



Community Health Needs Assessment

Mercy Hospital Watonga
Fiscal Year 2019



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Oklahoma Office of Rural Health

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Introduction

New requirements for nonprofit, 501 (c)(3), hospitals were enacted under the Patient Protection and Affordable Care Act (ACA), passed on March 23, 2010. One of the most significant of the new requirements is the Community Health Needs Assessment (CHNA) that must be conducted during taxable years after March 23, 2012 and submitted with IRS form 990. A CHNA must then be completed every three years following.

While the requirements are fairly new, the IRS has made strides in defining hospitals that must complete the CHNA as well as details of what is expected in the CHNA report to be submitted. At this time the only entities that must complete the CHNA are hospital organizations defined as:

- An organization that operates a State-licensed hospital facility
- Any other organization that the Secretary determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501 (c)(3).

The general goal behind the requirement is to gather community input that leads to recommendations on how the local hospital can better meet and serve residents' needs. The community input is typically derived from a community survey and a series of open meetings. Local health data are presented. Community members then identify and prioritize their top health needs.

After listening to community input, the hospital defines an implementation strategy for their specific facility. The implementation strategy is a written plan that addresses each of the health needs identified in the community meetings. To meet Treasury and IRS guidelines an implementation strategy must:

- Describe how the hospital facility plans to meet the health need, or
- Identify the health need as one the hospital facility does not intend to meet and explain why the hospital facility does not intend to meet the health need¹

After the needs are identified that the hospital can address, the implementation strategy must take into account specific programs, resources, and priorities for that particular facility. This can include existing programs, new programs, or intended collaboration with governmental, nonprofit, or other health care entities within the community.²

¹ Internal Revenue Service. 2011. Notice and Requests for Comments Regarding the Community Health Needs Assessment Requirements for Tax-Exempt Hospitals. Internal Revenue Bulletin: 2011-30.

² Ibid

The facility must make the recommendations and implementation strategy widely available to community members. The facility must adopt the implementation strategy in that same taxable year.

Oklahoma Office of Rural Health Partnership

The Oklahoma Office of Rural Health makes this program available to all rural facilities in Oklahoma free of charge. The Oklahoma Office of Rural Health works closely with the hospital and community members to develop an economic impact of the local health sector, develop and analyze a local health services survey, and gather and analyze local health data. The community meetings are facilitated by a resource team that includes Corie Kaiser and Lara Brooks of the Oklahoma Office of Rural Health.

After the meetings conclude, the resource team assists the hospital in developing their implementation strategy. After implementation, the resource team will assist in evaluation of the strategies implemented and provide continued assistance with data and resources.

This document discusses the steps taken to conduct a CHNA for Mercy Hospital Watonga in 2018. It begins with a description of the hospital's medical service area, including a demographic analysis, and then summarizes each meeting that took place during the CHNA process. The report concludes by listing the recommendations that came out of the process and presenting the hospital's implementation strategy and marketing plan.

Previous Community Health Needs Assessment- Priorities, Implementation, and Evaluation

Mercy Hospital Watonga worked with the Oklahoma Office of Rural Health in 2015 to complete their first Community Health Needs Assessment. During that time, health concerns were identified by community members and then prioritized by community members in focus group-style meetings. The following identifies each priority, implementation taken, and an evaluation or impact of the implementation.

Priority: Smoking (Prevention)

Service implemented: Through the EPIC EHR system, screening questions are in place to help direct patients to services and aids for quitting. Once a patient has been identified as a smoker who is looking to quit, a referral is then made for the patient. Sixteen patients have benefited from this service.

Priority: More physicians (primary care and specialists)

Services implemented: Since the completion of the 2015 CHNA, Mercy Hospital Watonga has added a physician and a PA that both see primary care patients in the clinic.

Priority: Nursing home or assisted living

Service implemented: This priority was beyond the scope of services that the hospital can provide. There is still not a local nursing home or assisted living. However, the hospital has made significant efforts to reach out and collaborate more with the hospital in Geary. The local hospital is now the sole lab provider for the facility.

Priority: More health education (early screening, when to get tested, available services in Watonga outside of hospital), and some community members are reluctant to share health information, preventative care, and just taking care of one's health

Service implemented: After the 2015 CHNA, it was determined that these two priorities should be combined since the activities.

Activity 1: Blood pressure and glucose checks: On a monthly basis, an average of 23 community members have benefited from this service

Activity 2: Career Day at Watonga High School: 350 students attended

Activity 3: Track meet for elementary: 9 hospital employees participated and assisted with the annual track meet for PreK- 5th grade. Fifteen hospital employees volunteered to benefit 30 children.

Activity 4: Mentoring Program at Middle School: This program serves 65 students for 6 weeks per semester.

Activity 5: Watonga Boys' Education: Hygiene lesson to 32 male students completed by Mercy Hospital Watonga PA.

Activity 6: Annual Block Party in Low-Income Neighborhood: 100 individuals benefited from this service

Activity 7: Outpatient dietary consultations- The hospital hired a dietician who is on site most of the time. This position also oversees the kitchen. It is estimated that about 150 patients have benefitted from the addition of this service.

Priority: Concern about hospital's financial viability

Service implemented: This is not a priority that the hospital can provide a service or outreach for. Rather, this is reflected from the local support of the hospital. The community recently positively supported a sales tax to benefit the hospital. This concern was raised through the survey and through the community meetings in 2015 as a concern of losing the hospital and potential services.

Priority: Insurance rates (both employer costs and costs for community members)

Service implemented: This item was identified and discussed during the 2015 CHNA. It was also noted in the 2015 CHNA that this concern is beyond the scope of services the hospital can provide. However, the hospital does have a charity care policy for those who are uninsured.

Priority: Drug use/abuse

Service implemented: Mercy Hospital Watonga has adopted a ministry wide initiative that has been adopted in the hospital and clinic that no opioids will be prescribed. Referrals will be made to an opioid or pain management clinic.

Awareness of Community Outreach

A question was included on the community survey (complete methodology detailed on page 18) to gauge survey respondents' awareness of current community programs offered by the hospital. Survey respondents were asked to list which programs they knew. The most commonly responded programs were the mentoring program and blood pressure checks. The table below outlines all programs listed by the survey respondents.

Community Programs Offered by Mercy Hospital Watonga

Response Category	No.	%
Mentoring program	3	14.3%
Blood pressure checks	3	14.3%
Telemedicine	2	9.5%
Auxiliary lunches	2	9.5%
Blood drives	2	9.5%
Mobile radiology/Mobile Mammography	2	9.5%
Charity care	1	4.8%
Financial assistance	1	4.8%
Physical therapy	1	4.8%
Annual health fair	1	4.8%
Nutritional consult	1	4.8%
Spring block party	1	4.8%
A lot	1	4.8%
Total	21	100.0%

Mercy Hospital Watonga Medical Services Area Demographics

Figure 1 displays the Mercy Hospital Watonga medical services area. Mercy Hospital Watonga and all area hospitals are delineated in the figure. The surrounding hospitals are identified in the table below by county along with their respective bed count.

