

# Cleveland Area Hospital Community Health Needs Assessment Summary and Implementation Strategy

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Oklahoma Office of Rural Health

OSU Center for Rural Health

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## Introduction

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

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

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

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

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

- Describe how the hospital facility plans to meet the health need, or
- Identify the health need as one the hospital facility does not intend to meet and explain why the hospital facility does not intend to meet the health need<sup>1</sup>

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.<sup>2</sup>

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<sup>1</sup> 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.

<sup>2</sup> 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 including 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 Cleveland Area Hospital 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**

Cleveland Area Hospital worked with the Oklahoma Office in 2015 to complete their second 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: More providers (to alleviate transportation issues)

Service Implemented/Partnerships: Since the last CHNA, one APRN and 1-part time physician were added to increase the number of providers to 4 FTE. This has substantially increased the number of same day appointments as well as an increase in the number of clinic visits per month. The average monthly clinic visit number was 562 in 2017. This increase in the number of providers has resulted in an average monthly clinic visit number of 793.

Priority: Outreach and education (nutrition, health screenings, etc.)

Service Implemented/Partnerships: Annual Senior Fair: This event includes blood pressure screenings, blood sugar checks, and balance screenings. This event also has vendors including service providers, Life Flight, home health, an insurance agent was also present to discuss changes and understanding Medicare. This event serves 40-50 individuals annually.

Priority: Outreach and education (nutrition, health screenings, etc.)

Service Implemented/Partnerships: Respiratory therapy- This is a new service line which will include community education around the topic of smoking, juuls, and healthy respiratory health. Since this is a new service, there is not a count of those who have benefited to date.

Priority: Outreach and education (nutrition, health screenings, etc.)

Service Implemented/Partnerships: Monthly Health Educational Sessions at Senior Citizens' Centers: This outreach focuses on a monthly topic (breast cancer awareness, etc.). A nurse or professional attends to provide expert advice and insight. The hospital also provides a healthy snack for these gatherings along with the recipe. A total of six locations are reached including Cleveland, Hominy, Mannford, Pawnee, Oilton, and Westport. The hospital also partnered with the local transit service to bring local seniors to the hospital for programming. Collectively, this monthly outreach activity reaches 90-100 seniors in the area.

Priority: Transportation

Service Implemented/Partnerships: The hospital partnered with UCAP on a grant funded design to provide transportation for dialysis patients. Further efforts include the possibility of two additional grants to provide transportation support to all rural residents (regardless of diagnosis). There is now a permanent hub in Cleveland and hired a driver that is dedicated to the Cleveland Area. Over the past five months in 2018, this service provided 376 trips, over those 100 were senior riders and 53 disabled riders.

Priority: Diabetes including management and education

Service Implemented/Partnerships: Diabetic Education Classes: Nutrition classes are held monthly at Cleveland Area Hospital led by a dietician. This is an ongoing event. Over the course of a year, this event reaches an average of 24-36 community members.

Priority: Substance abuse/Mental health

Service Implemented/Partnerships: The hospital hired an APRN at the clinic who specializes in medication management of pediatric behavior health patients (under the age of 21). She currently sees patients two days per week. This service sees roughly 30 patients per month. Therefore, this service has benefited at least 30 pediatric patients per month on an ongoing basis.

Priority: Substance abuse/Mental health

Service Implemented/Partnerships: Telehealth Crisis Intervention: This is a collaboration with Edwin Fair, Stillwater branch location. This service provides EODs in the ED and counseling services for patients in the ED as needed. This service has benefited an average of 3-5 patients per month. This allows the patients to receive timely and appropriate care during a crisis with a follow up.

## Awareness of Community Outreach

A question was included on the community survey (complete methodology detailed on page 17) to gauge survey respondents' awareness of current community programs offered by the hospital. Fifty-three individuals or 27.9 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 program was yoga and Tai Chi. Diabetic education and mammograms followed. The table below outlines all programs listed by the survey respondents.

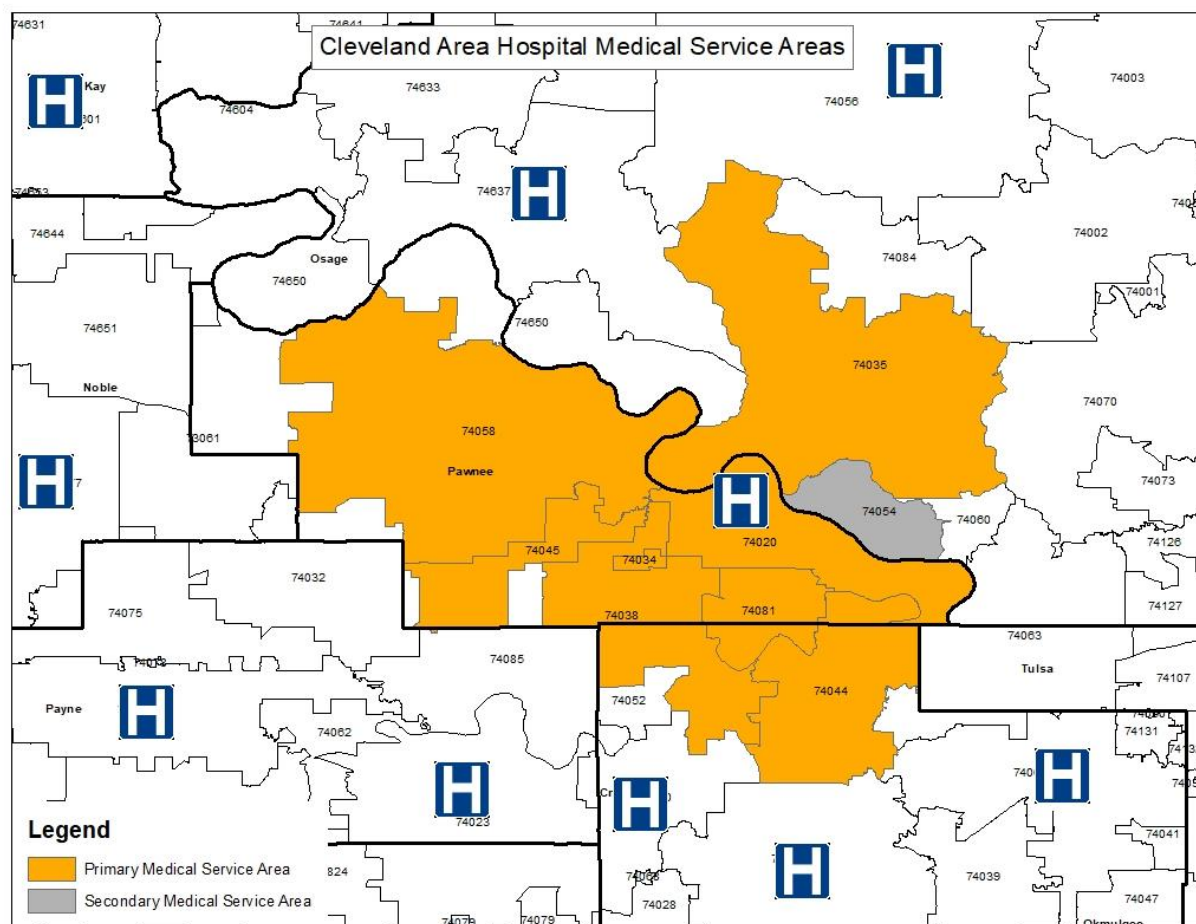
### Please list community programs:

Response Category	No.	%
Yoga/Tai Chi	10	14.7%
Diabetic education	8	11.8%
Mammograms/October Mammograms/Oklahoma Project Woman	7	10.3%
Rehabilitation/Physical therapy/Occupational therapy	5	7.4%
Senior services	5	7.4%
Annual sports physicals	5	7.4%
Free health clinic	4	5.9%
Radiology/MRI	3	4.4%
Swing bed	3	4.4%
Health fairs	2	2.9%
Nutrition classes	2	2.9%
Auxiliary/Volunteers at hospital	2	2.9%
Physical therapy	1	1.5%
Contract for transport services for patients in need	1	1.5%
Mental health	1	1.5%
Telemedicine	1	1.5%
Outreach programs	1	1.5%
Screenings	1	1.5%
Certified Healthy Partner	1	1.5%
Women's health month	1	1.5%
Meals on wheels	1	1.5%
Manna Café	1	1.5%
Food pantry	1	1.5%
Escape ministries	1	1.5%
Total	68	100.0%



## Cleveland Area Hospital Medical Services Area Demographics

Figure 1 displays the Cleveland Area Hospital medical services area. Cleveland Area 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. Cleveland Area Hospital Medical Service Areas**

City	County	Hospital	No. of Beds
Cleveland	Pawnee	Cleveland Area Hospital	14
Stillwater	Payne	Stillwater Medical Center	117
Cushing	Payne	Cushing Regional Hospital	99
Drumright	Creek	Drumright Regional Hospital	15
Bristow	Creek	Bristow Medical Center	30
Pawhuska	Osage	Pawhuska Hospital	25
Fairfax	Osage	Fairfax Memorial Hospital	15
Perry	Noble	Perry Memorial Hospital	26

As delineated in Figure 1, the primary medical service area of Cleveland Area Hospital includes the zip code area of Cleveland, Hallett, Jennings, Terlton, Mannford, Hominy, Prue, and

Pawnee. The primary medical service area experienced a population increase of 0.9 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced a population decrease from the 2010 Census to the latest available, 2012-2016, American Community Survey.

