

Great Plains Regional Medical Center Community Health Needs Assessment Summary and Implementation Strategy



Oklahoma Office of Rural Health
OSU Center for Rural Health

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Introduction

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

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

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

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

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

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

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

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

² Ibid

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

Oklahoma Office of Rural Health Partnership

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

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

This document discusses the steps taken to conduct a CHNA for Great Plains Regional Medical Center in 2022. It begins with a description of the hospital's steps to addressing priorities identified during the 2019 CHNA along with the impacts, followed by a description of the medical service area, including a demographic analysis, and then summarizes each meeting that took place during the CHNA process. The report concludes by listing the recommendations that came out of the process and presenting the hospital's implementation strategy and marketing plan.

This report along with the implementation strategy was presented and approved by the governing board on May 24, 2022.

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

Great Plains Regional Medical Center worked with the Oklahoma Office of Rural Health in 2019 to complete their third Community Health Needs Assessment. The previous assessments were completed in 2016 and 2013. During that time, health concerns were identified by community members and then prioritized by community members in focus group-style meetings. The following identifies each priority, implementation taken, and an evaluation or impact of the implementation.

It must be noted that the Covid-19 pandemic greatly impacted the implementation of some of the priorities and outreach opportunities during 2020 to present.

Area of concern: Need for social services (uninsured, behavioral health, substance abuse including access to services and providers, prescriptions) and all types of specialty care

Activity 1: GPRMC successfully recruited an Orthopedic Surgeon who is trained to use Robotic Assisted Joint Replacement in Surgery. To date over 600 procedures have been completed with over 2,100 patient visits to the clinic. This availability helps alleviate travel burdens.

An experienced Gastroenterologist was also recruited to ensure a Specialist in our area was local to diagnosis and treat digestive disorders. This provider has performed over 100 surgeries and seen over 220 patients in the clinic setting.

Activity 2: GPRMC CEO served on the Board for Project AWARE. This grant was used in our community and surrounding service areas to gain access to behavioral health. This grant promoted youth mental health awareness among schools and communities and improved connections to services for school-age youth in Western Oklahoma. Over 2,100 students in the Elk City School System have benefited from this program.

Area of concern: Aging population receiving Medicaid has trouble finding doctors that accept Medicaid

Activity 1: Telehealth services (or telemedicine) was added. Video conferencing, which is used for real-time patient-provider consultations, provider-to-provider discussions, in clinics, our GeriPsych, Dialysis as well as other services. To date, there have been 900 telehealth visits completed.

Activity 2: GPRMC added two Nurse Practitioners to increase access of care especially to the Medicaid population. Both nurse practitioners are contracted providers with the Oklahoma Healthcare Authority and accept Medicaid. To date, they have collectively seen over 4,000 patients.

Area of concern: Education for patients- Providing a source for healthcare navigation including medication, insurance and preparing for a physician visit

Activity 1: Implemented improvement in our Inpatient post discharge follow-up, by providing education at discharge to ensure complete understanding of medications. Also at discharge, an appointment is made for the patient with a primary care provider to facilitate continuum of care. To date, over 4,800 inpatients have benefited from this improved program over the previous three years.

Activity 2: Western Oklahoma Opioid Prevention program grant was developed, implemented to expand comprehensive programs in response to illicit opioids, stimulants, or other substances of abuse. Roughly 5,000 individuals have benefited from this program.

Great Plains Regional Medical Center Medical Services Area Demographics

Figure 1 displays the Great Plains Regional Medical Center medical services area. Great Plains Regional Medical Center and all area hospitals are delineated in the figure. The surrounding hospitals are identified in the table below by county along with their respective bed count.

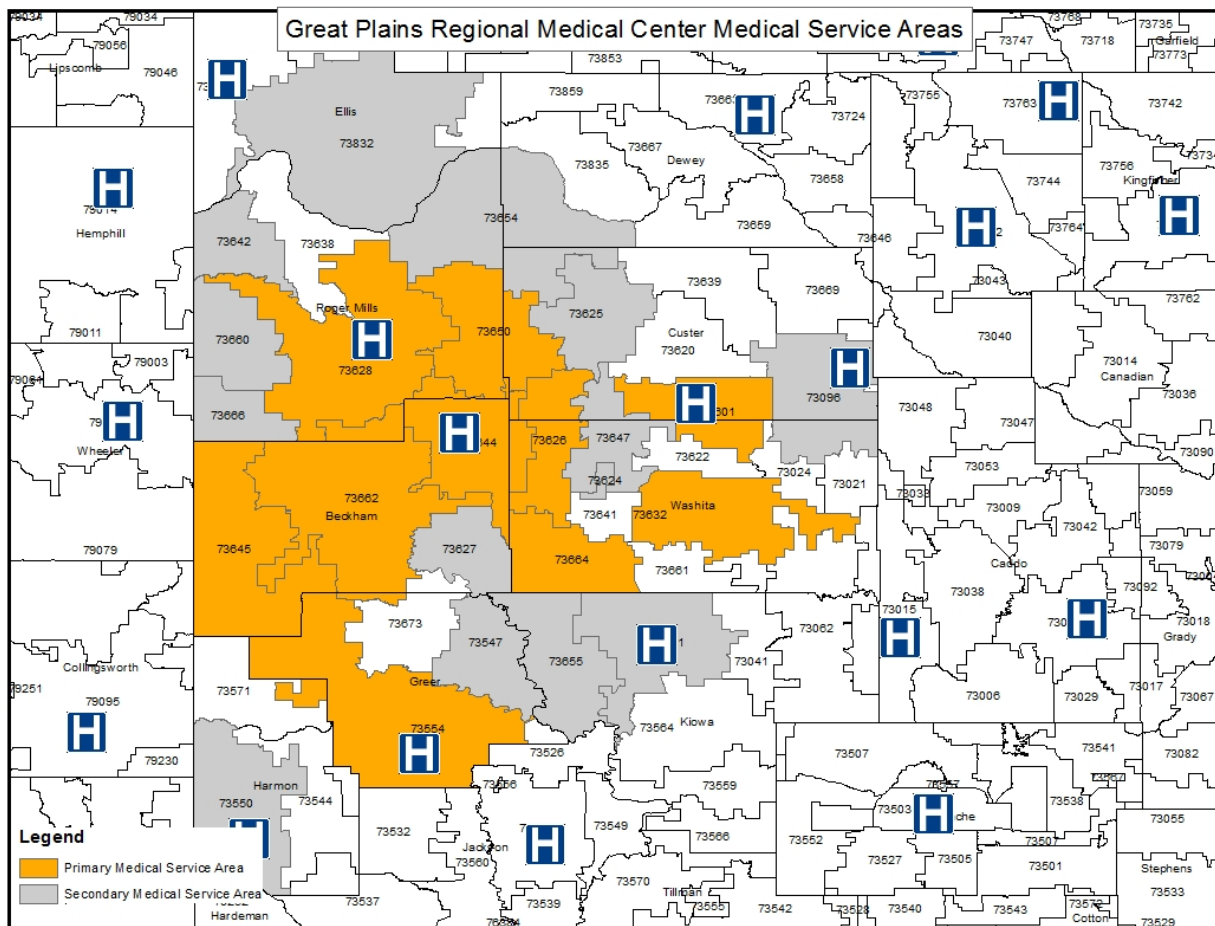


Figure 1. Great Plains Regional Medical Center Medical Service Areas

City	County	Hospital	No. of Beds
Elk City	Beckham	Great Plains Regional Medical Center	62
Okeene	Blaine	Okeene Municipal Hospital	17
Watonga	Blaine	Mercy Hospital Watonga	25
Anadarko	Caddo	The Physicians' Hospital in Anadarko	25
Carnegie	Caddo	Carnegie Tri-County Municipal Hospital	17
Lawton	Comanche	Comanche County Memorial Hospital	283
Lawton	Comanche	Southwestern Medical Center	199
Clinton	Custer	AllianceHealth Clinton	56
Weatherford	Custer	Weatherford Regional Hospital	25
Seiling	Dewey	Seiling Municipal Hospital	18
Shattuck	Ellis	Newman Memorial Hospital	79
Mangum	Greer	Quartz Mountain Medical Center	25
Hollis	Harmon	Harmon Memorial Hospital	25
Altus	Jackson	Jackson County Memorial Hospital	49
Hobart	Kiowa	Elkview General Hospital	38
Fairview	Major	Fairview Regional Medical Center	25
Cheyenne	Roger Mills	Roger Mills Memorial Hospital	15
Cordell	Washita	Cordell Memorial Hospital	14
Woodward	Woodward	AllianceHealth Woodward	87
Wellington, TX	Collingsworth, TX	Collingsworth General Hospital	n/a
Canadian, TX	Hemphill, TX	Hemphill County Hospital	n/a
Wheeler, TX	Wheeler, TX	Parkview Hospital	n/a

As delineated in Figure 1, the primary medical service area of Great Plains Regional Medical Center includes the zip code areas of Elk City, Sayre, Erick, Hammon, Cheyenne, Cordell, Canute, Mangum, Sentinel and Clinton. The primary medical service area experienced a population increase of 7.3 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced a population decrease of 1.0 percent from the 2010 Census to the latest available, 2016-220, American Community Survey.