Figure 1. Mercy Hospital Watonga Primary and Secondary Medical Service Areas

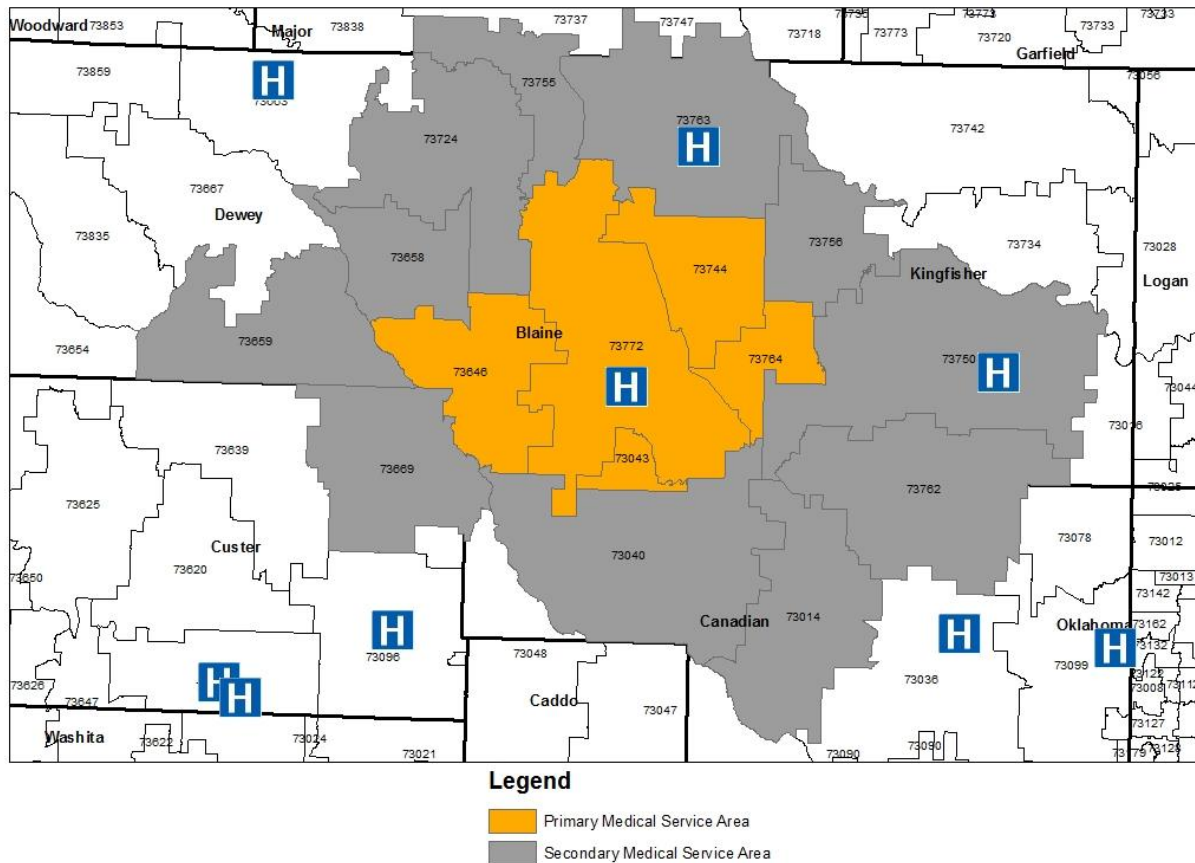


Figure 1. Mercy Hospital Watonga Medical Service Areas

City	County	Hospital	No. of Beds
Watonga	Blaine	Mercy Hospital Watonga	25
Okeene	Blaine	Okeene Municipal Hospital	25
Oklahoma City	Canadian	Integrus Canadian Valley Regional Hospital	40
El Reno	Canadian	Park View Hospital	54
Clinton	Custer	Clinton Indian Hospital	n/a
Clinton	Custer	Integrus Clinton Regional Hospital	64
Weatherford	Custer	Southwestern Memorial Hospital	25
Seiling	Dewey	Seiling Municipal Hospital	18
Kingfisher	Kingfisher	Kingfisher Regional Hospital	25

As delineated in Figure 1, the primary medical service area of Mercy Hospital Watonga includes the zip code area of Watonga, Greenfield, Hitchcock, Fay, and Omega. The primary medical service area experienced a population decrease of 1.8 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced another population decrease of

21.1 percent from the 2010 Census to the latest available, 2012-2016, American Community Survey.

The secondary medical services area is comprised of the zip code Calumet, Canton, Geary, Kingfisher, Longdale, Loyal, Oakwood, Okarche, Okeene, Putnam and Thomas. The secondary medical service area experienced an increase in population of 4.1 percent from 2000 to 2010 followed by a population decrease of 0.3 percent from 2010 to the 2012-2016 American Community Survey.

Table 1. Population of Mercy Hospital Watonga Medical Service Area

Population by Zip Code		2000 Population	2010 Population	2012-2016 Population	% Change 2000-2010	% Change 2010-12-16
<i>Primary Medical Service Area</i>						
73043	Greenfield	165	125	161	-24.2%	28.8%
73744	Hitchcock	378	267	176	-29.4%	-34.1%
73646	Fay	448	384	426	-14.3%	10.9%
73764	Omega	182	144	122	-20.9%	-15.3%
73772	Watonga	5,992	6,119	4,669	2.1%	-23.7%
Total		7,165	7,039	5,554	-1.8%	-21.1%
<i>Secondary Medical Service Area</i>						
73014	Calumet	1,531	1,431	2,106	-6.5%	47.2%
73724	Canton	1,143	1,190	980	4.1%	-17.6%
73040	Geary	1,972	1,976	1,766	0.2%	-10.6%
73750	Kingfisher	6,551	7,025	7,140	7.2%	1.6%
73755	Longdale	901	905	772	0.4%	-14.7%
73756	Loyal	289	352	270	21.8%	-23.3%
73658	Oakwood and Eagle City	275	260	198	-5.5%	-23.8%
73762	Okarche	1,966	2,156	2,160	9.7%	0.2%
73763	Okeene	1,609	1,623	1,496	0.9%	-7.8%
73659	Putnam	182	160	167	-12.1%	4.4%
73669	Thomas	1,596	1,675	1,650	4.9%	-1.5%
Total		18,015	18,753	18,705	4.1%	-0.3%

SOURCE: Population data from the U.S. Bureau of Census, Decennial Census 2000, 2010 and American Community Survey 2012-2016 (February 2018)

Table 2 displays the current existing medical services in the primary service area of the Mercy Hospital Watonga medical services area. Most of these services would be expected in a service area of Watonga's size: one physician office, three dental offices, two optometry offices, two home health providers, one mental health provider, a county health department, and three pharmacies. Mercy Hospital Watonga is a 25 bed critical access hospital located in Blaine County. The hospital provides acute and swing bed inpatient services, 24-hour emergency department, case management and discharge planning, diagnostic radiology (CAT Scan, MRI, Ultrasound), rehabilitation services, dietary consult, and specialist referral. A complete list of hospital services and community involvement activities can be found in Appendix A.

Table 2. Existing Medical Services in the Mercy Hospital Watonga Medical Services Area

Count	Service
1	Hospital: Mercy Hospital Watonga
1	Physician clinic
3	Dental offices
2	Optometry offices
2	Home health providers
1	County Health Department: Blaine County
1	Mental health provider
1	Indian health services provider
3	Pharmacies

In addition to examining the total population trends of the medical service areas, it is important to understand the demographics of those populations. Table 3 displays trends in age groups for the primary and secondary medical service areas as well as Blaine County in comparison to the state of Oklahoma. Overall, the over 65 age group has experienced an increase in population across all geographies from the 2010 Census to the latest, 2012-2016 American Community Survey. This cohort accounted for 14.5 percent of the total population at the state level. In terms of the medical service areas, this age group accounted for 15.4 percent of the primary medical service area, 17.5 percent of the secondary medical service area, and 18.1 percent of the population of Blaine County. The 45-64 age group accounts for the largest share of the population in the secondary medical service area (26.3%) and Blaine County (27.8%). This is compared to the state share of 24.9 percent of the total population.

Table 3. Percent of Total Population by Age Group for Mercy Hospital Watonga Medical Service Areas, Blaine County and Oklahoma

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Blaine County	Oklahoma
2010 Census				
0-14	15.5%	21.5%	18.0%	20.7%
15-19	4.4%	7.2%	5.7%	7.1%
20-24	8.7%	4.8%	7.0%	7.2%
25-44	36.6%	23.5%	30.5%	25.8%
45-64	23.1%	28.3%	24.4%	25.7%
65+	<u>11.7%</u>	<u>14.7%</u>	<u>14.4%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	7,039	18,753	11,943	3,751,351
12-16 ACS				
0-14	16.1%	22.4%	19.6%	20.6%
15-19	4.0%	5.6%	4.4%	6.7%
20-24	3.9%	6.2%	4.7%	7.3%
25-44	31.3%	22.0%	25.4%	26.0%
45-64	29.3%	26.3%	27.8%	24.9%
65+	<u>15.4%</u>	<u>17.5%</u>	<u>18.1%</u>	<u>14.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	5,554	18,705	9,777	3,875,589

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2012-2016 (www.census.gov [March 2018]).

Changes in racial and ethnic groups can impact the delivery of healthcare services, largely due to language barriers and dramatically different prevalence rates for specific diseases, such as diabetes. A noticeable trend in Oklahoma is the growth in the Hispanic origin population. In 2010, those of Hispanic origin accounted for 8.9 percent of the total state population. The latest American Community Survey data of 2012-2016 suggest that this population group has experienced an increase to 9.8 percent of the total population. This trend is

evident in Blaine County and both medical service areas. The share of the population identified as of Hispanic Origin accounted for 13.0 percent of the primary medical service area's population in 2012-2016 and 6.1 percent of the secondary medical service area during the same time period. The Hispanic Origin population accounted for 9.6 percent of the total population from 2012-2016 in Blaine County. It must be noted that the data shows a decline in the Hispanic Origin population in the primary and secondary medical service areas. The prison in Watonga closed in 2010, after the decennial Census counts were taken. Therefore, the latest data show the population without the prison population.

Table 4. Percent of Total Population by Race and Ethnicity for Mercy Hospital Watonga Medical Service Areas, Blaine County and Oklahoma

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Blaine County	Oklahoma
2010 Census				
White	78.5%	85.1%	79.7%	72.2%
Black	4.2%	0.7%	2.6%	7.4%
Native American ¹	5.8%	6.8%	8.0%	8.6%
Other ²	7.4%	4.0%	5.9%	5.9%
Two or more Races ³	4.1%	3.4%	3.8%	5.9%
Hispanic Origin ⁴	35.7%	7.5%	24.1%	<u>8.9%</u>
Total Population	7,039	18,753	11,943	3,751,351
12-16 ACS				
White	72.6%	86.1%	77.9%	72.9%
Black	8.5%	0.7%	5.2%	7.3%
Native American ¹	4.2%	5.5%	5.4%	7.3%
Other ²	8.6%	2.9%	5.4%	8.7%
Two or more Races ³	6.2%	4.8%	6.1%	7.7%
Hispanic Origin ⁴	<u>13.0%</u>	<u>6.1%</u>	<u>9.6%</u>	<u>9.8%</u>
Total Population	5,554	18,705	9,777	3,875,589

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2012-2016 (www.census.gov [March 2018]).

Summary of Community Meetings

Mercy Hospital Watonga hosted three community meetings between May 3, 2018 and May 31, 2018. The Oklahoma Office of Rural Health facilitated these meetings. These community meetings were held during the same time period as community meetings in Okeene. Each community held and hosted their own meetings with the plan of coming together to discuss commonalities that span across the county. Summaries of the information presented at each meeting are included below in chronological order.

