

TUCSON MEDICAL CENTER
COMMUNITY HEALTH NEEDS ASSESSMENT
COMMUNITY HEALTH IMPLEMENTATION PLAN
2024 - 2027

Tucson Medical Center | Community Health Implementation Plan (CHIP)
Introduction:

Tucson Medical Center (TMC), part of the TMC Health System, is a nonprofit hospital serving Southern Arizona. In addition to Tucson Medical Center, the TMC Health system includes TMCOne, Tucson Medical Center Rincon, Benson Hospital, Northern Cochise Community Hospital, TMC Health Cancer Center, and TMC Health Foundation.

TMC Health's mission is to provide exceptional care and compassionate hospital services to all who come to us for care including the uninsured, underinsured, and underserved populations throughout Southern Arizona. Furthermore, TMC Health considers social determinants of health, and understands their profound impact on health behaviors and on health outcomes, while serving the patient's cultural, spiritual, and social needs.

With the advent of the 2010 Patient Protection and Affordable Care Act, all nonprofit hospitals, working to maintain their institution's federal tax exemption, are required to address their community's health needs, assessed every three years through a Community Health Needs Assessment (CHNA), with a Community Health Implementation Plan (CHIP).

In doing so, TMC combines strategic health equity measures with available expertise, and community resources, to serve current and on-going community health needs. TMC also fosters collaborative efforts with other health care providers and works closely with the Pima County Health Department and Banner Health to support equitable health care throughout our community.

Other partnerships working to advance our quality of services and that bolster the health and well-being of our community include Mayo Clinic Care Network, Southern Arizona Hospital Alliance, Tucson Fire, Dispatch Health, and CODAC Health, Recovery & Wellness.

Through a combination of strategic focus groups, meetings with key community informants, gallery walks, and a drafting process, the 2024

Community Health Needs Assessment (CHNA) identified the following three key findings effecting the population of Southern Arizona:

1. Mental and Behavioral Health
2. Substance Use Disorder
3. Child and Adolescent Health

(*Primary 2024 CHNA data collection activities included 41 key informant interviews, 71 focus group participants, 98 gallery walk participants, and monthly steering committee progress reviews.)¹.

Two key findings, Mental and Behavioral Health and Substance Use Disorder, are continuums of the 2021 CHNA; therefore, TMC has the unique opportunity to address both Mental and Behavioral Health and Substance Use Disorder with the on-going successful strategies implemented in 2021 while identifying and introducing new services and technologies.

Tucson Medical Center 2024 CHNA Implementation Strategy | Health Priority 1: Mental and Behavioral Health

While addressing the communities health needs, five years from the official declaration of the COVID 19 pandemic, we understand the repercussions of living through a pandemic were not short lived; instead, we realize the long term and ongoing health implications and growing scope of health problems COVID 19 had and has on our community.

According to the current CHNA, pandemic born behaviors, not limited to social isolation, decreased activity, and an increase in substance use, illustrate the post pandemic pendulum of life still swings towards poor mental health, behavioral health, and child and adolescent health outcomes.

Mental and Behavioral Health refers to emotions, behaviors, and biologic processes, related to a person's thoughts and actions, and their impact on a person's overall well being.¹ Throughout the CHNA process, this area was consistently reported as an important issue in our community.

Presenting a great challenge to our community, 2024 Pima County data reports one mental health provider for every 350 residents and, due to the low ratio of mental health providers, nearly three in ten (30%) Pima County respondents reported that they were "sometimes" or "never" able to get mental health care when they needed it.¹.

Recent data speaking to Social Determinants of Health (SDoH) affecting the mental and behavioral health of Pima County's community include:

- One in two (47.8%) adults, over 65, have a high social isolation risk score.¹
- One in four (25.1%) adults, over 50, have a high loneliness risk score.¹
- Nearly one in three (30.34%) households spends more than 30% of their income on housing.¹
- One in ten (10.9%) people experience food insecurity.¹
- Nearly one in five (19%) adults reported that they had experienced poor mental health for fourteen or more days in the past month.¹

Tucson Medical Center currently has the following Mental and Behavioral Resources in place serving the health of the community:

- **Behavioral Emergency Response Team** | TMC created a Behavioral Emergency Response Team (BERT), which utilizes a team of interdisciplinary healthcare professionals to respond to patients that are experiencing a behavioral emergency in the hospital setting. A primary goal of BERT is to maintain a safe environment for patients, visitors, and staff by providing the support needed to prevent and manage violent behavior. When hospital staff recognize the signs of an impending behavioral crisis, such as threats of harm to self or others, escalating agitation or aggression, severe emotional distress or severe confusion, they contact the BERT staff who intervene to de-escalate the situation. This is a shift from a reactive, punitive approach to a therapeutic approach improving patient outcomes and staff safety.
- **Behavioral Health Consults** | Ongoing partnership with Palo Verde Behavioral Health Hospital to provide evaluations and recommendations for whether or not inpatient behavioral health is needed. Palo Verde Behavioral Health Hospital's Mobile Assessment Team (MAT) conducts disposition assessments for pediatric and adult patients expressing suicidal ideation, patients with substance use disorders, or patients experiencing acute psychosis to determine if the patient meets criteria for inpatient psychiatric admission.
- **Inpatient Respite Care** | TMC Hospice offers a short-term, inpatient respite care at Peppi's House for up to 5 days. This is designed to give family caregivers a break so they can spend time to recharge, attend a special event, or focus on their own health. Being a caregiver requires a lot of time and can be emotionally and