The secondary medical services area is comprised of the zip code area of Osage. The secondary medical service area experienced an increase in population of 9.0 percent from 2000 to 2010 followed by another increase of 0.9 percent from 2010 to the 2012-2016 American Community Survey.

**Table 1. Population of Cleveland Area Hospital Medical Service Area**

Population by Zip Code		2000 Population	2010 Population	2012-2016 Population	% Change 2000-2010	% Change 2010-12-16
<i>Primary Medical Service Area</i>						
74020	Cleveland	7,604	7,294	7,214	-4.1%	-1.1%
74034	Hallett	250	150	146	-40.0%	-2.7%
74038	Jennings	2,030	2,254	2,094	11.0%	-7.1%
74081	Terlton	1,801	1,837	1,748	2.0%	-4.8%
74044	Mannford	6,897	7,406	7,549	7.4%	1.9%
74035	Hominy	4,860	4,565	4,248	-6.1%	-6.9%
74060	Prue	511	586	492	14.7%	-16.0%
74058	Pawnee	4,156	4,259	4,095	2.5%	-3.9%
<b>Total</b>		<b>28,109</b>	<b>28,351</b>	<b>27,586</b>	<b>0.9%</b>	<b>-2.7%</b>
<i>Secondary Medical Service Area</i>						
74054	Osage	774	844	852	9.0%	0.9%
<b>Total</b>		<b>774</b>	<b>844</b>	<b>852</b>	<b>9.0%</b>	<b>0.9%</b>

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

Table 2 displays the current existing medical services in the primary service area of the Cleveland Area Hospital medical services area. Most of these services would be expected in a service area of Cleveland's size: seven physician offices, an Indian Health Services facility, six dental offices, four optometry offices, and three chiropractic offices. Cleveland Area Hospital is

a 14 bed critical access hospital located in Pawnee County. The hospital provides acute and swing bed inpatient services, 24-hour emergency department, MRI, CT, DEXA Scan, mammography, financial counseling, and dietary counseling. A complete list of hospital services and community involvement activities can be found in Appendix A.

**Table 2. Existing Medical Services in the Cleveland Area Hospital Medical Services Area**

<b>Count</b>	<b>Service</b>
1	Hospital: Cleveland Area Hospital
7	Physician offices and clinics
1	Indian Health Services facility
6	Dental offices
4	Optometry offices
3	Chiropractic offices
3	Nursing homes
4	Home health and/or hospice providers
3	EMS providers
1	County Health Department: Pawnee County
1	Physical therapy provider
1	Durable medical equipment provider
6	Mental health/Behavioral health providers
1	Community service provider
4	Pharmacies

In addition to examining the total population trends of the medical service areas, it is important to understand the demographics of those populations. Table 3 displays trends in age groups for the primary and secondary medical service areas as well as Pawnee County in comparison to the state of Oklahoma. Overall, the over 65 age group has experienced an increase in population across most 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 18.6 percent of the primary medical service area, 15.3 percent of the secondary medical service area, and 18 percent of the population of Pawnee County. The 45-64 age group accounts for the largest share of the population in the primary (28.2%) service area and Pawnee County (28.1%). This is compared to the state share of 24.9 percent of the total population.

**Table 3. Percent of Total Population by Age Group for Cleveland Area Hospital Medical Service Areas, Pawnee County and Oklahoma**

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Pawnee County	Oklahoma
<b>2010 Census</b>				
0-14	20.1%	21.3%	20.2%	20.7%
15-19	6.8%	6.6%	6.9%	7.1%
20-24	4.9%	3.9%	4.8%	7.2%
25-44	24.5%	22.4%	22.9%	25.8%
45-64	28.3%	32.3%	28.7%	25.7%
65+	<u>15.4%</u>	<u>13.4%</u>	<u>16.4%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	28,351	844	16,577	3,751,351
<b>12-16 ACS</b>				
0-14	18.4%	30.6%	19.6%	20.6%
15-19	6.6%	4.0%	6.9%	6.7%
20-24	5.3%	4.8%	5.2%	7.3%
25-44	23.0%	20.5%	22.2%	26.0%
45-64	28.2%	24.8%	28.1%	24.9%
65+	<u>18.6%</u>	<u>15.3%</u>	<u>18.0%</u>	<u>14.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	27,586	852	16,444	3,875,589

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2012-2016 ([www.census.gov](http://www.census.gov) [September 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 Pawnee County and both medical service areas. The Hispanic Origin population accounted for 2.7 percent of the total population from 2012-2016 in Pawnee County. A more notable trend in Pawnee County is the share of Native American population. This cohort accounted for 11.3 percent of the population in Pawnee County compared to 7.3 percent at the state level.

**Table 4. Percent of Total Population by Race and Ethnicity for Cleveland Area Hospital Medical Service Areas, Pawnee County and Oklahoma**

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Pawnee County	Oklahoma
<b>2010 Census</b>				
White	78.8%	80.8%	80.6%	72.2%
Black	2.4%	0.2%	0.7%	7.4%
Native American <sup>1</sup>	11.7%	8.3%	11.6%	8.6%
Other <sup>2</sup>	1.0%	2.3%	0.9%	5.9%
Two or more Races <sup>3</sup>	6.1%	8.4%	6.2%	5.9%
Hispanic Origin <sup>4</sup>	2.1%	4.0%	2.0%	<u>8.9%</u>
Total Population	28,351	844	16,577	3,751,351
<b>12-16 ACS</b>				
White	78.4%	85.7%	79.8%	72.9%
Black	2.0%	0.0%	1.1%	7.3%
Native American <sup>1</sup>	12.7%	9.0%	11.3%	7.3%
Other <sup>2</sup>	0.8%	2.5%	0.6%	8.7%
Two or more Races <sup>3</sup>	6.1%	2.8%	7.2%	7.7%
Hispanic Origin <sup>4</sup>	<u>2.7%</u>	<u>2.7%</u>	<u>2.7%</u>	<u>9.8%</u>
Total Population	27,586	852	16,444	3,875,589

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

<sup>1</sup> Native American includes American Indians and Alaska Natives.

<sup>2</sup> Other is defined as Asian Americans, Native Hawaiians, Pacific Islanders and all others.

<sup>3</sup> Two or more races indicate a person is included in more than one race group.

<sup>4</sup> Hispanic population is not a race group but rather a description of ethnic origin; Hispanics are included in the five race groups.

## **Summary of Community Meetings**

Cleveland Area Hospital partnered with the Pawnee County Health Coalition to complete their community meetings. These three meetings were held as a part of the regularly scheduled coalition meetings between September 17, 2018 to December 3, 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:

- Cleveland Area Hospital representatives
- Pawnee County Health Department
- Pawnee Nation
- Pawnee County Extension Office
- CREOKS
- Cimarron Transportation
- Strong Mind
- Cleveland Chamber of Commerce

Average attendance at the community meetings was about 10-15 community members. This group was selected as a partner due to their cross section representation of Pawnee County. Also, this group represents the public health sector of Pawnee County, and 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, September 17, 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 distributed at this meeting (and is summarized below).

Table 5 below summarizes the overall economic impact of the health sector on the Pawnee 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 Cleveland Area Hospital medical service area employs 808 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 1,022 FTE employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$49 million. When the

appropriate income multiplier is applied, the total income impact is over \$55.2 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 29.5% of personal income in Oklahoma 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 nearly \$16.3 million spent locally, generating \$162,985 on a 1% tax. A copy of the meeting materials that were distributed can be found in Appendix C.

