

# Pawhuska Hospital, Inc. Community Health Needs Assessment Summary and Implementation Strategy

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Oklahoma Office of Rural Health

OSU Center for Rural Health

August 2019

*This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H54RH00058 and title: Medicare Rural Hospital Flexibility Grant Program for \$670,326, 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.*



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## Introduction

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

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

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

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

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

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

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

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

<sup>2</sup> Ibid

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

### **Oklahoma Office of Rural Health Partnership**

The Oklahoma Office of Rural Health makes this program available to all rural facilities in Oklahoma free of charge. The Oklahoma Office of Rural Health works closely with the hospital and community members to develop an economic impact of the local health sector, develop and analyze a local health services survey, and gather and analyze local health data. The community meetings are facilitated by a resource team 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 Pawhuska Hospital in 2019. It begins with a description of the hospital's medical service area, including a demographic analysis, and then summarizes each meeting that took place during the CHNA process. The report concludes by listing the recommendations that came out of the process and presenting the hospital's implementation strategy and marketing plan.

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

Pawhuska Hospital partnered with the Oklahoma Office of Rural Health to complete a CHNA during 2016. Through this process, secondary data were gathered, a survey was completed, and key community partners including public health were solicited for input. The following identifies each priority, implementation taken, and an evaluation or impact of the implementation.

Priority: Services for an Aging Population

Service Implemented/Partnerships: Strong Mind Program

This is an outpatient geropsych program. Participants meet with a licensed mental health professional at least monthly on an individual basis, and they meet with their group of peers at least once per week. This program is housed and provided by the hospital. The hospital

provides transportation and lunch for participants. This program was fully implemented in 2017. To date, it is estimated, at least 40 unique individuals have benefitted from this program. Many participants have participated more than once or for a longer period of time.

Priority: Mental health funding and the need for mental health services

Service Implemented/Partnerships: Strong Mind Program

As mentioned in the services for an aging population section, the hospital implemented this program fully in 2017. This program was implemented to address both priorities (services for an aging population and mental health). Through the offering of this program at least 40 unique participants have benefitted with many participating more than once.

Priority: Dialysis assistance

Service Implemented/Partnerships: Long-Term dialysis for swing-bed patients

The hospital provides dialysis for established dialysis patients for those in the inpatient and swing-bed setting. This allows patients to stay local and not be transferred for care. This alleviates travel burdens for the patient and family members. The hospital started offering this in 2017. To date, it is estimated, 311 dialysis treatments have occurred which alleviates travel burdens and allows patients to receive services locally.

Priority: Healthy eating impacting obesity rates

Service Implemented/Partnerships: Community Education

The clinic has started offering community education in the areas of diabetic needs and COPD. These offerings are available to the community on a monthly basis at no cost. It is advertised in the community and shared with clinic patients. These education offerings started in 2019. To date, 7 individuals have benefited from this opportunity. There have only been two offerings to date; however, there are plans to grow this number with further marketing.

### **Awareness of Community Outreach**

A question was included on the community survey (complete methodology detailed on page 17) to gauge survey respondents' awareness of current community programs offered by the hospital. Eighteen individuals or 17.3 percent of the total indicated they were aware of

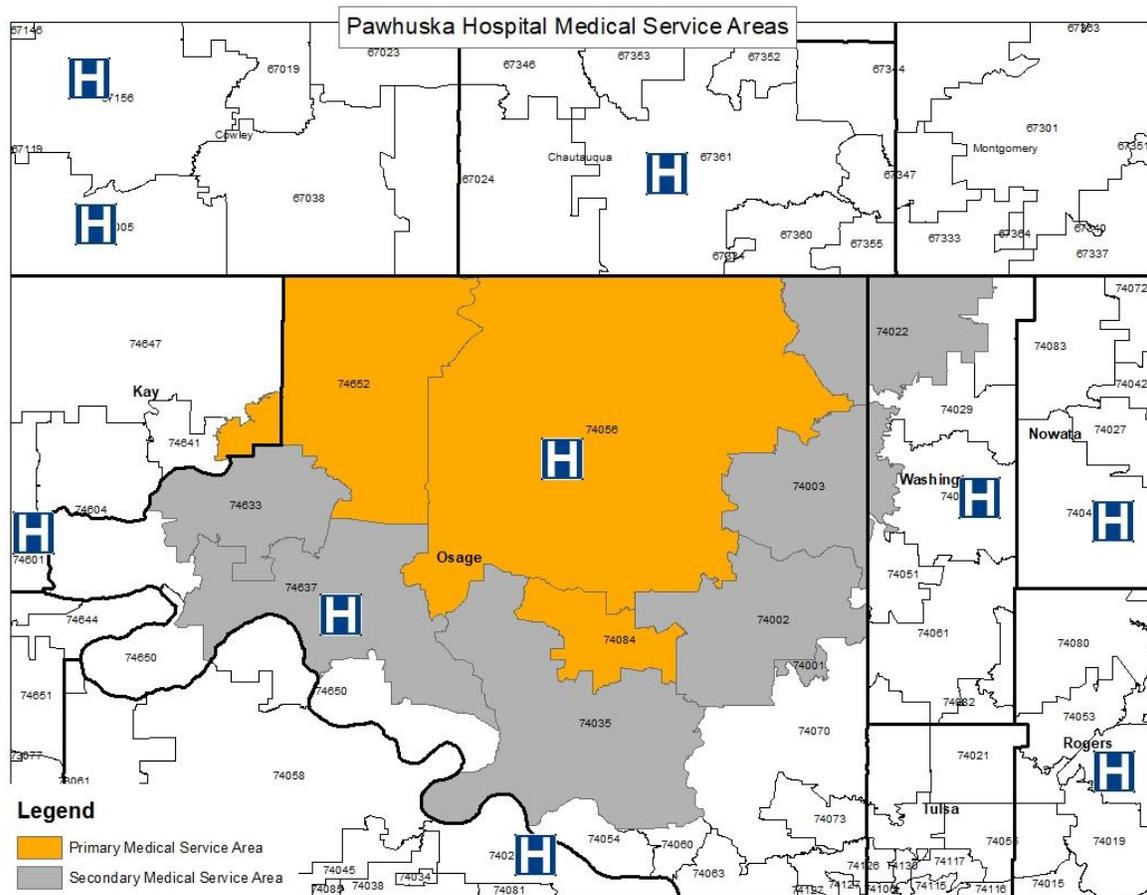
community programs. Survey respondents were then asked to list which programs they knew. Senior Strong was the most mentioned item with fourteen responses. The table below outlines all programs listed by the survey respondents.

**Community Programs Listed by Survey Respondents**

Response Category	No.	%
Senior Strong	14	93.3%
Charity care	1	6.7%
Total	15	100.0%

### Pawhuska Hospital Medical Services Area Demographics

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

<b>City</b>	<b>County</b>	<b>Hospital</b>	<b>No. of Beds</b>
Ponca City	Kay	AllianceHealth Ponca City	140
Nowata	Nowata	Jane Phillips Nowata Health Center, Inc.	25
Fairfax	Osage	Fairfax Community Hospital	15
Pawhuska	Osage	Pawhuska Hospital, Inc.	25
Cleveland	Pawnee	Cleveland Area Hospital	14
Claremore	Rogers	Hillcrest Hospital Claremore	81
Bartlesville	Washington	Jane Phillips Memorial Medical Center, Inc.	140
Sedan, KS	Chautauqua, KS	Sedan City Hospital	n/a
Arkansas City, KS	Cowley, KS	South Central Kansas Medical Center	n/a
Winfield, KS	Cowley, KS	William Newton Hospital	n/a

As delineated in Figure 1, the primary medical service area of Pawhuska Hospital includes the zip code areas of Pawhuska, Shidler, and Wynona. The primary medical service area experienced a population decrease of 4.5 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced another decrease in population of 7.7 percent from the 2010 Census to the latest available, 2013-2017, American Community Survey.

The secondary medical services area is comprised of the zip code areas Burbank, Hominy, Barnsdall, Avant, Bartlesville, Fairfax and Copan. The secondary medical service area experienced a decrease in population of 4.1 percent from 2000 to 2010 followed by a population decrease of 4.2 percent from 2010 to the 2013-2017 American Community Survey.

