Mercy Hospital Logan County Community Health Needs Assessment Summary and Implementation Strategy



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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 Logan County 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 Logan County 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: Transportation

Service implemented: The hospital provides vouchers (coins) for patients to make their rehab appointments including physical therapy. These vouchers are also available to patients who need transportation from the hospital home. The hospital has distributed \$645 worth of tokens to patients needing transportation.

Priority: Increased services and resources for an elderly population

Services implemented: The hospital partnered with Meals on Wheels to deliver meals twice per week to local residents. This is covered by volunteers at the hospital. About 10-12 deliveries are made daily.

The hospital started providing diabetic education classes in 2016. The attendance for this course is nearly half over the age of 65. Hospital representatives also traveled to the county senior citizens' sites to provide information about these courses. Thirty-one have benefited from this course.

Priority: Increased telemedicine services

Service implemented: The hospital continues to use and improve telestroke and telehospitalist services for local patients. There is more awareness of these services in the community. Thus, the hospital has experienced an increase in the utilization of these services.

Care to Home has been implemented in Guthrie with an initial group of 2-3 of participants. These chronic and elderly patients are provided an iPad with access to a physician to check in with them daily to check their vitals and monitor their conditions. This is to keep patients in their homes rather than ending up in the emergency room.

Priority: Need for a community health advocate

Service implemented: This priority was identified in conjunction with the county health department and the Logan County Partnership, the local health coalition. The hospital sends at least one representative to each monthly meeting. The hospital also hosts and provides lunch for these meetings.

Priority: Indigent prescription drug program

Service implemented: The Division Clinic hired a social worker to assist patients in completing paperwork and starting the process for this program. This person has assisted at least 75 patients in completing paperwork since she started in 2017.

Priority: Increased need for mental health and behavioral health services

Service implemented: This is an item that the hospital continues to explore options. Providers are limited in Oklahoma, and this continues to be an area of concern for the community and state.

Awareness of Community Outreach

A question was included on the community survey (complete methodology detailed on page 16) to gauge survey respondents' awareness of current community programs offered by the hospital. Thirty-eight individuals or 30.9 percent of the total indicated they were aware of community programs. Survey respondents were then asked to list which programs they knew. The most commonly responded programs were diabetic education/DEEP and SAIL classes. The table below outlines all programs listed by the survey respondents.

Tease list community program	11.5.	
Response Category	No.	%
Diabetic education/DEEP	15	46.9%
SAIL classes	3	9.4%
Aging services/Initiatives	2	6.3%
Sports physicals	2	6.3%
Food drives	2	6.3%
Mobile meals	1	3.1%
Christmas families	1	3.1%
Medicare enrollment	1	3.1%
Charity Care	1	3.1%
Logan County Partnership	1	3.1%
Health fairs	1	3.1%
Jesus House	1	3.1%
Blood pressure checks	1	3.1%
Total	32	100.0%

Please list community programs:	Please li	st comm	unity pro	grams:
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Mercy Hospital Logan County Medical Services Area Demographics

Figure 1 displays the Mercy Hospital Logan County medical services area. Mercy Hospital Logan County 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.

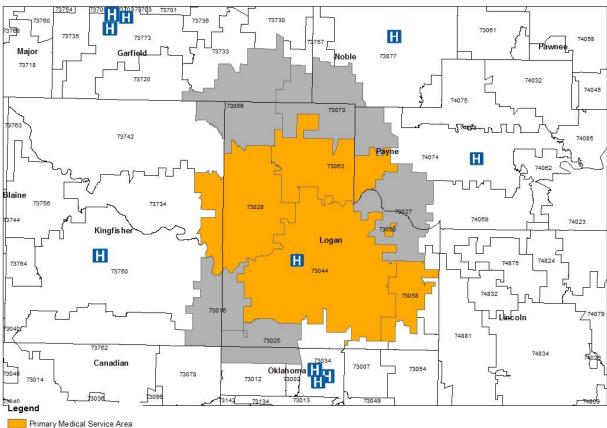


Figure 1. Mercy Hospital Logan County Medical Service Areas

Primary Medical Service Area
Secondary Medical Service Area

Figure 1	. Mercv	Hospital	Logan	County	Medical	Service /	Areas
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City	County	Hospital	No. of Beds
Enid	Garfield	St. Mary's Regional Medical Center	245
Enid	Garfield	INTEGRIS Bass Baptist Health Center	182
Enid	Garfield	INTEGRIS Bass Pavilion	24
Kingfisher	Kingfisher	Kingfisher Regional Hospital	25
Guthrie	Logan	Mercy Hospital Logan County	25
Perry	Noble	Perry Memorial Hospital	26
Edmond	Oklahoma	INTEGRIS Health Edmond	40
Edmond	Oklahoma	Edmond- AMG Specialty Hospital	37
Edmond	Oklahoma	Summit Medical Center	9
Stillwater	Payne	Stillwater Medical Center	117

As delineated in Figure 1, the primary medical service area of Mercy Hospital Logan County includes the zip code areas of Guthrie, Crescent, Langston, Meridian, and Mulhall. The primary medical service area experienced a population increase of 7.7 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced another population increase of 4.5 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 Cashion, Coyle, Edmond, Marshall, and Orlando. The secondary medical service area experienced an increase in population of 366 percent from 2000 to 2010 followed by a population increase of 3.2 percent from 2010 to the 2012-2016 American Community Survey. The large increase in population from the 2000 to the 2010 decennial Census was due to the addition of the Edmond, 73025, zip code. This area was not present during the 20000 Census.

		2000	2010	2012-2016	% Change	% Change
Population by	Zip Code	Population	Population	Population	2000-2010	2010-12-16
Primary Media	cal Service					
Area						
73044	Guthrie	18,391	20,226	21,713	10.0%	7.4%
73044		,		-	8.0%	7.4%
	Crescent	3,199	3,454	3,710		
73050	Langston	1,688	1,370	834	-18.8%	-39.1%
73058	Meridian	256	332	304	29.7%	-8.4%
73063	Mulhall	685	691	695	0.9%	0.6%
	Total	24,219	26,073	27,256	7.7%	4.5%
Secondary Me	dical Service A	rea				
73016	Cashion	1,367	1,850	1,751	35.3%	-5.4%
73027	Coyle	1,059	1,493	1,400	41.0%	-6.2%
73025	Edmond	n/a	11,579	12,148	n/a	4.9%
73056	Marshall	436	441	406	1.1%	12.5%
73073	Orlando	551	541	618	-1.8%	14.2%
	Total	3,413	15,904	16,413	366.0%	3.2%

Table 1. Population of Mercy Hospital Logan County Medical Service Areas

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 Logan County medical services area. Most of these services would be expected in a service area of Guthrie's size: one clinic (outside of the hospital's clinics), five dental

offices, two optometry offices, three chiropractic offices, four nursing care facilities, one assisted living facility, one home health provider, one hospice provider, the Logan County Health Department, one EMS provider, one rehabilitation provider, three counseling and/or mental health treatment providers, one durable medical equipment provider, and seven pharmacies.. Mercy Hospital Logan County is a 25 bed critical access hospital located in Logan County. The hospital provides acute and swing bed inpatient services, 24-hour emergency department, case management, diagnostic radiology (CAT Scan, MRI, Ultrasound, Nuclear Medicine, and Mammography), and rehabilitation services. A complete list of hospital services and community involvement activities can be found in Appendix A.

