COMMUNITY HEALTH IMPROVEMENT PLAN
2020 - 2022

Covenant Health
Plainview

To provide feedback about this CHIP or obtain a printed copy free of charge, please email Veronica Soto at vsoto@covhs.org
CONTENTS

Executive Summary ................................................................. 3
Collaborating Organizations ....................................................... 3
Community Health Improvement Plan Priorities ......................... 3
Introduction .................................................................................. 5
Mission, Vision, and Values ......................................................... 5
Who We Are ............................................................................... 5
Our Commitment to Community ............................................... 5
Health Equity .............................................................................. 6
Our Community .......................................................................... 8
Description of Community Served .............................................. 8
Community Demographics .......................................................... 9
Community Needs and Assets Assessment Process and Results ....... 11
Significant Community Health Needs Prioritized ......................... 11
Needs Beyond the Hospital’s Service Program ............................... 11
Community Health Improvement Plan ........................................ 12
Summary of Community Health Improvement Planning Process ....... 12
Addressing the Needs of the Community: 2020-2022 Key Community Benefit Initiatives and Evaluation Plan .............................. 13
Other Community Benefit Programs and Evaluation Plan ............... 17
2020-2022 CHIP Governance Approval ........................................ 18
EXECUTIVE SUMMARY

Covenant Health is a network of acute-care hospitals founded in 1998 through a merger of two faith-based hospitals in Lubbock, TX. Covenant’s network includes Covenant Medical Center, Covenant Children’s, Grace Medical Center and Covenant Specialty Hospital (joint venture) all located in Lubbock, TX. Additionally, Covenant operates two regional hospitals, Covenant Health Plainview and Covenant Health Levelland, as well as various Covenant Medical Group clinics throughout West Texas and Eastern New Mexico. The Community Health Needs Assessment (CHNA) focuses on the three counties where Covenant Health provides direct services: Lubbock, Hockley, and Hale.

Covenant Health dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. During 2019, the six-hospital region provided $75 million in Community Benefit in response to unmet needs and to improve the health and well-being of those served in the West Texas and Eastern New Mexico region.

Covenant Health conducts a CHNA in the communities it serves every three years to better understand the health-related needs and strengths. The results of the CHNA are used to guide and inform efforts to better address the needs of the community. Through a mixed-methods approach using quantitative and qualitative data, the CHNA process used several sources of information to identify community needs. Across the Lubbock, Hockley and Hale counties, information was collected from a variety of public data sources. Community surveys were conducted with people who have chronic conditions, are from diverse communities, have low-incomes, and/or are medically underserved. Stakeholder listening sessions were conducted with representatives from organizations that serve these populations.

Collaborating Organizations

Due to overlapping service areas, close geographic proximity to one another, and shared community-outreach programs, the Covenant Health hospitals collaborated to develop a regional approach to the 2020-2022 CHIP. While there are some differences in select strategies and community partners, Covenant Medical Center, Covenant Children’s, Grace Medical Center, Covenant Specialty Hospital, Covenant Health Plainview, and Covenant Health Levelland share many of the same CHIP strategies, which will allow for more effectively leveraging investments in the region to meet community needs.

Community Health Improvement Plan Priorities

As a result of the findings from the 2019 Covenant Plainview CHNA and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Covenant Health will focus on the following areas for its 2020-2022 Community Benefit efforts:

**PRIORITY 1: MENTAL AND BEHAVIORAL HEALTH**

Mental and behavioral health treatment, intervention and prevention services for the community, including related issues such as substance use
PRIORITY 2: ACCESS TO HEALTH SERVICES
Access to health services including but not limited to prevention, mental health, oral health, prescription assistance, health/community navigation, transportation and health education/prevention services

PRIORITY 3: HOMELESSNESS AND HOUSING INSTABILITY
Safe, affordable, stable housing and permanent supportive housing solutions for people experiencing chronic homelessness

PRIORITY 4: FOOD INSECURITY AND NUTRITION
Access to healthy food, nutrition education, and healthy lifestyle support
INTRODUCTION