**Table 5. Cleveland Area Hospital Medical Service Area Health Sector Impact on Employment and Income, and Retail Sales and Sales Tax**

Health Sectors	Employment			Income			Retail	1 Cent
	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	130	1.29	168	\$7,783,185	1.17	\$9,130,018	\$2,693,355	\$26,934
Physicians, Dentists & Other Medical Professionals	247	1.24	307	\$19,813,166	1.11	\$22,087,553	\$6,515,828	\$65,158
Nursing Home & Home Health	274	1.34	367	\$10,878,689	1.11	\$12,081,690	\$3,564,098	\$35,641
Other Medical & Health Services	110	1.13	124	\$5,785,511	1.12	\$6,492,437	\$1,915,269	\$19,153
Pharmacies	<u>47</u>	1.22	<u>57</u>	<u>\$4,806,888</u>	1.14	<u>\$5,457,467</u>	<u>\$1,609,953</u>	<u>\$16,100</u>
<b>Total</b>	<b>808</b>		<b>1,022</b>	<b>\$49,067,439</b>		<b>\$55,249,165</b>	<b>\$16,298,504</b>	<b>\$162,985</b>

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

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



## **Health Data, October 15, 2018**

A community meeting was held October 15, 2018, to examine various sources of local health data. Various sources of health data were examined including data from the County Health Rankings and Roadmaps Program through the University of Wisconsin Population Health Institute, and the Robert Wood Johnson Foundation. The County Health Rankings program evaluates and ranks counties based on two distinct areas: Health Factors and Health Outcomes. Along with these two areas counties receive an overall rank within their state; therefore 1=best and 77=worst.

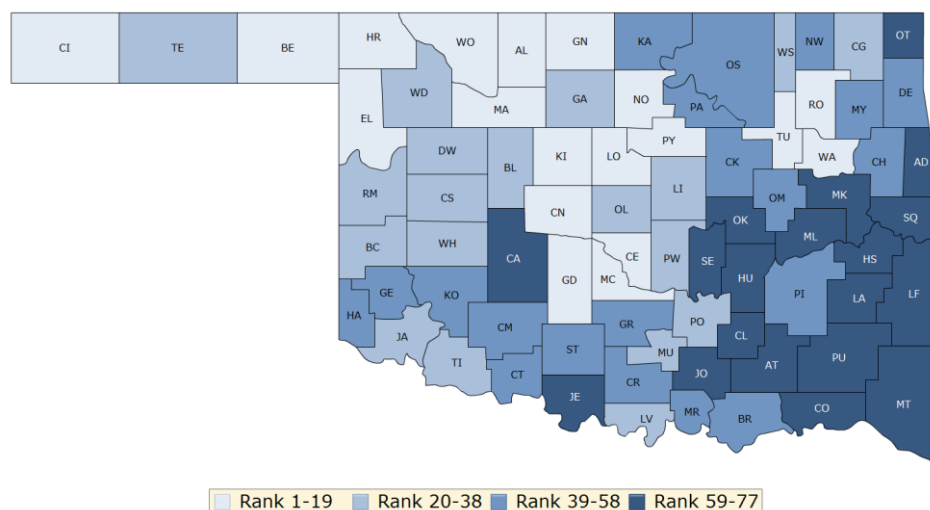
Health factors, considered tomorrow's health, are comprised of health behaviors (rank: 26), clinical care (rank: 45), social and economic factors (rank: 44), and physical environment (rank: 40). Pawnee County's overall health factors rank is 41. This suggests, in general, the health status of Pawnee County residents is somewhat comparable to that of neighboring counties. Areas of concern include Pawnee County's smoking rate, adult obesity rate, and teen birth rate are all less desirable than the top U.S. performers. Also, the rate of uninsured individuals, the primary care physician rate per population, the number of preventable hospital stays, diabetic monitoring and rate of mammography screening of Medicare patients are all areas of concern in Pawnee County. In terms of physical environment, the share of the county population who had a long commute driving alone was higher than the top performers and Oklahoma. All health factors variables are presented in Table 6 along with Pawnee 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 Pawnee County ranks very poorly compared to the national benchmark). The green highlighted areas are identified as areas of strength for Pawnee County.

**Table 6. Health Factors (Overall Rank 41)**

Category (Rank)	Pawnee County	Error Margin	Top U.S. Performers	Oklahoma
<b>Health Behaviors (26)</b>				
Adult Smoking	18%	18-19%	14%	20%
Adult Obesity	35%	29-42%	26%	33%
Food Environment Index	8.0		8.6	5.9
Physical Inactivity	34%	27-41%	20%	30%
Access to Exercise Opportunities	67%		91%	74%
Excessive Drinking	13%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	14%	5-27%	13%	28%
Sexually Transmitted Infections	384		146	542
Teen Birth Rate	44	37-50	15	42
<b>Clinical Care (45)</b>				
Uninsured	17%	15-19%	6%	16%
Primary Care Physicians	3,290:1		1,030:1	1,590:1
Dentists	1,270:1		1,280:1	1,700:1
Mental Health Providers	820:1		330:1	260:1
Preventable Hospital Stays	80	66-93	35	60
Diabetic Monitoring	76%	67-85%	91%	78%
Mammography Screening	50%	41-59%	71%	56%
<b>Social &amp; Economic Factors (44)</b>				
High School Graduation	86%		95%	83%
Some College	51%	47-56%	72%	59%
Unemployment	6.7%		3.2%	4.9%
Children in Poverty	22%	16-28%	12%	23%
Income Inequality	4.2	3.8-4.5	3.7	4.6
Children in Single-Parent Household	33%	28-38%	20%	34%
Social Associations	12.2		22.1	11.5
Violent Crime Rate	231		62	439
Injury Deaths	128	103-152	55	92
<b>Physical Environment (40)</b>				
Air-Pollution- Particulate Matter	9.2		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	12%	10-14%	9%	15%
Driving Alone to Work	79%	77-82%	72%	83%
Long Commute- Driving Alone	48%	44-52%	15%	26%

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

The following figure depicts each county's rank by shade. Pawnee County's overall health factors ranking is less favorable than Payne and Noble Counties, and is comparable to Osage and Creek Counties.



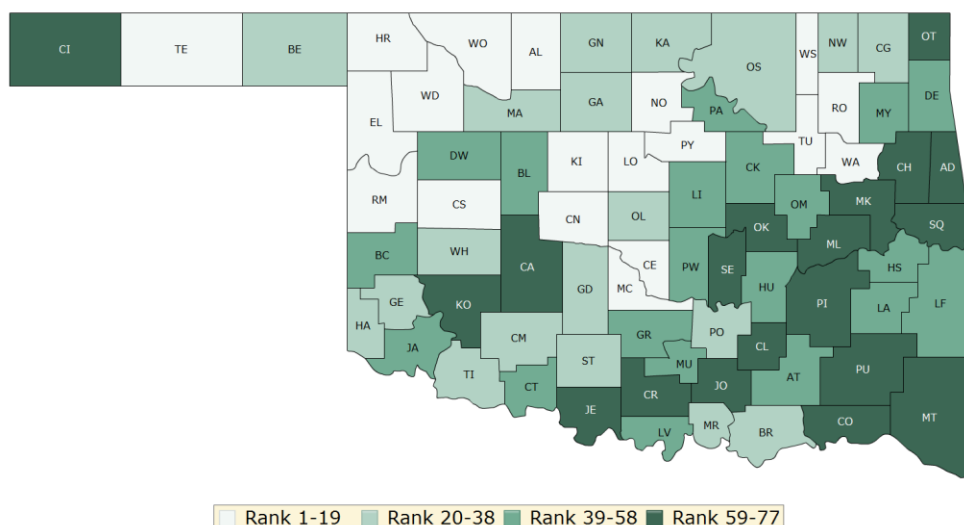
In terms of health outcomes, considered, today's health, Pawnee County's ranking is 47th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 7.

