



2020-2021 Joint Community Health Needs Assessment

Collaborators:

Healthcare Partners Investments

(Community Hospital and Northwest Surgical Hospital)

INTEGRIS Community Hospitals

(Council Crossing, Del City, OKC West and Moore campuses)

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery



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Executive Summary

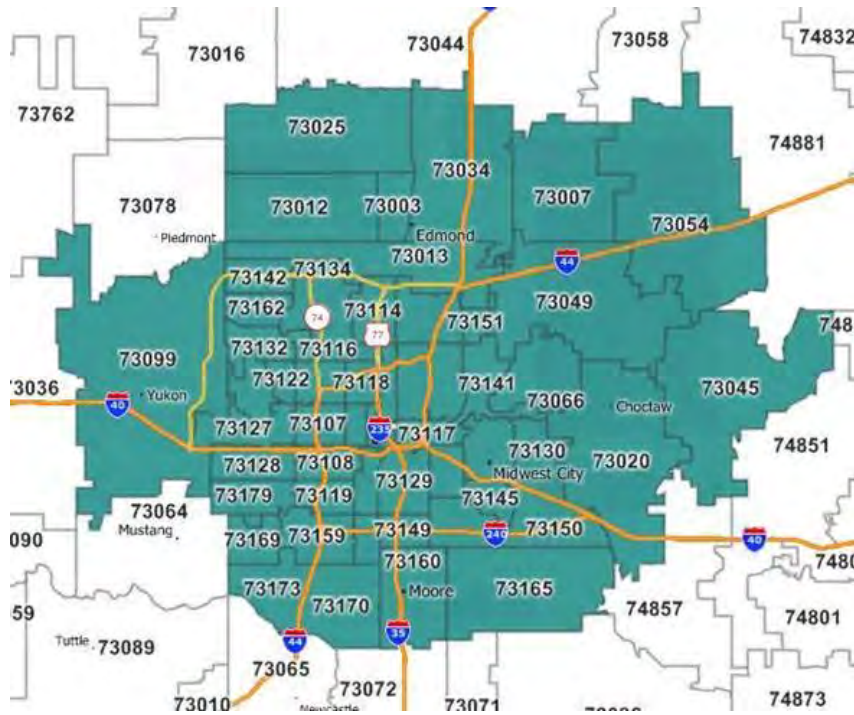
INTEGRIS Health is pleased to present the 2020-2021 Joint Community Health Needs Assessment (CHNA). The purpose of the CHNA report is to provide an overview of the health needs and priorities associated within Oklahoma and Cleveland County. All facilities have identified this geographic area as their community. All of the collaborators' facilities lie within Oklahoma County, except for one small campus of the INTEGRIS Community Hospitals (Moore), which lies on the northern edge of Cleveland County. The goal of this report is to provide residents with a deeper understanding of the health needs in their community and to help guide the hospitals in their community benefit planning efforts and the development of an implementation strategy to address identified needs. The CHNA involved a review of both quantitative and qualitative data to attain the full scope of the community needs as they pertain to health, with an emphasis on the economically poor and underserved populations.

This summary is documentation that INTEGRIS Health, Healthcare Partners Investments (Community Hospital and Northwest Surgical Hospital), Oklahoma Center for Orthopaedic & Multi-Specialty Surgery and INTEGRIS Community Hospitals (Council Crossing, Del City, OKC West and Moore campuses) are within compliance with IRS requirements for conducting a community health needs assessment (CHNA). INTEGRIS Health last conducted a CHNA in 2018.

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

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

Community Served by the Hospitals



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

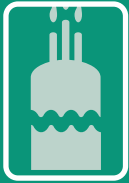
Oklahoma County employs 379,291 people. The economy specializes in mining, oil, gas, quarrying, extraction, management of companies and enterprises, and public administration. According to the 2019 population estimates, the population of Oklahoma County was 797,434. (1)

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

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

Source: (1) U.S. Census Bureau

Oklahoma County Demographics



Median Age

- Oklahoma County: 34.6 years
- Oklahoma: 34.1 years



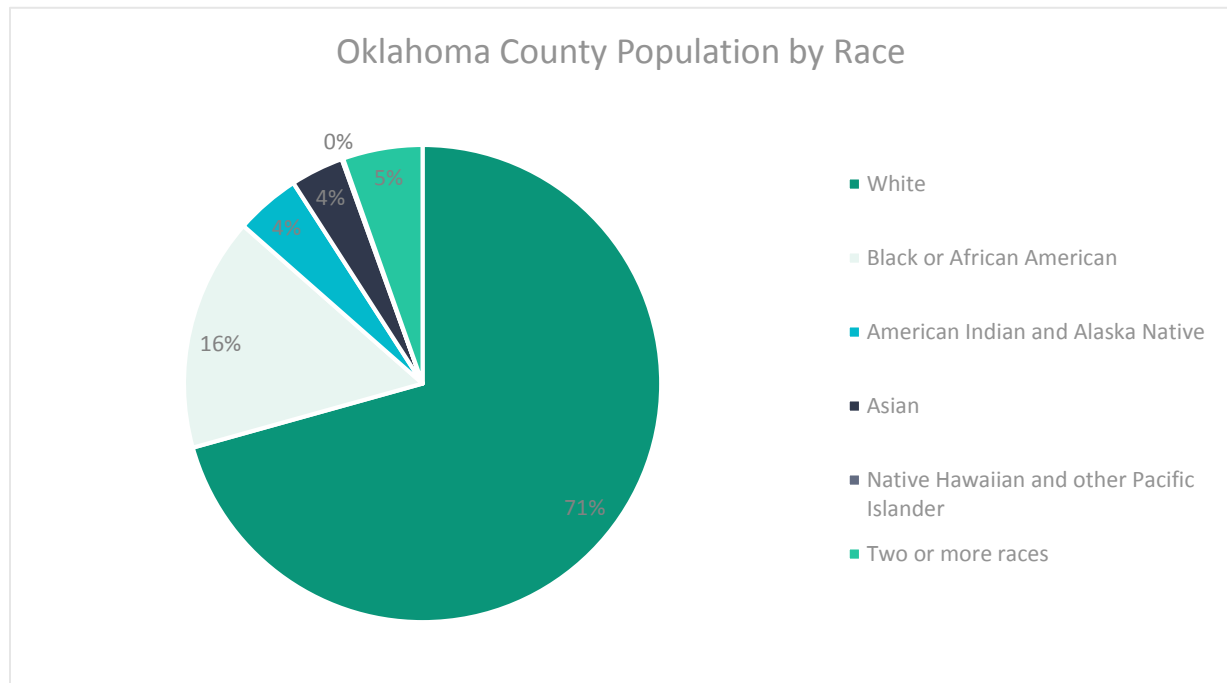
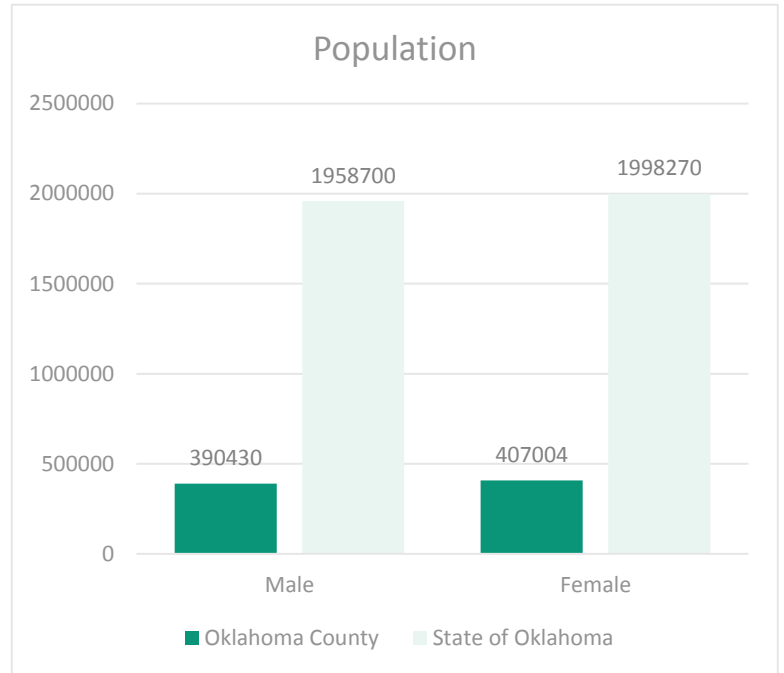
Persons in Poverty

- Oklahoma County: 14.9%
- Oklahoma: 15.2%



Median Household Income

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



Source: (1) U.S. Census Bureau

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

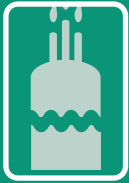
Source: (1) U.S. Census Bureau

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

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

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

Cleveland County Demographics



Median Age

- Cleveland County: 34.2 years
- Oklahoma: 34.1 years



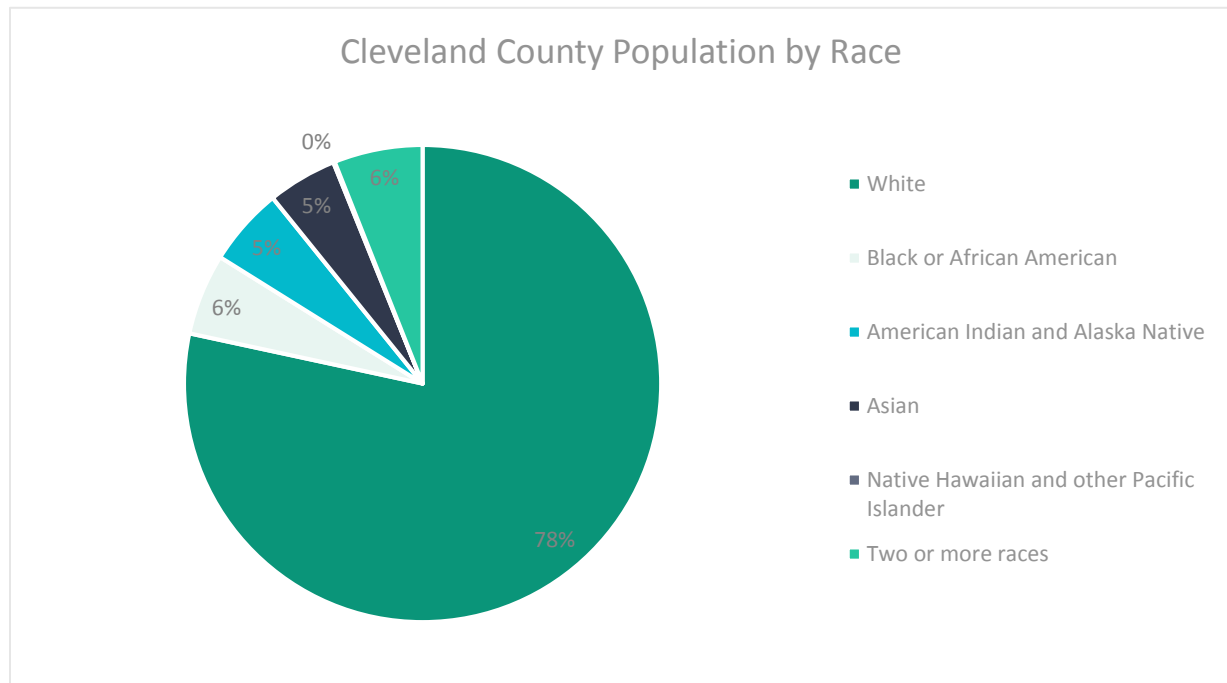
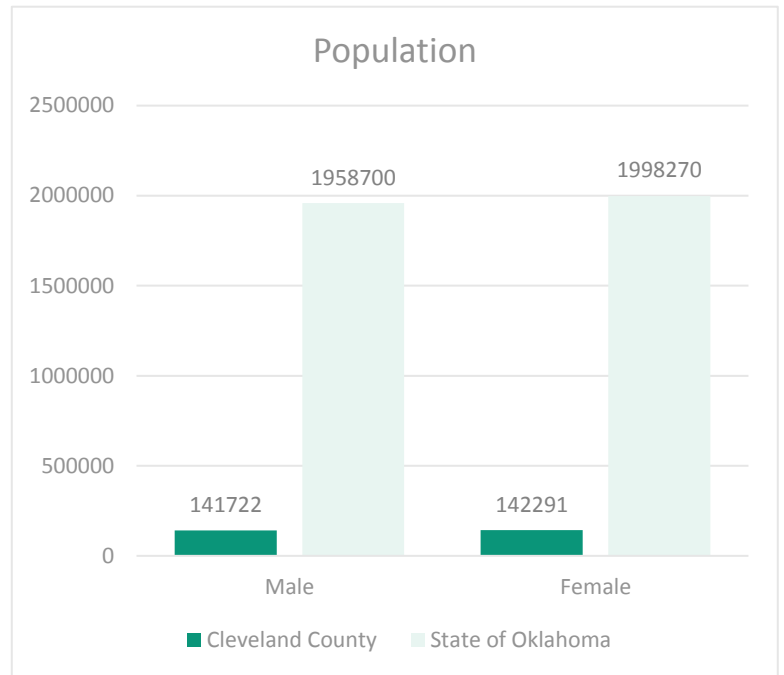
Persons in Poverty

