The F. Marie Hall Institute for Rural and Community Health exists to work in close collaboration with the people of Texas for the advancement of health through innovative and scholarly research, the advanced use of technology, comprehensive education and outreach.

**MOTTO:** We focus our imagination, our talents and our energy to improve the health and well-being of the people and communities of Texas and beyond.
Letter from the Director

DR. BILLY U. PHILIPS, JR.

April, I will have served as Director of the F. Marie Hall Institute for eight years. Mostly, those years have been filled with wonderful accomplishments, amazing growth and some of the most wonderfully amazing people anyone could ever hope to work with and lead. If you had asked me in the middle of my career to imagine the most outstanding of success that I might have in the twilight of my career, I wouldn’t have gotten close. It’s awesome! That having been stipulated, along the way there have been some times that have been as much of a challenge than challenges as they have faced professionally anytime in my career.

There isn’t a day that I don’t miss the security of knowing that I could call, at any time, my friend and the Institute’s benefactor, Marie Hall. She died earlier this year just about the time the bluebonnets bloom in Texas. This year they were beautiful, and I like to think that some of that fabulous color was because she influenced the Maker of it all to splash it up a bit to remind us of the hope she is to the world.

If you had asked me in the middle of my career to imagine the most outlandish of success that I might have in the twilight of my career, I wouldn’t have it no other way! And despite what might happen with our funding, well, that’s easy. Party on dudes!! We’ll be here. Well, my friends, we have always suffered from an unstoppable optimism in the Hall Institute, and that isn’t changing anytime soon. Read this annual report and grow stronger from, and we will continue to do so in less than two years an unnecessary challenge.

Finally, the demand for the innovation and leadership that the Institute provides has never been greater, especially in mental health services. The fact is that one in four adults and one in five school-aged children have mental health issues that need treatment. These are people that we know and live around and who might even be family. Many are veterans, and some are addicted to opioids that flood our streets and come from countries and people who hate America and the hope she is to the world.

We have programs that screen kids in our schools who have a propensity toward violence and get them into care so they don’t harm themselves or others. We also find veterans who have had run-ins with law enforcement and get them into care instead of jail. And we are leading the search to create the Texas Tech Mental Health Institute.

I could go on and on and tell you, even brag about, what the F. Marie Hall Institute is doing to advance health and wellbeing in West Texas and beyond, but I will simply say, without us, life here will not be as good.

So it has been quite a year for us, one we will survive and grow stronger from, and we will continue to do what we do. That, simply said, is our very best!!

You may remember a crazy camp movie of the late 1980s, “Bill & Ted’s Excellent Adventure.” I love three lines from that movie:

“You both seem to be suffering from a mild form of hysterical rage!”

“Be excellent to each other!”

“Party on, dudes!”

Well, my friends, we have always suffered from an unstoppable optimism in the Hall Institute, and that isn’t changing anytime soon. Read this annual report and you’ll see why. Why wouldn’t we have a mild hysteria? We’re the best. One reason why is because we are excellent to each other. That’s what we do in West Texas. It’s our heritage and our legacy. Marie Hall would have had it no other way!!

Office of Rural Health

Office of Rural Health (FY 2018-2019)

Cut 8.8%

2018 special line item subject to sunset review

$1,416,964

2017 special line item budget STRCR4

$3,134,846

Leveraged 2017 budget with additional grants

2.21

Multiplier effect of Texas line item + Federal dollars

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“Dr. Billy U. Philips, Jr.
Serving West Texas

West Texas spans 131,323 square miles and is home to more than 2.8 million people, or 11.2 percent of the state’s population. Of the 108 counties in West Texas, 98 are classified as rural and 54 are sparsely populated with fewer than seven persons per square mile. Only Alaska has more frontier landmass than Texas, and most of the Texas Frontier landmass is in West Texas.

The Texas Tech University Health Sciences Center is centered in the midst of this perfect rural research environment and uniquely situated to lead efforts that go beyond statistics to create real-world rural health solutions.