**Table 1. Population of Pawhuska Hospital Medical Service Areas**

Population by Zip Code	2000 Population	2010 Population	2013-2017 Population	% Change 2000-2010	% Change 2010-13-17
<i>Primary Medical Service Area</i>					
74056 Pawhuska	5,835	5,720	5,318	-2.0%	-7.0%
74652 Shidler	1,076	897	814	-16.6%	-9.3%
74084 Wynona	678	628	555	-7.4%	-11.6%
<b>Total</b>	<b>7,589</b>	<b>7,245</b>	<b>6,687</b>	<b>-4.5%</b>	<b>-7.7%</b>
<i>Secondary Medical Service Area</i>					
74633 Burbank	424	471	327	11.1%	-30.6%
74035 Hominy	4,860	4,565	4,113	-6.1%	-9.9%
74002 Barnsdall	2,300	2,333	1,951	1.4%	-16.4%
74001 Avant	491	367	305	-25.3%	-16.9%
74003 Bartlesville	14,858	14,249	14,247	-4.1%	0.0%
74637 Fairfax	2,063	1,899	1,747	-7.9%	-8.0%
74022 Copan	1,732	1,760	1,870	1.6%	6.3%
<b>Total</b>	<b>26,728</b>	<b>25,644</b>	<b>24,560</b>	<b>-4.1%</b>	<b>-4.2%</b>

SOURCE: Population data from the U.S. Bureau of Census, Decennial Census 2000, 2010 and American Community Survey 2013-2017 (February 2019)

Table 2 displays the current existing medical services in the primary service area of the Pawhuska Hospital medical services area. Most of these services would be expected in a service area of Pawhuska’s size: five physician offices, two dental offices, one chiropractic office, two home health providers, one EMS provider, a county health department, two mental health and counseling providers, and one pharmacy. Pawhuska Hospital is a 25 bed critical access facility located in Osage County. The hospital provides acute inpatient services, observation, swing bed, respite care, inpatient dialysis, wound care, and physical, speech and occupational therapy. Outpatient services include laboratory, radiology, emergency department, clinic services, and geri-psych. A complete list of hospital services and community involvement activities can be found in Appendix A.

**Table 2. Existing Medical Services in Pawhuska Hospital Medical Services Area**

<b>Count</b>	<b>Service</b>
1	Hospital: Pawhuska Hospital, Inc.
5	Physician offices and clinics
2	Dental offices
1	Chiropractic office
2	Home health providers
1	EMS provider
1	County Health Department: Osage County
2	Mental health and counseling providers
1	Pharmacy

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 Osage 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, 2013-2017 American Community Survey. This cohort accounted for 14.7 percent of the total population at the state level. In terms of the medical service areas, this age group accounted for 18.9 percent of the primary medical service area, 16.2 percent of the secondary medical service area, and 18 percent of the population of Osage County. The 45-64 age group accounts for the largest share of the population in the primary (27.5%) and secondary (27.7%) service areas. This is compared to the state share of 24.7 percent of the total population.

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

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Osage County	Oklahoma
<b>2010 Census</b>				
0-14	19.9%	19.9%	20.0%	20.7%
15-19	6.3%	6.6%	6.8%	7.1%
20-24	5.0%	6.1%	4.8%	7.2%
25-44	22.6%	24.8%	23.0%	25.8%
45-64	27.8%	28.3%	30.0%	25.7%
65+	<u>18.3%</u>	<u>14.3%</u>	<u>15.3%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	7,245	25,644	47,472	3,751,351
<b>13-17 ACS</b>				
0-14	17.4%	19.1%	18.7%	20.5%
15-19	7.6%	5.4%	6.5%	6.7%
20-24	6.1%	7.0%	5.2%	7.2%
25-44	22.5%	24.6%	23.0%	26.1%
45-64	27.5%	27.7%	28.6%	24.7%
65+	<u>18.9%</u>	<u>16.2%</u>	<u>18.0%</u>	<u>14.7%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	6,687	24,560	47,350	3,896,251

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2013-2017 (www.census.gov [February 2019]).

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 2013-2017 suggest that this population group has experienced an increase to 10.1 percent of the total population. This trend is somewhat evident in Osage County and both medical service areas. The share of the

population identified as of Hispanic Origin accounted for 4.4 percent of the primary medical service area’s population in 2013-2017 and 4.8 percent of the secondary medical service area during the same time period. The Hispanic Origin population accounted for 3.4 percent of the total population from 2010-2014 in Osage County. An even more striking trend is the larger share of Native American population residing in both medical service areas and Osage County. This cohort accounted for 22.3 percent of the primary medical service area, 15.4 percent of the secondary, and 13.7 percent of Osage County. This is compared to the state rate of 7.4 percent.

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

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Osage County	Oklahoma
<b>2010 Census</b>				
White	62.7%	91.3%	66.0%	72.2%
Black	2.1%	4.8%	11.4%	7.4%
Native American	26.1%	18.7%	14.4%	8.6%
Other	1.0%	2.2%	1.1%	5.9%
Two or more Races	8.2%	9.5%	7.1%	5.9%
Hispanic Origin	<u>4.9%</u>	<u>5.1%</u>	<u>2.9%</u>	<u>8.9%</u>
Total Population	7,245	25,644	47,472	3,751,351
<b>13-17 ACS</b>				
White	64.0%	70.9%	65.1%	72.6%
Black	1.8%	4.7%	11.3%	7.3%
Native American	22.3%	15.4%	13.7%	7.4%
Other	2.2%	2.0%	1.6%	4.9%
Two or more Races	9.7%	7.0%	8.3%	7.8%
Hispanic Origin	<u>4.4%</u>	<u>4.8%</u>	<u>3.4%</u>	<u>10.1%</u>
Total Population	6,687	24,560	47,350	3,896,251

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2013-2017 (www.census.gov [February 2019]).

## **Summary of Community Meetings**

Pawhuska Hospital hosted three community meetings between April 4, 2019 and May 2, 2019. The Oklahoma Office of Rural Health facilitated these meetings. Summaries of the information presented at each meeting are included below in chronological order.

Community members in attendance at these meetings included:

- Pawhuska Hospital representatives
- Pawhuska Chamber of Commerce
- Osage Nation
- Oklahoma State Department of Health
- Physician
- Clinic staff
- Pawhuska EMS
- Pawhuska Hospital Board Members

Average attendance at the community meetings was 13-17 community members. A letter was sent to all city and county officials, boards, civic groups, businesses and individuals. Community members were also emailed for the initial meeting and all of subsequent community meetings. Community members were identified to attend due to their role in the community through local government, their representation of the community, and their broad knowledge of the needs of local residents. The hospital made significant efforts to reach a diverse and representative population of the medical service area and patients served including low income and racially diverse populations. Representatives from the public health sector were included to provide insight into what they see from a public health and underserved population perspective of community needs.

### **Economic Impact and Community Health Needs Assessment Overview, April 4, 2019**

A meeting was held to discuss the economic impact of the health sector and explain the process and need for the Community Health Needs Assessment. The economic impact of the health sector was reviewed at this meeting (and is summarized below).

Table 5 below summarizes the overall economic impact of the health sector on the Osage County, Oklahoma economy. A form requesting information was sent to all health care providers in the medical service area. Local providers were asked to share their employment levels and of those employees how many were physicians/optometrists/dentists/pharmacists/etc. When available, payroll information was also collected from the establishments. When payroll information was not available, payroll was estimated using state level averages from the Bureau of Labor Statistics.

The health sector in the Pawhuska Hospital medical service area employs 291 FTE individuals. After applying a county-specific employment multiplier to each respective sector,

there is a total employment impact of 353 FTE employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$14.49 million. When the appropriate income multiplier is applied, the total income impact is over \$16.76 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 29.5% of personal income in Oklahoma will be spent on taxable goods and services locally. Therefore, if we just examine the impact made on retail from those employed in the health sector, this would account for nearly \$4.9 million spent locally, generating \$49,451 on a 1% tax. A copy of the meeting materials that were distributed can be found in Appendix C.

At the conclusion of the meeting, community members were asked to identify their top health concerns based on the demographic information presented and their local expertise. The following concerns were identified:

*Wellness/Education:* lack of overall knowledge in the community of healthy living habits  
More promotion of healthy living  
More wellness opportunities  
Sidewalks ending in many areas  
Incomplete walking trails  
“YMCA” of sorts with swimming to provide more access to health and wellness activities  
Nutrition education for diabetic population  
Many people are not aware that nutrition/wellness/education can all affect other aspects of overall health  
Diabetic pedicures

*Specialty Care:* lack of behavioral and mental health services  
pediatric outpatient therapies; specifically, speech therapy  
specialty care locally (all)  
Infectious disease specialist currently consults  
Need specialty docs coming *into* the community rather than patients traveling to Bartlesville for visits  
Dermatology- provide general skin care education  
Dialysis  
Urgent care center: many ER patients can be seen in an urgent care setting (especially after hours)

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

Health Sectors	Employment			Income			Retail	1 Cent
	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	115	1.30	150	\$3,082,774	1.12	\$3,457,803	\$1,020,052	\$10,201
Physicians, Dentists & Other Medical Professionals	94	1.17	110	\$7,159,462	1.18	\$8,424,143	\$2,485,122	\$24,851
Home Health, Other Medical & Health Services and Pharmacies	<u>82</u>	1.14	<u>93</u>	<u>\$4,249,396</u>	1.15	<u>\$4,881,169</u>	<u>\$1,439,945</u>	<u>\$14,399</u>
<b>Total</b>	<b>291</b>		<b>353</b>	<b>\$14,491,633</b>		<b>\$16,763,115</b>	<b>\$4,945,119</b>	<b>\$49,451</b>

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

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

## **Health Data, April 18, 2019**

A community meeting was held April 18, 2019, to examine various sources of local health data. Various sources of health data were examined including data from the County Health Rankings and Roadmaps Program through the University of Wisconsin Population Health Institute, and the Robert Wood Johnson Foundation. The County Health Rankings program evaluates and ranks counties based on two distinct areas: Health Factors and Health Outcomes. Along with these two areas counties receive an overall rank within their state; therefore 1=best and 77=worst.

