

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



**Oklahoma Office of Rural Health
OSU Center for Rural Health**

**Oklahoma Cooperative Extension Service
Oklahoma State University**

April 2013



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**Community Health Needs Assessment documents available online at:
www.okruralhealthworks.org**

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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 Cooperative Extension and Oklahoma Office of Rural Health's Roles

The Oklahoma Office of Rural Health and Oklahoma Cooperative Extension Service have transitioned the previous Community Health Engagement Process program to meet the needs of CHNA. The Community Health Engagement Process proved to be very successful during its nearly 20 year history of working with rural hospitals and healthcare providers to increase awareness of the local health sector.

This program is available to all rural facilities in Oklahoma free of charge. The Oklahoma Office of Rural Health and Oklahoma Cooperative Extension Service work 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 Kasier of the Oklahoma Office of Rural Health and Dr. Brian Whitacre and Lara Brooks of Oklahoma Cooperative Extension Service.

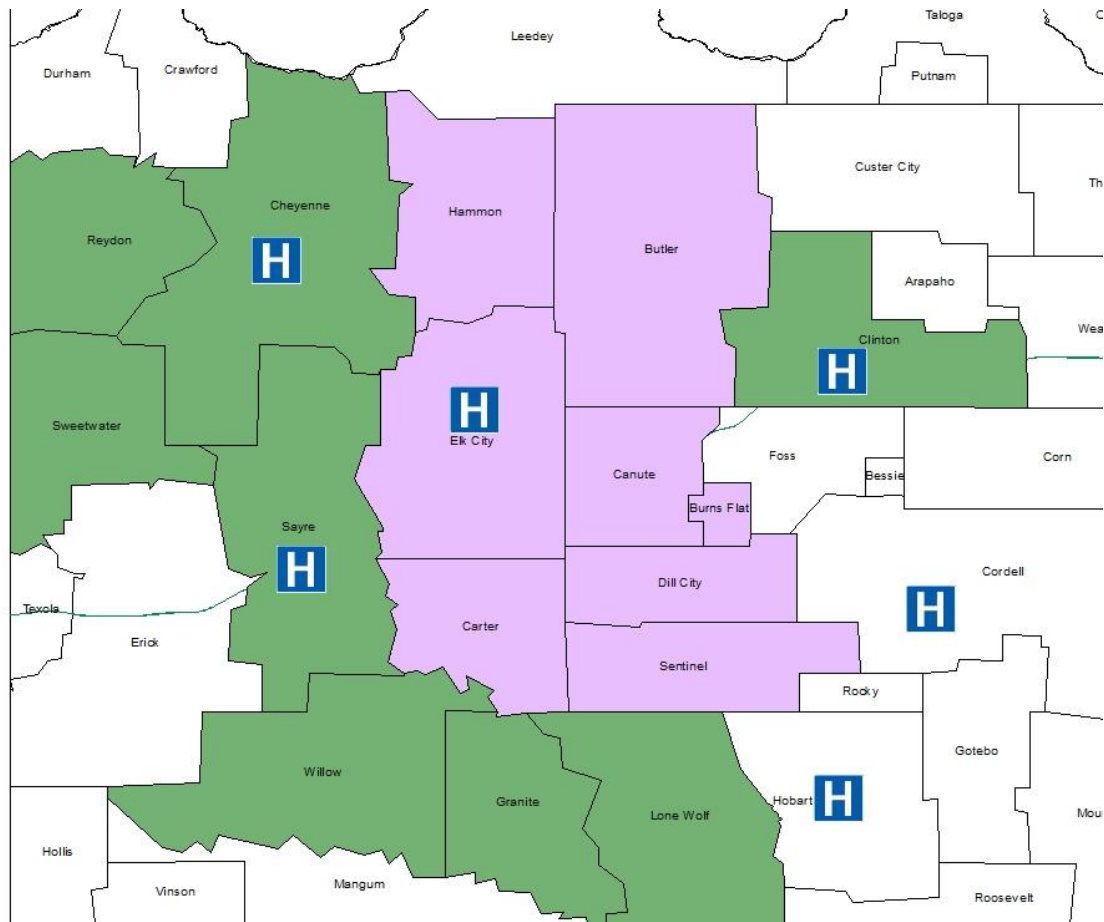
After the meetings conclude, the resource team assists the hospital in developing their implementation strategy. After implementation, the resource team will assist in evaluation of the strategies implemented and provide continued assistance with data and resources.

This document discusses the steps taken to conduct a CHNA for Great Plains Regional Medical Center in 2011-2013. 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.

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 Services Area



- Primary Medical Services Area
- Secondary Medical Services Area

City	County	Hospital	No. of Beds
Elk City	Beckham	Great Plains Regional Medical Center	62
Sayre	Beckham	Sayre Memorial Hospital	46
Clinton	Custer	INTEGRIS Clinton Regional Hospital	56
Hobart	Kiowa	Elkview General Hospital	38
Cheyenne	Roger Mills	Roger Mills Memorial Hospital	15
Cordell	Washita	Cordell Memorial Hospital	25

As delineated in Figure 1, the primary medical service area of Great Plains Regional Medical Center include the zip code areas of Elk City, Canute, Butler, Burns Flat Dill City, Sentinel, Hammon, and Carter. According to the 2010 Census, this area had a significant increase in population from 19,060 in 2000 to 21,573 in 2010. ESRI projects this area to increase again 3.4% through 2015.

The secondary medical services area is comprised of the zip code areas of Cheyenne, Clinton, Sayre, Lone Wolf, Willow, Sweetwater, Reydon, and Granite. Similar to the primary service area, this area has also experienced an increase from 2000 to 2010 of 1.9%. This area is also expected to continue this trend through 2015 with a projected increase of 1.5% from 2010.

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

		Populations			
Population by Zip Code	City	2000 Census	2010 Census	2010 ESRI	2015 ESRI
<i>Primary Medical Service Area</i>					
73644	Elk City	12,325	14,147	13,559	14,135
73626	Canute	961	1,136	1,197	1,208
73625	Butler	561	554	1,081	1,077
73624	Burns Flat	1,835	2,142	19	20
73641	Dill City	822	762	1,076	1,097
73664	Sentinel	1,086	1,184	988	985
73650	Hammon	938	1,020	701	721
73627	Carter	532	628	603	632
Total		19,060	21,573	19,224	19,875
% Change from 2010 ESRI					3.4%
<i>Secondary Medical Service Area</i>					
73628	Cheyenne	1,527	1,583	1,455	1,510
73601	Clinton	9,958	10,299	9,732	9,817
73662	Sayre	5,645	6,093	4,026	4,209
73655	Lone Wolf	1,054	864	1,087	1,068
73673	Willow	335	319	315	318
73666	Sweetwater	477	180	331	344
73660	Reydon	477	430	425	436
73547	Granite	2,205	2,319	2,157	2,119
Total		21,678	22,087	19,528	19,821
% Change from 2010 ESRI					1.5%

Table 2 displays the current existing medical services in the primary service area of the Great Plains Regional Medical Center medical services area. Great Plains Regional Medical Center is a 62 bed facility located in Beckham County, Oklahoma. Services offered by Great Plains Regional Medical Center include a 24-hour emergency department, acute in patient care, birthing services, radiology including CT, ultrasound, MRI, nuclear medicine, echocardiograms,

mammography, and cardiac catheterization. Specialty services such as the Cancer Treatment Center, orthopedics, Neurology, Urology, Ophthalmology, and Obstetric services are also available through Great Plains Regional Medical Center. A complete listing of hospital services can be found in Appendix A.

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

Count	Service
1	Hospital, Great Plains Regional Medical Center
17	Physician offices
7	Dental offices
5	Optometrist offices
4	Chiropractor offices
2	Nursing homes
1	Air Vac Ambulance
1	Physical therapy office
3	Family counseling services
2	Counseling services
1	Psychiatrist office
1	EMS Service, Elk City
1	Dialysis facility
1	Home Health office
1	Hospice Service
1	Behavioral Health Facility
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 shows the population by age group trend from the 2000 Census to the 2010. The age group of 45-64 has increased from 2000 in all geographies listed from 21.5% to 25.4% for the primary medical service area. By 2010, most age groups are comparable to their state-level counterparts.