- Cleveland County: 11.7%
- Oklahoma: 15.2%



Median Household Income

- Cleveland County: \$64,016
- Oklahoma: \$52,919



Source: (1) U.S. Census Bureau

	Cleveland County	Oklahoma
Education		
High school graduate or higher, percent of persons age 25 years+, 2015-2019 (1)	91.8%	88%
Bachelor's degree or higher, percent of persons age 25 years+, 2015-2019 (1)	33.4%	25.5%
Health		
With a disability, under age 65 years, percent, 2015-2019 (1)	9.5%	11.5%
Persons without health insurance, under age 65 years, percent (1)	13.1%	16.8%
Persons enrolled in Medicaid (2)	43,806	946,412
Persons enrolled in Medicare (3)	46,817	572,942
Families & Living Arrangements		
Households, 2015-2019 (1)	106,172	1,480,061
Persons per household, 2015-2019 (1)	2.52	2.58
Living in same house 1 year ago, percent of persons age 1 years+, 2015-2019 (1)	80.5%	83.2%
Language other than English spoken at home, percent of persons age 5 years+, 2015-2019 (1)	10.3%	10.5%
Transportation (minutes)		
Mean travel time to work (minutes), workers age 16 years+, 2015-2019 (1)	23.6	21.9
Access to Care (people per one provider)		
Primary Care Physicians (4)	2,000	1,620
Dentists (4)	2,250	1,640
Mental Health Professionals (4)	300	250

Source: (1) U.S. Census Bureau

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

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

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

Hospital Information

Healthcare Partners Investments

Opening, ownership and formation of JV with INTEGRIS Health:

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

Facilities:

Three hospital locations (Community Hospital, which has a South and North campus, and Northwest Surgical Hospital), three outpatient therapy clinic locations, three imaging & diagnostic services locations, 54 licensed beds, 19 operating rooms, two procedure rooms and four treatment rooms.

Services provided/major specialties:

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

Number of employees/Number of providers:

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

Highlights:

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

INTEGRIS Community Hospitals

Opening, ownership and formation of JV with INTEGRIS Health:

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

Facilities:

Four state of the art campuses (Council Crossing, Del City, OKC West and Moore) were designed and built 2018-2019, to provide fully licensed, accredited and comprehensive care to all patients regardless of insurance or ability to pay. All facilities were opened between February 2019 and June 2019.

Services provided/major specialties:

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

Number of employees/Number of providers:

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

Highlights:

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

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery

Opening, ownership and formation of JV with INTEGRIS Health:

The Oklahoma Center for Orthopaedic & Multi-Specialty Surgery (OCOM) was established in 2002 and is owned by INTEGRIS Health, United Surgical Partners International and private physicians.

Facilities:

The hospital is accredited by The Joint Commission (TJC), comprised of two surgical hospital locations, one outpatient physical therapy location and three off-site imaging centers. Hospital locations include nine inpatient rooms, nine operating rooms, one Endoscopic room and one Pain Management procedure room.

Services provided/major specialties:

The services provided at OCOM include Dentistry, General Surgery, Gastroenterology (GI), Gynecology, Imaging, Ophthalmology, Orthopaedic Surgery, Pain Management, Physical Therapy, Plastic Surgery, Podiatry and Urology.

Number of employees/Number of providers:

The Oklahoma Center for Orthopaedic & Multi-Specialty Surgery (OCOM) employs 224 team members including full-time, part-time and PRN with approximately 60 physician providers.

Highlights:

The Hospital offers comprehensive individualized treatments using the latest in modern technology including MAKO Robotic surgery capabilities.

The Oklahoma Center for Orthopaedic & Multi-Specialty Surgery (OCOM) holds TJC Certificate of Distinction for Total Hip and Total Knee Programs, is a CMS Five-Star rated facility as well the recipient of the Press Ganey Guardian of Excellence and Healthgrades Outstanding Patient Experience awards.

Our mission is to care for every patient and their family as if they were our own. Each patient, each family, each and every time.

Community Health Needs Assessment Process

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

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

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

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

Primary Data

INTEGRIS Health gathered community input from Oklahoma and Cleveland County residents of all backgrounds, socioeconomic status, and demographics. Input included members of underserved, low-income, and minority populations. Additionally, the hospitals provided internal data for analysis and consideration in the CHNA process.

Published Secondary Data

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

Due to the COVID-19 pandemic, local health departments were unable to publish updated public health data. INTEGRIS Health reviewed and used the most current available data for the purpose of providing a comprehensive overview of the community.

Community Input

Methodology

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

Data Collection

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

Online Quantitative Surveys (collected November 2020 – January 2021):

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

Focus Group Surveys (conducted December 2020):

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

Primary Data

Findings and Recommendations: Online Quantitative Surveys

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

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

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

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

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

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

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

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

Findings and Recommendations: Quantitative Focus Group Surveys

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

Significant Community Health Needs- Oklahoma County

- Employment
- Food Insecurity
- Housing
- Health Education and Promotion
- Access to Healthcare
- Obesity
- Mental Health
- Transportation

Significant Community Health Needs- Cleveland County

- Employment
- Housing
- Poverty
- Education
- Access to Healthcare
- Obesity
- Mental Health
- Safety

*See appendix for complete community input data analysis.

Secondary Data

Oklahoma County Health Outcomes

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



Oklahoma State of the State's Health Report Summary



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

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



Oklahoma State of the State's Health Report Summary



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

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

	2005	2010	2015	2016	2017
Mortality	9.0	8.0	7.3	7.3	7.2
	75.3	76.0	76.2	76.1	
	965.1	904.1	904.5	891.2	893.2

County
Oklahoma

Estimate, Bar chart or ..
Estimate

Indicator Subject Area

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

Grade

- ☐ A
- ☐ B
- ☐ C
- ☐ D
- ☐ F
- ☐ NA

Oklahoma State of the State's Health Report Summary

	2000	2010	2015	2016	2017
Mortality	8.5	7.6	7.3	7.4	7.7
	75.4	76.0	75.8	75.9	
	983.0	915.5	904.3	888.4	902.4