Community members in attendance at these meetings included:

- Mercy Hospital Watonga representatives
- Blaine County Health Department
- Indian Health Services representatives
- Opportunities, Inc.
- Watonga Indian Health

Average attendance at the community meetings was 9-12 community members. The hospital tried to invite anyone who wanted to attend within the community. This was made through telephone calls, emails, social media posts, and the Chamber of Commerce assisted with inviting individuals. The hospital made significant efforts to reach a diverse and representative population of the medical service area and patients served including low income and racially diverse populations. Representatives from the public health sector were included to provide insight into what they see from a public health and underserved population perspective of community needs.

Economic Impact and Community Health Needs Assessment Overview, May 3, 2018

A meeting was held to discuss the economic impact of the health sector and explain the process and need for the Community Health Needs Assessment. The economic impact of the health sector was reviewed at this meeting (and is summarized below).

Table 5 below summarizes the overall economic impact of the health sector on the Blaine County, Oklahoma economy. A form requesting information was sent to all health care providers in the medical service area. Local providers were asked to share their employment levels and of those employees how many were physicians/optometrists/dentists/pharmacists/etc. When available, payroll information was also collected from the establishments. When payroll information was not available, payroll was estimated using state level averages from the Bureau of Labor Statistics.

The health sector in the Mercy Hospital Watonga medical service area employs 135 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 170 FTE employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$10.1 million. When the

appropriate income multiplier is applied, the total income impact is over \$12 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 29.5% of personal income in Blaine County will be spent on taxable goods and services locally. Therefore, if we just examine the impact made on retail from those employed in the health sector, this would account for over \$8 million spent locally, generating \$35,685 on a 1% tax. A copy of the meeting materials that were distributed can be found in Appendix C.

At the conclusion of the meeting, community members were asked to identify their top health concerns based on the demographic information presented and their local expertise. The following concerns were identified:

- Access to care (2)
- Childhood nutrition
- Transportation to care
- Mental health access- Red Rock does have a facility, but staffing is a constant concern
- Health department staffing- one nurse once per month for family planning, nurse is present twice per week for immunizations and STD checks. This has also impacted neighboring counties.
- Affordable health care- insurance costs, 2 navigators are present, but the costs are extremely high- no sliding scale options for clinic or hospital visits
- Mercy does have charity care, forms are available at the hospital and clinic

Table 5. Mercy Hospital Watonga Medial Service Area Health Sector Impact on Employment and Income, and Retail Sales and Sales Tax

Health Sectors	Employment			Income			Retail	1 Cent
	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	65	1.35	88	\$5,659,369	1.20	\$6,773,014	\$1,998,039	\$19,980
Physicians, Dentists & Other Medical Professionals	30	1.22	37	\$2,451,205	1.15	\$2,823,108	\$832,817	\$8,328
Other Medical & Health Services, Home Health & Pharmacies	<u>40</u>	1.15	<u>46</u>	<u>\$2,041,010</u>	1.23	<u>\$2,500,376</u>	<u>\$737,611</u>	<u>\$7,376</u>
Total	135		170	\$10,151,584		\$12,096,498	\$3,568,467	\$35,685

SOURCE: 2016 IMPLAN database, Minnesota IMPLAN Group, Inc.; Local data for employment, employee compensation and proprietor's income; income estimated based on state average incomes if local data not available; employment data from local survey.

* Based on the ratio between Oklahoma taxable sales and income (29.5%) – from 2017 Sales Tax Data and 2016 Personal Income Estimates from the Bureau of Economic Analysis.

Health Data, May 17, 2018

A community meeting was held May 17, 2018, to examine various sources of local health data. Various sources of health data were examined including data from the County Health Rankings and Roadmaps Program through the University of Wisconsin Population Health Institute, and the Robert Wood Johnson Foundation. The County Health Rankings program evaluates and ranks counties based on two distinct areas: Health Factors and Health Outcomes. Along with these two areas counties receive an overall rank within their state; therefore 1=best and 77=worst.

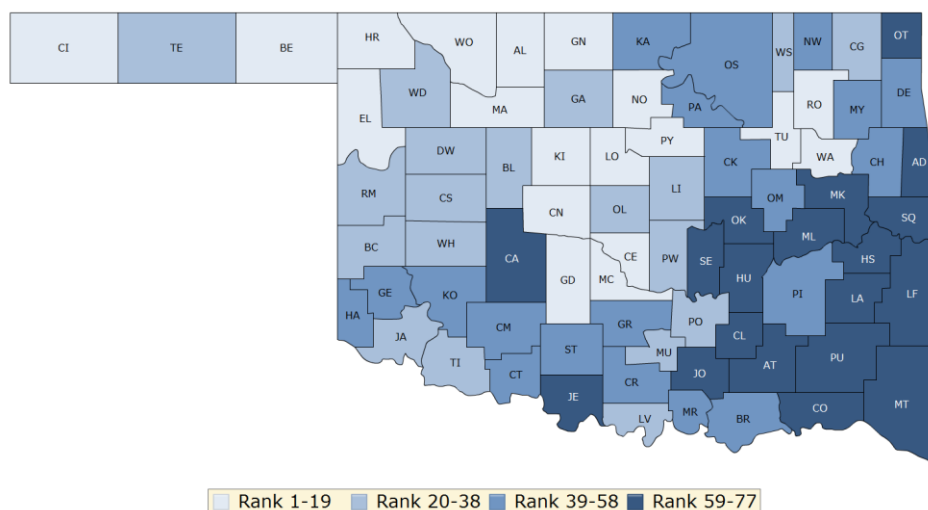
Health factors, considered tomorrow's health, are comprised of health behaviors (rank: 42), clinical care (rank: 33), social and economic factors (rank: 28), and physical environment (rank: 31). Blaine County's overall health factors rank is 31. This suggests, in general, the health status of Blaine County residents is somewhat comparable to that of neighboring counties. Areas of concern include Blaine County's smoking rate, adult obesity rate, physical inactive rate, and the teen birth rate are all less desirable than the top U.S. performers. Also, the share of uninsured, county population per primary care providers, mammography screenings of the Medicare population, the county share of residents who have education or training beyond a high school diploma, injury deaths, and those who have a long commute that drive alone are areas of concern for Blaine County. All health factors variables are presented in Table 6 along with Blaine County specific data, the top U.S. performers, and the state average. The yellow highlighted categories are the areas identified by the County Health Rankings and Roadmaps as areas to explore (generally where Blaine County ranks very poorly compared to the national benchmark). The green highlighted areas are deemed as areas of strength in Blaine County.

Table 6. Health Factors (Overall Rank 31)

Category (Rank)	Blaine County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (42)				
Adult Smoking	17%	17-18%	14%	20%
Adult Obesity	37%	31-43%	26%	33%
Food Environment Index	6.5		8.6	5.9
Physical Inactivity	36%	30-42%	20%	30%
Access to Exercise Opportunities	60%		91%	74%
Excessive Drinking	13%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	18%	8-31%	13%	28%
Sexually Transmitted Infections	313		146	542
Teen Birth Rate	63	52-73	15	42
Clinical Care (33)				
Uninsured	17%	15-19%	6%	16%
Primary Care Physicians	3,280:1		1,030:1	1,590:1
Dentists	1,610:1		1,280:1	1,700:1
Mental Health Providers	280:1		330:1	260:1
Preventable Hospital Stays	63	42-71	35	60
Diabetic Monitoring	77%	65-88%	91%	78%
Mammography Screening	54%	41-67%	71%	56%
Social & Economic Factors (28)				
High School Graduation			95%	83%
Some College	47%	39-54%	72%	59%
Unemployment	3.8%		3.2%	4.9%
Children in Poverty	27%	19-34%	12%	23%
Income Inequality	4.7	3.9-5.6	3.7	4.6
Children in Single-Parent Household	31%	22-41%	20%	34%
Social Associations	28.5		22.1	11.5
Violent Crime Rate	211		62	439
Injury Deaths	106	79-140	55	92
Physical Environment (31)				
Air-Pollution- Particulate Matter	8.3		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	11%	7-15%	9%	15%
Driving Alone to Work	87%	86-88%	72%	83%
Long Commute- Driving Alone	18%	14-22%	15%	26%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

The following figure depicts each county's rank by shade. Blaine County's ranking is comparable to Dewey and Custer Counties and is more favorable than Caddo County. Blaine County is less favorable than Major and Kingfisher Counties.



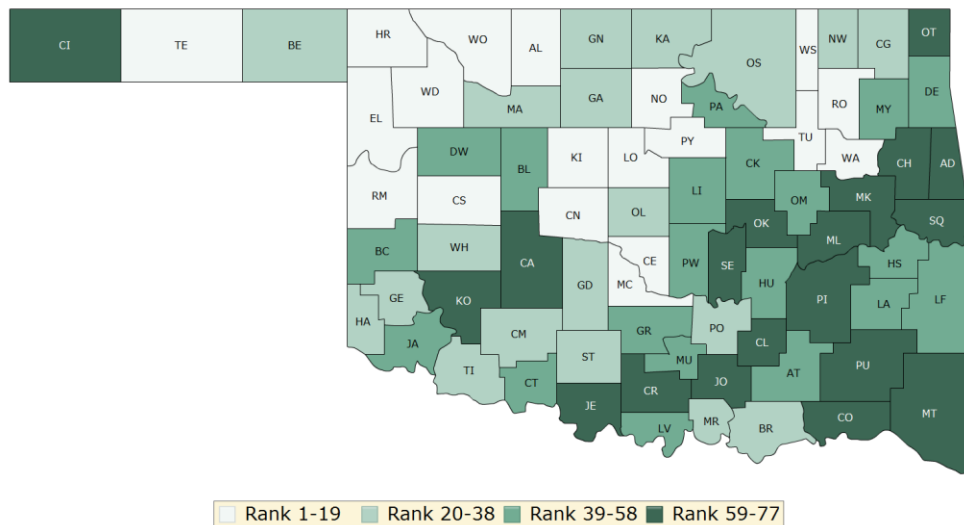
In terms of health outcomes, considered, today's health, Blaine County's ranking is 45th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 7.