Mission, Vision, and Values

**Our Mission**  
As expressions of God’s healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

**Our Vision**  
Health for a Better World.

**Our Values**  
Compassion — Dignity — Justice — Excellence — Integrity

Who We Are

Covenant Health is a network of acute-care hospitals founded in 1998 through a merger of two faith-based hospitals in Lubbock, TX. Covenant Health’s network includes Covenant Medical Center, Covenant Children’s, Grace Medical Center and Covenant Specialty Hospital (joint venture) all located in Lubbock, TX. Additionally, Covenant operates two regional hospitals, Covenant Health Plainview and Covenant Health Levelland, as well as various Covenant Medical Group clinics throughout West Texas and Eastern New Mexico. Covenant Medical Group (CMG) is a large employed physician group comprised of approximately 150 primary care and specialist physicians throughout Lubbock, West Texas, and Eastern New Mexico. The total service area spans roughly 35,000 square miles and includes approximately 750,000 people. The Community Health Needs Assessment (CHNA) focuses on the three Texas counties where Covenant Health provides direct community outreach services: Lubbock, Hockley, and Hale.

Covenant Health facilities include more than 1,000 available licensed beds and four acute-care hospitals located in the cities of Lubbock, Levelland and Plainview. Covenant Health has a staff of more than 5,200, including more than 600 physicians. Major programs and services include, but are not limited to, cardiac care, cancer treatment, pediatrics, women’s services, surgical services, orthopedics, critical care, neuroscience, endoscopy, diagnostic imaging, emergency medicine and obstetrics.

Our Commitment to Community

Covenant Health dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. During 2019, the
six-hospital region provided $75 million in Community Benefit1 in response to unmet needs and to improve the health and well-being of those served in the West Texas and Eastern New Mexico region. Due to the expansive geographic nature of the region and limited access to health care, the region served by Covenant Health includes 21 counties. For the purposes of the CHNA, we focus on the counties where we provide direct community outreach service: Lubbock, Hockley, and Hale.

Covenant Health further demonstrates organizational commitment to the CHNA through the allocation of staff time, financial resources, participation and collaboration to address community identified needs. The Texas/New Mexico Regional Director of Community Health Investment is responsible for ensuring the compliance of Federal 501r requirements, as well as providing the opportunity for community leaders and internal hospital leadership, physicians, and others to work together in planning and implementing the resulting Community Health Improvement Plan (CHIP).

**Health Equity**

At Providence St. Joseph Health, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is “Health for a Better World,” and to achieve that we believe we must address not only the clinical care factors that determine a person’s length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospital will implement when completing a CHIP. These practices include, but are not limited to the following:

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1 A community benefit is an initiative, program or activity that provides treatment or promotes health and healing as a response to identified community needs and meets at least one of the following community benefit objectives: a. Improves access to health services; b. Enhances public health; c. Advances increased general knowledge; and/or d. Relieves government burden to improve health. Note: Community benefit includes both services to the economically poor and broader community. To be reported as a community benefit initiative or program, community need must be demonstrated. Community need can be demonstrated through the following: 1) community health needs assessment developed by the ministry or in partnership with other community organizations; 2) documentation that demonstrates community need and/or a request from a public agency or community group was the basis for initiating or continuing the activity or program; 3) or the involvement of unrelated, collaborative tax-exempt or government organizations as partners in the community benefit initiative or program.
Address root causes of inequities by utilizing evidence-based and leading practices

Explicitly state goal of reducing health disparities and social inequities

Reflect our values of justice and dignity

Leverage community strengths
Description of Community Served

Covenant Health provides West Texas and Eastern New Mexico communities with access to advanced care and advanced caring. The CHNA service area, including Lubbock, Hockley, and Hale Counties, is home to approximately 379,000 people.

The service area for Covenant Medical Center, Covenant Children’s Hospital, Covenant Specialty Hospital, and Grace Hospital is the entirety of Lubbock County. Covenant Levelland serves Hockley County, and Covenant Plainview serves Hale County. Due to the level of care provided at these six hospitals, Covenant hospitals see patients from surrounding counties, although for the purposes of this CHIP, the total service areas will include Lubbock, Hockley, and Hale Counties. Surrounding counties outside of the CHNA service area where patients may live include the following: Castro, Swisher, Bailly, Cochran, Yoakum, Gaines, Dawson, Scurry, Lamb, Terry, Lynn, Garza, Crosby, and Floyd Counties in Texas, as well as Curry, Roosevelt, Lea, and Eddy in New Mexico.

