Parmer Medical Center

2022 Community Health

Needs Assessment

Table of Contents

List of Tables

List of Figures

Executive Summary

The AHEC of the Plains contracted the Texas Rural Health Association to conduct the Parmer Medical Center Community Health Needs Assessment (CHNA) for 2023. The purpose of the report is to assess the wellness and health needs of the community members, as wells as assess the available resources to fulfill their needs. The report will be used to support and develop programs or services that aim to fulfill the identified needs. The data presented includes Parmer County and the State of Texas to provide comparison between County and State levels. The assessment covers a wide range of topics with an intent to foster on-going community discussions.

Methodology

The following steps were conducted to complete the 2023 CHNA:

1. Collection and analysis of secondary data including demographic, socioeconomic, and health statistics
2. Community input was provided through a survey available online and distributed physically throughout the communities
3. Interviews with key community members who represent a) a broad interest of the community, b) populations of need, c) persons with specialized knowledge of community health needs

Data Sources

Data for this assessment was retrieved from the following sources:

1. U.S. Census Bureau: provides demographic and economic data of the United States and its population through surveys and other data collection methods. The data includes the American Community Survey which provides information on population, housing, and workforce in the United States.
2. County Health Rankings & Roadmaps: a program that, "provides data, evidence, guidance, and examples to build awareness of the multiple factors that influence health and support leaders in growing community power to improve health equity. The Rankings are unique in their ability to measure the health of nearly every county in all 50 states, and are complemented by guidance, tools, and resources designed to accelerate community learning and action."
3. Department of Health and Human Services and the Center for Disease Control: these agencies provide statistical data and guidance on health care issues from the national level to a county level.
4. A community survey distributed to county residents and those with special knowledge of health care and health care resources.
5. Key Informant Interview

About Parmer Medical Center

Mission Statement

"We are dedicated to serving the health needs of the people of our area, utilizing the skills of our healthcare family to provide compassionate and effective care." - PMC Mission Statement

Defined Community

Parmer Medical Center is a Critical Access Hospital. Located in Friona, Texas- PMC primarily serves the Parmer County region of the Texas Panhandle. This includes the cities of Friona, Bovina, and Farwell. PMC also serves the neighboring counties in New Mexico, Curry, Roosevelt, and Quay.

Services

PMC cares for inpatients with acute conditions such as heart failure, heart attack, diabetes, pneumonia and influenza, chronic obstructive pulmonary disease, etc. The Center is licensed for 25 inpatient beds.

In addition to acute care, Parmer Medical Center also offers a Swing Bed Program. This program was established by Medicare and is designed to provide extra care for those who need additional time to strengthen and heal before gaining independence and returning home. As part of the program, all the acute care beds may be used as skilled nursing beds for patients who qualify.

The Medical Center partners with the Friona Rural Health Clinic (Friona RHC) in order to devote to keeping the whole family healthy. Located adjacent to the PMC, the RHC focuses on prevention, early diagnosis, treatment and rehabilitation of illnesses and injuries. The clinic is also committed to helping patients better manage chronic health conditions and enjoy a healthier life.

Other hospital services include MRI, CT scanning, general x-ray, and ultrasound; physical, occupational and speech therapy. Testing services for inpatients and outpatients are also available. These include hematology, coagulation, chemistry, urinalysis, serology, therapeutic drug monitoring, anatomical and clinical pathology consultation, cytology, drug screen collection, blood gases, microbiology, and blood transfusion services.

Together these minimize the need for area residents to travel long distances to obtain care. This is particularly important for older patients and their families who find travel to other communities very difficult, as well as patients whose access to care is adversely impacted by their uninsured status.

Geographic Description: Distance to other facilities

The Northwest Texas Healthcare System is located 68 miles away from Parmer County. It is in Amarillo, Texas, which would be about a 1 hour and 15-minute drive.
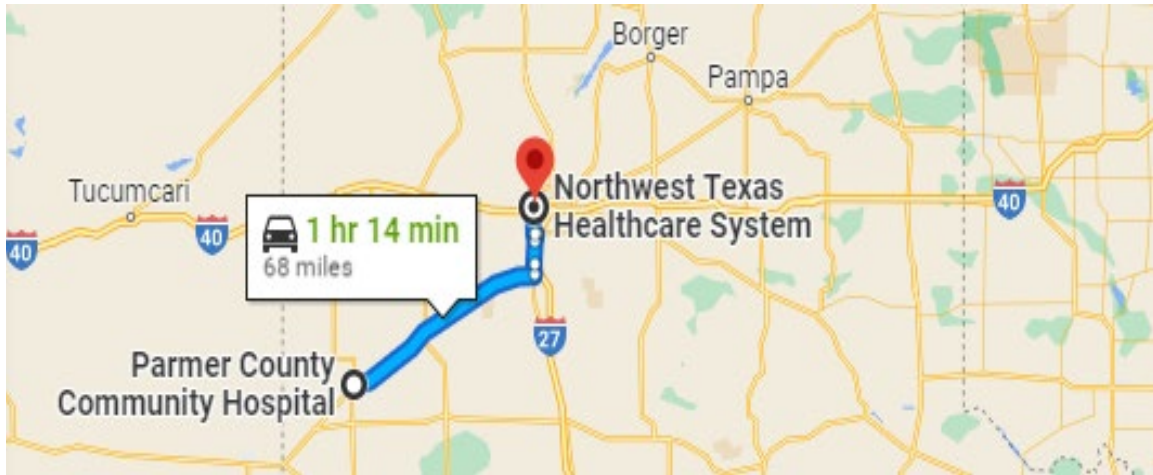
Figure 1: Distance to Amarillo Healthcare

The University Medical Center is located 97 miles away from Parmer County. It is in Lubbock, Texas. The drive to the University Medical Center would take about 1 hour and 30 minutes.
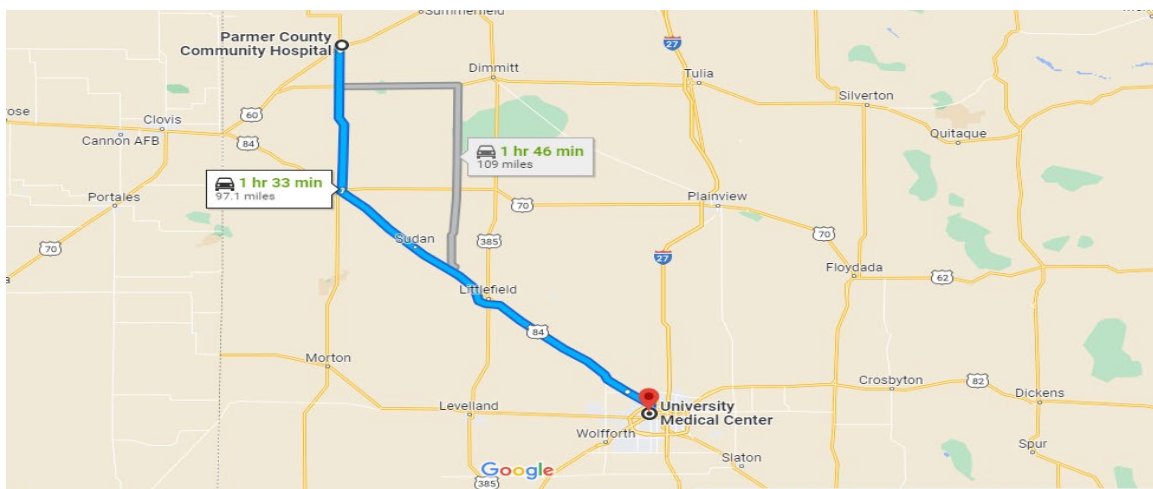
Figure 2: Distance to Lubbock Healthcare

Demographic Data

Gender

According to the 2020 American Community Survey 5-Year Estimates Subject Tables, the total population for Parmer County is 9,639. Within this total, 4,883 people are male while 4,756 are female.

Table 1: Total Population by Gender

Population	Parmer County, TX	Texas
Male	4,883	14,221,720
Female	4,756	14,413,722
Total	9,639	28,635,442

Source: 2020 ACS 5-Year Estimates Subject Tables

Race

Parmer County has a majority white population occupying 83.9 percent or 8,083 people. This is significantly higher than the Texas white majority which is 69.2 percent or 19,805,623 people.

Table 2: Total Population by Race

Race	Parmer County, TX	Texas	Parmer, TX (percent)	Texas Percent)
White alone	8,083	19,805,623	83.9%	69.2%
Black or African American alone	85	3,464,424	0.9%	12.1%
American Indian and Alaska Native alone	23	137,921	0.2%	0.5%
Asian alone	61	1,415,664	0.6%	4.9%
Native Hawaiian and Other Pacific Islander alone	0	25,328	0.0%	0.1%
Some other race alone	487	1,788,398	5.1%	6.2%
Two or more races:	900	1,998,084	9.3%	7.0%
Total:	9,639	28,635,442		

Source: 2020 ACS 5-Year Estimates Subject Tables

Median Age

Parmer County has a higher median age for males compared to the state median age for males. The opposite is true for females. The table shows that the average median age in the state of Texas is slightly higher than the median age for Parmer County.