	Area
Count	Service
1	Hospital: Mercy Hospital Logan County
1	Physician clinic
5	Dental offices
2	Optometry offices
3	Chiropractic offices
4	Nursing care facilities
1	Assisted living facility
1	Home health provider
1	Hospice provider
1	County Health Department: Logan County
1	EMS provider
1	Rehabilitation provider
3	Counseling and/or mental health treatment
	providers
1	Durable medical equipment provider
7	Pharmacies

 Table 2. Existing Medical Services in the Mercy Hospital Logan County Medical Services

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 Logan 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 16.4 percent of the primary medical service area, 12.0 percent of the secondary medical service area, and 15.0 percent of the population of Logan County. The 45-64 age group accounts for the largest share of the population in the primary (27.5%) and secondary (29.8%) service areas and Logan County (27.0%). This is compared to the state share of 24.9 percent of the total population

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Logan County	Oklahoma
2010 Census				
0-14	18.9%	24.1%	20.7%	20.7%
15-19	9.9%	8.1%	8.6%	7.1%
20-24	7.9%	3.4%	6.5%	7.2%
25-44	21.9%	23.9%	23.8%	25.8%
45-64	27.0%	30.2%	27.7%	25.7%
65+	14.3%	10.2%	<u>12.6%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total				
Population	26,073	15,904	41,848	3,751,351
12-16 ACS				
0-14	18.3%	21.8%	19.4%	20.6%
15-19	7.9%	8.9%	7.2%	6.7%
20-24	7.2%	5.4%	6.7%	7.3%
25-44	22.8%	22.2%	24.6%	26.0%
45-64	27.5%	29.8%	27.0%	24.9%
65+	16.4%	12.0%	15.0%	14.5%
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	27,256	16,413	45,171	3,875,589

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

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 not as evident in Logan County and both medical service areas. The share of the population identified as of Hispanic Origin accounted for 4.7 percent of the primary medical service area's population in 2012-2016 and 1.6 percent of the secondary medical service area during the same time period. The Hispanic Origin population accounted for 5.6 percent of the total population from 2012-2016 in Logan County.

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Logan County	Oklahoma
2010 Census				
White	78.5%	89.1%	81.0%	72.2%
Black	12.1%	3.3%	9.1%	7.4%
Native American ¹	3.2%	2.7%	3.3%	8.6%
Other ²	1.8%	1.8%	2.5%	5.9%
Two or more Races ³	4.4%	3.0%	4.1%	5.9%
Hispanic Origin ⁴	4.2%	<u>6.3%</u>	<u>5.2%</u>	<u>8.9%</u>
Total Population	26,073	15,904	41,848	3,751,351
12-16 ACS				
White	77.5%	89.5%	82.2%	72.9%
Black	12.4%	3.8%	8.9%	7.3%
Native American ¹	4.5%	1.6%	3.5%	7.3%
Other ²	1.4%	1.3%	1.4%	8.7%
Two or more Races ³	4.3%	3.7%	4.1%	7.7%
Hispanic Origin ⁴	<u>4.7%</u>	<u>1.6%</u>	<u>5.6%</u>	<u>9.8%</u>
Total Population	27,256	16,413	45,171	3,875,589

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

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 Logan County hosted three community meetings between April 3, 2018 and May 1, 2018. The Oklahoma Office of Rural Health facilitated these meetings. Summaries of the information presented at each meeting are included below in chronological order.

Community members in attendance at these meetings included:

- Mercy Hospital Logan County representatives
- Mercy Clinic Logan County representatives
- Logan County Health Department
- Senior care representative
- Job Corp representative
- YMCA
- Guthrie Chamber of Commerce

Average attendance at the community meetings was 14-18 community members. Community members were invited to participate through hospital representatives personally invited through civic organization meetings such as the Chamber of Commerce, ministerial alliance and others. Notices were placed on the hospital's website, Chamber of Commerce, Logan County Health Department, and churches along with their corresponding Facebook pages. The hospital tried to invite anyone who wanted to attend within the community. 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, April 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 Logan 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 Logan County medical service area employs 772 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 965 FTE employees. The same methodology is

applied to income. The local health sector has a direct income impact of over \$34 million. When the appropriate income multiplier is applied, the total income impact is over \$40.2 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 19.9% of personal income in Logan 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 \$80,023 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:

- Tobacco use
- Obesity
- Physical activity
- Mental health- finding beds, resources, for pediatrics and adolescents
- Preventative education- diabetes, importance of hygiene (entire body hygiene), foot care, and eye care
- Meal planning and budgeting (it is offered through WIC, but it varies), God's food bank has been providing one-on-one education for healthy recipes, making smarter choices

Table 5. Mercy Hospital Logan County Medical Service Area Health Sector Impact on Employment and Income, and Retail Sales and SalesTax

		Employment		Income			Retail	1 Cent
Health Sectors	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	141	1.35	191	\$8,282,420	1.21	\$10,061,037	\$2,002,146	\$20,021
Physicians, Dentists & Other Medical Professionals	65	1.33	86	\$5,346,383	1.20	\$6,423,741	\$1,278,324	\$12,783
Nursing Homes & Home Health	406	1.18	480	\$14,222,423	1.16	\$16,483,902	\$3,280,297	\$32,803
Other Medical & Health Services	120	1.33	160	\$5,922,061	1.15	\$6,815,238	\$1,356,232	\$13,562
Pharmacies	<u>40</u>	1.23	<u>49</u>	<u>\$360,000</u>	1.19	<u>\$428,531</u>	<u>\$85,278</u>	<u>\$853</u>
Total	772		965	\$34,133,288		\$40,212,450	\$8,002,277	\$80,023

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 Logan County taxable sales and income (19.9%) – from 2017 Sales Tax Data and 2016 Personal Income Estimates from the Bureau of Economic Analysis.

