequent community talks on health and nutrition	
	Food and nutrition courses	
Increase Activity	Sponsorship of school district races and exercise programs	
	Sponsorship of local runs and races	
	Hosted Camp Gladiator exercise programs	
	Internal offerings of group exercise	
Increased Wellness Programs	Facilitated numerous community health and wellness programs	
	Offered health fair/screening programs	
	Growth of Peterson's wellness center and programs	
	Representation on City of Kerrville Recovery Coalition	
	Created Physical, Spiritual, and Financial Wellbeing Committees	

2018 ASSESSMENT ANALYSIS

GOALS FOR IMPROVEMENT	ACTIVITIES TO ADDRESS HEALTH NEEDS	RESULTS, IMPACT, AND DATA SOURCES
SIGNIFICANT HEALTH NEED 3: MEN	ITAL HEALTH AND SUBSTANCE ABUSE	
Raise Awareness, Increase Education	Media awareness of mental health challenges	
	Facilitation of Opioid Awareness Seminars	
Create More Resources and Partnerships	Work with state and national representatives for legislation for funding and increase access for mental health resources	
	Developed a Kerr Country Mental Health Coalition	
	Recruited mental health profressional for internal staff	
	Collaboration / Higher level of involvement with MHMD	
	Collaboration with City of Kerrville Police/Kerr Country Sheriff	
	Representation on City of Kerrville Recovery Coalition	
	Created Physical, Spiritual, and Financial Wellbeing Committees	
SIGNIFICANT HEALTH NEED 4: CHIL	DREN'S HEALTH ISSUES	
Aid Programs that Promote Health and Wellness	Collaboration and financial support of school district events and programs that raise awareness on health and wellness	
	Sponsorship and volunteerism for the SMILES Foundation Dental Clinic	
	Sponsorship of community programs focused on children (Big Brother / Big Sister, Mustard Seed Ministries, the Doyle Community Center, etc.)	
	Work with school district PTO's and financial assistance with exercise equipment / playgrounds	
	Support of new programs/purchases for school districts	
Create More Resources	Participation in "Back to School" Drives to provide children with supplies	
	Dietitian support through grocery store tours/label reading	
	Multiple free health fairs / screenings	
SIGNIFICANT HEALTH NEED 5: SOC	IOECONOMIC / HOUSING / ENVIRONMENTAL	
Support Existing Programs	Active participation on multiple housing committees to lead efforts for affordable housing in Kerr County	
	Monetary and leadership support of Kerr Connect to provide free transportation to the community	
	Matching funds for the BUILD grant to provide healthcare/ education to the Doyle Community	
Create More Resources	Providing affordable healthcare for the uninsured through Peterson Community Care (Rural Health Clinic)	
	Offering the Steep Discount Program	
	Care Coordination Assistance	
SIGNIFICANT HEALTH NEED 6: CHR	ONIC DISEASES	
Increase Available Services	Growing the Peterson Medical Associates family to meet the needs of the region	
	Adding Rheumatology and Endocrinology	1
	Hired a Nurse Navigator – Initial focus assisting those with Congestive Heart Failure	

COMMUNITY HEALTH NEEDS ASSESSMENT FOR KERR COUNTY

Completed by PETERSON HEALTH in partnership with STRATASAN.





COMMUNITY **ASSET INVENTORY**

The document contains a list of community assets and resources that can help improve the health of the community and assist with implementation of the plan accompanying this document. The focus group also identified community resources to improve health, which are listed on page 20 of the Community Health Needs Assessment.

TABLE OF **CONTENTS**

- 46 Mental Health
- 47 Access to Health Care / Insurance
- 49 Healthy Eating / Active Living
- 50 Substance Misuse
- 51 Socioeconomics
- **53** Staffing Shortages
- 54 Sources
- 55 Update and Change Form