Grade or Estimate
Estimate

Indicator Subject Area

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

Grade

- ☐ C
- ☐ F
- ☐ NA

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

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



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

Oklahoma State of the State's Health Report Summary

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

Indicator Subject Area

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

Grade

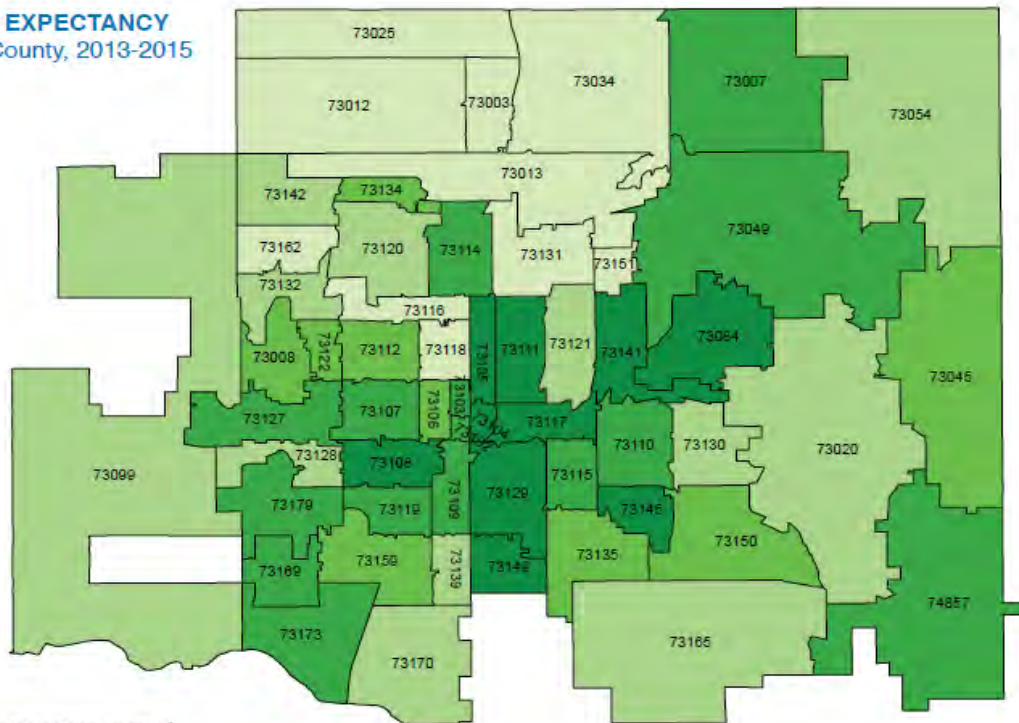
- A
- B
- C
- D
- F
- NA

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

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

Oklahoma County Life Expectancy

AVERAGE LIFE EXPECTANCY
Oklahoma City-County, 2013-2015

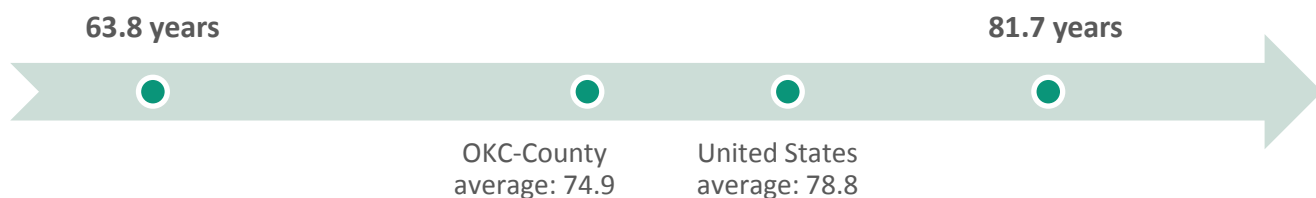


Data Source: Oklahoma State Department of Health Vital Records 2013-2015

Highest Lowest

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

OKC-County Life Expectancy Range



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

Cleveland County Health Outcomes

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

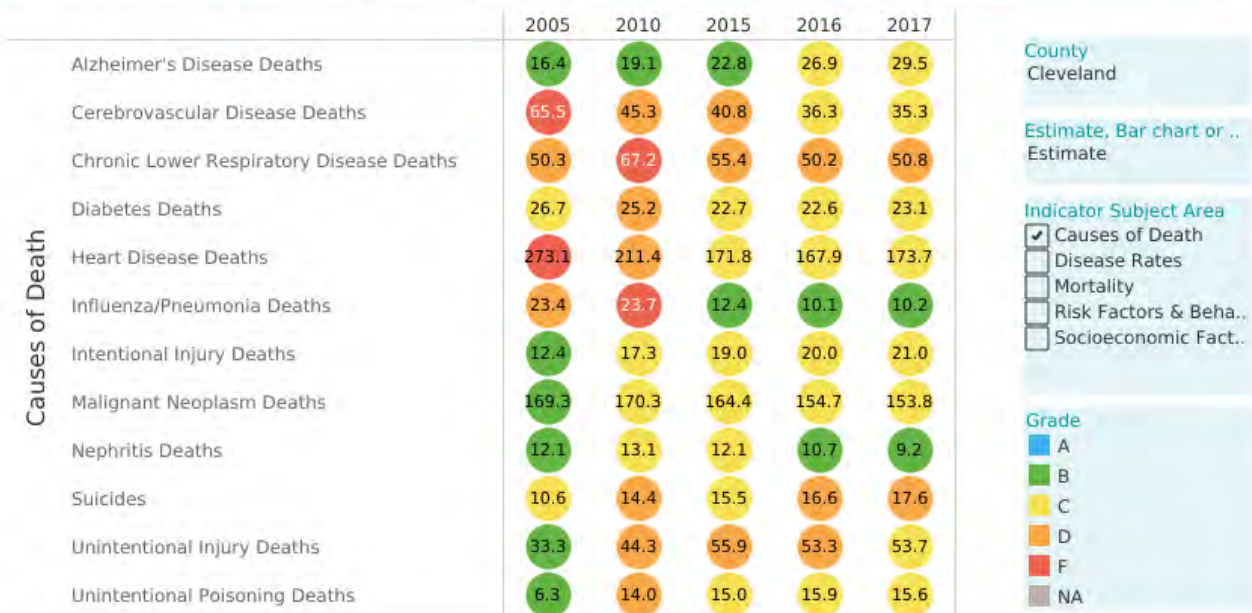


Oklahoma State of the State's Health Report Summary



Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

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



Oklahoma State of the State's Health Report Summary



Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

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

	2005	2010	2015	2016	2017
Mortality	5.8	5.2	5.8	5.7	6.1
	78.0	78.2	78.8	79.6	
	829.6	797.5	760.3	724.6	727.7

County
Cleveland

Estimate, Bar chart or ...
Estimate

Indicator Subject Area

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

Grade

- ☐ A
- ☐ B
- ☐ C
- ☐ D
- ☐ F
- ☐ NA

Oklahoma State of the State's Health Report Summary

	2000	2010	2015	2016	2017
Mortality	8.5	7.6	7.3	7.4	7.7
	75.4	76.0	75.8	75.9	
	983.0	915.5	904.3	888.4	902.4

Grade or Estimate
Estimate

Indicator Subject Area

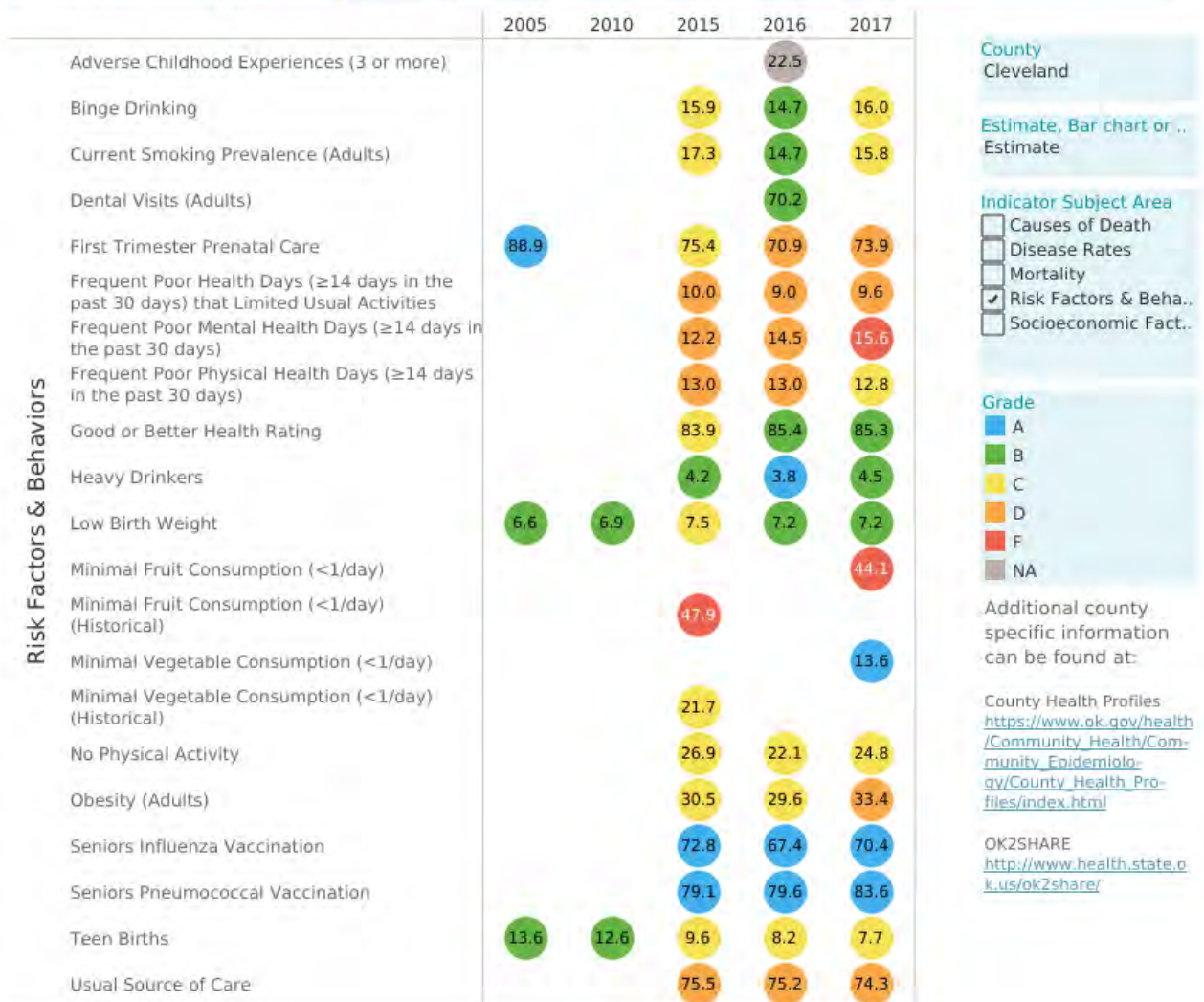
- ☐ Causes of Death
- ☐ Disease Rates
- ☒ Mortality
- ☐ Risk Factors & Beha..
- ☐ Socioeconomic Fact..

Grade

- ☐ C
- ☐ F
- ☐ NA

Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

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



Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

Oklahoma State of the State's Health Report Summary

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

Indicator Subject Area

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

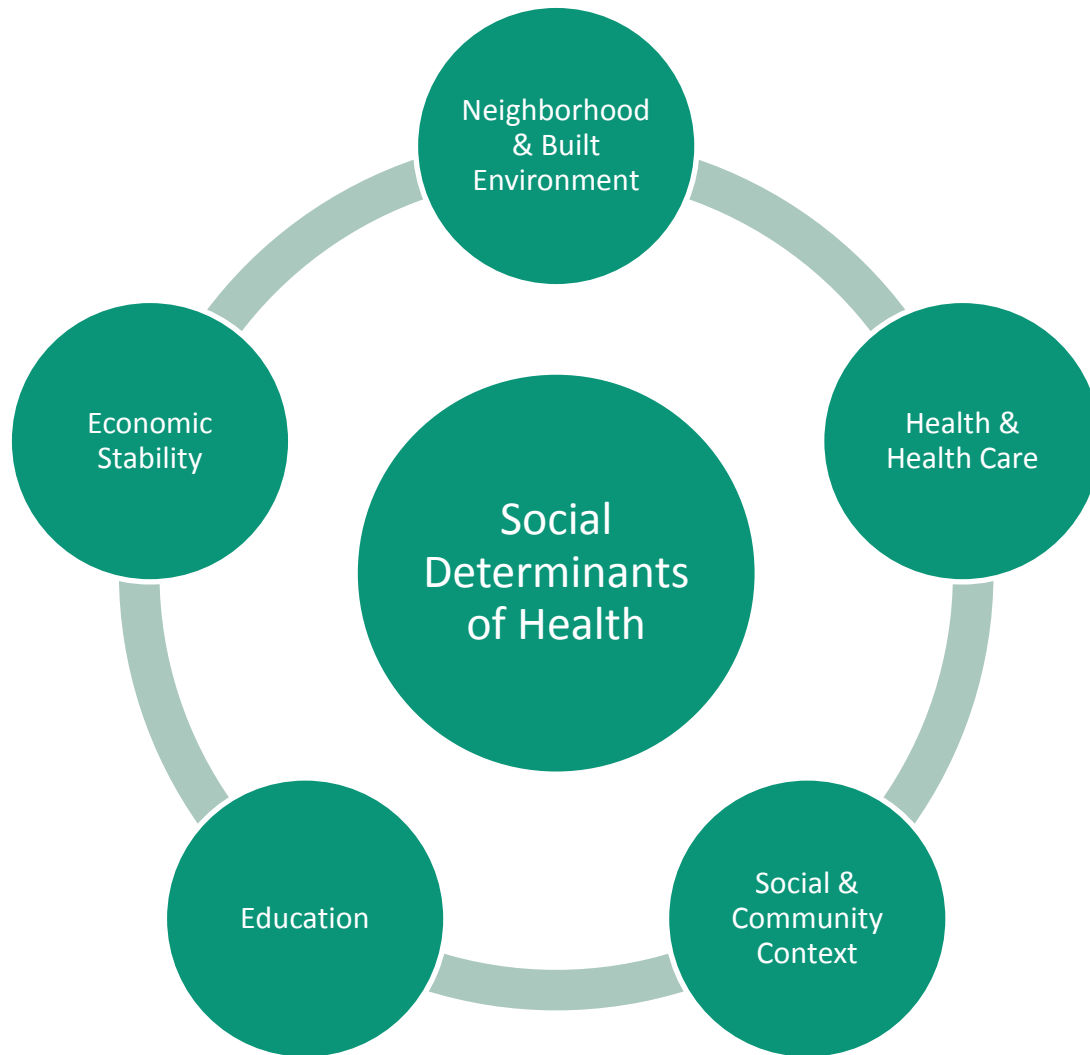
Grade

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

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

Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

Prioritized Significant Community Health Needs



Source: (8) Healthy People. 2020

Community Priority Issues

Primary and secondary data were evaluated and synthesized to identify significant community health needs in Oklahoma and Cleveland County. These needs span the following topic areas and are often inter-related:

Economic Stability

Employment

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

Food Insecurity

In Oklahoma, one in seven people struggles with hunger, with one in five children being food insecure. (8) Nearly half of the households that receive Supplemental Nutrition Assistance Program (SNAP) benefits in Oklahoma have children. (9) Over 14% of Oklahoma County residents are food insecure, with an annual food budget shortfall of \$57,023,000. (9)

Housing

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

Poverty

Over 11% of people in Cleveland County live below the poverty level (1) and are not always able to meet their basic needs like affordable housing, health care, healthy food, transportation, and social services. In 2020, 266 people were considered homeless whether they were living in a shelter or in transitional housing. (12)

Education

Health Education & Promotion

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

Health & Healthcare

Access

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

Obesity

Oklahoma's obesity ranking has rapidly jumped to the top of the charts. Currently, 36.8 % of adults in Oklahoma are obese. (10) Citizens rely on cars, trucks, and buses more than ever for their commute to work and school. This can often lead to sedentary lifestyles that contribute significantly to weight gain. The increased convenience of unhealthy, inexpensive fast food coupled with the inability to access low-cost healthy food is also a contributing factor to the obesity epidemic.