The secondary medical services area is comprised of the zip code areas of Burns Flat, Carter, Weatherford, Sweetwater, Reydon, Arnett, Lone Wolf, Durham, Butler, Leedey, Foss, Dill City, Hobart, Granite, Hollis, and Altus. The secondary medical service area experienced an increase in population of 25.4 percent from 2000 to 2010 followed by a population decrease of 4 percent from 2010 to the 2016-2020 American Community Survey.

Hospital administration utilized most recent discharge data by zip code to delineate the primary and secondary medical service areas.

Table 1. Population of Great Plains Regional Medical Center Medical Service Areas

Population by Zip Code	2000 Population	2010 Population	2016-2020 Population	% Change 2000-2010	% Change 2010-16-20
<i>Primary Medical Service Area</i>					
73644 Elk City	12,325	14,147	14,097	14.8%	-0.4%
73662 Sayre	5,645	6,093	6,509	7.9%	6.8%
73645 Erick	1,473	1,538	1,158	4.4%	-24.7%
73650 Hammon	938	1,020	1,017	8.7%	-0.3%
73628 Cheyenne	1,527	1,583	1,789	3.7%	13.0%
73632 Cordell	3,593	3,433	3,063	-4.5%	-10.8%
73626 Canute	961	1,136	1,047	18.2%	-7.8%
73554 Mangum	3,528	3,614	3,401	2.4%	-5.9%
73664 Sentinel	1,086	1,184	1,254	9.0%	5.9%
73601 Clinton	9,958	10,299	10,265	3.4%	-0.3%
Total	41,034	44,047	43,600	7.3%	-1.0%
<i>Secondary Medical Service Area</i>					
73624 Burns Flat	1,835	2,142	2,087	16.7%	-2.6%
73627 Carter	258	628	479	143.4%	-23.7%
73096 Weatherford	5,327	13,037	13,846	144.7%	6.2%
73666 Sweetwater	54	180	240	233.3%	33.3%
73660 Reydon	261	430	295	64.8%	-31.4%
73832 Arnett	536	929	975	73.3%	5.0%
73655 Lone Wolf	662	864	814	30.5%	-5.8%
73642 Durham	115	187	96	62.6%	-48.7%
73625 Butler	262	554	589	111.5%	6.3%
73654 Leedey	887	866	933	-2.4%	7.7%
73647 Foss	666	519	546	-22.1%	5.2%
73641 Dill City	822	762	452	-7.3%	-40.7%
73651 Hobart	4,433	4,268	4,239	-3.7%	-0.7%
73547 Granite	723	2,319	1,916	220.7%	-17.4%
73550 Hollis	1,351	2,512	2,175	85.9%	-13.4%
73521 Altus	23,130	21,636	20,083	-6.5%	-7.2%
Total	41,322	51,833	49,765	25.4%	-4.0%

SOURCE: Population data from the U.S. Bureau of Census, Decennial Census 2000, 2010 and 2016-2020 American Community Survey (March 2022)

Table 2 displays the current existing medical services in the primary service area of the Great Plains Regional Medical Center medical services area. Most of these services would be expected in a service area of Elk City's size: twenty-five physician offices and clinics, seven dental offices, four optometry offices, and three chiropractic offices. The full listing of current providers can be found in Table 2. Great Plains Regional Medical Center is a 62 bed facility located in Beckham County. The hospital provides 24-hour emergency department, acute inpatient services, hospitalist services, laboratory, diagnostic radiology (CT, ultrasound, MRI, nuclear medicine, echocardiograms, mammography, and cardiac catheterization), intensive care, and cancer treatment center (prostate, breast, and head and neck cancers). A complete list of hospital services and community involvement activities can be found in Appendix A.

Table 2. Existing Medical Services in Great Plains Regional Medical Center Medical Services Area

Count	Service
1	Hospitals: Great Plains Regional Medical Center
25	Physician offices and clinics
7	Dental offices
4	Optometry offices
3	Chiropractic offices
2	Assisted living facilities
2	Nursing homes
1	Home health provider
1	Hospice provider
1	EMS provider
1	Dialysis provider
1	Air transport provider
2	Physical therapy providers
5	Counseling providers
7	Pharmacies

In addition to examining the total population trends of the medical service areas, it is important to understand the demographics of those populations. Table 3 displays trends in age groups for the primary and secondary medical service areas as well as Beckham County in comparison to the state of Oklahoma. Overall, the over 65 age group has experienced an increase in population across all geographies from the 2010 Census to the latest, 2016-2020 American Community Survey. This cohort accounted for 15.7 percent of the total population at the state level. In terms of the medical service areas, this age group accounted for 15.4 percent of the primary medical service area, 14.3 percent of the secondary medical service area, and 13.7

percent of the population of Beckham County. The 25-44 age group accounts for the largest share of the population in the primary (26.4%) and secondary (26.5%) service areas and 28.5 percent of the population of Beckham County. This is compared to the state share of 26.3 percent of the total population.

Table 3. Percent of Total Population by Age Group for Great Plains Regional Medical Center Medical Service Areas, Beckham County and Oklahoma

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Beckham County	Oklahoma
2010 Census				
0-14	21.2%	20.0%	20.6%	20.7%
15-19	6.5%	7.7%	6.1%	7.1%
20-24	6.4%	10.3%	7.2%	7.2%
25-44	25.9%	25.0%	28.2%	25.8%
45-64	25.0%	24.0%	25.2%	25.7%
65+	<u>15.0%</u>	<u>13.0%</u>	<u>12.7%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	44,047	51,833	22,119	3,751,351
2016-2020 ACS				
0-14	21.7%	20.0%	20.7%	20.2%
15-19	6.4%	7.5%	6.9%	6.7%
20-24	5.5%	10.0%	6.1%	7.0%
25-44	26.4%	26.5%	28.5%	26.3%
45-64	24.6%	21.8%	24.2%	24.2%
65+	<u>15.4%</u>	<u>14.3%</u>	<u>13.7%</u>	<u>15.7%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	43,600	49,765	21,860	3,949,342

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and 2016-2020 American Community Survey (www.census.gov [March 2022]).

Changes in racial and ethnic groups can impact the delivery of healthcare services, largely due to language barriers and dramatically different prevalence rates for specific diseases, such as diabetes. A noticeable trend in Oklahoma is the growth in the Hispanic origin population. In 2010, those of Hispanic origin accounted for 8.9 percent of the total state population. The latest American Community Survey data of 2016-2020 suggest that this population group has experienced an increase to 10.1 percent of the total population. This trend is also evident in Beckham County and both medical service areas. The share of the population identified as of Hispanic Origin accounted for 17.3 percent of the primary medical service area's population in 2015-2020 and 18.6 percent of the secondary medical service area during the same time period. The Hispanic Origin population accounted for 14.9 percent of the total population from 2016-2020 in Beckham County.

Table 3. Percent of Total Population by Race and Ethnicity for Great Plains Regional Medical Center Medical Service Areas, Beckham County and Oklahoma

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Beckham County	Oklahoma
2010 Census				
White	81.4%	77.6%	85.0%	72.2%
Black	3.4%	6.1%	4.0%	7.4%
Native American ¹	4.2%	3.1%	2.8%	8.6%
Other ²	7.6%	8.9%	5.4%	5.9%
Two or more Races ³	3.4%	4.3%	2.8%	5.9%
Hispanic Origin ⁴	<u>14.2%</u>	<u>14.8%</u>	<u>11.8%</u>	<u>8.9%</u>
Total Population	44,047	51,833	22,119	3,751,351
2016-2020 ACS				
White	79.9%	78.1%	83.8%	71.1%
Black	4.1%	5.3%	4.2%	7.3%
Native American ¹	3.4%	1.8%	2.8%	7.7%
Other ²	5.4%	6.4%	4.2%	5.2%
Two or more Races ³	7.1%	8.3%	5.1%	1.1%
Hispanic Origin ⁴	<u>17.3%</u>	<u>18.6%</u>	<u>14.9%</u>	<u>2.8%</u>
Total Population	43,600	49,765	21,860	3,949,342

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and 2016-2020 American Community Survey (www.census.gov [March 2022]).

Summary of Community Input for CHNA

Due to the unprecedented Covid-19 pandemic, Great Plains Regional Medical Center was not able to host three community meetings to seek feedback from key stakeholders. In an effort to promote social distancing and following recommendations outlined the CDC's website, the hospital hosted one single community meeting to gather community feedback. The meeting was held on March 23, 2022. All stakeholders received all of the typical primary and secondary data prior to their respective meetings. The meeting presentations and handouts can be found in Appendices C-E. The Oklahoma Office of Rural Health facilitated the gathering of the secondary data, the completion of the survey, and the community meeting. Data summaries are provided in the following sections.

Community members who were included to provide input:

- Great Plains Regional Medical Center representatives
- Great Plains Regional Medical Center Board Member
- Elk City Community member
- Hospital foundation

Community members invited to the community meeting included representatives from Great Plains Regional Medical Center, City of Elk City, Elk City Fire Department, Elk City Chamber of Commerce, Area Agency on Aging, Hospital Foundation, Elk City Public Schools and Vocational Technology Schools. Community members received a phone invitation and/or an email invitation from the hospital. Those invited included: board members, foundation members, Elk City and Western Oklahoma Wellness Initiatives coordinator, AirEvac, City of Elk City Farmers' Union Hospital Association officials, Beckham County Health Department, and GPRMC department directors. The director of Western Oklahoma Family Care Center was invited because of the low-income population served. Therefore, a significant effort was placed on including representatives from the public health sector and those who serve the underserved, low-income or racially diverse populations to gain their perspective of needs in the community.