Table 3: Median Age

Median Age (yrs.)	Parmer County, TX	Texas
All	34.6	34.8
Male	34.4	33.9
Female	34.8	35.8

Source: 2020: ACS 5-Year Estimates Subject Tables

Population Change

Over the past decade, Parmer County has seen a decline in population by .6 percent. The population in 2010 was 10,269, while the population in 202 was recorded to be 9,869. Compared to the state of Texas which has seen a slight increase in population of 1.3 percent from 2010 to 2020.

Table 4: Population Changes

Area	Population, percent change - April 1, 2020 (estimates base) to July 1, 2021, (V2021)	Population Census April 1, 2010	Population Census July 1, 2020
Texas	1.3%	25,145,561	29,145,505
Parmer County, TX	-0.6%	10,269	9,869

Source: U.S. Census Bureau QuickFacts: Parmer County, Texas; United States

Social Determinants of Health

Social Determinants of health are the conditions in which people are born, grow, live, work, and age. Factors such as socioeconomic status, neighborhood and physical environment, employment, education, social support networks, food access, and access to health care are included. In order to improve the overall health of the community and reduce health disparities, all factors must be considered. The following lists major factors and some of their measures.

Education

High School Graduation

According to the U.S Census Bureau, the graduation rate for Parmer County is significantly lower than the graduation rate for the State of Texas. The data collection is shown in the table below.

Table 5: Percent of High School Graduation Rates

Area	High School Graduation Rates
Parmer County	74.1%
Texas	84.4%

Source: U.S. Census Bureau QuickFacts: Parmer County, Texas; United States

Enrollment of Population 3 years or older

Table 6: Education Enrollment by Grade

Area	Nursery or Preschool	Kindergarten	Grade 1 to 4	Grade 5 to 8	Grade 9 to 12	College or Undergrad	Graduate or Professional
Parmer County, TX	141	114	635	481	623	332	21
Texas	453,297	407,459	1,628,633	1,681,082	1,655,352	1,543,942	349,539

Source: 2020: ACS 5-Year Estimates Detailed Tables

Bachelor's Degree

According to the US Census Bureau, the percentage of people that have obtained a bachelor's degree in the state of Texas is more than double that of Parmer County.

Table 7: Percent of bachelor's degree

Area	Bachelor's Degree
Parmer County	15.1%
Texas	30.7%

Source: U.S. Census Bureau QuickFacts: Parmer County, Texas; United States

Clinical Care

Parmer County has been identified as a Health Professional Shortage area (HPSA) in primary care, dental health, and mental health by the Health Resources & Services Administration (HRSA). An HPSA has a shortage of providers in their designated areas. Also according to the HRSA, Parmer County is designated as a Medically Underserved Area (MUA). An MUA is an identified area with a lack of access to primary care services.

Uninsured

Parmer County has a significantly higher uninsured population than the total population of Texas. Lack of proper health insurance is a significant barrier to receiving needed care and maintaining financial security. It can lead to many being unable to pay medical bills and result in high levels of medical debt.

Table 8: Percent of Uninsured Population

Area	Uninsured
Parmer County, TX	28.0%
Texas	21.0%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Primary Care Providers

In Parmer County, there is one physician per 9,610 people. This is significantly lower than the Texas physician to people ratio which is one physician per 1,630 people. Having sufficient availability to primary care physicians is essential for both primary and preventative care.

Table 9: Primary Care Physicians

Area	Primary Care Physicians
Parmer County, TX	9,610:1
Texas	1,630:1

Source: Parmer, Texas | County Health Rankings & Roadmaps

Other Primary Care Providers

The ratio to primary care providers other than physicians is 870 people to 1. This is below the Texas ratio of 1050 people to 1 provider. These providers include nurse practitioners, physician assistants, and clinical nurse specialists who provide preventative and routine care.

Table 10: Other Primary Care Providers

Area	Other Primary Care Providers
Parmer County, TX	870:1
Texas	1,050:1

Source: Parmer, Texas | County Health Rankings & Roadmaps

Nutrition

Food Insecurity

Food insecurity is defined as a lack of adequate access to food. According to the county health rankings and roadmaps, the percentage of food insecurity in both Parmer County and Texas are very similar with a 1 percent difference.

Table 11: Percent of Food Insecurity

Area	Food Insecurity
Parmer County, TX	13%
Texas	14%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Limited Healthy Food Access

In both the State of Texas and Parmer County, the percentage of the population with limited access to healthy foods is 8 percent. This means a total of 772 people in Parmer County, and 2,290,836 people in Texas.

Table 12: Percent of Limited Access to Healthy Foods

Area	Limited Access to Healthy Foods
Parmer County, TX	8%
Texas	8%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Free or Reduced-Price Lunch

According to the county health ratings and roadmaps, the percentage of children in Parmer County that are eligible for free or reduced-price lunch is 72 percent. This percentage is 12 percent higher than the one for Texas, which is 60 percent.

Table 13: Percent of children eligible for free or reduced-price lunch

Area	Children eligible for free or reduced-price lunch
Parmer County, TX	72%
Texas	60%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Economic

According to the County Health Ratings and Roadmaps, economic factors such as employment and income can significantly affect the length and quality of life. This is because these factors determine how well people can make healthy choices and pay for health care.

Unemployment

The unemployment in Parmer County is lower than that of Texas by 5 percent. This data was taken from the county health rankings and roadmaps. It is expressed in the chart below.

Table 14: Percent of Unemployment

Area	Unemployment
Parmer County, TX	2.6%
Texas	7.6%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Median Household Income

According to the county health rankings, median household income is a well-recognized indicator of income and poverty. Texas reports a median household income of about $5,000 greater than that of Parmer County.

Table 15: Median Income

Area	Median Income
Parmer County, TX	58,558
Texas	63,826

Source: 2020: ACS 5-Year Estimates Subject Tables

People in Poverty

Poverty is a factor that corresponds to the leading causes of death such as lung cancer, strokes, and heart attacks. Parmer county records a poverty rate that is 1 percent higher than that of Texas.

Table 16: Percent of People in Poverty

Area	Poverty Rate
Parmer County, TX	15.2%
Texas	14.2%

Source: U.S. Census Bureau QuickFacts: Parmer County, Texas; United States

Children in Poverty

Children in poverty are associated with having toxic stress, chronic illness, nutritional deficits, and developmental delays. Children in poverty are known to stay in poverty in adulthood. It is also reported that children who are impoverished can have long lasting affects much later in life in areas such as health, academic achievement, and adult income. Parmer County reports a slightly lower percentage for children in poverty than the state of Texas.

Table 17: Children in Poverty

Area	Children in Poverty
Parmer County, TX	18%
Texas	19%

Source: Parmer, Texas | County Health Rankings & Roadmaps

Health Behaviors

According to the County Health Rankings and Roadmaps, many of the leading causes of death and disease in the nation are attributed to unhealthy behaviors. Below is the data pertaining to unhealthy behaviors in the State of Texas and Parmer County.

Adult Smoking

Smoking can cause cancer, heart disease, stroke, lung disease, and chronic obstructive pulmonary disease. Every year smoking kills about 480,000 people in the nation. In Parmer County, the percentage of adult smokers is 17 percent. This is 2 percent more than the percentage of adult smokers in the state of Texas.

Table 18: Percent of Adult Smokers

Area	Adult Smoking
Parmer County, TX	17%
Texas	15%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Adult Obesity

Obesity can increase the risk for health conditions such as coronary heart disease, type 2 diabetes, cancer, stroke, liver and gallbladder disease, sleep apnea and respiratory disease, osteoarthritis, and poor health status. Obesity is defined in the adult population as a BMI greater or equal to 30kg/m2. In Parmer County, the percentage of adult obesity is 4 percent higher than that of Texas. This data is represented in the table below.

Table 19: Percent of Adult Obesity

Area	Adult Obesity
Parmer County, TX	39%
Texas	34%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Excessive Drinking

Excessive drinking has been proven to be a risk factor of adverse health outcomes. Alcohol poising, hypertension, acute myocardial infarction, and sexually transmitted infections are examples of adverse health outcomes. Parmer County has a slightly lower percentage or adults who have reported binge or heavy drinking.

Table 20: Percent of Excessive Drinking

Area	Excessive Drinking
Parmer County, TX	18%
Texas	20%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Access to Exercise Opportunities

According to the county health roadmaps and rankings, increased physical activity lowers the risk of several health ailments. These include type 2 diabetes, cancer, hypertension, stroke, etc. Parmer County records an extremely lower percent of the population with access to places for physical activity.

Table 21: Percent of Access to Exercise

Area	Access to Exercise Opportunities
Parmer County, TX	16%
Texas	80%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Preventative Care

Mammography Screening

The table below shows the percentage of women ages 65-74 in Parmer County and Texas that have received an annual mammography screening. Mammography screening reduces breast cancer mortality. Parmer County record a slightly lower percentage than the state of Texas. The table below reports this data.

Table 22: Percent of Mammography Screening

Area	Mammography Screening
Parmer County, TX	33%
Texas	39%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Flu Vaccinations

Each year there are thousands of flu related deaths and hospitalizations. The best way to protect against influenza, or the flu, is the annual vaccine. The percentage of people who have received the vaccination is significantly lower in Parmer County than in the state of Texas.

