COMANCHE COUNTY MEDICAL CENTER

2026 Community Health Needs Assessment



COMMUNITY HEALTH ASSESSMENT

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SPECIAL THANKS

Daniel Bonk, FACHE, CEO
Comanche County Hospital Board of Directors
Comanche County Hospital District Board of Directors
Comanche City & County Officials and Public Service Providers
CCMC Leadership & Management Team
Community Focus Group Participants
Area Health Service Providers
CHNA Committee, CCMC Health System

EXECUTIVE SUMMARY

This document is a Community Health Needs Assessment … not a hospital needs assessment. Comanche County Medical Center and its affiliated providers serve as a major contributor in promoting health and wellbeing for those who live and work within the service area. This CHNA attempts to include additional factors beyond medical care that also impact community health. These other factors are often referred to as social determinants of health and include things like access to care, public services and utilities, housing, transportation, education, mental health, jobs and employment, faith community, etc.

Constituents who live and work within Comanche County representing diverse population segments shared their insights into the primary health needs and access to care within the district. Public health data specific to Comanche County and service area is used as an additional source of information for this assessment.

Some recommendations in this assessment extend beyond the scope and services of CCMC. The source of many of these issues that impact health is tied to complex societal issues that can best be met through the combined efforts of multiple and diverse community services, groups, and organizations. An effort is made in this assessment to identify various local resources that can serve together as collaborative partners to improve the overall health and wellbeing of those living and working within the district.

EXECUTIVE SUMMARY (CONTINUED)

A strong spirit of community is found to be prevalent in Comanche County. The county ranks favorably in comparison with other Texas counties for many community health conditions and outcomes. CCMC is actively engaged in promoting health, wellness, and access to medical services, mental health, and community wellness that extends beyond the hospital or clinics.

A spirit of collaborative networking exists among local stakeholders in addressing social needs like food access, housing, transportation, pharmacy assistance, mental health and other needs.

2026 Recommendations based upon public interviews, surveys, and public data are:

- **Community Networking of Area Health and Wellness Resource Providers**
- **Mental Health**
- **Substance Abuse Intervention**
- **Community Health Education and Awareness of Services**
- **Specialty Physician Services**
- **Healthcare Financial Aid and Benefits Counselor**
- **Transportation Services**

OVERVIEW OF COMMUNITY HEALTH NEEDS ASSESSMENT

In 2014 the Affordable Care Act required all 501 (c) (3) hospitals to conduct a CHNA every 3 years.

The main purpose is to provide a comprehensive review of health needs among diverse constituents, how well those needs are being met, and identify any gaps in services available or constituent groups who receive those services.

Another purpose is to identify partnership opportunities with other providers or agencies.

CHNA serves as basis for development of a required action plan that must be developed with an intent to improve community health and reduce gaps among those who receive services.

DATA SOURCES



Public data sources

CMS, U.S. Census Bureau, other public and private sources as documented



Personal Contact, Interviews and Written Questionnaire

Survey comments gathered from diverse public and private stake holders residing or working in the hospital service area. 39 Focus group participants

2023 CHNA RECOMMENDATIONS REVIEW OF PROGRESS AND ACHIEVEMENTS

Progress was made in each of the CHNA Recommendations offered in 2023. Each of these continue as recommendations in 2026.

Chronic Disease Management and Education – The number of patients receiving chronic disease management education continues to grow achieving good outcomes for patient and clinics.

Mental Health – Additional mental health providers (LPC and LCSW) have been added improving access within the service area.

Substance Abuse – Networking of public and private resources is creating greater awareness of services available. Continued efforts on prevention.

Collaborative Health Network to Improve Community Health and Wellbeing – Improved collaboration. Providers wish to continue and expand networking opportunities.

OVERVIEW OF COMANCHE COUNTY AND SURROUNDING SERVICE AREA

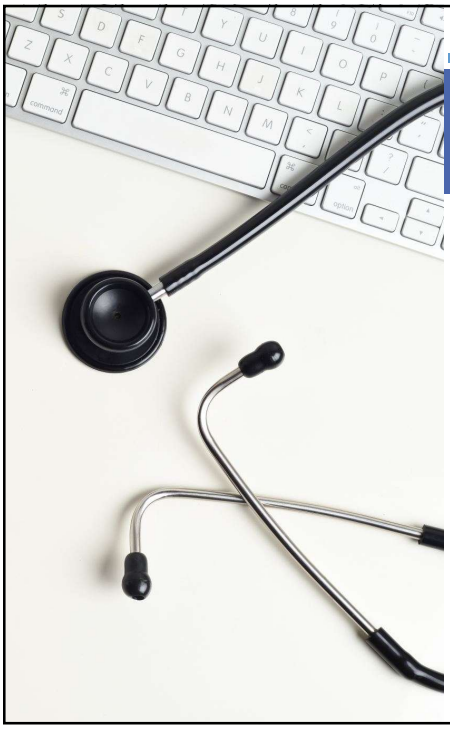


Comanche County, Texas is bounded by the counties of Eastland, Brown, Erath, Hamilton and Mills. Natural grazing and other resources made this area popular to Native American tribes for centuries before European settlers arrived.

Agricultural farming and ranching occupy the majority acreage in these counties. Railroad maintains an active commercial loading and receiving terminal in Comanche. Oil and gas production , which peaked in the early to mid 1900's, continues but is in decline along with farming and other agriculture.

With exception for Erath County, population within the region has grown little since 1990. Like rural communities everywhere, average age of the population continues to grow older.

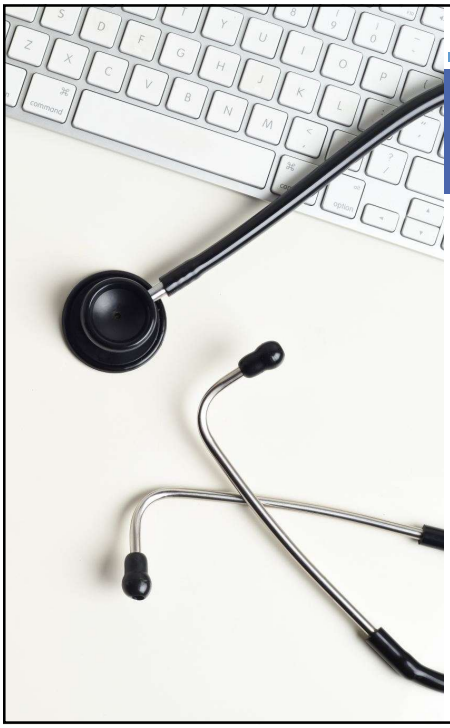
The region is well served educationally with two 4-year universities, two 2-year community colleges, and solid community public school districts.



OVERVIEW OF COMANCHE COUNTY COMMUNITY MEDICAL CENTER

Comanche County Medical Center is a non-profit 501 (c) (3) Critical Access Hospital that provides hospital, healthcare, and wellness services to Comanche and other surrounding counties.

