



2020-2021 Community Health Needs Assessment Oklahoma County



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Executive Summary

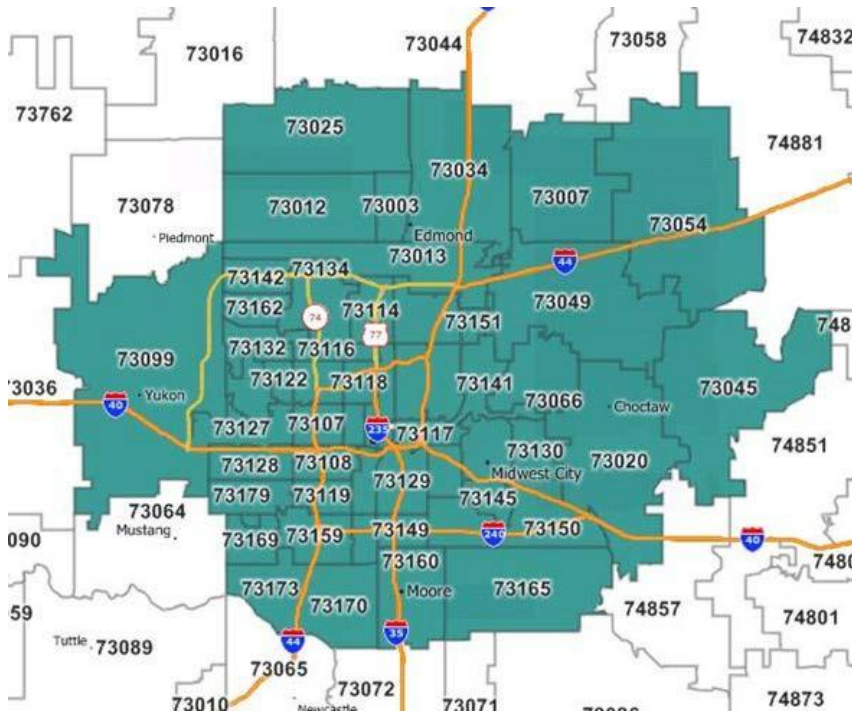
INTEGRIS Health is pleased to present the 2020-2021 Community Health Needs Assessment (CHNA). The purpose of the CHNA report is to provide an overview of the health needs and priorities associated within Oklahoma County. The goal of this report is to provide residents with a deeper understanding of the health needs in their community and to help guide the hospitals in their community benefit planning efforts and the development of an implementation strategy to address identified needs. The CHNA involved a review of both quantitative and qualitative data to attain the full scope of the community needs as they pertain to health, with an emphasis on the economically poor and underserved populations.

This summary is documentation that INTEGRIS Health, Health Partner Investments, Oklahoma Center for Orthopaedic & Multi-Specialty Surgery and INTEGRIS Community Hospitals are within compliance with IRS requirements for conducting a community health needs assessment (CHNA). INTEGRIS Health last conducted a CHNA in 2018.

The Affordable Care Act (ACA) requires 501(c)(3), tax-exempt hospitals to conduct a CHNA every three tax years and to adopt a strategic implementation plan for addressing identified needs.

Identified priorities for the next year include: access to care, food access/insecurity, mental/behavioral health, obesity, and tobacco. Many of the initiatives identified and implemented in the previous CHNA will be continued along with new programs.

Community Served by the Hospitals



Oklahoma County is in the central part of Oklahoma. Oklahoma City is the county seat and is the largest city in the state. There are 20 cities and small towns located in the county. (1)

Oklahoma County employs 379,291 people. The economy specializes in mining, oil, gas, quarrying, extraction, management of companies and enterprises, and public administration. According to the 2019 population estimates, the population of Oklahoma County was 797,434. (1)

The county occupies 708 square miles. As of 2010 census, there were 1,013 persons per square mile. (1)

Oklahoma County has 14 hospitals, two federally qualified health centers with 14 satellite clinics, approximately 17 free community clinics, one tribal clinic, a city-county health department with multiple locations throughout the county, and a state health department. Public transportation, taxi services, two public and several private airports, and paramedic-level ambulance service are also located within the county.

Source: (1) U.S. Census Bureau

Oklahoma County Demographics

Median Age

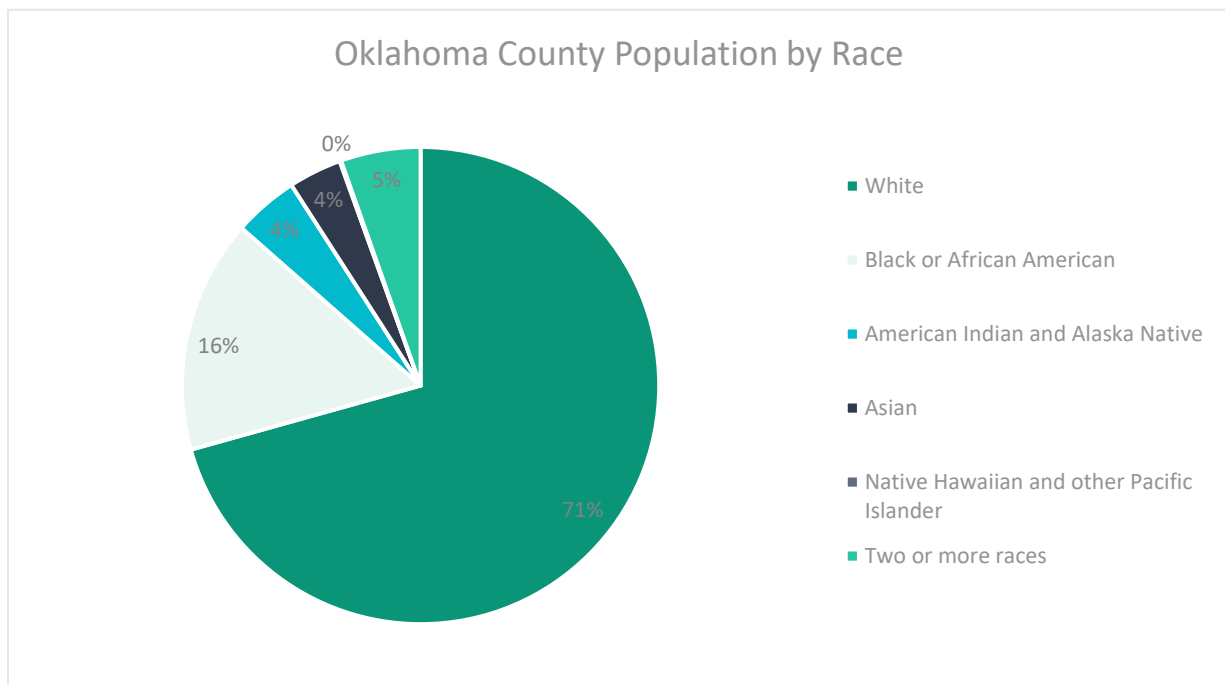
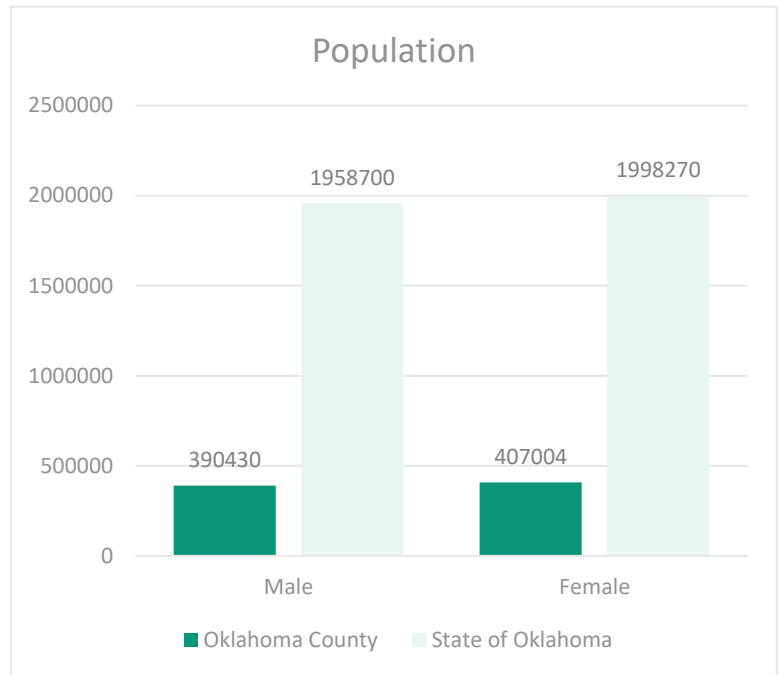
- Oklahoma County: 34.6 years
- Oklahoma: 34.1 years