Economic Conditions of Beckham County and Economic Impact of Health Sector

Economic indicators for Beckham County in comparison to Oklahoma and the United States are outlined in Table 5. Beckham County tends to somewhat lag Oklahoma and the United States in many of the economic variables. In terms of per capita income, or the total income divided by the population, Beckham County is less favorable than Oklahoma and the nation. Oklahoma as a state tends to lag the national average. In terms of employment and unemployment, there were many changes during 2020. The 2020 annual unemployment rate for

Beckham County was 7.5 percent. This rate is higher than the state (6.1%) but lower than the national (8.1%). All of these rates are non-seasonally adjusted. The most recent monthly estimates show Beckham County to be lower than 2020 with a 2 percent rate. This is slightly higher than the state (1.8%) but lower than the national (3.7%) rates. The share of individual captured below the poverty threshold for income and household size is calculated by the U.S. Census Bureau. In 2020, the poverty rate for all ages in Beckham County was 18.8 percent. This is higher than the state and national rates. The share of children, or those under the age of 18, followed a different trend of being higher than both the state and national rates. All economic indicators can be found in Table 5.

Table 5. Economic Indicators for Beckham County, the State of Oklahoma and the Nation

Indicator	County	State	U.S.
Total Personal Income (2020)	\$881,068,000	\$198,552,111,000	\$19,607,447,000,000
Per Capita Income (2020)	\$41,041	\$49,878	\$59,510
Employment (2020)	9,315	1,734,924	147,795,000
Unemployment (2020)	760	113,561	12,947,000
Unemployment Rate (2020)	7.5%	6.1%	8.1%
Employment (December 2021)*	9,435	1,829,523	155,732,000
Unemployment (December 2021)*	192	33,412	5,964,000
Unemployment Rate (December 2021)*	2.0%	1.8%	3.7%
Percentage of People in Poverty (2020)	18.8%	14.3%	11.9%
Percentage of Under 18 in Poverty (2020)	22.1%	18.6%	15.7%
Transfer Dollars (2020)	\$243,931,000	\$46,240,575,000	\$4,241,091,000,000
Transfer Dollars as Percentage of Total Personal Income (2020)	27.7%	23.3%	21.6%
Medical Benefits as a share of Transfer Payments (2020)	32.6%	32.2%	35.5%

*County and state estimates are considered preliminary

SOURCES: 2020 Bureau of Labor Statistics; 2020 Bureau of Economic Analysis; 2020 U.S. Census Bureau.

Table 6 displays various education variables for Beckham County. The first three lines are education attainment percentages for the population aged 25 years and greater. In Beckham County, 84 percent of the population has at least their high school diploma, 49.8 percent has at least some college, and 16.7 percent of the population has at least a bachelor's degree. The far-right handed column provides a ranking within the state based on the highest, or most favorable percentages. The free and reduced lunch rate is the share of children in Beckham County who are enrolled in public school and eligible for free and reduced lunches. Beckham County's rate is 60 percent. This is higher than the state average of 53.2 percent. This is the 28th lowest rate in the state.

Table 6. Education Data for Beckham County and the State of Oklahoma

Indicator	County	State	Beckham County Ranking
At Least High School Diploma	84.0%	88.4%	61st Highest
Some College	49.8%	57.1%	41st Highest
At Least Bachelor's Degree	16.7%	25.9%	49th Highest
Free and Reduced Lunch Rate	60.0%	53.2%	28th Lowest

Sources: U.S. Census Bureau, American Community Survey, 2016-2020, National Center for Education Statistics 2018-2019.

Table 7 includes payer source data for Beckham County residents in comparison to the state. A ranking is also provided with the lowest percentages as the more favorable ranking. In 2019, 17.1 percent of individuals under the age of 65 were categorized as uninsured. This is higher than the state rate of 16.8 percent. In terms of children, or those under the age of 19, this rate was 9.1 percent. This was also higher than the state rate of 8.6 percent. In 2019, 17.4 percent of the population had Medicare as a payer for healthcare. This includes Medicare parts A, B and Advantage. In terms of Medicaid, 27 percent of the population in Beckham County had Medicaid as a payer source. The Medicare and Medicaid data were gathered from different sources, and duplicates have not been removed.

Table 7. Payer Source Data for Beckham County and the State of Oklahoma

Indicator	County	State	Beckham County Ranking
2019 Uninsured rate (under 65)	17.1%	16.8%	21st Lowest
2019 Uninsured rate (under 19)	9.1%	8.6%	26th Lowest
2019 Medicare share of total population	17.4%	18.7%	9th Lowest
2020 Medicaid share of total population	27.0%	26.0%	38th Lowest

Sources: U.S. Census Bureau Small Area Health Insurance Estimates, 2019; Centers for Medicare and Medicaid Services, Medicare Part A and B Recipients by State and County, 2019; Oklahoma Health Care Authority, Total Enrollment by County, 2020

Table 8 below summarizes the overall economic impact of the health sector on the Beckham County, Oklahoma economy. Local providers were asked to share their employment levels and of those employees how many were physicians/optometrists/dentists/pharmacists/etc. When available, payroll information was also collected from the establishments. When payroll information was not available, payroll was estimated using state level averages from the Bureau of Labor Statistics.

The health sector in the Great Plains Regional Medical Center medical service area employs 1,028 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 1,434 FTE employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$68.8 million. When the appropriate income multiplier is applied, the total income impact is over \$86.9 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 23.6% of personal income in Oklahoma will be spent on taxable goods and services locally. Therefore, if we just examine the impact made on retail from those employed in the health sector, this would account for over \$20 million spent locally, generating \$205,124 on a 1% tax. A copy of the meeting materials that were distributed can be found in Appendix C.

Table 8. Great Plains Regional Medical Center Medical Service Area Health Sector Impact on Employment and Income, and Retail Sales and Sales Tax

Health Sectors	Employment			Income			Retail	1 Cent
	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	351	1.62	570	\$25,683,227	1.31	\$33,596,460	\$7,928,765	\$79,288
Physicians, Dentists & Other Medical Professionals	249	1.32	327	\$21,553,456	1.23	\$26,441,355	\$6,240,160	\$62,402
Nursing Home & Home Health	282	1.27	358	\$13,273,727	1.25	\$16,597,107	\$3,916,917	\$39,169
Other Medical & Health Services	80	1.34	108	\$4,175,581	1.20	<u>\$5,004,655</u>	\$1,181,098	\$11,811
Pharmacies	<u>56</u>	1.26	<u>71</u>	<u>\$4,176,192</u>	1.26	<u>\$5,277,496</u>	<u>\$1,245,489</u>	<u>\$12,455</u>
Total	1,018		1,434	\$68,862,182		\$86,917,072	\$20,512,429	\$205,124

SOURCE: 2020 IMPLAN database, Minnesota IMPLAN Group, Inc.; Local data for employment, employee compensation and proprietor's income; income estimated based on state average incomes if local data not available; employment data from local survey.

* Based on the ratio between Oklahoma taxable sales and income (23.6%) – from 2021 Sales Tax Data and 2020 Personal Income Estimates from the Bureau of Economic Analysis.

Health Data

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

Health factors, considered tomorrow's health, are comprised of health behaviors (rank: 21), clinical care (rank: 12), social and economic factors (rank: 46), and physical environment (rank: 8). Beckham County's overall health factors rank is 28. This suggests, in general, the health status of Beckham County residents is somewhat comparable to that of neighboring counties. Areas of concern include Beckham County's smoking rate, obesity rate, teen birth rate, uninsured rate and mamography screening rate of Medicare beneficiaries are all less desirable than the top U.S. performers. All health factors variables are presented in Table 9 along with Beckham County specific data, the top U.S. performers, and the state average. The yellow highlighted categories are the areas identified by the County Health Rankings and Roadmaps as areas to explore (generally where Beckham County ranks poorly compared to the national benchmark). The green highlighted areas are identified by County Health Rankings and Roadmaps as areas of strength for Beckham County.