Table 23: Percent of Flu Vaccinations

Area	Flu Vaccinations
Parmer County, TX	31%
Texas	46%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Physical Environment

The physical environment is where people work, learn, live, and play. The interaction with a person's physical environment takes place through the air they breathe, transportation access, the water they drink, the houses they live in, etc.

Severe Housing Cost Burden

The data below shows the percentage of the population that spends more than 50 percent of their income on housing. Often, housing is the largest expense for a family. When a severe housing cost burden is presented on a family, it often means the family is choosing between housing and other essentials. In Parmer County, this percent of the population is 6 percent lower than for the state of Texas.

Table 24: Percent of Severe Housing Cost Burden

Area	Severe Housing Cost Burden
Parmer County, TX	7%
Texas	13%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Homeownership

Homeownership in Parmer County is slightly higher than in the State of Texas, this data is reflected in the table below.

Table 25: Percent of Homeownership

Area	Homeownership
Parmer County, TX	65%
Texas	62%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Broadband Access

Parmer County's percentage of broadband access, or highspeed internet access, is 76 percent. This is significantly lower than the percentage of broadband access for Texas, which is 85 percent. According to the county roadmaps and rankings website having suitable access to the internet improves access to health care opportunities, employment, and education.

Table 26: Percent of Broadband Access

Area	Broadband Access
Parmer County, TX	76%
Texas	85%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Severe Housing Problems

The table below shows the percentage of household with at least one of four housing problems. These housing problems are: high costs; lack of kitchen facilities; lack of plumbing facilities; and overcrowding. When these housing problems occur it can increase harmful exposures and decrease one's sense of privacy and security. The data shows that Parmer County and Texas have the same percentage of severe housing problems at 17 percent.

Table 27: Percent of Severe Housing Problems

Area	Severe Housing Problems
Parmer County, TX	17%
Texas	17%

Source: Parmer, Texas | County Health Roadmaps & Rankings

Parmer Medical Center Survey Findings

A community survey was created and published using SurveyMonkey, a program in which custom polls and surveys may be curated and easily shared online via email and social platforms. SurveyMonkey has the ability to track and update the response data in real time. The survey was administered in English and was shared amongst the Parmer Medical Center community network. Sixteen respondents answered online, and 17 submitted handwritten hardcopies for a combined total of 33 respondents. Survey respondents were not required to answer all questions thus the number of respondents per question may vary. All survey data is represented in the figures and tables as follows. The complete survey is presented in the appendix.

Demographic data was collected on age, gender, and ethnicity of survey respondents. Data collected is shown in the Figure and Tables below.

Table 28: Age of Survey Respondents

Answer Choices	Responses
Under 18	0
18 to 25	3
25 to 34	4
35 to 44	7
45 to 54	6
55 to 64	6
65 or older	7

Figure 3: Gender of Survey Respondents

Gender
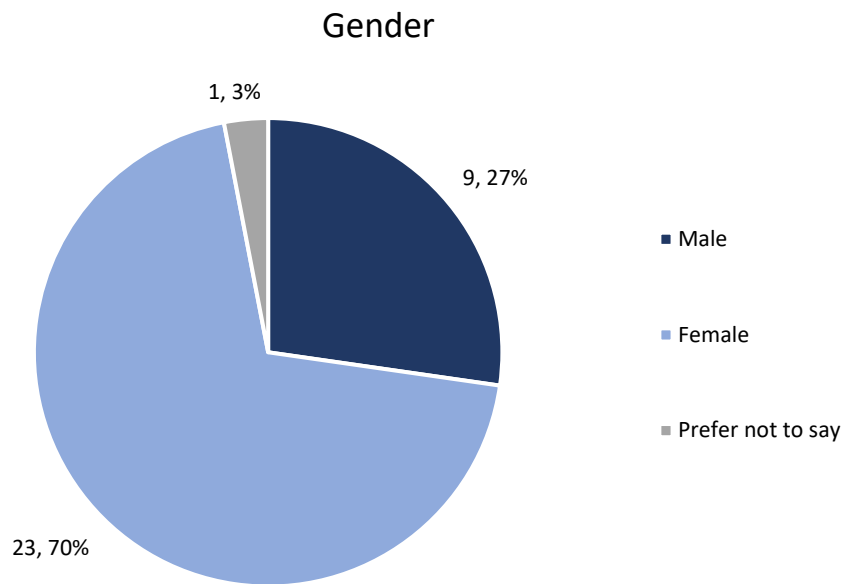
Table 29: Race & Ethnicity

Answer Choices	Responses	Response Percent
American Indian or Alaska Native	1	3
Asian or Asian American	0	0
Black or African American	0	0
Hispanic or Latino	14	42.5
Native Hawaiian or other Pacific Islander	0	0
White or Caucasian	14	42.5
Other	3	9
Prefer not to say	1	3

Table 30: Survey Respondents' City of Residence

Answer Choices	Response Total
Bovina	4
Farwell	3
Friona	26

Survey Respondents were asked to provide their highest level of education completed. The answer choices and data collected are shown in Table 31 below

Table 31: Highest Education Level Completed

Answer Choices	Responses	Response Percent
Some High School	5	15
High School Diploma	6	18
Some College or Vocational Training	11	33
Graduated College	4	12
Completed a Graduate or Professional School	7	21

Table 32: Total Annual Household Income

Answer Choices	Response Total	Response Percent
Under $15,000	0	0
Between $15,000-$29,999	5	15
Between $30,000-$49,999	9	27
Between $50,000-74,999	7	21
Between $75,000-$99,999	3	9
Between $100,000-$150,000	0	0
Over $150,000	4	12
Prefer not to answer	5	15

Table 33: Current Primary Care

Answer Choices	Responses	Response Percent
Yes, family doctor or health care professional	28	85
Yes, walk-in urgent care or emergency room	1	3
No	4	12

Figure 4: Health Information

What sources do you normally use to find out about healthcare providers or about health related questions?
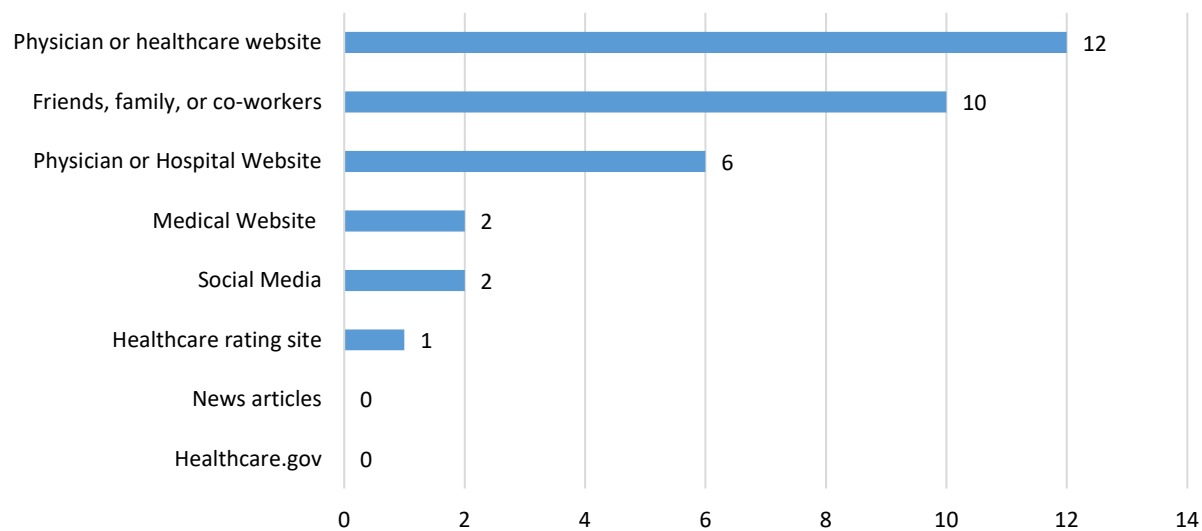
Respondents were asked to select one option that completed each the following sentences:

1. "Transportation services for people needing to go to doctor's appointments or other service types appointments…"
2. "Access to affordable nutritious food…"
3. "Access to affordable quality childcare…"

The answers chosen are reflected in the figures below.