The F. Marie Hall Institute for Rural and Community Health serves these remote rural communities with the help of a multidisciplinary group of professionals who contribute to key programs in the following areas:

1. **HEALTH TECHNOLOGY**
   - Telemedicine and tele-health training, health IT support, practice management, clinical quality coaching and network improvement support.

2. **HEALTH EDUCATION**
   - Coordination of pipeline activities to recruit and engage students to enter the health care workforce and practice in rural West Texas.

3. **BEHAVIORAL HEALTH**
   - Behavioral health counseling, triage, intervention and referral for West Texas public school students and U.S. military veterans.

F. Marie Hall Institute for Rural and Community Health
3601 4th Street MS 7110
Lubbock, Texas 79430
P: (806) 743-1338
E: ruralhealth@ttuhsc.edu

Administration Staff

ADMINISTRATION STAFF (LEFT TO RIGHT):
Miguel Carrasco, IT Support Technician; Laura Lappe, Associate Director; Sarah Looten, Director of Staff Relations; Denise Lopez, Director of Finance; Cameron Onks, Attorney; Dolores Parrish, Assistant for Staff Relations; Christina Smith, Administrative Assistant.
Innovations in Healthcare Technology (InHT)

Telemedicine & Telehealth, Health IT Support, Clinical Quality Coaching and Practice Management

Our Innovative Healthcare Transformation division (InHT) assists healthcare providers and hospitals in modernizing their organizations with the use of telehealth technology and certified electronic health records (EHRs).

Through innovation and determination, InHT provides technical support and health care expertise to individuals across the region.

TRAVIS HANSON, InHT EXECUTIVE DIRECTOR

InHT STAFF (LEFT TO RIGHT, TOP TO BOTTOM): Jimmy Ashley, Tech Manager; Traci Carroll, Frontiers in Technology Project Manager; Melanie Clevenger, Telemedicine Clinic Manager; Amanda Freeman, TWITR Senior Mental Health Specialist; Becky Jones, TexLa Program Manager; Ron Martin, TWITR Senior Mental Health Specialist; Kelly Munoz, InHT Project Manager; Shawn Marie Parrott, TWITR Senior Mental Health Specialist; Sharon Rose, EMS Telemedicine Project Manager; Lisa Wynn, Administrative Assistant.
TelcoNet in West Texas

The Texas Tech University Health Sciences Center (TTUHSC) Telemedicine Program continues to bridge access barriers in the 100-county service area of West Texas. The TTUHSC Telemedicine Program provides patient services including rural health clinic-based specialty care, school-based clinic primary care, correctional telemedicine, and mental health services, including a school-based triage and referral project and an HIV+ clinic for uninsured and underserved patients.

Telemedicine encounters and miles saved for FY 2017 included the following:

- 7,086 Total Patient Encounters
- 6,268 Correctional Patient Encounters
- 818 Community Patient Encounters
- 222 Infectious Disease Clinic Patient Encounters
- Approximately 118,000 miles of travel were saved with the utilization of telemedicine technology

The telemedicine program at Texas Tech University Health Sciences Center has been recognized nationally through several distinctions and honors.

Telemedicine program staff provided demonstrations to 5,129 people in FY 2016-2017, exceeding their target of reaching 500 with telemedicine demonstrations. There was a significant increase in number of demonstrations due to participation in the South Plains Career Expo.

Telemedicine also provided practical training opportunities to TTUHSC students and residents to better prepare them for future use of such technologies.

Looking ahead, the TTUHSC Telemedicine program will continue to create awareness of telemedicine programs and the use of technology in medical practice among local physicians, administrators, and health service providers, as well as in surrounding areas. Awareness includes the advancements of telemedicine and other technologies, improvements in reliability, simplicity of equipment/software use and the potential that exists to expand telemedicine to West Texas communities and beyond, seeking help to overcome barriers to care and increase access to health services.

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The TexLa Telehealth Resource Center provides technical assistance and resources to new and existing telehealth programs throughout Texas and Louisiana. Nationally, there are a total of 15 TRCs which include 12 Regional Centers, all with different strengths and regional expertise. The TexLa TRC works to eliminate barriers and supports the expansion of telehealth throughout the region. In 2017, TexLa TRC continued to see increases in requests for technical assistance and resources and broadened our influence and reach to enhance telehealth efforts.