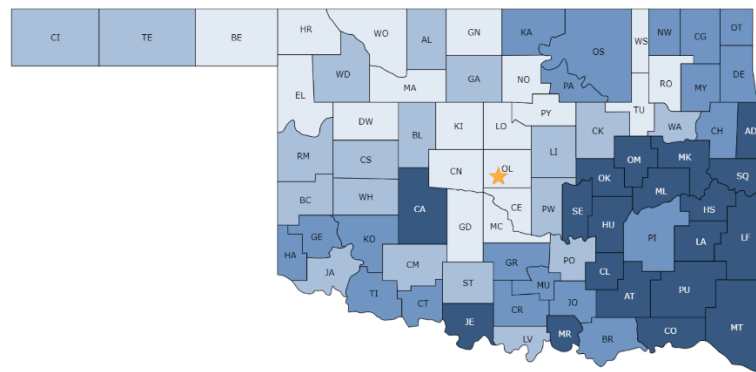
Table 9. Health Factors (Overall Rank 28)

Category (Rank)	Beckham County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (21)				
Adult Smoking	21%	19-24%	16%	20%
Adult Obesity	34%	27-43%	26%	35%
Food Environment Index	7.8		8.7	5.8
Physical Inactivity	26%	20-34%	19%	28%
Access to Exercise Opportunities	65%		91%	71%
Excessive Drinking	15%	14-16%	15%	15%
Alcohol-Impaired Driving Deaths	15%	7-25%	11%	27%
Sexually Transmitted Infections	500		161	559
Teen Births	53	46-59	12	33
Clinical Care (12)				
Uninsured	17%	15-19%	6%	17%
Primary Care Physicians	1,450:1		1,030:1	1,640:1
Dentists	1,990:1		1,210:1	1,610:1
Mental Health Providers	320:1		270:1	240:1
Preventable Hospital Stays	4,082		2,565	4,781
Mammography Screening	34%		51%	38%
Flu Vaccinations	53%		55%	49%
Social & Economic Factors (46)				
High School Graduation	85%	83-88%	94%	88%
Some College	50%	42-57%	73%	60%
Unemployment	3%		3%	3%
Children in Poverty	29%	22-36%	10%	20%
Income Inequality	4.7	4.0-5.3	3.7	4.6
Children in Single-Parent Household	18%	11-24%	14%	27%
Social Associations	16.1		18.2	11.5
Violent Crime Rate	177		63	428
Injury Deaths	124	104-145	59	94
Physical Environment (8)				
Air-Pollution- Particulate Matter	6.5		5.2	8.2
Drinking Water Violations	No			
Severe Housing Problems	9%	6-11%	9%	14%
Driving Alone to Work	84%	80-88%	72%	82%
Long Commute- Driving Alone	20%	15-25%	16%	27%

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

The following figure depicts each county's rank by shade. Beckham County's ranking is comparable to Roger Mills, Custer and Washita Counties. Beckham County's ranking is more favorable than Greer, Harmon and Kiowa Counties.

2021 Health Factors - Oklahoma



Health Factor Ranks 1 to 19 20 to 38 39 to 58 59 to 77

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

In terms of health outcomes, considered, today's health, Beckham County's ranking is 50th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 10.

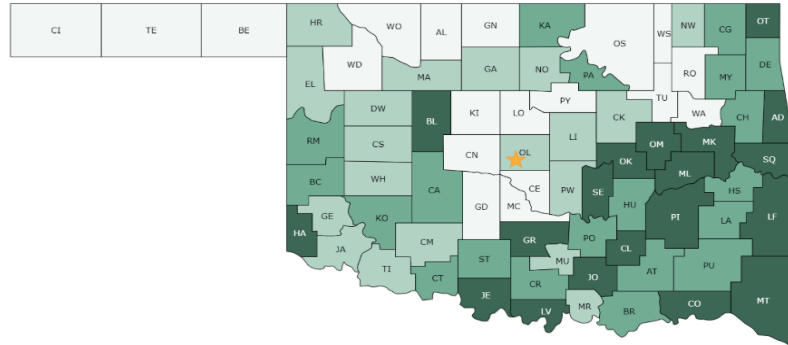
Table 10. Health Outcomes (Overall Rank 50)

Category (Rank)	Beckham County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (59)				
Premature Death	11,600	10,000- 13,200	5,400	9,100
Quality of Life (35)				
Poor or Fair Health	21%	19-24%	14%	21%
Poor Physical Health Days	4.7	4.3-5.1	3.4	4.5
Poor Mental Health Days	4.9	4.5-5.3	3.8	4.8
Low Birth Weight	8%	7-10%	6%	8%

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

The following figure shows county health outcomes rankings by shades. Beckham County's ranking is comparable to Roger Mills and Kiowa Counties. Beckham County's ranking is more favorable than Harmon County, and less favorable than the ranking of Custer and Washita Counties.

2021 Health Outcomes - Oklahoma



Health Outcome Ranks 1 to 19 20 to 38 39 to 58 59 to 77

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

Community Survey Methodology and Results

A survey was designed to gauge hospital usage, satisfaction, and community health needs. The survey link was made available on the hospital's website and social media (Facebook). Hard copies of the survey were also made available at the hospital. A copy of the survey form and results can be found in Appendix E. Community members were asked to return their completed surveys to Great Plains Regional Medical Center.

The survey ran from January 23 to March 4, 2022. A total of 193 surveys from the Great Plains Regional Medical Center medical service area were completed. Of the surveys returned, all were completed via Survey Monkey.

Table 11 below shows the survey respondent representation by zip code. The largest share of respondents was from the Elk City (73644) zip code with 122 responses or 63.2 percent of the total. Sayre (73662) followed with 21 responses, and Erick (73645) had 7 responses.

Table 11. Zip Code of Residence

Response Category	No.	%
73644- Elk City	122	63.2%
73662- Sayre	21	10.9%
73626- Canute	8	4.1%
73645- Erick	7	3.6%
73647- Foss	3	1.6%
73632- Cordell	3	1.6%
73624- Burns Flat	2	1.0%
73654- Leedey	2	1.0%
73622- Bessie	2	1.0%
73601- Clinton	2	1.0%
73554- Mangum	2	1.0%
73550- Hollis	2	1.0%
73641- Dill City	2	1.0%
73664- Sentinel	2	1.0%
73628- Cheyenne	1	0.5%
73627- Carter	1	0.5%
73120- Oklahoma City	1	0.5%
73096- Weatherford	1	0.5%
30097- Duluth, GA	1	0.5%
90001- Los Angeles, CA	1	0.5%
74644- Marland	1	0.5%
73742- Hennessey	1	0.5%
73669- Thomas	1	0.5%
73666- Sweetwater	1	0.5%
73648- Elk City	1	0.5%
74650- Ralston	1	0.5%
73651- Hobart	1	0.5%
Total	193	100.0%

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

Primary Care Physician Visits

- 74.6% of respondents had used a primary care physician in the Elk City service area during the past 24 months

- 86.8% of those responded being satisfied
- Only 44 respondents or 22.8% of the survey respondents believe there are enough primary care physicians practicing in the Elk City area
- 57.5% responded they were able to get an appointment with their primary care physician when they needed one
- 42.5% of respondents indicated that they have used the services of an urgent care in the past 12 months
- 57.5% responded that they would utilize urgent care or after hours services offered in Elk City

Specialist Visits

Summary highlights include:

- 61.1% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 12
- Thirty-one visits occurred in Elk City

Table 12. Type of Specialist Visits

Type of Specialist	No.	Percent
<i>Top 5 Responses</i>		
Orthopedist/Orthopedic Surg. (9 visits in Elk City)	32	20.9%
Cardiologist (2 visits in Elk City)	15	9.8%
Otolaryngologist (8 visits in Elk City)	13	8.5%
Rheumatologist (2 visits in Elk City)	11	7.2%
OB/GYN (2 visits in Elk City)	9	5.9%
All others (8 visits in Elk City)	<u>73</u>	<u>47.7%</u>
Total	<u>153</u>	<u>100.0%</u>

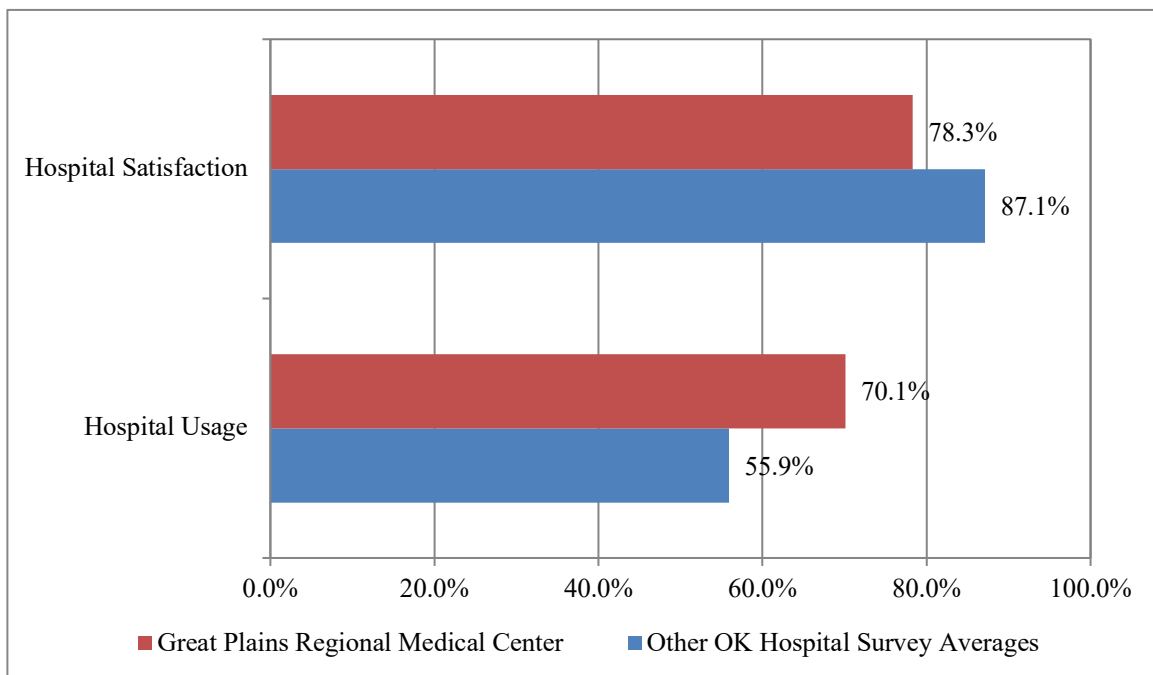
Some respondents answered more than once.