Figure 5: Transportation

Transportation services for people needing to go to doctor's appointments or other service type appointments…

- Needs no improvement in my area
- Needs some improvement in my area
- Is an issue in my area
- do not know
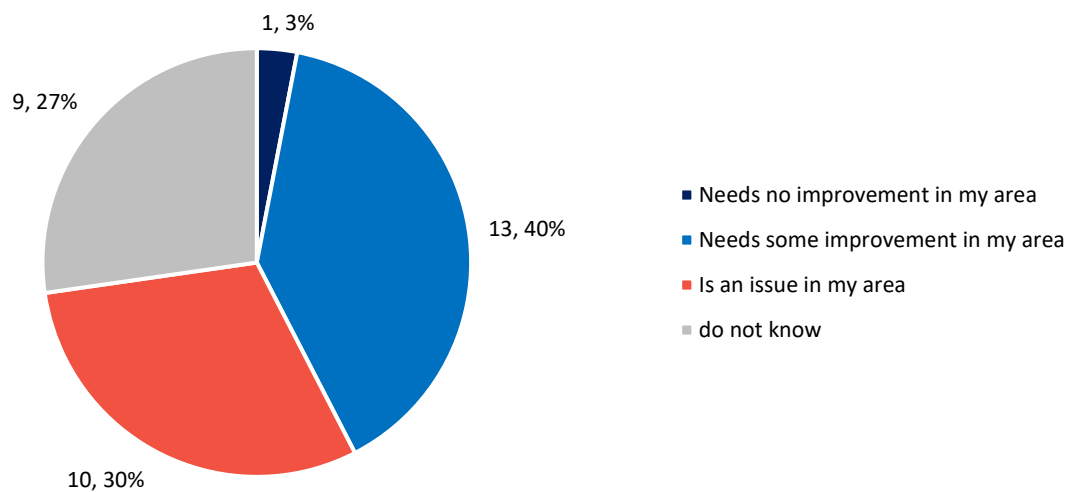
Figure 6: Nutritious food

Access to affordable nutritious food…

1, 3%

7, 21%

7, 21%

18, 55%

- Needs no improvement in my area
- Needs some improvement in my area
- Is an issue in my area
- do not know
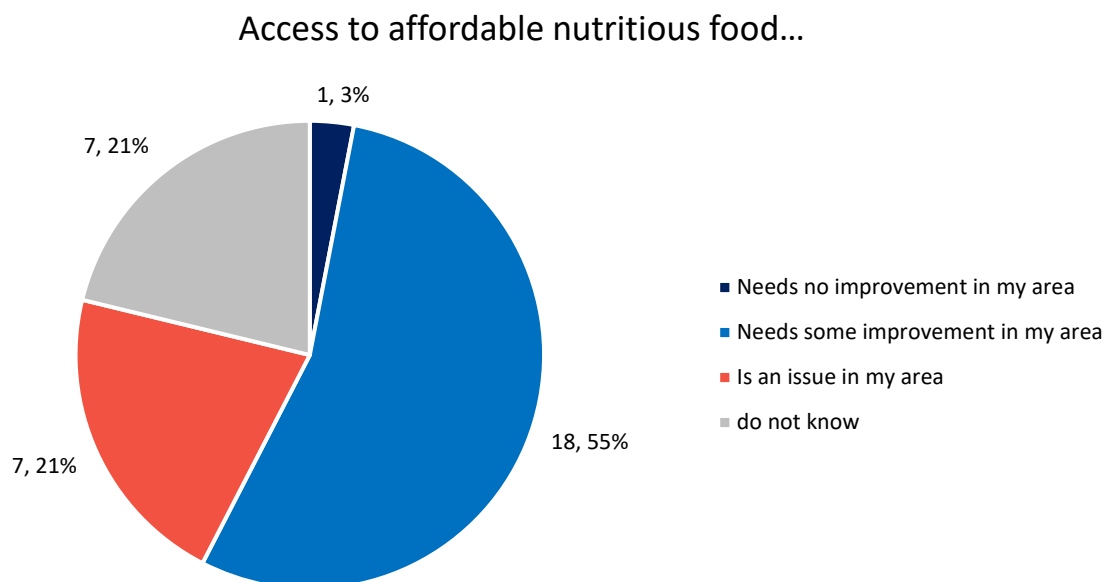
Figure 7: Quality Childcare

Affordable quality childcare…

1, 3%

9, 27%

12, 37%

11, 33%

- Needs no improvement in my area
- Needs some improvement in my area
- Is an issue in my area
- do not know
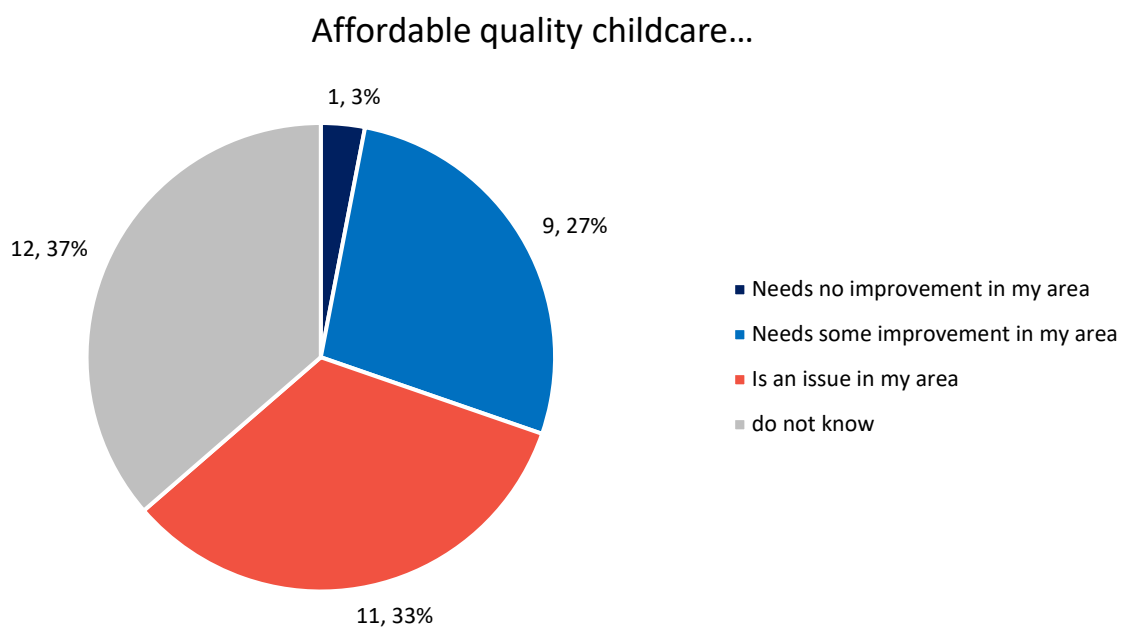
Table 34: Variety of available jobs

Answer Choices	Responses	Response Percent
A large variety	4	12
Moderate variety	10	30
Little variety	18	55
No variety	1	3

Respondents were asked to rate the level at which they agreed with the following statements. The results for each of the statements are shown in Figures 8-14 below.

Figure 8: Primary Care Access

Residents in the area are able to access primary care providers when needed.

Strongly Disagree: 1, Disagree: 2, Neither Agree nor Disagree: 9, Agree: 15, Strongly Agree: 6
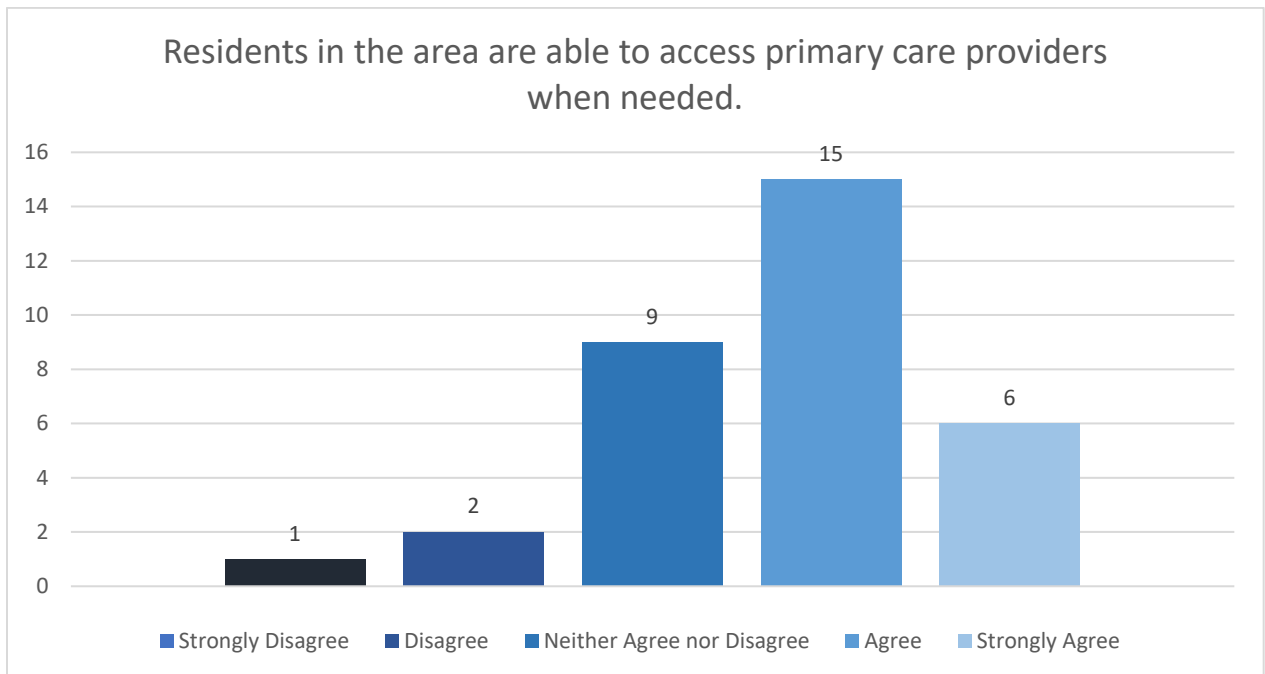
Figure 9: Medical Specialist Access