The Frontiers in Telemedicine course is a unique program that trains clinical staff to be telemedicine presenters. Students complete hands-on simulation center training, online modules and objective structured clinical examinations designed to educate them on telemedicine equipment, etiquette and ethics.

A total of 49 providers were trained in the FIT lab in FY 2016-2017. Online modules were created covering the basics of Telemedicine and those who benefit from the technology. The FIT Lab teaches students OSCE, including a walkthrough of a simulated case. FIT provides demonstrations of the application of communication skills in patient and medical team communication. In 2018, FIT plans to revise the course materials, incorporating new technology and offering additional training options.

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TexLa TRC
Telemedicine, Wellness, Intervention, Triage and Referral (TWITR)

Statistics show that although firearm related homicides in Texas have declined overall, violent crime among children and youth remains high. Launched in 2013, the TWITR project aims to reduce school violence in West Texas schools by identifying, monitoring, and obtaining prompt mental health care for at-risk youth.

The TWITR staff assessment and triage report as of April 2017 is as follows:

- **346** students were referred and screened by LPCs.
- **171** students have been triaged (all by telemedicine) with the TTUHSC Psychiatry Department.
- **20** students have been removed from school.
- **38** were placed in alternative placements.
- **26** students were sent to emergency room or inpatient hospital.
- **7** students were arrested after referral and before assessment.
- **4** students were arrested after assessment.
- **78** students were referred for violent behavior.
- **17%** reduction in truancy.
- **25%** reduction in student discipline referrals.
- **3.6%** increase in student GPA.

**LOOKING AHEAD**

After receiving funds for the next 2 years for this project, we plan to implement 1-2 ambulances next year. Most of the year will be spent collecting data, analyzing it and sending a report to the Texas Commission on State Emergency Communications (CSEC).

**TWITR Referrals**

Since 2013, TWITR has received 346 referrals, and impacted the lives of 32,139 students. The average age of juveniles referred for assessment was 15.

- **10** School Districts

TWITR provides services to at-risk youth at Ralls ISD, Shallowater ISD, Brownfield ISD, Lubbock-Cooper ISD, Levelland ISD, Idalou ISD, Abernathy ISD, Littlefield ISD, Crosbyton ISD and Plainview ISD.

- **346** TWITR Referrals

The Next Generation 911 Project

Created and funded by Texas House Bill 479, the Texas Commission on State Emergency Communications and TTUHSC were asked to establish a pilot project which would place telemedicine equipment in Emergency Medical Service (EMS) units.

**FY 2016-2017**

The Next Gen 911 project successfully installed telemedicine equipment in four rural EMS units: Scurry County EMS and Cogdell Memorial Hospital, Medical Arts Hospital EMS, Andrews EMS and Panhandle Regional Medical Center and Seminole EMS.

**LOOKING AHEAD**

After receiving funds for the next 2 years for this project, we plan to implement 1-2 ambulances next year. Most of the year will be spent collecting data, analyzing it and sending a report to the Texas Commission on State Emergency Communications (CSEC).
In partnership with the Texas Department of Agriculture State Office of Rural Health, The Institute has implemented the Ultrasound Education Initiative among the Small Hospital Improvement Project (SHIP) hospitals in the state of Texas. A total of 53 out of 105 SHIP hospitals in Texas participated in the initiatives during FY 2016-2017. We are currently in the “equipment distribution” phase of the project where hospitals use the ultrasound devices for one month and report on their use. Data is being collected about the equipment use and training and will be sent to the Texas Department of Agriculture State Office of Rural Health for further study.

**EMERGENT CARE**

Ultrasound enables a quick examination of critical patients without transferring them away from the physicians and nurses caring for them.

**QUALITY OF CARE**

Ultrasound can impact the quality of care by identifying life-threatening conditions early. Rural patients can be transported to a higher level of care sooner.