Persons in Poverty

- Oklahoma County: 14.9%
- Oklahoma: 15.2%

Median Household Income

- Oklahoma County: \$54,520
- Oklahoma: \$52,919



Source: (1) U.S. Census Bureau

	Oklahoma County	Oklahoma
Education		
High school graduate or higher, percent of persons age 25 years+, 2015-2019 (1)	87.4%	88%
Bachelor's degree or higher, percent of persons age 25 years+, 2015-2019 (1)	32.0%	25.5%
Health		
With a disability, under age 65 years, percent, 2015-2019 (1)	10.0%	11.5%
Persons without health insurance, under age 65 years, percent (1)	16.8%	16.8%
Persons enrolled in Medicaid (2)	200,287	946,412
Persons enrolled in Medicare (3)	92,632	572,942
Families & Living Arrangements		
Households, 2015-2019 (1)	301,570	1,480,061
Persons per household, 2015-2019 (1)	2.56	2.58
Living in same house 1 year ago, percent of persons age 1 years+, 2015-2019 (1)	81.0%	83.2%
Language other than English spoken at home, percent of persons age 5 years+, 2015-2019 (1)	17.4%	10.5%
Transportation (minutes)		
Mean travel time to work (minutes), workers age 16 years+, 2015-2019 (1)	21.5	21.9
Access to Care (people per one provider)		
Primary Care Physicians (4)	1,170	1,620
Dentists (4)	980	1,640
Mental Health Professionals (4)	150	250

Source: (1) U.S. Census Bureau

Source: (2) Oklahoma Health Care Authority. Fast Facts. January 2021

Source: (3) Centers for Medicare and Medicaid Services. Medicare Enrollment Dashboard. February 2021

Source: (4) 2020 County Health Rankings. Oklahoma County. 2020

Hospital Information

Health Partners Investments

Opening, ownership and formation of JV with INTEGRIS Health:

Founded in 2004 in Oklahoma City, Healthcare Partners Investments, LLC (“HPI”) is an integrated, orthopedic-focused specialty hospital operator and managed physician practice network. HPI offers a unique, physician-driven integrated network providing several options that enable physicians to retain independence while benefiting from management services, access to premier facilities, and, if desired, the scale of a group practice. In 2018, HPI with INTEGRIS Health, Oklahoma’s most advanced health care system, and United Surgical Partners International (USPI), a leading provider of ambulatory services in the United States, entered into an agreement to form a joint venture designed to offer patients and families more choice and flexibility of care settings. The joint venture combined HPI’s comprehensive services offerings and convenience of care, the INTEGRIS Health system’s unmatched continuum in Oklahoma and the management infrastructure and capabilities of USPI.

Facilities:

Three hospital locations, three outpatient therapy clinic locations, three imaging & diagnostic services locations, 54 licensed beds, 19 operating rooms, four procedure rooms

Services provided/major specialties:

HPI offers a full spectrum of surgical offerings leading with orthopedics, spine and pain management; followed by, gynecology, ophthalmology, general surgery, gastroenterology, urology and ENT. In addition to the full spectrum of specialty surgical services, HPI offers primary care, emergency medicine, physical & occupational therapy, lab services, imaging, and other ancillary medical services. HPI’s management services organization provides management services on a contractual basis allowing physicians to focus on clinical excellence, while HPI provides turnkey back office support to local practices in the market.

Number of employees/Number of providers:

HPI has 813 full time employees which includes nine employed physicians. Further, HPI has nearly 300 physicians on the medical staff of its hospitals, 52 of which also hold an ownership interest in HPI. Additionally, HPI provides management services to 57 physician practices which employ 330 employees at more than 30 physician clinic locations.

Highlights:

HPI’s Community Hospital (both North and South) have received designations from BCBS of Oklahoma as a Blue Distinction Center for total joint and spine surgery and from Aetna as an Institute of Quality for total knee, hip and spine surgery. Community Hospital is one of only 89 hospitals in the country to be awarded a 5-star rating by the Centers for Medicare & Medicaid Services (CMS) for patient satisfaction and quality care. Community Hospital also participates in quality national care consortiums to improve care delivery, including Hospital Improvement and Innovation Network (HIN), American Joint Replacement Registry (AJRR), and GI Quality Improvement (GIQuIC)

INTEGRIS Community Hospitals

Opening, ownership and formation of JV with INTEGRIS Health:

INTEGRIS Community Hospitals were established in 2016 as a joint venture partnership between INTEGRIS Health, Oklahoma's largest non-profit hospital system and Emerus, the nation's first and largest operators of community hospitals.

Facilities:

Four state of the art campuses were designed and built 2018-2019, to provide fully licensed, accredited and comprehensive care to all patients regardless of insurance or ability to pay.

Services provided/major specialties:

Each of the four DNV accredited campuses provide emergency and inpatient medical care. The patients are attended by ER trained physicians, board certified hospitalists, and highly trained nurses and other clinical specialists twenty-four hours a day, seven days a week. All facilities have on site diagnostics, with a stand-alone laboratory and radiology services including x-ray, CT scan, ultrasound and echocardiography capabilities.

Number of employees/Number of providers:

INTEGRIS Community Hospitals is proud to employ over 180 local team members and 172 physicians/allied health staff in order to provide the most compassionate, patient focused care to our communities.

Highlights:

To date, INTEGRIS Community Hospitals have had over 75,000 patient encounters over the past two years.

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery

Opening, ownership and formation of JV with INTEGRIS Health:

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery (OCOM) started in 2002. OCOM is owned by INTEGRIS Health, United Surgical Partners International and Private Physicians.

Facilities:

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery (OCOM) is a TJC accredited facility, comprised of two surgical hospital locations, one outpatient physical therapy location and three off-site imaging centers. Hospital locations include nine inpatient Rooms, nine total operating rooms, one nndo/pain room and one procedure room.

Services provided/major specialties:

General Surgery, Gastroenterology (GI), Gynecology, Imaging, Ophthalmology, Orthopaedics, Pain Management, Physical Therapy, Plastic Surgery, Urology, Podiatry, and Dentistry

of employees/# of providers:

OCOM has 224 employees (includes FT/PT/PRN) and approximately 60 providers.

Highlights:

MAKO Robotic surgery capabilities. TJC Certificate of Distinction for Total Hip & Total Knee Programs. Guardian of Excellence Press Ganey award winner for Inpatient satisfaction

Community Health Needs Assessment Process

INTEGRIS Health collaborated with local community partners to conduct the community health needs assessment process.

Methods of collecting and analyzing data and information included online surveys, focus groups, published data, and hospital specific data.

Focus groups were conducted to dialogue directly with local community members. There was a targeted effort to conduct focus groups with at-risk populations in low socioeconomic zip codes. Community partners that assisted in data collection for community chats included Stanley Hupfeld Academy, Crossings Community Center, Crossings Community Clinic and the Moore Food Resource Center.

Community surveys were available online. Each partner utilized social media to publicize the survey to residents in their service area. Partners assisting in the dissemination of the online survey included Crossings Community Clinic, HPI Community Hospital and Northwest Surgical Hospital, INTEGRIS Community Hospitals and Oklahoma Center for Orthopaedic & Multi-Specialty Surgery.

Primary Data

INTEGRIS Health gathered community input from Oklahoma County residents of all backgrounds, socioeconomic status, and demographics. Additionally, the hospitals provided internal data for analysis and consideration in the CHNA process.

Published Secondary Data

In addition to the input from community chats, online surveys and dot voting, the compilation of public health data, state and national data, gave a broader view of the overall health status of the county. By looking at past and present data and identifying trends, strategic development for the Community Health Improvement Plan (CHIP) will be more efficient and ultimately more effective.

Community Input

Methodology

In total, the online survey was administered to 402 individuals and focus group surveys were conducted among 90 participants to gather qualitative data. The focus groups were adapted due to COVID-19 restrictions. INTEGRIS Health representatives provided open-ended surveys to participants via an online platform, asking participants to answer the open-ended questions while discussing topics as a group. After INTEGRIS Health collected these qualitative and quantitative data, they returned it to the University of Central Oklahoma's Community Intervention class for analysis.

Data Collection

INTEGRIS Health representatives provided opportunities for individuals to participate in both quantitative and qualitative surveys at facilities newly added to the INTEGRIS Health umbrella. The final breakdown of data collection at the facilities included:

Online Quantitative Surveys:

HPI Community Hospitals and Surgical Hospital- 213 responses
INTEGRIS Community Hospital (Cleveland County)- 74 responses
INTEGRIS Community Hospitals (Oklahoma County)- 32 responses
OCOM- 41 responses
Crossings Community Center- 42 responses
TOTAL: 402

Focus Group Surveys:

Moore Food & Resource Center- 56
Crossings Community Center- 7
Stanley Hupfeld Academy- 27
TOTAL: 90

Primary Data

Findings and Recommendations: Online Quantitative Surveys

When reviewing the quantitative surveys among the 402 participants at five sites (i.e. HPI Community Hospital, INTEGRIS Community Hospital (Cleveland County), INTEGRIS Community Hospitals (Oklahoma County), Oklahoma Center for Orthopaedic & Multi-Specialty Surgery Oklahoma County, and Crossings Community Center), all locations were analyzed to find commonalities and important findings.

Overwhelmingly noted across survey locations, participants predominately selected white or black for their race and noted known family histories that included high blood pressure, heart disease, diabetes, high cholesterol, and cancer. Most individual respondents did not have a chronic disease themselves.