Mental Health

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

Neighborhood & Built Environment

Safety

Cleveland County received a "C" grade on unintentional injuries when compared to the national average. (7) In 2017, 53.7 deaths occurred per 100,000 people related to these injuries. (7) Even if safety is only perceived, it can inhibit social interaction. Parental concern about the safety of their neighborhood can influence children's level of physical activity. Safety affects how people commute. Lack of sidewalks and poor lighting inhibits movement and interaction with others.

Transportation

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

Source: (1) U.S. Census Bureau

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

Source: (7) Oklahoma State of the State's Health Report. Cleveland County. 2019

Source: (9) Feeding America. Hunger in Oklahoma. 2020

Source: (10) Centers for Disease Control and Prevention. Adult Obesity Prevalence. 2019

Source: (11) Mental Health America. The State of Mental Health in America. 2021

Source: (12) City of Norman. Requests for Proposals for a Homelessness Strategic Plan. 2020

Hospital Priority Issues

INTEGRIS Health analyzed and evaluated the primary data and the secondary public health data collected during the community health needs assessment. The issues were prioritized based on current systemwide efforts at INTEGRIS Health and aligned with the current Community Health Improvement Plan (CHIP) goals and objectives in the Oklahoma City metro.

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

Access to Care

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

Food Access/Insecurity

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

Mental/Behavioral Health

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

Obesity

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

Tobacco

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

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

Significant Community Health Needs Not Being Addressed

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

Education

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

Health Insurance and Prescription Medications

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

Social

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

Potentially Available Resources

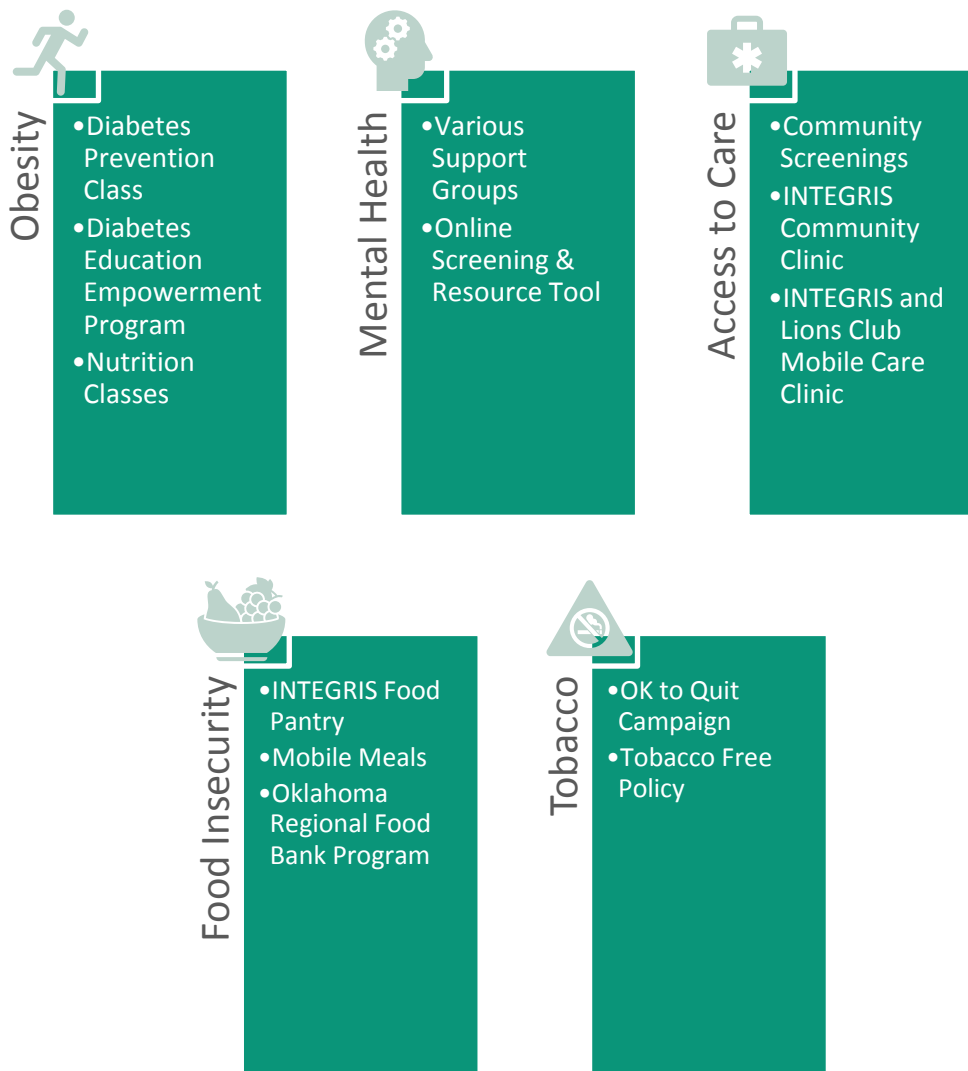
Potential available resources for this community were identified in the 2018 CHNA. After analysis of current resources, the potential available resources remain the same.



Evaluation of Impact

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

Here are a few programs from INTEGRIS Health Systemwide.



Appendices

Oklahoma Center for Orthopaedic & Multi-Specialty Surgery Primary Data

DRG Description	Rank
Major joint replacement or reattachment of lower extremity w/o MCC	1
Major joint & limb reattachment proc of upper extremity w CC/MCC	2
Bilateral or multiple major joint procs of lower extremity w/o MCC	3
Revision of hip or knee replacement w/o CC/MCC	4
Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w/o CC/MCC	5
Lower extrem & humer proc except hip, foot, femur w/o CC/MCC	6
Revision of hip or knee replacement w CC	7
Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w CC	8
Other O.R. procedures for injuries w/o CC/MCC	9
Uterine & adnexa proc for non-malignancy w/o CC/MCC	10

*INTEGRIS Community Hospitals Primary Data

DRG Description	Rank
Respiratory infections & inflammations w MCC	1
Kidney & urinary tract infections w/o MCC	2
Nutritional & misc metabolic disorders w/o MCC	3
Septicemia or severe sepsis w/o MV 96+ hours w MCC	4
Simple pneumonia & pleurisy w MCC	5
Esophagitis, gastroent & misc digest disorders w/o MCC	6
Chronic obstructive pulmonary disease w MCC	7
Cellulitis w/o MCC	8
Disorders of pancreas except malignancy w/o CC/MCC	9
Simple pneumonia & pleurisy w/o CC/MCC	10

*INTEGRIS Community Hospital Council Crossing

*INTEGRIS Community Hospital Moore

*INTEGRIS Community Hospital Del City

*INTEGRIS Community Hospital OKC West

*Healthcare Partners Investments Primary Data

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

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

2020 CHNA Focus Group Questions

Focus Group Questions

Home Zip Code: _____

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

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

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

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

Charlas Comunitarias

Código Postal: _____

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

¿Qué servicios cree que afectarían más a su comunidad?

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

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

2020 CHNA Online Survey

* 1. Do you live in Oklahoma County?

- ☐ Yes
- ☐ No
- ☐ I do not know

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

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

* 4. What gender do you self-identify?

- ☐ Female
- ☐ Male
- ☐ Other (please specify)

* 5. What is your age group?

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

* 6. Select race/ethnicity best describes you?

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

* 7. How physically healthy are you?

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

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

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

☐ No known disorders

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

☐ Yes

☐ No

☐ I do not know

☐ If yes, which health condition(s):

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

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

☐ Sooner Care (Medicaid)

☐ Medicare

☐ I do not currently have health insurance.

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

☐ Excellent

☐ Moderate

☐ Fair

☐ Poor

☐ None

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

☐ Excellent

☐ Very Good

☐ Good

☐ Fair

☐ Poor

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

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

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

- ☐ Always
- ☐ Often
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

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

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Sidewalks/Walkability	☐ Sidewalks/Walkability Very Concerned	☐ Sidewalks/Walkability Moderately Concerned	☐ Sidewalks/Walkability Concerned	☐ Sidewalks/Walkability Not Concerned at All
Employment	☐ Employment Very Concerned	☐ Employment Moderately Concerned	☐ Employment Concerned	☐ Employment Not Concerned at All
Housing	☐ Housing Very Concerned	☐ Housing Moderately Concerned	☐ Housing Concerned	☐ Housing Not Concerned at All
Poverty	☐ Poverty Very Concerned	☐ Poverty Moderately Concerned	☐ Poverty Concerned	☐ Poverty Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Healthier places to eat	☐ Healthier places to eat Very Concerned	☐ Healthier places to eat Moderately Concerned	☐ Healthier places to eat Concerned	☐ Healthier places to eat Not Concerned at All
Access to fresh fruits and vegetables	☐ Access to fresh fruits and vegetables Very Concerned	☐ Access to fresh fruits and vegetables Moderately Concerned	☐ Access to fresh fruits and vegetables Concerned	☐ Access to fresh fruits and vegetables Not Concerned at All
Safety	☐ Safety Very Concerned	☐ Safety Moderately Concerned	☐ Safety Concerned	☐ Safety Not Concerned at All
Parks/playgrounds	☐ Parks/playgrounds Very Concerned	☐ Parks/playgrounds Moderately Concerned	☐ Parks/playgrounds Concerned	☐ Parks/playgrounds Not Concerned at All
Education	☐ Education Very Concerned	☐ Education Moderately Concerned	☐ Education Concerned	☐ Education Not Concerned at All
Social support (e.g., friend, neighbor, relative)	☐ Social support (e.g., friend, neighbor, relative) Very Concerned	☐ Social support (e.g., friend, neighbor, relative) Moderately Concerned	☐ Social support (e.g., friend, neighbor, relative) Concerned	☐ Social support (e.g., friend, neighbor, relative) Not Concerned at All

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

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Depression	☐ Depression Very Concerned	☐ Depression Moderately Concerned	☐ Depression Concerned	☐ Depression Not Concerned at All
Anxiety	☐ Anxiety Very Concerned	☐ Anxiety Moderately Concerned	☐ Anxiety Concerned	☐ Anxiety Not Concerned at All
Suicide	☐ Suicide Very Concerned	☐ Suicide Moderately Concerned	☐ Suicide Concerned	☐ Suicide Not Concerned at All
Drug Abuse	☐ Drug Abuse Very Concerned	☐ Drug Abuse Moderately Concerned	☐ Drug Abuse Concerned	☐ Drug Abuse Not Concerned at All
Alcohol Abuse	☐ Alcohol Abuse Very Concerned	☐ Alcohol Abuse Moderately Concerned	☐ Alcohol Abuse Concerned	☐ Alcohol Abuse Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Bullying	☐ Bullying Very Concerned	☐ Bullying Moderately Concerned	☐ Bullying Concerned	☐ Bullying Not Concerned at All

* 17. How would you describe your mental health?

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

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

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

* 19. Do you experience anxiety?

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

* 20. Do you experience depression?

