

COMMUNITY HEALTH IMPROVEMENT PLAN

Fiscal Years 2023 – 2026



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Background

The first Community Health Needs Assessment (CHNA) and subsequent Community Health Improvement Plan (CHIP) for Cochise County was completed in 2012-2013 in response to a new requirement from the Internal Revenue Services requiring all not-for-profit health care facilities to perform a CHNA and subsequent CHIP every three years to maintain their tax-exempt status. Since then, Copper Queen Community Hospital (CQCH) has performed 3 CHNAs and subsequent CHIPs to assess the evolving needs of the diverse populations of Cochise County.

Each new CHNA and subsequent CHIP has been built on the previous CHNA and CHIP reports to allow for cohesiveness. For the 2023, CHNA CQCH contracted with company LeCroy & Milligan Associates, Inc. (2023) to collect data and compile the CHNA report. For this CHNA “Copper Queen Community Hospital (CQCH) collaborated with Cochise County Health and Social Services (CCHSS) and a steering committee comprised of local and state organizations to develop a comprehensive survey. Collaborative partners included Arizona Complete Health, Benson Hospital, Canyon Vista Medical Center, the Center for the Future of Arizona, Chiricahua Community Health Centers, Inc., Cochise County School Superintendents Office, Cochise County Sheriff’s Office, Copper Queen Community Hospital, First Things First, Legacy Foundation of Southeastern Arizona, Northern Cochise Community Hospital, and the University of Arizona Cooperative Extension” (LeCroy & Milligan Associates Inc., 2023, Executive Summary).

The 2023 CHNA was approved at the end of 2023 by the CQCH Board of Directors and is available on the CQCH website www.cqch.org. With this plan, CQCH is required to address the needs found in the 2023 CHNA with specific objective and strategies to meet the needs of the community in the next 3 years. Any needs that were found in the 2023 CHNA that CQCH is not going to be addressing must also be included in this plan with reasoning for why they are not being addressed. In this report, the three main needs; access to good health care, availability of good jobs, and access to health and affordable foods will be addressed with strategies and plans for improvement over the next three years.

How the Implementation Plan was Developed

The CHNA was completed at the end of the fiscal year 2023 with the assistance of LeCroy & Milligan Associates, Inc. (2023). Many local organizations and populations from different areas of the county assisted with providing input and feedback throughout the process. The process and steps are outlined in the CHNA report and are made widely available to the public on the CQCH website at www.cqch.org. Localized results for the CQCH service area were reviewed. A list of priorities was defined by a combination of community members and the CQCH staff. These priorities will be the focus of the implementation plan for CQCH over the next three years.

Top Three Health Concerns Identified for Cochise County at the Start of the CHNA

- Access to good health care.
- Availability of good jobs.
- Access to health and affordable foods.

Other Concerns Identified for Cochise County at the Start of the CHNA

- Affordable options for places to live.
- Access to aid programs (ex: food pantries, social services programs).
- Public transportation.
- Access to mental health professionals.
- Low community crime.
- Availability of good schools.
- Parks, trails, and other places to spend time outdoors.
- Opportunities to socialize.
- Clean environment.
- Cultural diversity.