At four of the five sites where community members were surveyed, participants had private insurance. In contrast to this, respondents at Crossings Community Clinic were much more likely to report that they did not have access to medical coverage. For participants' perspectives on pride and overall health in their county, the majority reported feelings and perspectives that were mid-range, with some distinct differences based on location (including one-quarter of participants from INTEGRIS Community Hospital Oklahoma County who reported county health as "poor"). Generally speaking, participants across sites reported their county as moderately safe or better. Across all locations, survey respondents overwhelmingly reported that they felt a sense of responsibility to improving the health of their county either "sometimes," "often," or "always" with very few participants reporting that they "rarely" or "never" feel this way.

Across all five sites, participants reported concern for employment, poverty, education, housing, and access to fruits and vegetables, but less concern regarding parks, walkability in the community, healthier places to eat, or social support. In reviewing ratings of personal mental health, this appears to be an area that would be a beneficial focus for these communities. While many reported their mental health in "healthy" categories, far too many survey participants reported "slightly healthy" and "unhealthy levels" in regard to their personal mental health. Anxiety and depression are two areas of mental health that were commonly reported as personal factors in participants' lives. In addition to better access to mental health providers, looking into improved community efforts to create or improve parks and walkability (despite lower responses about these issues by survey participants) could be a social determinant factor in improving mental health among community members.

Overwhelmingly, survey participants reported that they were concerned with accessing affordable, prescription medications. Of the access issues they reported on, this was the top issue regardless of survey location. While the surveys showed that most participants "always" felt they received fair healthcare despite socially determined characteristics (i.e. gender, race, age, religion, and sexual orientation), there is room for improvement to move all respondents to "always" in regard to this measurement. While many survey respondents report seeing a physician when they are ill, this is also an area where the majority do not always do so (except for those who participated in Cleveland County). This is an area where encouraging visits and addressing barriers of insurance and access may be especially helpful for promoting quality care.

Unsurprisingly, when asked about having enough money for necessities, survey participants' answers differed by location. However, when taking into consideration those areas where a large majority had enough money for all of their necessities, food and medicine were still the two items most likely to be at the bottom of the list of affordability. These are two areas where healthcare and community resources would likely make a significant impact in the lives of individuals and families served.

It should also be noted that in regard to social support, some participants noted the facilities in which they were completing their survey as a place of support. This likely highlights a sense of trust that respondents feel in receiving care from their INTEGRIS Health location. This is an especially important notation for community members who may be navigating poverty, poor access, and discrimination overall in the healthcare system. It provides INTEGRIS Health with a wonderful opportunity to continue to build upon.

Overall, feedback from community members in the quantitative surveys note a need for healthcare access especially as it relates to mental health and sick visits; health education and promotion (particularly related to physical health issues that can be addressed through education as well as determinants of health in the community); and affordable medications and food. INTEGRIS Health is well positioned to continue to build upon its reputation as a trusted partner in a number of communities across the metro.

Findings and Recommendations: Quantitative Focus Group Surveys

When analyzing qualitative feedback from 90 participants completing their focus group surveys (from Moore Food & Resource Center, Stanley Hupfeld Academy, and Crossings Community Center), several themes arose across the three sites and six-open-ended questions. These included: a need and desire for greater access to healthcare services (including both preventive care on a myriad of issues as well as physician appointments); mental health services (including counseling as well as rehabilitation programs); educational services (including nutrition education; health education for a variety of health issues as well as disease prevention and treatment; and access to credible COVID-19 information); environmental determinants of health (including but not limited to food security issues, transportation and housing needs, education, affordable care, and access to employment opportunities); and finally, ensuring that older adults in communities are included in the planning and implementation of programs and services provided.

Secondary Data

Health Outcomes

**Oklahoma State of the State's Health Report
Oklahoma County Snapshot**

	2005	2010	2015	2016	2017
Asthma Prevalence			9.6	9.7	9.7
Colon Cancer Incidence (excluding rectum)	40.0	32.2	29.4		
Depression (Ever)			21.5	20.5	22.4
Diabetes Prevalence			10.7	10.8	11.8
High Blood Pressure (Ever)			32.3		34.1
High Cholesterol Diagnosis (Ever)			36.1		35.8
Invasive Breast Cancer Incidence (female only)	148.9	128.9	130.2		
Lung Cancer Incidence	79.0	71.8	69.7		
Prostate Cancer Incidence	162.8	156.6	124.6		

County
Oklahoma

Estimate, Bar chart or ..
Estimate

Indicator Subject Area

- Causes of Death
- Disease Rates
- Mortality
- Risk Factors & Beha..
- Socioeconomic Fact..

Grade

- A
- B
- C
- D
- F
- NA

Oklahoma State of the State's Health Report Summary

	2000	2010	2015	2016	2017
Asthma Prevalence	6.3	9.5	9.5	10.0	9.6
Colon Cancer Incidence (excluding rectum)	40.4	30.2	29.1		
Depression (Ever)			22.7	22.0	23.7
Diabetes Prevalence	5.5	10.4	11.7	12.0	12.7
High Blood Pressure (Ever)			36.2		37.7
High Cholesterol Diagnosis (Ever)			38.0		37.0
Invasive Breast Cancer Incidence (female only)	130.7	119.0	121.5		
Lung Cancer Incidence	82.7	70.1	66.9		
Prostate Cancer Incidence	152.6	137.9	93.4		

Grade or Estimate
Estimate

Indicator Subject Area

- Causes of Death
- Disease Rates
- Mortality
- Risk Factors & Beha..
- Socioeconomic Fact..