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
2000 Census				
0-14	22.1%	17.9%	19.5%	21.2%
15-19	8.3%	7.3%	7.4%	7.8%
20-24	6.0%	6.8%	7.0%	7.2%
25-44	27.1%	29.6%	29.6%	28.3%
45-64	21.5%	21.6%	21.1%	22.3%
65+	<u>15.0%</u>	<u>16.9%</u>	<u>15.5%</u>	<u>13.2%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	19,060	21,304	19,799	3,450,654
2010 Census				
0-14	22.9%	19.3%	20.6%	20.7%
15-19	6.4%	6.3%	6.1%	7.1%
20-24	6.0%	7.0%	7.2%	7.2%
25-44	26.1%	27.8%	28.2%	25.8%
45-64	25.4%	25.2%	25.2%	25.7%
65+	<u>13.2%</u>	<u>14.4%</u>	<u>12.7%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	21,573	22,087	22,119	3,751,351

SOURCE: U.S. Census Bureau, Census data for 2000, and 2010 (www.census.gov [March 2013]).

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% of the total population. This cohort accounted for 9.8% of the primary medical service area population in 2010 and 16.6% of the secondary medical service area. Racial and ethnic break outs are displayed in table 4.

Table 4. 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
2000 Census				
White	88.9%	77.6%	84.4%	74.1%
Black	1.9%	7.6%	5.3%	7.5%
Native American ¹	3.9%	4.3%	2.5%	7.7%
Other ²	2.6%	6.9%	0.4%	1.5%
Two or more Races ³	2.2%	3.1%	2.1%	4.1%
Hispanic Origin ⁴	5.9%	9.5%	5.3%	5.2%
Total Population	19,060	21,304	19,799	3,450,654
2010 Census				
White	85.0%	76.4%	78.9%	68.7%
Black	2.0%	5.9%	3.8%	7.3%
Native American ¹	4.2%	4.6%	2.6%	8.2%
Other ²	4.7%	9.0%	0.9%	1.9%
Two or more Races ³	3.6%	3.3%	2.0%	5.1%
Hispanic Origin ⁴	9.8%	16.6%	11.8%	8.9%
Total Population	21,573	22,087	22,119	3,751,351

SOURCE: U.S. Census Bureau, Census data for 2000, and 2010 (www.census.gov [March 2013]).

¹ Native American includes American Indians and Alaska Natives.

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

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

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

Summary of Community Meetings

The Great Plains Regional Medical Center hosted five community meetings between July 27, 2011 and March 13, 2013. There was somewhat of a lag during the process due to personnel changes. The Oklahoma Office of Rural Health and Oklahoma Cooperative Extension Service facilitated these meetings. Summaries of the information presented at each meeting are included below.

Community members in attendance at these meetings included:

- Retired individuals
- Local business owners
- City government
- Local bank employees/officers
- Local volunteer organizations
- Great Plains Regional Medical Center representatives
- County Cooperative Extension office

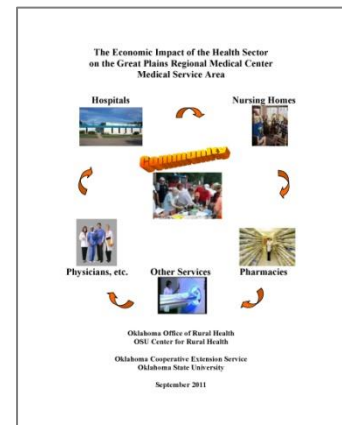
Average attendance at the community meetings was 20-25 community members. A complete listing of community present along with their professional affiliations can be found in Appendix B.

Economic Impact and Community Health Needs Assessment Overview, November 9, 2011

A community meeting was held to discuss the economic impact of the health sector and explain the process and need for the Community Health Needs Assessment.

Table 5 below summarizes the overall economic impact of the health sector on the Beckham County, Oklahoma economy. A representative from the Great Plains Regional Medical Center contacted health service entities in each of the sectors listed for the medical service area. Along with identifying each establishment, the hospital representative also gathered information on the number of FTE employees per establishment. 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 employs 887 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 1,243 employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$43.6 million. When the appropriate income multiplier is applied, the total income impact is nearly \$56 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just over 51% of one's income in Beckham County will be spent on goods and services locally. Therefore, if we just examine the impact



AE-11045, The Economic Impact of the Health Sector on the Great Plains Regional Medical Center Medical Service Area (31 pages)

made on retail from those employed in the health sector, this would account for nearly \$29 million spent locally, generating \$288,204 on a 1% tax.

Table 5. Great Plains Regional Medical Center Medical Service Area Health Sector Impact on Employment and Income, and Retail Sales and Sales Tax

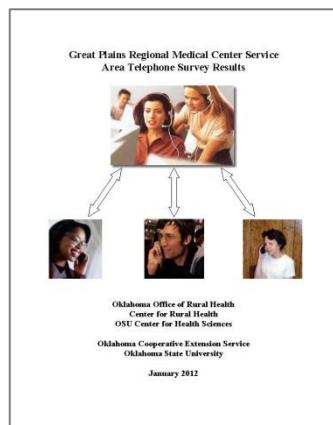
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Health Sectors	Employment			Income			Retail	1 Cent
	Employed	Multiplier	Impact	Income	Multiplier	Impact	Sales	Sales Tax
Hospitals	343	1.47	504	\$20,541,000	1.29	\$26,529,482	\$13,662,683	\$136,627
Physicians, Dentists, & Other Medical Professionals	182	1.40	255	\$10,413,304	1.29	\$13,389,260	\$6,895,469	\$68,955
Nursing and Protective Care	150	1.23	184	\$4,387,896	1.26	\$5,512,632	\$2,839,006	\$28,390
Other Medical & Health Services & Home Health	162	1.49	242	\$6,462,216	1.28	\$8,277,317	\$4,262,818	\$42,628
Pharmacies	<u>50</u>	<u>1.18</u>	<u>59</u>	<u>\$1,889,328</u>	<u>1.19</u>	<u>\$2,253,303</u>	<u>\$1,160,451</u>	<u>\$11,605</u>
Total	887		1,243	\$43,693,744		\$55,961,994	\$28,820,427	\$288,204

SOURCE: 2008 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

* Based on the ratio between Beckham County retail sales and income (51.50%) – from 2010 County Sales Tax Data and 2009 Personal Income Estimates from the Bureau of Economic Analysis.

Telephone Survey Development and Results, July 2011-January, 2012

A random telephone survey was conducted covering various questions of local healthcare perceptions and usage. Consumer Logic of Tulsa, Oklahoma, a third party telephone survey company, was contracted through Oklahoma State University to complete the telephone survey.



AE-12001, Great Plains Regional Medical Center Medical Service Area Survey Results (46 pages)

The resource team provided the survey form and the zip codes that comprise the Great Plains Regional Medical Center medical service area to Consumer Logic.

A community meeting was held on July 27, 2011 to develop the survey form. Community members present decided which questions to include and were most relevant to their community (Appendix C). They community members present also decided upon the best week for the telephone survey to occur.

The telephone survey was completed during the dates of

August 22-28, 2011. A total of 201 responses were gathered, solely via telephone. The survey results were presented at a community meeting held on January 11, 2012, at the hospital.

As stated previously, the third-party telephone survey company was provided medical service area zip codes to capture relevant responses when asked about local hospital usage. Table 6 below shows the survey respondent representation by zip code. Elk City accounted for the largest share of survey respondents with a percentage of 61.2.