Residents in the area are able to access a medical specialist when needed.
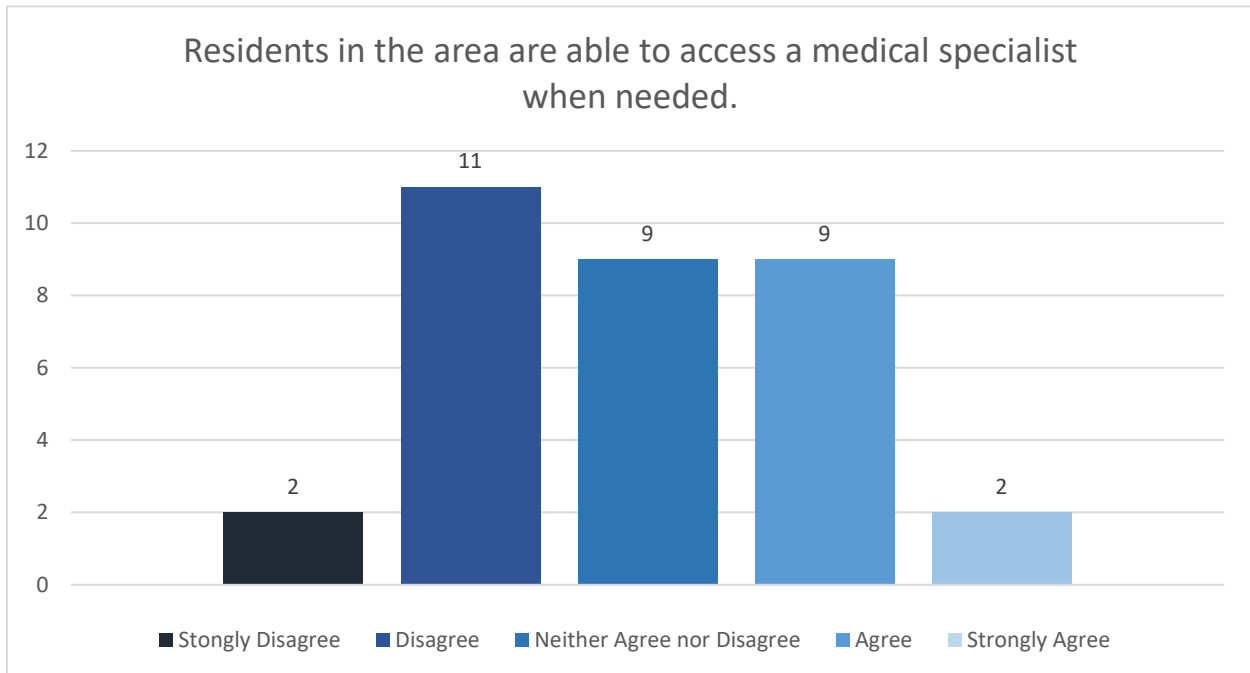
Figure 10: Dentists Available

Residents are able to access a dentist when needed.
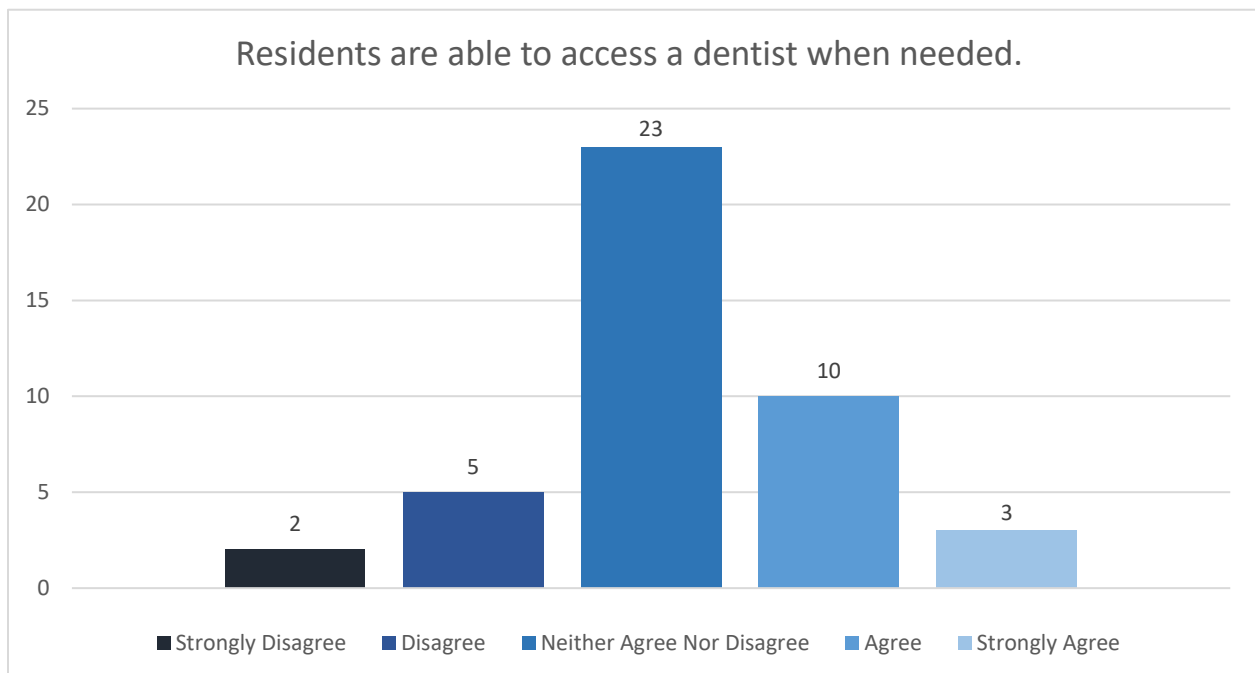
Figure 11: Medicaid Accepted

There is a sufficient number of providers accepting Medicaid.

Strongly Disagree: 1
Disagree: 5
Neither Agree Nor Disagree: 11
Agree: 11
Strongly Agree: 4
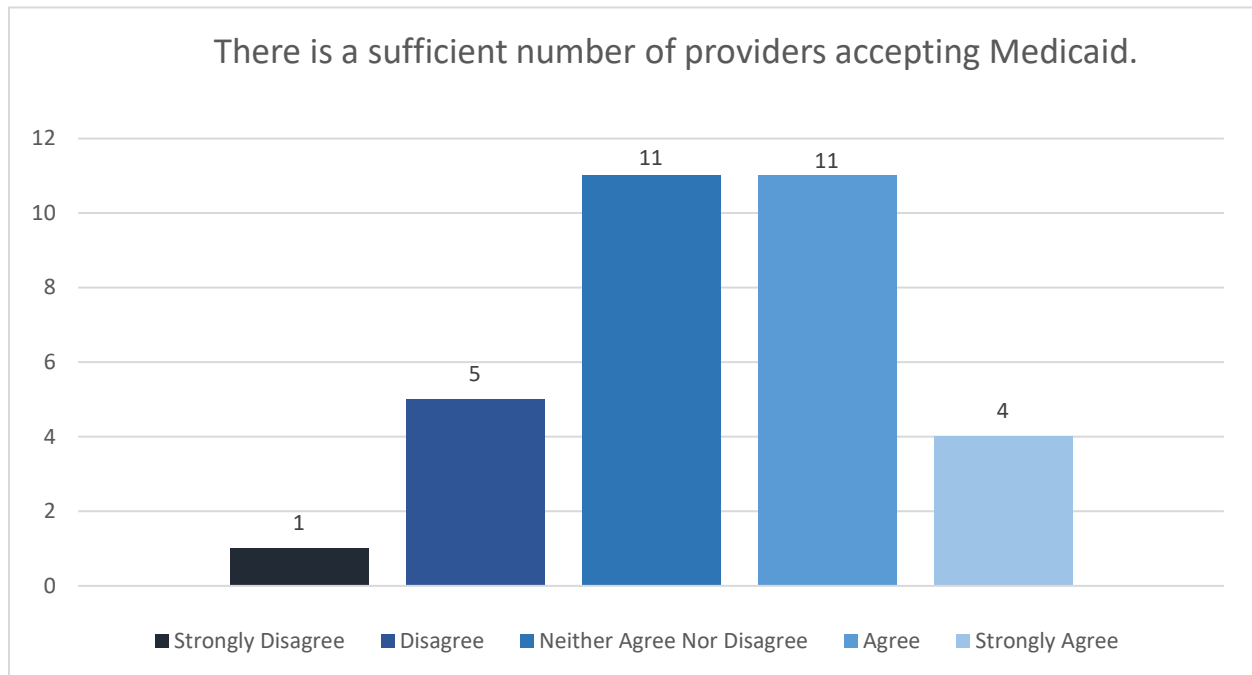
Figure 12: Medicare Accepted

There is a sufficient number of providers accepting Medicare.