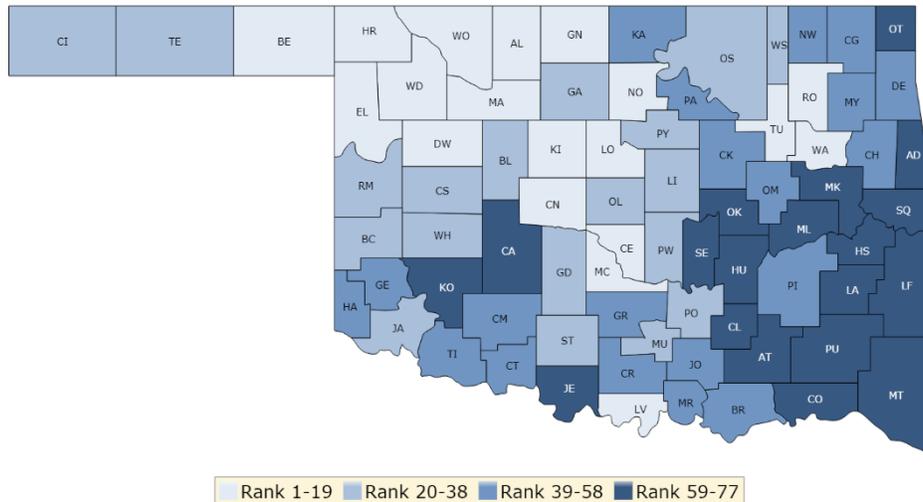
Health factors, considered tomorrow's health, are comprised of health behaviors (rank: 19), clinical care (rank: 43), social and economic factors (rank: 41), and physical environment (rank: 61). Osage County's overall health factors rank is 38. Areas of concern include Osage County's smoking rate, adult obesity rate, uninsured rate, and the mammography screening rate and flu vaccination rate of Medicare recipients are all less desirable than the top U.S. performers. All health factors variables are presented in Table 6 along with Osage 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 Osage County ranks very poorly compared to the national benchmark). The green-highlighted items are identified as areas of strength where Osage County performs well.

**Table 6. Health Factors (Overall Rank 38)**

<b>Category (Rank)</b>	<b>Osage County</b>	<b>Error Margin</b>	<b>Top U.S. Performers</b>	<b>Oklahoma</b>
<b>Health Behaviors (19)</b>				
Adult Smoking	19%	18-19%	14%	20%
Adult Obesity	33%	28-38%	26%	33%
Food Environment Index	6.6		8.7	5.7
Physical Inactivity	28%	23-33%	19%	28%
Access to Exercise Opportunities	50%		91%	72%
Excessive Drinking	13%	12-13%	13%	13%
Alcohol-Impaired Driving Deaths	23%	15-32%	13%	27%
Sexually Transmitted Infections	359		153	548
Teen Birth Rate	28	25-31	14	39
<b>Clinical Care (43)</b>				
Uninsured	15%	13-17%	6%	16%
Primary Care Physicians	4,780:1		1,050:1	1,590:1
Dentists	3,630:1		1,260:1	1,660:1
Mental Health Providers	2,050:1		310:1	260:1
Preventable Hospital Stays	4,382		2,765	4,862
Mammography Screening	33%		49%	36%
Flu Vaccinations	35%		52%	46%
<b>Social &amp; Economic Factors (41)</b>				
High School Graduation	88%		95%	83%
Some College	52%	49-56%	73%	60%
Unemployment	5.1%		2.9%	4.3%
Children in Poverty	25%	19-30%	11%	21%
Income Inequality	4.6	4.3-5.0	3.7	4.6
Children in Single-Parent Household	35%	31-39%	20%	34%
Social Associations	9.0		21.9	11.5
Violent Crime Rate	277		63	428
Injury Deaths	85	73-97	57	93
<b>Physical Environment (61)</b>				
Air-Pollution- Particulate Matter	10.2		6.1	9.4
Drinking Water Violations	Yes			
Severe Housing Problems	11%	10-13%	9%	14%
Driving Alone to Work	84%	82-86%	72%	83%
Long Commute- Driving Alone	39%	37-42%	15%	26%

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

The following figure depicts each county’s rank by shade. Osage County’s overall health factors ranking is comparable to Washington County. Osage County’s rank is more favorable than Kay and Pawnee Counties and is less favorable than Tulsa County.



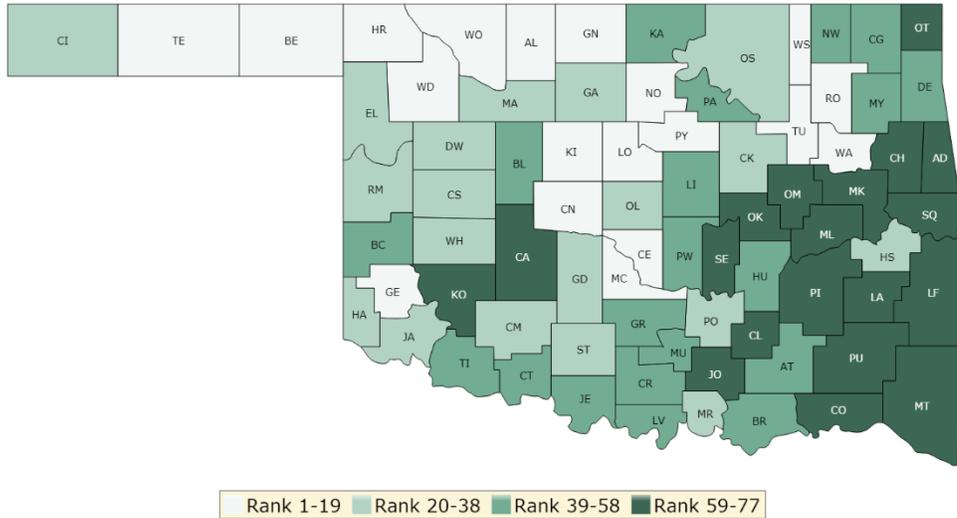
In terms of health outcomes, considered, today’s health, Osage County’s ranking is 19th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 7.

**Table 7. Health Outcomes (Overall Rank 21)**

Category (Rank)	Osage County	Error Margin	Top U.S. Performers	Oklahoma
<b>Length of Life (12)</b>				
Premature Death	8,400	7,400-9,400	5,400	9,300
<b>Quality of Life (38)</b>				
Poor or Fair Health	19%	18-19%	12%	20%
Poor Physical Health Days	4.5	4.3-4.6	3.0	4.5
Poor Mental Health Days	4.7	4.6-4.9	3.1	4.5
Low Birth Weight	8%	7-9%	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. Osage County's ranking is more favorable than Kay, and Pawnee Tulsa Counties. The ranking is less favorable than Washington and Tulsa Counties. All meeting materials distributed at this meeting can be found in Appendix D.



At the conclusion of the meeting, community members were once asked to identify what health concerns stand out in the data the presented and their local expertise. The health concerns identified include:

*Wellness/Education:* lack of overall knowledge in the community of healthy living habits  
Walking clubs, running clubs, leagues for softball, baseball, organized physical activity

*Specialty Care:*

Neurology (child and adult) Pulmonology- (Medicare and Medicaid) difficult to make referrals

Transportation for patients- bed bound patient who cannot make it to a clinic visit, patients who ride bikes to clinic visits- cannot make visits outside of town

Some patients do struggle to pay for insulin

Birth control is not available at the local pharmacy- the clinic does offer the depo shot

Mental health services- Patients do have to be referred out- Barnsdall is the closest location for those service

## Community Survey Methodology and Results, April 4, 2019- May 2, 2019

A survey was designed to gauge hospital usage, satisfaction, and community health needs. The survey was available in both paper and web format. Surveys were distributed at local businesses, the hospital, and clinic. Surveys were mailed to individuals in the community who could provide a broad perspective of their needs as well as the populations they serve. Surveys were also distributed at the first community meeting on April 4, 2019. Community members in attendance also received a follow-up email with a PDF copy of the survey and the electronic survey link. A copy of the survey form and results can be found in Appendix E. Community members were asked to return their completed surveys to Pawhuska Hospital.