- CCMC is governed by a 6-person Board of Directors
- CCCHD is governed by a 6-person Board of Directors publicly elected to oversee distribution of tax revenue to support access and availability of healthcare services through Comanche County Medical Center, EMS, and throughout the District



OVERVIEW OF COMANCHE COUNTY MEDICAL CENTER

Comanche County Medical Center is licensed as a 25-bed Critical Access Hospital. CCMC is much more than a hospital, however, operating more like a small regional health system.

The hospital provides access to a full line of services including Emergency, Inpatient, Swing Bed, Surgical, Diagnostic Outpatient, Rehab & Wellness, Infusion Therapy, Long-Term Care, Pharmacy, and Clinics.

CCMC operates clinics, long term care facilities, and other medical access sites in multiple cities and counties throughout the region. The hospital closely monitors the needs of its service area and expands service lines to new areas and population groups as needed. Services are available to all who need medical care regardless of income, race, or other qualifying factors.

The hospital is well equipped with modern facilities, equipment, electronic health record system, and other technology. CCMC patients come from multiple counties in the region.

CLINICAL ACCESS POINTS

- Comanche
  - Comanche County Medical Center
  - Comanche Physical Therapy & Wellness
  - Doctor's Medical Center
  - Cornerstone Family Medicine
  - The Whitestone Assisted Living
  - Legacy Estate Long Term Care
- DeLeon
  - Kimmel Wellness Center
- Dublin
  - Dublin Family Medicine
  - Patrick Street Pharmacy
- Rising Star
  - Rising Star Health Clinic
  - Rising Star Pharmacy
- Goldthwaite
  - McMahan Pharmacy

OVERVIEW OF CCMC SERVICE LINES

- **Cardiac Rehab**
- **Cardiology**
- **Chronic Care Management**
- **Doctors Medical Center**
- **Dublin Family Medicine**
- **Emergency Room**
- **EMS** ***(service provided by CCCHD)***
- **Imaging & Radiology**
- **Laboratory**
- **Respiratory Therapy**
- **Infusion**
- **Orthopedics**
- **Ophthalmology**
- **Occupational Health**
- **Physical Rehab**
- **Pediatrics**
- **Dermatology**
- **Wound Care**
- **Pharmacies**
- **Podiatry**
- **Pain Management**
- **Pulmonary Rehab**
- **Surgery**
- **Swing Bed**
- **Senior Care Housing**
  - **Legacy Estate SNF & LTC** ***(service provided by CCCHD)***
  - **The Whitestone Assisted Living** ***(service provided by CCCHD)***

PRIMARY AND SPECIALTY CARE PROVIDERS

PRIMARY CARE PHYSICANS AND PRACTITIONERS

Doctors Medical Center
- 8 Physicians
- 3 Advanced Practitioners

Cornerstone Medical Clinic
- 2 Advanced Practitioners

Dublin Family Medicine
- 2 Physicians
- 3 Advanced Practitioners

Rising Star Health Clinic
- 1 Physician
- 2 Practitioners

Mental Health Provider
- 1 Licensed Clinical Social Worker

SPECIALTY CARE PHYSICIANS OR PROVIDERS

Cardiology	2
General Surgery	2
Dermatology	1
Orthopedics	3
Wound Care	1
Pain Management	1
Podiatry	1

CCMC MEDICARE STAR QUALITY RATING



Overall Star Rating

Source: Medicare.gov. Hospital Compare. July 2026

- www.medicare.gov/care-compare

Find Healthcare Providers: Compare Care Near You | Medicare

DRIVING DISTANCE FROM COMANCHE COUNTY MEDICAL CENTER TO NEXT NEAREST OTHER HOSPITALS

- Texas Health Harris Methodist Stephenville 35 miles
- Hendrick Medical Center Brownwood 36 miles
- Eastland Memorial Hospital 40 miles
- Hamilton Healthcare System 41 miles

ECONOMIC IMPACT TO SERVICE AREA OF CCMC AND CCHD

Economic Impact of Operations for a Critical Access Hospital
(Using Actual CCMC and CCCHD numbers)

- **Employment**
  - Direct Impact fte's: 435 (number of full-time equivalent employees by CCMC and CCCHD)
  - Multiplier 1.34
  - Secondary Impact fte's: 148 (additional job creation impact within service area)
  - Total Impact fte's: 583 (total employment impact of CCMC and CCCHD)
- **Wages, Salaries, and Benefits**
  - Direct Impact: $29 Million (total WSB provided by CCMC and CCCHD)
  - Multiplier 1.19
  - Secondary Impact $5.5 Million (additional WSB benefit created within service area)
  - Total Impact $34.5 Million (total WSB generated in service area as result of CCMC and CCHD)
- **Average retail sales impact (.25 WSB): (**$7.25 Million retail sales generated in service area resulting from CCMC and CCCHD)

SOURCE: National Center for Rural Health Works. Research Study. October 2016. Data from National Center, Oklahoma Office of Rural Health, and IMPLAN.

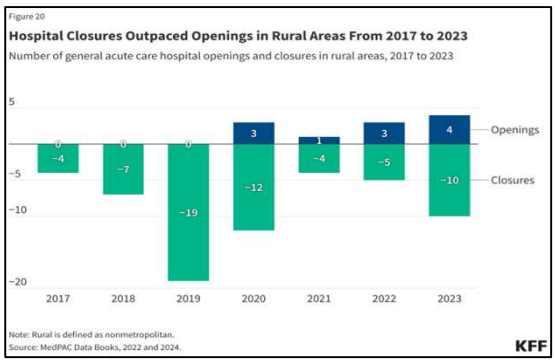
SUMMARY OF ECONOMIC AND EMPLOYMENT IMPACT OF CCMC ON THE SERVICE AREA

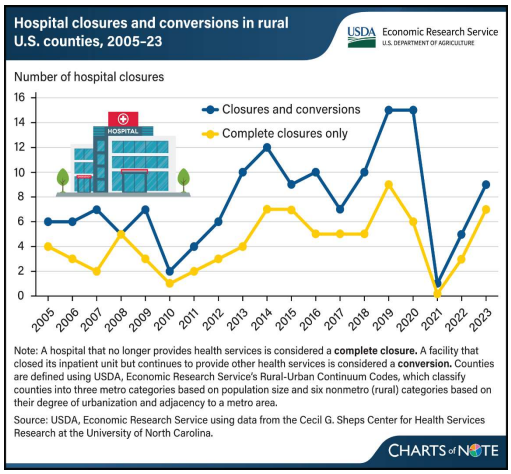
- ***583 Jobs within the service area attributed to CCMC***
- ***$34.5 Million creation of area wages, salaries, and benefits***
- ***$7.25 Million impact on retail sales within the service area***

What is the Importance of Jobs and Wages on the Health and Wellness of a Community?