**Table 7. Health Outcomes (Overall Rank 47)**

Category (Rank)	Pawnee County	Error Margin	Top U.S. Performers	Oklahoma
<b>Length of Life (53)</b>				
Premature Death	11,200	9,300-13,100	5,300	9,300
<b>Quality of Life (40)</b>				
Poor or Fair Health	19%	18-19%	12%	20%
Poor Physical Health Days	4.4	4.3-4.6	3.0	4.5
Poor Mental Health Days	4.6	4.4-4.8	3.1	4.5
Low Birth Weight	8%	7-10%	6%	8%

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

The following figure shows county health outcomes rankings by shades. Pawnee County's ranking is less favorable than most of the surrounding counties. Pawnee County's ranking is comparable to Creek County. 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:

- Access to food is still a concern per local expertise
- Rate of physical inactivity- access to exercise opportunities in town, but not for those who live close or in more rural areas
- Drug use: Illicit and prescription
- Eating habits
- Uninsured
- Child abuse, neglect and domestic abuse
- Mental health
- Obesity

### **Community Survey Methodology and Results, September 17, 2018-December 3, 2018**

A survey was designed to gauge hospital usage, satisfaction, and community health needs. The survey was available in both paper and web format. The survey link was posted on the Facebook page and all social media outlets. Hard copy surveys were made available at provider offices, the hospital, civic meetings (Pawnee County Economic Development and

Cleveland City). Survey were also distributed at the Senior Fair and the six monthly senior meetings. A representative from the hospital emailed the survey to the local Chamber and all attendees from the 2015 CHNA. Surveys were also distributed at the first community meeting on September 17, 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 Cleveland Area Hospital.

The survey ran from September 17, 2018 to October 19, 2018. A total of 190 surveys from the Cleveland Area Hospital medical service area were completed. Of the surveys returned, 159 were electronic responses, and 31 were hard copy surveys. The survey results were presented at the December 3, 2018, community meeting.

Table 8 below shows the survey respondent representation by zip code. The largest share of respondents was from the Cleveland (74020) zip code with 107 responses or 56.3 percent of the total. Pawnee (13.2%) and Hominy (10.5%) followed.

**Table 8. Zip Code of Residence**

Response Category	No.	%
74020- Cleveland	107	56.3%
74058- Pawnee	25	13.2%
74035- Hominy	16	8.4%
74044- Mannford	10	5.3%
74081- Terlton	5	2.6%
74038- Jennings	5	2.6%
74034- Hallett	3	1.6%
74063- Sand Springs	2	1.1%
74045- Maramec	2	1.1%
74060- Prue	1	0.5%
74070- Skiatook	1	0.5%
74054- Osage	1	0.5%
74056- Pawhuska	1	0.5%
74074- Stillwater	1	0.5%
74075-Stillwater	1	0.5%
74079- Stroud	1	0.5%
74084- Wynona	1	0.5%
74650- Ralston	1	0.5%
74875- Tryon	1	0.5%
74023- Cushing	1	0.5%
74021- Collinsville	1	0.5%
74010- Bristow	1	0.5%
73061- Morrison	1	0.5%
No Response	1	0.5%
<b>Total</b>	<b>190</b>	<b>100.0%</b>

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

***Primary Care Physician Visits***

- 59.5% of respondents had used a primary care physician in the Cleveland service area during the past 24 months
- 89.4% of those responded being satisfied
- Only 54 respondents or 28.4% believe there are enough primary care physicians practicing in Cleveland
- 65.8% of the respondents would consider seeing a midlevel provider for their healthcare needs

- 68.4% responded they were able to get an appointment with their primary care physician when they needed one

### ***Specialist Visits***

Summary highlights include:

- 62.1% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 9
- Only 1.1% of specialist visits occurred in Cleveland

**Table 9. Type of Specialist Visits**

Type of Specialist	No.	Percent
<b><i>Top 5 Responses</i></b>		
Cardiologist (1 visit in Cleveland)	22	12.9%
Orthopedist/Ortho Surg. (0 visits in Cleveland)	22	12.9%
Neurologist/Neurosurgeon (0 visits in Cleveland)	17	10.0%
Otolaryngologist (0 visits in Cleveland)	12	7.1%
Gastroenterologist (0 visits in Cleveland)	12	7.1%
All others (1 visit in Cleveland)	<u>74</u>	<u>43.5%</u>
<b>Total</b>	<u>170</u>	<u>100.0%</u>

Some respondents answered more than once.

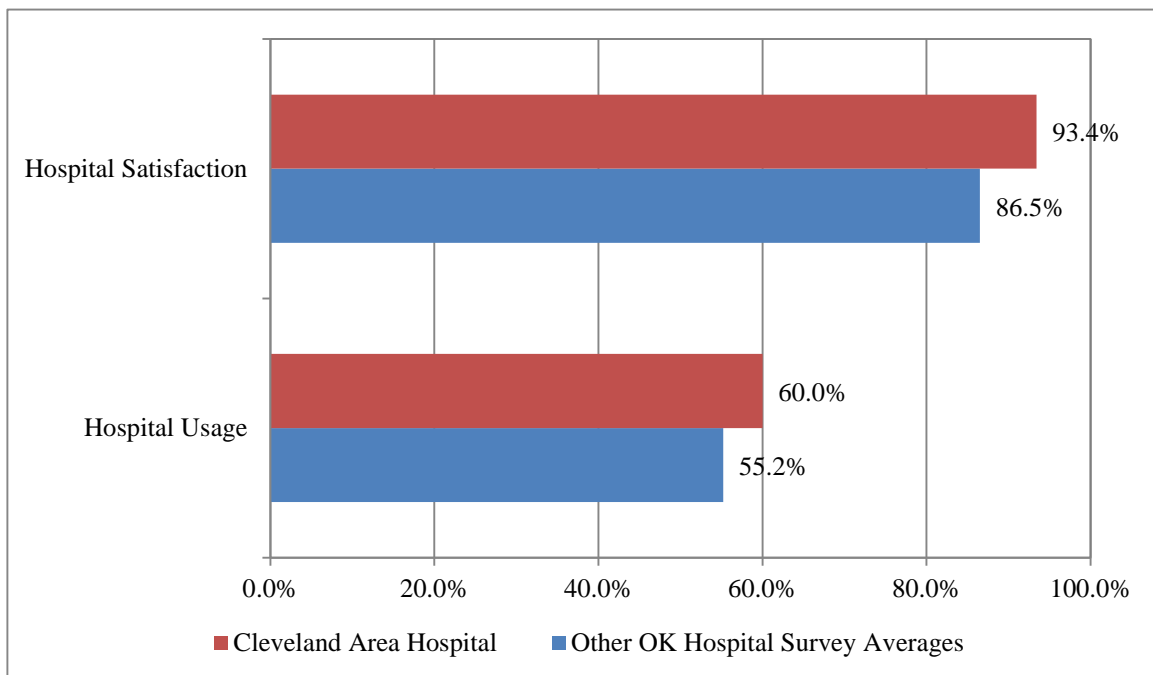
### ***Hospital Usage and Satisfaction***

Survey highlights include:

- 60% of survey respondents that have used hospital services in the past 24 months used services at Cleveland Area Hospital
  - o Hillcrest HealthCare System, all Tulsa locations (7.2%), St. John Health System, all locations (7.2%), and St. Francis Hospital, Tulsa (6.1%) followed
  - o The most common response for using a hospital other than Cleveland Area Hospital was physician referral (33.3%) followed by availability of specialty care (including surgery and labor and delivery) (28.9%)

- The usage rate of 60% was higher than the state average of 55.2% for usage of other rural Oklahoma hospitals surveyed
- 93.4% of survey respondents were satisfied with the services received at Cleveland Area Hospital
  - This is above the state average for other hospitals (86.5%)
- Most common services used at Cleveland Area Hospital:
  - Diagnostic imaging (28.1%)
  - Emergency room (27.4%)
  - Laboratory (25.2%)

**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 no concerns/receive good care/don't know (16.8%). Lack of providers/difficult to see provider/physician turnover followed with 8.9 percent of the survey responses. Table 10 displays all responses and the frequencies.

**Table 10. Top Healthcare Concerns in the Cleveland Area**

	No.	%
No Concerns/ Receive good care/Don't Know	32	16.8%
Lack of physicians/Difficult to see provider/Physician turnover	17	8.9%
Access to specialists	14	7.4%
Level of care/Limited services available	12	6.3%
Quality of care/Compassion for patient/Negative previous experiences	8	4.2%
Future of healthcare/Keeping local services	8	4.2%
Lack of afterhours care/Urgent care	5	2.6%
Outdated equipment and hospital/Practices/Training	4	2.1%
Cost of care/Cost for uninsured	3	1.6%
Lack of imaging/MRI	2	1.1%
Lack of surgery	2	1.1%
HIPPA	1	0.5%
Lack of rehabilitation services	1	0.5%
Need wheelchair access for showers at hospital	1	0.5%
Distance to services	1	0.5%
Lack of mental health services	1	0.5%
Transportation	1	0.5%
Administration	1	0.5%
EMS Services	1	0.5%
Poverty/Apathy	1	0.5%
Low online ratings	1	0.5%
Lack of wellness programs after 5:00 pm	1	0.5%
Lack of knowledge of what is available	1	0.5%
No response	71	37.4%
Total	190	100.0%

Survey respondents also had the opportunity to identify what additional services they would like to see offered at Cleveland Area Hospital. The most common response was specialists, collectively (19.2%). No additional services/satisfied with what is available/don't know followed with 16.2 percent of the total, and surgery/outpatient survey had 8.1 percent of the total. Table 11 displays the full listing of responses.