Strongly Disagree: 1
Disagree: 2
Neither Agree Nor Disagree: 9
Agree: 17
Strongly Agree: 4
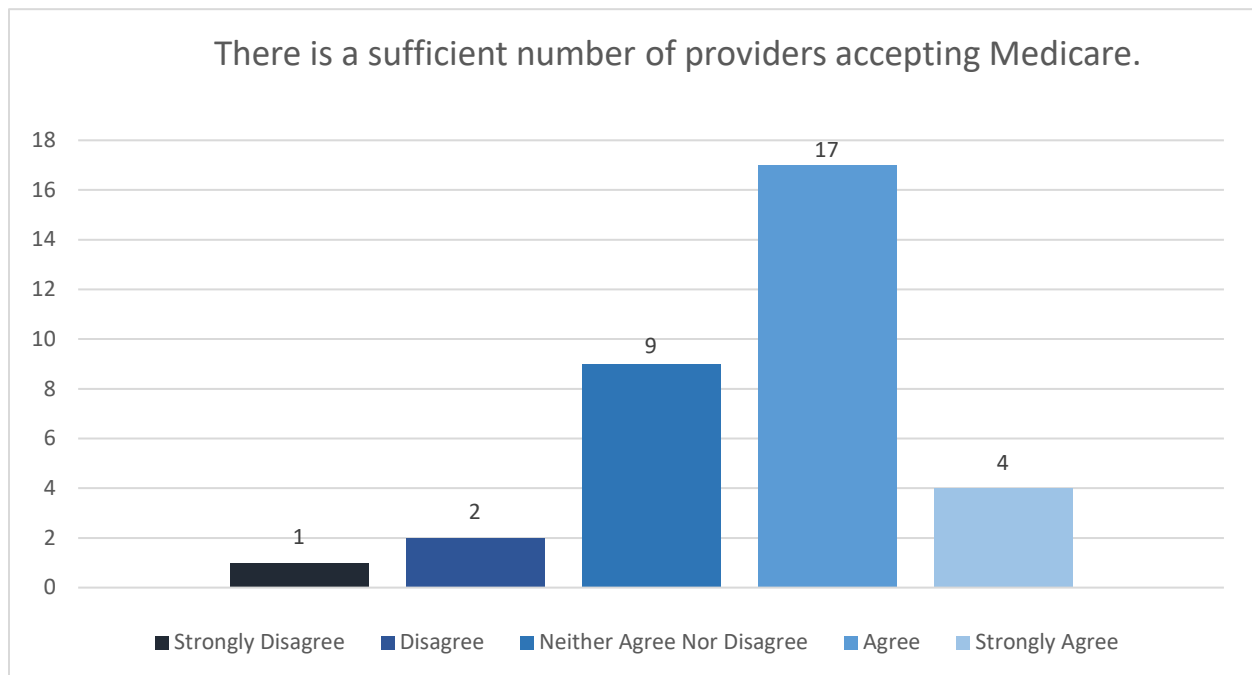
Figure 13: Bi-lingual Providers

There is sufficient number of bi-lingual providers in my area.

Legend: ■ Strongly Disagree ■ Disagree ■ Neither Agree Nor Disagree ■ Agree ■ Strongly Agree

Values: Strongly Disagree 5, Disagree 2, Neither Agree Nor Disagree 13, Agree 10, Strongly Agree 3

Figure 14: Mental Health Providers

There is a sufficient number of mental health providers in my area.

Legend: ■ Strongly Disagree ■ Disagree ■ Neither Agree Nor Disagree ■ Agree ■ Strongly Agree

Values: Strongly Disagree 7, Disagree 11, Neither Agree Nor Disagree 11, Agree 3, Strongly Agree 1
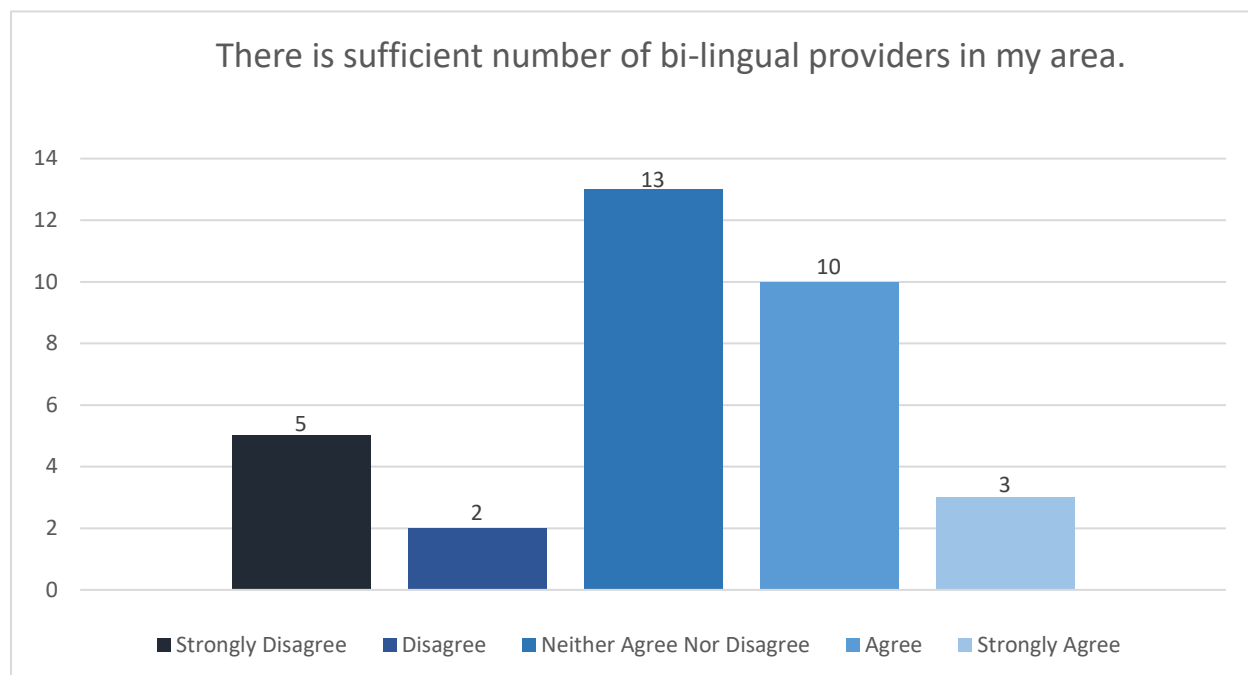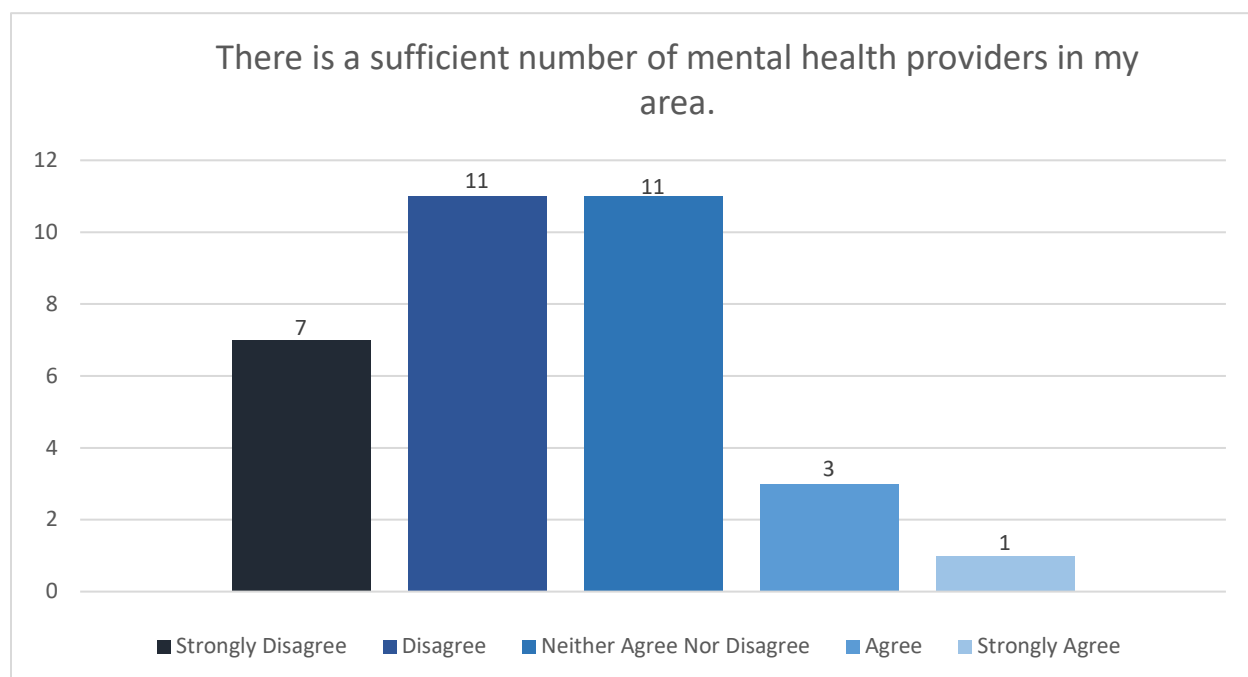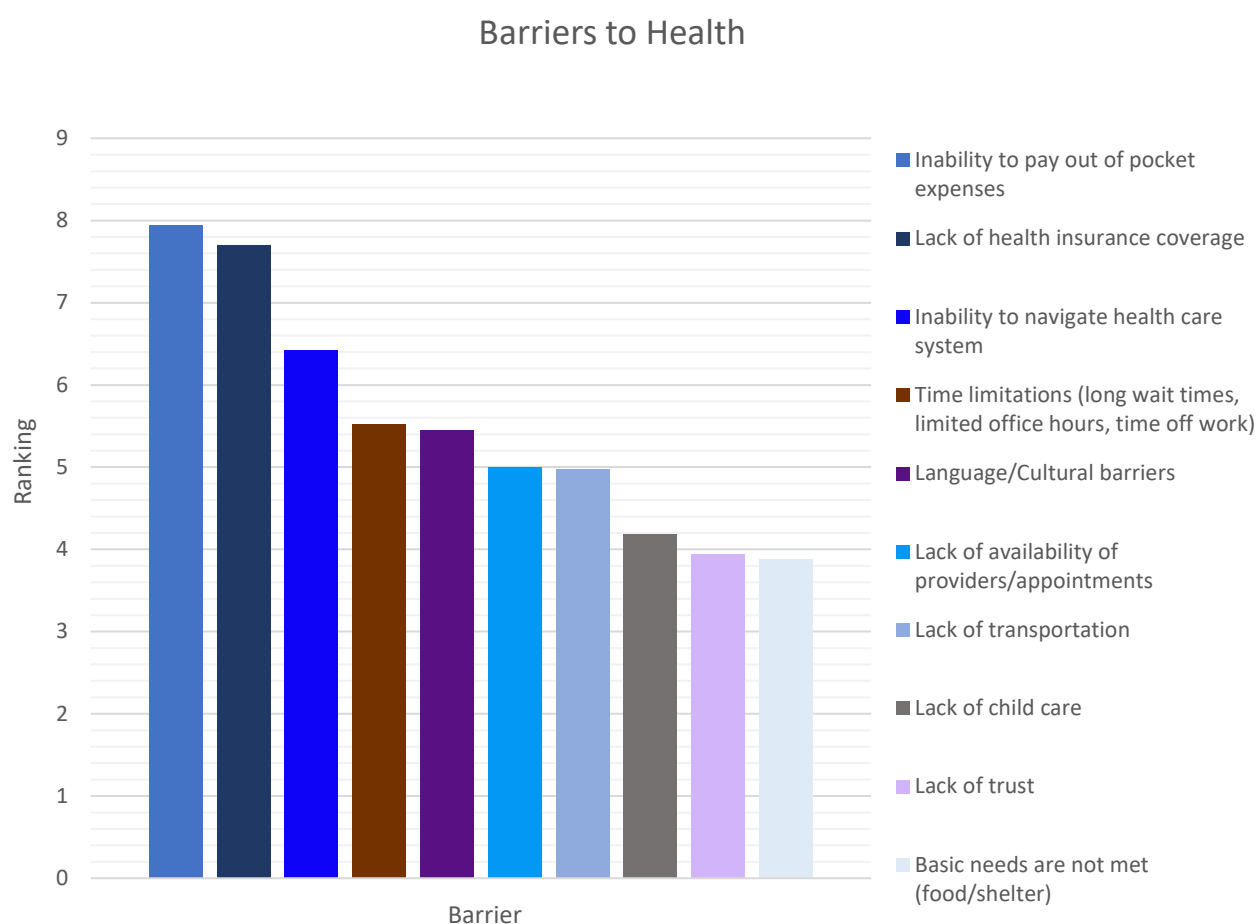
Survey Respondents were asked to rank barriers to healthcare from most significant (1) to least significant (10). Survey Respondents chose inability to pay out of pocket expenses as the most significant barrier to healthcare followed by lack of health insurance coverage and the inability to navigate the health care system. The answer choices and data collected are shown in Figure #15 from highest to lowest ranked.