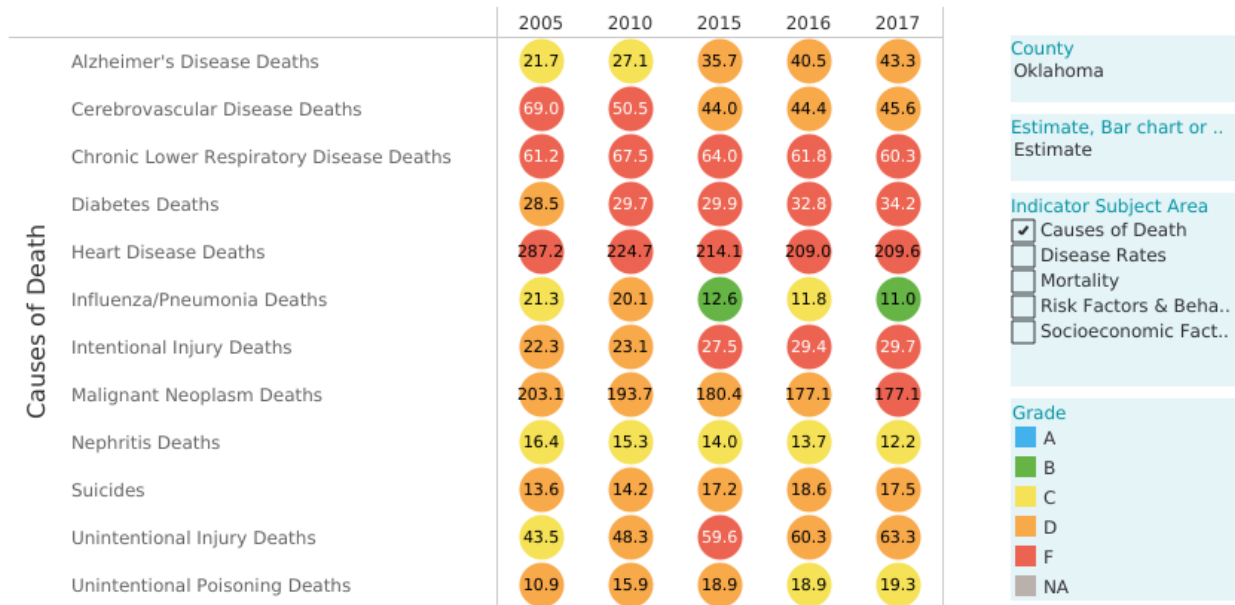
Grade

- A
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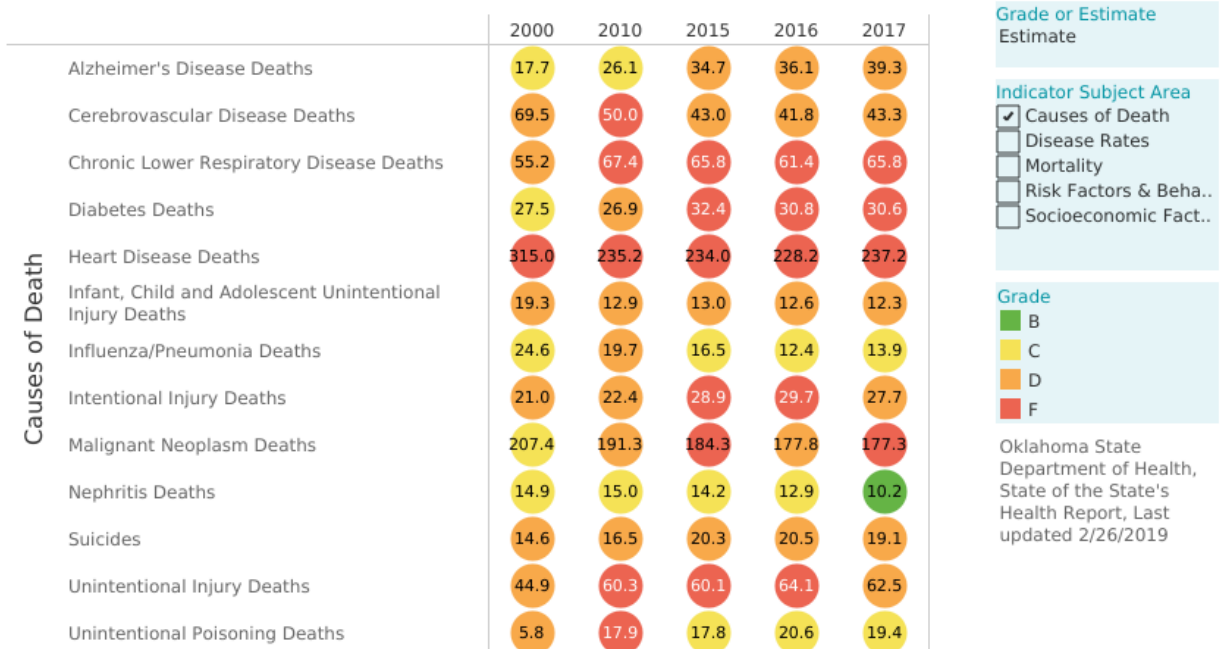
Oklahoma State
Department of Health,
State of the State's
Health Report, Last
updated 2/26/2019

Source: (5) Oklahoma State of the State's Health Report. Oklahoma County. 2019

Oklahoma State of the State's Health Report Oklahoma County Snapshot



Oklahoma State of the State's Health Report Summary



Source: (5) Oklahoma State of the State's Health Report. Oklahoma County. 2019

Oklahoma State of the State's Health Report Oklahoma County Snapshot

	2005	2010	2015	2016	2017	
Mortality	Infant Mortality	9.0	8.0	7.3	7.3	7.2
	Life Expectancy at Birth	75.3	76.0	76.2	76.1	
	Total Mortality	965.1	904.1	904.5	891.2	893.2

County
Oklahoma

Estimate, Bar chart or ..
Estimate

- Indicator Subject Area
- Causes of Death
 - Disease Rates
 - Mortality
 - Risk Factors & Beha..
 - Socioeconomic Fact..

Grade

- A
- B
- C
- D
- F
- NA

Oklahoma State of the State's Health Report Summary

	2000	2010	2015	2016	2017	
Mortality	Infant Mortality	8.5	7.6	7.3	7.4	7.7
	Life Expectancy at Birth	75.4	76.0	75.8	75.9	
	Total Mortality	983.0	915.5	904.3	888.4	902.4

Grade or Estimate
Estimate

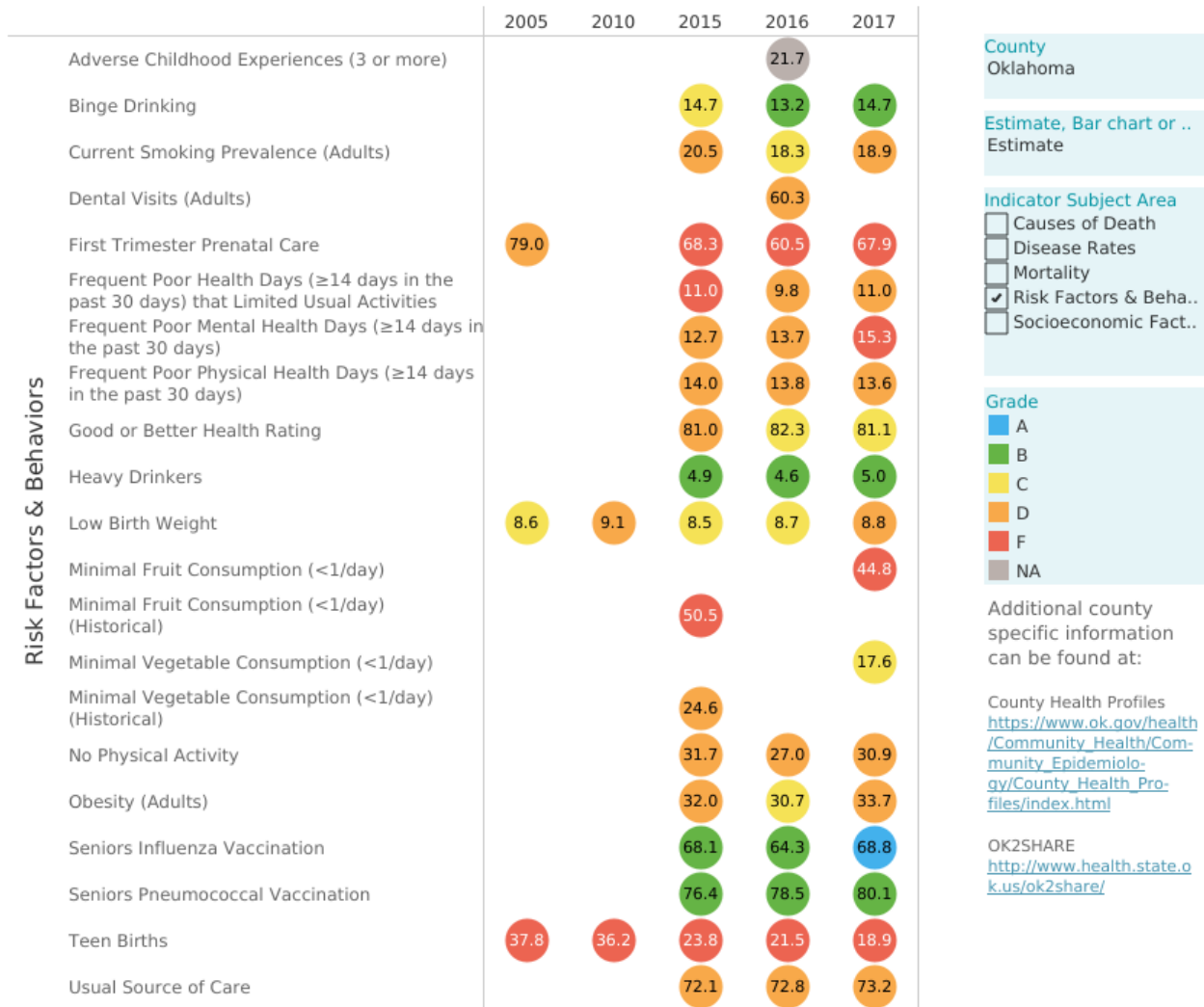
- Indicator Subject Area
- Causes of Death
 - Disease Rates
 - Mortality
 - Risk Factors & Beha..
 - Socioeconomic Fact..

Grade

- C
- F
- NA

Source: (5) Oklahoma State of the State's Health Report. Oklahoma County. 2019

Oklahoma State of the State's Health Report Oklahoma County Snapshot



Source: (5) Oklahoma State of the State's Health Report. Oklahoma County. 2019

Oklahoma State of the State's Health Report Summary

	2000	2010	2015	2016	2017	Grade or Estimate Estimate
Binge Drinking		13.0	13.1	11.9	13.4	
Current Smoking Among High Schoolers (YRBSS)			13.1		8.7	
Current Smoking Prevalence (Adults)	23.3	23.7	22.2	19.6	20.1	
Dental Visits (Adults)		57.2		58.2		
First Trimester Prenatal Care	79.1	65.5	74.6	72.8	72.5	
Frequent Poor Health Days (≥14 days in the past 30 days) that Limited Usual Activities		9.3	11.0	10.0	11.0	
Frequent Poor Mental Health Days (≥14 days in the past 30 days)		13.4	13.1	14.3	15.6	
Frequent Poor Physical Health Days (≥14 days in the past 30 days)		13.8	14.8	14.8	14.7	
Good or Better Health Rating	84.7	79.5	78.2	79.8	78.4	
Heavy Drinkers		3.8	4.2	3.7	4.2	
HPV Vaccination Series Completed, Boys 13-17 years			35.7	35.0	37.5	
HPV Vaccination Series Completed, Girls 13-17 years		31.1	32.2	43.6	45.6	
Immunization <3 Years (4:3:1:3:3:1:4 Series)			75.4	67.0	67.3	
Low Birth Weight	7.5	8.4	7.9	7.8	7.9	
Meningococcal Vaccination Coverage (13-17 yrs)		42.6	68.1	73.6	71.1	
Minimal Fruit Consumption (<1/day)					45.8	
Minimal Fruit Consumption (<1/day) (Historical)			51.1			
Minimal Vegetable Consumption (<1/day)					17.1	
Minimal Vegetable Consumption (<1/day) (Historical)			24.5			
No Physical Activity	34.4	29.9	33.2	28.5	32.4	
Obesity (Adults)	19.7	31.3	33.9	32.8	36.5	
Obesity Among High Schoolers (YRBSS)			17.3			
Seniors Influenza Vaccination		70.9	68.9	64.3	68.5	
Seniors Pneumococcal Vaccination		72.6	76.6	77.5	80.3	
Teen Births	32.9	25.9	15.9	14.3	12.5	
Usual Source of Care			74.8	75.3	75.2	

- Indicator Subject Area**
- Causes of Death
 - Disease Rates
 - Mortality
 - Risk Factors & Beha..
 - Socioeconomic Fact..