The red portions of the map below are considered “high need” census tracts, and the green portions are the broader service area. Together, these areas make up the hospitals’ service areas.

Figure 1. Covenant Health Service Area
The high need service area is defined by lower life expectancy at birth, lower high school graduation rates, and more households at or below 200% FPL compared to census tracts across the County. For reference, 200% FPL is equivalent to an annual household income of $51,500 or less for a family of 4. Additional detail is available [online].

Community Demographics

POPULATION AND AGE DEMOGRAPHICS

For the most part, the age distribution for age groups 85+ and under 5 years are roughly proportional across the broader service area, high need service area, and three counties. While the broader and high need service areas are roughly proportional, Hale County has a slightly greater proportion of people under 18 years. People between 18 and 34 are substantially more likely to live in a high need area, likely young families and those in and around college towns. Those ages 35 to 84 are less likely to live in a high need area. The population of Lubbock County is approximately 5 times that of Hale and Hockley Counties combined.

RACE AND ETHNICITY

The Hispanic population is over-represented in the high need communities, representing nearly 50% of the population in those areas compared to 31% in the broader service area. Those who identify as white are less likely to live in high need communities, while those who identify as “other” race population and as Black are more likely to live in the high need communities. While the Black population makes up nearly 4% of the broader service area, they make up almost 11% of the high need service area. Approximately 60% of the population in Hale County identifies as Hispanic, as do nearly 50% of the population of Hockley County.

SOCIOECONOMIC INDICATORS

Table 1. Socioeconomic Indicators for Covenant Health Service Area

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Broader Service Area</th>
<th>High Need Service Area</th>
<th>Lubbock County</th>
<th>Hale County</th>
<th>Hockley County</th>
<th>Texas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Income</td>
<td>$61,442</td>
<td>$33,173</td>
<td>$48,826</td>
<td>$44,794</td>
<td>$49,265</td>
<td>$59,676</td>
</tr>
<tr>
<td>Data Source: American Community Survey Year: 2019</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Renter Households with Severe Housing Cost Burden</td>
<td>21.5%</td>
<td>30.0%</td>
<td>27.2%</td>
<td>17.7%</td>
<td>11.9%</td>
<td>21.1%</td>
</tr>
</tbody>
</table>
The median income for the high need service area is lower than that of all three counties and the state of Texas. It is also about half the median income of the broader service area. Census tracts with the lowest median household incomes are found near Covenant Medical Center, Grace Medical Center and Covenant Health Plainview.

Severe housing cost burden is defined as households that are spending 50% or more of their income on housing costs. The high need service area has a higher percentage of renter households with severe housing cost burden than each of the counties in the total service area and the state of Texas. Lubbock County has the highest percentage of households that are severely housing cost burdened when compared to Hale and Hockley Counties. Census tracts around Covenant Medical Center and Grace Medical Center have the highest percentage of households that are severely housing cost burdened in the service area.

In 2019, 200% of the Federal Poverty Guideline represents an annual household income of $51,500 or less for family of 4. The high need service area has a substantially larger proportion of population living below 200% FPL, 55%, compared to Lubbock County (40%), Hale County (44%), and Hockley County (40%). The gap is even wider between the high need service area, 55%, and the broader service area, 28%, when comparing percent of population living below 200% FPL. Census tracts with the highest percent of population below 200% FPL are found in the area surrounding Covenant Hospitals.

**Full demographic and socioeconomic information for the service area can be found in the 2019 CHNA for Covenant Health Plainview.**
COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Significant Community Health Needs Prioritized

Ranked significant health needs identified through the Community Health Needs Assessment process:

**PRIORITY 1: MENTAL AND BEHAVIORAL HEALTH**
Mental and behavioral health treatment, intervention and prevention services for the community, including related issues such as substance use

**PRIORITY 2: ACCESS TO HEALTH SERVICES**
Access to health services including but not limited to prevention, mental health, oral health, prescription assistance, health/community navigation, transportation and health education/prevention services

**PRIORITY 3: HOUSING INSECURITY/HOMELESSNESS**
Safe, affordable, stable housing and permanent supportive housing solutions for people experiencing chronic homelessness

**PRIORITY 4: FOOD INSECURITY AND NUTRITION**
Access to healthy food, nutrition education, and healthy lifestyle support

Needs Beyond the Hospital’s Service Program

No hospital facility can address all the health needs present in its community. We are committed to continuing our Mission through providing Wellness and Prevention Community Grants and sponsorships/donations to non-profits addressing identified needs.