Health Data, April 10, 2018

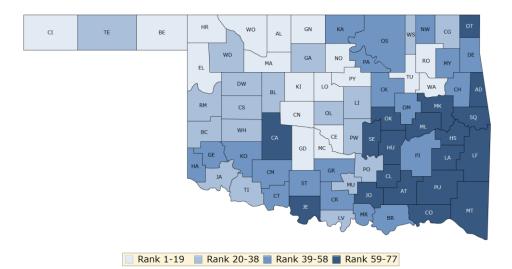
A community meeting was held April 10, 2018, to examine various sources of local health data. Various sources of health data were examined including data from the County Health Rankings and Roadmaps Program through the University of Wisconsin Population Health Institute, and the Robert Woods Johnson 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: 11), clinical care (rank: 22), social and economic factors (rank: 16), and physical environment (rank: 60). Logan County's overall health factors rank is 15. This suggests, in general, the health status of Logan County residents is somewhat comparable to that of neighboring counties. Areas of concern include Logan County's smoking rate, adult obesity rate, sexually transmitted infections, and alcohol-impaired driving deaths are all less desirable than the top U.S. performers. Also, the county population per primary care providers and those who have a long commute that drive alonen are areas of concern for Logan County. All health factors variables are presented in Table 6 along with Logan 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 Logan County ranks very poorly compared to the national benchmark). The green higlighted areas are deemed as areas of strength in Logan County.

Category (Rank)	Logan County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (11)	, i			
Adult Smoking	16%	15-16%	14%	20%
Adult Obesity	32%	27-37%	26%	33%
Food Environment Index	7.5		8.6	5.9
Physical Inactivity	30%	25-34%	20%	30%
Access to Exercise Opportunities	55%		91%	74%
Excessive Drinking	14%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	42%	34-49%	13%	28%
Sexually Transmitted Infections	689		146	542
Teen Birth Rate	18	15-20	15	42
Clinical Care (22)				
Uninsured	14%	12-15%	6%	16%
Primary Care Physicians	46,000:1		1,030:1	1,590:1
Dentists	6,660:1		1,280:1	1,700:1
Mental Health Providers	580:1		330:1	260:1
Preventable Hospital Stays	56	47-65	35	60
Diabetic Monitoring	86%	78-94%	91%	78%
Mammography Screening	61%	53-68%	71%	56%
Social & Economic Factors (16)				
High School Graduation	80%		95%	83%
Some College	61%	55-67%	72%	59%
Unemployment	4.1%		3.2%	4.9%
Children in Poverty	20%	16-24%	12%	23%
Income Inequality	4.8	4.2-5.5	3.7	4.6
Children in Single-Parent Household	22%	18-27%	20%	34%
Social Associations	11.1		22.1	11.5
Violent Crime Rate	118		62	439
Injury Deaths	77	65-88	55	92
Physical Environment (60)			-	
Air-Pollution- Particulate Matter	9.5		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	14%	11-16%	9%	15%
Driving Alone to Work	82%	79-84%	72%	83%
Long Commute- Driving Alone	53%	48-57%	15%	26%

 Table 6. Health Factors (Overall Rank 15)

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. Logan County's ranking is comparable to Noble, Kingfisher and Payne Counties and is more favorable than Lincoln and Oklahoma Counties.



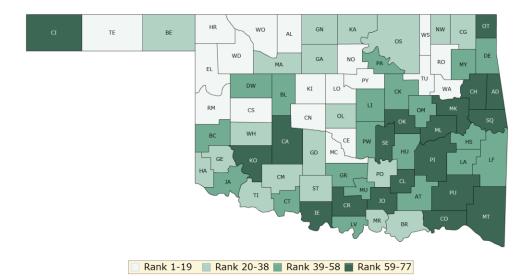
In terms of health outcomes, considered, today's health, Logan County's ranking is 6th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 7.

Category (Rank)	Logan County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (7)				
Premature Death	7,100	6,200-8,000	5,300	9,300
Quality of Life (9)				
Poor or Fair Health	16%	16-17%	12%	20%
Poor Physical Health Days	4.0	3.9-4.2	3.0	4.5
Poor Mental Health Days	4.3	4.1-4.5	3.1	4.5
Low Birth Weight	7%	6-8%	6%	8%

 Table 7. Health Outcomes (Overall Rank 6)

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. Logan County's ranking is again comparable to Noble, Kingfisher and Payne Counties and is more favorable than Lincoln and Oklahoma 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- finding beds, resources, for pediatrics and adolescents
 - Mental and behavioral health services for children- lack of servicesoutpatient services, unaware if anything is available locally- most are referred to Edmond
 - Mental health has a correlation and impact on all other mentioned items
- Medication assistance- diabetic patients struggle to afford insulin- Medicare does not cover
- Alcohol impaired driving deaths- higher rate, area to look at
- STI cases in county- this is evident in the clinics and health department
- Drug abuse and the impacts on children in county

Community Survey Methodology and Results, April 3- May 1, 2018

A survey was designed to gauge hospital usage, satisfaction, and community health needs. The survey was available in both paper and web format. Hard copies were made available at the hospital and clinics. Hard copy surveys and handouts with the survey link on it were made available at civic meetings and churches. The electronic survey link was emailed to the county health department, Chamber of Commerce, and churches. Surveys were also distributed at the first community meeting on April 3, 2018. Community members in attendance also received a follow-up email with a PDF copy of the survey and the electronic survey link. 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 Logan County.

The survey ran from April 3, 2018 to April 17, 2018. A total of 123 surveys from the Mercy Hospital Logan County medical service area were completed. Of the surveys returned, 98 were electronic responses. The survey results were presented at the May 1, 2018, community meeting.

Table 8 below shows the survey respondent representation by zip code. The largest share of respondents was from the Guthrie (73044) zip code with 91 responses or 74 percent of the total. Edmond (73012) followed with 44 responses.