physically exhausting. Some of the benefits of respite include increased energy, improved sleep, better outlook, and reduced levels of stress and anxiety. For patients, respite care ensures continuity of care. Other benefits include opportunities for increased social interaction and reduced guilt over caregiver's stress and anxiety leading to improved relationship with the caregiver.

- **Reduced Mental Health Strain | Foundation Grants For Patients & Families** | Our TMC Hospice mission is to help those with life-limiting illnesses walk their absolute path of life. Hospice patients are unique in that most of their care is in the comfort of their homes, tended to by family members or facilities. The TMC Hospice Fund request will help aid families and patients in various ways during such times. Emergency Funds assist Hospice families during financial hardship so they can focus on caring for their loved ones rather than finances. These funds help pay for initial care home costs, mortuary fees, which have doubled in the last two years, utilities, rent/mortgage, groceries, and minor home repairs such as ramps and grab-bars. Families particularly struggle during the holiday season; hospice funds ensure our families receive holiday gifts and meals. Additionally, Hospice patients and their families often seek alternative therapies as a minimally invasive way to help them cope throughout the dying process and manage discomfort. Massage therapy, music therapy, and the like can dramatically enhance a person's end-of-life experience by reducing pain, stress and anxiety and, thereby, also reduce the mental health strain felt by family.
- **Grief Support and Bereavement Services** | TMC Hospice offers grief support in two primary ways: grief support groups (Tucson and Green Valley) and individual bereavement counseling. Trained TMC Hospice volunteers facilitate the support groups for anyone in the community experiencing grief. The group provides a safe place for sharing grief and receiving compassion from others who understand. Bereavement services are provided by a trained therapist for family and friends of the hospice patient. Grief counseling includes support and education. Support includes deep listening, kindness and compassion. TMC Hospice utilizes *William Worden's Four Tasks of Mourning* as a model that describes the elements of healthy grieving and for reference during counseling. Working towards the completion of Worden's tasks helps keep the grieving person from getting stuck. Education on the universal aspects of grief includes learning ways to regulate and manage intense emotions so they can heal.

- **Caregiver Support Program** | TMC Hospice currently released a virtual support group designed for families or caregivers of current hospice patients, guided by compassionate volunteers with specialized training in hospice care and caregiver support. Initially planned as a monthly gathering, the program will remain flexible, with the potential to increase meeting frequency to biweekly or weekly depending on participant needs and feedback. This initiative represents the first phase of our comprehensive Caregiver Support Program. Future phases are set to expand this program even more. One upcoming phase will focus on mobile outpatient caregiver support, which will involve training volunteers to provide hands-on instruction for families. These training sessions will cover essential caregiving skills such as patient bathing, safe transfers, proper positioning, and patient turning. Complementing the practical training, another planned phase will introduce monthly educational sessions designed to support caregivers holistically. These sessions will address critical aspects of caregiver wellness, including emotional support strategies and alternative therapeutic approaches. Participants can look forward to exploring techniques like aromatherapy, art therapy, yoga, and sound healing. Additionally, the educational program will offer practical guidance to help caregivers manage the complex day-to-day challenges of caring for a loved one.
- **Vigil Program** | TMC Hospice volunteers sit vigil. They provide a calm presence at the bedside during the final hours of the patient's life so they are not alone and do what is necessary for a peaceful transition. Vigils help reduce anxiety and fear for families and patients by being present and providing education.
- **RN Case Management** | Connects patients that have continued needs for medication management with mental health providers in the community.
- **Columbia-Suicide Severity Rating Scale** | Used in Emergency and inpatient units, providing the care team with a tool to assess suicidality in patients and to implement precautions and treatments for patients in acute behavioral health crisis.
- **Concert Health** | Provides next day tele-health psychology appointments. Primary care providers refer their patients to Concert Health for management of behavioral health needs; if a medication change is recommended, the behavioral health

provider places a note in the electronic health record for the primary care provider to process; behavioral health providers have direct access to referred patients' electronic health record to assure continuity of care.