- Jobs create income and benefits. Income and benefits is one key factor impacting individual health and wellness.

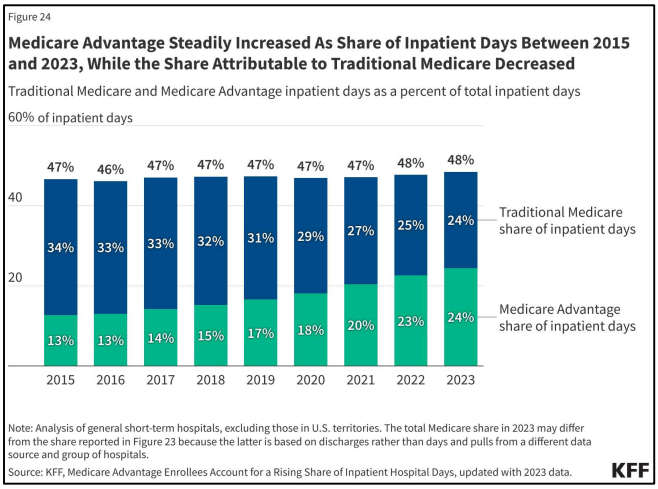
RURAL HOSPITALS THREATENED WITH CLOSURE





GROWTH OF MEDICARE ADVANTAGE PLANS V. TRADITIONAL MEDICARE *(NATIONAL AGGREGATE)*

MC ADVANTAGE PLANS HAVE AN ADVERSE IMPACT ON CRITICAL ACCESS HOSPITALS



DEMOGRAPHICS OF POPULATION AND RACE BY COUNTY

Population

Population/ Year	Comanche County	Brown County	Eastland County	Erath County
1990	13,381	34,371	18,488	27,991
2000	14,026	37,674	18,297	33,001
2010	13,974	38,106	18,583	37,890
2020	13,594	38,095	17,725	42,545
2025 (est)	14,432	38,711	18,143	43,911

Source: U.S. Census.gov/quickfacts. 2025 (est)
https://www.census.gov/quickfacts/fact/table/texas,US/PST045222

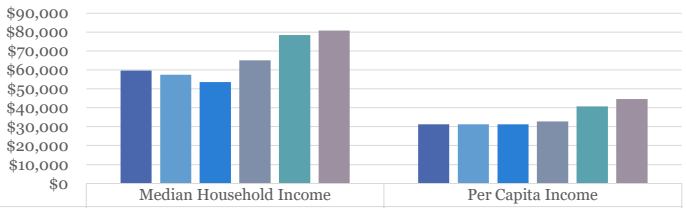
Races

Race /County	Comanche County	Brown County	Eastland County	Erath County
White Only	66%	68%	75%	70%
Hispanic	30%	24%	18%	23%
Black	1.2%	4.7%	2.5%	3.2%
American Indian	1.7%	1.2%	1.5%	1.8%

Source: U.S. Census.gov/quickfacts. 2025 (est)
https://www.census.gov/quickfacts/fact/table/texas,US/

DEMOGRAPHIC AND SOCIAL FACTORS

Median and Per Capita Income



	Median Household Income	Per Capita Income
Comanche	$59,635	$31,302
Brown	$57,470	$31,180
Eastland	$53,549	$31,299
Erath	$65,115	$32,733
Texas	$78,476	$40,752
U.S.	$80,734	$44,673

www.census.gov/quickfacts (2024)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

2025 Data	Comanche County	Brown County	Eastland County	Erath County
Overall Health Ranking	2nd Quartile Above average	Mid Point Avg	3rd Quartile Below average	Top Quartile

HEALTH OUTCOMES	Comanche County	Brown County	Eastland County	Erath County	Texas	U.S.
Life Expectancy	74.4	73	74.8	79.3	77.2	77.6
Diabetes Prevalence	11%	11%	11%	12%	14%	14%
Frequent Mental Distress	19%	19%	20%	19%	19%	19%
Frequent Physical Distress	14%	14%	14%	13%	14%	14%
HIV Prevalence (per 100k)	152	141	85	72	437	393

Source: County Health Rankings & Roadmaps https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

2025 Data	Comanche	Brown	Eastland	Erath
Overall Health Ranking	2nd Quartile	2nd Quartile	3rd Quartile	2nd Quartile

Health Behaviors (Ranking)	Comanche	Brown	Eastland	Erath	Texas	U.S.
Adult Smoking	15%	16%	17%	15%	15%	16%
Food Insecurity	18%	20%	19%	18%	18%	14%
STI's (per 100k)	249	276	211	491	492	492
Teen Births (per 1,000)	31	25	28	10	21	15
Adult Obesity	37	35	36	36	38	38
Physical Inactivity	29%	29%	28%	26%	30%	27%
Access to Exercise	10%	64%	60%	70%	82%	84%

Source: County Health Rankings & Roadmaps https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

Clinical Care (Ratio below shows population per provider)	Comanche	Brown	Eastland	Erath	Texas	U.S.
Primary Care Physicians	1480:1	1740:1	4490:1	1760:1	1640:1	1310:1
Other Primary Care Providers	1440:1	920:1	1520:1	1390:1	840:1	680:1
Dentists	3440:1	3570:1	1740:1	1610:1	1610:1	1380:1
Mental Health Providers	1200:1	440:1	1830:1	750:1	550:1	290:1
Mammogram Screening	38%	37%	29%	43%	42%	46%
Flu Vaccinations	22%	31%	27%	38%	40%	44%

Source: County Health Rankings & Roadmaps -
https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

Social and Economic Factors	Comanche	Brown	Eastland	Erath	Texas	U.S.
Uninsured Adults	26%	20%	23%	24%	22%	11%
Uninsured Children	16%	10%	13%	15%	12%	5%
Children in Poverty	27%	22%	24%	18%	18%	16%
Children Eligible for Free Lunch	64%	61%	63%	53%	63%	56%
Child Care Cost Burden	24%	23%	25%	31%	24%	28%
Child Care Centers (per 100k)	4	6	5	5	5	7

Source: County Health Rankings & Roadmaps
https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

Social and Economic Factors	Comanche	Brown	Eastland	Erath	Texas	U.S.
High School Completion Rate	85%	88%	85%	87%	86%	89%
Some College	51%	55%	59%	62%	65%	68%
Severe Housing Problems	9%	14%	12%	19%	15%	15%

Source: County Health Rankings & Roadmaps
https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

COMPARISON OF HEALTH OUTCOMES AND FACTORS

Social and Economic Factors	Comanche	Brown	Eastland	Erath	Texas	U.S.
Suicides (per 100k)	23	20	34	15	14	14
Firearm Fatalities (per 100k)	28	17	23	12	15	14
Injury Deaths (per 100k)	116	85	129	80	69	87
Alcohol Impaired Driving Deaths (per 100k)	16%	18%	27%	28%	26%	26%
Motor Vehicle Crash Deaths (per 100k)	37	22	31	23	14	12
Chemical Dependency Centers (per 100k)	7.4	2.6	10.9	14.5	2.7	N/A

Source: County Health Rankings & Roadmaps
https://www.countyhealthrankings.org/explore-health-rankings/texas/comanche?year=2025
(yellow highlight indicates unfavorable to State and U.S.)