MENTAL HEALTH

COUNSELING SERVICES

DIVINITY FAMILY SERVICES

1312 Bandera Highway Kerrville, TX 78028 **830.890.5838**

KERR COUNTY MENTAL HEALTH CENTER

955 Water Street Kerrville, TX 78028 830.257.6553

NEW HOPE COUNSELING CENTER

1127 E Main Street, Suite 202 Kerrville, TX 78028 830.257.3009

PSYCHOLOGY & COUNSELING SERVICES

123 Commerce Street #A Kerrville, TX 78028 **830.792.4477**

HILL COUNTRY MHDD CENTERS

819 Water Street, Suite 300 Kerrville, TX 78028 **830.792.3300**

TEXAS HILLS PSYCHOTHERAPY & HOME STUDY SERVICES

320 Jefferson Street Kerrville, TX 78028 **830.739.8185**

LAMB PSYCHOLOGICAL SERVICES, PLLC

2210 Bandera Highway, Suite C1 Kerrville, TX 78028 830.391.8998

ACCESS TO HEALTH CARE / INSURANCE

HEALTH DEPARTMENTS

HILL COUNTRY WIC SERVICES

838 Sidney Baker Street, Suite B Kerrville, TX 78028 830.257.4400

KERR COUNTY HEALTH DEPARTMENT

819 Water Street, Suite 290 Kerrville, TX 78028 830.896.5515

KERRVILLE CITY HEALTH DEPARTMENT

800 Junction Highway Kerrville, TX 78028 **830.792.8354**

HOSPITALS

PETERSON REGIONAL MEDICAL CENTER

551 Hill Country Drive Kerrville, TX 78028 **830.896.4200**

KERRVILLE STATE HOSPITAL

721 Thompson Drive Kerrville, TX 78028 830.896.2211

INSURANCE ASSISTANCE

BENEFIT SOLUTIONS

952 Jefferson Street Kerrville, TX 78028 830.896.3727

BOOTH COMPREHENSIVE HEALTH

1503 Carol Ann Drive Kerrville, TX 78028 830.257.5344

TEXAS INSURANCE ADVISERS LLC

339 W Water Street, Suite 6 Kerrville, TX 78028 **830.307.7585**

BCFS HEALTH & HUMAN SERVICES

1127 E Main Street Kerrville, TX 78028 830.896.0993

HUMAN SERVICE DEPARTMENT

819 Water Street, Suite 230 Kerrville, TX 78028 **830.896.3933**

CLINICS

FAMILY PRACTICE ASSOCIATES

220 Wesley Drive Kerrville, TX 78028 830.896.4711

FRANKLIN CLINIC

723 Hill Country Drive, Suite C Kerrville, TX 78028 **830.792.5800**

PETERSON COMMUNITY CARE

1740 Junction Highway Kerrville, TX 78028 **830.258.7900**

PHOENIX MEDICAL ASSOCIATES

222 Sidney Baker Street S, Suite 500 Kerrville, TX 78028 830.865.7675

RAPHAEL COMMUNITY FREE CLINIC

1807 Water Street Kerrville, TX 78028 830.895.4201

PETERSON URGENT CARE

130 W Main Street Kerrville, TX 78028 830.258.7669

PETERSON MEDICAL PLAZA

1331 Bandera Highway Kerrville, TX 78028 830.896.6262

HCM MEDICAL CLINIC – KERRVILLE

500 Thompson Drive Kerrville, TX 78028 830.990.1404

KERRVILLE MEDICAL CLINIC

707 Hill Country Drive, Suite 106 Kerrville, TX 78028 830.896.0404

OPTIMUM HEALTH

1411 Water Street Kerrville, TX 78028 830.895.5599

EDGEWATER CARE CENTER

1213 Water Street Kerrville, TX 78028 830.896.2411

CANCER CARE NETWORK OF SOUTH TEXAS

694 Hill Country Drive Kerrville, TX 78028 **830.792.3434**

GENTIVA HOME HEALTH AND HOSPICE

1001 Water Street, Suite B-100 Kerrville, TX 78028 830.792.6200

PETERSON HOSPICE

250 Cully Drive Kerrville, TX 78028 830.258.7799

ALAMO HOSPICE