- **EvolvedMD** | Embedded psychologists in the PCP offices. EvolvedMD provides TMC patients with a mental health therapist at their doctor's office. Given two of the greatest barriers to mental health care are access and affordability; EvolvedMD creates immediate access and costs the same as the PCP visit. The EvolvedMD protocol includes:
 - 1) The patient makes an appointment with an in-network PCP for a routine checkup.
 - 2) The patient is encouraged to share any mental health concerns.
 - 3) The PCP will refer the patient to on-site mental health therapist to begin treatment — often immediately.
 - 4) Follow-up includes mental health therapist services, each month, for 45-minutes per appointment and for 15-minutes per checkup.
 - 5) The patient's PCP and our therapist work together to treat the whole patient — tending to both physical and mental health.
- **Social Determinants of Health (SDoH) Assessment** | Completed by the TMC bedside RN (BSRN) working to assess each patient's SDoH risk. TMC provides a report that can be accessed to show which patients were or were not screened. If a patient answers positively to SDoH needs, the screening will automatically prompt the BSRN to place a case management consult for SDoH Needs.
- **Depression Screening** | Provided annually for all primary care patients and OB patients.
- **Support Groups And Individual Counseling** | TMC understands that having an infant in our Newborn Intensive Care Unit can be stressful for parents and family. TMC RN Case Management routinely assesses the family's mental health status and provides them with a wide range of resources and support, in the community, including support groups and individual counseling.
- **Tucson Collaborative Community Care (TC-3)** | A partnership between Tucson Medical Center and the Tucson Fire Department. TC-3 matches our most vulnerable community members with services that they historically accessed through 911 emergency services. TC-3 unites people with community agencies; improving

the health of the community while reducing non-emergent emergency response efforts.

- **Extended Services** | TMC continues to expand insurance enrollment in the Southeastern sector of Pima County, with more medical services available on our Rincon Campus and through Vail Valley HealthCare.

Tucson Medical Center believes sustained employee health leads to better quality patient care. The following section identifies mental and behavioral health resources serving the health of employees:

- **Employee Access To Concert Health** | Located in TMCOne offices, primary care providers refer their patients to Concert Health for management of behavioral health needs. If a medication change is recommended, the behavioral health provider places a note in the electronic health record for the primary care provider to process. Behavioral health providers have direct access to referred patients' electronic health record to assure continuity of care.
- **Extended Mental Health Services** | Due to the limited number of mental health providers across the nation, the use of telemedicine has increased access to behavioral health providers. Starting in 2023, mental health services were expanded for TMC employees and their families. Employees can subscribe to Headspace, a digital mental health platform that offers mental health care at all levels of need. Services include eight no cost counseling sessions with a licensed therapist, medication management, and unlimited access to telemental health coaching and self-guided coping tools.
- **On-Campus Resources** | TMC resources include a Registered Nurse wellness coach available by appointment to talk through the stresses of being a caregiver. Spiritual care and Behavioral Emergency Response Teams provide support to the staff as needed.
- **Therapy** | Employees also have options for teletherapy or in person therapy via the Optum Employee Assistance Program (six sessions per problem per calendar year). They can also register for Calm, a top-rated wellness app for sleep, meditation, relaxation, and coping skills.
- **Schwartz Center** | TMC became a member of The Schwartz Center in 2023. The Schwartz Center partners with healthcare organizations

to advance compassion for patients, their care teams, and the healing relationship. Their two signature programs have been launched at TMC. The Schwartz Rounds program provides a regular open forum for a multidisciplinary discussion of the psychosocial and emotional aspects of working in healthcare. Stress First Aid provides a framework for psychological peer support, with a set of supportive actions designed to promote self-care and coworker support.

Tucson Medical Center 2024 CHNA Implementation Strategy | Health Priority 2: Substance Use Disorder

Substance use disorder is the excessive use of alcohol or drugs, including prescription medications or illegal drugs.¹

According to the Arizona Department of Education, Arizona recorded more than 1,800 opioid-related deaths and more than 4,000 overdoses in 2023.² Furthermore, according to the Pima County Office of the Medical Examiner, from 2020 to 2023, 1,308 Pima County residents succumbed to opioid overdose and the overdose death rate in Pima County increased by 103.5% from 2012 to 2022.³

In 2022, opioids were responsible for 69% of overdose deaths and, for the third year in a row, fentanyl, a synthetic opioid 50 to 100 times more potent than morphine, that is often mixed with other illegal drugs with or without the user's knowledge, contributed to the greatest number of overdose deaths in Pima County of any single drug.⁴

Services and Resources Tucson Medical Center currently provides:

Tucson Medical Center Opioid Stewardship Initiatives for Substance Use Disorder (1-4):

1. Monitoring the frequency of prescribers co-prescribing more than 1 opioid or an opioid and a benzodiazepine. Built in Best Practice Alert to fire during prescribing to point out risk (currently in test environment).

2. AZ Clinical Opioid Workgroup | MOUD Metrics: To establish a standard metric for statewide healthcare systems and payers, on the utilization of Medications, for Opioid Use Disorder for (MOUD). Percentage of patients ≥ 18 years with opioid use disorder who were prescribed, administered, dispensed or filled an FDA-approved medication for the disorder during the prior year. The

metric is a total rate capturing any medications used in treating opioid use disorder.