Health Needs Identified for Cochise County in the Survey

Demographic Characteristics of Cochise County

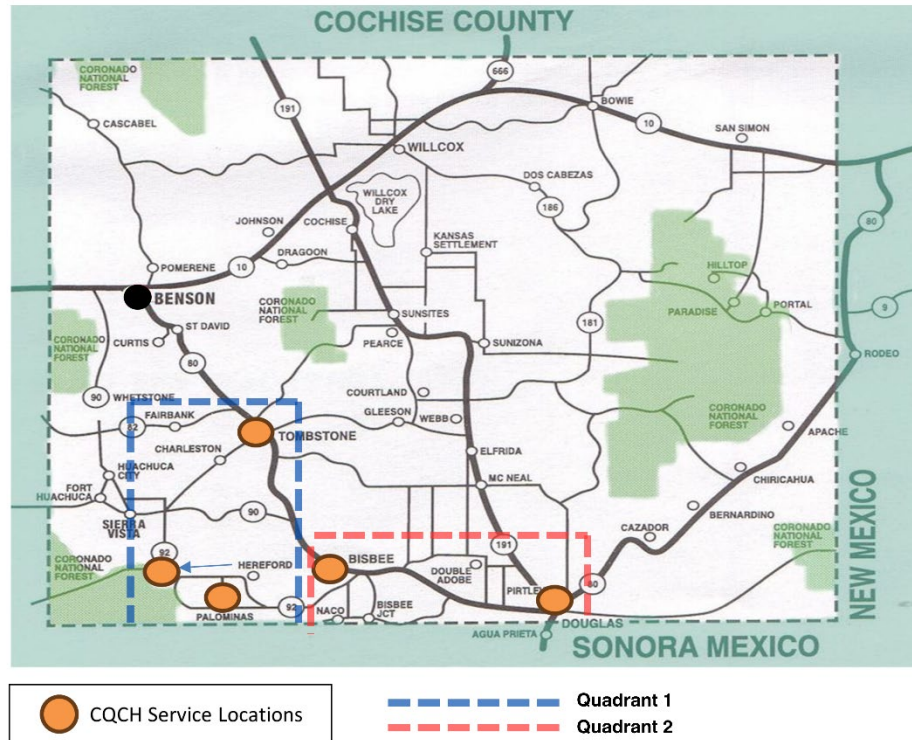
Characteristics	% of breakdown
Age	56% age 60+
Gender	64% female
Highest level of education	30% bachelor's degree or higher
Race	50% white, 34% Hispanic/Latinx
Annual income	51% income <\$39,000 annually
Language spoken	82% English, 34% Spanish

1,415 households responded to the survey.

Access to Good Healthcare

- 46% of respondents county wide reported the health of their community as poor.
- 70% of respondents noted dealing with at least one chronic illness in their household, 42% with at least one mental health concern, and 31% with at least one social concern.
- Almost 50% of respondents reported presence of two or more chronic illnesses in their household.
- 68% of respondents reported traveling outside of Cochise County for health care services in the past year.
- 17% of respondents do not currently see a behavioral health provider but would like to.
- Among all respondents the greatest barrier to accessing health care service was the lack of primary care providers, specialists, and behavioral health providers located within the county.

Health Needs Identified for CQCH Quadrants in the Survey



Health Needs Identified for Quadrant 1 – Hereford, Palominas & Tombstone

- 484 households responded to the survey.
- 8 people participated in the focus group.

Characteristics	% of breakdown
Gender (n=460)	63% female, 35% male
Race/ethnicity (n=484)	74% White, 13% Hispanic/Latino, 5% Black or African American, 3% American Indian/Alaska Native
Age (n=483)	55% age 60+
Employment (n=484)	42% retired, 38% employed
Living arrangements (n=484)	57% live with partner, 24% live alone
Food security (n=458)	27% did not have enough money to buy food at some point in the last 12 months

Access to Good Healthcare

- While a majority of quadrant 1 respondents reported their physical, mental, and social health as good, a significant amount (24-31%) rated each as poor.
- Almost half of quadrant 1 respondents rated their community health as low, with either a fair or poor rating.
- Over 25% of respondents in quadrant 1 report the presence of 3 or more chronic illnesses in themselves or a household member.
- Almost 33% of respondents in quadrant 1 indicate they or a household member experience a mental health concern (anxiety, depression, loneliness).
- 17% of respondents in quadrant 1 who do not receive behavioral health services report that they would like to.
- 68% of respondents in quadrant 1 reported traveling outside of the county to receive medical services in the last year.
- Focus group participants report that when new providers come to Cochise County they only stay for a short period of time.

Top three problems as determined by quadrant 1 group

- Access to good healthcare.
- Affordable options for places to live.
- Availability of good jobs.