Response Category	No.	%
73044- Guthrie	91	74.0%
73012- Edmond	4	3.3%
73028- Crescent	3	2.4%
73120- Oklahoma City	3	2.4%
73099- Yukon	2	1.6%
73160- Oklahoma City	2	1.6%
73027- Coyle	2	1.6%
73013- Edmond	1	0.8%
73020- Choctaw	1	0.8%
73025- Edmond	1	0.8%
73063- Mulhall	1	0.8%
73128- Oklahoma City	1	0.8%
73065- Newcastle	1	0.8%
73135- Oklahoma City	1	0.8%
73142- Oklahoma City	1	0.8%
73703- Enid	1	0.8%
73750- Kingfisher	1	0.8%
74832- Carney	1	0.8%
74023- Cushing	1	0.8%
74059- Perkins	1	0.8%
74074- Stillwater	1	0.8%
73003- Edmond	1	0.8%
30344- Atlanta, GA	1	0.8%
Total	123	100.0%

 Table 8. Zip Code of Residence

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

Primary Care Physician Visits

- 61% of respondents had used a primary care physician in the Guthrie service area during the past 24 months
- 93.4% of those responded being satisfied
- Only 30 respondents or 24.4% believe there are enough primary care physicians practicing in Guthrie
- 69.1% of the respondents would consider seeing a midlevel provider for their healthcare needs
- 71.5% responded they were able to get an appointment with their primary care physician when they needed one

Specialist Visits

Summary highlights include:

- 70.7% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 9
- Only 1.6% of specialist visits occurred in Guthrie

pe of Specialist	No.	Percent
p 5 Responses		
Cardiologist	21	16.5%
(0 visits in Guthrie)		
Orthopedist/Orthopedic Surg.	17	13.4%
(0 visits in Guthrie)		
OB/GYN	12	9.4%
(0 visits in Guthrie)		
Otolaryngologist	9	7.1%
(0 visits in Guthrie)		
Urologist	9	7.1%
(1 visit in Guthrie)		
All others	<u>59</u>	46.5%
(1 visit in Guthrie)		
Total	<u>127</u>	<u>100.0%</u>
· · · · · · · · · · · · · · · · · · ·		

Table 9. Type of Specialist Visits	Table 9.	Type	of Sp	ecialist	Visits
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Some respondents answered more than once.

Hospital Usage and Satisfaction

Survey highlights include:

- 45.3% of survey respondents that have used hospital services in the past 24 months used services at Mercy Hospital Logan County
 - Mercy Hospital Oklahoma City (15.4%), INTEGRIS Health, Edmond (6.8%) and Mercy Edmond I35 (6.0%) followed
 - The most common response for using a hospital other than Mercy Hospital Logan County was availability of specialty care (including surgery and labor and delivery) (40.3%) followed by physician referral/Transfer (19.4%)
 - The usage rate of 45.3% was lower than the state average of 55.3% for usage of other rural Oklahoma hospitals surveyed
- 94.4% of survey respondents were satisfied with the services received at Mercy Hospital Logan County
 - This is above the state average for other hospitals (86.6%)
- Most common services used at Mercy Hospital Logan County:
 - Laboratory (26.4%)
 - Emergency room (22.5%)
 - Diagnostic imaging (21.7%)

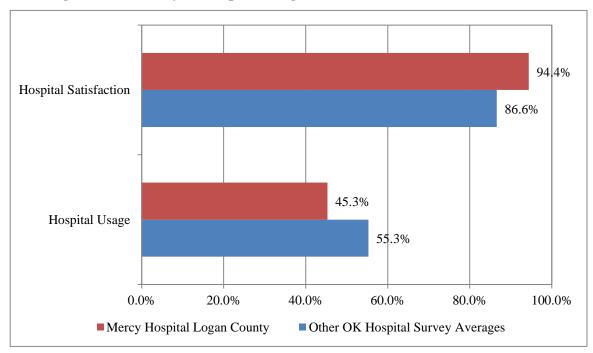


Figure 2. Summary of Hospital Usage and Satisfaction Rates

Local Healthcare Concerns and Additional Services

Survey respondents were asked what concerns them most about healthcare in their community. The most common response was Lack of physicians/Difficult to see provider/Physician turnover (21.1%) followed by No concerns/Receive good care/Don't know (17.3%). Table 10 displays all responses and the frequencies.

Table 10. Top nearlicate Concerns in the Gut		
	No.	%
Lack of physicians/Difficult to see provider/Physician turnover	28	21.1%
No Concerns/ Receive good care/Don't Know	23	17.3%
Access to specialists (10); Urologist (1); OB/GYN (1)	12	9.0%
Level of care/Limited services available	10	7.5%
Quality of care/Compassion for patient	8	6.0%
Cost of care/Cost of medications/Cost of labs	4	3.0%
Improved emergency room services/Physician coverage of ER	4	3.0%
Access to surgery	3	2.3%
EMS support/EMS transfers	2	1.5%
Losing services/Hospital	2	1.5%
Lack of mental health services	2	1.5%
Lack of ICU	1	0.8%
Need for urgent care	1	0.8%
Need for patient education for primary care visit vs. emergency	1	0.8%
Childhood obesity and diabetes	1	0.8%
Community education of health	1	0.8%
Staffing and management	1	0.8%
No response	29	21.8%
Total	133	100.0%

Table 10.	Top Healthcare Concerns in the Guthrie Area
	Top meanmeare concerns in the Guinne mea

Survey respondents also had the opportunity to identify what additional services they would like to see offered at Mercy Hospital Logan County. The most common response was collectively specialists (24.3%) followed by No additional services/Don't know (17.1%). Table 11 displays the full listing of responses.

Response Category	No.	%
Specialists: Specialists in general (11); Orthopedist (6); Gastroenterologist (4);		
Cardiologist (3); Podiatrist (3); OB/GYN (2); Dermatologist (2); Pain		
Management (1); Neurologist (1); Endocrinologist (1); Podiatrist (1);	37	24.3%
Otolaryngologist (1); Sleep specialists (1) No additional services/Don't know		
	26	17.1%
Surgery/Outpatient Surgery/Orthopedic Surgery	12	7.9%
Higher level of care/Less transfers	5	3.3%
More physicians	3	2.0%
Specialty testing/Mammograms	3	2.0%
Mental health/Counseling/Counselors	3	2.0%
More physician coverage of ED	3	2.0%
Prenatal care/Labor and Delivery	2	1.3%
After hours care/Urgent care	2	1.3%
Coworker clinic/Employee health discounts	2	1.3%
More telemedicine services	1	0.7%
More after hours wellness opportunities	1	0.7%
Obesity/Weight loss clinic	1	0.7%
Quality ED services	1	0.7%
Child care	1	0.7%
Women's health	1	0.7%
CT certification	1	0.7%
Hiring of nurse practitioners	1	0.7%
Seamless billing between Mercy facilities	1	0.7%
Lower cost of care	1	0.7%
Expanded nutrition department/Upgraded kitchen facilities	1	0.7%
Mental health beds	1	0.7%
Coffee shops	1	0.7%
Pizza within walking distance	1	0.7%
Car detailing	1	0.7%
ICU	1	0.7%
Kid friendly pediatric clinic	1	0.7%
No response	37	24.3%
Total	152	100.0%

Table 11. Additional Services Community Members Would Like to See Offered at Mercy Hospital Logan County

Primary Care Physician Demand Analysis, May 1, 2018

A demand analysis of primary care physicians was completed for the zip codes that comprise the Guthrie primary and secondary medical services areas. This analysis examined average primary care physician visit rates by gender and by age groups. Once age- and genderspecific 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 Guthrie medical services area, a total of 43,338 annual visits would occur. This would suggest that the Guthrie medical services area would need 10.4 FTE primary care physicians to meet the needs of their existing population. Table 12 displays the estimated number of visits by share of medical services area.