MOUD Phases:

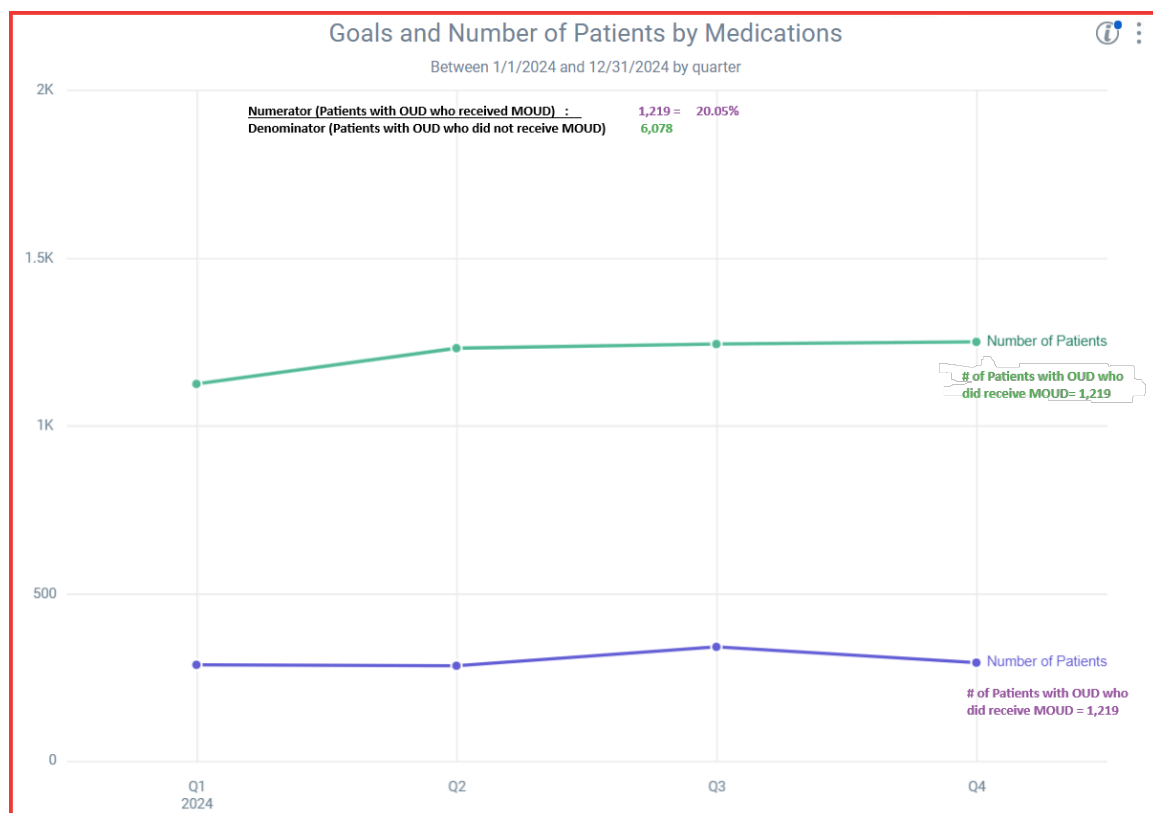
Phase 1: Informatics [Implement Metric]

Phase 2: Quality Improvement [Gap Analysis, Strategize Improvement]

Phase 3: Learning Health System [Establish Statewide Collaboration]

TMC has completed Phase 1, TMC has a Slider Dicer Model to calculate the metric. We are currently in the Gap Analysis, Quality Improvement Stage.

Figure 1: 2024 Metric for % of patients with Opioid Use Disorder who received a Medication for Opioid Use Disorder.



3. Neonatal Abstinence Syndrome | TMC utilizes an interdisciplinary collaborative team including OB, Neonatology, Pharmacy, Nursing, Speech Therapy, and Developmental Specialists who work together to identify, assess and treat substance exposed newborns. This includes an antepartum order set to initiate pregnant women on methadone or buprenorphine, extensive case management and social services assessments to ensure pregnant mothers have safe and stable housing, are referred to an outpatient MAT program, are introduced to the Neonatal Abstinence Syndrome Annex (NASA) to familiarize themselves with our program for treating neonates in opioid withdrawal. We recently revised our neonatal opioid withdrawal pharmacological protocol and are constantly monitoring the outcomes and refining the protocol.

4. Free Take Home Naloxone Kits | TMC participates in State/County programs to offer free take home naloxone kits for ER and Mother Baby patients (Medical substance abuse treatment by our Maternal Fetal Medicine group).

- **TMC & Palo Verde Behavioral Health** | Palo Verde, which shares our campus, assists in evaluating patients who present at the TMC Emergency Department to ensure a safe disposition and treatment. Palo Verde also works closely with TMC when needs are identified on the inpatient unit.
- **The Connie Hillman Family Foundation House** provides treatment for mothers recovering from substance abuse. The 16-unit complex provides aftercare treatment, pediatric and maternal care, life-skills training and other services to help women be successful in their recovery, to keep families together and to provide a bridge to independence.

The Connie Hillman House offers our community “A Safe, Sober Transitional Living Program Designed for Women & Their Children”.

- **The Southern Arizona Opioid Committee** provides education and resources to help those struggling with substance abuse to find help and treatment close to home.