Hospital Usage and Satisfaction

Survey highlights include:

- 70.1% of survey respondents that have used hospital services in the past 24 months used services at Great Plains Regional Medical Center
 - Mercy Hospital Oklahoma City (4.9%) and OU Medical Center, Oklahoma City (4.9%) followed
 - The most common response for using a hospital other than Great Plains Regional Medical Center was availability of specialty care (including surgery and labor and delivery) (31.8%) and physician referral/Transferred (25.8%)
 - The usage rate of 70.1% was higher than the state average of 55.9% for usage of other rural Oklahoma hospitals surveyed
- 78.3% of survey respondents were satisfied with the services received at Great Plains Regional Medical Center
 - This is below the state average for other hospitals (87.1%)
- Most common services used at Great Plains Regional Medical Center:
 - Laboratory (22.9%)
 - Diagnostic Imaging (X-ray, CT, Ultrasound, MRI) (22.2%)
 - Emergency room (17.8%)

Figure 2. Summary of Hospital Usage and Satisfaction Rates



Local Healthcare Concerns and Additional Services

Survey respondents were asked what concerns them most about health in their community. The most common response was mental health (12.3%) followed by accessing

specialty services (10.7%) and heart disease (10.2%). Table 13 displays all responses and the frequencies.

Table 13. Top Health Concerns in the Elk City Area

	No.	%
Mental health	69	12.3%
Accessing specialty services	60	10.7%
Heart disease	57	10.2%
Diabetes	52	9.3%
Substance abuse	50	8.9%
Cancers	46	8.2%
Accessing primary care	42	7.5%
Obesity	41	7.3%
Suicide	40	7.1%
Dental	27	4.8%
Teen pregnancy	10	1.8%
Motor vehicle crashes	8	1.4%
Accessing care/Quality of care	3	0.5%
Covid-19	2	0.4%
Cost of care	1	0.2%
Vaccine hesitancy	1	0.2%
Don't know/No response	51	9.1%
Total	560	100.0%

Survey respondents also had the opportunity to identify what additional health and wellness services they would like to see offered in their community. The most common response was specialists with a collective response of 20.6 percent. Don't know/no additional services followed with 10.7 percent, and mental health/inpatient behavioral health/substance abuse services/services for children followed with 8.9 percent of the total. Table 14 displays the full listing of responses.

Table 14. Additional Health and Wellness Services Survey Respondents Would Like to See Offered in Elk City

Response Category	No.	%
Specialists: Dermatologist (5); OB/GYN (5); Neurologist (5); Urologist (4); Specialists in general (3); Endocrinologist (3); Psychiatrist (3); Internal Medicine (3); Cardiologist (2); Pain Management (2); Orthopedist (2); Otolaryngologist (1); Psychologist (1); Ophthalmologist (1); Surgeon (1); Oncologist (1); Rheumatologist (1); Pediatrician (1)	44	20.6%
Don't know/No additional services	23	10.7%
Mental health/Inpatient behavioral health/Substance abuse services/services for children	19	8.9%
Improved quality of care/Emergency room care/Improved cardiac, pediatric, dermatology care	12	5.6%
Specialized services: Cardiac rehab (1); ADHD (1); Medical counseling (1); Hearing (1); Kidney care (1); Lactation (1); Lymphedema therapy (1); orthopedics for cerebral palsy (1)	8	3.7%
More primary care/Female providers/More mid level providers	7	3.3%
Increased surgical options: bariatric, cataract, GYN/Outpatient surgery center	6	2.8%
More services, so residents don't have to travel for care/Open services in Sayre/Spinal tap	5	2.3%
After hours care/Urgent care	4	1.9%
Senior care/Elder care	4	1.9%
Cost of care/Affordable care/Affordable dental	4	1.9%
Geriatric services/Specialists	3	1.4%
Weight management clinic/Classes	3	1.4%
Nutritionist/Specialized nutrition education	2	0.9%
Pathologist available for surgeries	1	0.5%
24- hour pharmacy	1	0.5%
Provider that can write prescriptions for Zubsolv or similar	1	0.5%
Health promotion classes for various topics: Diseases, Suicide prevention, mental health, etc.	1	0.5%
Higher level of OB care	1	0.5%
State of the art gym	1	0.5%
Upright MRI	1	0.5%
Functional medicine	1	0.5%
24-hour dental	1	0.5%
No response	61	28.5%
Total	214	100.0%

Community Health Needs- Identification of Priorities

As mentioned previously, due to COVID-19, a series of community meetings were not able to be held to present data and gather data in a town-hall style meeting. Instead, a single community meeting was utilized to gather community input. A meeting of community stakeholders was held on March 23, 2022. The OK Office of Rural Health presented and facilitated the meeting. A complete listing of individuals who participated is included in Appendix B.

During the community meeting process, participants were asked the following three questions:

- What are the top health needs of the patients/clients I serve?
- What are the top health needs of the greater community (outside of the hospital or clinic setting)?
- What am I most proud of in the Elk City community?

The concerns listed were:

- Mental Health including services for youth and adolescents
 - Drug, Alcohol and tobacco abuse rates (increasing)
 - Counselors are present in Elk City, and Red Rock is available
- Lack of OBGYN care
- Not a lot of outdoor youth activities
 - Activity center being built, estimated to open mid-summer 2022
 - New aquatic center in the works

Elk City does have many strengths. Some of the sources of pride noted by community members include:

- Proud of radiology department with new equipment upgrades
- Hospital still surviving and thriving/grow through services provided
 - Activity center being built, estimated to open mid-summer 2022
 - New aquatic center in the works
- Opportunity to attract more retail activity with sports complex
- Only geriatric inpatient facility in western Oklahoma
- Proud of the local physicians- both the number and quality

Great Plains Regional Medical Center Administration utilized these responses to generate the list of priorities based on the frequencies of responses, potential impact the hospital can have on these items, and the opportunity to collaborate with existing organizations and providers in the community. The following items were identified as priorities:

- Overarching increased access to care/services in the area of mental health and OB/GYN care
 - Lack of OB/GYN care
 - Great Plains Regional Medical Center in collaboration and support of local providers will increase access to additional healthcare services.
 - The facility strives to maintain patient access to current inpatient and outpatient resources.
 - Great Plains Regional Center will continue to meet the health needs of our community and surrounding service area.
 - Great Plains Regional Medical Center will ensure increased access to for the Medicaid population for Obstetrics and Gynecology services.
 - Mental health care
 - Great Plains Regional Medical Center currently offers a geropsych program. There are plans to grow the program through greater marketing of services and care available.
 - Great Plains Regional Medical Center also screens each outpatient and emergency room patient for the need for mental health services (e.g. depression, suicide). When a patient screens as needing additional services, resources are then identified for the patient. Great Plains Regional Medical Center plans to continue these screenings and continue to search for additional services and resources.

Community Health Needs Assessment Marketing Plan

The hospital will make the Community Health Needs Assessment Summary and Implementation Strategy Plan available upon request at Great Plains Regional Medical Center, and a copy will be available to be downloaded from the hospital's website (<http://www.gprmc-ok.com/>). This document will also be available on the OSU Center for Rural Health blog site: (<http://osururalhealth.blogspot.com/p/chna.html>).

Appendix A- Hospital Services/Community Benefits

Great Plains Regional Medical Center Hospital Inpatient and Outpatient Services

24/ Emergency Department with 24-hour physician coverage

Hospital Services

Acute Inpatient Care

Birthing Services

Cardiovascular Studies

Ear, Nose, & Throat Surgery

Hospitalist Program

Internal Medicine

Laparoscopic Surgery

OB/GYN

Endoscopy

Outpatient IV & Transfusion Therapy

Orthopedics

Radiology (CT, ultrasound, MRI, nuclear medicine, echocardiograms, mammography, and cardiac catheterization)

Cancer Treatment Center (prostate, breast, and head and neck cancers)

Rehabilitation services (physical therapy, occupational therapist, and speech pathologist)

Home health services

Intensive Care

Laboratory

Allergy testing and immunotherapy

Neurology

Sleep study

Geriatric/Psychiatric Care

General Surgery

Swingbed

Interventional Radiology

Pain Management

Bariatric Surgery

Pathology

In-Patient Rehabilitation

In-Patient Dialysis

Robotic Surgery

Wound Care

Urgent Care

Appendix B Community Input Participants

**Great Plains Regional Medical Center
Community Health Needs Assessment
Community Input Meeting
23-Mar-22**

Name	Title	Organization
Monica Scott	CFO	Great Plains Regional Medical Center
Jesse Champayne	CNO	Great Plains Regional Medical Center
Carmen Nickel	ACNO	Great Plains Regional Medical Center
Kimberly Handy	Director/Respiratory & Lab	Great Plains Regional Medical Center
Yvonne Keachey	Lab Manager	Great Plains Regional Medical Center
Tina Dimmich	Director Busines Office	Great Plains Regional Medical Center
Jack Bonny	Board Member	Great Plains Regional Medical Center
Delores Finely Bonny	Community Member	
Leah Lemmon	Director Materials Management	Great Plains Regional Medical Center
Aubrey Edwards	Director OR	Great Plains Regional Medical Center
Kimberly Schnoebelen	Sr. Care Nurse Manager	Great Plains Regional Medical Center
Kaci Parks	Director Physician Services	Great Plains Regional Medical Center
Mark Morris	Program Director	Great Plains Regional Medical Center
Chad Henderson	Director of Info. Services	Great Plains Regional Medical Center
Kevin Martin	Director of Plant Operation	Great Plains Regional Medical Center
Edward Albert	Board Member	Great Plains Regional Medical Center
Brianne Pearson	Exec. Assistant	Great Plains Regional Medical Center
Gary Naron	Rad. Director	Great Plains Regional Medical Center
Payton Hamon	Foundation Board	Great Plains Regional Medical Center
Angie Clinton	Director of ER	Great Plains Regional Medical Center
Miranda Cummings	W/S & MSW Director	Great Plains Regional Medical Center
Stacy Ford, RN	ICU/OPI Director	Great Plains Regional Medical Center
Lori Cloud	Quality Director	Great Plains Regional Medical Center
Denise Barnett RN	Program Director IPR	Great Plains Regional Medical Center
Corey Lively	CEO	Great Plains Regional Medical Center
Misty Carrier	HR	Great Plains Regional Medical Center
Stephanie Helton	Controllor	Great Plains Regional Medical Center