Table 6. Survey Respondent Zip Codes

Response Category	No.	Percent
73644 & 73648, Elk City	123	61.2%
73624, Burns Flat	18	9.0%
73628, Cheyenne	12	6.0%
73626, Canute	11	5.5%
73664, Sentinel	10	5.0%
73641, Dill City	8	4.0%
73650, Hammon	7	3.5%
73654, Leedey	7	3.5%
73627, Carter	<u>5</u>	<u>2.5%</u>
Total	<u>201</u>	<u>100.0%</u>

Primary Care Physician Visits

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

- 98.0% of survey respondents use a family doctor, physician assistant, or a nurse practitioner for most of his or her routine health care
 - o Other responses include: Emergency room (25.0%), Indian Health Services (25.0%), Specialist (25.0%), and VA clinic/Services (25.0%)
- 78.1% of survey respondents have been to a family doctor in Elk City in the past 24 months
- Of those, 88.5% responded they were satisfied with the services received, compared to other surveys' average of 91.4%
 - o Good treatment/Care/Service (41.0%), Resolved medical issues (24.5%), and satisfied with doctors/Nurses/Staff (20.1%) were the most common responses of satisfaction
- 94.3% of survey respondents indicated they were able to get an appointment with their family doctor when needed

Specialist Visits

Summary highlights include:

- 56.2% of all respondents report some specialist visit in past 24 months
- Most common specialty visited displayed in Table 7
- 29.7% of specialist visits occurred in Elk City

Table 7. Type of Specialist Visits

Type of Specialist	No.	Percent
<i>Top 5 Responses</i>		
Cardiologist (10 visits in Elk City)	26	16.8%
Orthopedist (4 visits in Elk City)	17	11.0%
Gastroenterologist (6 visits in Elk City)	16	10.3%
OB/GYN (2 visits in Elk City)	11	7.1%
Otolaryngologist (3 visits in Elk City)	9	5.8%
All others (21 visits in Elk City)	<u>76</u>	<u>49.0%</u>
Total	<u>171</u>	<u>100.0%</u>

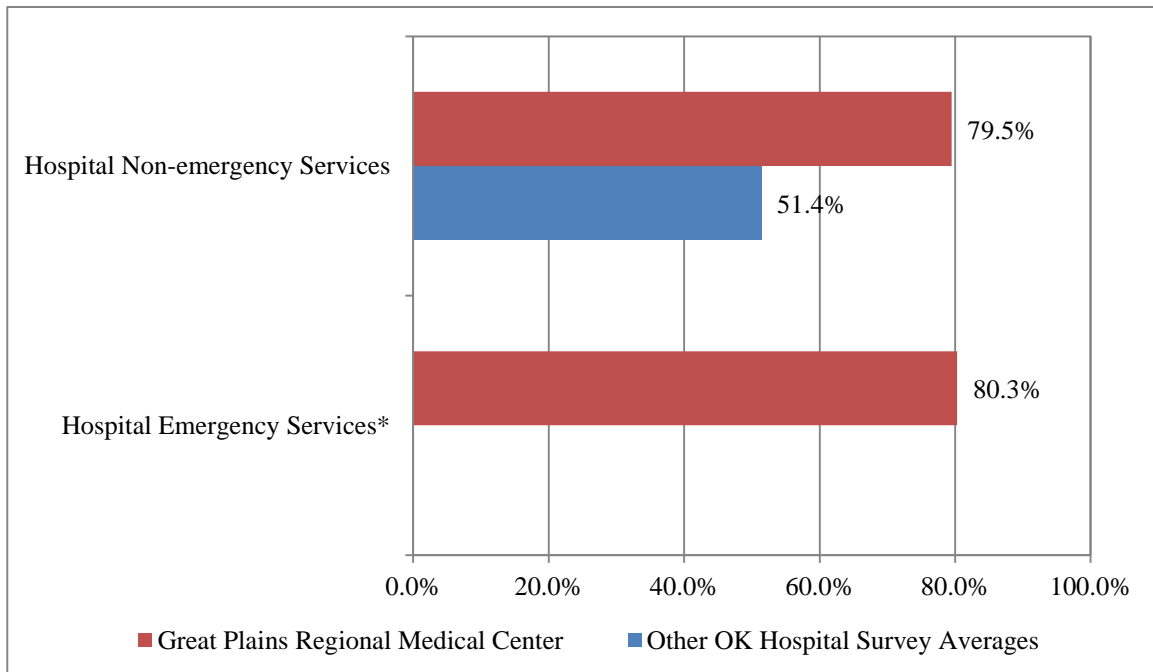
Some respondents answered more than once.

Hospital Usage and Satisfaction

Survey highlights include:

- 79.5% of survey respondents used non-emergency services at Great Plains Regional Medical Center, significantly higher to other survey averages (51.4%)
 - o Roger Mills Memorial Hospital (4.1%), Weatherford Regional Hospital (2.7%), and Mercy Health System (2.7%) followed
- 80.3% of survey respondents used emergency (ER) services at Great Plains Regional Medical Center
 - o Roger Mills Memorial Hospital (3.9%) and Clinton Regional Hospital (2.6%) followed

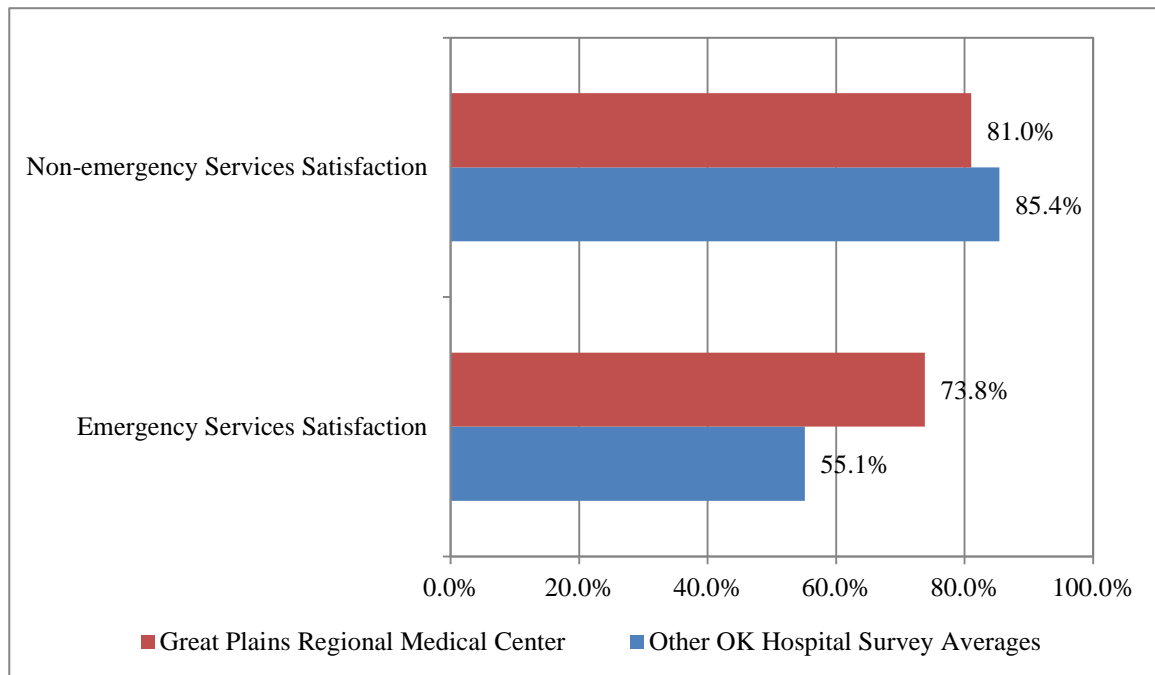
Figure 2. Summary of Hospital Usage Rates



*Hospital emergency services comparison rates from other OK hospital surveys are not available

- Most common services used:
 - Non-ER: Diagnostic imaging (36.4%) and Lab work (33.9%)
 - Similar to those choosing other hospitals
 - ER: Diagnostic imaging (30.8%) and lab work (25.8%)
 - Also similar to those choosing other hospitals
- Satisfaction rates:
 - 81.0% satisfaction rate of those who used non-emergency services at Great Plains Regional Medical Center
 - 73.8% satisfaction rate of those who used emergency services at Great Plains Regional Medical Center

Figure 3. Summary of Hospital Satisfaction Rates



Additional Services and Concerns

Survey respondents were asked to list what additional services they would like to see offered at Great Regional Medical Center. The most common response was specialists. More specialists in general, cardiologists, orthopedists, surgeons, and ENT were the most common listed specialists. More doctors/better doctors in general followed. A complete list of services including number of responses is included in Table 8.