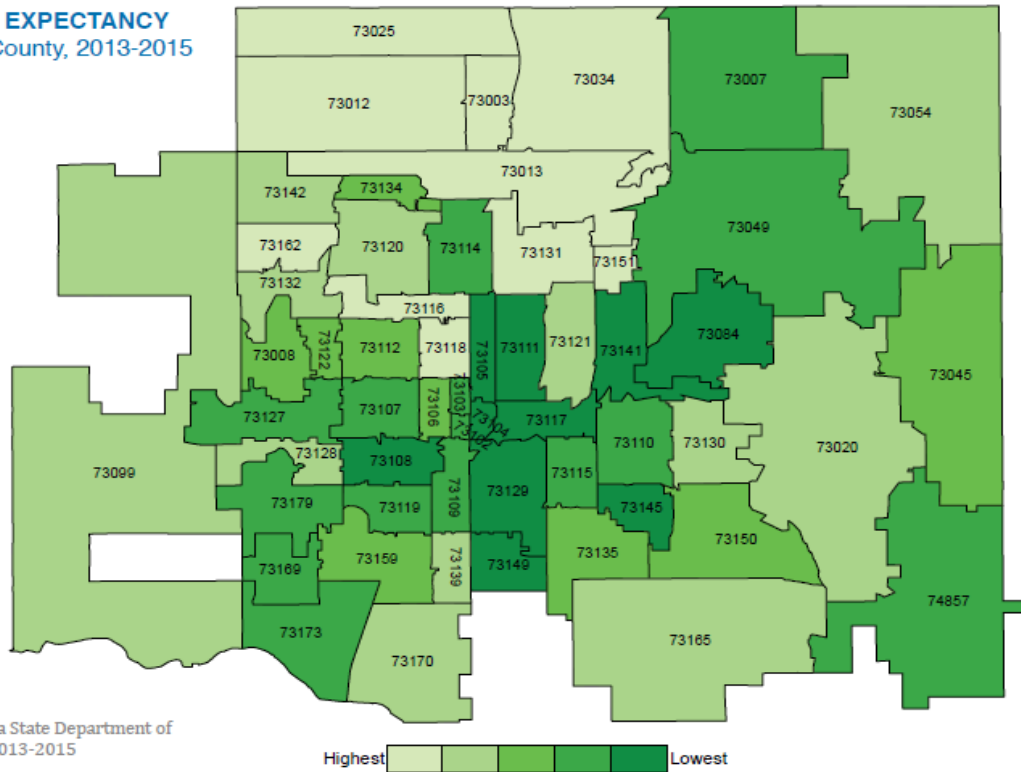
- Grade**
- A
 - B
 - C
 - D
 - F
 - NA

Oklahoma State Department of Health, State of the State's Health Report, Last updated 2/26/2019

Source: (5) Oklahoma State of the State's Health Report. Oklahoma County. 2019

Oklahoma County Life Expectancy

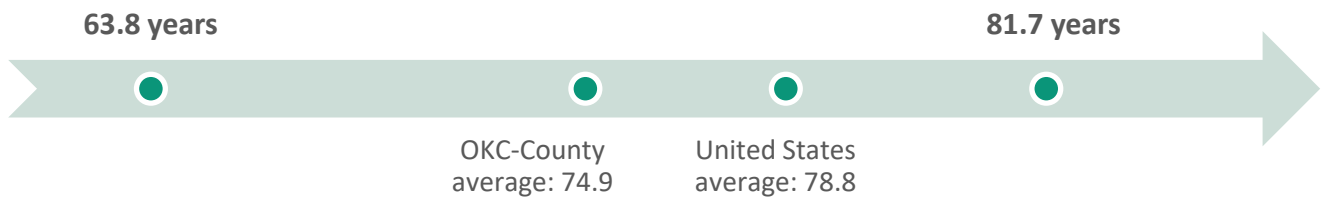
AVERAGE LIFE EXPECTANCY Oklahoma City-County, 2013-2015



Data Source: Oklahoma State Department of Health Vital Records 2013-2015

73003	80.4	73054	76.71	73109	73.19	73119	71.97	73132	76.83	73151	79.3
73007	73.88	73084	70.42	73110	73.45	73120	78.16	73134	74.58	73159	75.69
73008	74.21	73099	78.27	73111	68.98	73121	77.07	73135	74.52	73162	79.7
73012	81.24	73102	73.64	73112	75.56	73122	76.1	73139	76.51	73165	76.79
73013	81.16	73103	73.89	73114	73.29	73127	73.61	73141	67.81	73169	72.35
73020	78.16	73104	69.04	73115	73.41	73128	77.41	73142	78.68	73170	78.17
73025	80.74	73105	69.36	73116	79.19	73129	69.8	73145	63.81	73173	71.8
73034	80.28	73106	74.37	73117	68.08	73130	76.74	73149	68.72	73179	72.87
73045	75.23	73107	73.27	73118	79.74	73131	81.67	73150	74.98	74857	73.56
73049	73.81	73108	70.81								

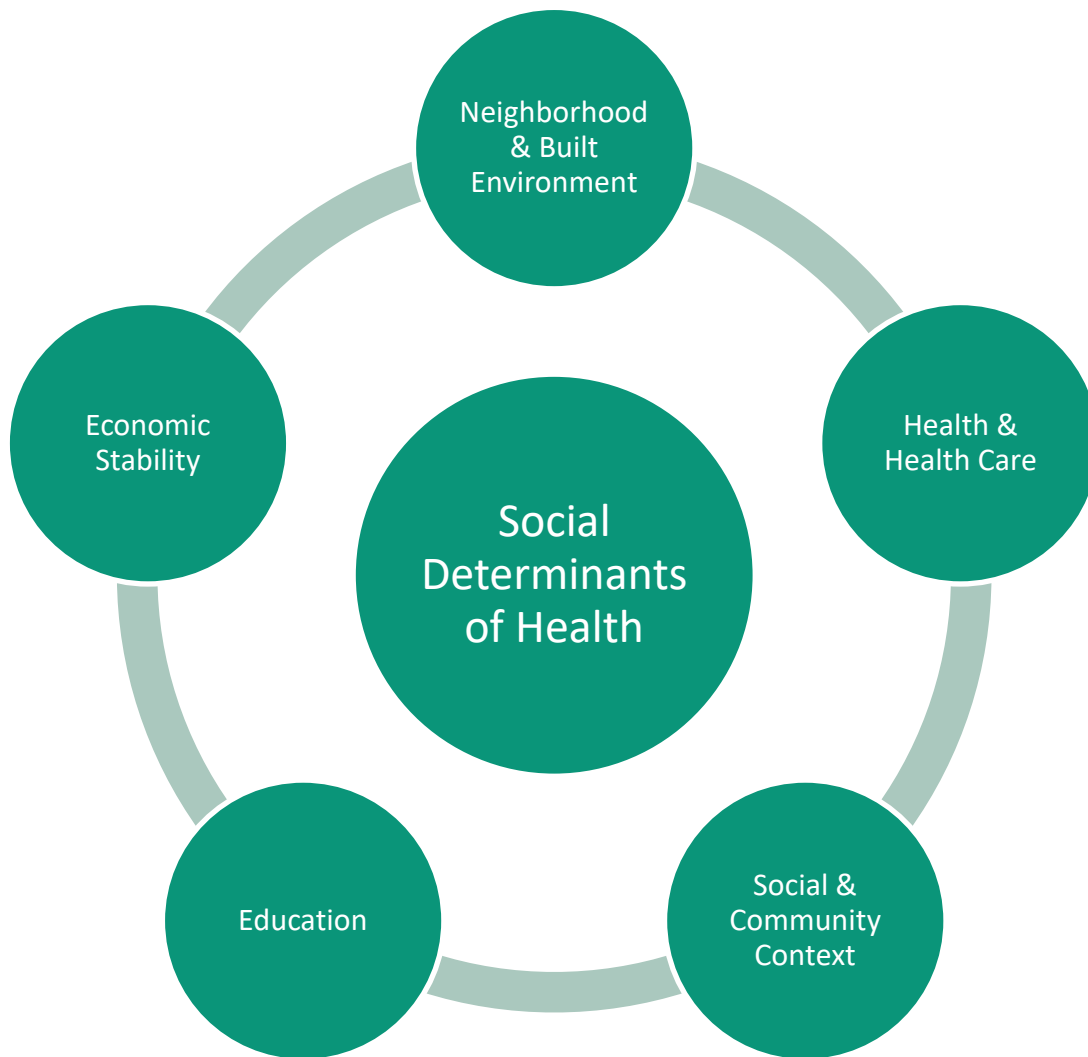
OKC-County Life Expectancy Range



Source: (6) Oklahoma City-County Wellness Score. 2017

Prioritized Significant Community Health Needs

Community Priority Issues



Source: (7) Healthy People. 2020

Economic Stability

Employment

The unemployment rate of a community can be an indicator of negative health outcomes, including depression, obesity and an increased chance of being ill. (6) The percent of unemployment in Oklahoma County was 6.2% in comparison to 6.3% by the state of Oklahoma and 8.3% in the nation. (6)