SUMMARY OF POPULATION HEALTH FACTORS AND CONDITIONS

Favorable

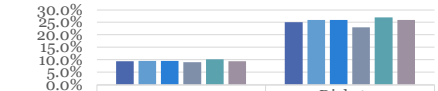
- **Diabetes Prevalence**
- **HIV Prevalence**
- **STI's**
- **Chemical Dependency Centers**
- **Life Expectancy (Erath County)**
- **Housing** (*except* Erath County)

Unfavorable

- **Life Expectancy** (*except* Erath County)
- **Teen Births**
- **Suicides**
- **Access to Exercise (Comanche County)**
- **Primary Care Practitioners (Eastland)**
- **Dentists (Comanche, Brown Counties)**
- **Mental Health Providers (Comanche, Eastland)**
- **Flu Vaccine**
- **Mammogram Screening**

PREVALENCE OF DISEASE

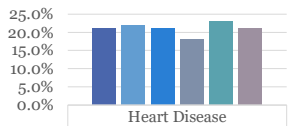
Diabetes



	Diabetes (Adult)	Diabetes (Medicare)
Comanche	9.4%	25.0%
Brown	9.5%	26.0%
Eastland	9.5%	26.0%
Erath	9.0%	23.0%
Texas	10.2%	27.0%
U.S.	9.4%	26.0%

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, CDC - Diabetes Atlas. 2023

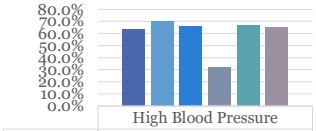
Heart Disease



	Heart Disease
Comanche	21.0%
Brown	22.0%
Eastland	21.0%
Erath	18.0%
Texas	23.0%
U.S.	21.0%



High Blood Pressure



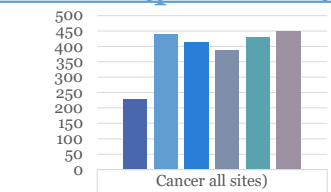
	High Blood Pressure
Comanche	63.0%
Brown	70.0%
Eastland	66.0%
Erath	32.0%
Texas	67.0%
U.S.	65.0%



Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool. 2023

PREVALENCE OF DISEASE (CONT.)

Cancer (per 100k)

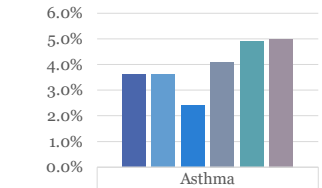


	Cancer all sites)
Comanche	229
Brown	441
Eastland	415
Erath	389
Texas	431
U.S.	449



Data Source: United States Cancer Statistics. 2018-22

Asthma



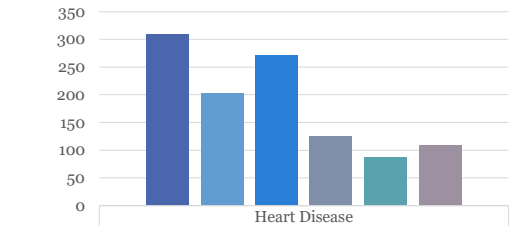
	Asthma
Comanche	3.6%
Brown	3.6%
Eastland	2.4%
Erath	4.1%
Texas	4.9%
U.S.	5.0%



Data Source: Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid Services - Chronic Conditions. 2018

MORTALITY (PER 100K)

Heart Disease Mortality

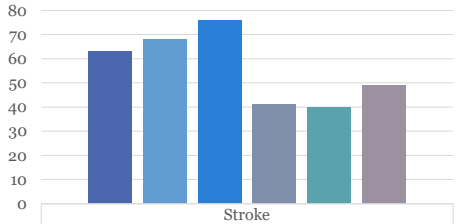


	Heart Disease
Comanche	309
Brown	203
Eastland	271
Erath	125
Texas	88
U.S.	109

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024

Stroke Mortality



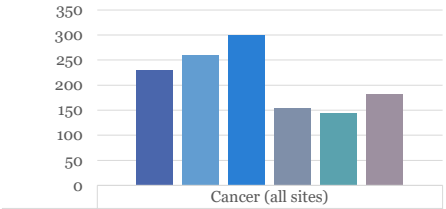
	Stroke
Comanche	63
Brown	68
Eastland	76
Erath	41
Texas	40
U.S.	49

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024

MORTALITY (PER 100K)

Cancer Mortality

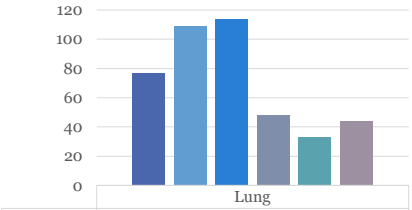


	Cancer (all sites)
Comanche	229
Brown	260
Eastland	300
Erath	153
Texas	144
U.S.	182

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024

Lung Disease Mortality



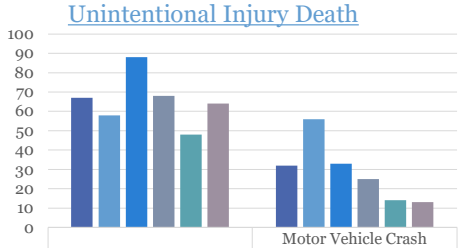
	Lung
Comanche	77
Brown	109
Eastland	114
Erath	48
Texas	33
U.S.	44

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024

MORTALITY (PER 100K)

Unintentional Injury Death

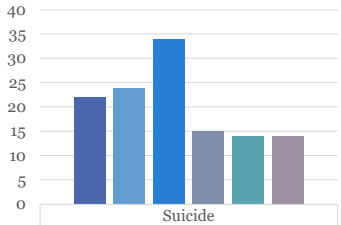


	Unintentional Injury	Motor Vehicle Crash (number out of UI deaths)
Comanche	67	32
Brown	58	56
Eastland	88	33
Erath	68	25
Texas	48	14
U.S.	64	13

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024.

Suicide Death



	Suicide
Comanche	22
Brown	24
Eastland	34
Erath	15
Texas	14
U.S.	14

Comanche Brown Eastland Erath Texas U.S.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2020-2024.

PREVALENCE V. MORTALITY OF DISEASE

COMPARISON OF CCMC SERVICE AREA TO TEXAS AND U.S.