Appendix C- Economic Impact

Great Plains Regional Medical Center Economic Impact

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

Great Plains Regional Medical Center, including the Rural Health Clinics, **directly** employs **351** individuals with an annual payroll of over **\$25.5 million** including benefits

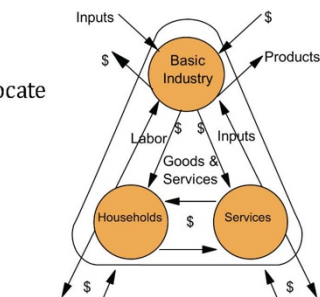
- These employees and income create an additional **219** jobs and over **\$7.9** in income as they interact with other sectors of the local economy
- **Total impacts= 570 jobs and over \$33.5 million**
- Other segments of the healthcare sector (Pharmacies, EMS, etc.) provide another **667 jobs** and an additional **\$43.1 million** in wages
- Their interactions and transactions within the local economy including the hospital's impact create:
 - **Total health sector impacts= 1,434 jobs and \$86.9 million**
 - Over **\$20 million** in retail sales generated from the presence of the health sector

Healthcare and Your Local Economy:

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

Consider what could be lost without the hospital:

- Pharmacies
- Other Healthcare Providers and Services
- Physicians/Specialists
- Potential Retail Sales



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

For additional information, please contact:

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Corie Kaiser, Director, corie.kaiser@okstate.edu

Oklahoma Office of Rural Health

Phone: 405.945.8609

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U2WRH33319 and title: Medicare Rural Hospital Flexibility Grant Program for \$673,496, 0% financed with nongovernmental sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

Multipliers were derived from IMPLAN 2020, sales tax data were derived from County FY2021 Oklahoma Tax Commission data, and 2020 personal income estimates from Bureau of Economic Analysis.



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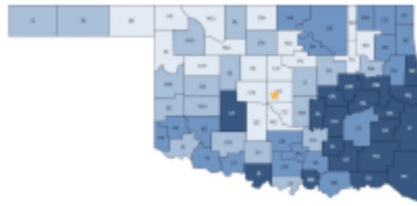
Appendix D- Beckham County Health Indicators and Outcomes

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

Table 1. Health Factors (Overall Rank 28)

Category (Rank)	Beckham County	Error Margin	Top U.S. Performers	Oklahoma
Health Behaviors (21)				
Adult Smoking	21%	19-24%	16%	20%
Adult Obesity	34%	27-43%	26%	35%
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Dentists	1,990:1		1,210:1	1,610:1
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Mammography Screening	34%		51%	38%
Flu Vaccinations	53%		55%	49%
Social & Economic Factors (46)				
High School Graduation	85%	83-88%	94%	88%
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Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

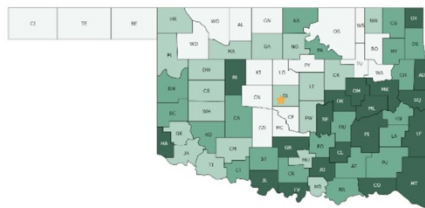


Health Factor Ranks 1 to 19 20 to 38 39 to 58 59 to 77

Table 2. Health Outcomes (Overall Rank 50)

Category (Rank)	Beckham County	Error Margin	Top U.S. Performers	Oklahoma
Length of Life (59)				
Premature Death	11,600	10,000-13,200	5,400	9,100
Quality of Life (35)				
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Poor Physical Health Days	4.7	4.3-5.1	3.4	4.5
Poor Mental Health Days	4.9	4.5-5.3	3.8	4.8
Low Birth Weight	8%	7-10%	6%	8%

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



Health Outcome Ranks 1 to 19 20 to 38 39 to 58 59 to 77

For additional information, please contact:

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Corie Kaiser, Director, corie.kaiser@okstate.edu

Oklahoma Office of Rural Health



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Appendix E- Survey Form and Survey Results

Great Plains Regional Medical Center Local Health Services Survey

Please return completed survey by March 4, 2022

The zip code of my residence is: _____

What is your current age: _____

1. Has your household used the services of a hospital in the past 24 months?
☐ Yes (*Go to Q2*) ☐ No (*Skip to Q7*) ☐ Don't know (*Skip to Q7*)
2. At which hospital(s) were services received? (*please check/list all that apply*)
☐ Great Plains Regional Medical Center (*Skip to Q4*) ☐ Other (*Please specify Hospital and City, then go to Q3*)

If you responded in **Q2** that your household received care at a hospital other than Great Plains Regional Medical Center, why

3. did you or your family member choose that hospital? (*Please answer then skip to Q6*)
☐ Physician referral ☐ Quality of care/Lack of confidence
☐ Closer, more convenient location ☐ Availability of specialty care
☐ Insurance reasons ☐ Other (*Please list below*)

If you responded in **Q2** that your household received care at Great Plains Regional Medical Center, what hospital service(s) were used?

4. ☐ Diagnostic imaging (X-ray, MRI, CT, Ultrasound) ☐ Hospital Inpatient
☐ Laboratory ☐ Skilled nursing (swing bed)
☐ Outpatient infusion/Shots ☐ Emergency room (ER)
☐ Physician services ☐ Respiratory Therapy/Pulmonary Function Test
☐ Physical, speech, or occupational therapy ☐ Other (*Please list below*)

-
5. How satisfied was your household with the services you received at Great Plains Regional Medical Center?
☐ Satisfied ☐ Dissatisfied ☐ Don't know

6. Has your household been to a specialist in the past 24 months?
☐ Yes ☐ No (*Skip to Q10*) ☐ Don't know (*Skip to Q10*)

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

7.

Type of Specialist	City

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

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

Continue on reverse side...

10. What kind of medical provider do you use for routine care *(Please select all that apply)* ?

- | | |
|---|--|
| <input type="checkbox"/> Primary Care physician | <input type="checkbox"/> Mid-Level Clinic (Nurse Practitioner or PA) |
| <input type="checkbox"/> Tribal Health Center | <input type="checkbox"/> Emergency Room/Hospital |
| <input type="checkbox"/> Income Based Health Center | <input type="checkbox"/> Specialist |
| <input type="checkbox"/> Urgent care/Walk in clinic | <input type="checkbox"/> Other <i>(Please list below)</i> |
| <input type="checkbox"/> Health Department | |
-

11. Has your household been to a primary care (family) doctor in the Elk City area?

- ☐ Yes *(Go to Q12)* ☐ No *(Skip to Q13)* ☐ Don't know *(Skip to Q13)*

12. How satisfied was your household with the quality of care received in the Elk City area?

- ☐ Satisfied ☐ Dissatisfied ☐ Don't know

13. Do you think there are enough primary care (family) doctors practicing in the Elk City area?

- ☐ Yes ☐ No ☐ Don't know

14. Are you able to get an appointment, within 48 hours, with your primary care (family) doctor when you need one?

- ☐ Yes ☐ No ☐ Don't know

15. Have you used the services of a walk-in, urgent care or after hours clinic in the past 24 months?

- ☐ Yes ☐ No ☐ Don't know

16. Would you utilize a walk in and/or after hours clinic if offered in Elk City?

- ☐ Yes ☐ No ☐ Don't know

17. What concerns you most about health in the Elk City area *(Please select all that apply)* ?

- | | |
|---|---|
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Substance abuse |
| <input type="checkbox"/> Cancers | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Accessing primary care |
| <input type="checkbox"/> Dental | <input type="checkbox"/> Accessing specialty services |
| <input type="checkbox"/> Teen Pregnancy | <input type="checkbox"/> Motor vehicle crashes |
| <input type="checkbox"/> Suicide | <input type="checkbox"/> Other |
| <input type="checkbox"/> Mental health | |
-

18. What additional health and wellness services would you like to see offered in the Elk City area?

19. Has your household used telemedicine services, a visit either by telephone or video with your provider, in the past year?