**PORTABLE CARE**

Due to the portability of ultrasound, this technology can be utilized in the Emergency Department, Intensive Care, Critical Care units, or any Outpatient areas.

**South Plains Veterans Telemedicine Services**

Veterans often have difficulty accessing mental health care when they need it. We serve those who served.

The TTUHSC Office of Rural Health has partnered with VetStar and the Veterans Resource Coordination Group (VRCG) to connect veterans and their families to the mental health resources they need. The most current Veterans Administration model data projects a total veteran population of 25,148 for the program’s 20 county service area and a population of 6,061 in the South Plains Veterans Telemedicine Services target demographic, including 855 women veterans.

According to the latest American Community Survey estimates, nearly nine (9) percent of the almost 16,000 Lubbock County veterans live below the poverty level, a higher rate than Austin, San Antonio, Houston, El Paso or Dallas/Ft. Worth. Roughly 40 percent of veterans served by StarCare and the VRCG live in rural areas. Research shows that veterans living in rural areas face many barriers to treatment, including lack of transportation, higher rates of chronic diseases, and significant mental health concerns, including higher than average suicide rates. The VRCG has been recognized by the state of Texas for its efforts to reach veterans living in rural areas.

Lubbock County averages approximately 66 veteran arrests every month; this indicates a high need for intervention and transition services on the South Plains. At this time, there are no special Veterans Courts in the VRCG’s service area. As a result, the Institute works closely with the Lubbock County Office of Dispute Resolution to provide mediation services for justice-involved veterans, including criminal mediation.

**FREQUENTLY ASKED QUESTIONS**

Why Telemedicine?

Telemedicine provides access to mental health services not available in rural areas. Tele-psychiatry helps to minimize the costs to veterans of traveling to distant care for.

How great is the need?

44 percent of veterans need some mental health care. 40 percent of West Texas veterans live in rural areas where mental health professionals are in short supply.

What counties do we serve?

All 20 of the counties the program serves are located in rural West Texas and have been designated Mental Health Professional Shortage Areas (MHPSA).

Veterans often have difficulty accessing mental health care when they need it. We serve those who served.
Transforming Communities through Outreach, Recruitment & Education (T-CORE)

Education and outreach, youth recruitment and counseling, and community health worker training

T-CORE was created two years ago to more accurately describe the programs that have evolved within the West Texas AHEC division of the F. Marie Hall Institute for Rural and Community Health. In addition to West Texas AHEC, programs under T-CORE include Community Health Worker Development-Bridge to Excellence, Scrubs Club, Double T Health Service Corp, and the Youth Empowerment Training Initiative (YETI).

T-CORE Staff (Top to Bottom, Left to Right): Jeff Carr, YETI Program Coordinator; Adrianne Harrel, Program Manager; Celeste Hoffman, Health Careers Promotion Coordinator; Terry Huckabee, Community Health Worker LVN; Frances Quintero, Senior Health Promotions Coordinator.
West Texas AHEC accomplishments for 2017 include:

• 59,937 individuals in the West Texas Region were reached through outreach activities.
• 8,945 health professionals were supported through conferences and continuing education events.
• 446 medical professional students were placed in 1,534 rotations at 108 sites throughout West Texas.
• 524 students attended 33 activities, either summer camp or a youth health service group.
• Distributed over 25,000 H.O.T. Jobs books.
• The H.O.T. jobs website had 347,000 hits.

In 2018, West Texas AHEC will focus on establishing strong Youth Health Service Corp programs throughout the region for high school students on the path to health care careers, stipends for students though the AHEC scholars program and community based learning experiences through the CHW Bridge to Excellence and Telemedicine programs.

Desert Mountain AHEC participated in a new migrant student initiative, “Pathways to a Bright Future.” Students studied topics such as mental health, epidemiology, pursuing a higher education and college readiness. Additionally, students met with health care professionals, had the opportunity to network with other students and learned about financial aid and the college admissions process.

AHEC of the Plains has implemented monthly community CPR classes by partnering with YMCA.