Table 8. Additional Services

Response Category	No.	Percent
Specialists including: More specialists in general (5); Cardiologist (4); Orthopedist (4); Surgeons (3); ENT (2); Pediatrician (1); Urologist (1); Neurologist (1); Specialist for men (1); Pain Management (1); Audiologist (1); Endocrinologist (1); Cardiac surgeon (1); OB/GYN (1)	27	12.6%
More doctors in general/Better doctors	4	1.9%
ER doctor/Better ER doctor	4	1.9%
More family physicians/PCPs	4	1.9%
Mental health/Substance abuse	3	1.4%
Physical therapy/Improved physical therapy	3	1.4%
Free health services (Bone density)	2	0.9%
Improved quality	2	0.9%
MRI/CT Scan	2	0.9%
Less physician turn-over	2	0.9%
Birthing services	1	0.5%
After-hours care/Urgent care	1	0.5%
More home care	1	0.5%
Nutrition educators	1	0.5%
Better health education/Labor classes	1	0.5%
24-hour paperwork assistance	1	0.5%
Better care overnight at hospital	1	0.5%
Outpatient surgery	1	0.5%
Adult day care	1	0.5%
Fertility	1	0.5%
Improved ER overall	1	0.5%
Doctors at a better price	1	0.5%
Group therapy	1	0.5%
Young doctors to replace retirees	1	0.5%
Don't know/No response	<u>148</u>	<u>68.8%</u>
Total	<u>215</u>	<u>100.0%</u>

Some respondents answered more than once.

Survey respondents were also asked if their community offered adequate service for various health and health-related services. Services that received the lowest percentages of approval were, mental health services (31% replied adequate), nutrition education (33% replied adequate), and health education (34% replied adequate). All responses can be found in table 9.

Table 9. Does Your Community Offer Adequate Service for the Following

	YES	%	NO	%	TOTAL
EMS/Ambulance	162	81%	39	19%	100%
Home Health	122	61%	79	39%	100%
Assisted Living	91	45%	110	55%	100%
Nursing Home Care	80	40%	121	60%	100%
Transportation for Healthcare	88	44%	113	56%	100%
Physical Fitness	91	45%	110	55%	100%
Dental Services	135	67%	66	33%	100%
Sufficient Number of Primary Care Physicians	108	54%	93	46%	100%
Nutrition Education	67	33%	134	67%	100%
Mental Health Services	63	31%	138	69%	100%
Health Education	69	34%	132	66%	100%
None are adequate	15	7%	186	93%	100%

Finally, survey respondents were asked what concerns them most about healthcare in their community. While the most common response was no concerns/complaints (38.6%), high cost of care/Prescriptions/Insurance (19.3%), quality of care (7.4%), and availability/access to services (6.9%) were all commonly mentioned. Table 10 displays all responses and the frequencies.

Table 10. Concerns about Healthcare in Community

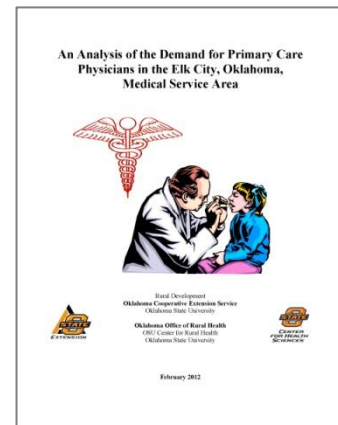
Response Category	No.	Percent
No concerns/Don't know	78	38.6%
High cost of care/Prescriptions/Insurance	39	19.3%
Quality of care	15	7.4%
Availability/Access to services	14	6.9%
Emergency room services/quality/wait time	12	5.9%
More doctors needed	8	4.0%
More specialists needed	6	3.0%
Those who need services aren't receiving them	4	2.0%
Better care for the elderly	4	2.0%
Physician turn over	3	1.5%
Availability & speed of EMS services	3	1.5%
Uninsured populations	3	1.5%
Not enough preventive care	3	1.5%
Slow service	2	1.0%
Government influence in healthcare	2	1.0%
Long wait for appts	1	0.5%
Hospital doesn't accept all insurance	1	0.5%
Better mental health services	1	0.5%
Too much paperwork	1	0.5%
Need for more dental services	1	0.5%
Misperception that healthcare system is good	<u>1</u>	<u>0.5%</u>
Total	<u>202</u>	<u>100.0%</u>

Some respondents answered more than once.

Primary Care Physician Demand Analysis, March 12, 2012

A demand analysis of primary care physicians was completed for the zip codes that comprise the Great Plains Regional Medical Center primary and secondary medical services areas. This analysis examined average primary care physician 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 11 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 Great Plains Regional Medical Center medical services area, a total of 41,076 annual visits would occur. This would suggest that the Great Plains Regional Medical Center medical services area would need 9.8 FTE primary care physicians to meet the needs of their existing population. Table 11 displays the estimated number of visits by share of medical services area.



AE-11038, An Analysis of the Demand for Primary Care Physicians in the Elk City, Oklahoma, Medical Service Area (11 pages)

Table 11. Primary Care Physician Office Visits Given Usage by Local Residents in the Elk City, 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%	30,894	32,965	35,036	37,107	39,178	41,250	43,321
	10%	32,792	34,863	36,934	39,005	41,076	43,147	45,219
	15%	34,690	36,761	38,832	40,903	42,974	45,045	47,116
	20%	36,587	38,659	40,730	42,801	44,872	46,943	49,014
	25%	38,485	40,556	42,628	44,699	46,770	48,841	50,912
	30%	40,383	42,454	44,525	46,597	48,668	50,739	52,810
	35%	42,281	44,352	46,423	48,494	50,566	52,637	54,708
	40%	44,179	46,250	48,321	50,392	52,463	54,535	56,606
	45%	46,077	48,148	50,219	52,290	54,361	56,432	58,504
	50%	47,975	50,046	52,117	54,188	56,259	58,330	60,401

If 90% primary medical service area and 10to 15% secondary medical service area, then the usage would be:

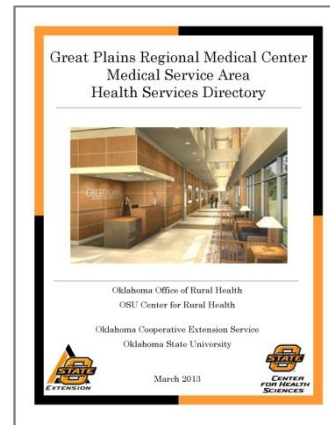
41,076 to 42,974 total primary care physician office visits

for an estimated **9.8 to 10.3** Total Primary Care Physicians

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

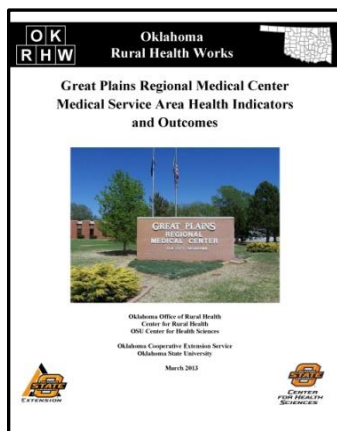
Health Services Directory, March 12, 2012- March 13, 2013

To help create awareness of the health sector, a local health services directory was completed. A draft directory was presented at a community meeting held March 12, 2013. At this meeting, community members added and corrected existing directory information. This goal of the health services directory was to accurately display all existing health and social services within the community. The directories were distributed at a community meeting on March 13, 2013, including fifty copies and an electronic PDF version of the directory to be shared electronically and/or placed on a community website.