HTTPS://WWW.COUNTYHEALTHRANKINGS.ORG/EXPLORE-HEALTH-RANKINGS/TEXAS/?YEAR=2025

Prevalence – Favorable to State	**Mortality – Unfavorable to State**
Heart Disease	Heart Disease
Cancer (*except* Brown County)	Cancer
Diabetes (Adult and Medicare)	Stroke
Asthma	Lung
	Motor Vehicle Crash
	Unintentional Injury
	Suicide

*NOTE: Mortality is Unfavorable while Prevalence is Favorable? Why? Is it due to a larger number of older population than the state? Worth additional research to understand the difference.

PREVALENCE – COMPARISON 2026 V. 2023 COMANCHE COUNTY

	2026	2023
Adult Diabetes	9.4%	7.2%
Medicare Diabetes	25%	25%
Heart Disease	21%	28%
High Blood Pressure	63%	53%
Cancer (per 100k)	229	407
Asthma	3.6%	3.6%

Note: Increase in Prevalence of Adult Diabetes, High Blood Pressure, Cancer
Decrease in Heart Disease

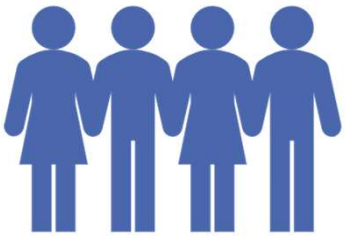
MORTALITY – COMPARISON 2026 V. 2023 COMANCHE COUNTY

	2026	2023
Heart Disease	309	168
Stroke	63	31
Cancer	229	128
Lung Disease	77	57
Motor Vehicle Crash	32	39
Unintentional Injury	67	109
Suicide	22	21

Note: Increase in Heart Disease, Stroke, Cancer, Lung Disease from 2023 to 2026



COMMUNITY HEALTH SURVEY & INTERVIEWS
COMMUNITY FOCUS GROUP RESPONSES



- A Community Health Survey was administered to a diverse cross section of the population living and working in Comanche County. The Survey contained multiple questions related to two components: 1. Access to Healthcare; 2 Social Determinants of Community Health: Physical Environment; Chronic Illness and Disease; Mental Health and Substance Abuse; Lifestyle and Behavior.
- Face-to-face Interviews – Focus group interviews took place with participants representing the hospital, medical providers, city and county leaders, and a diverse cross-section of the population living or working in the service area.
- Total 39 diverse participants contributed to this Community Health Needs Assessment

COMMUNITY HEALTH WRITTEN SURVEY QUESTIONS SURVEY QUESTIONS PROBED RESPONSES FROM THE FOLLOWING CATEGORIES:

Category I

Access to Healthcare Services

- Questions asked pertaining to:
  - Access to healthcare
  - Most critical services that are available
  - Most critical services not available but needed
  - Specialty physician services not available or need improvement
  - Services or specialties people are most likely to travel out of town
  - Confidence rating in locally provided services
  - Area resources available

Category II

Community Health & Wellbeing

- Describe the health and well-being of the community based upon:
  - Social and Physical Environment
  - Chronic Illness and Disease
  - Mental Health and Substance Abuse
  - Lifestyle Behavior

ACCESS TO HEALTHCARE SERVICES

Current access and availability of health services

- Very good
- Good primary care clinics with multiple access points
- Specialty clinic provides local access to select specialists
- Transportation is an issue for some to get to appointments

What are most critical health needs in the county

- Mental Health
- Substance Abuse
- Chronic Disease Mgmt.
- Dental Services

How well are these critical needs being met in the county

- Limited availability. Need for services exceeds available resources

ACCESS TO HEALTHCARE SERVICES

What service lines provided by the hospital are considered most critical to the community	What would the impact be if these services were not available?	What services lines are *not* available that are most needed?
• ER • Primary Care • Diagnostic Ancillary Services • Cardiopulmonary Rehab • Wound Care • Pain Management	• Life threatening / Unnecessary Deaths • Travel hardship, especially for older population	• Oncology / Chemotherapy • Mental Health • Women's Health Services • Gastroenterology • Dentistry • Ophthalmology

ACCESS TO HEALTHCARE SERVICES

What physician specialties are not available that are most needed

- OB/Gyn
- Oncology
- Ophthalmology
- Orthopedics
- Dentists

What Physician Specialties Are Residents Most Likely to Travel Out of Town?

- OB/Gyn
- Surgery
- Pulmonology
- Ophthalmology
- Chemotherapy

ACCESS TO HEALTHCARE SERVICES

What Medical Service Lines are Available but Need Improvement

- Emergency Department
- Telehealth – Plan for improved utilization

ACCESS TO HEALTHCARE SERVICES

COMMUNITY CONFIDENCE IN HOSPITAL AND OTHER LOCAL HEALTH PROVIDERS

Confidence level expressed in services provided by the hospital and other providers

- Broad support and confidence was consistently expressed for the hospital, providers, and services.
- Good support expressed for other local health service providers as well.

What hospital service lines are considered to be high quality

- Inpatient Care
- Clinics
- Mobile X-Ray
- Cardiac Rehab
- Outpatient Rehab
- Wound Care
- Pain Management

Community Perception Rating – Hospital services (scale 1 to 10)

- Perception of hospital services was generally rated 7 to 8 by focus group participants

COMMUNITY HEALTH & WELLBEING

PUBLIC PERCEPTION OF HEALTHY AND UNHEALTHY ASPECTS OF LIVING IN COMANCHE COUNTY AND SERVICE AREA

Healthy
Quality of Life
Clean Air
Slower Lifestyle
Access to Medical Care
Access to Education
Walking Trails
Comanche Park
Safe Outdoor Activities
Disc Golf Course

Unhealthy

- Alcohol and other substance abuse
- Smoking / Vaping
- Lack of healthy eating options / too much fast food
- Lack of employment opportunities

WHAT DO YOU CONSIDER GENERAL ASPECTS OF A HEALTHY COMMUNITY

- Community health education and wellness programs
- Community networking for wholistic wellness initiatives
- Healthy food options
- Access to healthcare services

CATEGORIES OF COMMUNITY HEALTH & WELLBEING

Social and Physical Environment

Nutrition, Housing, Transportation, Domestic Abuse, others

Chronic Illness and Disease

Diabetes, Hypertension, CHF, COPD, etc.