Panhandle AHEC responded to a need to serve as the base for scheduling nursing students rotations in the Amarillo area. This effort supports efficient coordination of 8 nursing programs/schools in that area.

Panhandle AHEC also hosted the annual Top of Texas Career Fair at the WTAMU Event Center, involving 1,563 high school students and 53 potential employers.

Big Country AHEC placed 10 AmeriCorps VISTA members with 9 different agencies throughout the region. The Big Country Healthy Futures VISTA program focuses on capacity-building efforts to create or expand health related programs and/or services to meet the needs of the medically underserved, ethnic minorities and other vulnerable populations.

Big Country AHEC also contracted with the Alabama-Coushatta Tribe of Texas to conduct a needs assessment to identify health outcomes as related to the year-three goals and objectives for their CDC grant. The collected information was utilized by the Good Health and Wellness Steering Committee to better understand and address challenges to active living and eating healthy food among the tribe members.

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The Double T Health Service Corp was very active in 2017. Members have participated in CPR classes and are enrolled to take Question-Persuade and Refer (Q.P.R.) training. Participation in this training serves to further prepare students to pursue and enter health care careers.

In an effort to sustain the pilot Scrubs Clubs, two Double T members have assumed the educator role for two high schools.

There are approximately 300 members enrolled in the Double T Health Service Corp and they have participated in 122 community service activities in the community.

The Double T Health Service Corp was very active in 2017. Members have participated in CPR classes and are enrolled to take Question-Persuade and Refer (Q.P.R.) training. Participation in this training serves to further prepare students to pursue and enter health care careers.

In an effort to sustain the pilot Scrubs Clubs, two Double T members have assumed the educator role for two high schools.

Three Scrubs Clubs were piloted in three different schools in 2017: an advanced technology high school, a traditional high school and a junior high school. The pilot programs were well received and the students that participated were very engaged.

Due to the success of the pilot programs, the five centers will use the model to implement Scrubs Clubs into rural schools recruited from each of their respective regions.
The Bridge to Excellence CHW program graduated its first class in May 2017. The class consisted of 11 students from across the West Texas region.

The hybrid class consisted of the traditional face-to-face classroom in Lubbock coupled with virtual connectivity through telemedicine equipment to the traditional class in Abilene, and four students attended via the ZOOM platform from the comfort of their homes in other rural areas of West Texas. The Bridge to Excellence program was used to leverage funds acquired by Big Country AHEC to start a CHW pilot program for the year. Big Country partnered with Hendrick Hospital and their new Population Health Navigation Program. The CHWs will work as patient navigators to manage patients with chronic conditions, which was an identified need in the community.

The YETI program hosted a total of 56 educational workshops and activities through FY 2016-2017. YETI continues to make inroads in three rural communities: Brownfield, Levelland, and Littlefield. The Youth Advisory committees are active and have led events such as National Drug and Alcohol Awareness, Mental Health Awareness, and Suicide Prevention Walks.

These partnerships focus primarily on the formation and maintenance of a Youth-Adult Council (YAC) made up primarily of youth but also including caring adults and parents. Youth and adults work together to form relationships and provide opportunities for youth to use the voice they have to speak up for themselves when it comes to important topics such as mental health, substance abuse and access to care/transition. Our YAC has been instrumental in the creation of trainings, outreach events, workshops and classes for youth and adults alike.

Our Positive Youth Development curricula aims to educate youth about adolescent risk factors and teaches youth to help themselves as well as others.

YETI will continue to reach out to other communities in the service area to promote the program and the services it provides. At the forefront of these efforts are the youth of the program. They are the agents of change and will continue to facilitate change within their own communities.

**Youth Engagement Training Initiative**

YETI focuses on empowering youth by addressing three critical factors: self-esteem building, communication skills, and problem-avoidance management.
Research, Reporting & Data Management (R2DM)

R2DM is the Institute clearinghouse for research administration and performs collection, analysis and management of data and information needed for grant proposal preparation and other special projects. Other academic and community-based activities performed by R2DM include geomapping and analysis, community health needs assessments and information dissemination. During FY 2016-2017, R2DM published the inaugural three issues of Rural Health Quarterly (RHQ) magazine, as well as the Institute’s Annual Report for 2016.