Table 7. Health Outcomes (Overall Rank 45)

Category (Rank)	Blaine County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (52)				
Premature Death	11,200	8,700-13,600	5,300	9,300
Quality of Life (39)				
Poor or Fair Health	19%	19-20%	12%	20%
Poor Physical Health Days	4.3	4.2-4.5	3.0	4.5
Poor Mental Health Days	4.5	4.3-4.7	3.1	4.5
Low Birth Weight	8%	7-10%	6%	8%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

The following figure shows county health outcomes rankings by shades. Blaine County's ranking is comparable to Dewey County and more favorable than Caddo County. Blaine County lags Major and Kingfisher Counties. All meeting materials distributed at this meeting can be found in Appendix D.



At the conclusion of the meeting, community members were once asked to identify what health concerns stand out in the data the presented and their local expertise. The health concerns identified include:

- Mental health access- Red Rock does have a facility, but staffing is a constant concern
 - Substance abuse and alcohol use/abuse- resources assistance for patients- Woodward, Enid, OKC, Clinton has a crisis (but would have to do referrals)
 - There are private options available, but patients often do not qualify
 - Celebrate Recovery is available in community through ministerial alliance
 - AA through Baptist Church
 - Men's recovery house
- Physical activity and access to healthy foods- Previously handed out recipes with fresh produce to encourage food pantry participants,
 - Need for a cultural change
- Physical inactivity- Where to start, who is the target population?
 - Physical activity equipment available at library- previously underutilized due to lack of knowledge
 - New playground equipment is being installed at the library park

Community Survey Methodology and Results, March 16, 2018- June 12, 2018

A survey was designed to capture three needs through one form. The survey included themes and strengths questions specific to Blaine County to meet the needs of the Blaine County Health Department. Questions were also included to gauge hospital usage, satisfaction and community needs for both Mercy Hospital Watonga and Okeene Municipal Hospital. The survey was first made available March 16, 2018 and closed on May 17, 2018. The survey was made available at the first community meeting and was distributed through the community via electronic link was distributed to all of the civic organizations in the community. The paper survey was made available at the hospital, clinics, Senior Citizens' Center, and various establishments across Watonga. Three entities (Mercy Hospital Watonga, Okeene Municipal Hospital and Blaine County Health Department) shared responsibility in distributing the survey. A copy of the survey form and results can be found in Appendix E. Community members were asked to return their completed surveys to Mercy Hospital Watonga, Okeene Municipal Hospital or Blaine County Health Department.

A total of 282 survey responses were received from Blaine County. The survey results were presented at the May 31, 2018, community meeting.

Table 8 below shows the survey respondent representation by zip code. The largest share of respondents was from the Watonga (73772) zip code with 117 responses. Okeene followed with 82 responses or 29.1 percent.

Table 8. Zip Code of Residence

Response Category	No.	%
73772- Watonga	117	41.5%
73763- Okeene	82	29.1%
73744- Hitchcock	6	2.1%
73724- Canton	6	2.1%
73646- Fay	5	1.8%
73773- Waukomis	3	1.1%
73747- Isabella	3	1.1%
73040- Geary	3	1.1%
73750- Kingfisher	2	0.7%
73737- Fairview	2	0.7%
73768- Ringwood	1	0.4%
73770- Southard	1	0.4%
73755- Longdale	1	0.4%
73764- Omega	1	0.4%
No response	49	17.4%
Total	282	100.0%

The survey focused on several health topics of interest to the community. Highlights of the results include:

Overview of Health in Blaine County

Tables 9-11 gauge survey respondents' rating of the health of their community, quality of life in Blaine County, and if they are able to get medical care and medication when needed.

Table 9. How healthy would you rate your community?

Response Category	No.	%
Healthy	38	13.5%
Neutral	141	50.0%
Unhealthy	101	35.8%
No response	2	0.7%
Total	282	100.0%

Table 10. How satisfied are you with the quality of life in Blaine County?

Response Category	No.	%
Satisfied	117	41.5%
Neutral	103	36.5%
Dissatisfied	60	21.3%
No response	2	0.7%
Total	282	100.0%

Table 11. Are you able to get medical care and medication when needed?

Response Category	Yes	%	No	%	No Response
General medical care	255	90.4%	15	5.3%	12
Teeth	228	80.9%	40	14.2%	14
Eyes	29	10.3%	55	19.5%	18
Mental health services	91	32.3%	144	51.1%	47
Medication	255	90.4%	15	5.3%	12

Tables 12-14 ask the survey respondent if they agree or disagree with a series of questions related to the health and quality of life in Blaine County.

Table 12. Mark your level of agreement with the following statements as they apply in Blaine County

Response Category	Agree No.	Agree %	Disagree No.	Disagree %
There are jobs available in the community	162	57.4%	93	33.0%
There are opportunities for advancement	100	35.5%	150	53.2%
Jobs pay enough to live on	88	31.2%	161	57.1%
I have access to fresh fruits and vegetables	221	78.4%	32	11.3%

Table 13. Mark your level of agreement with the following statements as they apply in Blaine County

Response Category	Agree No.	Agree %	Disagree No.	Disagree %
The community is a safe place to live	201	71.3%	51	18.1%
Neighbors know, trust, and look out for one another	203	72.0%	47	16.7%
There are support networks for individuals and families (For example, church or family readiness group)	216	76.6%	33	11.7%

Table 14. Mark your level of agreement with the following statements as they apply in Blaine County

Response Category	Agree No.	Agree %	Disagree No.	Disagree %
Community is a good place to raise children	193	68.4%	49	17.4%
There are opportunities for children to be active	173	61.3%	73	25.9%
There is access to safe and affordable child care	111	39.4%	125	44.3%
I am satisfied with the school system	164	58.2%	73	25.9%
There are networks to support parents	107	37.9%	126	44.7%
This is a community to grow old in	171	60.6%	72	25.5%
There are opportunities for older adults to be active	123	43.6%	117	41.5%
There are services for older adults	131	46.5%	106	37.6%
There are networks of support for the elderly living alone	92	32.6%	141	50.0%

Tables 15-18 ask survey respondents to select their top three options in the areas of: causes of stress, manage stress, and biggest health problems and the top three qualities of a “Healthy Community.”

Table 15. What are the 3 things that cause you the most stress?

Response Category	No.	%
Money/Finances	143	21.6%
Work/Job	109	16.5%
Family Responsibilities	82	12.4%
Mental or Physical Health Conditions	55	8.3%
Major Life Event	53	8.0%
Parenting/Children	50	7.6%
Relationship Difficulties (Friends, Spouse, etc.)	36	5.4%
Lack of safety/Crime	30	4.5%
Substance Abuse	27	4.1%
School	19	2.9%
Poor or Unstable Housing	14	2.1%
Unemployment	13	2.0%
Discrimination	13	2.0%
Lack of transportation	6	0.9%
Abuse	4	0.6%
Complications of getting older	2	0.3%
Nursing/Assisted living	1	0.2%
Lack of volunteers in school system and community	1	0.2%
Lack of things for kids to do after school	1	0.2%
Lack of new businesses	1	0.2%
Caring for an aging parent	1	0.2%
Resources for families caring for those with disabilities	1	0.2%
Total	662	100%

Table 16. What are the 3 most common ways you manage your stress?

Response Category	No.	%
Spend time with friends and family	107	16.0%
Exercise, walk or go for a bike ride	103	15.4%
Pray or go to church	88	13.2%
Watch television or movies	87	13.0%
Clean or do chores	51	7.6%
Listen to music	39	5.8%
Spend time doing a hobby	33	4.9%
Nap	28	4.2%
Go for a drive	26	3.9%
Eat	23	3.4%
Nothing	17	2.5%
Drink alcohol	15	2.2%
Play video game or surf the internet	11	1.6%
Meditation or yoga	9	1.3%
Smoke/Vape/Dip/Chew	8	1.2%
Get a massage or spa treatment	7	1.0%
Shop	6	0.9%
Gamble	3	0.4%
Play sports	1	0.1%
See a mental health professional	1	0.1%
Work	1	0.1%
Gardening	1	0.1%
Camping with family	1	0.1%
Read bible	1	0.1%
Internalize	1	0.1%
Total	668	100%

Table 17. What do you think are the 3 biggest health problems in Blaine County?

Response Category	No.	%
Cancers	109	15.2%
Poverty	92	12.8%
Obesity	86	12.0%
Mental health problems	73	10.2%
Aging problems (arthritis, hearing loss, etc.)	56	7.8%
Diabetes	52	7.3%
Heart disease and stroke	51	7.1%
Housing that is adequate, safe and affordable	47	6.6%
Child abuse/Neglect	34	4.7%
High blood pressure	32	4.5%
Drug abuse/Illegal drugs/Addiction/Meth use	31	4.3%
Teenage pregnancy	20	2.8%
Respirations/Lung disease	11	1.5%
Dental problems	6	0.8%
Rape/Sexual assault	3	0.4%
Suicide	3	0.4%
Quality of water	2	0.3%
Sexually transmitted diseases/infections (STD/STI)	2	0.3%
Infectious disease (hepatitis, TB)	1	0.1%
Discrimination	1	0.1%
Law enforcement	1	0.1%
Ambition to improve life	1	0.1%
Need for broad visioning for city	1	0.1%
All of the above	1	0.1%
Total	716	100%

Table 18. What do you think are the 3 most important factors for a quality of life in a "Healthy Community?"