Food Insecurity

In Oklahoma, one in seven people struggles with hunger, with one in five children being food insecure. (8) Nearly half of the households that receive Supplemental Nutrition Assistance Program (SNAP) benefits in Oklahoma have children. (8) Over 14% of Oklahoma County residents are food insecure, with an annual food budget shortfall of \$57,023,000. (8)

Housing

Families that face a high housing burden with their household income have less resources to dedicate toward healthy behaviors, such as preventative care and healthy food. (6) Additionally, the stress of a high rent or mortgage payment compared to household income can negatively impact health and mental health. (6)

Education

Health Education & Promotion

Educational attainment can be an important factor that influences the overall health and well being of an individual and the community as a whole. Almost 13% of Oklahoma County adult residents have not attained a high school diploma or equivalent. (1) Education level affects behavior and lifestyle choices which can impact community health. It is vital that communities invest in education from early childhood through adulthood to boost employment, career prospects and improve health outcomes.

Health & Healthcare

Access

Lack of access to affordable and timely medical care was a reverberating theme throughout the chat surveys and dot voting. Access to comprehensive, quality health care services is important. It promotes and maintains good health, prevents and manages diseases, reduces unnecessary disability and premature death, and encourages health equity. Good health also requires oral and mental health care access. Three components of access are insurance coverage, health services, and timeliness of care. Potential barriers include: high cost of care, underinsured or uninsured, lack of primary or specialty services, and culturally sensitive care. Almost 17% of the population (under age 65) are living without any health insurance. (1) The uninsured and underinsured populations experience delays in receiving timely care, lack the ability to receive preventative measures, and seek care in the local emergency rooms which results in preventable hospital admissions.

Obesity

Oklahoma's obesity ranking has rapidly jumped to the top of the charts. Currently, 36.8 % of adults in Oklahoma are obese. (9) Citizens rely on cars, trucks, and buses more than ever for their commute to work and school. This can often lead to sedentary lifestyles that contribute significantly to weight gain. The increased convenience of unhealthy, inexpensive fast food coupled with the inability to access low-cost healthy food is also a contributing factor to the obesity epidemic.

Mental Health

The prevalence of mental illness among adults has been increasing. (10) Currently in the United States, 19% of adults suffer from a mental illness. Almost 11% of adults with a mental illness are uninsured. (10) There is an unmet need for mental health treatment for both adults and youth. (10) Unfortunately, the lack of mental health resources for low income and uninsured persons is a barrier to seeking life changing treatment. Intervention and prevention are key steps in combating this multifaceted health indicator.

Neighborhood & Built Environment

Transportation

Accessing affordable and reliable transportation affects health outcomes. Additionally, living in a food desert or experiencing food insecurity can lead to malnutrition and poor weight status. Families living in poverty usually have limited or no access to communication about community resources, events and programs which poorly impacts health outcomes.

Source: (1) U.S. Census Bureau

Source: (6) Oklahoma City-County Wellness Score. 2017

Source: (8) Feeding America. Hunger in Oklahoma. 2020

Source: (9) Centers for Disease Control and Prevention. Adult Obesity Prevalence. 2019

Source: (10) Mental Health America. The State of Mental Health in America. 2021

Hospital Priority Issues

INTEGRIS Health determined the primary data and the secondary public health data collected during the community health needs assessment. Five themes emerged upon review of the data.

Each hospital will develop an individual Community Health Improvement Plan (CHIP) in a separate document to address the needs identified based on their internal priorities and resources. The following list is in alphabetical order.

Access to Care

As healthcare organizations, it is important that each hospital continue to be accessible to all members of the community regardless of insurance status, race, socioeconomic status, and other factors. Access to affordable and quality healthcare were resounding messages heard from community members as the second most frequent response in community chats. Secondary data supports a need for access to culturally competent and affordable primary and specialty care, health insurance, and prescription medications.

Food Access/Insecurity

There is growing momentum on addressing food access and insecurity in Oklahoma County. Access to healthy food was identified by the community and secondary data as a need. Food access issues combined to make the top social determinant issue on dot voting, and it was the fifth most frequent chat response. Food insecurity is an important variable tied to the social determinant of poverty which was also ranked highly by community members. INTEGRIS Health is collaborating with the Regional Food Bank of Oklahoma to address hunger and malnutrition in the county.

Mental/Behavioral Health

Nearly half of online survey respondents indicated that they experience anxiety/depression and a third of dot voters marked mental health issues as a priority health issue. With alarming public health statistics, mental health is easily one of the top identified health needs in Oklahoma County. Scarce resources leave those suffering from mental health issues with few options for treatment, especially for the uninsured and underinsured members of the community. Identified mental health needs can include, but are not limited to, anxiety, depression, substance abuse disorders, and suicide.

Obesity

Obesity can be addressed through education and behavior changes targeting poor nutrition and a lack of physical activity. Addressing food access can also improve obesity related issues. Co-morbidities for obesity include, but are not limited to, cardiovascular disease, diabetes, hyperlipidemia, hypertension, stroke, and some cancers and respiratory issues.

Tobacco

While tobacco may not have been specifically identified by the community as a priority need, INTEGRIS Health and their partners agree that it is a health issue that should continue to be addressed. Oklahoma County is still above the national average for adults who smoke. (5) The state of Oklahoma continues to have a grade of “F” in heart disease deaths and a grade of “D” in lung cancer incidence. (5) With the expansion of electronic cigarettes and vapes, nicotine dependency continues to be a widespread public health concern for Oklahoma County residents.

Source: (5) Oklahoma State of the State’s Health Report. Oklahoma County. 2019

Significant Community Health Needs Not Being Addressed

Because the hospitals have limited resources, not every health indicator which has an identified need for improvement will be directly addressed. Those community needs identified, but not “prioritized” for improvement included the following:

Education

Health education programs including physical activity and prevention and wellness were mentioned numerous times in community chat feedback. It is believed that through the focus of obesity, tobacco, food access, mental health and healthcare access, these needs will be indirectly addressed.

Health Insurance and Prescription Medications

The hospitals attempt to alleviate these economic constraints on a regular basis through the provision of charity care and the foundation programs.

Social

This variable includes, but is not limited to, the following comments from chat questionnaires: classes for adults; community gathering spaces; affordable housing; political representation; employment; funding, systems and government; infrastructure, parks and recreation; environment; social support; respect and tolerance; transportation issues; elder care; safety; and intrinsic factors. The hospitals are not prepared to address these needs, and rely on federal, state, and local government-based programs to address and improve these issues.