The survey ran from April 4, through April 18, 2019. A total of 104 surveys from the Pawhuska Hospital medical service area were completed. Of the surveys returned, 3 were electronic responses, and 101 were hard copy surveys. The survey results were presented at the May 2, 2019, community meeting.

Table 8 below shows the survey respondent representation by zip code. The largest share of respondents was from the Pawhuska (74056) zip code with 69 responses or 66.3 percent of the total. Shidler, Wynona, and Bartlesville followed with 4 responses.

**Table 8. Zip Code of Residence**

Response Category	No.	%
74056- Pawhuska	69	66.3%
74652- Shidler	4	3.8%
74084- Wynona	4	3.8%
74006- Bartlesville	4	3.8%
74002- Barnsdall	3	2.9%
74035- Hominy	2	1.9%
74070- Skiatook	2	1.9%
74021- Collinsville	2	1.9%
74003- Bartlesville	2	1.9%
74637- Fairfax	1	1.0%
74804- Shawnee	1	1.0%
74650- Ralston	1	1.0%
74058- Pawnee	1	1.0%
74063- Sand Springs	1	1.0%
74020- Cleveland	1	1.0%
74022- Copan	1	1.0%
69361- Scotts Bluff, NE	1	1.0%
No response	4	3.8%
<b>Total</b>	<b>104</b>	<b>100.0%</b>

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

***Primary Care Physician Visits***

- 68.3% of respondents had used a primary care physician in the Pawhuska service area during the past 24 months
- 94.4% of those responded being satisfied
- Only 45 respondents or 43.3% believe there are enough primary care physicians practicing in Pawhuska
- 73.1% of the respondents would consider seeing a midlevel provider for their healthcare needs
- 79.8% responded they were able to get an appointment, within 48 hours, with their primary care physician when they needed one

***Specialist Visits***

Summary highlights include:

- 51% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 9
- No specialist visits occurred in Pawhuska

**Table 9. Type of Specialist Visits**

Type of Specialist	No.	Percent
<b><i>Top 5 Responses</i></b>		
Orthopedist/Ortho Surg. <i>(0 visits in Pawhuska)</i>	17	22.1%
OB//GYN <i>(0 visits in Pawhuska)</i>	11	14.3%
Cardiologist <i>(0 visits in Pawhuska)</i>	9	11.7%
Dermatologist <i>(0 visits in Pawhuska)</i>	5	6.5%
Otolaryngologist <i>(0 visits in Pawhuska)</i>	4	5.2%
All others <i>(0 visits in Pawhuska)</i>	<u>31</u>	<u>40.3%</u>
<b>Total</b>	<u>77</u>	<u>100.0%</u>

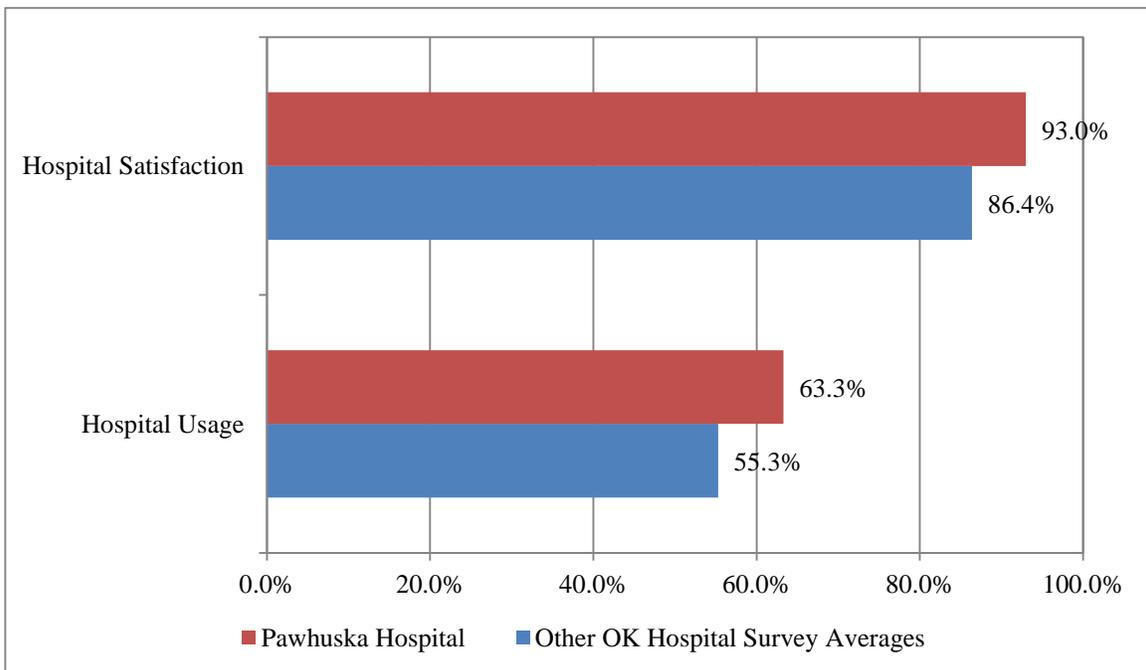
Some respondents answered more than once.

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

Survey highlights include:

- 63.3% of survey respondents that have used hospital services in the past 24 months used services at Pawhuska Hospital
  - o Jane Phillips Medical Center, Bartlesville (12.2%), St. John Owasso Hospital, Hillcrest Medical Center, Tulsa, Center for Orthopaedic Reconstruction and Excellence, Jenks, and Claremore Indian Hospital, Claremore all followed with 2 responses
  - o The most common response for using a hospital other than Pawhuska Hospital was availability of specialty care (including surgery labor and delivery) (30.8%), closer, more convenient location (23.1%) and physician referral/transfer (23.1%) followed
  - o The usage rate of 63.3% was higher than the state average of 55.3% for usage of other rural Oklahoma hospitals surveyed
- 93% of survey respondents were satisfied with the services received at Pawhuska Hospital
  - o This is higher the state average for other hospitals (86.4%)
- Most common services used at Pawhuska Hospital:
  - o Emergency room (35%)
  - o Diagnostic imaging (28%)
  - o Laboratory (20%)

**Figure 2. Summary of Hospital Usage and Satisfaction Rates**



**Local Healthcare Concerns and Additional Services**

Survey respondents were asked what concerns them most about healthcare in their community. The most common response Lack of physicians/difficult to see provider/retiring physicians was the top response with 15 responses or 13.3 percent of the total. No concerns/receive good care/Don't know followed with 10 responses or 8.8 percent of the total. Table 10 displays all responses and the frequencies.

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

	No.	%
Lack of physicians/Difficult to see provider/Retiring physicians	15	13.3%
No Concerns/Receive good care/Don't know	10	8.8%
Level of care/Limited services available/Lack of resources	7	6.2%
Quality of care/Compassion for patient	4	3.5%
After hours care	4	3.5%
Services for cardiac, brain, and cancer care	4	3.5%
Access to specialists/Lack of specialist services	4	3.5%
Losing services/Hospital	3	2.7%
Distance to care	2	1.8%
Cost of care	2	1.8%
Age of hospital and equipment	2	1.8%
EMS/Ambulance Services	2	1.8%
Need for contamination area at hospital	2	1.8%
Access to mental health/Behavioral health	1	0.9%
Lack of dialysis	1	0.9%
No ICU	1	0.9%
Lack of transportation for physician visits	1	0.9%
Need for education of healthy living	1	0.9%
Pediatric needs	1	0.9%
Access to OB/GYN	1	0.9%
Prescribing without oversight	1	0.9%
Limited access to technology	1	0.9%
Sanitation	1	0.9%
It spreads fast	1	0.9%
No response	41	36.3%
<b>Total</b>	<b>113</b>	<b>100.0%</b>

Survey respondents also had the opportunity to identify what additional services they would like to see offered at Pawhuska Hospital. The most common response was diagnostic imaging including MRI, mammograms, and CT (collectively, 10.3%). No additional

services/satisfied with what is available/don't know (7.1%) followed. Table 11 displays the full listing of responses.