AE-13020, Great Plains Regional Medical Center Medical Service Area Health Services Directory (22 pages)

Health Data and Community Health Needs Recommendations



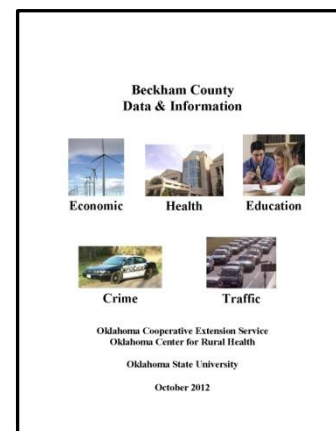
AE-13023, Great Plains Regional Medical Center Medical Service Area Health Indicators and Outcomes (22 pages)

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 are comprised of health behaviors (rank 71), clinical care (rank 37), social and economic factors (rank 34), and physical environment (rank 8). Beckham County's overall health factors rank is 41. In particular, the number of preventable hospital stays is notably high, probably due to overuse of the hospital as a main source of care. All health factors variables are presented in Table 11 along with Beckham County specific data, the national benchmark, and the state average. The bold italicized categories are the areas identified by the County Health

A community meeting was held March 13, 2013, to examine various sources of local health data in addition to the community survey results. Data were presented from the Beckham County Data and Information Report (AE-12046). Health Data were also presented from the Great Plains Regional Medical Center Medical Service Area Health Indicators and Outcomes Report (AE-13023).

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



AE-12046, Economic Data, Health/Behavioral Data, Education Data, Traffic Accident Data, and Crime Data for Beckham County and the State of Oklahoma (65 pages)

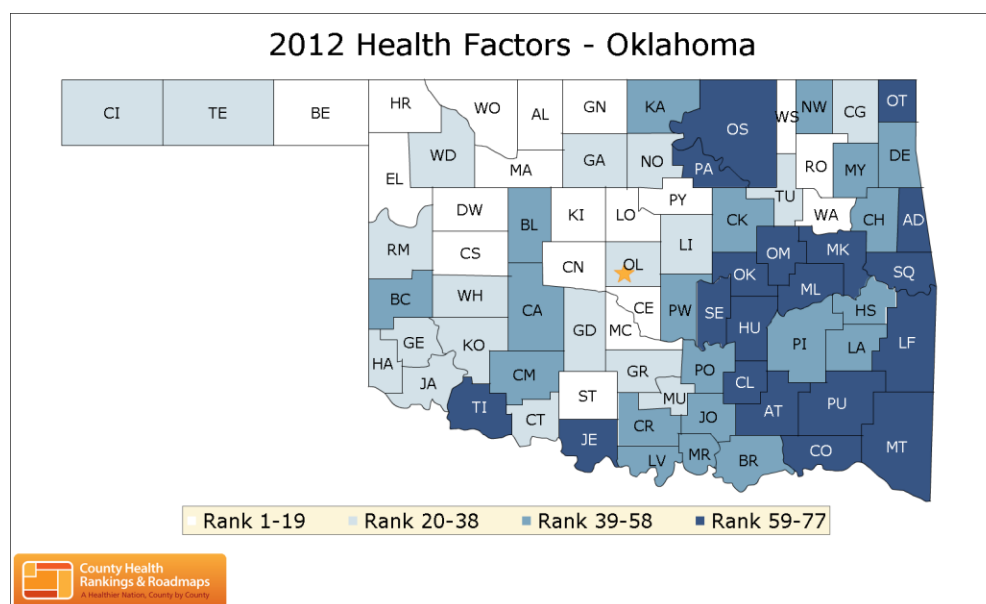
Rankings and Roadmaps as areas to explore. A more detailed report on Beckham County's health factors and outcomes can be found in AE-13023.

Table 12. Health Factors (Overall Rank 41)

Category (Rank)	Pushmataha County	Error Margin	National Benchmark	Oklahoma
Health Behaviors (71)				
<i>Adult Smoking</i>	29%	23-36%	14%	25%
<i>Adult Obesity</i>	35%	28-41%	25%	32%
Physical Inactivity	34%	28-41%	21%	31%
Excessive Drinking	11%	6-18%	8%	14%
<i>Motor Vehicle Crash Death Rate</i>	44	33-55	12	22
Sexually Transmitted Infections	487		84	413
Teen Birth Rate	86	77-94	22	58
Clinical Care (37)				
Uninsured	23%	21-25%	11%	21%
Primary Care Physicians	1,194:1		631:1	1,618:1
<i>Preventable Hospital Stays</i>	131	117-145	49	82
Diabetic Screening	70%	61-80%	89%	77%
Mammography Screening	56%	45-65%	74%	60%
Social & Economic Factors (34)				
<i>High School Graduation</i>	66%			78%
Some College	46%	38-53%	68%	56%
Unemployment	5.3%		5.4%	7.1%
<i>Children in Poverty</i>	25%	18-32%	13%	24%
Inadequate Social Support	15%	11-20%	14%	20%
Children in Single-Parent Household	36%	27-45%	20%	33%
Violent Crime Rate	217		73	510
Physical Environment (8)				
Air Pollution-Particle Matter Days	0		0	0
Air Pollution- Ozone Days	0		0	13
Access to Recreational Facilities	0		16	7
Limited Access to Healthy Foods	1%		0%	11%
Fast Food Restaurants	40%		25%	50%

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 neighboring counties all rank higher in terms of health factors.



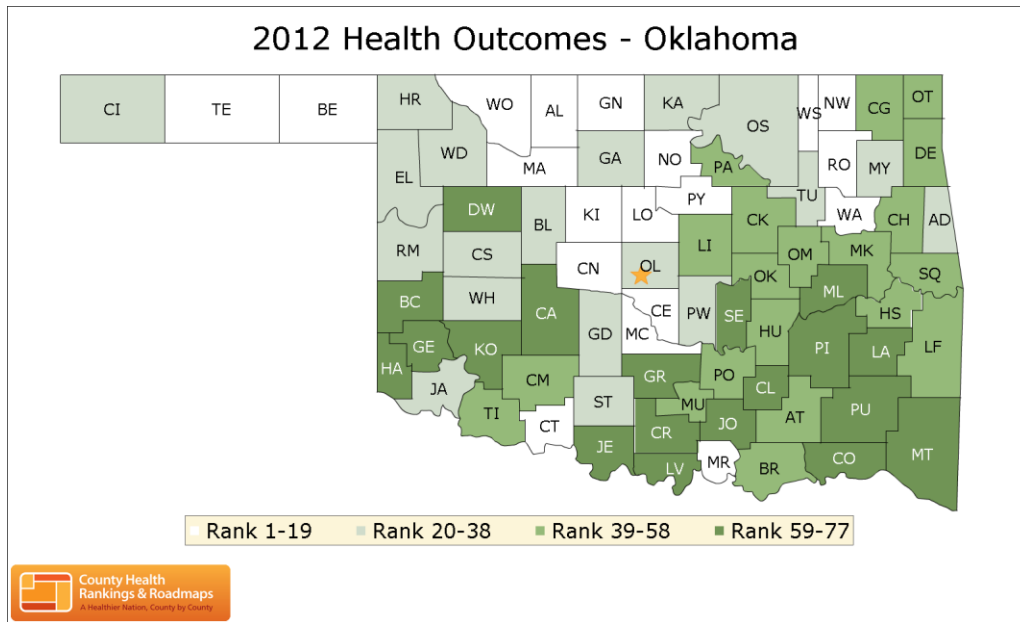
In terms of health outcomes, Beckham County has an overall rank of 70 out of 77. Health outcomes are comprised of two areas: morbidity (quality of life) and mortality (length of life). The variables for each of these sections are presented in Table 12.