- **NICU Support** | In our NICU, case managers work collaboratively with CODAC and Arizona Department of Child Safety to provide treatment and support to families of babies exposed to drugs during pregnancy.
- **Partner Efforts** involve collaboration with the Arizona Department of Health Services ADHS – BEMSTS Naloxone Leave Behind Program, statewide outreach, and support from rural EMS Agencies.
- **Partnership Projects** involve collaboration with the Arizona Center for Rural Health (AzCRH) substance abuse and ongoing efforts to combat opioid overdose in Arizona. AzCRH has created comprehensive strategies for overdose prevention, mapped overdose data, and provides useful resources including free training for naloxone overdose.

Tucson Medical Center 2024 CHNA Implementation Strategy | Health Priority 3: Adolescent and Child Health

According to the 2024 Pima County CHNA, approximately one in six Arizona adolescents experienced a major depressive episode in the past year ranking Arizona as the 9th highest in the nation while placing Arizona as the 47th in the nation for received treatment.¹

Furthermore, only 52% of adolescents requiring mental health services had insurance coverage that adequately met their needs and only 63% of adolescents had a preventative medical visit in the past year.¹

TMC Health, in partnership with the Southern Arizona Health Alliance (SAHA), whose main goal is to enhance pediatric care in Southern Arizona, conducts monthly Pediatric Committee meetings addressing child and adolescent health issues. Current topics include enhanced protocols around pediatric stroke, pediatric cardiovascular issues, and pediatric diabetes.

Yearly pediatric symposium, held at TMC, address topics from Child Life, ER, clinics, and respiratory care to syphilis training and education.

Although syphilis training has, to date, been geared towards health care workers, there is discussion about expanding to the community. According to the 2024 CHNA, the lack of reproductive and sexual health services pose as problematic to our youth. Therefore such efforts work to

address our young peoples need for sexual health education, especially in rural communities.

Services and Resources Tucson Medical Center currently provides:

- **Comprehensive Primary Care** | Pediatric services include growth and development screenings, vaccinations, eye and hearing screenings, and lead screenings.
- **Specialty Pediatric Care** include endocrinology, orthopedics, gastroenterology, lipidology, developmental pediatrics, urgent care, general surgery, and urology.
- **Behavioral Health Partnership** in collaboration with EvolvedMD (in-house psychology) and with Palo Verde. EvolvedMD provides TMC patients with a mental health therapist at their doctor's office. Given two of the greatest barriers to mental health care are access and affordability; EvolvedMD creates immediate access and costs the same as the PCP visit.
- **RN Case Management** guide young patients through their health services with dignity. Adolescent patients need private time alone with health care providers; this allows adolescents to speak with knowledgeable medical professionals about their personal health-related questions or concerns that they wish to be kept confidential. Time and encouragement with and from RN Case management builds skills to manage and bolsters the likelihood of carrying healthy habits throughout life; however, 58% of adolescents, according to the current CHNA, did not have a chance to speak with a provider privately without an adult in the room during their last visit.
- **Annual Depression Screening** | For all pediatric patients >12.

SNAP SHOT | The Trevor Project's 2024 Survey | LGBTQ Youth in Arizona:

- 39% of LGBTQ youth and 41% of transgender and non-binary young people seriously considered suicide in the past year.⁵
- 64% reported experiencing symptoms of anxiety.⁵
- 55% reported experiencing symptoms of depression.⁵
- 49% seriously considered suicide in the past year.⁵
- 11% attempted suicide in the past year.⁵
- **Social Determinants of Health (SDoH) Screening For Children & Adolescents** | Patient and family referrals to resources. According to

the 2024 CHNA, in Pima County, 42% of children who are Black/Non-Hispanic and 31% of children who are Hispanic are living in households experiencing poverty. Furthermore, 462,000 adolescents between the ages of 12 and 17 are living in households experiencing a high burden with the cost of housing, almost 43% of adolescents lived in a household that received 1-2 types of assistance in the previous year, outpacing the national average of 39%, and nearly a third of Arizona adolescents live in households that can't always afford to eat healthy foods.^{1..6.}

- **Improved Pediatric ED Services** | Tucson Medical Center is focused on Level I, III, and IV Trauma Centers, state wide, to improve skills on how to best manage pediatric emergencies and Adverse Childhood Experiences (ACEs).

“ACEs are traumatic events that can have a significant impact on an individual's physical, mental and emotional health throughout their life. These experiences include abuse, neglect, substance abuse and mental illness in the household, parental separation or divorce, incarceration of a household member, and witnessing domestic violence.”

- **Child and Adolescent Nutrition** | TMC has an outpatient pediatric clinic that is open one day per week to provide care to babies that have feeding tubes or other high-risk nutrition conditions that need close monitoring and evaluation. Currently, these delicate patients are managed by their Pediatricians who need the support of a Registered Dietitian to provide expertise in the area of nutrition and growth. This collaborative approach allows us to support the providers in the community manage these specialized nutrition needs and promote adequate growth needed for appropriate development.
- **Clinical Diabetes Educators** work closely with pediatric patients in the hospital and after discharge to provide education about how to best manage their disease. TMC has employed additional specialists in endocrinology to help patients who are newly diagnosed or to help those having difficulty managing their conditions. The Centers for Disease Control formally recognized the Tucson Medical Center's diabetes prevention program.
- **Outpatient Nutrition Counseling** | Registered dietitians are available to provide medical nutrition therapy for chronic disease management and to offer weight-loss programs. Additionally,

TMCOne offers nutrition counseling for pediatric weight loss and diabetic patients, as well as non-surgical weight-loss programs.