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

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

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

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

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Heart Disease	☐ Heart Disease Very Concerned	☐ Heart Disease Moderately Concerned	☐ Heart Disease Concerned	☐ Heart Disease Not Concerned at All
Obesity	☐ Obesity Very Concerned	☐ Obesity Moderately Concerned	☐ Obesity Concerned	☐ Obesity Not Concerned at All
Stroke	☐ Stroke Very Concerned	☐ Stroke Moderately Concerned	☐ Stroke Concerned	☐ Stroke Not Concerned at All
Diabetes	☐ Diabetes Very Concerned	☐ Diabetes Moderately Concerned	☐ Diabetes Concerned	☐ Diabetes Not Concerned at All
High Blood Pressure	☐ High Blood Pressure Very Concerned	☐ High Blood Pressure Moderately Concerned	☐ High Blood Pressure Concerned	☐ High Blood Pressure Not Concerned at All
Respiratory Illness/Disease	☐ Respiratory Illness/Disease Very Concerned	☐ Respiratory Illness/Disease Moderately Concerned	☐ Respiratory Illness/Disease Concerned	☐ Respiratory Illness/Disease Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Tobacco/eCigs	☐ Tobacco/eCigs Very Concerned	☐ Tobacco/eCigs Moderately Concerned	☐ Tobacco/eCigs Concerned	☐ Tobacco/eCigs Not Concerned at All
Cancer	☐ Cancer Very Concerned	☐ Cancer Moderately Concerned	☐ Cancer Concerned	☐ Cancer Not Concerned at All
Teen Pregnancy	☐ Teen Pregnancy Very Concerned	☐ Teen Pregnancy Moderately Concerned	☐ Teen Pregnancy Concerned	☐ Teen Pregnancy Not Concerned at All

* 23. How would you describe your weight status?

- ☐ Underweight
- ☐ Healthy weight
- ☐ Overweight
- ☐ Obese

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

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

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

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Timely non-emergency health care, when needed	☐ Timely non-emergency health care, when needed Very Concerned	☐ Timely non-emergency health care, when needed Moderately Concerned	☐ Timely non-emergency health care, when needed Concerned	☐ Timely non-emergency health care, when needed Not Concerned at All
Culturally competent providers	☐ Culturally competent providers Very Concerned	☐ Culturally competent providers Moderately Concerned	☐ Culturally competent providers Concerned	☐ Culturally competent providers Not Concerned at All

	Very Concerned	Moderately Concerned	Concerned	Not Concerned at All
Specialty provider (e.g., heart doctor, cancer doctor)	☐ Specialty provider (e.g., heart doctor, cancer doctor) Very Concerned	☐ Specialty provider (e.g., heart doctor, cancer doctor) Moderately Concerned	☐ Specialty provider (e.g., heart doctor, cancer doctor) Concerned	☐ Specialty provider (e.g., heart doctor, cancer doctor) Not Concerned at All
Affordable prescription medication(s)	☐ Affordable prescription medication(s) Very Concerned	☐ Affordable prescription medication(s) Moderately Concerned	☐ Affordable prescription medication(s) Concerned	☐ Affordable prescription medication(s) Not Concerned at All

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

- ☐ Yes
- ☐ No

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

- ☐ Yes
- ☐ No

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

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

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

- ☐ Always
- ☐ Usually
- ☐ Sometimes
- ☐ Rarely

☐ Never

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

	Always	Usually	Sometimes	Rarely	Never
Food	☐ Food Always	☐ Food Usually	☐ Food Sometimes	☐ Food Rarely	☐ Food Never
Transportation	☐ Transportation Always	☐ Transportation Usually	☐ Transportation Sometimes	☐ Transportation Rarely	☐ Transportation Never
Clothing	☐ Clothing Always	☐ Clothing Usually	☐ Clothing Sometimes	☐ Clothing Rarely	☐ Clothing Never
Housing	☐ Housing Always	☐ Housing Usually	☐ Housing Sometimes	☐ Housing Rarely	☐ Housing Never
Medicine					

Community Input Data Analysis

Qualitative Analysis

The following responses are representative of the 90 participants who joined focus group surveys at the following locations: Moore Food & Resource Center (n=56), Stanley Hupfeld Academy (n=27), and Crossings Community Center (n=7).

Question 2: Describe your overall concerns for the health of your community.

Responses regarding overall concerns for the health of the community yielded that a majority of individuals expressed concern for chronic and infectious disease such as COVID-19. Obesity and physical health were also concerns for these individuals as were mental health and food security. Substance abuse and lack of childcare were also concerns. Participants also noted that domestic violence and community resources such as clothing, homelessness, mental health services, social support, and community resources for older adults were areas of concern in their communities. Outliers included air quality and lack of physical contact.

Question 3: In thinking about your community, what kind of social support do you have? Social support includes but is not limited to on-line organizations, religious groups, friends and family that are helpful to you in good and bad times.

Individuals responded that they had social support on a personal level that includes family and friends, colleagues, staff, neighbors, and their spouses. They also noted that they had community resources such as food banks, free medical clinics, INTEGRIS, school/mentor groups, and social media for social support. Outliers include therapists, pets, a notation of limited support within the low-income parts of the OKC Metro area, and not easily accessible access to mental health resources.

Question 4: What are the main health services lacking in your community?

Responses of health services that are lacking in participants' communities include preventive services. This yielded a majority responding that mental health services were lacking but also included COVID-19 testing, preventive care, health awareness education, family planning, health literacy, free counseling, free services, and mammograms. Survey participants also noted that their community lacked affordable healthcare for accessing family doctors, women's health checks, physical health, free or low-cost clinics, daily care for special needs and disability, nutrition, diabetes education, support groups for diabetic and obese patients, STD testing, affordable medication, quality care for older adults, and access to health in general. Responses also included a lack of environmental resources such as transportation for older adults, housing, access to employment and school education, proper nutrition education and resources, rehabilitation facilities, domestic abuse shelters, senior centers, Alzheimer's family support, support groups, religion, special education services, and culturally sensitive health providers. About nine participants provided no response. Outliers included needs for financial assistance and police training.

Question 5: What services do you feel would impact your community the most?

In response to this question, focus group survey participants listed services such as nutrition and health education as services that would impact their community the most. Individuals also shared that mental health and health services in general would have a positive impact within their community. These services include but are not limited to: housing services, mental health facilities, COVID prevention and resources, free medical access, and physical health.

Responses from participants also yielded that community resources like environmental health, food banks, faith-based organizations, clothing closets for children, and college readiness programs would have a positive influence upon their community.

Question 6: What resources are needed in your community in order to protect community members from COVID-19?

Focus group responses yielded that policy changes were what the majority of participants stated were needed in their community in order to protect their community against COVID-19. Along with this, free and accessible PPE was the second most popular response. Vaccination, disinfecting, and free/accessible COVID testing were among the other popular responses. Credible information (including access to credible sources) was also expressed as a needed resource in the community. Services for older adults and resources such as remote learning, information about safe practices, classes for teachers using chemicals and cleaning products, and public transportation were other resources that were said to be needed to protect community members from COVID-19. Outliers for responses to this question included mental health, health literacy, nutrition education/access, leniency on bills, and intelligence.

Question 7: Have you witnessed or experienced discrimination in any of these areas: race, ethnicity, sexual orientation, age, ability, or other socially defined circumstance? If so what approaches do you suggest may resolve these issues.

In regard to discrimination, 28 participants had witnessed some form of discrimination in one or more of these areas. Twenty-five people had not witnessed discrimination in any of these categories including race, ethnicity, sexual orientation, age, ability, or other socially defined circumstance. Six individuals did not answer or declined to answer the question. Outliers included language barriers, teaching children, more diverse staff, police discrimination, and media influences.

Quantitative Analysis

To be used in tandem with INTEGRIS' Online Survey Analysis.

Question 6: Race/Ethnicity

Of the 42 surveyed at Crossing Community Center and Crossings Community Clinic, the majority identified as White/Caucasian (47.62%) or Black/African American (35.71%). Nearly 10% (9.52%) said they were Hispanic/Latino, while 2.38% identified as Alaskan Native/American Indian. No participants listed as Asian/Pacific Islander as their race, and almost 5% (4.76%) identified as other.

Of the 212 surveyed at HPI Community Hospital and Northwest Surgical Hospital, the majority identified as White/Caucasian (78.30%). A little over 7% (7.08%) identified as Black/African American, while 7.55% were Hispanic/Latino. Nearly 3% (2.83%) said they were Asian/Pacific Islander or Alaskan Native/American Indian (2.36%). Almost 2% (1.89%) identified as other.

Of the 73 surveyed at INTEGRIS Community Hospital Cleveland County, the majority identified as White/Caucasian (80.82%) or Black/African American (8.22%). While both Hispanic/Latino and Asian/Pacific Islander were 1.37%. Close to 6% (5.48%) identified as Alaskan Native/American Indian and nearly 3% (2.74%) identified as other.

Of the 32 surveyed at INTEGRIS Community Hospital Oklahoma County, 68.75% identified as White/Caucasian or Black/African American (21.88%). No participants listed as Hispanic/Latino or Other. A little over 3% (3.13%) identified as Asian/Pacific Islander and 6.25% said they were Alaskan Native/American Indian.

Of the 41 surveyed at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, nearly 90% (87.80%) identified as White/Caucasian while, 7.32% identified as Black/African American. Close to 5% (4.88%) said they were Hispanic/Latino and none of the participants listed Asian/Pacific Islander, Alaskan Native/American Indian, or other.

Question 7: Personal Physical Health

Among the 42 survey participants at Crossings Community Center and Crossing Community Clinic, the majority of respondents reported that they were “somewhat healthy” (54.76%), followed by “not so healthy” (33.33%), and “very healthy” (11.9%).

Of the 212 respondents who answered this question at HPI Community Hospital and Northwest Surgical Hospital, the majority reported that they were “very healthy” (48.58%) or “somewhat healthy” (42.92%). Fewer participants reported that they were “extremely healthy” (5.19%) or “not so healthy” (3.3%).

Of the 74 survey respondents at INTEGRIS Community Hospital in Cleveland County, many reported that they were “somewhat healthy” (48.65%) or “very healthy” (33.78%). This was followed by those who said they were “not so healthy” (12.16%), “extremely healthy” (4.05%), or “not at all healthy” (1.35%).

Among the 32 participants who answered the survey at INTEGRIS Community Hospital in Oklahoma County, respondents noted that they were either “very healthy” (56.25%) or “somewhat healthy” (43.75%).

Of the 41 participants at the Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, the majority reported that they were “somewhat healthy” (46.34%) or “very healthy” (41.46%). This was followed by those who said they were “extremely healthy” (4.88%), “not so healthy” (4.88%), or “not at all healthy” (2.44%).

Question 8: Family History of Any Conditions/Diseases

Of the 41 participants who answered the survey at Crossings Community Center and Crossing Community Clinic, many reported that their family history included high blood pressure (80.49%), diabetes (68.29%), cancer (56.10%), and/or heart disease (48.78%). Others reported family history of high cholesterol (41.46%), thyroid disorder (26.83%), asthma (21.95%), stroke (19.51%), or seizures (9.76%). “No known disorders” was not selected (0.00%).

Among the 213 participants at HPI Community Hospital and Northwest Surgical Hospital, many shared that their family history included high blood pressure (69.57%), diabetes (49.28%), heart disease (48.31%), and cancer (47.83%), with cholesterol (38.16%), thyroid disorder (26.57%), asthma (22.71%), stroke (18.36%), no known disorders (11.11%), and seizures (4.35%) following.

Of the 72 survey respondents who answered the survey at INTEGRIS Community Hospital Cleveland County, many reported that their family history included high blood pressure (75.00%), cancer (58.33%), heart disease (58.33%), diabetes (48.61%), and cholesterol (45.83%), while fewer reported a family history of thyroid disorder (31.94%), asthma (20.83%), stroke (16.67%), no known disorders (5.56%), and seizures (1.39%).