Guthrie, Oklahoma Medical Service Area							
Usage by Residents of Primary Service Area							
	700/		000/	050/	0.00/	050/	1000/

Table 12. Primary Care Physician Office Visits Given Usage by Local Residents in the

			0		5			
		70%	75%	80%	85%	90%	95%	100%
s of vrea	5%	32,920	35,170	37,420	39,670	41,921	44,171	46,421
v⊳ ⊑	10%	34,337	36,587	38,837	41,087	43,338	45,588	47,838
Resider Service	15%	35,754	38,004	40,254	42,504	44,755	47,005	49,255
	20%	37,171	39,421	41,671	43,921	46,172	48,422	50,672
e by ary	25%	38,588	40,838	43,088	45,338	47,589	49,839	52,089
Usage econda	30%	40,005	42,255	44,505	46,755	49,006	51,256	53,506
Usage by Secondary	35%	41,422	43,672	45,922	48,172	50,423	52,673	54,923
01	40%	42,839	45,089	47,339	49,589	51,839	54,090	56,340
	45%	44,256	46,506	48,756	51,006	53,256	55,507	57,757
	50%	45,673	47,923	50,173	52,423	54,673	56,924	59,174

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 43,338 to 44,755 total primary care physician office visits in the Guthrie area for an estimated 10.4 to 10.7 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:

- Mental health- finding beds, resources, for pediatrics and adolescents
 - Mental and behavioral health services for children- lack of servicesoutpatient services, unaware if anything is available locally- most are referred to Edmond
 - Mental health has a correlation and impact on all other mentioned items

- Drug abuse and impacts in the county- impacts on children, babies born with substance in their system
- Preventative education (Obesity, physical activity, smoking) (1)- diabetes, importance of hygiene (entire body hygiene), foot care, and eye care
 - Education and marketing of existing health services, options for after hours care
 - Meal planning and budgeting (It is offered through WIC, but it varies), God's Food Bank has been providing one-on-one education for healthy recipes, making smarter choices

Community Health Needs Implementation Strategy

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

- Preventative education-
 - The hospital has a provider who was recently certified as a kidney health coach who will be providing education to community members through a Lunch n' Learn setting. There is also a plan that this can be broadcasted on the local television channel. The overarching goal is to provide education of the need for early screening, so community members will seek this and seek treatment for kidney disease in early stages.
 - The hospital is partnering with OHAI (Oklahoma Healthy Aging Initiative) to provide various classes and services to improve mobility, eye care, self-care, healthy brain, healthy mind, and how to communicate effectively with your healthcare provider are a few of the courses covered. The hospital will be the main site for this program. Also, transportation is available if needed.
 - The social worker at the Division Clinic and the certified kidney health coach can provide information about services through the patients they serve and through the educational course to be broadcasted on the local television channel.
 - The hospital will continue to support the local backpack program through a quarterly food drive.
- Mental health
 - The overall goal is to bring in a mental health professional to be housed on part of the hospital's campus either the hospital or clinic setting. This person would provide outpatient services and services to inpatients or those in the ED in need.
 - The hospital would like to partner with the local coalition to bring awareness to the need of mental health services and removing the stigma through a community-wide event.

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 Logan County, and a copy will be available to be downloaded from the hospital's website (https://www.mercy.net/practice/mercy-hospital-logan-county). 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



Mercy Hospital Logan County Hospital Services

Inpatient Services:

Acute Inpatient Observation Swing Bed Physical Therapy Occupational Therapy Speech Therapy Laboratory Radiology- CT, MRI, Ultrasound, Mammography EKG Pharmacy Wound Care Case Management Social Services Dietary **Chaplain Service Respiratory Therapy**

Outpatient Services:

Laboratory Radiology Emergency Department Blood Transfusions Sleep Lab Physical Therapy Occupational Therapy Wound Care Speech Therapy Holter Monitor Diabetes Education

Clinics:

2 Mercy Primary Care Physician Clinics located in Logan County (Guthrie & Edmond) 2 Mercy Rural Health Clinics located in Logan County (Guthrie & Crescent) Lab & Radiology offered at Mercy Clinic South Division (Guthrie RHC) Specialty Clinic – psychiatry, podiatry, orthopedics, cardiology, hematology/oncology, pulmonologist, ophthalmology, urology, spine care/pain management

Appendix B Community Meeting Attendees

Guthrie Community Health Needs Assessment Meeting 1: Demographic Data and Economic Impact April 3, 2018

Name	Title	Organization
	Accreditation	
Mikeal Murray	Coord.	Logan County Health Department
Angela Gray	Infection Prevention	Mercy Hospital
	Asst. Wellness	Logan County Health Dept./Healthy Living
Carissa Redman	Coord	Program
Rose Gather	Practice Manager	Division Clinic/Mercy Hospital Logan Co.
Connie Burdick	Resp. Therapy Mgr.	Mercy Hospital Logan County
Dawn Dean	Radiology Manager	Mercy Hospital Logan County
Christa Haley	Case Manager	Mercy Hospital Logan County
Darcie Logan	Social Worker	Mercy Logan County
Jody Ahrnsbrak	Quality Coordinator	Mercy Hospital Logan County
Robin Channel	Director of Nursing	Mercy Hospital Logan County
Gaylene Stiles	Director, Outreach	Mercy Hospital
Courtney		
McLemore	Wellness Coord.	Logan County Health Department
MaryJo Messelt	HR Manager	Mercy
Bobby Stitt	Administrator	Mercy

Guthrie Community Health Needs Assessment Meeting 2: Health Data April 10, 2018

April 10, 2010		
Name	Title	Organization
Gaylene Stiles	Director, Outreach	Mercy Hospital
MaryJo Messelt	HR Manager	Mercy
Bobby Stitt	Administrator	Mercy
Teressa		
Hommertzheim	Logistics Supervisor	Mercy
Kim Hoisington	ED Manager	Mercy
Aiya Kelley	Direcor of Music	Lakeside UMC, State Senate Candidate
Tracy Zserdin	CEO	Guthrie Chamber
	Membership/Program	
Kati Hartley	Coord.	Guthrie YMCA
		Logan County Health Dept./Healthy Living
Carissa Redman	Asst. Wellness Coord	Program
Kristin Hersom	Assoc. Exec. Director	YMCA
	Youth and Family	
Laynea Blanchard	Coord.	YMCA
Rosa Littleton	President	Steam and Bella
Darcie Logan	Social Worker	Mercy
Jody Ahrnsbrak	Quality Coordinator	Mercy Hospital Logan County
Connie Burdick	Resp. Therapy Mgr.	Mercy Hospital Logan County
Dawn Dean	Radiology Manager	Mercy Hospital Logan County
Christa Haley	Case Manager	Mercy Hospital Logan County
Rose Gather	Practice Manager	Division Clinic/Mercy Hospital Logan Co.