**Table 11. Additional Hospital Services Community Members Would Like to See Offered at Cleveland Area Hospital**

Response Category	No.	%
Specialists: OB/GYN (8); Surgeon (6); Specialists in general (5); Pain Management (5); Dermatologist (4); Orthopedist (4); Otolaryngologist (3); Pediatrician/Pediatric Medication (2); Cardiologist (2); Psychology (1); Oncologist (1); Neurologist (1); Podiatrist (1); Gastroenterology (1); Immunology (1)	45	19.2%
No additional services/Satisfied with what is available/Don't know	38	16.2%
Surgery/Outpatient surgery	19	8.1%
After hours care/Urgent care	14	6.0%
Dialysis	7	3.0%
Diagnostic Imaging: MRI (2); Improved X-ray (1); 3D Mammography (1)	5	2.1%
Mental health/Counseling/Substance abuse services	5	2.1%
Wound care	5	2.1%
Labor and delivery	3	1.3%
Women's health	3	1.3%
Respiratory therapy	2	0.9%
New hospital	2	0.9%
Medical testing	1	0.4%
Linking of low-income individuals to free or reduced cost dental	1	0.4%
Child birth and breastfeeding classes	1	0.4%
Colonoscopy	1	0.4%
Improved lab testing	1	0.4%
Lithotripsy	1	0.4%
Nutrition classes	1	0.4%
Wellness opportunities/Extend yoga opportunities	1	0.4%
Audiology/Fitting hearing aids	1	0.4%
Pulmonology testing	1	0.4%
Sleep study	1	0.4%
Diabetic management	1	0.4%
Children's health	1	0.4%
Access to Pawnee Indian Health Services in Cleveland	1	0.4%
Therapeutic pool	1	0.4%
More ER beds	1	0.4%
Weight loss clinic	1	0.4%
No response	69	29.5%
Total	234	100.0%

## Primary Care Physician Demand Analysis

A demand analysis of primary care physicians was completed for the zip codes that comprise the Cleveland primary and secondary medical services areas. This analysis examined average primary care physician visit rates by gender and by age groups. Once age- and gender-specific coefficients were applied, total primary care physician visit numbers were calculated by service area. Table 12 displays potential primary care physician rates by shares of service area. For example, if 90% of residents in the primary medical services area and 10% of residents in the secondary medical services area utilize services of primary care physicians in the Cleveland medical services area, a total of 43,058 annual visits would occur. This would suggest that the Cleveland medical services area would need 10.3 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.

**Table 12. Primary Care Physician Office Visits Given Usage by Local Residents in the Cleveland, Oklahoma Medical Service Area**

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	33,448	35,832	38,216	40,599	42,983	45,367	47,751
	10%	33,523	35,907	38,290	40,674	<b>43,058</b>	45,442	47,826
	15%	33,598	35,981	38,365	40,749	<b>43,133</b>	45,517	47,900
	20%	33,672	36,056	38,440	40,824	43,208	45,591	47,975
	25%	33,747	36,131	38,515	40,899	43,282	45,666	48,050
	30%	33,822	36,206	38,590	40,973	43,357	45,741	48,125
	35%	33,897	36,280	38,664	41,048	43,432	45,816	48,199
	40%	33,971	36,355	38,739	41,123	43,507	45,890	48,274
	45%	34,046	36,430	38,814	41,198	43,581	45,965	48,349
	50%	34,121	36,505	38,889	41,272	43,656	46,040	48,424

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 43,058 to 43,133 total primary care physician office visits in the Cleveland area for an estimated 10.3 Total Primary Care Physicians.

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

At the conclusion of the meeting, community members were asked to prioritize the concerns mentioned in previous meetings and that meeting. The following items were identified as the top concerns for the Cleveland Area Hospital Medical Service Area.

- Mental health and substance abuse/Addiction in general- This item includes gambling and vaping including using juuls.
  - Community members present noted the lack of awareness of providers and their services. It was noted that the Pawnee County area has many providers including CROKS, Keystone, Edwin Fair, and Strong Mind
  - The Coalition discussed developing a resource handout of all providers, services, specialties and payer sources accepted
  - It was also noted that students at local schools are dealing with an increased level of anxiety often stemming from home situations.
- Obesity and eating habits were also discussed as an area of concern and need

### **Community Health Needs Implementation Strategy**

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

- Mental health and substance abuse/Addiction in general- This item includes gambling and vaping including using juuls.
  - The hospital will continue to be a strong participant in the county coalition which includes mental health providers covering the area. Therefore, the hospital will collaborate to complete the mental health resource guide and distribute it through the ED, outpatient settings, and make it available for case management.
  - There are plans of increasing the availability and patient counts of the APRN who sees pediatric mental health patients. The hospital is also piloting connecting with this provider via telemedicine to increase her availability.
  - The hospital is currently exploring adding telemedicine services in the clinic to increase the number and availability of specialists. With the implementation of this service, this would naturally create the infrastructure needed to offer mental services via telemedicine for patients of all ages.

- As mentioned previously, the hospital recently added a respiratory therapist who will be tasked with providing community education of healthy living including decreasing smoking, tobacco use, and juuls.
- Obesity and eating habits
  - The hospital currently reaches six Senior Citizens' facilities in the area on a monthly basis. There are plans to continue and grow this education offering with additional focuses on healthy eating and nutrition.
  - The hospital is in discussion with the Cleveland Senior Citizens to see about assisting with hosting and possibly providing the location for the senior fair. The goal would be to reach more individuals and have a larger impact. This includes nutrition education.

### **Community Health Needs Assessment Marketing Plan**

The hospital will make the Community Health Needs Assessment Summary and Implementation Strategy Plan available upon request at Cleveland Area Hospital, and a copy will be available to be downloaded from the hospital's website ([www.clevelandareahospital.com](http://www.clevelandareahospital.com)). 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



### Overview of Hospital Services/Community Benefits

Cleveland Area Hospital is a 14-bed, critical access hospital located at 1401 West Pawnee Street in Cleveland, Oklahoma, approximately 35 miles northwest of Tulsa. The hospital is a non-profit organization owned and operated by the Cleveland Area Hospital Trust Authority, a civic association whose Board of Directors is composed of members of the local community. In addition to 24-hour Emergency Room services, the hospital also offers hospitalist services, 24-hour lab and x-ray services, physical therapy and rehabilitation, swing bed services, health screenings.

#### HOSPITAL SERVICES

- ✚ **Acute Inpatient Care**
- ✚ **Hospitalist Program**
- ✚ **24-Hour Emergency Room Services**
- ✚ **24-Hour Lab**
- ✚ **24-Hour Radiology**
- ✚ **MRI:** Magnetic Resonance Imaging
- ✚ **CT Scan**
- ✚ **Ultrasound**
- ✚ **Dexa Scan:** Bone Density
- ✚ **Mammography**
- ✚ **Financial Counseling**
- ✚ **Health Screenings**
- ✚ **Nursing Services:** IV Treatments, etc.
- ✚ **Dietary Counseling:** Classes for Diabetics
- ✚ **Physical Therapy:** Our rehabilitative services center is fully equipped with exercise & conditioning equipment, private treatment rooms, and individual programs.
- ✚ **Occupational Therapy**
- ✚ **Speech Pathology**
- ✚ **Swing Bed/Skilled Nursing Facility:** Swing Bed services are for those who need longer-term rehabilitation and skilled nursing following an acute care hospital stay. Services include activity programs, social services, skilled nursing, therapy & rehabilitation, and physician-coordinated care.