The following community health needs identified in the ministry CHNA will not be address and an explanation is provided below:

- Economic insecurity, access to community resources, workforce issues, and transportation

These needs will be indirectly addressed through outreach efforts and internal programming; however, Covenant Health did not select these as priority focus areas. Covenant Health works closely with community non-profits, agencies and organizations that provide more direct outreach and have the resources and expertise to lead initiatives to address these needs.

In addition, Covenant Health will collaborate with CASA of the South Plains, Catholic Charities, The Dream Center, The YWCA, South Plains Community Action, local FQHCs and other local non-profits that address the aforementioned community needs to coordinate care and referrals to address these unmet needs.
Summary of Community Health Improvement Planning Process

Covenant Health engaged our community in the Community Health Needs Assessment process through stakeholder listening sessions and community surveys. Those data were used to set priorities and guide the Community Health Improvement Plan (CHIP). Due to overlapping service areas, close geographic proximity to one another, and shared community-outreach programs, the Covenant Health hospitals collaborated to develop a regional approach to the 2020-2022 CHIP. While there are some differences in select strategies and community partners, Covenant Medical Center, Covenant Children’s, Grace Medical Center, Covenant Specialty Hospital, Covenant Health Plainview, and Covenant Health Levelland share many of the same CHIP strategies, which will allow for more effectively leveraging investments in the region to meet community needs. The Covenant Health Community Benefit Committee for Lubbock hospitals and the Covenant Health Levelland and Plainview boards reviewed and approved the Community Health Improvement Plan.

The 2020-2022 CHIP process was disrupted by the SARS-CoV-2 virus and COVID-19, which has impacted all of our communities. While we have focused on crisis response, it has required a significant re-direction of resources and reduced community engagement in the CHIP process.

This CHIP is currently designed to address the needs identified and prioritized through the 2019 CHNA, though COVID-19 will have substantial impacts on our community needs. These impacts are likely to exacerbate some of the needs identified, and cause others to rise in level of priority. While this is a dynamic situation, we recognize the greatest needs of our community will change in the coming months, and it is important that we adapt our efforts to respond accordingly. This CHIP will be updated in 2021 to better document the impact of and our response to COVID-19 in our community. We are committed to supporting, strengthening, and serving our community in ways that align with our Mission, engage our expertise, and leverage our Community Benefit dollars in the most impactful ways.

Covenant Health anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by Covenant Health in the enclosed CHIP.
Addressing the Needs of the Community: 2020-2022 Key Community Benefit Initiatives and Evaluation Plan

**PRIORITY #1: MENTAL AND BEHAVIORAL HEALTH**

*Community Need Addressed*

Addressing mental health prevention and intervention, including substance use disorders

*Goal*

Expand access to mental and behavioral health services within the service area

*Table 2. Strategies for Addressing Mental and Behavioral Health*

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide on-site mental health or tele-counseling services for the Covenant Plainview service area through partnering with Texas Tech University’s Licensed Professional Counselor (LPC) Internship Program</td>
<td>Adults with low incomes and those who are uninsured in the Plainview service area</td>
</tr>
<tr>
<td>2. Expand anti-stigma, multi-media Work2BeWell Campaign into Plainview service area by working with the Plainview Independent School District</td>
<td>All communities within the service area; focused content on youth and teens in Lubbock, Hale and Hockley Counties</td>
</tr>
<tr>
<td>3. Continue to expand the Covenant Community Counseling Center to provide tele-counseling services for the Plainview service area</td>
<td>Primarily adults with low incomes</td>
</tr>
<tr>
<td>4. Fund community partners engaging in mental health expansion work and continue to participate in the West Texas Mental Health Partnership Committee to advance collaborative approaches to expanding mental health services in our region</td>
<td>All communities within service area</td>
</tr>
</tbody>
</table>