Response Category	No.	%
Good jobs and healthy economy	172	23.8%
Access to healthcare (ex. Family doctor)	118	16.3%
Healthy behaviors and lifestyles	93	12.9%
Good schools	64	8.9%
Religious or spiritual values	61	8.4%
Strong family life	48	6.6%
Affordable housing	38	5.3%
Good place to raise children	38	5.3%
Low crime/Safe neighborhoods	32	4.4%
Clean environment	25	3.5%
Parks and recreation	10	1.4%
Arts and cultural events	7	1.0%
Excellent race relations	6	0.8%
Low levels of child abuse	4	0.6%
Low adults death and disease rates	2	0.3%
Lower drug/Meth rates	2	0.3%
Nursing home/Assisted living	1	0.1%
Access to affordable food (fruits and vegetables)	1	0.1%
More education to community	1	0.1%
Total	723	100%

Primary Care Physician Visits

- 45.4% of respondents had used a primary care physician in the Watonga service area during the past 24 months
- 90.1% of those responded being satisfied
- Only 85 respondents or 30.1% believe there are enough primary care physicians practicing in Blaine County
- 79.4% of the respondents would consider seeing a midlevel provider for their healthcare needs
- 77.0% responded they were able to get an appointment with their primary care physician when they needed one

Specialist Visits

Summary highlights include:

- 59.2% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 19
- Only 0.7% of specialist visits occurred in Watonga

Table 19. Type of Specialist Visits

Type of Specialist	No.	Percent
<i>Top 5 Responses</i>		
Cardiologist (2 visits in Watonga)	43	14.4%
Orthopedist/Orthopedic Surg. (0 visits in Watonga)	36	12.0%
OB/GYN (0 visits in Watonga)	28	9.4%
Oncologist (0 visits in Watonga)	26	8.7%
Urologist (0 visits in Watonga)	23	7.7%
All others (0 visits in Watonga)	<u>143</u>	<u>47.8%</u>
Total	<u>299</u>	<u>100.0%</u>

Some respondents answered more than once.

Hospital Usage and Satisfaction

Survey highlights include:

- 41.8% of survey respondents that have used hospital services in the past 24 months used services at Mercy Hospital Watonga
 - o Okeene Municipal Hospital (20.5%), Mercy Hospital Oklahoma City (7.9%), and INTEGRIS Baptist Medical Center (4.6%) followed
 - o The most common response for using a hospital other than Mercy Hospital Watonga or Okeene Municipal Hospital was availability of specialty care (including surgery and labor and delivery) (39.1%) followed by physician referral/Transfer (37.3%)
- 86.1% of survey respondents were satisfied with the services received at Mercy Hospital Watonga

- This is below the state average for other hospitals (86.5%)
- Most common services used at Mercy Hospital Watonga:
 - Emergency Room (26.6%)
 - Laboratory (25.5%)
 - Diagnostic imaging (23.4%)

Primary Care Physician Demand Analysis, May 31, 2018

A demand analysis of primary care physicians was completed for the zip codes that comprise the Watonga primary and secondary medical services areas. This analysis examined average primary care physician visit rates by gender and by age groups. Once age- and gender-specific coefficients were applied, total primary care physician visit numbers were calculated by service area. Table 12 displays potential primary care physician rates by shares of service area. For example, if 90% of residents in the primary medical services area and 10% of residents in the secondary medical services area utilize services of primary care physicians in the Watonga medical services area, a total of 12,205 annual visits would occur. This would suggest that the Watonga medical services area would need 2.9 FTE primary care physicians to meet the needs of their existing population. Table 20 displays the estimated number of visits by share of medical services area.

Table 20. Primary Care Physician Office Visits Given Usage by Local Residents in the Watonga, Oklahoma Medical Service Area

		Usage by Residents of Primary Service Area						
Usage by Residents of Secondary Service Area		70%	75%	80%	85%	90%	95%	100%
	5%	8,547	9,036	9,525	10,014	10,502	10,991	11,480
	10%	10,249	10,738	11,227	11,716	12,205	12,693	13,182
	15%	11,951	12,440	12,929	13,418	13,907	14,396	14,885
	20%	13,653	14,142	14,631	15,120	15,609	16,098	16,587
	25%	15,355	15,844	16,333	16,822	17,311	17,800	18,289
	30%	17,058	17,546	18,035	18,524	19,013	19,502	19,991
	35%	18,760	19,249	19,738	20,226	20,715	21,204	21,693
	40%	20,462	20,951	21,440	21,929	22,417	22,906	23,395
	45%	22,164	22,653	23,142	23,631	24,120	24,609	25,097
	50%	23,866	24,355	24,844	25,333	25,822	26,311	26,800

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 12,205 to 13,907 total primary care physician office visits in the Watonga area for an estimated 2.9 to 3.3 Total Primary Care Physicians.

(Based on 83.7 average weekly primary care physician visits with a 50 week year)

At the conclusion of the meeting, community members were asked if they would like to add any concerns to the running list. Next, community members then identified their top concerns. The following priorities were identified:

- Childcare as a need for all of Blaine County
- Physical activity
- Mental health
- Healthy eating and childhood nutrition

Community Health Needs Implementation Strategy

The following lists the concerns along with steps the hospital and community plan to take to remedy the situation.

- Physical activity- The hospital is looking to partner with Opportunities Inc., the local Community Action Agency, who already has physical activity equipment in the park.
 - The block party will have a more intentional emphasis on physical activity. The block party already provides sports equipment to encourage play.
- Mental health- This is a priority for Mercy as a health system. Mercy is starting a program, Zero Suicide, which is a ministry-wide endeavor. This has started by including screening questions within the EMR. There are plans to have iPads in the emergency room to provide screenings and consults. There are also plans to have outpatient services through telemedicine.
 - There is still a concern for inpatient beds; however, this is not a service the hospital will be able to provide.
- Healthy eating and childhood nutrition- The hospital will partner with Opportunities Inc. because they own the local food bank.
 - The block party provides healthy snacks and nutrition education.
 - The hospital will also work with the school to provide nutrition education for the children through educational materials being sent home.
 - The Mercy dietician will present nutrition education to the local school.
- Childcare as a need for all of Blaine County
 - Since this was a joint assessment, this priority fell more as an activity the county-wide coalition to address. This is also beyond the scope of services the hospital provides. However, the hospital is willing to collaborate with childcare providers to provide education on nutrition and physical activity as previously mentioned.

Community Health Needs Assessment Marketing Plan

The hospital will make the Community Health Needs Assessment Summary and Implementation Strategy Plan available upon request at Mercy Hospital Watonga, and a copy will be available to be downloaded from the hospital's website

(<https://www.mercy.net/practice/mercy-hospital-watonga>). This document will also be available on the OSU Center for Rural Health blog site: (<http://osururalhealth.blogspot.com/p/chna.html>).

Appendix A- Hospital Services/Community Benefits



Organizational Structure

Hospital Divisions	Medical Staff	Other
Nursing Services Ancillary Services Administrative Support Services Business Services Mercy Shared Services	Medical Executive Committee (MEC) Clinical Safety and Quality Council Pharmacy and Therapeutics Infection Control	Foundation Auxiliary

Scope of Services

In accordance with Federal and State regulations, professional practice standards and codes, MHW provides the community with a range of health care services including but not limited to:

Clinical Care Services	Diagnostic / Treatment / Wellness Services
- Acute and Swing Bed Inpatient Services - Emergency Department	- Case Management and Discharge Planning - Clinical Laboratory and Pathology - Community Educational Programs - Diagnostic Radiology (including CAT Scan, MRI, Ultrasound) - Rehabilitation Services (Physical Therapy, Speech Therapy, and Occupational Therapy,) - Inpatient pharmacy services - Dietary Consult - Specialist Referral

Community Involvement

Charitable care for Uninsured
Watonga Chamber of Commerce
Lions Club
Kiwanis
Relay for Life
Oklahoma Blood Institute
Ministerial Alliance
Mercy Hospital Watonga Health Fair
Watonga Food Bank
Opportunities Inc .
The Spot
Watonga Cheese Festival
Main Street Flower Beds
Hospital Foundation Trail Ride

Appendix B Community Meeting Attendees

Watonga Community Health Needs Assessment

Meeting 1: Demographic Data and Economic Impact

May 3, 2017

Name	Title	Organization
Katie Lyle	Admin. Assistant Community Relations Manager	Mercy Hospital
Terri Ward		Mercy Hospital
Cindy Carmichael	Regional Administrator	Mercy Hospital
Gaylene Stiles	Director Community Health	Mercy Hospital
Andy Fosmire	VP Rural Health	Oklahoma Hospital Association
Carla Flynn	Executive Director	Opportunities Inc.
Jona Arthur	Sooner Success Coord.	Sooner Success
Kim Kroener	Wellness Coordinator	Blaine County Health Department
Seasha Schroeder	Asst. Wellness Coordinator FCS/County Extension	Blaine County Health Department
Joy Rhodes	Director Director Public Health	Blaine County Extension Clinton Service Unit, Indian Health Services
Bonnie Kraft	Nursing	
Susan Bedwell	Public Health Nurse	Watonga Indian Health