Catherine Hudson, Director
For Rural Health Research

R2DM Staff

R2DM Staff (Top to Bottom, Left to Right): Debra Curti, Research Associate; Gordon Gong, Senior Director of Study Design and Biostatistical Analysis; Rhonda Isome, Administrative Assistant; Scott Phillips, Senior Editor.
Grant Applications and Awards

The Institute was successful at submitting nine grant applications for funding during FY 2017. Six of the nine were approved, two were rejected and one is pending approval.

In addition, the Institute collected grant revenue from other active grants previously awarded:

- EMS & Emergency Responder Telemedicine Pilot Project - $ 50,000
- Next Generation 9-1-1 Telemedicine Medical Services Pilot - $ 500,000
- Office of Rural and Community Affairs (ORCA) IT Network - $ 3,625
- Texas Healthy Adolescent Initiative - $ 145,800

FY2017 Total: $4,854,170

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<td>December 6, 2016</td>
<td>Awarded</td>
<td>$ 193,234</td>
</tr>
<tr>
<td>The TWITR Project</td>
<td>February 20, 2017</td>
<td>Awarded</td>
<td>$1,275,008</td>
</tr>
<tr>
<td>Texas SHIP Hospital Ultrasound Education</td>
<td>March 2, 2017</td>
<td>Awarded</td>
<td>$ 95,213</td>
</tr>
<tr>
<td>Mentoring Opportunities for Youth Initiative</td>
<td>March 13, 2017</td>
<td>Pending</td>
<td>$ -</td>
</tr>
<tr>
<td>Alex &amp; Rita Hillman Foundation</td>
<td>March 20, 2017</td>
<td>Rejected</td>
<td>$ 0</td>
</tr>
<tr>
<td>Area Health Education Center Program</td>
<td>March 29, 2017</td>
<td>Awarded</td>
<td>$ 527,190</td>
</tr>
<tr>
<td>Telehealth Resource Center Program</td>
<td>April 26, 2017</td>
<td>Awarded</td>
<td>$ 325,000</td>
</tr>
<tr>
<td>Community Youth Development Program</td>
<td>May 9, 2017</td>
<td>Rejected</td>
<td>$ 0</td>
</tr>
<tr>
<td>Behavioral Health Workforce Education</td>
<td>June 12, 2017</td>
<td>Awarded</td>
<td>$ 485,296</td>
</tr>
</tbody>
</table>

Funding for FY 2017

ENDOWMENTS

The Marie Hall Chair in Rural Health $ 276,067
Smith/Vela/Patterson Senior Fellowship for Rural Health Research $ 179,479
F. Marie Hall Institute for Rural and Community Health $1,265,906

STATE APPROPRIATED LINE ITEM FUNDING

- Rural Health Care $ 776,845
- West Texas AHEC Program $2,000,000

REVENUE GENERATED BY BILLABLE TELEMEDICINE SERVICES

Correctional Managed Health Care Contract, Billed Clinic Services, and Community Telemedicine Network $ 440,553.86
Scholarly Activity

**PUBLICATIONS**


The following manuscripts are in preparation:

- Miller, B., Hudson, C. and Gong, G. Depression is associated with lower American National Adult Reading Test scores among rural dwellers aged between 50 and 64 years in Texas: A Project FRONTIER Study.
- Philips et al. Trends of mortality from 2007 to 2014 in rural vs. urban areas in West, East and South Texas.


**PRESENTATIONS**


**POSTERS**


**TEACHING**

- Dr. Billy Philips, Fall 2016, “Issues in Rural Health”, Master of Public Health Program.
- Dr. Debra Flores, Spring 2017, CHW Certification Class.

**BOARDS AND COMMITTEES**

- Dr. Debra Flores, Fall 2016, “Issues in Rural Health”, Master of Public Health Program.
- Travis Hansen, Fall 2017, Public Health Ethics and Law.

**PRESENTATIONS**