1232 Bandera Highway Kerrville, TX 78028 830.816.5024

RETINAL CONSULTANTS OF SAN ANTONIO

1446 Sidney Baker Street Kerrville, TX 78028 **210.615.1311**

HEALTHY EATING / ACTIVE LIVING

OBESITY / DIABETES RESOURCES

SANTE CLINICAL RESEARCH

1230 Bandera Highway Kerrville, TX 78028 830.890.5171

METABOLIC & NUTRITIONAL

723 Hill Country Drive Kerrville, TX 78028 830.896.0550

TEXAS DIABETES INSTITUTE – UNIVERSITY HEALTH

701 S Zarzamora Street San Antonio, TX 78027 **210.358.7000**

PETERSON REGIONAL MEDICAL CENTER

551 Hill Country Drive Kerrville, TX 78028 **830.896.4200**

KERRVILLE STATE HOSPITAL

721 Thompson Drive Kerrville, TX 78028 830.896.2211

PETERSON COMMUNITY CARE

1740 Junction Highway Kerrville, TX 78028 830.258.7900

PETERSON SPECIALTY CARE – ENDOCRINOLOGY

823 Junction Highway Kerrville, TX 78028 **830.258.6251**

SUBSTANCE MISUSE

HILL COUNTRY COUNCIL ON ALCOHOL AND DRUG ABUSE INC

102 Business Drive Kerrville, TX 78028 **830.367.4667**

LA HACIENDA TREATMENT CENTER

429 Earl Garrett Street Kerrville, TX 78028 830.521.5172

HILL COUNTRY CRISIS STABILIZATION

UNIT – MHDD 643 Sheppard Rees Road Kerrville, TX 78028 830.257.5111

CROSSROADS SOBER LIVING FOR MEN

1612 1st Street Ingram, TX 78025 210.954.4537

RIVER HILLS HEALTH AND REHAB CENTER

2091 Bandera Highway Kerrville, TX 78028 **830.257.9900**

SOCIOECONOMICS

ECONOMIC DEVELOPMENT

KERR ECONOMIC DEVELOPMENT CORP.

1700 Sidney Baker Street, Suite 100 Kerrville, TX 78028 **484.531.7854**

KERRVILLE AREA CHAMBER OF COMMERCE

1700 Sidney Baker Street, Suite 100 Kerrville, TX 78028 830.896.1155

WEST KERR CHAMBER OF COMMERCE

3186 Junction Highway Ingram, TX 78025 **830.890.0499**

BASIC NEEDS ASSISTANCE

AMERICAN RED CROSS

333 Earl Garrett Street Kerrville, TX 78028 **830.257.4677**

HABITAT FOR HUMANITY KERR COUNTY

121 McGinnis Court Kerrville, TX 78029 **830.792.4844**

COMMUNITY SERVICE

ROTARY CLUB OF KERRVILLE KerrvilleRotary.org

KNIGHTS OF COLUMBUS

115 Doris Drive Kerrville, TX 78028

KERR COUNTY UNITED WAY

333 Earl Garrett Street Kerrville, TX 78028 **830.895.1555**

THE SALVATION ARMY

201 Holdsworth Drive Kerrville, TX 78028 830.315.5762

HOPE'S KITCHEN – FIRST PRESBYTERIAN CHURCH, FAMILY LIFE CENTER (GYM)

800 Jefferson Street Kerrville, TX 78028 830.257.3310

CALVARY TEMPLE CHURCH

3000 Loop 534 Kerrville, TX 78028 **830.895.3000**

BIG FIX HOMELESS CAT PROJECT

969 Prescott Street Kerrville, TX 78028 **830.896.6053**

COMMISSION TO EVERY NATION

815 Jefferson Street, Suite 140 Kerrville, TX 78028 **830.896.8326**

SPECIAL OPPORTUNITY CENTER

200 Francisco Lemos Street Kerrville, TX 78028 830.896.4606

MUSTARD SEED – FIRST UNITED METHODIST CHURCH

321 Thompson Drive Kerrville, TX 78028 **830.257.0800**

HILL COUNTRY WIC SERVICES

838 Sidney Baker Street, Suite B Kerrville, TX 78028 **830.257.4400**

COMMUNITY SERVICE (CONTINUED)