- **Child Life** | TMC offers educational in-services, to staff, in our rural hospitals, teaching how to work with pediatric patients in the hospital setting, how to communicate with pediatric patients, and how to help pediatric patients cope through painful procedures. TMC also provides best practice educational tip sheets in regards to getting vital signs on young patients in the Emergency Department setting. TMC Child Life Specialists are trained in explaining medical terminology, procedures, and tests, to patients and families, to optimally support the young patients in-care experience.

SNAP SHOT | Tucson Medical Center | Pediatric Emergency Department:

- **TMC** treats approximately 28,000 pediatric patients per year.
- **TMC** admitted approximately 1,800 pediatric patients in 2024.
- **TMC** has been voted "Tucson's Best Pediatric ER" multiple times.
- **TMC Pediatric Subspecialties** include, but are not limited to, Cardiology, ENT, Endocrinology, Gastroenterology, Hospice, Infusion, Neurology, and Outpatient Therapy.
- **TMC Pediatric Nurses** are certified in:
 - o Basic Life Support (BLS)
 - o Advanced Certified Life Support (ACLS)
 - o Pediatric Advanced Life Support (PALS)
 - o Emergency Nursing Pediatric Course (ENPC)
 - o Crisis Management (Vistelar Training) - This is specific to the Behavioral Health population, working with de-escalation techniques.
- **TMC Child Life Specialists**, who are helpful in explaining medical terminology, procedures, and tests to patients and families, support the patients by providing distractions to medical procedures in the Peds ED. They are vital part to our Peds department.
- **TMC Case Managers** are crucial to our department as well; they help provide support and resources to patients and families; they help find placement for Behavioral Health patients.
- **TMC** is the Southern Arizona Children's Miracle Network Hospital.
- **TMC** is a member of the Southern Arizona Hospital Alliance (SAHA) and provides outreach to rural hospitals and rural communities. We hold monthly meetings with the leaders of each SAHA hospital and

discuss disease processes or new protocols and help with education and registration for certain continuing education and certification classes.

Continued Child and Adolescent Programming:

- **Quarterly Car Seat Safety Class** | TMC partners with Benson and Willcox, to host car seat classes, each quarter, serving rural communities.
- **Children Are Priceless Passengers** | In partnership with the Arizona Governor's Office of Highway Safety, a parent-centered child car seat safety class is offered once a month to the Pima County community. For \$35.00, registrants participate in an hour-long educational class, they receive a car seat, and they receive help installing the car seat properly.
- **TMC For Children's Community Injury Prevention Outreach** | TMC's efforts annually reach over 35,000 children in Southern Arizona. In 2024, TMC hosted over 15 car seat education classes through which TMC provided 271 car seats and 1,209 booster seats. The Pima County community relies on TMC's Desert Kids Safety Program to support the growing number of underserved families in Southern Arizona. TMC realizes family education is the foundation of community outreach; as it is the best way to ensure positive injury prevention outcomes.

Tucson Medical Center 2024 CHNA Implementation Strategy | Addressing Health Equity and Social Determinants Of Health (SDoH):

TMC Health is acutely aware of the impact that Social Determinants of Health (SDoH) have on the health of our community and patients that we care for daily. We understand how the cost of living and lack of affordable housing directly links to many of our patients' ability to care for themselves prior to and following discharge from our care. As part of our commitment to infusing health equity throughout our organization, we have looked at how our health equity strategy aligns with the results of our Community Health Needs Assessment (CHNA) and our work that we have outlined in this Community Health Improvement Plan (CHIP).

We believe that by understanding and utilizing data related to social determinants of health, we can have more of a sustainable impact on our patients and community. The Health Equity Committee is collecting and

analyzing patient's SDoH data with the intent of better understanding the following areas:

1. **Screening compliance:** The committee is looking at the compliance rates of SDoH screening in order to assure that we have both qualitative and quantitative data that is representative of the population we serve.
2. **Readmission and mortality:** It is suspected that our patient's ability to afford basic necessities such as food and shelter are primary drivers in patients' ability to care for their health in general and more specifically post-discharge.
3. **Sepsis:** We hypothesize that patients with health disparities are at high risk for presenting with sepsis in later stages due to a lack of resources. Additionally, we believe that language barriers may lead to misdiagnosis during early stages.