**Table 11. Additional Services Survey Respondents Would Like to See Offered at Pawhuska Hospital**

Response Category	No.	%
Diagnostic Imaging: MRI (8); Mammograms (4); CT (1)	13	10.3%
Specialists: Cardiologist (3); Specialists in general (2); OB/GYN (1); Dermatologist (1); Pediatrician (1); Psychiatrist (1)	9	7.1%
Outpatient dialysis	5	4.0%
Urgent care/After hours care/Urgent care 24-hours	5	4.0%
Dialysis	4	3.2%
No additional services/Satisfied with what is available/Don't know	4	3.2%
More primary care physicians	3	2.4%
Mental health services	3	2.4%
Education: community/trauma/wellness	3	2.4%
ICU	2	1.6%
Surgeries	2	1.6%
Diabetic services/Diabetic education	2	1.6%
All services/Anything that would help local residents	2	1.6%
Labor and delivery	1	0.8%
Pediatric therapy	1	0.8%
Allergy shots	1	0.8%
Pulmonary function test	1	0.8%
Helicopter/Air Evac	1	0.8%
Wellness including skin care	1	0.8%
Transportation for elderly to appointments	1	0.8%
Updated hospital	1	0.8%
Cardiac rehab	1	0.8%
Stress test	1	0.8%
Sleep studies	1	0.8%
Pool therapy	1	0.8%
Cancer center	1	0.8%
No response	56	44.4%
<b>Total</b>	<b>126</b>	<b>100.0%</b>

**Primary Care Physician Demand Analysis, May 2, 2019**

A demand analysis of primary care physicians was completed for the zip codes that comprise the Pawhuska primary and secondary medical services areas. This analysis examined average primary care physician visit rates by gender and by age groups. Once age- and gender-specific coefficients were applied, total primary care physician visit numbers were calculated by

service area. Table 12 displays potential primary care physician rates by shares of service area. For example, if 90% of residents in the primary medical services area and 10% of residents in the secondary medical services area utilize services of primary care physicians in the Pawhuska medical services area, a total of 14,832 annual visits would occur. This would suggest that the Pawhuska medical services area would need 3.5 FTE primary care physicians to meet the needs of their existing population. Table 12 displays the estimated number of visits by share of medical services area.

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

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	10,293	10,869	11,444	12,019	12,595	13,170	13,746
	10%	12,530	13,106	13,681	14,257	<b>14,832</b>	15,407	15,983
	15%	14,767	15,343	15,918	16,494	<b>17,069</b>	17,645	18,220
	20%	17,005	17,580	18,155	18,731	19,306	19,882	20,457
	25%	19,242	19,817	20,393	20,968	21,543	22,119	22,694
	30%	21,479	22,054	22,630	23,205	23,781	24,356	24,931
	35%	23,716	24,291	24,867	25,442	26,018	26,593	27,169
	40%	25,953	26,528	27,104	27,679	28,255	28,830	29,406
	45%	28,190	28,766	29,341	29,916	30,492	31,067	31,643
	50%	30,427	31,003	31,578	32,154	32,729	33,304	33,880

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 14,832 to 17,069 total primary care physician office visits in the Pawhuska area for an estimated 3.5 to 4.1 total Primary Care Physicians.

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

At the conclusion of the meeting, community members were once again asked what stood out to them from the survey results and physician demand analysis as health concerns.

- Mental health and wellness including substance abuse and chemical dependency
- Outpatient dialysis
- Expansion of clinic/hospital- Currently, there are space limitations. Expand 340B program to open pharmacy in the clinic, add MRI services, and provide mobile mammography services
- Wellness opportunities and need for nutrition education
  - Diabetic education is offered through OK State Department of Health

- Need for diabetic and pre-diabetic education for youth (in the schools if possible)
- Greater marketing of existing wellness/education opportunities- Expand partnerships, coop marketing, etc.

## **Community Health Needs Implementation Strategy**

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

- Mental health and wellness including substance abuse and chemical dependency
  - The hospital will continue to offer and plan to grow the Senior Strong Program.
  - The clinic physician is planning to start offering monthly education discussions. It is possible this could be one of the topics covered.
  - The hospital partners with Edwin Fair for services and placement for those patients in need.
  - The hospital is working to partner with the local police and sheriff's office to better respond to those patients who have mental health and/or substance abuse issues.
- Outpatient dialysis- The hospital identifies and understands this is a broad need of the community. However, this is beyond the scope of services, space and staffing of the hospital. While the hospital can provide the inpatient services, this would require a new structure, trained staffing, and significant monetary investment. The hospital will continue to help coordinate this service for patients through other providers.
- Expansion of clinic/hospital- Currently, there are space limitations. Expand 340B program to open pharmacy in the clinic, add MRI services, and provide mobile mammography services
  - The hospital and clinic are continuing to look to expand services including offering a variety of specialty services offered on weekly/monthly basis to alleviate transportation burdens of local residents.
  - The hospital will continue to explore the feasibility of adding or partnering to provide services and imaging.
  - The hospital recently added an infectious disease specialist that provides education and consults to the hospital and clinic regarding antibiotic stewardship and emerging infectious disease trends. This provider will also manage the care of the patients with complex infectious disease needs which would previously have been

transferred. This provider can also assist in the prevention of more serious complications.

- The hospital provides specialized wound care for inpatient and outpatients. This provider covers complex wound care which can positively impact the quality of life of these patients.
- Wellness opportunities and need for nutrition education
  - The clinic has started providing free community education in the areas of diabetic, COPD, and fall risk with more topics to be covered over the next three years. The goal is to increase the number of attendees for these offerings.
  - The local physician at the clinic is planning to start monthly community education sessions regarding emerging health issues and concerns.
  - The hospital is exploring the opportunity to host a health fair in the community to focus on topics such as stroke, substance abuse, etc. The goal is to make this a joint effort with other health providers in the community.

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

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

### Hospital Services/Community Benefits

Hospital Services provided in inpatient and outpatient settings.

#### **Inpatient Services:**

Acute Inpatient  
Observation  
Swing Bed  
Respite Care  
Inpatient Dialysis  
Physical, Speech and Occupational Therapy  
Laboratory  
Radiology – CT  
EKG  
Medication Room  
Wound Care  
Dietary  
Respiratory Therapy  
Social Services

#### **Outpatient Services:**

Laboratory  
Radiology  
Emergency Department  
Physical therapy  
Geri-psych  
Wound care

#### **Clinic:**

New primary care clinic located next door to hospital

#### **Community Activities:**

Health Fair  
Holiday Events  
Adopt a Child/Family  
Year Book Ads  
Chamber member  
Chamber donor  
Charitable giving to local organizations/events and school systems  
Scholarships provided  
Educational classes offered through PT Department  
Career Fairs

#### **Internal Hospital Activities:**

Hospital website/social media  
Memberships – professional, state and local  
Alliances or partnerships  
Governance – Board of Directors and Board of Incorporators  
Staff – birthday celebrations, holiday celebrations  
Advertisement – newspaper, football t-shirts, yearbook ads, flyers

## **Appendix B Community Meeting Attendees**

### **Pawhuska Hospital Community Health Needs Assessment**

#### **Meeting 1: Overview, Economic and Demographic Data and Economic Impact**

**4-Apr-19**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Jason McBride	Hospital Administrator	Pawhuska Hospital
Tye Barbee	Clinic Administrator	Pawhuska Family Medical Center
Amanda Bray	Quality Manager	Pawhuska Hospital
Karee Kleier	Infection Control Officer	Pawhuska Hospital
Loren Quiram	Chief Clinical Officer	Pawhuska Hospital
Tracy Rollins	Human Resource Rep.	Pawhuska Hospital
Ashley McCartney	Business Office Coord.	Pawhuska Hospital
Tiffany Schuette	Financial Counselor	Pawhuska Hospital
Elizabeth Hembree	Director- Osage Nation GC	Gaming Commission
Cindy Tillman	Chief of Operations	Cohesive Healthcare
Joni Nash	Exec. Director	Pawhuska Chamber of Commerce
James Hager	VP	The Bank of Pawhuska
Mike McCartney		
Ben West	Board Member	Pawhuska Hospital
Jourdan Foran	City Council	City of Pawhuska
Gip Allen	Fire Chief	City of Pawhuska
Mark Woodring	Asst. Dean for Rural Health	OSU Center for Rural Health

## **Pawhuska Hospital Community Health Needs Assessment**

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

**18-Apr-19**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Jason McBride	Hospital Administrator	Pawhuska Hospital
Tye Barbee	Clinic Administrator	Pawhuska Family Medical Center
Amanda Bray	Quality Manager	Pawhuska Hospital
Karee Kleier	Infection Control Officer	Pawhuska Hospital
Loren Quiram	Chief Clinical Officer	Pawhuska Hospital
Ashley McCartney	Business Office Coord.	Pawhuska Hospital
Tiffany Schuette	Financial Counselor	Pawhuska Hospital
Cindy Tillman	Chief of Operations	Cohesive Healthcare
Jourdan Foran	City Council	City of Pawhuska
Mike McCartney		Pawhuska Family Medical Center
Heather Arrington	APRN	Tolson Agency
Steve Tolson	President	Pawhuska Chamber
Reba Buno	Office Manager	Pawhuska Hospital
Ben West	Board Member	
Lee Holcomb		
Chris Pin	Controller	Cohesive Healthcare
	Exec. Director Rural and Tribal Health	
Chris Bengel		OSU CHS