Among the 32 participants who answered the survey at INTEGRIS Community Hospital Oklahoma County family history noted diabetes (62.50%) and high blood pressure (56.25%), as well as cancer (34.38%), heart disease (31.25%), cholesterol (31.25%) thyroid disorder (25.00%), no known disorders (21.88%), asthma (12.50%), stroke (6.25%), and seizures (6.25%). In this community survey, diabetes was overwhelmingly shared as a known family condition.

Of the 41 participants at the Oklahoma Center for Orthopaedic & Multi-Specialty Surgery many shared that high blood pressure (70.73%), cancer (65.85%), heart disease (53.66%), cholesterol (53.66%), and diabetes (51.22%) were known family conditions, while thyroid disorder (41.46%), stroke (31.71%), asthma (12.20%), seizures (7.32%), and no

known disorders (7.32%) were also shared. High blood pressure, cancer, heart disease and high cholesterol are recognized family history among participants in this survey.

Question 9: Personal Chronic Diseases

Of the 41 people who answered the survey at Crossings Community Center and Crossings Community Clinic, more than 17% responded that they have a chronic disease, compared to 31% who responded “no” to having a chronic disease, and 17% who responded “I do not know.”

Among the 211 respondents at HPI Community Hospital and Northwest Surgical Hospital, less than 5% stated that they had a chronic disease, while 69% responded “no” to having a chronic disease and more than 3% admitted “I do not know” in regards to having a chronic disease.

Of the 74 people who filled out the survey at INTEGRIS Community Hospital Cleveland County, less than 7% responded “yes” to having a chronic disease, while 45% replied “no” and 7% shared they did not know if they had a chronic disease.

Among the 32 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, more than 3% said “yes” to having a chronic disease compared with 72% who responded “no” to having any chronic diseases, and more than 3% who stated “I do not know.”

Of the 41 people who answered the survey at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, more than 7% shared they had a chronic disease. Another 78% responded “no” to having a chronic disease, and 2% said “I do not know” when asked.

Question 10: Medical Insurance Coverage

Of the 41 people who answered the survey at Crossings Community Center and Crossings Community Clinic, over 92% stated they do not currently have medical insurance. Less than 5% claimed to have private insurance while less than 3% have Medicare or Sooner Care (Medicaid).

Among the 213 survey participants at HPI Community Hospital and Northwest Surgical Hospital, over 94% shared that they have private insurance. Less than 3% do not currently have health insurance. This compares to less than 3% of survey participants that chose “Sooner Care” or “Medicare” as their medical coverage.

At the INTEGRIS Community Hospital Cleveland County, over 68% of the 74 survey participants indicated that they currently have private medical insurance. Just over 27% shared that they use Medicare. Less than 3% of survey participants claimed to have Sooner Care, while less than 2% stated they do not currently have medical insurance coverage.

Of the 32 survey participants at INTEGRIS Community Hospital Oklahoma County, over 93% shared that they have private medical insurance. Over 6% claimed to not have health insurance, and none of the participants indicated that they have Sooner Care or Medicare.

Among the 41 survey participants at the Oklahoma Center for Orthopedic & Multi-Specialty Surgery, over 97% stated that they use private medical insurance. Less than 3% claimed that they do not currently have health insurance and none of the participants indicated that they have Sooner Care or Medicare.

Question 11: Sense of Pride in County

At Crossings Community Center and Crossings Community Clinic, 42 participants asked about their sense of pride in Oklahoma County replied in the affirmative. About 35.7 % reported excellent pride in the county, and 30.9% noted moderate pride in Oklahoma County. Less than 5% (4.8%) reported poor pride.

Among the 212 HPI Community Hospital and Northwest Surgical Hospital respondents who answered this question, 29.3% stated that they have excellent pride in Oklahoma County; however, the vast majority (40.6%) had moderate pride, while 3.8% reported poor pride in Oklahoma County.

Seventy-two participants at INTEGRIS Community Hospital Cleveland County were asked about their sense of pride in Cleveland County. A majority (44.6%) answered that they have moderate pride in Cleveland County followed by 31.1% who reported excellent pride. Fewer than 2% (1.4%) reported poor pride in Cleveland County.

Among the 32 respondents on county pride at INTEGRIS Community Hospital Oklahoma County, about 53.1% have moderate pride in Oklahoma County, while only 18.8% reported excellent pride in Oklahoma County. And 6.3% had poor pride in their county.

Among 42 participants at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, a majority (51.2%) reported moderate pride in Oklahoma County, 29.3% reported fair pride, and 2.4% had poor pride in Oklahoma County.

Question 12: County Rating as a Healthy Community

Among the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, over 60% of participants rated Oklahoma County as "good" or "fair" in regards to how healthy Oklahoma County is. Less than 30% of the respondents rated health in Oklahoma County as "very good." This compares to almost 5% who rated health in Oklahoma County as "poor" and almost 5% who rated it as "excellent."

Of the 213 people who answered the survey at HPI Community Hospital and Northwest Surgical Hospital, more than 80% of participants rated Oklahoma County as "good" or "fair" in regards to how healthy Oklahoma County is. Less than 10% of the respondents rated health in Oklahoma County as "very good." This compares to almost 12% who rated health in Oklahoma County as "poor" and almost 2% who rated it as "excellent."

Among the 74 participants who answered the survey at INTEGRIS Community Hospital Cleveland County, almost 60% rated Cleveland County as "good" or "fair" in regards to how healthy the county is. More than 30% of the respondents rated health in Cleveland County as "very good." This compares to 4% who rated health in Cleveland County as "poor" and 5% who rated it as "excellent."

Among the 32 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, over 72% of participants rated Oklahoma County as "good" or "fair" in regards to how healthy the county is. There were no responses from the respondents that rated health in Oklahoma County as "very good." This compares to 25% who rated health in Oklahoma County as "poor" and 3% who rated it as "excellent."

Of the 41 people who answered the survey at Oklahoma Center for Orthopedic & Multi-Specialty Surgery, 85% of participants rated Oklahoma County as "good" or "fair" in regards to how healthy Oklahoma County is. Less than 10% of the respondents rated health in Oklahoma County as "very good." This compares to almost 8% who rated health in Oklahoma County as "poor" and almost 0% who rated it as "excellent."

Question 13: County Rating as a Safe Community

Of the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, over 72% of participants rated Oklahoma County as "good" or "fair" in regard to safety. Less than 20% of the respondents

rated safety in Oklahoma County as “very good.” This compares to almost 5% who rated safety in Oklahoma County as “poor” and almost 5% who rated it as “excellent.”

Of the 212 people who answered the survey at HPI Community Hospital and Northwest Surgical Hospital, 48% of the participants rated Oklahoma County as good in regard to safety. Over 45% of the respondents rated safety in Oklahoma County as “very good” or “fair.” This compares to almost 6% who rated safety in Oklahoma County as “poor” and almost 3% who rated it as “excellent.”

Among the 74 people who answered the survey at INTEGRIS Community Hospital Cleveland County, over 74% of the participants rated that safety in Cleveland County was “good” or “very good.” Less than 25% of the respondents rated Cleveland County as “fair” or “excellent” in regard to safety. This compares to almost 3% who rated safety in Cleveland County as “poor.”

Of the 31 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, 58% of the participants rated the safety in Oklahoma County was “good.” Over 25% of the respondents rated Oklahoma County as “fair” in regard to safety. This compares to almost 10% who rated safety in Oklahoma County as “poor” and almost 7% who rated it as “very good.”

Among the 42 people who answered the survey at Oklahoma Center for Orthopedic & Multi-Specialty Surgery, over 75% of participants rated Oklahoma County as “good” or “fair” in regard to safety. Only 17% of the respondents rated safety as “very good” in Oklahoma County. This compares to the 7% who rated safety in Oklahoma County as “poor.”

Question 14: Sense of Responsibility to Improve County Health Status

Among the 42 participants at the Crossings Community Center and Crossing Community Clinic, respondents shared that they “always” (38.1%), “sometimes” (30.95%), and “often” (26.19%) felt a sense of responsibility to improve the health status of Oklahoma County. This contrasted with 2.38% who “rarely” and another 2.38% who “never” felt this was their responsibility.

Of the 211 participants at the HPI Community Hospital and Northwest Surgical Hospital who answered this question, respondents shared that they “sometimes” (32.23%), “often” (30.81%), or “always” (29.86%), felt a sense of responsibility to improve the health status of Oklahoma County. This contrasted with 7.11% who “rarely” and 0.95% who “never” felt this was their responsibility.

Of the 73 participants at the INTEGRIS Community Hospital Cleveland County who answered this question, respondents shared that they “sometimes” (32.88%), “often” (27.4%), or “always” (21.92%), felt a sense of responsibility to improve the health status of Cleveland County. This contrasted with 13.7% who “rarely” and 5.48% who “never” felt this was their responsibility.

Of the 32 participants at the INTEGRIS Community Hospital Oklahoma County who answered this question, respondents shared that they “sometimes” (43.75%), “always” (31.25%), or “often” (21.88%), felt a sense of responsibility to improve the health status of Oklahoma County. This contrasted with 3.13% who “rarely” felt this was their responsibility.

Among the 41 participants at the Oklahoma Center for Orthopedic & Multi-Specialty Surgery who were surveyed, respondents shared that they “often” (48.78%), “sometimes” (24.39%), or “always” (21.95%), felt a sense of responsibility to improve the health status of Oklahoma County. This contrasted with 7.32% who “rarely” felt this was their responsibility.

Question 15: Concern for Issues of Well-Being

Of the 42 participants at the Crossings Community Center and Crossing Community Clinic, respondents stated they were “very concerned” about Poverty (71%), Employment (69%), Housing (63%), Education (55%), Access to fresh fruits and vegetables (55%) and, Safety (54%). In contrast, participants reported they were “not concerned at all” for Parks/playgrounds (17%), Sidewalks/Walkability (14%), Social Support (e.g., friend, neighbor, relative) and, Healthier places to eat (7%).

Among the 211 participants at the HPI Community Hospital and Northwest Surgical Hospital who answered this question, respondents stated they were “very concerned” about Education (60%), Employment (50%), Safety (48%), Poverty (45%) and, Housing (39%). This was in contrast to participants reporting that they were “not concerned at all” for Sidewalks/Walkability (22%), Access to fresh fruits and vegetables (18%), Parks /Playgrounds (15%), and, Healthier places to eat (15%).

Of the 74 participants at the INTEGRIS Community Hospital Cleveland County asked to measure their concern for wellbeing issues in their community, respondents stated they were “very concerned” about Education (46%), Safety (39%), Poverty (38%), Employment (38%), Housing (36%) and, Access to fresh fruits and vegetables (34%), while participants reported they were “not concerned at all” for Access to fresh fruits and vegetables (30%), Parks/playgrounds (29%), Sidewalks/Walkability (25%) and, Healthier places to eat (24%).

Among the 32 participants at INTEGRIS Community Hospital Oklahoma County asked to measure their concern for wellbeing issues in their community, respondents stated they were “very concerned” about Education (63%), Employment (59%), Safety (53%), Poverty (44%) and, Access to fresh fruits and vegetables (40%). In contrast, participants reported they were “not concerned at all” for Healthier places to eat (16%), Housing (13%), Parks/Playgrounds (13%) and, Sidewalks/Walkability (9%).

Among 41 participants at the Oklahoma Center for Orthopedic & Multi-Specialty Surgery asked to measure their concern for wellbeing issues, respondents stated they were “very concerned” about Employment (63%), Safety (61%), Poverty (60%), Education (56%) and, Housing (54%). In contrast, participants reported they were “not concerned at all” about Sidewalks/Walkability (17%), Access to fresh fruits and vegetables (17%), Healthier places to eat (15%) and, Social Support (e.g., friend, neighbor, relative) (15%).