SNAP SHOT | Current Efforts & Tools Supporting TMC Patients with SDoH-Related Needs:

- **BSRN SDoH Screening:** Our bedside RNs perform initial SDoH screenings. If the screen indicates unmet needs, they place a consult for Case Management to support next steps.
- **SDoH Referrals & Community Resources:** We provide patients with resource lists and utilize the *Unite Us* portal for direct referrals to community services.
- **Warm Handoffs:** We've established strong relationships with local shelters (including Casa de Respiro), TC-3, and behavioral health agencies to coordinate safe and timely transitions.
- **Senior Placement Coordination:** We work with a trusted senior placement agent, from Senior Living Finders, to assist with long-term care placements.
- **Education and Training:** Team members have access to ACMA educational modules focused on SDoH, enhancing our ability to screen and respond effectively.

Additionally, with support from the TMC Foundation, Case Management has access to a number of grants that help bridge gaps in care for high-risk patients:

- Adults with ALTCS Pending in Need of LTC Placement
- Antepartum Home Away From Home
- Mother/Baby Emergency Support
- NICU Emergency Grant Fund
- Pediatrics Behavioral Health and Emergency Support
- Refugee and Immigrant Family Assistance
- Adult/ED Emergency Support (Gift Cards)
- Homeless Population Support Fund
- Women's Emergency Fund

Tucson Medical Center Case Management also has an available NICU Relief Fund. This is a private funded grant helping parents of our NICU patients pay for rent, mortgage, utilities and other items used to care for the patients (e.g., car seat, strollers, etc.). We also partner with offices that provide car seats and pack and plays for those patients that qualify.

Tucson Medical Center views the 2024 – 2027 CHIP as an opportunity to build stronger systems across care settings. From the Case Management perspective, we look forward to bolstering the following areas to better serve best patient health outcomes:

1. **Behavioral Health Discharge Navigation**
 - Improve support for patients discharging from inpatient psych or ED holds.
 - Work to establish community-based navigation or follow-up care coordination.
2. **Enhanced SDoH Screening & Resource Integration**
 - Embed standardized tools to identify risk early.
 - Expand partnerships with housing, food, and transportation programs.
3. **Culturally Competent Patient Education**
 - Develop accessible and multilingual patient care and educational materials.
 - Explore peer mentors, health navigators, and community health worker models.

4. Substance Use Discharge Pathways

- Facilitate referrals to MAT and recovery support.
- Integrate harm reduction education into discharge planning.

5. Caregiver Support Initiatives

- Provide resources and education to caregivers.
- Connect families to respite or in-home support services.

Tucson Medical Center 2024 CHNA Implementation Strategy | Addressing Top Causes of Death: Cancer and Cardiovascular Disease:

Cancer and cardiovascular disease are the two leading causes of death of Pima County residents.

Cancer | TMC Health launched the TMC Health Cancer Center in April 2025, bringing together the expert inpatient care of Tucson Medical Center with the trusted expert oncologists and surgeons in the community. With sites throughout Pima County, the TMC Health Cancer Center is poised to provide inpatient and outpatient oncological care to more of Southern Arizona.

The TMC Health Cancer Center includes a full continuum of services for some of the cancers with the highest prevalence rates including breast cancer, prostate cancer, lung cancer, and colorectal cancer.

Moving forward, TMC Health will expand the reach of the TMC Health Cancer Center throughout Southern Arizona.

SNAP SHOT | Cancer Mortality | Pima County 2024:

- Age-adjusted cancer death rate: 35.2 per 100,000 population⁷.
- Most common cancer types linked to mortality:
 - o Lung, Blood, Colorectal, Pancreatic, Prostate, and Breast⁷.

Cardiovascular Disease | The Iliana Maria Lopez CardioVascular Center at Tucson Medical Center plays a pivotal role in addressing the cardiovascular health needs of Pima County. As heart disease remains a leading cause of death in the region, TMC offers comprehensive cardiac and vascular services including advanced diagnostics, minimally invasive procedures, and complex surgeries. Their multidisciplinary team provides personalized treatment plans, encompassing services such as a modern

catheterization lab, electrophysiology, structural heart programs, stroke care, and vascular screenings. Post-treatment, patients benefit from cardiac rehabilitation programs aimed at improving outcomes and quality of life.

TMC's commitment to community health extends beyond clinical services. Through its Community Benefit initiatives, TMC has supported Southern Arizona's health for over 80 years, engaging in community programs and collaborations. These efforts align with the findings of the 2024 Pima County Community Health Needs Assessment, which emphasizes the importance of addressing chronic diseases, like heart disease, through preventive care and education.

In 2024, TMC Health opened Tucson Medical Center Rincon, bringing cardiovascular services to a medically underserved area of Pima County. In upcoming years, those services will be expanded providing closer cardiac care for residents of Southeast Tucson.

TMC Health also invests in professional development through in-house education for staff and investment as the title sponsor for the CardioVascular Interventional Summit in collaboration with Pima Heart.

TMC's Clinical Research program offers patients access to innovative therapies and expert care. By participating in clinical studies, patients contribute to medical advancements that benefit the broader community. This research focuses on addressing unmet medical needs and ensuring patient safety and comfort throughout the process.