Table 13. Health Outcomes (Overall Rank 70)

Category (Rank)	Pushmataha County	Error Margin	National Benchmark	Oklahoma
Mortality (69)				
Premature Death	12,845	11,105-14,586	5,466	9,448
Morbidity (62)				
Poor or Fair Health	21%	16-27%	10%	19%
Poor Physical Health Days	5.2	3.8-6.6	2.6	4.1
Poor Mental Health Days	4.0	2.7-5.3	2.3	4.0
Low Birth Weight	9.0%	7.8-10.1%	6.0%	8.1%

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 lags Roger Mills and Washita Counties, but is comparable or leads Harmon and Greer Counties.



Community Health Needs Recommendations

Following the presentation of the health data, county data and information report, and the community survey results, community members were then asked to identify their top concerns from evaluating the data, survey results, and their experience within the community. The top health concerns identified were as follows:

Overweight population
 Health Education
 Extended EMS
 Mental Health
 Number of Temporary Assistance for Needy Families (TANF) cases
 More Specialists

Community Health Needs Implementation Strategy

During the March 13, 2013, meeting, hospital representatives and community members discussed how these concerns can be addressed. The following lists the concerns along with steps the hospital and community plan to take to remedy the situation.

- Overweight population- It was noted in the health data that Beckham County's obesity rate exceeds that of Oklahoma and the national benchmark. This was a concern of many individuals in the meeting. Along with this concern, the availability of fresh produce was also mentioned.

- Community members present identified the need for health education. It was also noted in the meeting that if a way can be found to motivate adults this will spill over to motivating children.
- Health Education- This was mentioned while discussing the county obesity rate.
 - On site dietician provides education and information for inpatients. Home health patients also receive nutrition education through the home health services. At this time, there are no plans to add community-wide health education courses.
- Extended EMS- A community member noted that within Elk City and Beckham County, EMS services meet the needs; however, outside of the county (in the extending medical service area) there is a need for additional coverage. It was also noted that there are not enough vehicles or personnel to cover transports.
 - The local EMS service is operated through the City of Elk City. It is strictly a function of the city. However, there are plans to work with the city and discuss options available and further describe the needs of the hospital in terms of availability and transports. It was also noted there is an urgent care facility opening in the community.
- Mental Health- After examining the availability and access of mental health services, community members present noted the lack or strict definition of services available.
 - Currently, the hospital does have a full time psychiatrist. However, these services are very specific and accessible via inpatient services. The hospital is currently exploring available options.
- TANF cases- Community members present noted the high number of local TANF cases and the large number of students at school that receive backpacks of food/supplies.
 - This health concern is beyond the scope of services the hospital provides.
- More Specialists- It was noted in the survey as a top additional service to be offered at Great Plains Regional Medical Center with more specialists in general being the most requested item. In terms of specific specialties, cardiology was the most requested specialist.
 - Since the completion of the survey, an OB/GYN has been added in addition to a primary care physician and expanded cardiac services. The next steps will be more marketing of these newly added services.

The consensus seemed to be that Great Plains Regional Medical Center was actually doing a variety of things to keep the community informed, engaged and health conscious. Hospital administration plans to focus a lot of effort on the education they provide to the community; perhaps the education needs to be more focused and directed to different methods of reaching the population.

Community Health Needs Assessment Marketing Plan

Copies will also be provided upon request at Great Plains Regional Medical Center. Copies of this report and all reports through the Community Health Needs Assessment process are available on the OK Rural Health Works website (www.okruralhealthworks.org).

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

Ophthalmology

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

Cataract surgery

Gastroenterology

Intensive Care

Laboratory

Allergy testing and immunotherapy

Urology

Neurology

Sleep study

Geriatric/Psychiatric Care

Appendix B- Meeting Attendees

CHNA

Survey Draft Meeting

27-Jul-11

Lara Brooks	Oklahoma Cooperative Extension Service
Corie Kaiser	Oklahoma Office of Rural Health
Richard Hogan	Admin
Monica Scott	Controller
Laura Kurzendoerfer	CNO/VP Nursing
Janet Miller	Exec Assistant
Greg Hartman	OSU Ext
Gene Smith	Auto Dealer
Charmaine Boulette	Dir. Medical Staff Affairs
Don Ikner	CEO

CHNA

Economic Impact

9-Nov-11

Ilda Hershey	Oklahoma Cooperative Extension Service
Corie Kaiser	Oklahoma Office of Rural Health
Richard Hogan	Admin
Monica Scott	Controller
Laura Kurzendoerfer	CNO/VP Nursing
Janet Miller	Exec Assistant
Charmaine Boulette	Dir. Medical Staff Affairs
Don Ikner	CEO
Stan Ralstin	Oklahoma Cooperative Extension Service
Yasan Duerr	Manager, United States Postal Service
Brian Lillibridge	Great Plains Regional Medical Center
Esmin Crow	Great Plains Regional Medical Center
Tom Johnson	Commissioner, City of Elk City
David Atkinson	President, First National Bank of Trust
Bill Barrett	VP, Human Resources, Great Plains Regional Medical Center
Tony Mikles	President, Great Plains National Bank
Allen Robinson	Commissioner, City of Elk City
Jim Coffey	Retired
Kevin Martin	Great Plains Regional Medical Center
Christina Ramirez Chavez	

CHNA
Survey Results

11-Jan-12

Ilda Hershey	Oklahoma Cooperative Extension Service
Corie Kaiser	Oklahoma Office of Rural Health
Richard Hogan	Admin
Monica Scott	Controller
Laura Kurzendoerfer	CNO/VP Nursing
Janet Miller	Exec Assistant
Charmaine Boulette	Dir. Medical Staff Affairs
Don Ikner	CEO
Stan Ralstin	Oklahoma Cooperative Extension Service
Yasan Duerr	Manager, United States Postal Service
Brian Lillibridge	Great Plains Regional Medical Center
Tom Johnson	Commissioner, City of Elk City
Tony Mikles	President, Great Plains National Bank
Allen Robinson	Commissioner, City of Elk City
Estelline Coffey	Service Volunteer
Kevin Martin	Great Plains Regional Medical Center
Valerie Jay	Service Volunteer
Danny Sprowls, CPA	Board Member
Tim Ball	Executive Director, Western Oklahoma Family Care Center
Nancy McKinnon	Western Oklahoma Family Care Center
Gary Parham	Interim HR Director, Great Plains Regional Medical Center
William Baker	Citizen
Mary Thompson	Great Plains Regional Medical Center
Cortnie Kemp	Great Plains Regional Medical Center
Jerry Willingham	Service Volunteer

CHNA
Primary Care Physician Analysis and Health Services
Directory

12-Mar-12

Ilda Hershey	Oklahoma Cooperative Extension Service
Corie Kaiser	Oklahoma Office of Rural Health
Richard Hogan	Admin
Monica Scott	Controller
Laura Kurzendoerfer	CNO/VP Nursing
Janet Miller	Exec Assistant
Charmaine Boulette	Dir. Medical Staff Affairs
Don Ikner	CEO
Stan Ralstin	Oklahoma Cooperative Extension Service
Tom Johnson	Commissioner, City of Elk City
Tony Mikles	President, Great Plains National Bank
Allen Robinson	Commissioner, City of Elk City
Jim Coffey	Retired
Kevin Martin	Great Plains Regional Medical Center
Danny Sprowls, CPA	Board Member
	Interim HR Director, Great Plains Regional Medical Center
Gary Parham	Service Volunteer
Jerry Willingham	President, First National Bank and Trust
David Atkinson	Great Plains Regional Medical Center
Leah Lemmon	Great Plains Regional Medical Center
Sandra McClure	Great Plains Regional Medical Center
Terry Music	Great Plains Regional Medical Center

CHNA
Health Data Discussion and Health Priority Identification

13-Mar-13

Lara Brooks	Oklahoma Cooperative Extension Service
Corie Kaiser	Oklahoma Office of Rural Health
Monica Scott	Controller
Laura Kurzendoerfer	CNO/VP Nursing
Janet Miller	Exec Assistant
Charmaine Boulette	Dir. Medical Staff Affairs
Don Ikner	CEO
Tom Johnson	Commissioner, City of Elk City
Allen Robinson	Commissioner, City of Elk City
Jerry Willingham	Service Volunteer
David Atkinson	President, First National Bank of Trust
Steve Stewart	CFO, Great Plains Regional Medical Center

Appendix C- Telephone Survey Form

GREAT PLAINS REGIONAL MEDICAL CENTER SURVEY DRAFT

Page 1 of 8

Survey Date: August 22-28, 2011

NOTE TO INTERVIEWER: All questions are optional and respondent may, of course, choose not to answer. All answers provided on this form are for facilitation purposes only. If an answer does not "fit" into one of the provided answers, please take down the exact answer given. Thank you.