Watonga Community Health Needs Assessment

Meeting 2: Health Data

May 17, 2018

Name	Title	Organization
Katie Lyle	Admin. Assistant	Mercy Hospital
Carla Flynn	Executive Director	Opportunities Inc.
Jona Arthur	Sooner Success Coord.	Sooner Success
Kim Kroener	Wellness Coordinator	Blaine County Health Department
Seasha Schroeder	Asst. Wellness Coordinator	Blaine County Health Department
Susan Bedwell	Public Health Nurse	Watonga Indian Health
Meagan Carter	Mgr. Community Outreach Director of Nursing and Operations	Mercy Hospital
Kelli Spencer		Mercy Hospital Watonga
Linda Barrett	Resident	

Watonga Community Health Needs Assessment

Meeting 3: Survey Results and Primary Care Physician Demand Analysis

May 31, 2018

Name	Title	Organization
Katie Lyle	Admin. Assistant	Mercy Hospital
Carla Flynn	Executive Director	Opportunities Inc.
Jona Arthur	Sooner Success Coord.	Sooner Success
Kim Kroener	Wellness Coordinator	Blaine County Health Department
Seasha Schroeder	Asst. Wellness Coordinator	Blaine County Health Department
Meagan Carter	Mgr. Community Outreach Director of Nursing and	Mercy Hospital
Kelli Spencer	Operations	Mercy Hospital Watonga
Joy Rhodes	FCS/County Extension Director	Blaine County Extension Clinton Service Unit, Indian Health
Bonnie Kraft	Director Public Health Nursing	Services
Jennifer Jackson	Nursing Supervisor	Mercy

Appendix C- Meeting 1 Materials, May 3, 2018

The Economic and Demographic Analysis of the Mercy Hospital Watonga Medical Service Area *As part of the Community Health Needs Assessment*

Economic Data

2016 Per Capita Income ¹	\$41,818 (18th highest in state)
Employment (March 2018, preliminary) ²	4,807 (7.9% from 2017)
Unemployment (March 2018, preliminary) ²	103 (-22.0% from 2017)
Unemployment rate (March 2018, preliminary) ²	2.1% (1st lowest in state)
2016 Poverty rate ³	17.7% (24th lowest in state)
2016 Child poverty rate ³	26.6% (23rd lowest in state)
2016 Transfer Payments ¹	\$88,420,000 (21.9% of total personal income, 30th lowest in state)
2016 Medical Benefits as a share of Transfer Payments ¹	44.1% (60th lowest in state)

¹Bureau of Economic Analysis, Regional Data, 2018, ²Bureau of Labor Statistics 2016-2017, ³U.S. Census Bureau, Small Area Income and Poverty, 2018

Education Data

At Least High School Diploma ¹	85.0% (46th highest in state)
Some College ¹	47.0% (43rd highest in state)
At Least Bachelor's Degree ¹	17.0% (42nd highest in state)
2015-2016 Free and Reduced Lunch Eligible ²	70.5% (48th lowest in state)

¹U.S. Census Bureau, American Community Survey, 2012-2016, ²National Center for Education Statistics, 2015-2016.

Payer Source Data

2015 Uninsured Rate (under 65) ¹	16.9% (36th lowest in state)
2015 Uninsured Rate (under 19) ¹	9.5% (52nd lowest in state)
2016 Medicare share of total population ²	21.8% (51st lowest in state)
2017 Medicaid share of total population ³	32.0% (53rd lowest in state)

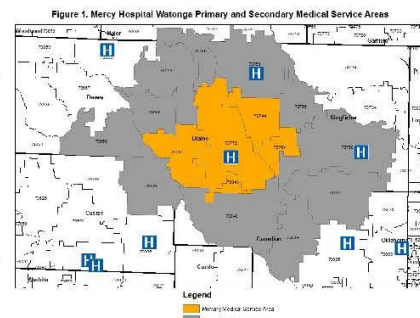
¹U.S. Census Bureau, Small Area Health Insurance Estimates, 2015, ²Centers for Medicare & Medicaid Services, Medicare Aged and Disabled by State and County, 2016

³Oklahoma Health Care Authority, Total Enrollment by County, 2017

Population (2012-2016)

Blaine County	9,777 (-18.1% from 2010)
Primary Medical Service Area	5,554 (4.5% from 2010)
Secondary Medical Service Area	18,705 (3.2% from 2010)
Oklahoma	3,8775,589 (3.3% from 2010)

U.S. Census Bureau, 2012-2016 American Community Survey 2010 Decennial Census



Percent of Total Population by Age Group for Mercy Hospital Watonga Medical Service Areas, Blaine County and Oklahoma

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Blaine County	Oklahoma
12-16 ACS				
0-14	16.1%	22.4%	19.6%	20.6%
15-19	4.0%	5.6%	4.4%	6.7%
20-24	3.9%	6.2%	4.7%	7.3%
25-44	31.3%	22.0%	25.4%	26.0%
45-64	29.3%	26.3%	27.8%	24.9%
65+	<u>15.4%</u>	<u>17.5%</u>	<u>18.1%</u>	<u>14.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	5,554	18,705	9,777	3,875,589

SOURCE: U.S. Census Bureau, 2012-2016 American Community Survey

Percent of Total Population by Race and Ethnicity for Mercy Hospital Watonga Medical Service Areas, Blaine County and Oklahoma

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Blaine County	Oklahoma
12-16 ACS				
White	72.6%	86.1%	77.9%	72.9%
Black	8.5%	0.7%	5.2%	7.3%
Native American ¹	4.2%	5.5%	5.4%	7.3%
Other ²	8.6%	2.9%	5.4%	8.7%
Two or more Races ³	6.2%	4.8%	6.1%	7.7%
Hispanic Origin ⁴	<u>13.0%</u>	<u>6.1%</u>	<u>9.6%</u>	<u>9.8%</u>
Total Population	5,554	18,705	9,777	3,875,589

SOURCE: U.S. Census Bureau, 2012-2016 American Community Survey

For additional information, please contact:

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Mercy Hospital Watonga Economic Impact



Healthcare, especially a hospital, plays a vital role in local economies.

Mercy Hospital Watonga and the clinic **directly** employs **65** people with an annual payroll of over **\$5.6 million** including benefits

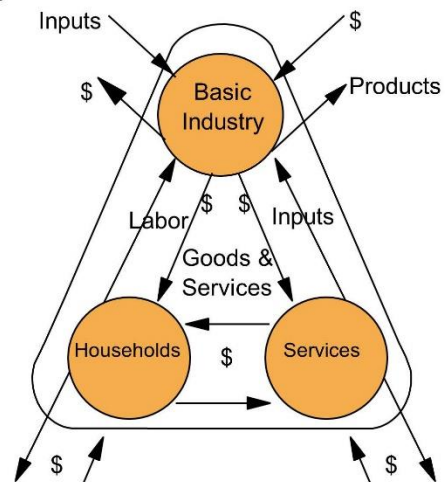
- These employees and income create an additional **23** jobs and over **\$1.1 million** in income as they interact with other sectors of the local economy
- **Total impacts= 88 jobs and over \$6.77 million**
- Other segments of the healthcare sector (Doctors, Nursing homes, Pharmacies, etc.) provide another **70 jobs** and an additional **\$4.49 million** in wages
- Their interactions and transactions within the local economy create:
- **Total health sector impacts= 170 jobs and over \$12 million (Including the hospital)**
- Over **\$3.5 million** in retail sales generated from the presence of the health sector

Healthcare and Your Local Economy:

- Attracts retirees and families
- Appeals to businesses looking to establish and/or relocate
- High-quality healthcare services and infrastructure foster community development
- Positive impact on retail sales of local economy

Consider what could be lost without the hospital:

- Pharmacies
- Physicians/Specialists
- Potential Retail Sales



Source: Doeksen, G.A., T. Johnson, and C. Willoughby. 1997. Measuring the Economic Importance of the Health Sector on a Local Economy: A Brief Literature Review and Procedures to Measure Local Impacts

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Health Indicators and Outcomes for Blaine County

As part of the Community Health Needs Assessment

Table 1. Health Factors (Overall Rank 31)

Category (Rank)	Blaine County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (42)				
Adult Smoking	17%	17-18%	14%	20%
Adult Obesity	37%	31-43%	26%	33%
Food Environment Index	6.5		8.6	5.9
Physical Inactivity	36%	30-42%	20%	30%
Access to Exercise Opportunities	60%		91%	74%
Excessive Drinking	13%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	18%	8-31%	13%	28%
Sexually Transmitted Infections	313		146	542
Teen Birth Rate	63	52-73	15	42
Clinical Care (33)				
Uninsured	17%	15-19%	6%	16%
Primary Care Physicians	3,280:1		1,030:1	1,590:1
Dentists	1,610:1		1,280:1	1,700:1
Mental Health Providers	280:1		330:1	260:1
Preventable Hospital Stays	63	42-71	35	60
Diabetic Monitoring	77%	65-88%	91%	78%
Mammography Screening	54%	41-67%	71%	56%
Social & Economic Factors (28)				
High School Graduation			95%	83%
Some College	47%	39-54%	72%	59%
Unemployment	3.8%		3.2%	4.9%
Children in Poverty	27%	19-34%	12%	23%
Income Inequality	4.7	3.9-5.6	3.7	4.6
Children in Single-Parent Household	31%	22-41%	20%	34%
Social Associations	28.5		22.1	11.5
Violent Crime Rate	211		62	439
Injury Deaths	106	79-140	55	92
Physical Environment (31)				
Air-Pollution- Particulate Matter	8.3		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	11%	7-15%	9%	15%
Driving Alone to Work	87%	86-88%	72%	83%
Long Commute- Driving Alone	18%	14-22%	15%	26%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