## **SPECIALTY CLINICS**

### **■ Infusion and Nurse Care Clinic**

#### **Community Activities:**

Rotary  
Health Fair  
Holiday Events  
Parades  
Adopt a Child/Family  
Local Festivals  
Chamber of Cleveland  
Scholarships provided  
Diabetic Classes  
Coaches Clinic  
Hospital Auxiliary  
Monthly Senior Center visits in 6 Locations  
Health Awareness Monthly Initiatives  
Partnership with area Vo-Tech for student clinicals

#### **Internal Hospital Activities**

Activities Room  
Hospital website  
Hospital facebook  
Memberships- professional, state and local  
Training for medical students, nursing students, etc.  
Governance- board of managers, advisory board  
Staff- birthday celebrations, holiday celebrations, health and awareness activities,  
Hospital Week, Nurses Appreciation Week.  
Advertisement- phone book, flyers, newspaper ads, community involvement

## **Appendix B Community Meeting Attendees**

### **Cleveland Area Hospital Community Health Needs Assessment**

#### **Meeting 1: Economic and Demographic Data**

**17-Sep-18**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Kellie Bryant	Nutritionist	PIHC
Tracy Burnett	Principal	Pawnee Schools
Crystal Stephens	Site Director CREOKS	CREOKS
Jeylon Burkholter	Grant Intern	
Nikki Siler	Service Line Director	Cleveland Area Hospital
Mary Johnson	Director	Cleveland Chamber of Commerce
Trinity Brown	County Extension Director	OK Cooperative Extension Service
Ben Stewart	CHR Coordinator	Pawnee Nation
Dina Johnson	Prevention Specialist	Pawnee Nation
Nicole Reed	Grant Coordinator	OSU Prevention Program

### **Cleveland Area Hospital Community Health Needs Assessment**

#### **Meeting 2: Health Data**

**Oct. 15, 2018**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Crystal Stephens	Site Director CREOKS	CREOKS
Jeylon Burkholter	Grant Intern	
Nikki Siler	Service Line Director	Cleveland Area Hospital
Mary Johnson	Director	Cleveland Chamber of Commerce
Ben Stewart	CHR Coordinator	Pawnee Nation
Nicole Reed	Grant Coordinator	OSU Prevention Program
Debbie Ward		CREOKS
Monica Sewell		Cimarron Transit
Barbara Attochkwie		Pawnee Nation
Suzy Knife Chief		Pawnee Nation
Kelli Rader		OSDH
Amy Kinzie		Pawnee Nation
Heather Olenwald		Pawnee County Health Department



## **Cleveland Area Hospital Community Health Needs Assessment**

### **Meeting 2: Health Data**

**3-Dec-18**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Suzy Knife Chief		Pawnee Nation
Crystal Stephens	Site Director CREOKS	CREOKS
Nikki Siler	Service Line Director	Cleveland Area Hospital
Nicole Reed	Grant Coordinator	OSU Prevention Program
Ben Stewart	CHR Coordinator	Pawnee Nation
Monica Sewell		Cimarron Transit
Amy Kinzie		Pawnee Nation
Debbie Ward		CREOKS
George Salley	Director	Strong Mind
Shelly Buller	School Counselor	Cleveland Middle School

# The Economic and Demographic Analysis of the Cleveland Area Hospital Medical Service Area

## *As part of the Community Health Needs Assessment*

### Economic Data

2016 Per Capita Income <sup>1</sup>	\$33,107 (54th highest in state)
Employment (July 2018, preliminary) <sup>2</sup>	7,364 (4.4% from 2017)
Unemployment (July 2018, preliminary) <sup>2</sup>	317 (-20.8% from 2017)
Unemployment rate (July 2018, preliminary) <sup>2</sup>	4.1% (47th lowest in state)
2016 Poverty rate <sup>3</sup>	16.6% (37th lowest in state)
2016 Child poverty rate <sup>3</sup>	21.9% (32nd lowest in state)
2016 Transfer Payments <sup>1</sup>	\$164,848,000 (30.2% of total personal income, 55th lowest in state)
2016 Medical Benefits as a share of Transfer Payments <sup>1</sup>	43.4% (55th lowest in state)

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

### Education Data

At Least High School Diploma <sup>1</sup>	87.6% (26th highest in state)
Some College <sup>1</sup>	44.6% (57th highest in state)
At Least Bachelor's Degree <sup>1</sup>	16.5% (47th highest in state)
2015-2016 Free and Reduced Lunch Eligible <sup>2</sup>	71.9% (52nd lowest in state)

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

### Payer Source Data

2016 Uninsured Rate (under 65) <sup>1</sup>	16.6% (38th lowest in state)
2016 Uninsured Rate (under 19) <sup>1</sup>	9.6% (40th lowest in state)
2016 Medicare share of total population <sup>2</sup>	22.0% (56th lowest in state)
2017 Medicaid share of total population <sup>3</sup>	30.0% (45th lowest in state)

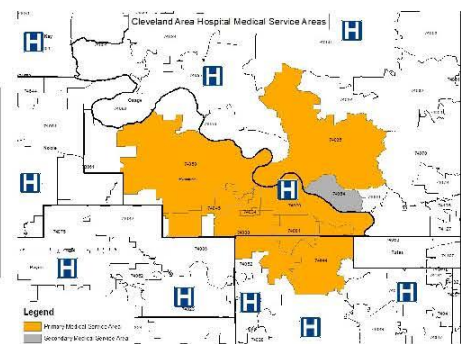
<sup>1</sup>U.S. Census Bureau, Small Area Health Insurance Estimates, 2015, <sup>2</sup>Centers for Medicare & Medicaid Services, Medicare Aged and Disabled by State and County, 2016

<sup>3</sup>Oklahoma Health Care Authority, Total Enrollment by County, 2017

### Population (2012-2016)

Pawnee County	16,444 (-0.8% from 2010)
Primary Medical Service Area	27,586 (-2.7% from 2010)
Secondary Medical Service Area	852 (0.9% from 2010)
Oklahoma	3,8775,589 (3.3% from 2010)

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



**Percent of Total Population by Age Group for Cleveland Area Hospital Medical Service Areas, Pawnee County and Oklahoma**

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Pawnee County	Oklahoma
<b>12-16 ACS</b>				
0-14	18.4%	30.6%	19.6%	20.6%
15-19	6.6%	4.0%	6.9%	6.7%
20-24	5.3%	4.8%	5.2%	7.3%
25-44	23.0%	20.5%	22.2%	26.0%
45-64	28.2%	24.8%	28.1%	24.9%
65+	18.6%	15.3%	18.0%	14.5%
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	27,586	852	16,444	3,875,589

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

**Percent of Total Population by Race and Ethnicity for Cleveland Area Hospital Medical Service Areas, Carter County and Oklahoma**

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Pawnee County	Oklahoma
<b>12-16 ACS</b>				
White	78.4%	85.7%	79.8%	72.9%
Black	2.0%	0.0%	1.1%	7.3%
Native American <sup>1</sup>	12.7%	9.0%	11.3%	7.3%
Other <sup>2</sup>	0.8%	2.5%	0.6%	8.7%
Two or more Races <sup>3</sup>	6.1%	2.8%	7.2%	7.7%
Hispanic Origin <sup>4</sup>	2.7%	2.7%	2.7%	9.8%
Total Population	27,586	852	16,444	3,875,589

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

For additional information, please contact:

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## Cleveland Area Hospital Economic Impact



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

Cleveland Area Hospital **directly** employs **130** people with an annual payroll of over **\$7.78 million** including benefits

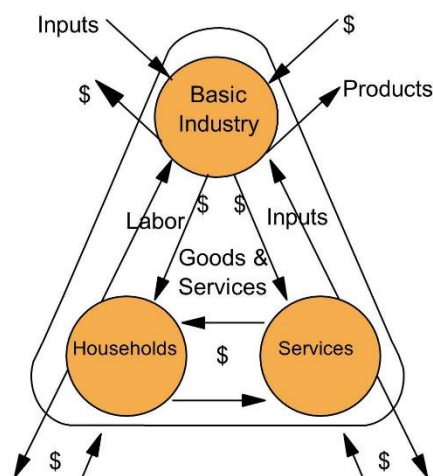
- These employees and income create an additional **38 jobs** and nearly **\$1.35 million** in income as they interact with other sectors of the local economy
- **Total impacts= 168 jobs and over \$9.1 million**
- Other segments of the healthcare sector (Doctors, Nurses, Pharmacies, etc.) provide another **678 jobs** and an additional **\$41.2 million** in wages
- Their interactions and transactions within the local economy create:
- **Total health sector impacts= 1,022 jobs and \$55.2 million (Including the hospital)**
- Nearly **\$16.3 million** in retail sales generated from income received by healthcare sector employees

### Healthcare and Your Local Economy:

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

### Consider what could be lost without the hospital:

- Pharmacies
- Physicians/Specialists
- Potential Retail Sales



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

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## Health Indicators and Outcomes for Pawnee County

*As part of the Community Health Needs Assessment*

Table 1. Health Factors (Overall Rank 41)