**Pawhuska Hospital Community Health Needs Assessment**  
**Meeting 3: Survey Results and Primary Care Physician Demand Analysis**  
**2-May-19**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Jason McBride	Hospital Administrator	Pawhuska Hospital
Amanda Bray	Quality Manager	Pawhuska Hospital
Karee Kleier	Infection Control Officer	Pawhuska Hospital
Ashley McCartney	Business Office Coord.	Pawhuska Hospital
Tiffany Schuette	Financial Counselor	Pawhuska Hospital
Jourdan Foran	City Council	City of Pawhuska
Steve Tolson	President	Tolson Agency
Ben West	Board Member	Pawhuska Hospital
Tracy Rollins	Human Resource Rep.	Pawhuska Hospital
Elizabeth Hembree	Director- Osage Nation GC	Gaming Commission
Megan Bethel	Case Manager	Pawhuska Hospital
Larry Berger	Regional Director	Osage County Health Department
Sandra Schmidt	Accreditation Coordinator	Osage County Health Department

## Appendix C- Meeting 1 Materials, April 4, 2019

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

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

#### Economic Data

2017 Per Capita Income <sup>1</sup>	\$33,591 (56th highest in state)
Employment (December 2018, preliminary) <sup>2</sup>	20,387 (1.7% from 2017)
Unemployment (December 2018, preliminary) <sup>2</sup>	779 (-28.1% from 2017)
Unemployment rate (December 2018, preliminary) <sup>2</sup>	3.7% (15th lowest in state)
2017 Poverty rate <sup>3</sup>	16.8% (34th lowest in state)
2017 Child poverty rate <sup>3</sup>	24.5% (46th lowest in state)
2017 Transfer Payments <sup>1</sup>	\$380,651,000 (24.0% of total personal income, 33rd lowest in state)
2017 Medical Benefits as a share of Transfer Payments <sup>1</sup>	39.8% (18th lowest in state)

<sup>1</sup>Bureau of Economic Analysis, Regional Data, 2019, <sup>2</sup>Bureau of Labor Statistics 2017-2018, <sup>3</sup>U.S. Census Bureau, Small Area Income and Poverty, 2019

#### Education Data

At Least High School Diploma <sup>1</sup>	88.2% (19th highest in state)
Some College <sup>1</sup>	48.8% (34th highest in state)
At Least Bachelor's Degree <sup>1</sup>	18.0% (38th highest in state)
2015-2016 Free and Reduced Lunch Eligible <sup>2</sup>	69.7% (43rd lowest in state)

<sup>1</sup>U.S. Census Bureau, American Community Survey, 2013-2017, <sup>2</sup>National Center for Education Statistics, 2015-2016.

#### Payer Source Data

2016 Uninsured Rate (under 65) <sup>1</sup>	15.0% (15th lowest in state)
2016 Uninsured Rate (under 19) <sup>1</sup>	7.5% (10th lowest in state)
2016 Medicare share of total population <sup>2</sup>	15.1% (15th lowest in state)
2018 Medicaid share of total population <sup>3</sup>	13.0% (1st lowest in state)

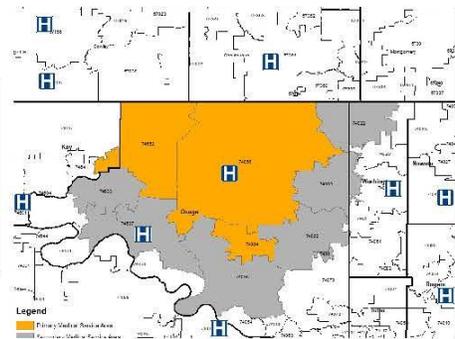
<sup>1</sup>U.S. Census Bureau, Small Area Health Insurance Estimates, 2015, <sup>2</sup>Centers for Medicare & Medicaid Services, Medicare Aged and Disabled by State and County, 2016

<sup>3</sup>Oklahoma Health Care Authority, Total Enrollment by County, 2018

#### Population (2013-2017)

Osage County	47,350 (-0.3% from 2010)
Primary Medical Service Area	6,687 (-7.7% from 2010)
Secondary Medical Service Area	24,560 (-4.2% from 2010)
Oklahoma	3,896,251 (3.9% from 2010)

U.S. Census Bureau, 2013-2017 American Community Survey 2010 Decennial Census



**Percent of Total Population by Age Group for Pawhuska Hospital Medical Service Areas, Osage County and Oklahoma**

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Osage County	Oklahoma
<b>13-17 ACS</b>				
0-14	17.4%	19.1%	18.7%	20.5%
15-19	7.6%	5.4%	6.5%	6.7%
20-24	6.1%	7.0%	5.2%	7.2%
25-44	22.5%	24.6%	23.0%	26.1%
45-64	27.5%	27.7%	28.6%	24.7%
65+	<u>18.9%</u>	<u>16.2%</u>	<u>18.0%</u>	<u>14.7%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	6,687	24,560	47,350	3,896,251

SOURCE: U.S. Census Bureau, 2013-2017 American Community Survey

**Percent of Total Population by Race and Ethnicity for Pawhuska Hospital Medical Service Areas, Osage County and Oklahoma**

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Osage County	Oklahoma
<b>13-17 ACS</b>				
White	64.0%	70.9%	65.1%	72.6%
Black	1.8%	4.7%	11.3%	7.3%
Native American <sup>1</sup>	22.3%	15.4%	13.7%	7.4%
Other <sup>2</sup>	2.2%	2.0%	1.6%	4.9%
Two or more Races <sup>3</sup>	9.7%	7.0%	8.3%	7.8%
Hispanic Origin <sup>4</sup>	<u>4.4%</u>	<u>4.8%</u>	<u>3.4%</u>	<u>10.1%</u>
Total Population	6,687	24,560	47,350	3,896,251

SOURCE: U.S. Census Bureau, 2013-2017 American Community Survey

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*This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H54RH00058 and title: Medicare Rural Hospital Flexibility Grant Program for \$670,326, 0% financed with nongovernmental sources. This information of content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.*



# Pawhuska Hospital Economic Impact

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

Pawhuska Hospital **directly** employs **115** people (including the clinic) with an annual payroll of over **\$3 million** including benefits

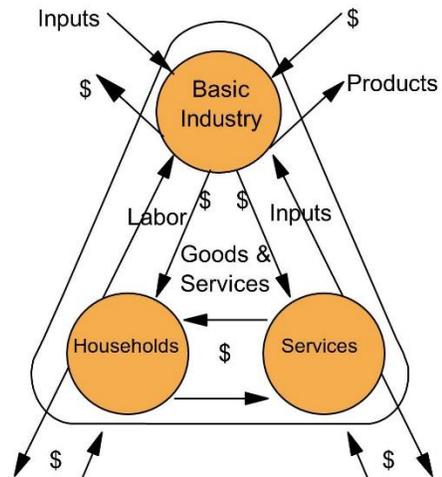
- These employees and income create an additional **35 jobs** and over **\$400,000** in income as they interact with other sectors of the local economy
- **Total impacts= 150 jobs and over \$3.4 million**
- Other segments of the healthcare sector (Doctors, Nurses, Pharmacies, etc.) provide another **176 jobs** and an additional **\$11.4 million** in wages
- Their interactions and transactions within the local economy create:
- **Total health sector impacts= 353 jobs and \$16.7 million (Including the hospital)**
- Over **\$4.9 million** in retail sales generated from the presence of the health sector

### Healthcare and Your Local Economy:

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

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

- Pharmacies
- Physicians/Specialists
- Potential Retail Sales



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

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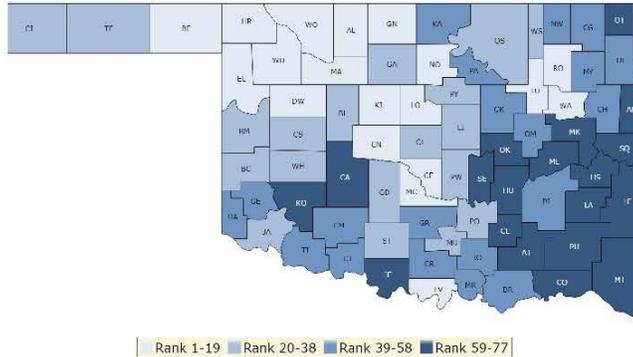
## Appendix D- Meeting 2 Materials, April 18, 2019