Health Needs Identified for Quadrant 2 – Bisbee & Douglas

Characteristics	% of breakdown
Gender (n=460)	62% female, 38% male
Race/ethnicity (n=484)	61% Hispanic/Latino, 33% white
Age (n=483)	56% age 60+
Employment (n=484)	36% retired, 36% employed
Living arrangements (n=484)	46% live with partner, 29% live alone
Food security (n=458)	58% did not have enough money to buy food at some point in the last 12 months

Access to Good Healthcare

- While a majority of quadrant 2 respondents reported their physical, mental, and social health as good, a good amount (26-38%) rated each as poor.
- Almost half (45%) of quadrant 2 respondents rated their community health as low, with either a fair or poor rating.
- 66% of respondents of quadrant 2 reported having at least one chronic health illness in their household.
- 39% of respondents of quadrant 2 reported having a mental health concern (anxiety or depression).
- 26% of respondents reported a social concern (loneliness/transportation).
- 20% of respondents of quadrant 2 who reported they did not currently have one would like a behavioral health care provider.
- Respondents reported frustrations with the lack of non-emergent after hours care available including quick-care/urgent-care clinics.
- Focus group participants report that when new providers come to Cochise County they only stay for a short period of time.
- More than 60% of respondents from quadrant 2 reported traveling more than 45 minutes or outside of Cochise County for medical care.

Top three problems as determined by quadrant 2 group

- Access to aid programs (food pantries/social service program).
- Affordable options for places to live.
- Access to good health care.

Top Health Priorities as Determined by CQCH

Access to good health care

When people do not have access to a primary health care provider, they don't get preventive services like cancer screenings or medications that they need (Office of Disease Prevention and Health Promotion, n.d.a). This lack of care can be due to many factors including living too far away from providers or lack of providers in the community in which they live.

Availability of good job

A steady source of employment in a safe environment allows for a consistent income flow, but also can provide benefits essential to maintaining positive health, including the ability to purchase nutritious foods, pay for childcare, live in safe environments, and access quality health care (Robert Wood Johnson Foundation, 2024). While the life expectancy of male workers in the bottom half of income distribution has only risen 1.3 years since 1977, those in the top half of income distribution have had a 5.8-year increase in life expectancy. Also, those with lower salaries are less likely to access preventive health care services.

Access to health and affordable food

having access to healthy food that is also affordable has been shown to have an impact on individual health dietary pattern, while the inability to access healthy affordable food is shown to have a negative effect on individual healthy dietary pattern and be associated with negative health outcomes (Office of Disease Prevention and Health Promotion, n.d.b).

Action Plan

CQCH's mission is: "to maintain and support access to basic primary healthcare throughout southern Cochise County by excelling in leadership, vision and service delivery to address opportunities and challenges to healthcare" (Copper Queen Community Hospital, 2024). To achieve this mission, CQCH is committed to continued growth and improvement to address the dynamic needs of the Cochise County Community. Despite the large geographical size of Cochise County, CQCH has risen to the challenge by expanding services geographically, including two new primary care clinics in Tombstone and Hereford, in addition to its well-established primary care clinics in Bisbee, Douglas, and Palominas. CQCH also has several different visiting specialists including cardiology and orthopedics, and many resident specialists including general surgery, urogynecology, urology, podiatry and gastro-intestinal. Additionally, CQCH is also expanding behavioral health services in the area with multiple psychiatric nurse practitioners added to our full-time staff. CQCH community outreach is also a significant part of our services with a new community health worker on staff to help our patients maximize the benefits of community services throughout our county. These and many other strategies have been developed to address the needs of Cochise County found in the CHNA, with the three most pressing needs addressed below:

Priority 1: Access to good health care

Objective: To increase and improve access to all types of equitable health care services within Cochise County despite a person's ability to pay.