Mental Health and Substance Abuse

Lifestyle Behaviors

COMMUNITY HEALTH & WELLBEING



Social and Physical Environment

COMMUNITY HEALTH & WELLBEING

SOCIAL AND PHYSICAL ENVIRONMENT

BIGGEST NEEDS CITED BY COMMUNITY FOCUS GROUPS

Transportation - #1 Issue consistently raised by all groups
- Medical Appointments
- Grocery, WalMart, and other essential shopping

Housing
- Affordability of rent and other housing cost
- Availability of homes for rent or purchase

Nutrition Education
- Healthy food selection options in restaurants
- Access to affordable healthy food selection in grocery stores

Youth Education and Development Programs
- Vaping and other
- Positive role modeling and responsible choices

COMMUNITY HEALTH & WELLBEING

SOCIAL AND PHYSICAL ENVIRONMENT

BIGGEST NEEDS CITED BY COMMUNITY FOCUS GROUPS

A broad range of social services is reported available to diverse populations residing in Comanche and surrounding counties

Access to charitable food, clothing, transportation, temporary shelter and other crisis services is available through various private, public, and faith organizations

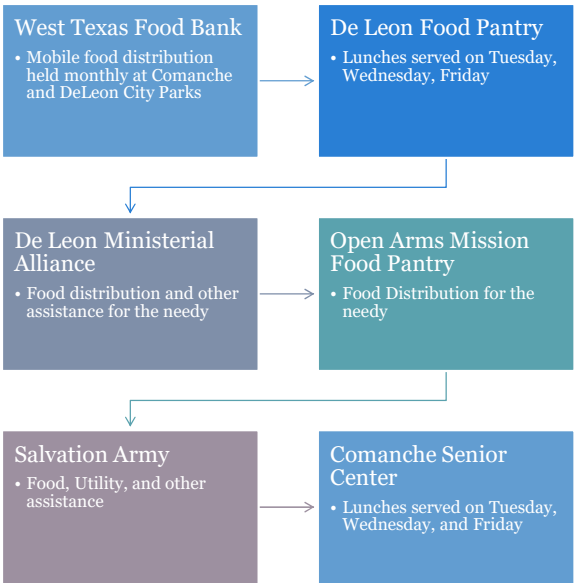
CCMC maintains a long and impressive referral list of community and social services available

COMMUNITY HEALTH & WELLBEING

SOCIAL AND PHYSICAL ENVIRONMENT

BIGGEST NEEDS CITED BY COMMUNITY FOCUS GROUPS

(PARTIAL LIST OF LOCAL SERVICES AVAILABLE)



COMMUNITY HEALTH & WELLBEING

SOCIAL AND PHYSICAL ENVIRONMENT

BIGGEST NEEDS CITED BY COMMUNITY FOCUS GROUPS

(PARTIAL LIST OF ELDERLY SERVICES AVAILABLE)

Cornerstone Community Action Agency
- Financial assistance with utilities, rent, other services

Western Hills Healthcare Residence
- Rehab & Nursing Facility

Whitestone Assisted Living
- Senior Living Center

Legacy Estate
- Skilled Nursing and Long-Term Care

COMMUNITY HEALTH & WELLBEING

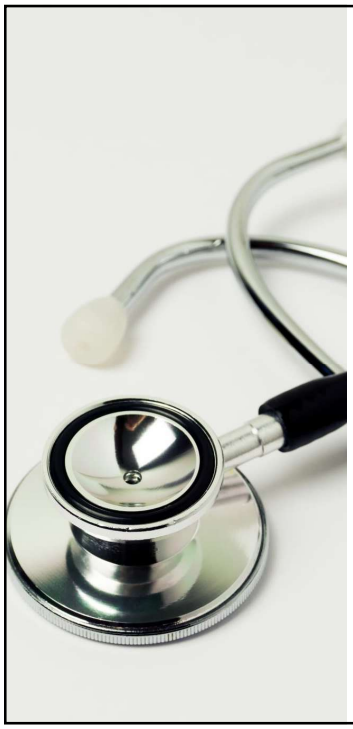
SOCIAL AND PHYSICAL ENVIRONMENT

BIGGEST NEEDS CITED BY COMMUNITY FOCUS GROUPS

(PARTIAL LIST OF ELDERLY SERVICES AVAILABLE)

City and Rural Rides (CARR)	Rural and public transit service
Texas Health and Human Services	Medicaid Medical Transportation Program
Families to Freedom	Free transportation for abused victims to a safe shelter
West Central Texas Aging & Disability Resource Center (THHS)	Texas State agency to streamline access and referral to services for older adults and people with disabilities
Texas Adult Protective Services	Investigates abuse and exploitation of adults and children





COMMUNITY HEALTH & WELLBEING CHRONIC ILLNESS AND DISEASE

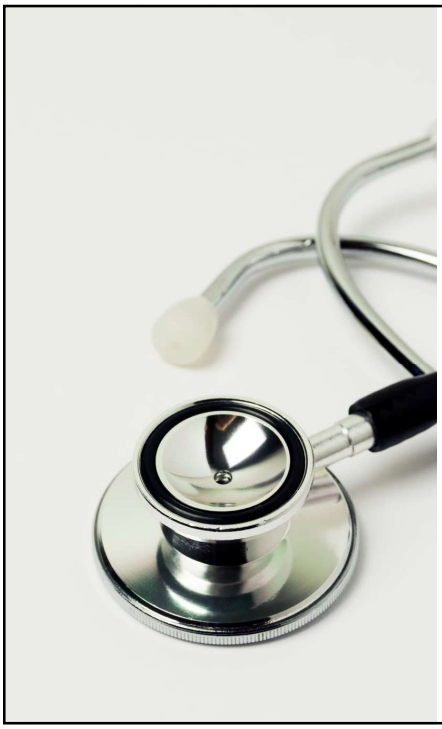
- Community education on chronic disease management was frequently expressed. Public classes teaching nutrition, lifestyle and behavioral adjustments were recommended.
- Improved access to affordable healthy food options was widely expressed

COMMUNITY HEALTH & WELLBEING CHRONIC ILLNESS AND DISEASE

Chronic Care Illnesses Most Commonly Identified:

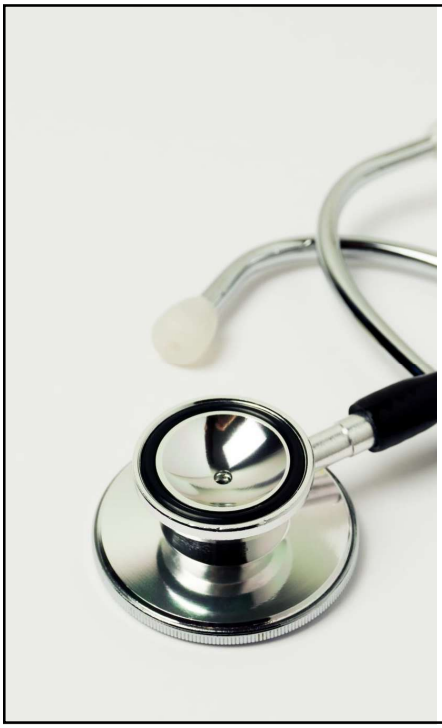
- High Blood Pressure
- Diabetes





COMMUNITY HEALTH & WELLBEING CHRONIC ILLNESS AND DISEASE

- CCMC Clinics and AccelHealth provide good access and clinical management of chronic illness and disease
- CCMC Clinics all offer chronic disease management education to patients. CCMC reports education encounters have grown from 50 patients per month to over 500 patients monthly, leading to reduced hospitalization.
- An opportunity to begin offering telehealth services on school campuses was discussed.
  - Potential to favorably impact other teen and social health issues
  - Expanded use of telehealth on campus was discussed