Question 16: Concern for Mental Health Issues

Out of the 42 participants who answered the online survey for Crossings Community Center and Crossings Community Clinic, 27 participants were “very concerned” with depression (64.29%) as one of the mental health issues affecting the Oklahoma County community. Bullying was the second highest concern with 63.41% of participants noting it, followed by drug abuse (58.54%). More than half (57.14%) of the participants were very concerned with both anxiety and alcohol abuse. Lastly, half of the participants reported concern regarding suicide (50.00%).

Out of the 213 participants who answered the online survey for HPI Community Hospital and Northwest Surgical Hospital, 60% were “very concerned” with suicide followed by 58% reporting concerns for drug abuse and bullying. This was followed by concerns with alcohol abuse (58.29%), depression (56.87%), and anxiety (55.92%).

Among the 74 participants at INTEGRIS Community Hospital Cleveland County, 41 out of 74 participants were “very concerned” with alcohol abuse (58.29%) and bullying (55.41%) as main mental health issues affecting their community. This was followed by depression (48.65%), anxiety (47.95%), suicide (47.30%), and drug abuse (45.95%). Lastly, 30 out of 74 participants were very concerned with alcohol abuse (40.54%).

Out of the 32 participants completing the online survey for INTEGRIS Community Hospital Oklahoma County, one skipped question 16. 18 out of 31 participants were “very concerned” with alcohol abuse (58.06%) as the main

mental health issue affecting their community. Over half (54.84%) of participants reported both drug abuse and bullying as an issue where they were very concerned, followed by depression and suicide (51.61% for each). Participants were also very concerned with anxiety (48.39%).

Among the 41 participants who answered the online survey for Oklahoma Center for Orthopedic & Multi-Specialty Surgery 68% of participants were “very concerned” with suicide and drug abuse (68.29%) as main mental health issues affecting their community. Participants also reported alcohol abuse as a concern (65.85%), followed by depression (60.98%), bullying (60%), and anxiety (53.66%).

Question 17: Personal Mental Health Status

Of the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, 19.05% of participants rated their mental health as “extremely healthy,” while 11.90% reported their mental health as “moderately healthy.” This compared to 30.95% who rated their mental health as “healthy,” one-third (33.33%) who shared they were “slightly healthy,” and less than 5% who rated their mental health status as “unhealthy.”

Of the 212 participants at HPI Community Hospital and Northwest Surgical Hospital, 29.25% reported their mental health as “extremely healthy,” 37.26% described themselves as “moderately healthy,” 24.06% listed “healthy,” and 8.02% as “slightly healthy.” Less than 2% of participants rated their mental health as “unhealthy.”

Among the 74 participants surveyed by INTEGRIS Community Hospital Cleveland County, 37.84% reported their mental health as “extremely healthy,” 28.38% said their mental health was “moderately healthy,” and 24.32% rated it as “healthy.” This compares to 6.76% who rated their personal mental health as “slightly healthy” and 2.70% who rated it as “unhealthy.”

Of the 32 participants who were surveyed by INTEGRIS Community Hospital Oklahoma County, 31.25% rated their personal mental health as “extremely healthy,” while 28.13% rated it as “moderately healthy.” Another 28.13% rated their mental health as “healthy,” while 9.38% rated it as “slightly healthy” and 3.13% rated it as “unhealthy.”

Of the 41 participants who were surveyed by the Oklahoma Center for Orthopedic & Multi-Specialty Surgery, 31.71% rated their mental health as “extremely healthy,” 34.15% rated it as “moderately healthy,” and 19.51% rated mental health as “healthy.” In comparison, 9.76% rated their personal mental health as “slightly healthy,” and 4.88% rated mental health as “unhealthy.”

Question 18: Stress in a Typical Week

Of those surveyed at Crossings Community Center and Crossings Community Clinic a total of 42 participants answered this question. Participants reported “little stress” (38.10%), “quite a bit of stress” (30.95%), “a lot of stress” (21.43%) and “not much stress” (7.14%). This compares to 2.38% who reported they have “no stress.”

Of the 212 surveyed at HPI Community Hospital and Northwest Surgical Hospital, 36.32% of the participants noted they had “quite a bit of stress,” compared with 30.66% who reported “little stress,” 20.28% who noted they had “a lot of stress,” and 11.79% with “not much stress.” This compared to 0.94% who reported “no stress.”

Among the 74 participants at INTEGRIS Community Hospital Cleveland County, 31.08% reported “quite a bit of stress,” followed by 29.73% who noted “little stress,” 20.27% with “not much stress,” and 14.86% with “a lot of stress.” This compared to 2.70% who reported “no stress.”

Of the 32 surveyed at INTEGRIS Community Hospital Oklahoma County, 37.50% reported “little stress,” 31.25% reported “quite a bit of stress,” 25% noted “a lot of stress,” and 3.13% noted “not much stress.” At this site, 3.13% of respondents reported “no stress.”

Among the 41 participants who answered this question at Oklahoma Center for Orthopedic & Multi-Specialty Surgery, 39.02% noted that they had “quite a bit of stress,” followed by 36.59% with “little stress,” 12.20% with “a lot of stress” and “not much stress.”

Question 19: Personal Experience with Anxiety

Of the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, roughly 62% of participants stated they “sometimes” or “usually” experienced anxiety. Less than 10% of the respondents reported that they “always” experienced anxiety, while almost 15% stated they “rarely,” and almost 15% stated they “never” experience anxiety.

Of the 212 people who answered the survey at HPI Community Hospital and Northwest Surgical Hospital, roughly 69% of the participants stated that they “sometimes” or “rarely” experience anxiety, compared with less than 15% of respondents who reported that they “usually” deal with anxiety. This compares to almost 10% who reported their anxiety as “always” and almost 8% who shared they “never” experience anxiety.

Of the 74 people who answered the survey at INTEGRIS Community Hospital Cleveland County, nearly 41% of the participants reported they “usually” or “rarely” experienced anxiety. Less than 40% of the respondents shared they “sometimes” experienced anxiety while almost 10% said they “always” have anxiety. Another 11% of participants shared they “never” experience anxiety.

Of the 32 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, 46% of the participants noted that they “sometimes” experience anxiety. Over 34% of the respondents shared that they “rarely” or “always” experienced anxiety. This compared to almost 13% who reported that they “usually” experienced anxiety, and 6% who reported that they “never” do.

Of the 41 people who answered the survey at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, 75% of the participants stated they “sometimes” or “rarely” experience anxiety. Less than 15% of the respondents marked that they “usually” experience anxiety, while 7% reported that they “always” have anxiety. Another 2% reported that they “never” experience anxiety.

Question 20: Personal Experience with Depression

Of the 42 participants who responded at the Crossing Community Center and Crossings Community Clinic, the majority reported that they “sometimes” experience depression (47.62%). This was followed by those who reported that they “rarely” experience depression (23.81%), “usually” experience depression (11.90%), and “never” experience depression (9.52%). Finally, just over 7% of participants reported that they “always” experience depression (7.14%).

Among the 212 who participated in surveys at the HPI Community and Northwest and Surgical Hospital, respondents reported that they “rarely” experience depression (35.85%), “sometimes” experience depression (31.60%), and “never” experience depression (19.34%). This was followed by those who reported “usually” (7.55%) and “always” experiencing depression (5.66%).

Of the 74 participants who responded at the INTEGRIS Community Hospital Cleveland County, a total the majority shared that they “sometimes” experience depression (36.45%), followed by those reporting they “rarely” (29.73%) and “never” (13.51%) do. Additionally, 12.16% reported that they “usually” experience depression and 8.11% report that they “always” do.

Among the 32 participants who responded at the INTEGRIS Community Hospital Oklahoma County, the majority shared that they “sometimes” experience depression (46.88%), followed by those who reported that they “rarely”

(21.88%), or “never” (18.75%) do. Finally, 6.25% of participants noted that they “always” experience depression, and another 6.35% reported that they “usually” do.

Of the 41 respondents to this question at the Oklahoma Center for Orthopaedic and Multi-Specialty Surgery, most reported that they “rarely” experience depression (53.66%). Additional responses included “sometimes” (21.95%), “never” (14.63%), “always” (4.88%), and “usually” experiencing depression.

Question 21: Strong Social Support

Of the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, about 33% of participants reported that they “always” have a strong social support during hard times. Less than 24% of respondents “usually” or “sometimes” have strong social support during hard times, followed by 17% who reported “rarely” and about 2% who reported “never” having social support during hard times.

Among the 211 people who answered the survey at HPI Community Hospital and Northwest Surgical Hospital, about 59% reported “always” having strong social support during hard times, while less than 24% of respondents shared that they “usually” and 13% reported they “sometimes” have strong social support. This compares with 4% who reported “rarely” and about 0.5% who reported “never” having strong social support during hard times.

Of the 74 people who answered the survey at INTEGRIS Community Hospital Cleveland County, about 45% reported “always” having strong social support during hard times. Less than 30% of respondents reported “usually” and 15% reported “sometimes” having a strong social support system. Another 9% reported “rarely” having strong social support during hard times, while 1% reported that they “never” do.

Among the 32 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, 34% reported “always” having strong social support during hard times, while less than 44% of respondents “usually” and 13% “sometimes” do. This compared with 9% who reported “rarely” having strong social support during hard times.

Of the 41 people who answered the survey at Oklahoma Center for Orthopedics & Multi-Specialty Surgery, about 61% of participants reported that they “always” have strong social support during hard times, with less than 22% of respondents who “usually” and 13% who “sometimes” do. In contrast, 5% reported “rarely” having a strong social support during hard times.

Question 22: Concern Regarding Physical Health Issues

Overwhelming, of the 42 surveyed by Crossing Community Center and Crossings Community Clinic, the majority of respondents reported that they were “very concerned” about cancer (64%), high blood pressure (62%), stroke (57%), respiratory illness/disease (56%), heart disease (52%), and obesity (52%). This is in contrast to concern for social issues where less than half of survey participants reported they were “very concerned” about tobacco and cigarettes (45%) and less than four out of 10 reported they were “very concerned” about teen pregnancy (36.5%).

Of the 211 who answered this question at HPI Community Hospital and Northwest Surgical Hospital, the majority of the respondents reported that they were “very concerned” about obesity (48%), Cancer (46%), diabetes (41%), respiratory illness/disease (38%), heart disease (38%), stroke (36%), and tobacco and cigarettes (35%). This is in contrast to concerns for teen pregnancy (28%).

Of the 74 surveyed by INTEGRIS Community Hospital Cleveland County, over 51% of the respondents reported that they were “very concerned” about obesity. More than four out of 10 reported that they were “very concerned” about high blood pressure (47%), diabetes (45%), heart disease (45%), cancer (44%), stroke (43%). This is in contrast to concern for social issues where about three out of 10 reported they were “very concerned” about teen pregnancy (35%) and tobacco and cigarettes (28%).

Among the 32 surveyed by INTEGRIS Community Hospital Oklahoma County, almost 47% of respondents reported that they were “very concerned” about diabetes and heart disease. 41% of respondents reported that they are “very concerned” about obesity, stroke, and respiratory illness/disease. This is in contrast to concern for social issues where about three in 10 reported they were “very concerned” about tobacco and cigarettes (28%) and teen pregnancy (25%).

When looking at the 41 participant surveys for Oklahoma Center for Orthopedic & Multi-Specialty Surgery not many reported that they were “very concerned” about physical health issues; however, when grouping both “very concerned” and “moderately concerned” there is an overwhelming response. When looking at these combined percentages, respondents reported that their main concerns were: obesity (88%), cancer (76%), diabetes (73%), stroke (71%), and high blood pressure (71%). This is in contrast to concerns for other issues where just over half reported concern for respiratory illness/disease (59%), tobacco and cigarettes (56%), and teen pregnancy (55%).