Introduction and screener:

Hello. My name is _____ with *Consumer Logic*. I am calling on behalf of the Great Plains Regional Medical Center committee. We are conducting a brief survey on the topic of health care in Elk City and the surrounding areas. The community is reviewing the health care needs in Elk City and the surrounding areas. It is very important that we include the opinion of you or someone in your household in this brief but important survey. To ensure confidentiality, all responses are

Qualifier 1: May I ask, are you over the age of 18?

- ☐ Yes
- ☐ No (*Ask to speak to someone over the age of 18. TERMINATE if there is no one over the age of 18 in the household.*)

1. What is your zip code?

- | | |
|--|---|
| <input type="checkbox"/> 73624, Burns Flat | <input type="checkbox"/> 73648, Elk City |
| <input type="checkbox"/> 73626, Canute | <input type="checkbox"/> 73650, Hammon |
| <input type="checkbox"/> 73627, Carter | <input type="checkbox"/> 73654, Leedey |
| <input type="checkbox"/> 73628, Cheyenne | <input type="checkbox"/> 73664, Sentinel |
| <input type="checkbox"/> 73641, Dill City | <input type="checkbox"/> Other _____ (<i>TERMINATE</i>) |
| <input type="checkbox"/> 73644, Elk City | |

2a. Do you use a family doctor, physician assistant, or nurse practitioner for most of your routine health care?

- ☐ Yes (*Skip to Q.3a*)
- ☐ No
- ☐ (*Do not read*) Don't know/Refused (*Skip to Q.3a*)

2b. If no, then what kind of medical provider do you use for routine care? (*Record exact response. Probe for clarification. Do not read list.*)

- | | |
|--|---|
| <input type="checkbox"/> Community Health Center | <input type="checkbox"/> Rural Health Clinic |
| <input type="checkbox"/> Health Department | <input type="checkbox"/> Indian Health Services |
| <input type="checkbox"/> Emergency Room/Hospital | <input type="checkbox"/> Specialist |
| | <input type="checkbox"/> Other (<i>Specify</i>) _____ |

3a. Which city do you go to for most of your family's routine health care needs? *(Do not read list)*

☐ Burns Flat

☐ Cheyenne

☐ Clinton

☐ Cordell

☐ Elk City *(Skip to Q.4a)*

☐ Leedey

☐ Sayre

☐ Other *(Specify)* _____

☐ *(Do not read)* Don't know/Refused

(Skip to Q.4a)

3b. Why do you or someone in your household use a medical provider for routine health care needs outside of Elk City? *(Record exact response. Probe for clarification. Do not read list.)*

☐ Better quality of providers

☐ Closer/Convenient location

☐ Have used for years/Personal relationship

☐ Nicer facilities

☐ Specialist

☐ Speed of getting an appointment

☐ Approved provider for insurance/Health benefits program

☐ Other *(Specify)* _____

☐ *(Do not read)* Don't know/Refused

4a. Have you or someone else in your household been to a family doctor in Elk City in the past 24 months?

☐ Yes

☐ No *(Skip to Q.5a)*

☐ *(Do not read)* Don't know/Refused *(Skip to Q.5a)*

4b. How satisfied were you or someone in your household with the quality of care received in Elk City? Would you say that you were... *(Read List)* ?

☐ Satisfied

☐ Dissatisfied

☐ *(Do not read)* Don't know/Refused *(Skip to Q.4d)*

4c. Why do you say that? *(Record exact response. Probe for clarification.)*

4d. Are you able to get an appointment with your family doctor when needed?

☐ Yes

☐ No

☐ *(Do not read)* Don't know/Refused

5a. Have you or someone in your household been to a specialist in the past 24 months?

☐ Yes

☐ No *(Skip to Q.6)*

☐ *(Do not read)* Don't know/Refused *(Skip to Q.6)*

- 5b. What type of specialist have you or someone in your household been to and in which city are they located?

Type of Specialist	City

6. How many people live in your household? **(Record response below)**
 _____ *(If respondent is the only person who lives in household, ask for "you" only in Q. 7)*

- 7a/b. What type of health insurance covers you and your family? *(Read list if needed. Ask for "you" and "family" (if applicable). Can provide more than one response.)*

	<u>You</u>	<u>Family</u>
Champus/TriCare Program	<input type="checkbox"/>	<input type="checkbox"/>
Insurance through Employer/Previous employer	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid	<input type="checkbox"/>	<input type="checkbox"/>
Medicare	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Part D (Prescriptions)	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Advantage (Private pay)	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Supplement (Private pay)	<input type="checkbox"/>	<input type="checkbox"/>
Self-Paid Insurance Plan	<input type="checkbox"/>	<input type="checkbox"/>
VA benefits	<input type="checkbox"/>	<input type="checkbox"/>
Native American/Tribal Benefits	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>
* Do Not Have Health Insurance	<input type="checkbox"/>	<input type="checkbox"/>

- 7c. *(If respondent indicated they do not have health insurance for themselves, ask question 7c. If not, skip to question 8.)* What hinders you from having health insurance for yourself?

- | | |
|---|--|
| <input type="checkbox"/> Cost/Too expensive | <input type="checkbox"/> Ineligible/Pre-existing medical condition |
| <input type="checkbox"/> Personal choice | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Insurance not provided at work | <input type="checkbox"/> Don't know/No response |

8. Have you or someone in your household used the non-emergency services of a hospital in the past 24 months?
- ☐ Yes
- ☐ No *(Skip to Q.15)*
- ☐ *(Do not read)* Don't know/Refused *(Skip to Q.15)*

9. At which hospital(s) were services received? *(Do not read list unless prompt is needed. Record exact responses. Allow for responses for more than one hospital.)*

- ☐ Great Plains Regional Medical Center, Elk City
- ☐ Sayre Memorial Hospital, Sayre
- ☐ Clinton Regional Hospital, Clinton
- ☐ Weatherford Regional Hospital, Weatherford
- ☐ Other *(Specify)* _____
- ☐ *(Do not read)* Don't know/Refused

10. *(If any hospital other than Great Plains Regional Medical Center was indicated in Q.9, ask Q.10, Q.11a, and Q.11b; otherwise, skip to Q.12)* You mentioned that you or someone in your household received care at a hospital other than Great Plains Regional Medical Center. Why did you or your family member choose this/these hospital(s)? *(Record exact response. Probe for clarification.)*

- | | |
|---|--|
| <input type="checkbox"/> Insurance reasons | <input type="checkbox"/> Service not available |
| <input type="checkbox"/> Closer/convenient location | <input type="checkbox"/> Specialty doctor |
| <input type="checkbox"/> Better Service | <input type="checkbox"/> Where my doctor works |
| <input type="checkbox"/> Referral/Recommended/Transferred | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

- 11a. What hospital services were used there? *(Do not read list unless prompt is needed. Record exact response.)*