Category (Rank)	Pawnee County	Error Margin	Top U.S. Performers	Oklahoma
<b>Health Behaviors (26)</b>				
Adult Smoking	18%	18-19%	14%	20%
Adult Obesity	35%	29-42%	26%	33%
Food Environment Index	8.0		8.6	5.9
Physical Inactivity	34%	27-41%	20%	30%
Access to Exercise Opportunities	67%		91%	74%
Excessive Drinking	13%	13-14%	13%	13%
Alcohol-Impaired Driving Deaths	14%	5-27%	13%	28%
Sexually Transmitted Infections	384		146	542
Teen Birth Rate	44	37-50	15	42
<b>Clinical Care (45)</b>				
Uninsured	17%	15-19%	6%	16%
Primary Care Physicians	3,290:1		1,030:1	1,590:1
Dentists	1,270:1		1,280:1	1,700:1
Mental Health Providers	820:1		330:1	260:1
Preventable Hospital Stays	80	66-93	35	60
Diabetic Monitoring	76%	67-85%	91%	78%
Mammography Screening	50%	41-59%	71%	56%
<b>Social &amp; Economic Factors (44)</b>				
High School Graduation	86%		95%	83%
Some College	51%	47-56%	72%	59%
Unemployment	6.7%		3.2%	4.9%
Children in Poverty	22%	16-28%	12%	23%
Income Inequality	4.2	3.8-4.5	3.7	4.6
Children in Single-Parent Household	33%	28-38%	20%	34%
Social Associations	12.2		22.1	11.5
Violent Crime Rate	231		62	439
Injury Deaths	128	103-152	55	92
<b>Physical Environment (40)</b>				
Air-Pollution- Particulate Matter	9.2		6.7	9.2
Drinking Water Violations	Yes			
Severe Housing Problems	12%	10-14%	9%	15%
Driving Alone to Work	79%	77-82%	72%	83%
Long Commute- Driving Alone	48%	44-52%	15%	26%

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

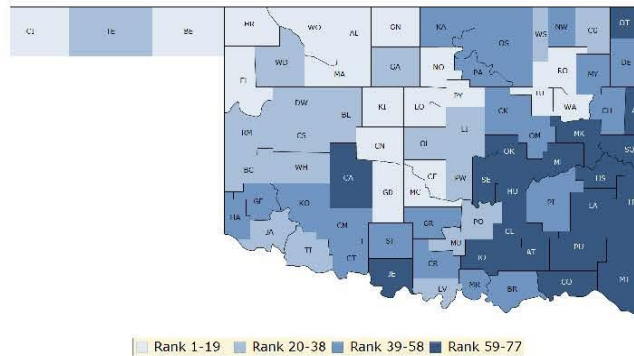
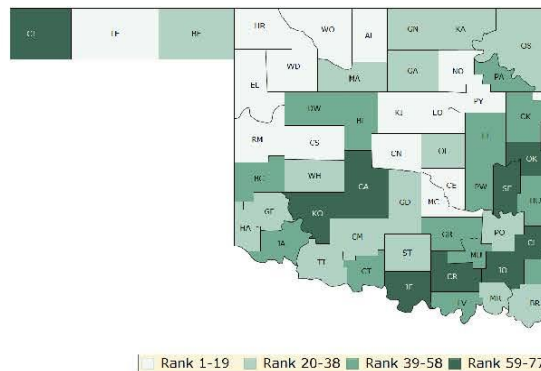


Table 2. Health Outcomes (Overall Rank 47)

Category (Rank)	Pawnee County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (53)				
Premature Death	11,200	9,300-13,100	5,300	9,300
Quality of Life (40)				
Poor or Fair Health	19%	18-19%	12%	20%
Poor Physical Health Days	4.4	4.3-4.6	3.0	4.5
Poor Mental Health Days	4.6	4.4-4.8	3.1	4.5
Low Birth Weight	8%	7-10%	6%	8%

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



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11. Has your household been to a primary care (family) doctor in the Cleveland area?  
☐ Yes (*Go to Q14*)      ☐ No (*Skip to Q16*)      ☐ Don't know (*Skip to Q16*)

12. How satisfied was your household with the quality of care received in the Cleveland area?  
☐ Satisfied      ☐ Dissatisfied      ☐ Don't know

13. Why were you satisfied/dissatisfied with the care received in the Cleveland area?

---

14. Do you think there are enough primary care (family) doctors practicing in the Cleveland area?  
☐ Yes      ☐ No      ☐ Don't know

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

16. Are you able to get an appointment, within 48 hours, with your primary care (family) doctor when you need one?  
☐ Yes      ☐ No      ☐ Don't know

17. Have you used the services of an urgent care in the past 12 months?  
☐ Yes      ☐ No      ☐ Don't know

18. Would you utilize urgent care or after hours services offered in Cleveland?  
☐ Yes      ☐ No      ☐ Don't know

19. What concerns you most about health care in the Cleveland area?

---

20. What other services would you like to see offered at Cleveland Area Hospital?

---

21. Are you aware of any community programs offered by the hospital?  
☐ Yes      ☐ No      ☐ Don't know  
*Please list the community program(s)*

---

22. How would you prefer to be notified of community events?  
(Please rank your choices with 1=most preferred and 6=least preferred)  
\_\_\_\_\_ Newspaper      \_\_\_\_\_ Email      \_\_\_\_\_ Social Media  
\_\_\_\_\_ Radio      \_\_\_\_\_ Website      \_\_\_\_\_ Public Forum

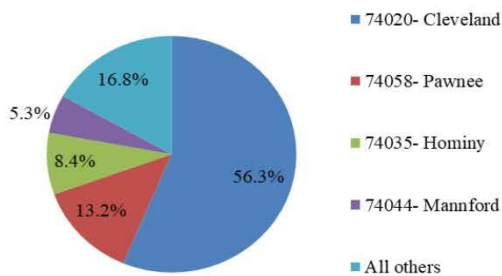
*Please mail completed  
survey to:  
Cleveland Area Hospital  
1401 W. Pawnee St.  
Cleveland, OK 74020*



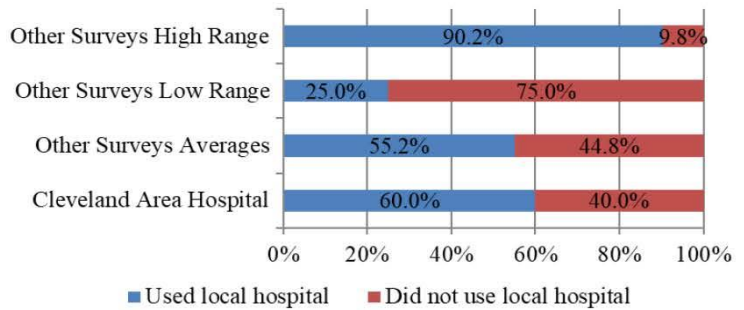
## Cleveland Area Hospital Community Survey Results

*As part of the Community Health Needs Assessment*

### Zip Code of Residence

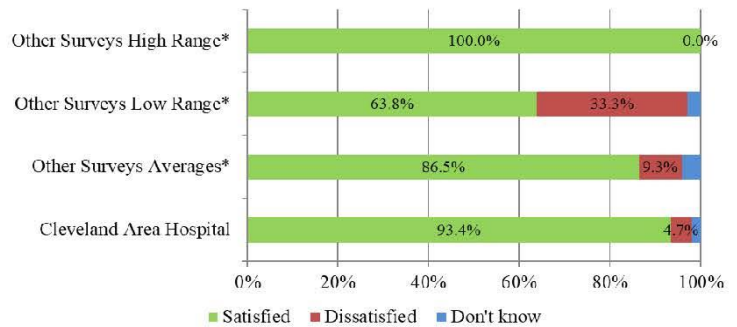


### Hospital Utilization Comparison

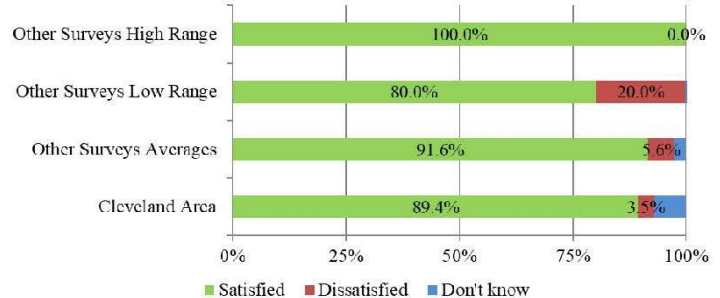


Type of Specialist Visits		
Specialist	No.	Percent
<b>Top 5 Responses</b>		
Cardiologist (1 visit in Cleveland)	22	12.9%
Orthopedist/Ortho Surg. (0 visits in Cleveland)	22	12.9%
Otolaryngologist (0 visits in Cleveland)	12	7.1%
Gastroenterologist (0 visits in Cleveland)	12	7.1%
OB/GYN (0 visits in Cleveland)	11	6.5%
All others (1 visit in Cleveland)	74	43.5%
<b>Total</b>	<b>170</b>	<b>100.0%</b>