Guthrie Community Health Needs Assessment Meeting 3: Survey Results, Primary Care Physician Demand Analysis, and Health Concern Prioritization

1-May-18		
Name	Title Accredidation	Organization
Mikeal Murray	Coordinator	Logan County Health Department
Taprina Milburn	Senior Care manager	Sunbeam Family Services Logan County Health Dept./Healthy Living
Carissa Redman	Asst. Wellness Coord	Program
Bobby Stitt	Administrator	Mercy
Corey Burnett	Prov. Educ. Spec.	OHCA
Angela Gray	Infection Prevention	Mercy Hospital
Darcie Logan	Social Worker	Mercy
Kacey Acker	Manager	Mercy
Aiya Kelley	Direcor of Music	Lakeside UMC, State Senate Candidate
George Kelley	Candidate, Treasurer Business Community	JAG 12
Terry Moore	Liason	Guthrie Job Corps
Gaylene Stiles Teressa	Director, Outreach	Mercy Hospital
Hommertzheim	Logistics Supervisor	Mercy
Christa Haley	Case Manager	Mercy Hospital Logan County
Dawn Dean	Radiology Manager	Mercy Hospital Logan County
MaryJo Messelt	HR Manager	Mercy
Robin Channel	Director of Nursing	Mercy Hospital Logan County

Appendix C- Meeting 1 Materials, April 3, 2018

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

Economic Data				
2016 Per Capita Income ¹	\$37,519 (33rd highest in state)			
Employment (January 2018, preliminary) ²	20,811 (0.8% from 2016)			
Unemployment (January 2018, preliminary) ²	717 (-18.4% from 2016)			
Unemployment rate (January 2018, preliminary) ²	3.7% (23rd lowest in state)			
2016 Poverty rate ³	14.5% (24th lowest in state)			
2016 Child poverty rate ³	19.8% (23rd lowest in state)			
2016 Transfer Payments ¹	\$336,992,000 (19.3% of total personal income, 21st lowest in state)			
2016 Medical Benefits as a share of Transfer Payments ¹	40.0% (27th 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	90.3% (9th highest in state)
Some College ¹	57.1% (7th highest in state)
At Least Bachelor's Degree ¹	26.6% (8th highest in state)
2015-2016 Free and Reduced Lunch Eligible ²	62.4% (28th 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	13.8% (8th lowest in state)
2015 Uninsured Rate (under 19) ¹	6.7% (4th lowest in state)
2016 Medicare share of total population ²	12.0% (5th lowest in state)
2017 Medicaid share of total population ³	17.0% (7th lowest in state)

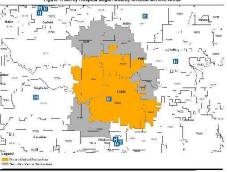
¹ U.S. Census Bureau, Small Area Health Insurance Estimates, 2015, ² Centers for Medicare & Medicaid Services, Medicare Aged and Disabled by State and County, 2016

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

Population (2012-2016)

Logan County	45,171 (7.9% from 2010)
Primary Medical Service Area	27,256 (4.5% from 2010)
Secondary Medical Service Area	16,413 (3.2% from 2010)
Oklahoma	3,8775,589 (3.3% from 2010)

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







Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Logan County	Oklahoma
12-16 ACS				
0-14	18.3%	21.8%	19.4%	20.6%
15-19	7.9%	8.9%	7.2%	6.7%
20-24	7.2%	5.4%	6.7%	7.3%
25-44	22.8%	22.2%	24.6%	26.0%
45-64	27.5%	29.8%	27.0%	24.9%
65+	16.4%	12.0%	15.0%	14.5%
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	27,256	16,413	45,171	3,875,58

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

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

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

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Logan County	Oklahoma
12-16 ACS				
White	77.5%	89.5%	82.2%	72.9%
Black	12.4%	3.8%	8.9%	7.3%
Native American ¹	4.5%	1.6%	3.5%	7.3%
Other ²	1.4%	1.3%	1.4%	8.7%
Two or more Races ³	4.3%	3.7%	4.1%	7.7%
Hispanic Origin ⁴	<u>4.7%</u>	<u>1.6%</u>	<u>5.6%</u>	<u>9.8%</u>
Total Population	27,256	16,413	45,171	3,875,589

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

For additional information, please contact: Lara Brooks, Rural Health Analyst, lara.brooks@okstate.edu Corie Kaiser, Director, corie.kaiser@okstate.edu Oklahoma Office of Rural Health Phone: 405.945.8609



This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H54RH00058 and title: Medicare Rural Hospital Flexibility Grant Program for \$568,040, 0% financed with nongovernmental sources. This information of content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.



Mercy Hospital Logan County Mercy **Economic Impact**



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

Mercy Hospital Logan County Hospital and Clinics **directly** employs **141** people with an annual payroll of over \$8.28 million including benefits

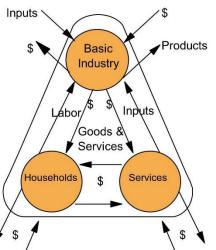
- These employees and income create an additional **50** jobs and over **\$1.77 million** in income as they interact with other sectors of the local economy
- Total impacts= 191 jobs and over \$10.06 million
- Other segments of the healthcare sector (Doctors, Nursing homes, Pharmacies, etc.) provide another 631 jobs and an additional \$25.8 million in wages
- Their interactions and transactions within the local economy create:
- Total health sector impacts= 965 jobs and nearly \$40.2 million (Including the hospital)
- Over **\$8.0 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

For additional information, please contact: Lara Brooks, Rural Health Analyst, lara.brooks@okstate.edu Corie Kaiser, Director, corie.kaiser@okstate.edu Oklahoma Office of Rural Health Phone: 405.945.8609