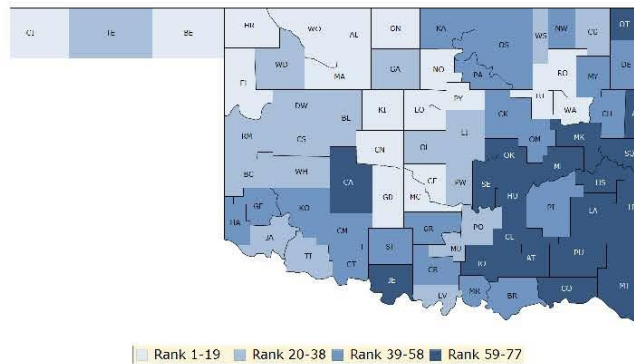
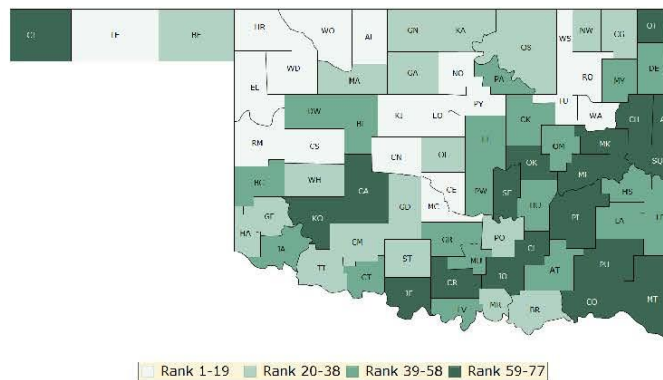


Table 2. Health Outcomes (Overall Rank 45)

Category (Rank)	Blaine County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (52)				
Premature Death	11,200	8,700-13,600	5,300	9,300
Quality of Life (39)				
Poor or Fair Health	19%	19-20%	12%	20%
Poor Physical Health Days	4.3	4.2-4.5	3.0	4.5
Poor Mental Health Days	4.5	4.3-4.7	3.1	4.5
Low Birth Weight	8%	7-10%	6%	8%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation



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Appendix E- Survey Form and Meeting 3 Materials, May 31, 2018

Blaine County 2018 Themes and Strengths

Please return completed survey by May 17, 2018 to the Blaine County Health Department, Okeene Municipal Hospital, or Mercy Hospital Watonga

This survey is a collaborative effort between Blaine County Health Department, Blaine County Community Health Action Team, Okeene Municipal Hospital, and Mercy Hospital Watonga. The goal of this survey is to identify community healthcare needs and strategize ways to improve the health and overall quality of life of Blaine County residents.

Completion of this survey is voluntary, and all responses will be anonymous.

1. How healthy would you rate your community?
☐ Healthy ☐ Neutral ☐ Unhealthy
2. How satisfied are you with the quality of life in Blaine County?
☐ Satisfied ☐ Neutral ☐ Dissatisfied
3. Are you able to get medical care and medication when needed?

	Yes	No
General Medical Care	☐	☐
Teeth	☐	☐
Eyes	☐	☐
Mental Health Services	☐	☐
Medication	☐	☐
4. How do you pay for your health care? Mark all that apply

☐ Cash (no insurance)	☐ Medicaid
☐ Indian Health Services	☐ TRICARE
☐ Medicare	☐ Private Health Insurance
☐ Insure Oklahoma	☐ Employer Provided Health Insurance
☐ Free Health Clinic	☐ Obama Care
☐ Veteran Administration	
5. Do you have a primary care physician (family doctor) for most of your routine health care?
☐ Yes (*Go to Q7*) ☐ No (*Skip to Q6*) ☐ Don't know (*Skip to Q7*)
6. Why do you not have a primary care (family) physician?

7. Has your household been to a primary care (family) doctor in the Okeene area?
☐ Yes (*Go to Q8*) ☐ No (*Skip to Q10*) ☐ Don't know (*Skip to Q10*)
8. How satisfied was your household with the quality of care received in the Okeene area?
☐ Satisfied ☐ Dissatisfied ☐ Don't know
9. Why were you satisfied/dissatisfied with care received in the Okeene area?

Continue on reverse side...

10. Has your household been to a primary care (family) doctor in the **Watonga** area?
☐ Yes (*Go to Q11*) ☐ No (*Skip to Q13*) ☐ Don't know (*Skip to Q13*)
11. How satisfied was your household with the quality of care received in the **Watonga** area?
☐ Satisfied ☐ Dissatisfied ☐ Don't know
12. Why were you satisfied/dissatisfied with care received in the **Watonga** area?
-

13. Has your household used the services of a hospital in the past 24 months?
☐ Yes (*Go to Q14*) ☐ No (*Skip to Q22*) ☐ Don't know (*Skip to Q22*)
14. At which hospital(s) were services received? (*please check/list all that apply*)
☐ Okeene Municipal Hospital (*Skip to Q16*) ☐ Other (*Please specify Hospital and City, then go to Q15*)
☐ Mercy Hospital Watonga (*Skip to Q19*)
-

- If you responded in **Q14** that your household received care at a hospital other than **Okeene Municipal Hospital**, or **Mercy Hospital Watonga**, why did you or your family member choose that hospital? (*Please answer then skip to Q22*)
- 15.
- | | |
|---|---|
| ☐ Physician referral | ☐ Quality of care/Lack of confidence |
| ☐ Closer, more convenient location | ☐ Availability of specialty care |
| ☐ Insurance reasons | ☐ Other (<i>Please list below</i>) |
-

- If you responded in **Q14** that your household received care at **Okeene Municipal Hospital**, what hospital service(s) were used?
- 16.
- | | |
|---|---|
| ☐ Diagnostic imaging (X-ray, CT, Ultrasound) | ☐ Emergency room (ER) |
| ☐ Laboratory | ☐ Endoscopy services |
| ☐ Outpatient services | ☐ Senior Life services |
| ☐ Physician services | ☐ Other (<i>Please list below</i>) |
| ☐ Hospital inpatient | |
| ☐ Skilled nursing (swing bed) | |
-

17. How satisfied was your household with the services you received at **Okeene Municipal Hospital**?
☐ Satisfied ☐ Dissatisfied ☐ Don't know
18. Why were you satisfied/dissatisfied with services received at **Okeene Municipal Hospital**?
-

Continue on reverse side...

If you responded in Q14 that your household received care at Mercy Hospital Watonga, what hospital service(s) were used?

19. ☐ Diagnostic imaging (X-ray, CT, Ultrasound) ☐ Skilled nursing (swing bed)
☐ Laboratory ☐ Emergency room (ER)
☐ Outpatient services ☐ Other (Please list below)
☐ Physician services
☐ Hospital inpatient

20. How satisfied was your household with the services you received at Mercy Hospital Watonga?
☐ Satisfied ☐ Dissatisfied ☐ Don't know

21. Why were you satisfied/dissatisfied with services received at Mercy Hospital Watonga?

22. Has your household been to a specialist in the past 24 months?
☐ Yes ☐ No (Skip to Q26) ☐ Don't know (Skip to Q26)

23. What type of specialist has your household been to in the past 24 months and in which city were they located?

Type of Specialist	City

24. Did the specialist request further testing, laboratory work and/or x-rays?
☐ Yes ☐ No ☐ Don't know

25. If yes, in which city were the tests or laboratory work performed?

26. Do you think there are enough primary care (family) doctors practicing in Blaine County?
☐ Yes ☐ No ☐ Don't know

27. Would you consider seeing a nurse practitioner or physician assistant for your routine healthcare needs?
☐ Yes ☐ No ☐ Don't know

28. Are you able to get an appointment with your primary care physician when you need one?
☐ Yes ☐ No ☐ Don't know

Continue on reverse side...

What additional health services would you like to see offered at Okeene Municipal Hospital or Mercy Hospital
 29. Watonga?

Okeene Municipal Hospital

Mercy Hospital Watonga

30. Are you aware of any community programs offered by the hospital? Please list any services that you are aware each
 Okeene Municipal Hospital

Mercy Hospital Watonga

31. Mark your level of agreement with the following statements as they apply in Blaine County.

	Agree	Disagree
There are jobs available in the community	☐	☐
There are opportunities for advancement	☐	☐
Jobs pay enough to live on	☐	☐
I have access to fresh fruit and vegetables	☐	☐

32. Mark your level of agreement with the following statements as they apply in Blaine County.

	Agree	Disagree
The community is a safe place to live	☐	☐
Neighbors know, trust, and look out for one another	☐	☐
There are support networks for individuals and families (For example, church or family readiness group.)	☐	☐

Continue on reverse side...