TMC | 2024 Cardiovascular Procedures & Clinical Research Enrollment | By the Numbers:

Total CT surgeries: **321 surgeries**

Total Cardiac Catheterization Cases: **7319 procedures (all time record by over 500 procedures)**

Total Structural Heart Procedural Procedures: **916 procedures (record)**

- TAVR: **317 procedures (record)**
- LAAO: **379 procedures (record)**
- Mitral: **138 procedures (record)**
- Tricuspid: **19 procedures**
- Other: **63 procedures**

EP Ablation Cases: **1101 Procedures (record)**

TMC Cardiology Clinical Research Enrollment: **125 patients**

Tucson Medical Center 2024 CHNA Implementation Strategy | Key Health Equity Action Plan For Southern Arizona:

Key Health Equity Challenges in Southern Arizona | Utilizing data collected through internal and external data sources, with input from key community collaborators, we have identified the following equity gaps:

1. Access to Care

- **Geographic Disparities:** Medically underserved areas like Southeast Tucson and rural communities face limited access to healthcare facilities.
- **Transportation Barriers:** Many patients struggle to access care due to lack of reliable transportation, prompting TMC to fund bus fares.
- **Limited Specialty Care:** Rural areas often lack specialized services, requiring innovative solutions like telehealth and specialist outreach.
- **Goal:** *Our goal is to address key access to care barriers based on geographic barriers to access for urban and rural patients.*

2. Social Determinants of Health (SDoH)

- **Poverty:** Economic barriers limit access to medical care, healthy food, and safe environments, with many relying on charity care programs.
- **Education Gaps:** Low health literacy contributes to poor health outcomes and inequitable access to preventive care.
- **Social Isolation:** Particularly among seniors, loneliness impacts mental and physical health.
- **Goal:** *Our goal is to work with community partners to address key SDoH, including poverty, education and prosperity, and social isolation.*

3. Chronic Diseases

- **Diabetes Management:** High rates of diabetes necessitate targeted programs like the Diabetes Bridge Clinic to manage complications and improve outcomes.
- **Cardiac Health:** Lack of local rehabilitation services in rural areas limits recovery options for cardiac patients.

- **Obesity:** Many chronic conditions, including diabetes, are significantly impacted by obesity, which in turn exacerbates conditions such as diabetes and cardiac health. Therefore, it is imperative that we implement comprehensive strategies to address obesity through preventive measures, community-based interventions, and education to improve overall health outcomes.
- **Goal:** *Our goal is to identify key health priorities and expand access to address those chronic conditions.*

4. Behavioral Health

- **Substance Abuse:** Limited support for recovery, especially for women and families, requires expanded transitional housing and community programs.
- **Mental Health Access:** Barriers to behavioral health care in underserved areas highlight the need for virtual and integrated solutions.
- **Goal:** *Our goal is to work with internal stakeholders and community partners to develop and support programs to address key behavioral health issues including substance abuse and access to mental health care.*

5. Language and Cultural Barriers

- A diverse population with significant linguistic needs faces challenges in accessing culturally and linguistically appropriate care.
- **Goal:** *Our goal is to ensure that patients and families have culturally and linguistically appropriate care in all TMC Health facilities.*

6. Youth Safety and Education

- Injuries from accidents are a leading concern, necessitating education and resources to promote child safety.
- **Goal:** *Our goal is to implement programs and outreach to address key child safety events including but not limited to bike and water safety.*
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7. Aging Population Needs

- Addressing aging-related challenges, including food insecurity, social isolation, and access to geriatric care, remains a critical focus.
- **Goal:** *Our goal is to address the key clinical and social age-related challenges through clinical and outreach programming.*

By addressing these interconnected challenges, Southern Arizona aims to create a more equitable healthcare system that meets the needs of its diverse population.

Tucson Medical Center's Health Equity Steering Committee convenes every 6 months to revisit their Key Health Equity Action Plan For Southern Arizona and to address ongoing and new health equity challenges in Southern Arizona.

References:

1. COMMUNITY HEALTH NEEDS ASSESSMENT. Accessed March 1, 2025.
[Pima County Community Health Needs Assessment 2024 \(PDF\)](#)
2. The School Training Overdose Preparedness and Intelligence Taskforce (STOP-IT). Accessed March 1, 2025.
<https://www.azed.gov/stopit>
3. Pima Health Data Portal. Published 2024. Accessed April 2, 2025.
<https://www.pimahealthdataportal.org/Opioid-Response>
4. *Annual Report 2023* Pima County Office Of The Medical Examiner. Accessed April 7, 2025. [2023 Medical Examiner Annual Report \(PDF\)](#)
5. The Trevor Project. Accessed March 3, 2025.
<https://www.thetrevorproject.org>
6. County Health Rankings & Roadmaps: Pima County. University of Wisconsin Population Health Institute. Accessed March 12, 2025.
<https://www.countyhealthrankings.org/app/arizona/2024/rankings/pima/county/outcomes/overall/snapshot>
7. Pima Health Data Portal. Accessed March 29, 2025.
<https://www.pimahealthdataportal.org/indicators/index/view?indicatorId=15711&localeId=158&comparisonId=7123>