ST. VINCENT DE PAUL SOCIETY – NOTRE DAME KERRVILLE

1145 Broadway Kerrville, TX 78028 **830.896.6898**

BCFS HEALTH & HUMAN SERVICES

1127 E Main Street Kerrville, TX 78028 830.896.0993

FREE / LOW INCOME HOUSING

HERITAGE OAK APARTMENTS

2350 Junction Highway Kerrville, TX 78028 **830.896.5151**

CEDAR ELM PLACE

900 Paschal Avenue Kerrville, TX 78028 **830.792.3628**

KERRVILLE OAK APARTMENTS

850 Clay Street Kerrville, TX 78028 **830.792.3233**

KERRVILLE MEADOW APARTMENTS

2300 Junction Highway Kerrville, TX 78028 **830.896.2300**

BROOKHOLLOW APARTMENTS

612 Travis Street Kerrville, TX 78028 **830.257.6477**

LONG-TERM CARE & ASSISTED LIVING

BROOKDALE KERRVILLE

725 Leslie Drive Kerrville, TX 78028 830.257.6769

BROOKDALE GUADALUPE RIVER PLAZA

135 Plaza Drive Kerrville, TX 78028 **830.895.2626**

KERRVILLE ASSISTED LIVING

220 Harper Road Kerrville, TX 78028 **830.895.4600**

MOUNTAIN VILLA ASSISTED LIVING

2201 Junction Highway Kerrville, TX 78028 **830.792.4001**

RIVER POINT OF KERRVILLE

1441 Bandera Highway Kerrville, TX 78028 830.258.4150

NEW HAVEN MEMORY CARE OF KERRVILLE

747 Alpine Drive Kerrville, TX 78028 830.217.9544

ALPINE TERRACE

746 Alpine Drive Kerrville, TX 78028 830.896.2323

HILL COUNTRY OUTREACH INC

600 Leslie Drive Kerrville, TX 78028 830.792.6886

EDGEWATER CARE CENTER

1213 Water Street Kerrville, TX 78028 830.896.2411

STAFFING SHORTAGES

STAFFING AGENCIES

RELIABLE STAFFING

407 Junction Highway, Unit A Kerrville, TX 78028 **830.715.9282**

WORKFORCE SOLUTIONS ALAMO CAREER CENTER – KERRVILLE

1700 Sidney Baker Street, Suite 500 Kerrville, TX 78028 830.257.3171

LIFE SKILLS / JOB TRAINING

CHRISTIAN MEN'S JOB CORP

411 Meadow View Lane Kerrville, TX 78028 830.257.3545

CHRISTIAN WOMEN'S JOB CORP

1140 Broadway Kerrville, TX 78028 **830.895.3660**

FAMILIES & LITERACY, INC.

530 Methodist Encampment Road Kerrville, TX 78028 830.896.8787

KIWANIS CLUB OF KERRVILLE

Kerrville, TX 78028 830.895.5547

RECRUITMENT AGENCIES

SCHREINER UNIVERSITY

2100 Memorial Boulevard Kerrville, TX 78028 **800.343.4919**

SOURCES

ACCESS TO HEALTH CARE / INSURANCE ASSISTANCE

www.PetersonHealth.com

MENTAL HEALTH SERVICES

www.HHS.Texas.gov/services/mental-health-substance-use/state-hospitals www.HillCountry.org/services/kerr-county-mh-center www.CardwellTherapy.com www.NewHopeCounselingTX.org www.LambPsych.com

HEALTHY EATING / ACTIVE LIVING

www.PetersonHealth.com www.HHS.Texas.gov/services www.SanteClinicalResearch.com

SOCIOECONOMICS

www.CountyOffice.org/texas-department-of-health-kerr-county-kerrville-tx-1f4/

STAFFING SHORTAGES

www.Schreiner.edu

UPDATE AND CHANGE FORM

To update or add information, please complete and submit the form below.

NAME OF ORGANIZATION:
CONTACT NAME:
PHONE #:
FAX #:
EMAIL:
WEBSITE:
MAILING ADDRESS:
LIST SERVICES:
PLEASE DESCRIBE YOUR ORGANIZATION'S PURPOSE / SERVICE:

Submit updated information to: **PETERSON HEALTH MARKETING DEPARTMENT**



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