Strategies

1. All primary care provider positions filled within the CQCH organization.
2. Expansion of behavioral health services with the hiring of 3 psychiatric nurse practitioners with expansion coming by adding either licensed clinical social worker (LCSW) or clinical psychologist.
3. Expansion of Quick Care (Walk-in Clinic Appts.) including after hours and weekends.
4. Adding Urology as a specialty with recruitment and hiring of this specialty.
5. Expansion of physical therapy services with the building of the new Douglas location and the addition of Speech Therapy that serves the Bisbee and Douglas locations.
6. Expansion of the Tombstone Health Clinic.
7. Expansion of the Douglas Rural Health Clinic to accommodate up to 3 new providers.
8. Partnerships to bring additional retail pharmacy (BeeWell Pharmacy).
9. Expansion of the Douglas Wound Care services for outpatients and collaboration with Visiting Nurse Services.
10. Outpatient infusion unit within the Copper Queen Hospital and possible additional site in Douglas.
11. Expanded Mammography services in Douglas.

12. Expanded mobile MRI availability with available Monday, Tuesday, Wednesday at both locations, with the addition of a Mobile unit in partnership with Benson and Willcox Hospitals.
13. Future hopes to recruit pulmonology, expand orthopedics, and ENT-after completion of new surgery department.
14. Addition of a new Community Health Worker to help address social determinants of health.
15. Transportation assistance through free bus passes, scheduling appts around bus schedules.
16. Evaluating cardiac rehabilitation program for potential to add this service at CQCH.
17. Hired a new clinical dietician who is now doing outpatient consults.
18. Obtain new 64 slice CT machine with cardiac packet for the Bisbee and Douglas locations.
19. Increase patient awareness of specialty services provided by individual providers.

Anticipated Impact

Through the expansion of our current services and with the addition of several different providers this will allow for an increase in available services and access to equitable health care for all citizens.

Priority 2: Availability of good jobs

Objective: With the continued growth of CQCH throughout Cochise County the required workforce continues to expand adding safe and steady sources of employment to citizens.

Strategies

1. Continued organizational growth and expansion with continued additions to the workforce.
2. Growth of full-time Employees to 444, with an additional 44 contractors.
3. Fully funded, family health, vision, and dental insurance for all full-time employees (32hrs or more).
4. Commitment to using local businesses including for construction projects, employee appreciation events, and other projects.

Anticipated Impact

Through the expansion and growth of CQCH services, there will be an increase in available jobs that allow for safe and steady sources of employment for more citizens of Cochise County.

Priority 3: Access to healthy and affordable foods

Objective: CQCH is committed to improving access to safe and affordable food options for the citizens of Cochise County

Strategies

1. Community Health Worker hired to support our 5 clinics and to help patients with the social determinants of health, including food insecurity.

2. Financial donations to local food banks including:
 - i. The Tombstone Community Foodbank which offers one food box a month to seniors, families with children to all citizens of Cochise County.
 - ii. St. Vincent de Paul Bisbee Conference - Non-perishable food items are distributed, such as mac and cheese, cereal, rice, dried beans and pasta, as well as canned goods. Thursdays.
 - iii. Bisbee Coalition for the Homeless: Advocacy, Shelter, Food.
 - iv. Community Food Bank of Southern Arizona: Douglas.
 - v. Produce on Wheels - CQCH hosts and funds this program regularly and provides free access to fresh produce to employees and citizens of Cochise County.

Anticipated Impact

By improving availability of safe and affordable food to all citizens of Cochise County we can reduce the risk of poor outcomes associated with lack of access.

Identified Needs Not Addressed by This CHIP

A few issues were identified which are currently being funded and addressed through other agencies. Additionally, other agencies are better equipped to address these issues. CQCH is always open and willing to the collaboration with all other services, providers, and organizations within the county to serve the population and will strive for continued growth and expansion of resources to meet any needs that arise.

Copper Queen Community Hospital is committed to maintaining and supporting access to basic primary healthcare and optimal health throughout southern Cochise County. As such, it will continue to strive toward equitable treatment in the community that would allow for the provision of appropriate, safe, and adequate healthcare to the population it serves

References

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