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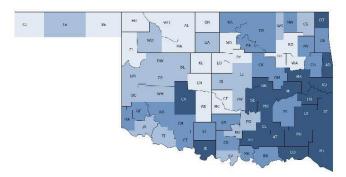
Category (Rank)	Logan County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (11)				
Adult Smoking	16%	15-16%	14%	20%
Adult Obesity	32%	27-37%	26%	33%
Food Environment Index	7.5		8.6	5.9
Physical Inactivity	30%	25-34%	20%	30%
Access to Exercise Opportunities	55%		91%	74%
Excessive Drinking	14%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	42%	34-49%	13%	28%
Sexually Transmitted Infections	689		146	542
Teen Birth Rate	18	15-20	15	42
Clinical Care (22)			151	
Uninsured	14%	12-15%	6%	16%
Primary Care Physicians	46,000:1		1,030:1	1,590:1
Dentists	6,660:1		1,280:1	1,700:1
Mental Health Providers	580:1		330:1	260:1
Preventable Hospital Stays	56	47-65	35	60
Diabetic Monitoring	86%	78-94%	91%	78%
Mammography Screening	61%	53-68%	71%	56%
Social & Economic Factors (16)				
High School Graduation	80%		95%	83%
Some College	61%	55-67%	72%	59%
Unemployment	4.1%		3.2%	4.9%
Children in Poverty	20%	16-24%	12%	23%
Income Inequality	4.8	4.2-5.5	3.7	4.6
Children in Single-Parent Household	22%	18-27%	20%	34%
Social Associations	11.1		22.1	11.5
Violent Crime Rate	118		62	439
Injury Deaths	77	65-88	55	92
Physical Environment (60)				
Air-Pollution- Particulate Matter	9.5		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	14%	11-16%	9%	15%
Driving Alone to Work	82%	79-84%	72%	83%
Long Commute- Driving Alone	53%	48-57%	15%	26%

Health Indicators and Outcomes for Logan County As part of the Community Health Needs Assessment

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





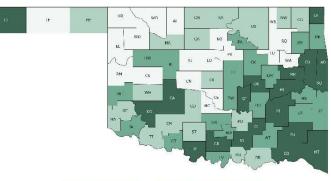


Rank 1-19 🔲 Rank 20-38 🔳 Rank 39-58 🔳 Rank 59-77

Table 2. Health Outcomes (Overan Rank 6)					
Category (Rank)	Logan County	Error Margin	Top U.S. Performers	Oklahoma	
Length of Life (7)					
Premature Death	7,100	6,200-8,000	5,300	9,300	
Quality of Life (9)					
Poor or Fair Health	16%	16-17%	12%	20%	
Poor Physical Health Days	4.0	3.9-4.2	3.0	4.5	
Poor Mental Health Days	4.3	4.1-4.5	3.1	4.5	
Low Birth Weight	7%	6-8%	6%	8%	

Table 2. Health Outcomes (Overall Rank 6)

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



📃 Rank 1-19 📃 Rank 20-38 🔳 Rank 39-58 🔳 Rank 59-77

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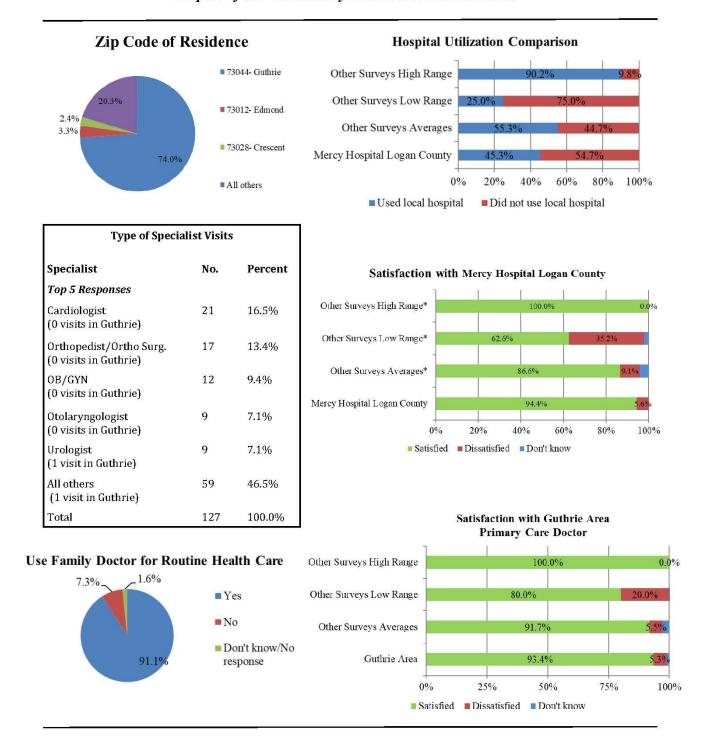
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Appendix E- Survey Form and Meeting 3 Materials, May 1, 2018

	The zip code of my residence is:	Mercy
	What is your current age:	What is your gender:
1.	Has your household used the services of a hospital in the Yes (Go to Q2) INO (Skip to Q7)	past 24 months? Don't know <i>(Skip to Q7)</i>
2.	At which hospital(s) were services received? (<i>please che</i> Mercy Hospital Logan County (Skip to Q4)	cck/list all that apply) Other (Please specify Hospital and City, then go to Q3)
3.	If you responded in Q2 that your household received care why did you or your family member choose that hospital? Physician referral Closer, more convenient location Insurance reasons	
4.	If you responded in Q2 that your household received care service(s) were used? Diagnostic imaging (X-ray, CT, Ultrasound) Laboratory Outpatient infusion/Shots Physician services Physical or speech therapy	 at Mercy Hospital Logan County, what hospital Hospital Inpatient Skilled nursing (swing bed) Emergency room (ER) Other (<i>Please list below</i>)
5.	How satisfied was your household with the services you Satisfied Dissatisfied	received at Mercy Hospital Logan County?
6.	Why were you satisfied/dissatisfied with services receive	d at Mercy Hospital Logan County?
7.	Has your household been to a specialist in the past 24 mo	
8.	What type of specialist has your household been to in the	past 24 months and in which city were they located?
0.	Type of Specialist	City
	Did the specialist request further testing, laboratory work	