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

Table 1. Health Factors (Overall Rank 38)

Category (Rank)	Osage County	Error Margin	Top U.S. Performers	Oklahoma
<b>Health Behaviors (19)</b>				
Adult Smoking	19%	18-19%	14%	20%
Adult Obesity	33%	28-38%	26%	33%
Food Environment Index	6.6		8.7	5.7
Physical Inactivity	28%	23-33%	19%	28%
Access to Exercise Opportunities	50%		91%	72%
Excessive Drinking	13%	12-13%	13%	13%
Alcohol-Impaired Driving Deaths	23%	15-32%	13%	27%
Sexually Transmitted Infections	359		153	548
Teen Birth Rate	28	25-31	14	39
<b>Clinical Care (43)</b>				
Uninsured	15%	13-17%	6%	16%
Primary Care Physicians	4,780:1		1,050:1	1,590:1
Dentists	3,630:1		1,260:1	1,660:1
Mental Health Providers	2,050:1		310:1	260:1
Preventable Hospital Stays	4,382		2,765	4,862
Mammography Screening	33%		49%	36%
Flu Vaccinations	35%		52%	46%
<b>Social &amp; Economic Factors (41)</b>				
High School Graduation	88%		95%	83%
Some College	52%	49-56%	73%	60%
Unemployment	5.1%		2.9%	4.3%
Children in Poverty	25%	19-30%	11%	21%
Income Inequality	4.6	4.3-5.0	3.7	4.6
Children in Single-Parent Household	35%	31-39%	20%	34%
Social Associations	9.0		21.9	11.5
Violent Crime Rate	277		63	428
Injury Deaths	85	73-97	57	93
<b>Physical Environment (61)</b>				
Air-Pollution- Particulate Matter	10.2		6.1	9.4
Drinking Water Violations	Yes			
Severe Housing Problems	11%	10-13%	9%	14%
Driving Alone to Work	84%	82-86%	72%	83%
Long Commute- Driving Alone	39%	37-42%	15%	26%

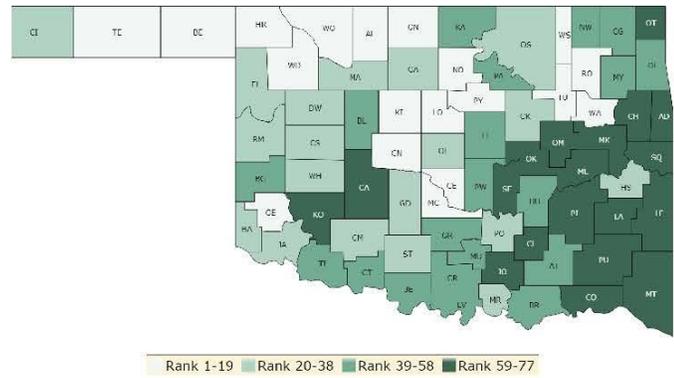
Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation



**Table 2. Health Outcomes (Overall Rank 21)**

Category (Rank)	Osage County	Error Margin	Top U.S. Performers	Oklahoma
<b>Length of Life (12)</b>				
Premature Death	8,400	7,400-9,400	5,400	9,300
<b>Quality of Life (38)</b>				
Poor or Fair Health	19%	18-19%	12%	20%
Poor Physical Health Days	4.5	4.3-4.6	3.0	4.5
Poor Mental Health Days	4.7	4.6-4.9	3.1	4.5
Low Birth Weight	8%	7-9%	6%	8%

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



For additional information, please contact  
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 Oklahoma Office of Rural Health  
 Phone: 405.945.8609

# Appendix E- Survey Form and Meeting 3 Materials, May 2, 2019

## Pawhuska Hospital Local Health Services Survey

Please return completed survey by April 18, 2019

The zip code of my residence is: \_\_\_\_\_

What is your current age: \_\_\_\_\_ What is your gender: \_\_\_\_\_

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*)  
 Pawhuska Hospital (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 Pawhuska Hospital, why did

3. you or your family member choose that hospital? (Please answer then skip to Q7)  
 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 Pawhuska Hospital, what hospital service(s) were used?

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

5. How satisfied was your household with the services you received at Pawhuska Hospital?  
 Satisfied       Dissatisfied       Don't know

6. Why were you satisfied/dissatisfied with services received at Pawhuska Hospital?

7. Has your household been to a specialist in the past 24 months?  
 Yes       No (*Skip to Q11*)       Don't know (*Skip to Q11*)

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

8.
 

Type of Specialist	City

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

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

*Continue on reverse side...*

11. Do you use a primary care physician for most of your routine health care?  
 Yes *(Skip to Q13)*       No *(Go to Q12)*       Don't know *(Skip to Q13)*

12. If no, then what kind of medical provider do you use for routine care?  
 Tribal Health Center       Emergency Room/Hospital  
 Income Based Health Center       Specialist  
 Mid-Level Clinic (Nurse Practitioner or PA)       Other *(Please list below)*  
 Health Department

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13. Has your household been to a primary care physician in the Pawhuska area?  
 Yes *(Go to Q14)*       No *(Skip to Q16)*       Don't know *(Skip to Q16)*

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

15. Why were you satisfied/dissatisfied with the care received in the Pawhuska area?

---

16. Do you think there are enough primary care physician doctors practicing in the Pawhuska area?  
 Yes       No       Don't know

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

18. Are you able to get an appointment, within 48 hours, with your primary care physician when you need one?  
 Yes       No       Don't know

19. Have you used the services of an urgent care or after hours clinic in the past 12 months?  
 Yes       No       Don't know

20. Would you utilize urgent care or after hours services if offered in Pawhuska?  
 Yes       No       Don't know

21. What concerns you most about health care in the Pawhuska area?

---

22. What other services would you like to see offered at Pawhuska Hospital?

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

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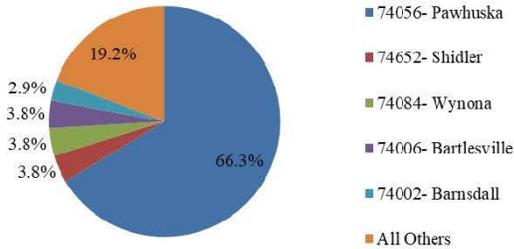
24. How would you prefer to be notified of community events?  
*(Please rank your choices with 1=most preferred and 5=least preferred)*  
\_\_\_\_\_ Newspaper      \_\_\_\_\_ Email      \_\_\_\_\_ Social Media  
\_\_\_\_\_ Radio      \_\_\_\_\_ Website

*Please mail completed survey to:*  
Pawhuska Hospital  
1101 E 15th St.  
Pawhuska, OK 74056

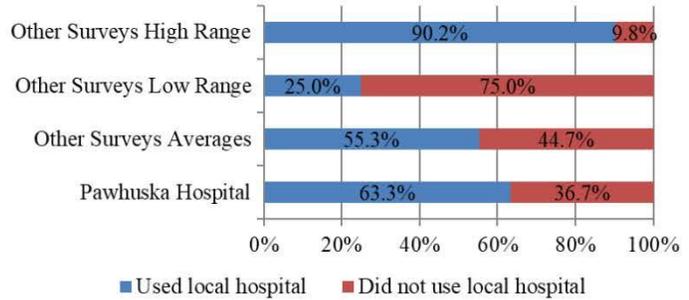
# Pawhuska Hospital Community Survey Results

## As part of the Community Health Needs Assessment

### Zip Code of Residence, Top 5 Responses

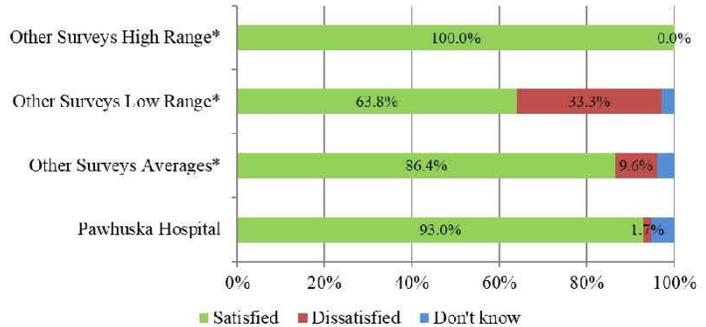


### Hospital Utilization Comparison

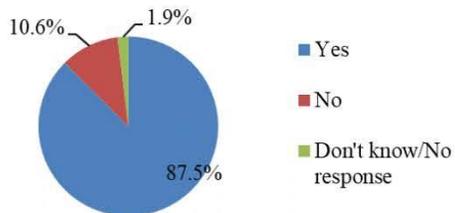


Type of Specialist Visits		
Specialist	No.	Percent
<b>Top 5 Responses</b>		
Orthopedist/Ortho Surg. (0 visits in Pawhuska)	17	22.1%
OB/GYN (0 visits in Pawhuska)	11	14.3%
Cardiologist (0 visits in Pawhuska)	9	11.7%
Dermatologist (0 visits in Pawhuska)	5	6.5%
Otolaryngologist (0 visits in Pawhuska)	4	5.2%
All others (0 visits in Pawhuska)	31	40.3%
<b>Total</b>	<b>77</b>	<b>100.0%</b>