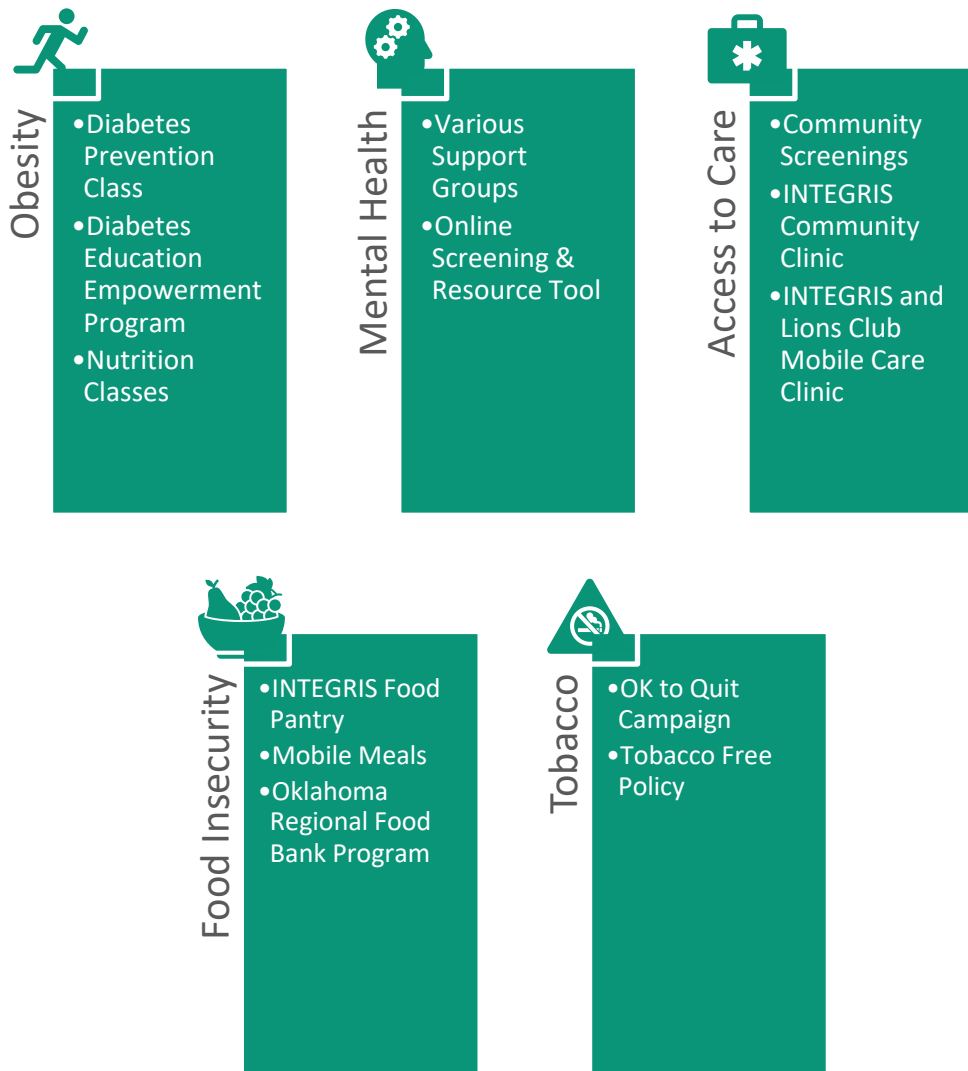
Potentially Available Resources



Evaluation of Impact

For fiscal year 2019-2020, INTEGRIS Health in Oklahoma County reached over 17,668 total people through classes, events, presentations and programs. Free community screenings were given to 1,582 people. Three hundred sixty-four events addressed the indicators of obesity, mental health, access to care/food and tobacco. Best practices and evidence-based programs were chosen to fit the needs of the community. Issues such as teen pregnancy, safety, walkability and poverty were not scored as high due to the partners' inability to make a large impact with those indicators. However, we will continue to partner with agencies such as the local and state health departments who do hold that expertise.

Here are a few programs from INTEGRIS Health Systemwide.



Appendices

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery Primary Data

DRG Code	DRG Description	Cases	Rank
470	Major joint replacement or reattachment of lower extremity w/o MCC	383	1
483	Major joint & limb reattachment proc of upper extremity w CC/MCC	81	2
462	Bilateral or multiple major joint procs of lower extremity w/o MCC	21	3
468	Revision of hip or knee replacement w/o CC/MCC	10	4
465	Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w/o CC/MCC	10	5
494	Lower extrem & humer proc except hip, foot, femur w/o CC/MCC	4	6
467	Revision of hip or knee replacement w CC	2	7
464	Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w CC	1	8
909	Other O.R. procedures for injuries w/o CC/MCC	1	9
743	Uterine & adnexa proc for non-malignancy w/o CC/MCC	1	10
Total			514

*INTEGRIS Community Hospitals Primary Data

DRG Code	DRG Description	Cases	Rank
177	RESPIRATORY INFECTIONS & INFLAMMATIONS W MCC	80	1
690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	23	2
641	NUTRITIONAL & MISC METABOLIC DISORDERS W/O MCC	17	3
871	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS W MCC	17	4
193	SIMPLE PNEUMONIA & PLEURISY W MCC	17	5
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	17	6
190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	15	7
603	CELLULITIS W/O MCC	15	8
440	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W/O CC/MCC	15	9
195	SIMPLE PNEUMONIA & PLEURISY W/O CC/MCC	12	10
Total			514

*INTEGRIS Community Hospital Council Crossing

*INTEGRIS Community Hospital Moore

*INTEGRIS Community Hospital Del City

*INTEGRIS Community Hospital OKC West

*Health Partner Investments Primary Data

DRG Code	DRG Description	Cases	Rank
	Unilateral osteoarthritis of the knee		1
	Spondylolithesis, lumbar		2
	Unilateral osteoarthritis of the hip		3
	Spinal stenosis, lumbar		4
	Intervertebral disc disorder with radiculopathy, lumbar		5
	Primary osteoarthritis of the shoulder		6
	Pain due to internal orthopedic prosthesis device		7
	Spinal stenosis, cervical		8
	Bilateral primary osteoarthritis of the knee		9
	Pseudarthrosis after fusion or arthrodesis		10
Total			

- *HPI Community Hospital North
- *HPI Community Hospital South
- *HPI Northwest Surgical Hospital

2020 CHNA Focus Group Questions

Focus Group Questions

Home Zip Code: _____

1. Describe your overall concerns for the health of your community.
2. In thinking about your community, what kind of social support do you have? Social support includes but is not limited to on-line organizations, religious groups, friends and family that are helpful to you in good and bad times.
3. What are the main health services lacking in your community?

What services do you feel would impact your community the most?

4. What resources are needed in your community in order to protect community members from COVID-19?
5. This question is in several parts, and we will be asking about discrimination. Have you witnessed or experienced discrimination in any of these areas: Race, ethnicity, sexual orientation, age, ability, or other socially defined circumstance?

If so, what approaches do you suggest may solve these issues

Charlas Comunitarias

Código Postal: _____

1. Describa sus mayores preocupaciones por la salud de su comunidad.
2. Al pensar en su comunidad, ¿qué tipo de apoyo social tiene? El apoyo social incluye, pero no se limita a, organizaciones en línea, grupos religiosos, amigos y familiares que le ayudarán en los buenos y malos momentos.
3. ¿Cuáles son los principales servicios de salud que faltan en su comunidad?

¿Qué servicios cree que afectarían más a su comunidad?

4. ¿Qué recursos se necesitan en su comunidad para proteger a los miembros de la comunidad del COVID-19?
5. Esta pregunta tiene varias partes y preguntaremos sobre la discriminación.
¿Ha presenciado o ha sido discriminado en alguna de estas áreas: raza, etnia, orientación sexual, edad, capacidad u otra circunstancia socialmente definida?

Si es así, ¿qué enfoques sugiere que puedan resolver estos problemas?

2020 CHNA Online Survey

* 1. Do you live in Oklahoma County?

- Yes
- No
- I do not know

* 2. In what ZIP code is your home located? (enter 5-digit ZIP code; for example, 00544 or 94305)

* 3. How many individuals live in your household? Include yourself in this number.

* 4. What gender do you self-identify?

- Female
- Male
- Other (please specify)

* 5. What is your age group?

- 18-27
- 28-37
- 38-47
- 48-57
- 58-67
- 68-77
- 78+

* 6. Select race/ethnicity best describes you?

- White/Caucasian
- Black/African American
- Hispanic/Latino
- Asian/Pacific Islander
- Alaskan Native/American Indian
- Other (please specify)

* 7. How physically healthy are you?

- Extremely healthy
- Very healthy
- Somewhat healthy
- Not so healthy
- Not at all healthy

* 8. Do you have a family history of any conditions/diseases? (Select all that apply.)

- Diabetes
- Cancer
- Heart Disease
- Asthma
- Stroke
- Seizures
- Thyroid Disorder
- High Blood Pressure
- Cholesterol

No known disorders

* 9. Do you suffer from any chronic disease(s)?

Yes

No

I do not know

If yes, which health condition(s):

* 10. What type of medical insurance coverage do you have? Select one.

Private insurance (BCBS, Humana, Aetna, Health Choice, etc.)

Sooner Care (Medicaid)

Medicare

I do not currently have health insurance.

* 11. How would you describe your sense of pride in Oklahoma County?

Excellent

Moderate

Fair

Poor

None

* 12. How do you rate Oklahoma County as a HEALTHY Community?

Excellent

Very Good

Good

Fair

Poor

* 13. How would you rate Oklahoma County as a SAFE Community?

Excellent

Very Good

Good

Fair

Poor

* 14. As a community member, do you feel a responsibility to help improve the health status of Oklahoma County?