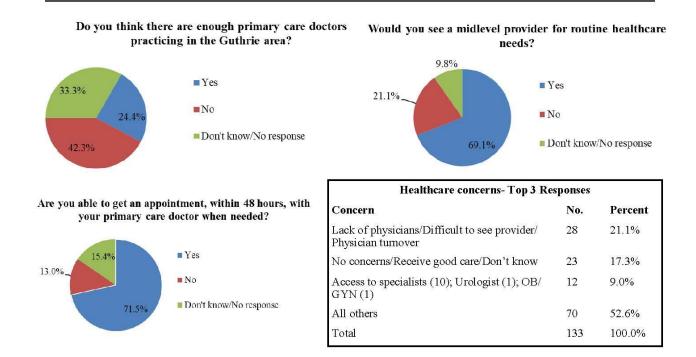
11.	Do you use a primary care p Yes (Skip to Q13)	bhysician for most of your routing No (Go to Q12)	ine health care? Don't know <i>(Skip to Q</i>	13)
12.	If no, then what kind of mea Tribal Health Center Income Based Health C Mid-Level Clinic (Nurs Health Department		Dutine care? Emergency Room/Ho Specialist Other <i>(Please list below)</i>	-
13.	Has your household been to Yes (Go to Q14)	a primary care physician in th	e Guthrie area? Don't know <i>(Skip to Qi</i>	6)
14.	How satisfied was your hou Satisfied	sehold with the quality of care Dissatisfied	received in the Guthrie ar Don't know	ea?
15.	Why were you satisfied/dise	satisfied with the care received	in the Guthrie area?	
16.	Do you think there are enou	ngh primary care physician doc No	tors practicing in the Guth	rie area?
17.	Would you consider seeing Yes	a nurse practitioner or physicia	an assistant for your routin Don't know	e healthcare needs?
18.	Are you able to get an appo	intment, within 48 hours, with	your primary care physici.	an when you need one?
19.	Have you used the services	of a convenient care or an after No	r hours clinic in the past 1	2 months?
20.	Would you utilize convenie	nt care or after hours services on No	offered in Guthrie?	
21.	What concerns you most ab	out health care in the Guthrie a	area?	
22.	What other services would	you like to see offered at Merc	y Hospital Logan County?	
23.	Are you aware of any comm Yes Please list the community	nunity programs offered by the No brogram(s)	hospital? Don't know	Please mail completed survey to:
24.		e notified of community events with 1=most preferred and 5=4 Email Website		Mercy Hospital Logan County 200 Academy Rd. Guthrie, OK 73044 Or, return to hospital administration

Mercy Hospital Logan County Community Survey Results As part of the Community Health Needs Assessment

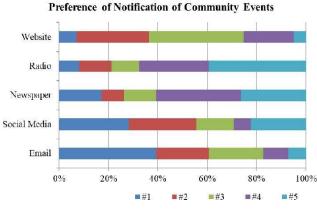








Additional Services to Offer- Top 3 Responses							
Services	No.	Percent					
Specialists: Specialists in general (11); Orthopedist (6); Gastroenterologist (4); Cardiologist (3); Podiatrist (3); OB/GYN (2); Dermatologist (2); Pain Management (1); Neurologist (1); Endocrinologist (1); Podiatrist (1); Otolaryngologist (1); Sleep specialists (1)	37	24.3%					
No additional services/Don't know	26	17.1%					
Surgery/Outpatient Surgery/Orthopedic Surgery	12	7.9%					
All others	77	50.7%					
Total	152	100.0%					



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Primary Care Physician Demand Analysis for the Guthrie Medical Service

Area

As part of the Community Health Needs Assessment

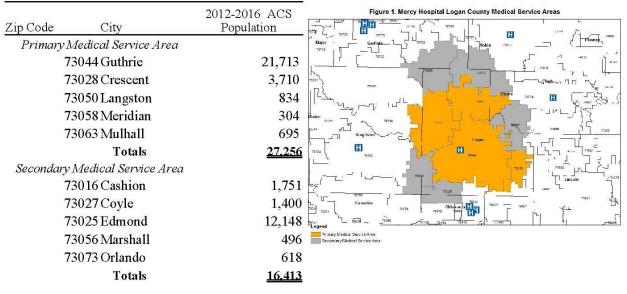


Table 1. Mercy Hospital Logan County Medical Service Areas

SOURCE: Population data from the U.S. Bureau of Census, 2012-2016 American Community Survey

		PRIMAR	Y MEDICA	AL SERVICE	LAKEA				
		Male			Female				
	12-16	Visit		12-16	Visit		Total		
Age	Population	Rate ^[3]	Visits	Population	Rate ^[3]	Visits	Visits		
Under 15	2,624	2.0	5,248	2,351	2.1	4,937	10,185		
15-24	2,190	2.4	5,256	1,927	1.2	2,312	7,568		
25-44	2,928	3.0	8,784	3,278	1.3	4,261	13,045		
45-64	3,616	4.2	15,187	3,868	3.1	11,991	27,178		
65-74	1,251	6.1	7,631	1,317	5.6	7,375	15,006		
75+	840	7.4	6,216	1,066	8.0	8,528	14,744		
Total	13,449		48,322			39,405	87,727		
	1983			Ê					

Table 1a. Annual Primary Care Physician Office Visits Generated in the Guthrie, Oklahoma, Medical Service Areas





		Male			Female			
	12-16	Visit		12-16	Visit		Total	
Age	Population	Rate ^[3]	Visits	Population	Rate ^[3]	Visits	Visits	
TT. 1. 15	1 001	2.0	2 500	1.606		2.541	= 200	
Under 15	1,891	2.0	3,782		2.1	3,541	7,323	
15-24	1,290	2.4	3,096	1,044	1.9	1,984	5,080	
25-44	1,679	3.0	5,037	1,960	2.9	5,684	10,721	
45-64	2,398	4.2	10,072	2,495	3.8	9,481	19,553	
65-74	646	6.1	3,941	630	6.0	3,780	7,721	
75+	281	7.4	2,079	413	6.7	2,767	4,847	
Total	8,185		28,007	19535 - 2786127861218702		27,236	55,243	

Table 1b. Annual Primary Care Physician Office Visits Generated in the Guthrie, Oklahoma,

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 Guthrie,
	Oklahoma Medical Service Area

	-	Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Second- ary Service Area	5%	32,920	35,170	37,420	39,670	41,921	44,171	46,421
	10%	34,337	36,587	38,837	41,087	43,338	45,588	47,838
	15%	35,754	38,004	40,254	42,504	44,755	47,005	49,255
	2070	37,171	39,421	41,671	43,921	46,172	48,422	50,672
	/) ~/0	38,588	40,838	43,088	45,338	47,589	49,839	52,089
	200/-	40,005	42,255	44,505	46,755	49,006	51,256	53,506
	250/	41,422	43,672	45,922	48,172	50,423	52,673	54,923
	40%	42,839	45,089	47,339	49,589	51,839	54,090	56,340
	45%	44,256	46,506	48,756	51,006	53,256	55,507	57,757
	50%	45,673	47,923	50,173	52,423	54,673	56,924	59,174

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 43,338 to 44,755 total primary care physician office visits in the Guthrie area for an estimated 10.4 to 10.7 Total Primary Care Physicians.

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

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