COMMUNITY HEALTH & WELLBEING CHRONIC ILLNESS AND DISEASE

- AccelHealth is a FQHC with largely the same general service area as CCMC. AccelHealth offers:
  - Family Health Services
  - Women's Health Services
  - Behavioral Health Services
  - * Family Dental Care – (Currently vacant and unavailable)
- Representatives from both Accel and CCMC expressed interest in forming a collaborative network to include themselves and other community organizations to address common issues impacting health and wellbeing
- Virtual monitoring of patients' chronic health issues in the home is being considered



COMMUNITY HEALTH & WELLBEING

MENTAL HEALTH AND SUBSTANCE ABUSE

BIGGEST ISSUES CITED BY FOCUS GROUPS

- Shortage of area mental health counseling services and providers
- Lack of interventional services available for substance abuse

LOCAL AND AREA MENTAL HEALTH AREA RESOURCES IDENTIFIED

Local

- CCMC offers a Licensed Clinical Social Worker (LCSW)
- AccelHealth offers Licensed Professional Counselor (LPC) and access to other mental health services
- School districts offer certain counseling service
- Comanche County Sheriff Office maintains a Mental Health Officer on its staff

Surrounding Area

- Center for Life Resources (Texas State MHMR Network)
- National Alliance for Mental Illness (NAMI)
- Pecan Valley Centers for Behavioral & Development



COMMUNITY HEALTH & WELLBEING
LIFESTYLE BEHAVIORS
BIGGEST ISSUES CITED BY FOCUS GROUPS

Smoking and Vaping

Activities for youth and lower income families

2026 RECOMMENDATIONS

- **Community Networking of Area Health and Wellness Resource Providers**
- **Mental Health**
- **Substance Abuse Intervention**
- **Community Health Education and Awareness of Services**
- **Specialty Physician Services**
- **Healthcare Financial Aid and Benefits Counselor**
- **Transportation Services**

RECOMMENDATION

COMMUNITY NETWORKING OF AREA HEALTH AND WELLNESS RESOURCE PROVIDERS

It is recommended that a community health network comprised of area service providers be formulated to actively address common needs identified in this CHNA as well as other issues that will be identified

Community health involves much more than the hospital and providers

- It involves social, mental, physical, and spiritual components

Community health involves (partial list only for example):

- City and County government leaders
- School teachers and other educators
- Pastors, priests, other faith leaders
- Sheriff, Police and other public service workers
- Social issues such as jobs, housing, transportation, communication, etc.
- Recreation, exercise, and other activities that impact health
- Social health agencies, senior center, long-term care, home health, child-care centers, etc.

Collaborative networking already exists among area providers. Creating more structure to this network to improve outcomes was openly discussed and eagerly embraced by focus group providers and participants.

COMMUNITY NETWORKING OF AREA HEALTH AND WELLNESS RESOURCE PROVIDERS

Ideas for Consideration

Recommend starting first collaborative partnership in Comanche County

- Selectively identify partners that will actively participate in identifying and formulating plans of action
- AccelHealth, Pathways to Independence, TDSHS, City and County leaders each expressed interest in participating in a collaborative network to address common challenges
- The network should include participants from non-healthcare occupations, public and social services, as well as healthcare sector
- Identify and prioritize community health issues
- Identify contributing causes of unfavorable health behaviors and outcomes
- Develop a plan of action including funds needed.
  - Identify foundations, grants, and other funding sources available
- Hospital (and select others) could be written in as a permanent member
- A collaborative network offers the best approach to identifying root causes and developing action plans to have the biggest impact on improving community health and wellbeing.

RECOMMENDATION
MENTAL HEALTH SERVICES

It is recommended that CCMC continue its ongoing efforts and progress to improve access to mental health services:

- Mental health continues to be cited as the #1 health concern by CCMC focus group participants. It is also commonly cited as the #1 health issue throughout Texas.
- The need to improve access to mental health services is supported by both public data and community feedback.
  - The rate of suicide in Comanche County exceeds Texas and the U.S. by 64%. Surrounding counties in the service area also exhibit high outcomes consistent with Comanche County. *(A breakdown of suicide by age demographics is not provided in this CHNA).*
- CCMC maintains a LCSW on its staff as a resource to patients in its clinics and hospital.
- Resources have been expended and progress made to improve local access to mental health counseling services since the 2023 CHNA.

MENTAL HEALTH SERVICES

Ideas for Consideration

- Telehealth should be considered as a viable source to improve access to mental health services
- CCMC may contact Tarleton State University and Howard Payne University offering to provide on-site opportunities for students to achieve clinical hours needed for LPC certification
- The Center for Life Resources and Pecan Valley Centers for Behavioral Health & Development serve as state-funded mental health resources for the CCMC service area. They should be contacted about expanding access to mental health services within the service area
- Continued networking with other local public, private, stat, and federal resources.

RECOMMENDATION
SUBSTANCE ABUSE INTERVENTION

It is recommended that efforts be made to reduce the incidence of substance abuse and improve access to addiction recovery services

- Alcohol and other substance abuse is reported to be high throughout the service area. Lack of rehab services for drug addiction is a lacking resource within the service area.
- Substance abuse is a community issue involving multiple contributors, including mental health, home environment, social culture, employment, and other factors. Multiple resource groups already network together to address this issue and should continue efforts to reduce the onset of substance abuse.
- Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) offer effective programs in Comanche to help addicts sustain recovery. State funded programs should be sought for assistance or referral.
- The Comanche Sheriff's office is to be commended for its community involvement to build trust relationships with at-risk populations leading to reduced incidence and improved recovery.
- State elected officials should be contacted about the need for more state resources.

RECOMMENDATION
COMMUNITY HEALTH EDUCATION AND AWARENESS

It is recommended that CCMC continue its efforts to expand chronic disease management and education within its service area

- CCMC is to be commended for progress that has been made in providing chronic disease education to patients through its established primary care clinics. Monthly patient education encounters are above 500. Tangible benefits of reduced hospital admissions and improved health are documented through these initiatives.
- Mortality from heart disease, stroke, lung disease, and cancer exceeds the State throughout the service area. This demonstrates the need for greater wholistic education on lifestyle and behavioral adjustments that can be made at home and work.
- Participants in each focus group spoke of the opportunity for CCMC to promote greater awareness of hospital services and health education programs.

RECOMMENDATION

ADDITION OF SELECT SPECIALTY PHYSICIAN SERVICES

It is recommended that CCMC continue its efforts to selectively identify physician specialties that could provide services locally within the hospital service area

Residents of the CCMC service area are fortunate to have numerous specialty physicians travel to offer clinical services in Comanche on a scheduled basis. This provides direct health benefit to those who live in the community and service area.