- ☐ Yes ☐ No *(Skip to Q21)* ☐ Don't know *(Skip to Q21)*

20. How satisfied was your household with the quality of care received via telemedicine?

- ☐ Satisfied ☐ Dissatisfied ☐ Don't know

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

(Please select all that apply)

- | | | |
|------------------------------------|----------------------------------|---------------------------------------|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Email | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Website | |

*Please mail completed survey
to:
Great Plains Regional Medical
Center
1801 W 3rd St.
Elk City, OK 73644*

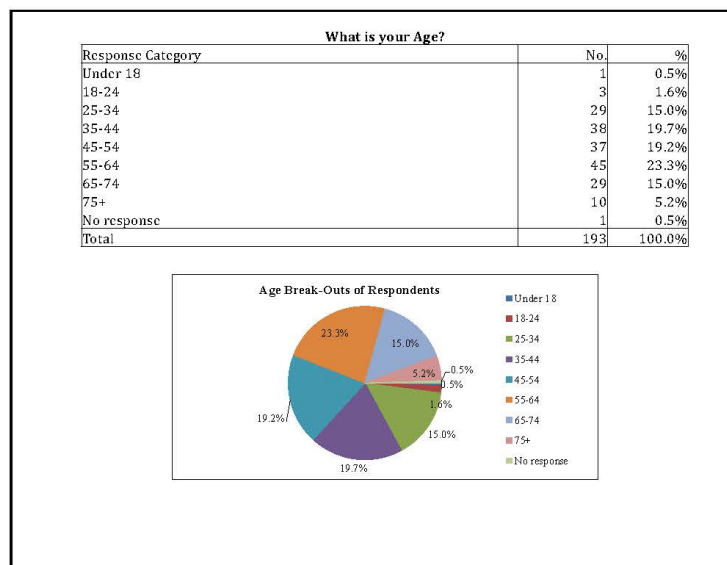


1

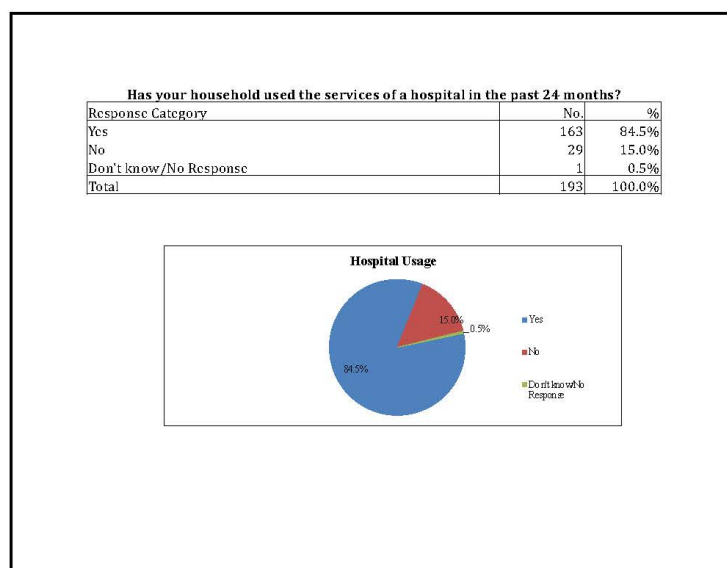
Zip Code of Residence		
Response Category	No.	%
73644- Elk City	122	63.2%
73662- Sayre	21	10.9%
73626- Canute	8	4.1%
73645- Erick	7	3.6%
73647- Foss	3	1.6%
73632- Cordell	3	1.6%
73624- Burns Flat	2	1.0%
73654- Leedey	2	1.0%
73622- Bessie	2	1.0%
73601- Clinton	2	1.0%
73554- Mangum	2	1.0%
73550- Hollis	2	1.0%
73641- Dill City	2	1.0%
73664- Sentinel	2	1.0%
73628- Cheyenne	1	0.5%
73627- Carter	1	0.5%
73120- Oklahoma City	1	0.5%
73096- Weatherford	1	0.5%
30097- Duluth, GA	1	0.5%
90001- Los Angeles, CA	1	0.5%
74644- Marland	1	0.5%
73742- Hennessey	1	0.5%
73669- Thomas	1	0.5%
73666- Sweetwater	1	0.5%
73648- Elk City	1	0.5%
74650- Ralston	1	0.5%
73651- Hobart	1	0.5%
Total	193	100.0%

*17 Responses in 2019

2



3

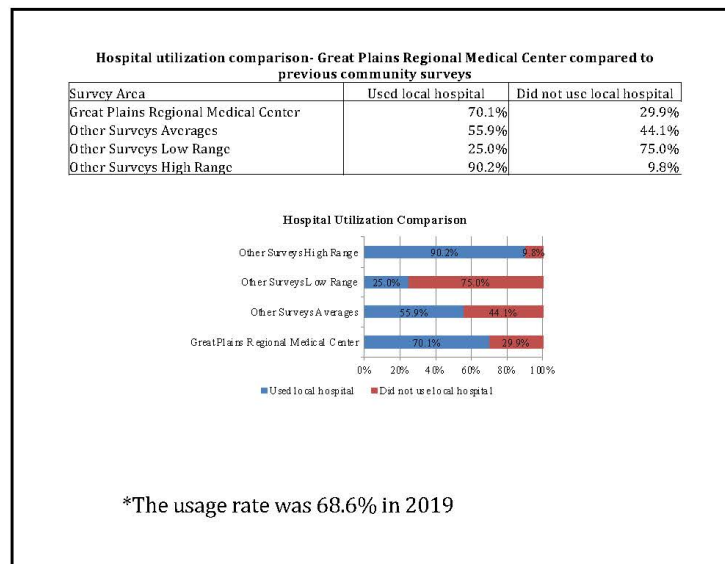


4

Where did you receive hospital services?		
Response Category	No.	%
Great Plains Regional Medical Center, Elk City	143	70.1%
Mercy Hospital Oklahoma City	10	4.9%
OU Medical Center, Oklahoma City	10	4.9%
INTEGRIS Baptist Medical Center, Oklahoma City	7	3.4%
AllianceHealth Clinton	4	2.0%
McBride Orthopedic Hospital, Oklahoma City	4	2.0%
Oklahoma Heart Hospital, Oklahoma City	3	1.5%
Community Hospital, Oklahoma City	2	1.0%
Weatherford Regional Hospital, Weatherford	2	1.0%
Mercy Hospital Kingfisher	2	1.0%
SSM St. Anthony Hospital, Oklahoma City	1	0.5%
Lakeside Women's Hospital, Oklahoma City	1	0.5%
INTEGRIS Canadian Valley, Yukon	1	0.5%
Oklahoma Children's Hospital, OU, Oklahoma City	1	0.5%
Mangum Regional Medical Center, Mangum	1	0.5%
Jackson County Memorial Hospital, Altus	1	0.5%
Cordell Memorial Hospital, Cordell	1	0.5%
Elkview General Hospital, Hobart	1	0.5%
Roger Mills Memorial Hospital, Cheyenne	1	0.5%
Baptist Health Fort Smith, AR	1	0.5%
St. Mary's Regional Medical Center, Enid	1	0.5%
Oklahoma Surgicare, Oklahoma City	1	0.5%
Facility in north Texas	1	0.5%
Facility in Oklahoma City	1	0.5%
No response	3	1.5%
Total*	204	100.0%

*Some respondents answered more than once. Average hospitals visited per respondent = 1.25

5



6

If you responded in question 2 that your household received care at a hospital other than Great Plains Regional Medical Center, why did you or your family member choose that hospital?

Response Category	No.	%
Availability of specialty care (Including surgery, labor and delivery)	21	31.8%
Physician referral/Transferred	17	25.8%
Quality of care/Lack of confidence	11	16.7%
Closer, more convenient location	5	7.6%
Insurance reasons	5	7.6%
Cost of care	2	3.0%
Emergency care	2	3.0%
Where my physician works	1	1.5%
Surgeon availability	1	1.5%
Covid test	1	1.5%
Total*	66	100.0%

*Some respondents selected more than one category.

7

What hospital services were used at Great Plains Regional Medical Center?

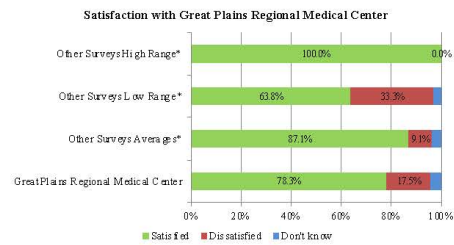
Response Category	No.	%
Laboratory	95	22.9%
Diagnostic imaging (X-ray, CT, MRI, Ultrasound)	92	22.2%
Emergency room (ER)	74	17.8%
Physician services	51	12.3%
Surgical service	38	9.2%
Hospital inpatient	27	6.5%
Outpatient services	17	4.1%
Physical, speech or occupational therapy	14	3.4%
Skilled nursing (swing bed)	5	1.2%
ICU	1	0.2%
Colonoscopy	1	0.2%
Total*	415	100.0%

*Some respondents selected more than one category. Average number of services used per respondent = 2.9

8

How satisfied were you or someone in your household with the services you received at Great Plains Regional Medical Center?

Survey Area	Satisfied	Dissatisfied	Don't know
Great Plains Regional Medical Center	78.3%	17.5%	4.2%
Other Surveys Averages*	87.1%	9.1%	3.8%
Other Surveys Low Range*	63.8%	33.3%	2.9%
Other Surveys High Range*	100.0%	0.0%	0.0%



*Hospital satisfaction rate= 78.9% in 2019

9

Has your household been to a specialist in the past 24 months?