Figure 15: Barriers to Health

Barriers to Health

- Inability to pay out of pocket expenses
- Lack of health insurance coverage
- Inability to navigate health care system
- Time limitations (long wait times, limited office hours, time off work)
- Language/Cultural barriers
- Lack of availability of providers/appointments
- Lack of transportation
- Lack of child care
- Lack of trust
- Basic needs are not met (food/shelter)

Survey respondents were asked to identify the underserved populations in their community. Out of the 33 participants, Uninsured/Underinsured was identified as the most underserved population. Survey respondents were able to select more than one answer choice. Respondents that selected "Other" specified that Medicare and Medicaid members/families with large insurance deductibles are underserved. The remaining answer choices collected are shown in Table 35 below in order of most selected to least selected.

Table 35: Identification of Underserved Populations

Answer Choices	Responses
Uninsured/Underinsured	18
Low-income/Poor	15
Hispanic/Latino	10
Seniors/Elderly	10
Immigrant/Refugee	9
Homeless	8
Disabled	5
Black/African American	4
None	4
Other (please specify)	4
Young Adults	3
Children/Youth	3

Additional Responses and Comments

The following are verbatim responses to the open-ended questions on the survey. Responses were left with any typographical, grammar, or other mistakes because these responses were written by survey participants. The responses are listed and numbered below to correspond with the specific survey questions in which the comments were provided with.

1. Thinking broadly about health- mental, physical, spiritual- what comes to your mind when you see or hear "improving community health"?

- Access to affordable healthcare, housing, access to affordable health improvement gym, kids clinics to exercise
- It's great for all communities to have all services for healthcare
- Reaching out to those who may not know much to help themselves
- Fitness nutrition (affordable)
- Need more simplified info
- Healthcare for all
- Availability of resources (trainings, health awareness seminars, etc.) for all
- Availability
- More health in patients
- Getting well overall
- Healthy people
- Educating the community about health and well-being
- An attempt to sound good but really make no actual improvements for the community
- Agree
- Improving community physical health-access to health care resources locally, or available transportation to specialists in larger cities. Mental health- it's difficult to improve mental health in rural areas with limited resources (no local psychologists). Additionally, it seems that the people who need mental health services oftentimes have limited resources and a ride, gas money, or a working car is a limiting factor. Another limiting factor is the ability to follow through with said appointments, due to frequent cancellations (for other health appointments). Spiritual health can also be linked to mental and physical health, in my opinion. The more spiritually unhealthy the community, the unhealthier the community is overall
- Improving access to healthcare
- THAT GOOD IF SOMEONE FOLLOW THROUGH

- I feel like this means to help the people our community to become healthier. Educating them. Offering ways to help the ones that have no way to get health care needs met.
- More education to the community
- Better community care
- Awesome
- Improving the community resources to have access to mental, physical, and spiritual needs in our community and not have to drive out of town to receive this
- Making healthcare available to all people
- Entire community
- Not sure
- Physical & Mental

2. In your opinion, what challenges do people in the community face maintaining a healthy lifestyle or managing a chronic condition like diabetes or health disease?

- lack of healthy lifestyles, lack of diverse eating places
- lack of affordable insurance coverages
- lack of information
- Low-income and non-English speaking people do not completely understand what is going on in the medical world due to their lack of understanding
- Info about the clinic
- Food
- Eating right costs too much
- Being able to afford treatment
- Out of town travel
- Information
- Not being able to do most things
- Don't know
- Poor eating habits
- Low income, bad communication, and language barriers
- Consistent education and reinforcement
- Cost of meds
- As a community, we walk very few places, and don't typically exercise much. Culturally, our diets are not healthy. In my experience here, there is also an education barrier for things like healthy diets, understanding a diagnosis, and understanding medication (or affording insulin).

- Lack of education, diet and lifestyle education
- NONE
- I feel like pt's don't understand or don't want to get help for diabetes or other diseases. They do not understand the end results of their not getting help.
- Lack of education
- no place to walk around due to the number of dogs running loose
- Motivation, resources, guidance, language barriers, lifestyle, easy to receive prescriptions instead of actual education on how to better your health
- Lack of education or classes offered
- Unsure
- Not sure
- Economic disadvantage, Bovina is a desert food community, and not able to afford medications

3. In your opinion, what is being done well in the community in terms of health?

- None!
- community trying to pull together for better service
- great physicians
- good variety of doctors PA
- mental health support
- gym was opened
- not much
- we are fortunate enough to have a topnotch facility
- keeping good doctors
- payment plans
- idk
- unsure
- ?
- Gym
- Farwell, Friona, and Bovina all have a local clinic. There is a dentist in Farwell, lab, therapy, radiology services in Friona. Cargill, the largest employer offers excellent insurance for their employees. I believe equal access is available but can be limited by health insurance (out of pocket expenses), transportation (for some populations).
- offering rural health clinic
- MANY OFFERS

- Health education for elderly and new moms is given out for free. Immunizations are given via workshops. COVID immunizations are being given out for free to keep everyone's boosters up to date.
- Nothing
- Not sure
- Clinic and hospital in the area with easy access
- People are readily seen in our ER and clinic
- As much as possible
- They just don't take all in insurance
- we have a hospital in the county, this is very good for our community

4. What recommendations do you have to improve the health and quality of life in the community.

- free exercise for kids; better meals at school- they are hungry & then come home tired then overeat and over rest
- better jobs with available benefits for family
- reach out to people who do not have means of understanding and as well as resources
- more activities
- free for all
- recruiting more doctors
- lower pay and help for people who can't afford medical help
- nutrition for better health
- In town transportation for people that don't have a ride to clinic/hospital.
- educating the community that there is always help
- consistent educational opportunities
- Healthier choices for restaurants
- Honestly. Jesus. We could all use a little more spiritual health. :) Also, more available transportation that is easy to use, and won't make you sit in Amarillo for 8 hours at a time before a bus brings you home.
- Improved education
- LOWER COST OF INSURANCE
- More free educations via English and Spanish. Bring close communities like Hereford, Friona, and Bovina together to alternate site of education.
- more going out in the community and educating people
- clean up the city!! trailer park is a mess, so are alot of houses that need bulldozed

- Funding to educate all age groups about healthy eating and habits and actually learn recipes that everyone can learn in making meals. Making transportation easier and more reliable for the elderly or single parents who have special needs kids who need to travel out of our area for appointments. Or bring those specialties to our small area. Make insurance language understandable so people know what out of pocket cost, deductible, copay mean. Funding so this hospital can be competitive with the nursing and other staff which help maintain the building afloat.
- Have health education classes offered like smoking cessation
- more funding and programs to promote Health Education and free clinics.