*Planned Collaboration Partners*

Texas Tech University, South Plains Community Action Association, Plainview Independent School District, Plainview Central Plains Center, Allegiance, National Alliance on Mental Illness (NAMI), Catholic Charities, and Star Care

*Resource Commitment*

Covenant Health has a dedicated Community Counseling Center with five full-time LPCs; Covenant Health also dedicates funding through the Wellness and Prevention Grant Program to fund community investments into mental health and other priority needs.
PRIORITY #2: ACCESS TO HEALTH SERVICES

Community Need Addressed

Access to health services including but not limited to prevention, mental health, oral health, prescription assistance, health/community navigation, transportation and health education/prevention services

Goal

Expand access to healthcare and healthcare related services with emphasis on population with low incomes and experiencing vulnerability

Table 3. Strategies for Addressing Access to Health Services

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Continue to expand access to Covenant community outreach programs including dental services, counseling, low-income community navigation, and health education</td>
<td>People with low incomes and those uninsured in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>2. Expand partnership with Plainview Health Department to provide dentures to community members with low incomes at the Covenant Plainview Outreach Dental Clinic</td>
<td>Adults with low incomes and dentally uninsured in the service area of Covenant Plainview</td>
</tr>
<tr>
<td>3. Utilize navigation and health education programs to assist persons with low incomes and those who are uninsured with establishing a primary care provider and assisting them with resource applications</td>
<td>People with low incomes and experiencing vulnerability, particularly those who are uninsured, in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>4. Provide financial and in-kind support to increase access to care and address social determinants of health. Support will be provided to local community clinics, non-profits and FQHCs dedicated to this work</td>
<td>People with low incomes and experiencing vulnerability in the service area of all Covenant Health hospitals</td>
</tr>
</tbody>
</table>

Planned Collaboration Partners

Plainview Health Department, Regence Health Network, South Plains Food Bank, Catholic Charities, and South Plains Community Action Association

Resource Commitment

Covenant Health has dedicated programs to increase access to services including the following: Low-Income Community Navigation Program, Community Health Education Program, Outreach Dental Clinics, and Community Counseling Clinics. Covenant Health also dedicates funding through the Wellness and Prevention Grant Program to fund community investments focused on expanding access and other priority needs.
PRIORITY #3: HOMELESSNESS AND HOUSING INSTABILITY

Community Need Addressed

Safe, affordable, stable housing and permanent supportive housing solutions for people experiencing chronic homelessness

Goal

Reduce barriers to achieving and maintaining good health for community members experiencing vulnerability by addressing social determinants of health, such as housing, while also focusing on food insecurity, access to preventative care, and resource assistance.

Table 4. Strategies for Addressing Homelessness and Housing Instability

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide funding and land feasibility study to Open Door for Housing First permanent supportive housing expansion</td>
<td>People with low incomes and experiencing homelessness and housing instability in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>2. Screen for housing insecurity in all Covenant Health outreach programs</td>
<td>People with low incomes and experiencing housing instability in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>3. Engage work with Community Solutions Built for Zero Program</td>
<td>People experiencing homelessness and housing instability in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>4. Complete community asset mapping related to housing and food insecurity in the Covenant Plainview service area</td>
<td>People experiencing homelessness, housing instability, and/or food insecurity in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>5. Expand wraparound support services to Open Door permanent supportive housing residents</td>
<td>Adult permanent residents at Open Door Supportive Housing exiting chronic homelessness</td>
</tr>
<tr>
<td>6. Explore funding and support opportunities for local agencies working on housing related needs for the Covenant Plainview Service Area</td>
<td>People experiencing homelessness and housing instability in the service area of Covenant Plainview</td>
</tr>
</tbody>
</table>

Planned Collaboration Partners

Texas Homeless Network, Open Door, Salvation Army, Family Promise, South Plains Community Action Association, Texas Tech University, local public school districts and foster care agencies.

Resource Commitment

Covenant Health has both a dedicated Low-Income Community Navigation Program and a Community Health Education Program which work to address housing and homelessness; Covenant Health also dedicates funding through the Wellness and Prevention Grant Program to fund community investments focused on housing, homelessness, and other related social determinants of health.
PRIORITY #4: FOOD INSECURITY AND NUTRITION

Community Need Addressed

Access to healthy food, nutrition education, and healthy lifestyle support

Goal

Reduce barriers to achieving and maintaining good health for community members experiencing vulnerabilities by addressing food insecurity and nutrition issues.