- | | |
|---|--|
| <input type="checkbox"/> Birthing services | <input type="checkbox"/> MRI |
| <input type="checkbox"/> Bone density | <input type="checkbox"/> Outpatient surgery |
| <input type="checkbox"/> CT Scan (CAT Scan) | <input type="checkbox"/> Physical therapy |
| <input type="checkbox"/> Dietary services/Diabetic counseling | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> Emergency room | <input type="checkbox"/> Respiratory therapy |
| <input type="checkbox"/> Inpatient stay | <input type="checkbox"/> Sleep study |
| <input type="checkbox"/> Inpatient surgery | <input type="checkbox"/> Specialty doctor |
| <input type="checkbox"/> Laboratory (blood) tests | <input type="checkbox"/> Ultrasound |
| <input type="checkbox"/> Mammogram | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Mental health/Substance abuse | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

11b. How satisfied were you or someone in your household with the services you received at this hospital? Would you say you were... *(Read list)*

- ☐ Satisfied
☐ Dissatisfied
☐ *(Do not read)* Don't know/Refused

12. *(If Great Plains Regional Medical Center is mentioned in Q.9, ask Q.12, Q.13, Q.14a, and Q.14b; otherwise, skip to Q. 15.)* What hospital services were used at Great Plains Regional Medical Center? *(Do not read list unless prompt is needed. Record exact response.)*

- | | |
|---|--|
| <input type="checkbox"/> CT Scan (CAT Scan) | <input type="checkbox"/> Outpatient treatment/procedures |
| <input type="checkbox"/> Dietary services/Diabetic counseling | <input type="checkbox"/> Physical therapy |
| <input type="checkbox"/> Emergency room | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> Home health | <input type="checkbox"/> Respiratory therapy |
| <input type="checkbox"/> Inpatient stay | <input type="checkbox"/> Specialty doctor |
| <input type="checkbox"/> Inpatient surgery | <input type="checkbox"/> Ultrasound |
| <input type="checkbox"/> Psychiatry | <input type="checkbox"/> Radiation oncology |
| <input type="checkbox"/> Laboratory (blood) tests | <input type="checkbox"/> Sleep Study |
| <input type="checkbox"/> Mammogram | <input type="checkbox"/> Endoscopy |
| <input type="checkbox"/> Obstetrics | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> MRI | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

13. Please rate on a scale from 1 -5 (where 1 = very poor, 5 = excellent) how you felt about the following aspects of your hospital visit:

	Rate (1 - 5)
a) Services provided by the doctors in general	
b) The hospital's facilities	
c) Services provided by the nurses	
d) Services provided by the administrative staff	

14a. How satisfied were you or someone in your household with the services you received at Great Plains Regional Medical Center? Would you say you were...*(Read list)*

- ☐ Satisfied
☐ Dissatisfied
☐ *(Do not read)* Don't know/Refused *(Skip to Q.15)*

14b. Why do you say that? *(Record exact response. Probe for clarification.)*

15. Have you or someone in your household used emergency room services in the past 24 months?

- ☐ Yes
- ☐ No *(Skip to Q.21)*
- ☐ *(Do not read)* Don't know/Refused *(Skip to Q.21)*

16. At which hospital(s) were emergency room services received? *(Do not read list unless prompt is needed. Record exact responses. Allow for responses for more than one hospital.)*

- ☐ Great Plains Regional Medical Center, Elk City *(Skip to Q.19)*
- ☐ Sayre Memorial Hospital, Sayre
- ☐ Clinton Regional Hospital, Clinton
- ☐ Weatherford Regional Hospital, Weatherford
- ☐ Other *(Specify)* _____
- ☐ *(Do not read)* Don't know/Refused

17. *(If any hospital other than Great Plains Regional Medical Center was indicated in Q.16, ask Q.17, and Q.18; otherwise, skip to Q.19)* You mentioned that you or someone in your household received emergency room care at a hospital other than Great Plains Regional Medical Center. What type of emergency room services have you or someone in your household used in the past 24 months at this hospital? *(Do not read list unless prompt is needed. Record exact*

- | | |
|--|--|
| <input type="checkbox"/> Cardiac evaluation/Heart | <input type="checkbox"/> Trauma care |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> CT Scan | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Respiratory distress/Breathing difficulties | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> Routine illness | |

18. How satisfied were you or someone in your household with the services you received at the emergency room in this hospital? Would you say you were... *(Read list)*

- ☐ Satisfied
- ☐ Dissatisfied
- ☐ *(Do not read)* Don't know/Refused

19. *(If Great Plains Regional Medical Center is mentioned in Q.16, ask Q.19, Q.20a, and Q.20b; otherwise, skip to Q. 21)* What type of emergency room services have you or someone in your household used in the past 24 months at Great Plains Regional Medical Center? *(Do not read list unless prompt is needed. Record exact response.)*

- | | |
|--|--|
| <input type="checkbox"/> Cardiac evaluation/Heart | <input type="checkbox"/> Trauma care |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> CT Scan | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Respiratory distress/Breathing difficulties | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> Routine illness | |

- 20a. How satisfied were you or someone in your household with the services you received at the emergency room in Great Plains Regional Medical Center? Would you say you were...*(Read*

- ☐ Satisfied
☐ Dissatisfied
☐ *(Do not read)* Don't know/Refused *(Skip to Q.21)*

- 20b. Why do you say that? *(Record exact response. Probe for clarification.)*
-

21. Do you feel that your community provides adequate services for the following:

	YES	NO
EMS/Ambulance	<input type="checkbox"/>	<input type="checkbox"/>
Home Health	<input type="checkbox"/>	<input type="checkbox"/>
Assisted Living	<input type="checkbox"/>	<input type="checkbox"/>
Nursing Home Care	<input type="checkbox"/>	<input type="checkbox"/>
Transportation for Healthcare	<input type="checkbox"/>	<input type="checkbox"/>
Physical Fitness	<input type="checkbox"/>	<input type="checkbox"/>
Dental Services	<input type="checkbox"/>	<input type="checkbox"/>
A Sufficient Number of Primary Care Physicians	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition Education	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Services	<input type="checkbox"/>	<input type="checkbox"/>
Health education	<input type="checkbox"/>	<input type="checkbox"/>

22. What additional services would you like to see offered at Great Plains Regional Medical Center?

(Do not read list unless prompt is needed. Record exact response.)

- | | |
|--|--|
| <input type="checkbox"/> Birthing Services | <input type="checkbox"/> Orthopedist |
| <input type="checkbox"/> Cardiologist | <input type="checkbox"/> Respiratory therapy |
| <input type="checkbox"/> Gastroenterologist | <input type="checkbox"/> Sleep study |
| <input type="checkbox"/> Mental health/Substance abuse | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> MRI | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

23. What concerns you most about health care in your community? *(Record exact response.)*

The last few questions are for statistical purposes only and like any of the other questions, respondents may choose not to answer.

24. What is your age?

- | | |
|--------------------------------|--|
| <input type="checkbox"/> 18-20 | <input type="checkbox"/> 61-70 |
| <input type="checkbox"/> 21-30 | <input type="checkbox"/> 71-80 |
| <input type="checkbox"/> 31-40 | <input type="checkbox"/> 80+ |
| <input type="checkbox"/> 41-50 | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> 51-60 | |

25. What is your ethnicity?

- | | |
|---|--|
| <input type="checkbox"/> Caucasian | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> African American | |

26. What is your annual household income?

- | | |
|---|--|
| <input type="checkbox"/> Less than \$10,000 | <input type="checkbox"/> \$75,000 to \$99,999 |
| <input type="checkbox"/> \$10,000 to \$14,999 | <input type="checkbox"/> \$100,000 to \$149,999 |
| <input type="checkbox"/> \$15,000 to \$24,999 | <input type="checkbox"/> \$150,000 to \$199,999 |
| <input type="checkbox"/> \$25,000 to \$34,999 | <input type="checkbox"/> \$200,000 or more |
| <input type="checkbox"/> \$35,000 to \$49,999 | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> \$50,000 to \$74,999 | |

27. **INTERVIEWER: RECORD ANSWER BASED ON OBSERVATION ONLY. DO NOT ASK.**

- ☐ Male
☐ Female
☐ Unknown (Can't Tell)

That completes the survey. Thank you for your time!