Response Category	No.	%
Yes	118	61.1%
No	52	26.9%
Don't know/No response	23	11.9%
Total	193	100.0%



10

What type of specialist has your household been to and in which city did you receive that care?			
Type of Specialist	City	No.	%
Orthopedist/Ortho Surg.	No location (16); Elk City (9); Oklahoma City (4); Altus (2); Edmond (1)	32	20.9%
Cardiologist	Oklahoma City (7); No location (6); Elk City (2)	15	9.8%
Otolaryngologist	Elk City (8); Oklahoma City (4); No location (1)	13	8.5%
Rheumatologist	No location (5); Oklahoma City (3); Elk City (2); Norman (1)	11	7.2%
OB/GYN	Oklahoma City (3); Elk City (2); No location (2); Clinton (1); Enid (1)	9	5.9%
Gastroenterologist	Oklahoma City (4); No location (4); Elk City (1)	9	5.9%
Oncologist	Oklahoma City (5); No location (3); Lawton (1)	9	5.9%
Neurologist/Neurosurg.	Oklahoma City (7); No location (1)	8	5.2%
Urologist	Oklahoma City (3); No location (3); Elk City (2)	8	5.2%
Endocrinologist	Oklahoma City (4); No location (2)	6	3.9%
Nephrologist	Oklahoma City (3); No location (1)	4	2.6%
Surgeon	Elk City (1); Oklahoma City (1); Weatherford (1); No location (1)	4	2.6%
Dermatologist	Oklahoma City (2); No location (1)	3	2.0%
Ophthalmologist	Oklahoma City (2); Elk City (1)	3	2.0%
Pain Management	Elk City (2); No location (1)	3	2.0%
Pulmonologist	Oklahoma City (2); No location (1)	3	2.0%

*Top 3 Specialists in 2019: Orthopedist/Ortho Surg. (29); OB/GYN (21); Otolaryngologist (20)

11

What type of specialist has your household been to and in which city did you receive that care? (Continued)			
Type of Specialist	City	No.	%
Perinatal	Oklahoma City (2)	2	1.3%
Counselor	No location (1)	1	0.7%
Gastric Bypass	Oklahoma City (1)	1	0.7%
Hepatologist	Oklahoma City (1)	1	0.7%
High Risk OB/GYN	Oklahoma City (1)	1	0.7%
Pathologist	No location (1)	1	0.7%
Pediatric Orthopedist	No location (1)	1	0.7%
Physical therapy	Oklahoma City (1)	1	0.7%
Cosmetic Surgeon	Oklahoma City (1)	1	0.7%
Podiatrist	Elk City (1)	1	0.7%
Primary care	Edmond (1)	1	0.7%
Vein Specialist	No location (1)	1	0.7%
Total*		153	100.0%

*Some respondents answered more than once. 118 respondents had seen a specialist. Those 118 respondents reported visiting an average of 1.3 specialists.

12

Did the specialist request further testing, laboratory work and/or x-rays?		
Response Category	No.	%
Yes	91	77.1%
No	25	21.2%
Don't know/No response	2	1.7%
Total	118	100.0%

If yes, in which city were the tests or laboratory work performed?		
Response Category	No.	%
Elk City	46	47.9%
Oklahoma City	42	43.8%
Clinton	2	2.1%
Edmond	1	1.0%
Hobart	1	1.0%
Norman	1	1.0%
Yukon	1	1.0%
Dallas, TX	1	1.0%
No response	1	1.0%
Total*	96	100.0%

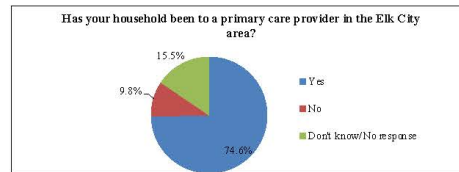
*Some respondents answered more than once. Average responses equal 1.05

13

What type of medical provider do you use for routine care?		
Response Category	No.	%
Primary care physician	139	61.0%
Mid-level clinic (nurse practitioner or PA)	41	18.0%
Urgent care/Walk in clinic	22	9.6%
Specialist	18	7.9%
Emergency room/hospital	4	1.8%
Health department	2	0.9%
Tribal health center	2	0.9%
Total	228	100.0%

14

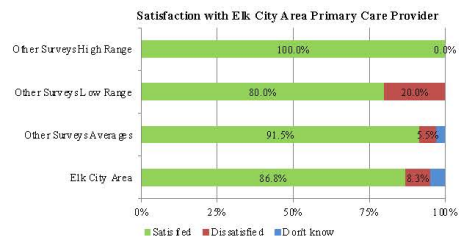
Has your household been to a primary care doctor in the Elk City area?		
Response Category	No.	%
Yes	144	74.6%
No	19	9.8%
Don't know/No response	30	15.5%
Total	193	100.0%



15

How satisfied were you or someone in your household with the quality of care received in the Elk City area?

Response Category	Satisfied	Dissatisfied	Don't know
Elk City Area	86.8%	8.3%	4.9%
Other Surveys Averages	91.5%	5.5%	3.0%
Other Surveys Low Range	80.0%	20.0%	0.6%
Other Surveys High Range	100.0%	0.0%	0.0%



*Primary Care satisfaction rate= 91.5% in 2019

16

Do you think there are enough primary care (family) doctors practicing in the Elk City area?

Response Category	No.	%
Yes	44	22.8%
No	88	45.6%
Don't know/No response	61	31.6%
Total	193	100.0%

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

Response Category	No.	%
Yes	111	57.5%
No	37	19.2%
Don't know/No response	45	23.3%
Total	193	100.0%

17

Have you used the services of a walk-in, urgent care or after hours clinic in the past 24 months?

Response Category	No.	%
Yes	82	42.5%
No	77	39.9%
Don't know/No response	34	17.6%
Total	193	100.0%

Would you utilize a walk in and/or after hours clinic if offered in Elk City?

Response Category	No.	%
Yes	111	57.5%
No	17	8.8%
Don't know/No response	65	33.7%
Total	193	100.0%

18

What concerns you most about health in the Elk City area?		
	No.	%
Mental health	69	12.3%
Accessing specialty services	60	10.7%
Heart disease	57	10.2%
Diabetes	52	9.3%
Substance abuse	50	8.9%
Cancers	46	8.2%
Accessing primary care	42	7.5%
Obesity	41	7.3%
Suicide	40	7.1%
Dental	27	4.8%
Teen pregnancy	10	1.8%
Motor vehicle crashes	8	1.4%
Accessing care/Quality of care	3	0.5%
Covid-19	2	0.4%
Cost of care	1	0.2%
Vaccine hesitancy	1	0.2%
Don't know/No response	51	9.1%
Total	560	100.0%

19

What additional health and wellness services would you like to see offered in the Elk City area?		
Response Category	No.	%
Specialists: Dermatologist (5); OB/GYN (5); Neurologist (5); Urologist (4); Specialists in general (3); Endocrinologist (3); Psychiatrist (3); Internal Medicine (3); Cardiologist (2); Pain Management (2); Orthopedist (2); Otolaryngologist (1); Psychologist (1); Ophthalmologist (1); Surgeon (1); Oncologist (1); Rheumatologist (1); Pediatrician (1)	44	20.6%
Don't know/No additional services	23	10.7%
Mental health/Inpatient behavioral health/Substance abuse services/services for children	19	8.9%
Improved quality of care/Emergency room care/Improved cardiac, pediatric, dermatology care	12	5.6%
Specialized services: Cardiac rehab (1); ADHD (1); Medical counseling (1); Hearing (1); Kidney care (1); Lactation (1); Lymphedema therapy (1); orthopedics for cerebral palsy (1)	8	3.7%
More primary care/Female providers/More mid level providers	7	3.3%
Increased surgical options: bariatric, cataract, OB/GYN/Outpatient surgery center	6	2.8%
More services, so residents don't have to travel for care/Open services in Sayre/Spinal tap	5	2.3%
After hours care/Urgent care	4	1.9%
Senior care/Elder care	4	1.9%
Cost of care/Affordable care/Affordable dental	4	1.9%
Geriatric services/Specialists	3	1.4%
Weight management clinic/Classes	3	1.4%
Nutritionist/Specialized nutrition education	2	0.9%
Pathologist available for surgeries	1	0.5%
24-hour pharmacy	1	0.5%
Provider that can write prescriptions for Zolovair or similar	1	0.5%
Health promotion classes for various topics: Diseases, Suicide prevention, mental health, etc.	1	0.5%
Higher level of OB care	1	0.5%
State of the art gym	1	0.5%
Upright MRI	1	0.5%
Functional medicine	1	0.5%
24-hour dental	1	0.5%
No response	61	28.5%
Total	214	100.0%

20

Has your household used telemedicine services, a visit either by telephone or video with your provider, in the past year?

Response Category	No.	%
Yes	71	36.8%
No	74	38.3%
Don't know/No response	48	24.9%
Total	193	100.0%

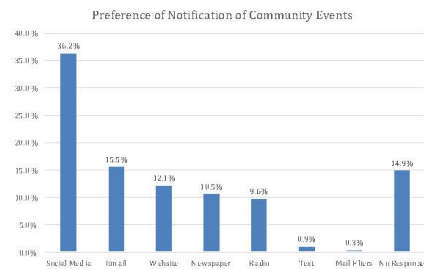
How satisfied was your household with the quality of care received via telemedicine?

Response Category	No.	%
Satisfied	62	87.3%
Dissatisfied	6	8.5%
Don't know/No response	3	4.2%
Total	71	100.0%

21

How would you prefer to be notified of community events?

Outlet	No.	%
Social Media	117	36.2%
Email	50	15.5%
Website	39	12.1%
Newspaper	34	10.5%
Radio	31	9.6%
Text	3	0.9%
Mail Fliers	1	0.3%
No Response	48	14.9%
Total	323	100.0%



22