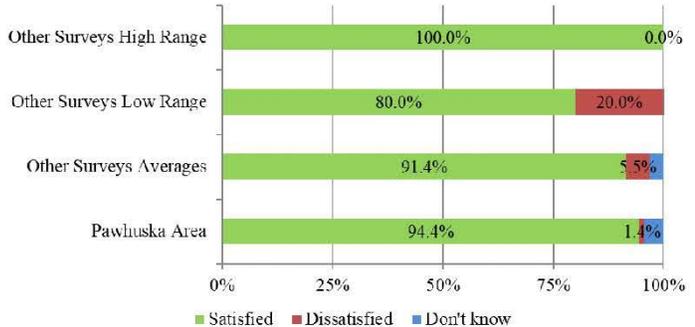
### Satisfaction with Pawhuska Hospital



### Use Family Doctor for Routine Health Care



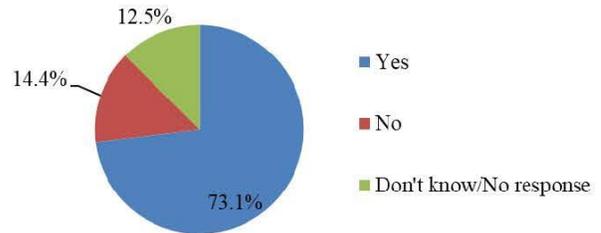
### Satisfaction with Pawhuska Area Primary Care Doctor



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



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



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



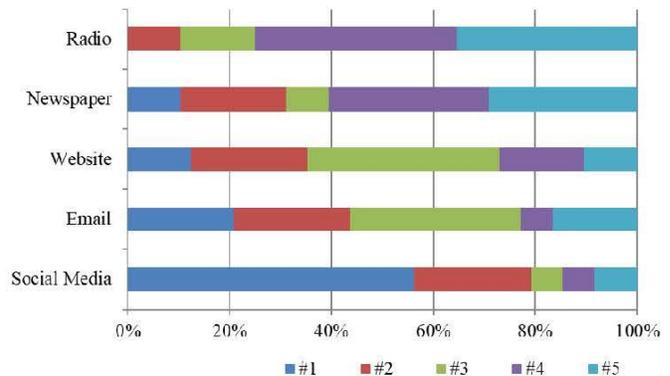
**Healthcare concerns- Top 3 Responses**

Concern	No.	Percent
Lack of physicians/Difficult to see provider/Retiring physicians	15	13.3%
No Concerns/Receive good care/Don't know	10	8.8%
Level of care/Limited services available/Lack of resources	7	6.2%
All others	81	71.7%
Total	113	100.0%

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

Services	No.	Percent
Diagnostic Imaging: MRI (8); Mammograms (4); CT (1)	13	10.3%
Specialists: Cardiologist (3); Specialists in general (2); OB/GYN (1); Dermatologist (1); Pediatrician (1); Psychiatrist (1)	9	7.1%
Outpatient dialysis	5	4.0%
All others	99	78.6%
Total	126	100.0%

**Preference of Notification of Community Events**



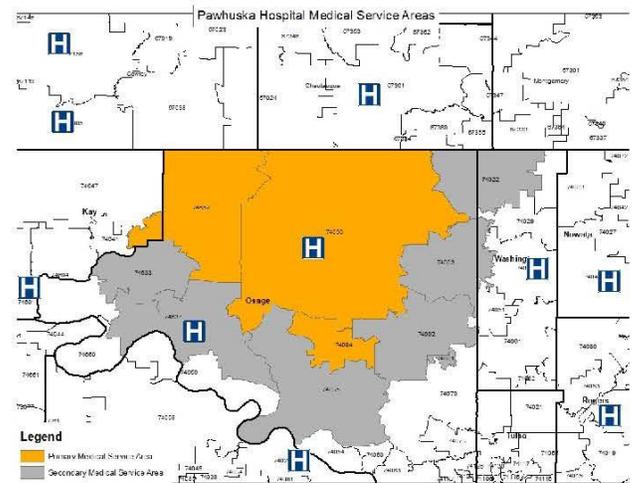
For additional information, please contact  
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 Oklahoma Office of Rural Health  
 Phone: 405.945.8609

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

*As part of the Community Health Needs Assessment*

**Table 1. Pawhuska Hospital Medical Service Areas**

Zip Code	City	2013-2017 ACS Population
<i>Primary Medical Service Area</i>		
74056	Pawhuska	5,318
74652	Shidler	814
74084	Wynona	555
<b>Totals</b>		<b><u>6,687</u></b>
<i>Secondary Medical Service Area</i>		
74633	Burbank	327
74035	Hominy	4,113
74002	Barnsdall	1,951
74001	Avant	305
74003	Bartlesville	14,247
74637	Fairfax	1,747
74022	Copan	1,870
<b>Totals</b>		<b><u>24,560</u></b>



SOURCE: Population data from the U.S. Bureau of Census, 2013-2017 American Community Survey

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

PRIMARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	13-17 Population	Visit Rate <sup>[3]</sup>	Visits	13-17 Population	Visit Rate <sup>[3]</sup>	Visits	
Under 15	561	2.0	1,122	605	2.1	1,271	2,393
15-24	488	2.4	1,171	426	1.2	511	1,682
25-44	797	3.0	2,391	707	1.3	919	3,310
45-64	856	4.2	3,595	982	3.1	3,044	6,639
65-74	358	6.1	2,184	374	5.6	2,094	4,278
75+	<u>221</u>	7.4	<u>1,635</u>	<u>312</u>	8.0	<u>2,496</u>	<u>4,131</u>
<b>Total</b>	<b>3,281</b>		<b>12,099</b>	<b>3,406</b>		<b>10,335</b>	<b>22,434</b>

**Primary Medical Service Area - Local Primary Care Physician office visits per year: 11,509**

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

SECONDARY MEDICAL SERVICE AREA							
Age	Male			Female			Total Visits
	13-17 Population	Visit Rate <sup>[3]</sup>	Visits	13-17 Population	Visit Rate <sup>[3]</sup>	Visits	
Under 15	2,195	2.0	4,390	2,494	2.1	5,237	9,627
15-24	1,605	2.4	3,852	1,442	1.9	2,740	6,592
25-44	3,313	3.0	9,939	2,728	2.9	7,911	17,850
45-64	3,435	4.2	14,427	3,364	3.8	12,783	27,210
65-74	1,031	6.1	6,289	1,076	6.0	6,456	12,745
75+	881	7.4	6,519	996	6.7	6,673	13,193
<b>Total</b>	<b>12,460</b>		<b>45,417</b>	<b>12,100</b>		<b>41,801</b>	<b>87,217</b>

*Secondary Medical Service Area - Local Primary Care Physician office visits per year: 44,742*

Source: U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center of Health Statistics, "National Ambulatory Medical Care Survey: 2015 Summary.

**Table 3. Primary Care Physician Office Visits Given Usage by Local Residents in the Pawhuska, Oklahoma Medical Service Area**

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	10,293	10,869	11,444	12,019	12,595	13,170	13,746
	10%	12,530	13,106	13,681	14,257	14,832	15,407	15,983
	15%	14,767	15,343	15,918	16,494	17,069	17,645	18,220
	20%	17,005	17,580	18,155	18,731	19,306	19,882	20,457
	25%	19,242	19,817	20,393	20,968	21,543	22,119	22,694
	30%	21,479	22,054	22,630	23,205	23,781	24,356	24,931
	35%	23,716	24,291	24,867	25,442	26,018	26,593	27,169
	40%	25,953	26,528	27,104	27,679	28,255	28,830	29,406
	45%	28,190	28,766	29,341	29,916	30,492	31,067	31,643
	50%	30,427	31,003	31,578	32,154	32,729	33,304	33,880

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 14,832 to 17,069 total primary care physician office visits in the Pawhuska area for an estimated 3.5 to 4.1 total Primary Care Physicians.

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

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 Oklahoma Office of Rural Health  
 Phone: 405.945.8609



This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H54RH00058 and title: Medicare Rural Hospital Flexibility Grant Program for \$670,326, 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.