Always

Often

Sometimes

Rarely

Never

* 15. Select how concerned you are about each of the following WELL BEING issues:

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Sidewalks/Walkability	<input type="radio"/> Sidewalks/Walkability Very Concerned	<input type="radio"/> Sidewalks/Walkability Moderately Concerned	<input type="radio"/> Sidewalks/Walkability Concerned	<input type="radio"/> Sidewalks/Walkability Not Concerned at All
Employment	<input type="radio"/> Employment Very Concerned	<input type="radio"/> Employment Moderately Concerned	<input type="radio"/> Employment Concerned	<input type="radio"/> Employment Not Concerned at All
Housing	<input type="radio"/> Housing Very Concerned	<input type="radio"/> Housing Moderately Concerned	<input type="radio"/> Housing Concerned	<input type="radio"/> Housing Not Concerned at All
Poverty	<input type="radio"/> Poverty Very Concerned	<input type="radio"/> Poverty Moderately Concerned	<input type="radio"/> Poverty Concerned	<input type="radio"/> Poverty Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Healthier places to eat	<input type="radio"/> Healthier places to eat Very Concerned	<input type="radio"/> Healthier places to eat Moderately Concerned	<input type="radio"/> Healthier places to eat Concerned	<input type="radio"/> Healthier places to eat Not Concerned at All
Access to fresh fruits and vegetables	<input type="radio"/> Access to fresh fruits and vegetables Very Concerned	<input type="radio"/> Access to fresh fruits and vegetables Moderately Concerned	<input type="radio"/> Access to fresh fruits and vegetables Concerned	<input type="radio"/> Access to fresh fruits and vegetables Not Concerned at All
Safety	<input type="radio"/> Safety Very Concerned	<input type="radio"/> Safety Moderately Concerned	<input type="radio"/> Safety Concerned	<input type="radio"/> Safety Not Concerned at All
Parks/playgrounds	<input type="radio"/> Parks/playgrounds Very Concerned	<input type="radio"/> Parks/playgrounds Moderately Concerned	<input type="radio"/> Parks/playgrounds Concerned	<input type="radio"/> Parks/playgrounds Not Concerned at All
Education	<input type="radio"/> Education Very Concerned	<input type="radio"/> Education Moderately Concerned	<input type="radio"/> Education Concerned	<input type="radio"/> Education Not Concerned at All
Social support (e.g., friend, neighbor, relative)	<input type="radio"/> Social support (e.g., friend, neighbor, relative) Very Concerned	<input type="radio"/> Social support (e.g., friend, neighbor, relative) Moderately Concerned	<input type="radio"/> Social support (e.g., friend, neighbor, relative) Concerned	<input type="radio"/> Social support (e.g., friend, neighbor, relative) Not Concerned at All

* 16. Select how concerned you are about each of the following MENTAL health issues:

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Depression	<input type="radio"/> Depression Very Concerned	<input type="radio"/> Depression Moderately Concerned	<input type="radio"/> Depression Concerned	<input type="radio"/> Depression Not Concerned at All
Anxiety	<input type="radio"/> Anxiety Very Concerned	<input type="radio"/> Anxiety Moderately Concerned	<input type="radio"/> Anxiety Concerned	<input type="radio"/> Anxiety Not Concerned at All
Suicide	<input type="radio"/> Suicide Very Concerned	<input type="radio"/> Suicide Moderately Concerned	<input type="radio"/> Suicide Concerned	<input type="radio"/> Suicide Not Concerned at All
Drug Abuse	<input type="radio"/> Drug Abuse Very Concerned	<input type="radio"/> Drug Abuse Moderately Concerned	<input type="radio"/> Drug Abuse Concerned	<input type="radio"/> Drug Abuse Not Concerned at All
Alcohol Abuse	<input type="radio"/> Alcohol Abuse Very Concerned	<input type="radio"/> Alcohol Abuse Moderately Concerned	<input type="radio"/> Alcohol Abuse Concerned	<input type="radio"/> Alcohol Abuse Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Bullying	<input type="radio"/> Bullying Very Concerned	<input type="radio"/> Bullying Moderately Concerned	<input type="radio"/> Bullying Concerned	<input type="radio"/> Bullying Not Concerned at All

* 17. How would you describe your mental health?

- Extremely Healthy
- Moderately Healthy
- Healthy
- Slightly Healthy
- Unhealthy

* 18. How much stress do you feel in a typical week?

- No stress
- Not much stress
- Little stress
- Quite a bit of stress
- A lot of stress
- Other (please specify)

* 19. Do you experience anxiety?

- Always
- Usually
- Sometimes
- Rarely
- Never

* 20. Do you experience depression?

- Always
- Usually
- Sometimes
- Rarely
- Never

* 21. Do you have strong social support (the ability to lean on a friend, neighbor, or relative during hard times)?

- Always
- Usually
- Sometimes
- Rarely
- Never

* 22. Select how concerned you are about each of the following PHYSICAL health issues:

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Heart Disease	<input type="radio"/> Heart Disease Very Concerned	<input type="radio"/> Heart Disease Moderately Concerned	<input type="radio"/> Heart Disease Concerned	<input type="radio"/> Heart Disease Not Concerned at All
Obesity	<input type="radio"/> Obesity Very Concerned	<input type="radio"/> Obesity Moderately Concerned	<input type="radio"/> Obesity Concerned	<input type="radio"/> Obesity Not Concerned at All
Stroke	<input type="radio"/> Stroke Very Concerned	<input type="radio"/> Stroke Moderately Concerned	<input type="radio"/> Stroke Concerned	<input type="radio"/> Stroke Not Concerned at All
Diabetes	<input type="radio"/> Diabetes Very Concerned	<input type="radio"/> Diabetes Moderately Concerned	<input type="radio"/> Diabetes Concerned	<input type="radio"/> Diabetes Not Concerned at All
High Blood Pressure	<input type="radio"/> High Blood Pressure Very Concerned	<input type="radio"/> High Blood Pressure Moderately Concerned	<input type="radio"/> High Blood Pressure Concerned	<input type="radio"/> High Blood Pressure Not Concerned at All
Respiratory Illness/Disease	<input type="radio"/> Respiratory Illness/Disease Very Concerned	<input type="radio"/> Respiratory Illness/Disease Moderately Concerned	<input type="radio"/> Respiratory Illness/Disease Concerned	<input type="radio"/> Respiratory Illness/Disease Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Tobacco/eCigs	<input type="radio"/> Tobacco/eCigs Very Concerned	<input type="radio"/> Tobacco/eCigs Moderately Concerned	<input type="radio"/> Tobacco/eCigs Concerned	<input type="radio"/> Tobacco/eCigs Not Concerned at All
Cancer	<input type="radio"/> Cancer Very Concerned	<input type="radio"/> Cancer Moderately Concerned	<input type="radio"/> Cancer Concerned	<input type="radio"/> Cancer Not Concerned at All
Teen Pregnancy	<input type="radio"/> Teen Pregnancy Very Concerned	<input type="radio"/> Teen Pregnancy Moderately Concerned	<input type="radio"/> Teen Pregnancy Concerned	<input type="radio"/> Teen Pregnancy Not Concerned at All

* 23. How would you describe your weight status?

- Underweight
- Healthy weight
- Overweight
- Obese

* 24. How many minutes of physical activity do you do in a normal week?

- None
- Less than 90 minutes
- 90 - 120 minutes
- 121- 149 minutes
- 150 minutes or more

* 25. Select how concerned you are about ACCESS to each of the following health care related issues:

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Timely non-emergency health care, when needed	<input type="radio"/> Timely non-emergency health care, when needed Very Concerned	<input type="radio"/> Timely non-emergency health care, when needed Moderately Concerned	<input type="radio"/> Timely non-emergency health care, when needed Concerned	<input type="radio"/> Timely non-emergency health care, when needed Not Concerned at All
Culturally competent providers	<input type="radio"/> Culturally competent providers Very Concerned	<input type="radio"/> Culturally competent providers Moderately Concerned	<input type="radio"/> Culturally competent providers Concerned	<input type="radio"/> Culturally competent providers Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Specialty provider (e.g., heart doctor, cancer doctor)	<input type="radio"/> Specialty provider (e.g., heart doctor, cancer doctor) Very Concerned	<input type="radio"/> Specialty provider (e.g., heart doctor, cancer doctor) Moderately Concerned	<input type="radio"/> Specialty provider (e.g., heart doctor, cancer doctor) Concerned	<input type="radio"/> Specialty provider (e.g., heart doctor, cancer doctor) Not Concerned at All
Affordable prescription medication(s)	<input type="radio"/> Affordable prescription medication(s) Very Concerned	<input type="radio"/> Affordable prescription medication(s) Moderately Concerned	<input type="radio"/> Affordable prescription medication(s) Concerned	<input type="radio"/> Affordable prescription medication(s) Not Concerned at All

* 26. Do you have a reliable form of transportation?

- Yes
- No

* 27. Do you have access to a grocery store that carries healthy, fresh foods?

- Yes
- No

* 28. Do you believe you receive fair healthcare despite your gender, race, age, religion, or sexual orientation?

- Always
- Usually
- Sometimes
- Rarely
- Never

* 29. If you are sick, how likely are you to visit a healthcare provider?

- Always
- Usually
- Sometimes
- Rarely

Never

* 30. Do you have enough money to pay for the following:

	Always	Usually	Sometimes	Rarely	Never
Food	<input type="radio"/> Food Always	<input type="radio"/> Food Usually	<input type="radio"/> Food Sometimes	<input type="radio"/> Food Rarely	<input type="radio"/> Food Never
Transportation	<input type="radio"/> Transportation Always	<input type="radio"/> Transportation Usually	<input type="radio"/> Transportation Sometimes	<input type="radio"/> Transportation Rarely	<input type="radio"/> Transportation Never
Clothing	<input type="radio"/> Clothing Always	<input type="radio"/> Clothing Usually	<input type="radio"/> Clothing Sometimes	<input type="radio"/> Clothing Rarely	<input type="radio"/> Clothing Never
Housing	<input type="radio"/> Housing Always	<input type="radio"/> Housing Usually	<input type="radio"/> Housing Sometimes	<input type="radio"/> Housing Rarely	<input type="radio"/> Housing Never
Medicine					