5. Please share any additional comments >

- we need vaccine set up certain times/days- I don't like bringing my healthy child in to get shots/vaccines when the clinic is full of sick kids
- too many people have a lack of understanding due to language barriers on lack of being seen by doctors.
- All hospitals and clinic in Friona are always nice.
- Building this new hospital was utterable waste of money. People who come here won't get well, they could care less about the brick, mortar, and accessories. There is not a straight angle in the parking lot. I can't say what needs to be done to the board members and architect who designed this place. Total waste of funds
- we have to do more for the community
- The Diabetes Chronic Care Clinic seemed to have some success but just died, probably due to lack of funding or lack of provider reimbursement
- I feel like this is an ongoing work for improvement in how education is given out.
- they are only going to cater to minority, who gives nothing back to the city or health system, they just drain it
- Since we are such a small community we lack to reach resources which are offered in larger cities. We need to see what Can be brought here in order to help bring income and job opportunities in our area.
- Need smoking cessation classes

Key Informant Interview Summary

Interviews were conducted with 3 community members with key knowledge of community needs and resources withing Parmer Medical Center service area. Informants were asked a series of questions specifically selected to help provide a personal perspective on their community. All responses are kept anonymous and used only for the purposes of this report. The following is a summary of the interview questions and responses.

1. Can you tell me a bit about your organization or your role within the community?
   - Pastor- providing spiritual support
   - Allied Health Professional
   - Hospice and Home health

2. Please tell me what you see as the most critical and pressing issues or concerns for the communities or populations with whom you work?
   - Broken Families
   - Lack of First Responders
   - Lack of Elder Support/Resources
   - Lack of public transportation

3. What issues around health concern you the most as someone your field?
   - Mental Health
   - Elder Care
   - Issues related to the vaccine- blood clots, arrhythmias
   - COPD/lung issues

4. What factors do you think contribute most to these specific health issues in your community?
   - Poor life choices
   - Cost
   - Lack of Resources
   - Vaccinations
   - Poor work environments

5. Which populations do you think are most vulnerable or at risk for these conditions/issues?
    - Younger teenagers and adults
    - 4th-10th grade students are at risk of mental health issues.
    - All ages
    - Everybody

6. From your experience, what are the biggest challenges to your community residents in addressing these conditions/issues?
    - People lack knowledge of community resources
    - A lack of volunteers
    - Lack of resources for follow up care & doctor's appointments

7. What do you see as the greatest challenges around improving health in your community?
    - People are unaware of resources
    - Lack of interest
    - People not taking care of themselves
    - People being lazy
    - Unhealthy work environments such as feed yards, packing plants, rendering facilities, and dairies

8. What are the greatest strengths of your community?
    - People have a high sense of community
    - People have jobs
    - Good school
    - Faith based community

9. Thinking about the future, if you could do one thing to improve the health your community and for the residents, what would it be?
    - Investing in people's spiritual health more
    - Provide transportation for elders to medical services
    - Never bring the dairies here

10. If you could change or implement a new program, service, or policy, what would it be?
    - A call service for elders so they can get transportation
    - Enhanced work environments- cleaner air
    - Available public transportation to healthcare facilities

11. What individuals/organizations are leading or should lead this effort?
    - Panhandle Community Services
    - Facilities with poor work environments should be scrutinized by the government.

Summary

The three key informants all agreed that mental health, transportation, and lack of health education are areas that the community needs to improve upon. Although everyone was stated as a concern for mental health problems- students are a primary target of these issues. Along with mental health, key informants also stated that transportation was a major issue. This is because people are unable to get to doctors' appointments, pick up medicine, or run other health related errands/activities. The primary people group affected by these issues are elders. Lastly, informants agreed with the survey respondents that the community suffers from a lack of education on general health and resources available. Parmer Medical Center can use this information to build initiatives in order to address the issues presented.

Appendix: Parmer County Hospital Community Health Needs Assessment Survey

Thank you for taking the time to complete this survey. All responses are anonymous. Responses will be summarized and included in the final Community Needs Assessment. The survey should take approximately 10 minutes to complete.

* 1. What is your age

_____

* 2. What city are currently living in?

◯ Farwell

◯ Bovina

◯ Friona

* 3. What is the highest level of education you have received?

◯ Some High School   ◯ Graduated College (4-year Bachelor Degree)

◯ High School Diploma   ◯ Completed a Graduate or Professional School

◯ Some College or Vocational Training

* 4. Which of the following ranges represent your total annual household income last year

◯ Under $15,000   ◯ Between $75,000 and $99,999

◯ Between $15,000 and $29,999 ◯ Between $100,000 and $150,000

◯ Between $30,000 and $49,999 ◯ Over $150,000

◯ Between $50,000 and $74,999 ◯ Prefer not to answer

* 5. What is your gender

◯ Male

◯ Female

◯ Prefer not to answer

* 6. What is your race?

○ White or Caucasian   ○ American Indian or Alaska Native

○ Black or African American   ○ Native Hawaiian or other Pacific Islander

○ Hispanic or Latino   ○ Other

○ Asian or Asian American   ○ Prefer not to say

* 7. Do you have a family doctor, or a place where you go for care?

○ Yes, family doctor or health professional

○ Yes, walk-in urgent care or emergency room

○ No

* 8. What sources do you normally use to find out about healthcare providers or about health related questions?

○ Social Media   ○ Healthcare rating sites like HealthGrades

○ A physician or hospital website   ○ A physician or healthcare worker

○ Medical website such as WebMD or Mayo Clinic   ○ Friends, Family, or Co-workers

○ Healthcare.gov   ○ News Articles

* 9. Thinking broadly about health- mental, physical, spiritual- what comes to your mind when you see or hear "improving community health"

```


```

* 10. Please complete the following sentence by selecting one option below. Transportation services for people needing to go to doctor's appointments or other service type appointments...

○ needs no improvement

○ needs some improvement

○ is an issue in my area

○ do not know

* 11. Please complete the following sentence by selecting one option below. Access to affordable nutritious food...

○ needs no improvement in my area

○ needs some improvement in my area

○ is an issue in my area

○ do not know

* 12. Please complete the following sentence by selecting one option below. Affordable quality child care...

- ◯ needs no improvement
- ◯ needs some improvement
- ◯ is limited or not available in my area
- ◯ do not know

* 13. Please select the level of variety of available jobs is in your community.

- ◯ A large variety
- ◯ Moderate variety
- ◯ Little variety
- ◯ No variety

* 14. Please select the level to which you agree with the following statements.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Residents in the area are able to access primary care providers when needed (Family Doctor, Pediatrician, General Practitioner, etc.)	◯	◯	◯	◯	◯
Residents in the area are able to access a medical specialist when needed (Cardiologist, Dermatologist, Neurologist, etc.)	◯	◯	◯	◯	◯
Residents are able to access a dentist when needed.	◯	◯	◯	◯	◯
There is a sufficient number of providers accepting Medicaid.	◯	◯	◯	◯	◯
There is a sufficient number of providers accepting Medicare.	◯	◯	◯	◯	◯
There is sufficient number of bi-lingual providers in my area.	◯	◯	◯	◯	◯
There is a sufficient number of mental health providers in my area.	◯	◯	◯	◯	◯

15. Please rank the following barriers to health care from most significant (1) to least significant (10)

≡ [⬍]   Inability to pay out of pocket expenses

≡ [⬍]   Inability to navigate health care system

≡ [⬍]   Lack of health insurance coverage

≡ [⬍]   Language/Cultural barriers

≡ [⬍]   Time limitations (long wait times, limited office hours, time off work)

≡ [⬍]   Lack of transportation

≡ [⬍]   Lack of availability of providers/appointments

≡ [⬍]   Basic needs are not met (food/shelter)

≡ [⬍]   Lack of trust

≡ [⬍]   Lack of child care

* 16. Identify which populations you think are underserved. Check that apply

☐ Low-income/Poor   ☐ Black/African American

☐ Uninsured/Underinsured   ☐ Disabled

☐ Hispanic/Latino   ☐ Young adults

☐ Homeless   ☐ Children/Youth

☐ Immigrant/Refugee   ☐ None

☐ Seniors/Elderly

☐ Other (please specify)

[   ]

* 17. In your opinion, what challenges do people in the community face maintaining a healthy lifestyle or managing a chronic condition like diabetes or health disease?

[   ]

* 18. In your opinion, what is being done well in the community in terms of health?

[   ]

* 19. What recommendations do you have to improve the health and quality of life in the community.

```
┌──────────────────────────────────────┐
│                                      │
│                                      │
│                                      │
│                                      │
└──────────────────────────────────────┘
```

* 20. Please share any additional comments >

```
┌──────────────────────────────────────┐
│                                      │
│                                      │
│                                      │
│                                      │
└──────────────────────────────────────┘
```