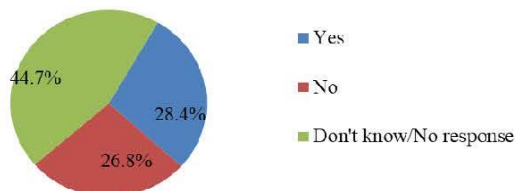
### Satisfaction with Cleveland Area Hospital



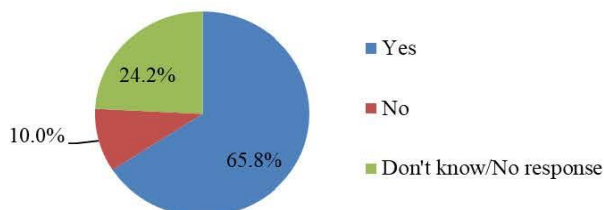
### Satisfaction with Cleveland Area Primary Care Doctor



**Do you think there are enough primary care doctors practicing in the Cleveland area?**



**Would you see a midlevel provider for routine healthcare needs?**



**Are you able to get an appointment, within 48 hours, with your primary care doctor when needed?**



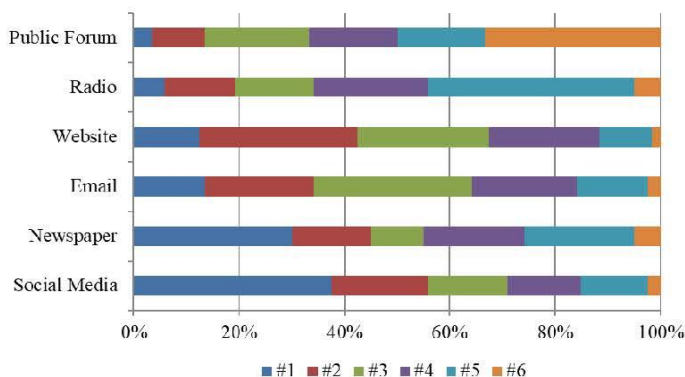
#### Healthcare concerns- Top 3 Responses

Concern	No.	Percent
No Concerns/ Receive good care/Don't Know	32	18.8%
Lack of physicians/Difficult to see provider/ Physician turnover	17	8.9%
Access to specialists	14	7.4%
All others	127	66.8%
Total	190	100.0%

#### Additional Services to Offer- Top 3 Responses

Services	No.	Percent
Specialists: OB/GYN (8); Surgeon (6); Specialists in general (5); Pain Management (5); Dermatologist (4); Orthopedist (4); Otolaryngologist (3); Pediatrician/Pediatric Medication (2); Cardiologist (2); Psychology (1); Oncologist (1); Neurologist (1); Podiatrist (1); Gastroenterology (1); Immunology (1)	45	19.2%
No additional services/Satisfied with what is available/Don't know	38	16.2%
Surgery/Outpatient surgery	19	8.1%
All others	132	56.4%
Total	234	100.0%

#### Preference of Notification of Community Events



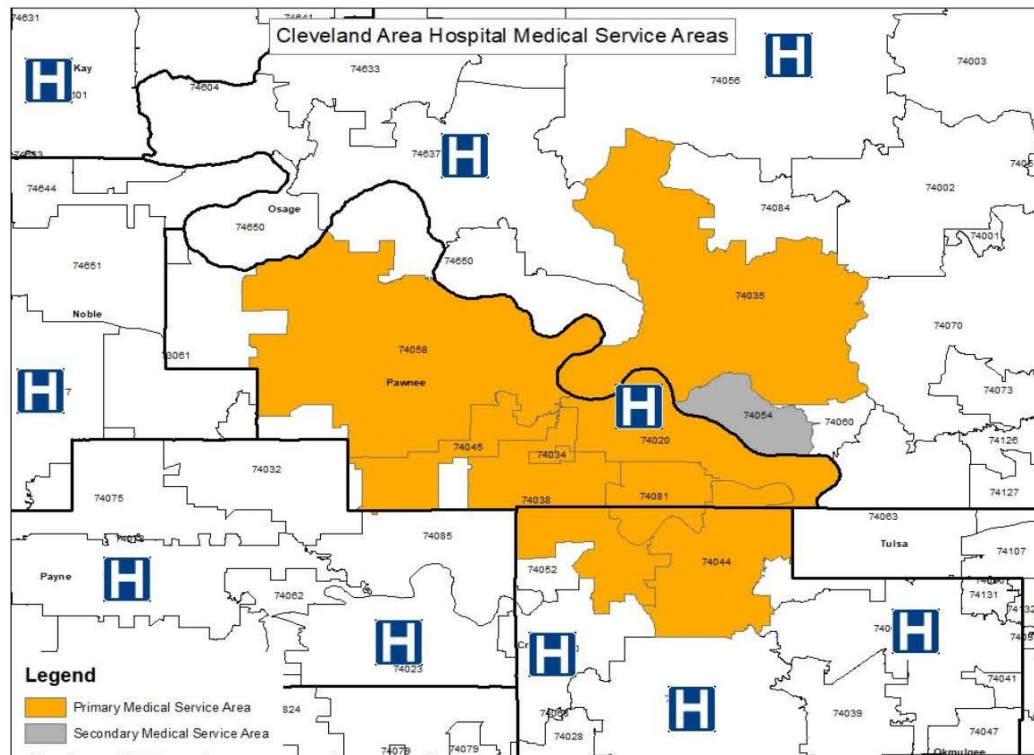
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## Primary Care Physician Demand Analysis for the Cleveland Medical Service Area

*As part of the Community Health Needs Assessment*



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

PRIMARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	12-16 Population	Visit Rate <sup>[3]</sup>	Visits	12-16 Population	Visit Rate <sup>[3]</sup>	Visits	
Under 15	2,530	2.0	5,060	2,534	2.1	5,321	10,381
15-24	1,818	2.4	4,363	1,457	1.2	1,748	6,112
25-44	3,357	3.0	10,071	2,988	1.3	3,884	13,955
45-64	3,994	4.2	16,775	3,774	3.1	11,699	28,474
65-74	1,504	6.1	9,174	1,525	5.6	8,540	17,714
75+	902	7.4	6,675	1,203	8.0	9,624	16,299
<b>Total</b>	<b>14,105</b>		<b>52,118</b>	<b>13,481</b>		<b>40,818</b>	<b>92,936</b>

*Primary Medical Service Area - Local Primary Care Physician office visits per year: 47,676*

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

SECONDARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	12-16 Population	Visit Rate <sup>[3]</sup>	Visits	12-16 Population	Visit Rate <sup>[3]</sup>	Visits	
Under 15	170	2.0	340	91	2.1	191	531
15-24	41	2.4	98	34	1.9	65	163
25-44	80	3.0	240	95	2.9	276	516
45-64	106	4.2	445	105	3.8	399	844
65-74	30	6.1	183	20	6.0	120	303
75+	<u>32</u>	7.4	<u>237</u>	<u>48</u>	6.7	<u>322</u>	<u>558</u>
<b>Total</b>	<b>459</b>		<b>1,543</b>	<b>393</b>		<b>1,372</b>	<b>2,915</b>

*Secondary Medical Service Area - Local Primary Care Physician office visits per year: 1,495*

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 Cleveland, Oklahoma Medical Service Area**

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	33,448	35,832	38,216	40,599	42,983	45,367	47,751
	10%	33,523	35,907	38,290	40,674	<b>43,058</b>	45,442	47,826
	15%	33,598	35,981	38,365	40,749	<b>43,133</b>	45,517	47,900
	20%	33,672	36,056	38,440	40,824	43,208	45,591	47,975
	25%	33,747	36,131	38,515	40,899	43,282	45,666	48,050
	30%	33,822	36,206	38,590	40,973	43,357	45,741	48,125
	35%	33,897	36,280	38,664	41,048	43,432	45,816	48,199
	40%	33,971	36,355	38,739	41,123	43,507	45,890	48,274
	45%	34,046	36,430	38,814	41,198	43,581	45,965	48,349
	50%	34,121	36,505	38,889	41,272	43,656	46,040	48,424

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 43,058 to 43,133 total primary care physician office visits in the Cleveland area for an estimated 10.3 Total Primary Care Physicians.

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

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