Table 5. Strategies for Addressing Food Insecurity and Nutrition

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide health education with emphasis on nutrition through Covenant Health Education Program</td>
<td>People with low incomes and experiencing vulnerability, with special emphasis on those who are food insecure, in the service area of Covenant Plainview Hospital</td>
</tr>
<tr>
<td>2. Continue Healthy Kids 2020 Program for Covenant Plainview and assess how to expand wellness goals for 2021-2024</td>
<td>School-aged children within the City of Plainview</td>
</tr>
<tr>
<td>3. Screen for food insecurity in all Covenant Health outreach programs and link community members to resources</td>
<td>People with low incomes and experiencing vulnerability, with special emphasis on those who are food insecure, in the service area of all Covenant Health hospitals</td>
</tr>
<tr>
<td>4. Provide financial and in-kind support to increase access to food and address other social determinants of health. Support will be provided to local community clinics, non-profits and FQHCs dedicated to this work</td>
<td>People with low incomes and experiencing vulnerability in the service area of Covenant Plainview Hospital</td>
</tr>
<tr>
<td>5. Complete community asset mapping related to housing and food insecurity for the Covenant Plainview service area</td>
<td>People experiencing food insecurity and/or homelessness/housing instability in the service area of Covenant Plainview Hospital</td>
</tr>
</tbody>
</table>

Planned Collaboration Partners

Plainview YMCA, Plainview Snack Pak 4 Kids, South Plains Food Bank, Catholic Charities, Plainview Independent School District, and South Plains Community Action Association

Resource Commitment

Covenant Health has both a dedicated Low-Income Community Navigation Program and a Community Health Education Program which work to address housing and homelessness; Covenant Health also dedicates funding through the Wellness and Prevention Grant Program to fund community investments focused on housing, homelessness and other related social determinants of health.
## Other Community Benefit Programs and Evaluation Plan

*Table 6. Other Community Benefit Programs in Response to Community Needs*

<table>
<thead>
<tr>
<th>Initiative (Community Need Addressed)</th>
<th>Program Name</th>
<th>Description</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Childhood Obesity and Wellness</td>
<td>Go Noodle</td>
<td>Engage elementary school students by increasing movement during the day using Go Noodle</td>
<td>Both people with low incomes and the broader community</td>
</tr>
<tr>
<td>2. At-Risk Youth, Mental Health, Education</td>
<td>Community Advocacy Program for Students</td>
<td>Direct student intervention to youth-at-risk utilizing a comprehensive wellness approach. The advocate and student work together to help the student navigate various transitions in order to reach their full potential.</td>
<td>Families with low incomes and at-risk youth</td>
</tr>
<tr>
<td>3. Mental Health</td>
<td>Lubbock ISD Keep Empowering Youth Program</td>
<td>The Lubbock ISD Keep Empowering Youth program provides meaningful and effective social emotional learning using an integrated approach to support students and their families. This program focuses on prevention, builds social emotional competencies and provides mental health support.</td>
<td>At-risk youth</td>
</tr>
<tr>
<td>4. All Identified Needs in CHNA</td>
<td>Wellness and Prevention Grant Program</td>
<td>The Covenant Wellness and Prevention Grant Program seeks to promote the health and well-being of individuals and families with low incomes in communities within our service area. Grant funding is allocated annually to community partners to further address community needs identified in Covenant Health’s CHNAs.</td>
<td>Individuals and families with low incomes within the service area</td>
</tr>
</tbody>
</table>
This Community Health Improvement Plan was adopted by the Covenant Plainview Board of Directors on December 14, 2020. The final report was made widely available\(^2\) by December 28, 2020.

Richard Parks
Regional Chief Executive, West Texas/Eastern New Mexico

Cassie Mogg
Chief Operations Officer, Covenant Health Plainview

Joel Gilbertson
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Providence St. Joseph Health

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To request a paper copy without charge, provide feedback about the CHNA or CHIP Reports, or any additional inquiries, please email CHI@providence.org.

\(^2\) Per § 1.501(r)-3 IRS Requirements, posted on hospital website