Question 23: Weight Status

Among the 42 participants at Crossings Community Center and Crossing Community Clinic, a total of 50% of participants reported that they were overweight, while about 31% (30.95%) of participants would describe their weight as a healthy weight. Of the 42 participants, only 14% reported being obese and 4%-5% reported being underweight.

Of the 213 participants from HPI Community Hospital and Northwest Surgical Hospital, survey respondents once again reported their weight as being overweight (50.47%). Additionally, 37.74% of participants reported being at a healthy weight, followed by 10.38% reporting being obese, and 1.42% reported being underweight.

Among the 74 participants from INTEGRIS Community Hospital Cleveland County, results from the survey differ with the majority (45.95%) reporting a healthy weight and 43.24% reporting being overweight. Another 10.81% reported their weight was obese and no participants reported that they were underweight.

Of the 74 participants surveyed at INTEGRIS Community Hospital Oklahoma County, 62.5% reported that they are overweight, while one-quarter (25%) reported a healthy weight and 12.50% reported being obese.

Of the 41 participants answering this question at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, the majority reported their weight as being overweight (51.22%) followed by 41.46% who reported their weight as healthy. At this location, 4.88% reported their weight as obese, and 2.44% reported being underweight.

Question 24: Typical Weekly Physical Activity

Of the 42 participants surveyed at Crossings Community Center and Crossings Community Clinic, 38.10% reported “less than 90 minutes” of physical activity.

Among the 212 participants at HPI Community Hospital and Northwest Surgical Hospital who were surveyed, “less than 90 minutes” (34.3%) and “90-120 minutes” (31.13%) were the most reported responses. The answer “none” only had 9 votes (4.25%), making it the least popular choice.

Of the 74 participants surveyed at INTEGRIS Community Hospital Cleveland County, 50% of stated that they complete less than 90 minutes of physical activity in a normal week. This compared with 21.26% who reported “90-120 minutes,” and 17.57% who obtained “150+ minutes” of activity each week. Additionally, “121-149 minutes” (6.76%) and “none” (4.05%) were the least reported for this group.

Among the 32 participants who were surveyed at INTEGRIS Community Hospital Oklahoma County, “less than 90 minutes” (40.63%) and “90-120 minutes” (34.38%) were most reported. “150+ minutes” (12.50%), “121-149 minutes” (9.38%), and “none” (3.13%) made up only about a quarter of the votes.

Of the 41 participants surveyed at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, “less than 90 minutes” was reported by more than 50% of the respondents. Additionally, “90-120 minutes” (19.51%) and “121-149 minutes” (14.63%) were reported next, while “150+ minutes” and “none” tied with the least amount with only 7.32% of participants selecting these.

Question 25: Access to Healthcare Related Issues

Of the 42 people who answered the survey at Crossings Community Center and Crossings Community Clinic, a majority of respondents reported that they were “very concerned” with affordable prescription medications (76.19%), timely, access to specialty providers (51%), and non-emergency healthcare (50%). Only 30.95% noted that they were “very concerned” about culturally competent providers.

Of the 211 people who answered this question on the survey at HPI Community Hospital and Northwest Surgical Hospital, more than half (55.45%) reported that they were “very concerned about affordable prescription medication, while more than one-third (34.60%) were “very concerned” about accessing a specialty provider. This compared with 30.81% who were “very concerned” about accessing care when needed and 27.49% who were “very concerned” with having culturally competent providers.

Of the 74 people who answered the survey at INTEGRIS Community Hospital Cleveland County, the vast majority (66.22%) were “very concerned” about affordable prescription medication, followed by timely, non-emergency access to care (47.3%), access to a specialty provider (47.3%), and culturally competent providers (37.84%).

Of the 32 people who answered the survey at INTEGRIS Community Hospital Oklahoma County, the majority (53.13%) reported they were “very concerned” in accessing affordable prescription medication, while “not concerned at all” was most selected for accessing a specialty provider (34.38%) and culturally competent providers (31.25%). Finally, 31.25% of participants noted they were “concerned” about accessing timely, non-emergency health care, when needed.

Of the 41 people who answered the survey at Oklahoma Center for Orthopedic & Multi-Specialty Surgery, the majority (53.66%) expressed that they were “very concerned” with accessing affordable prescription medications, compared with 46.34% who were “moderately concerned” with accessing a specialty provider. Additionally, participants reported they were “moderately concerned” with accessing non-emergency care (43.90%) and culturally competent providers (34.15%).

Question 26: Reliable Form of Transportation

Of the 42 survey participants at Crossings Community Center and Crossings Community Clinic, about 79% of participants shared that they do have a reliable form of transportation with the remaining 21% of participants shared that they do not have a reliable form of transportation.

Of the 211 survey participants at the HPI Community Hospital and Northwest Surgical Hospital, 100% of survey participants shared that they do have a reliable form of transportation.

Of the 74 survey participants at the INTEGRIS Community Hospital Cleveland County, about 99% of participants shared that they do have a reliable form of transportation.

Of the 32 survey participants at the INTEGRIS Community Hospital Oklahoma County, 100% of participants shared that they had a reliable form of transportation.

Of the 41 survey participants at the Oklahoma Center for Orthopedic & Multi-Specialty Surgery Center, 100% of participants shared that they do have a reliable form of transportation.

Question 27: Access to Grocery with Healthy Foods

Among the 42 survey participants at the Crossings Community Center and Crossings Community Clinic, 100% of the participants said that they have access to a grocery store that carries healthy, fresh, foods.

Among the 212 survey participants at the HPI Community Hospital and Northwest Surgical Hospital, 100% of the participants said that they have access to a grocery store that carries health, fresh, foods.

Among the 74 survey participants at the INTEGRIS Community Hospital Cleveland County, 100% of the participants said that they have access to a grocery store that carries health, fresh, foods.

Among the 32 survey participants at the INTEGRIS Community Hospital Oklahoma County, 100% of the participants said that they have access to a grocery store that carries health, fresh, foods.

Among the 40 survey participants at the Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, 100% of the participants said that they have access to a grocery store that carries health, fresh, foods.

Question 28: Healthcare Free of Discrimination

Of the 42 survey participants at Crossings Community Center and Crossings Community Clinic, over 40% of participants believed they “always” received fair healthcare despite their gender, race, age, religion, or sexual orientation. Roughly 38% believed they “usually” received fair healthcare despite their demographic characteristics. Less than 15% of the respondents believed they “sometimes” received fair healthcare despite their demographic characteristics; additionally, almost 5% of participants believed they “rarely” received fair healthcare despite their demographic characteristics, while roughly 2% believed they “never” had.

Of the 213 survey participants at the HPI Community Hospital and Northwest Surgical Hospital, 63% of participants believed they “always” received fair healthcare despite their gender, race, age, religion, or sexual orientation. Additionally, 28% believed they “usually” received fair healthcare despite their demographic characteristics, while 8% of the respondents believed they “sometimes” received fair healthcare despite their demographic characteristics. This compares to 1% who believed they “rarely” did.

Of the 74 survey participants at the INTEGRIS Community Hospital Cleveland County, 72% of participants believed they “always” received fair healthcare despite their gender, race, age, religion, or sexual orientation. Another 21% believed they “usually” received fair healthcare despite their demographic characteristics, while the remaining 7% believed they “sometimes” did.

Of the 32 survey participants at the INTEGRIS Community Hospital Oklahoma County, 47% of participants believed they “always” received fair healthcare despite their gender, race, age, religion, or sexual orientation, while 41% believed they “usually” received fair healthcare despite their demographic characteristics. Another 3% of the respondents believed they “sometimes” received fair healthcare despite their demographic characteristics; and 3% believed they “rarely” received fair healthcare despite their demographic characteristics. Finally, a full 6% of participants believed they “never” received fair healthcare despite their demographic characteristics.

Of the 40 survey participants at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, 53% of participants believed they “always” received fair healthcare despite their gender, race, age, religion, or sexual orientation. Another 40% believed they “usually” received fair healthcare despite their demographic characteristics, while 2% believed they “sometimes” did. Finally, 5% of participants believed they “rarely” received fair healthcare despite their demographic characteristics.

Question 29: Likelihood of Visiting a Healthcare Provider When Ill

Of the 42 survey participants at Crossings Community Center and Crossings Community Clinic, roughly 29% of survey participants shared that they are “always” likely to visit a healthcare provider if they are sick. About 38% of survey participants shared that they are “usually” likely to see a healthcare provider if they are sick. Less than 10% of survey participants shared that they “rarely” or “never” visit a healthcare provider if they are sick.

Of the 211 survey participants at HPI Community Hospital and Northwest Surgical Hospital, about 20% of survey participants share that they are “always” likely to visit a healthcare provider when sick. Roughly 34% of survey participants shared that they are “usually” likely to see a healthcare provider if they are sick. This compares to the 33% of survey participants who “sometimes” are likely to see a healthcare provider if they are sick. Less than 13% of survey Participants share that they “rarely” or “never” see a healthcare provider if they are sick.

Of the 74 survey participants at INTEGRIS Community Hospital Cleveland County, over 66% of survey participants shared that they are “always” or “usually” likely to visit a healthcare provider if they are sick. Roughly 23% of survey participants shared that they “sometimes” are likely to visit a healthcare provider if they are sick. Less than 11% of survey participants shared that they “rarely” or “never” are likely to visit a healthcare provider if they are sick.

Of the 32 survey participants at INTEGRIS Community Hospital Oklahoma County, roughly 15% of survey participants share that they “always” are likely to visit a healthcare provider if they are sick. About 46% of survey participants shared that they “usually” or “sometimes” are likely to visit a healthcare provider if they are sick. Over 37% of survey participants share that they “rarely” or “never” visit a healthcare provider if they are feeling sick.

Of the 41 survey participants at Oklahoma Center for Orthopedic & Multi-Specialty Surgery, about 34 survey participants shared that they “always” or “usually” are likely to visit a healthcare provider if they are sick. Over 41% of survey participants shared that they “sometimes” are likely to visit a healthcare provider if they are sick. Less than 15% of survey participants shared that they “rarely” or “never” are likely to visit a healthcare provider if they are sick.

Question 30: Financing Necessities

Among the 42 survey respondents who answered this question at Crossing Community Center and Crossings Community Clinic, the majority of participants reported that they “usually” had enough money to pay for housing (40.48%); however, a full 11.9% reported that they “never” do. Most respondents reported that they “usually” (42.86%) or “sometimes” (28.57%) have enough for transportation. Additionally, the majority of respondents noted that they only “sometimes” have enough money for medicine (35.71%) and “usually” have enough money for food (38.1%). Finally, having enough money for clothing was most often selected as “sometimes” (30.95%) by participants.

Of the 212 respondents who answered this question at HPI Community Hospital and Northwest Surgical Hospital, the vast majority reported that they “always” have enough money for the items listed: housing (72.17%), transportation (70%), food (67.45%), medicine (61.32%), and clothing (60.85%).

Among the 74 participants at INTEGRIS Community Hospital Cleveland County, the majority reported “always” having enough money for necessities: housing (75.68%), transportation (75.68%), food (66.22%), clothing (64.86%), and medicine (56.76%).

Among the 32 participants at INTEGRIS Community Hospital Oklahoma County, the majority reported “always” having enough money for transportation (65.63%), housing (62.5%), food (59.38%), clothing (46.88%), and medicine (45.16%).

Of the 41 survey respondents at Oklahoma Center for Orthopaedic & Multi-Specialty Surgery, the majority reported “always” having enough money for necessities: transportation (82.93%), food (78.05%), housing (75.61%), clothing (73.17%), and medicine (73.17%).

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