Additional specialties requested by participants in the CHNA focus groups are:

- **Dentist** - #1 request frequently cited as a community need. Supported by public health data.
- **Ophthalmology** – A need for cataract surgery to reduce the need for older residents to travel out of town for these medical procedures. There are companies who will provide a surgeon, surgical equipment, and lenses to perform procedures in rural hospitals with no capital expense.
- **Women's Health** – Local access to a Gynecologist was widely requested. Local practitioners provide women's health services within their scope of practice.

RECOMMENDATION

ADDITION OF HEALTHCARE FINANCIAL AID AND BENEFITS COUNSELOR

It is recommended that CCMC provide a local service to advise patients and the public of healthcare financial aid services available including assistance in applying. Counseling would include various forms of financial, social, and other programs for which one may qualify.

A need for expanded availability or improved awareness of financial aid counseling services was commonly expressed. CCMC does provide this service but there is a general lack of awareness and services often not accessed until after a patient is referred or admitted to the hospital. It is recommended that efforts be made to improve the awareness and access to this service – as both a community benefit as well as benefit to the hospital.

RECOMMENDATION
TRANSPORTATION SERVICES

It is recommended that efforts be made to improve transportation within Comanche County to healthcare appointments and other essential services.

- Transportation was repeatedly cited as an issue within Comanche County, particularly among older individuals and others who are unable to drive. This issue is larger than CCMC and extends to both medical and non-medical transportation.
- CCMC does provide scheduled transportation for patients to local clinic or hospital appointments. Public transportation services to medical appointments in other cities is available on a limited schedule that is not always conducive to the customer.
- A need for transportation for other necessities such as grocery shopping was also expressed.
- This is an issue where networking among other public and private service groups might come up with some workable improvements to this issue.

SUMMARY

The residents of Comanche County have a progressive history of working together to improve health for all who live and work within the service area. Comanche County Medical Center is a well-equipped modern hospital that is the unselfish product of the cities of Comanche and De Leon merging their individual hospitals to form a single hospital that is stronger and sustainable to serve the health needs of the county.

Today, CCMC has expanded its service area to include neighboring counties with rural populations to sustain local access to healthcare. CCMC has positioned itself as a market leader in sustaining access to healthcare in rural areas. CCMC continues to grow and expand its service lines in primary care, chronic care management, and long-term care for the elderly.



SUMMARY

Improving the health and well-being of the diverse needs in Comanche County is larger than CCMC can accomplish alone. Comanche County is fortunate to be served by other independent public, private, health, and social service organizations. Collaborative efforts should be made to engage these organizations to work together toward a common goal to improve local health and well-being, especially for issues like mental health, substance abuse, transportation, and social issues that impact health. Willingness to work together was expressed by numerous participants in this CHNA.

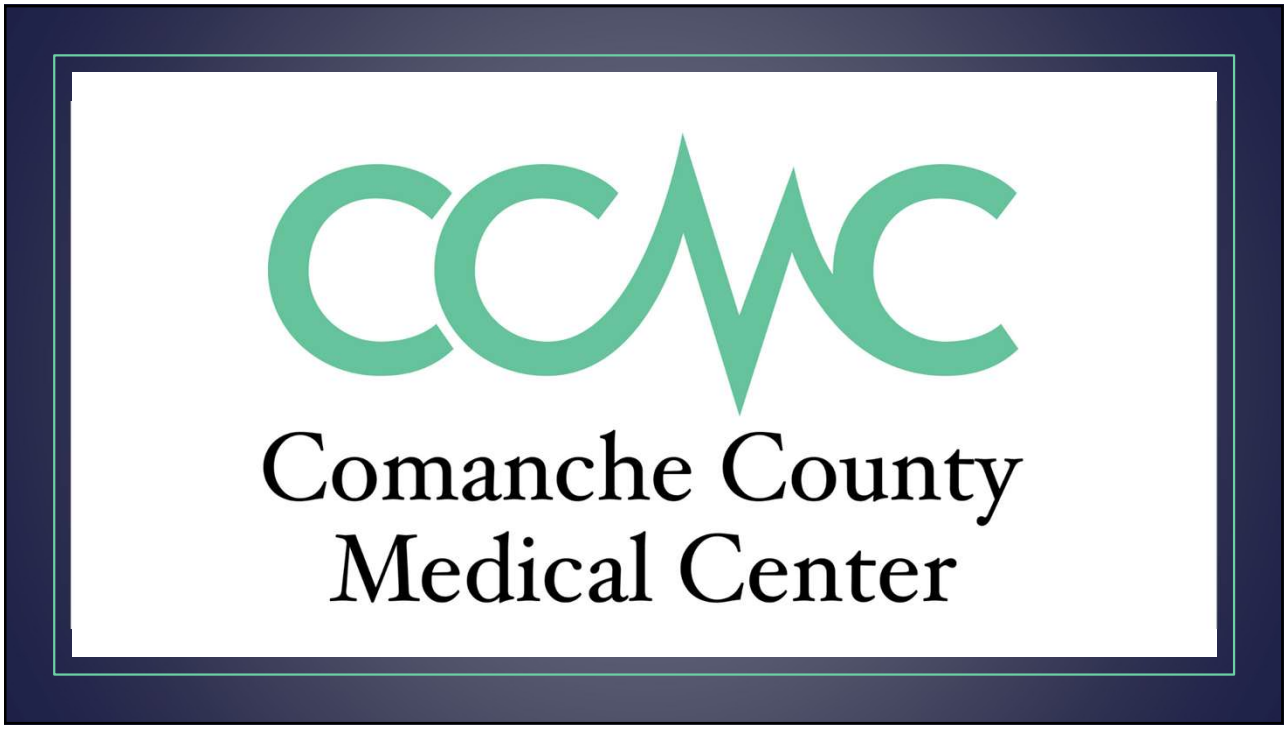
Thank you to all participants from the community service area who contributed to this Community Health Needs Assessment. CCMC leaders, hospital staff, Medical Staff, Board of Directors, and District leaders are to all be commended for maintaining a well-run and successful community hospital. The findings in this report are intended to serve as a platform to further efforts to improve care, identify solutions, and overcome obstacles to improve community health.



NEXT STEPS

Next Steps:

- *Present this CHNA to the Board of Directors and hospital leadership team.*
- *It is recommended that this CHNA be shared with all focus group participants who contributed to this assessment, and post on the hospital website for public access. Sharing this assessment with the focus group participants and community will likely create synergy as the community sees that the hospital is focused on strategic efforts to improve the health and wellbeing of people living in Comanche County.*
- *An action plan must be developed to show how each of these recommendations will be addressed and prioritized.*


CCMC
Comanche County
Medical Center