33. Mark your level of agreement with the following statements as they apply in Blaine County.

	Agree	Disagree
Community is a good place to raise children	☐	☐
There are opportunities for children to be active	☐	☐
There is access to safe and affordable child care	☐	☐
I am satisfied with the school system	☐	☐
There are networks to support parents	☐	☐
This is a community to grow old in	☐	☐
There are opportunities for older adults to be active	☐	☐
There are services for older adults	☐	☐
There are networks of support for the elderly living alone	☐	☐

34. Are you aware of the following laws?

- ☐ Oklahoma Child Passenger Safety Law (Car Seat Law)
- ☐ Social Host Law (Adults can be fined or cited for serving alcohol to minors)

35. What are the 3 things that cause you the most stress? Please mark only 3.

- | | |
|--|---|
| ☐ Money/Finances | ☐ School |
| ☐ Work/Job | ☐ Discrimination |
| ☐ Family Responsibilities | ☐ Poor or Unstable Housing |
| ☐ Mental or Physical Health Conditions | ☐ Substance Abuse |
| ☐ Parenting/Children | ☐ Lack of Transportation |
| ☐ Major Life Event | ☐ Abuse |
| ☐ Relationship Difficulties (Friends, Spouse, etc.) | ☐ Lack of Safety/Crime |
| ☐ Unemployment | ☐ Other <i>(Please list below)</i> |

Continue on reverse side...

35. What are the 3 most common ways you manage your stress? Please mark only 3.

- | | |
|---|---|
| ☐ Exercise, walk or go for a bike ride | ☐ Drink alcohol |
| ☐ Spend time with family or friends | ☐ Go for a drive |
| ☐ Read | ☐ Play a video game or surf the internet |
| ☐ Watch television or movies | ☐ Get a massage or spa treatment |
| ☐ Listen to music | ☐ Nothing |
| ☐ Clean or do chores | ☐ Shop |
| ☐ Spend time doing a hobby | ☐ Play sports |
| ☐ Pray or go to church | ☐ Smoke/Vape/Dip/Chew |
| ☐ Eat | ☐ See a mental health professional |
| ☐ Nap | ☐ Gamble |
| ☐ Meditation | ☐ Other <i>(Please list below)</i> |
-

36. What do you think are the 3 biggest health problems in Blaine County? Please mark only 3.

- | | |
|---|---|
| ☐ Poverty | ☐ Sexually transmitted diseases/infections (STI/STD) |
| ☐ Aging problems (arthritis, hearing loss, etc.) | ☐ Motor vehicle crash injuries |
| ☐ Mental health problems | ☐ Respiration/Lung disease |
| ☐ Housing that is adequate, safe and affordable | ☐ Rape/Sexual assault |
| ☐ Heart disease and stroke | ☐ Infectious diseases (hepatitis, TB) |
| ☐ Cancers | ☐ Suicide |
| ☐ Domestic violence | ☐ Homicide |
| ☐ Child abuse/Neglect | ☐ Firearm-Related injuries |
| ☐ Diabetes | ☐ Infant death |
| ☐ High blood pressure | ☐ HIV/AIDS |
| ☐ Dental problems | ☐ Obesity |
| ☐ Teenage pregnancy | ☐ Other <i>(Please list below)</i> |
-

What do you think are the 3 most important factors for a quality of life in a "Healthy Community"? Please mark only

37. 3.

- | | |
|---|--|
| ☐ Good jobs and healthy economy | ☐ Religious or spiritual values |
| ☐ Access to healthcare (ex. Family doctor) | ☐ Parks and recreation |
| ☐ Healthy behaviors and lifestyles | ☐ Arts and cultural events |
| ☐ Affordable housing | ☐ Low adult death and disease rates |
| ☐ Strong family life | ☐ Excellent race relations |
| ☐ Low crime/safe neighborhoods | ☐ Low levels of child abuse |
| ☐ Good schools | ☐ Low infant deaths |
| ☐ Good place to raise children | ☐ Other <i>(Please list below)</i> |
| ☐ Clean environment | |
-

Continue on reverse side...

38. What is your zip code? _____

39. What is your gender? _____

40. What ethnic group do you most identify with?

☐ African American/Black

☐ White/Caucasian

☐ Asian/Pacific Islander

☐ Hispanic/Latino

☐ American Indian/Alaskan Native

☐ Other *(Please list below)*

41. What is the highest level of school that you have completed?

☐ Primary school

☐ Some high school, but no diploma

☐ High school diploma (or GED)

☐ Some college, but no degree

☐ 2-year college degree

☐ 4-year college degree

☐ Graduate-level degree

☐ None of the above

42. How would you prefer to be notified of community events?

(Please rank your choices with 1=most preferred and 5=least preferred)

____ Newspaper

____ Email

____ Social Media

____ Radio

____ Website

Primary Care Physician Demand Analysis for the Watonga Medical Service Area

As part of the Community Health Needs Assessment

Figure 1. Mercy Hospital Watonga Primary and Secondary Medical Service Areas

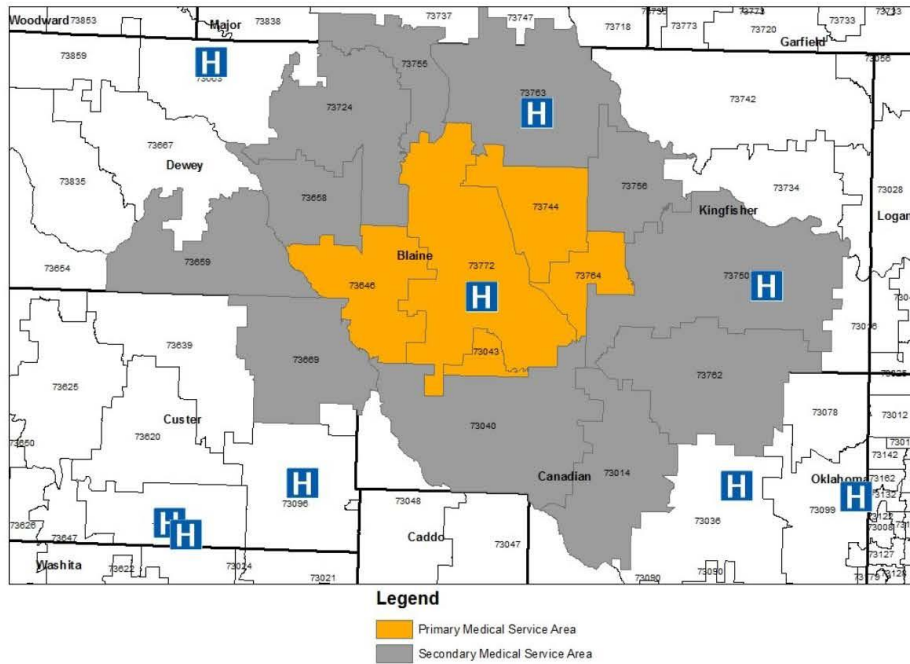


Table 2a. Annual Primary Care Physician Office Visits Generated in the Watonga, Oklahoma, Medical Service Areas

PRIMARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	12-16 Population	Visit Rate ^[3]	Visits	12-16 Population	Visit Rate ^[3]	Visits	
Under 15	486	2.0	972	407	2.1	855	1,827
15-24	293	2.4	703	145	1.2	174	877
25-44	1,245	3.0	3,735	493	1.3	641	4,376
45-64	1,004	4.2	4,217	625	3.1	1,938	6,154
65-74	243	6.1	1,482	196	5.6	1,098	2,580
75+	149	7.4	1,103	268	8.0	2,144	3,247
Total	3,420		12,212	2,134		6,849	19,061

Primary Medical Service Area - Local Primary Care Physician office visits per year: 9,778

Table 2b. Annual Primary Care Physician Office Visits Generated in the Watonga, Oklahoma, Medical Service Areas

SECONDARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	12-16 Population	Visit Rate ^[3]	Visits	12-16 Population	Visit Rate ^[3]	Visits	
Under 15	2,179	2.0	4,358	2,012	2.1	4,225	8,583
15-24	1,145	2.4	2,748	1,054	1.9	2,003	4,751
25-44	2,017	3.0	6,051	2,105	2.9	6,105	12,156
45-64	2,348	4.2	9,862	2,575	3.8	9,785	19,647
65-74	787	6.1	4,801	935	6.0	5,610	10,411
75+	632	7.4	4,677	916	6.7	6,137	10,814
Total	9,108		32,496	9,597		33,865	66,361
<i>Secondary Medical Service Area - Local Primary Care Physician office visits per year: 34,043</i>							

Source: U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center of Health Statistics, "National Ambulatory Medical Care Survey: 2015 Summary.

Table 3. Primary Care Physician Office Visits Given Usage by Local Residents in the Watonga, Oklahoma Medical Service Area

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	8,547	9,036	9,525	10,014	10,502	10,991	11,480
	10%	10,249	10,738	11,227	11,716	12,205	12,693	13,182
	15%	11,951	12,440	12,929	13,418	13,907	14,396	14,885
	20%	13,653	14,142	14,631	15,120	15,609	16,098	16,587
	25%	15,355	15,844	16,333	16,822	17,311	17,800	18,289
	30%	17,058	17,546	18,035	18,524	19,013	19,502	19,991
	35%	18,760	19,249	19,738	20,226	20,715	21,204	21,693
	40%	20,462	20,951	21,440	21,929	22,417	22,906	23,395
	45%	22,164	22,653	23,142	23,631	24,120	24,609	25,097
	50%	23,866	24,355	24,844	25,333	25,822	26,311	26,800

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 12,205 to 13,907 total primary care physician office visits in the Watonga area for an estimated 2.9 to 3.3 Total Primary Care Physicians.

(Based on 83.7 average weekly primary care physician visits with a 50 week year)

For additional information, please contact
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NOTES:

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NOTES:

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Mercy

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Your life is our life's work.