Community Health Needs Assessment

Mercy Hospital Ada

2025

Contents

FY22-25 Impact

The 2022 community health needs assessment identified four priority health areas:

A community health improvement plan was developed and implemented to address these significant needs. Mercy Hospital Ada developed and implemented a variety of programs and initiatives to address the needs identified in the 2022 CHNA.

FY22-25 Impact

Access to Care

Community Health Workers (CHWs) have been serving at Mercy Hospital Ardmore since May 2021, facilitating access to services. In December 2021, our CHWs began screening for needs related to social determinants of health in the Emergency Department as part of a Ministry-wide pilot program. We recently added a second CHW in the Emergency Department, as well as one in the Primary Care Clinic to help patients navigate the healthcare system and their treatment plans. An inpatient CHW to focus on our Health Equity Plan was hired in the Fall of 2024. In FY24, CHWs provided assistance to more than 1,100 patients.

FY22-25 Impact

Behavioral Health

- **Concert Health Collaborative Care-** This partnership commenced in 2022 to support Primary Care providers (PCP) in providing their patients with mental/behavioral health support. The program helps provide a behavioral health care manager who interacts directly with the patient, performs an assessment, as well as initiates treatment, all in collaboration with their PCP. This collaboration strives to enhance support to PCPs by providing comprehensive mental and behavioral healthcare to patients while allowing the patient to obtain care in the same setting. In FY24, 30 patients were referred to the Concert Health Program in our community.

FY22-25 Impact

Food Insecurity

Pack Shack- Mercy caregivers joined community partners to host a “Feed the Funnel” party to pack 40,000 meal kits for local people who are food insecure. Kits were distributed to local churches, the local food bank, as well as the local homeless shelter for them to hand out to community members needing a quick, filling and nutritious meal.

Meals on Wheels- Mercy Hospital Ada has helped coordinate and has participated in this program since 2020. The program provides meals to seniors and disabled members of the community. When there aren’t enough drivers, Mercy caregivers volunteer to deliver trays. About 7,474 people served since FY22.

Food Bank Boxes- The emergency Food Box Program is a partnership between Mercy Hospital Ada and the Regional Food Bank of Oklahoma. A box full of non-perishable items are given to patients that screen positive to food insecurity as well as providing them with information about food resources in their area. The program went live on March 2024, and 71 boxes have been given out to patients through March 2025.

Executive Summary

Mercy Hospital Ada, in partnership with the Pontotoc County Health Department, Lighthouse, the Clinic, and Ada Homeless Services is pleased to present the 2025 Community Health Needs Assessment (CHNA). This CHNA report provides an overview of the health needs and priorities associated with the 5-county service area of Mercy Hospital Ada. The goal of this report is to provide residents with a deeper understanding of the health needs in their community, as well as help guide the hospital in their community benefit planning efforts and development of an implementation strategy to address assessed needs. The CHNA involved a review of both quantitative and qualitative data to attain a full scope of the community needs as they relate to health with a focus on the interconnectedness of social determinants of health (SDoH).

Executive Summary *(continued)*

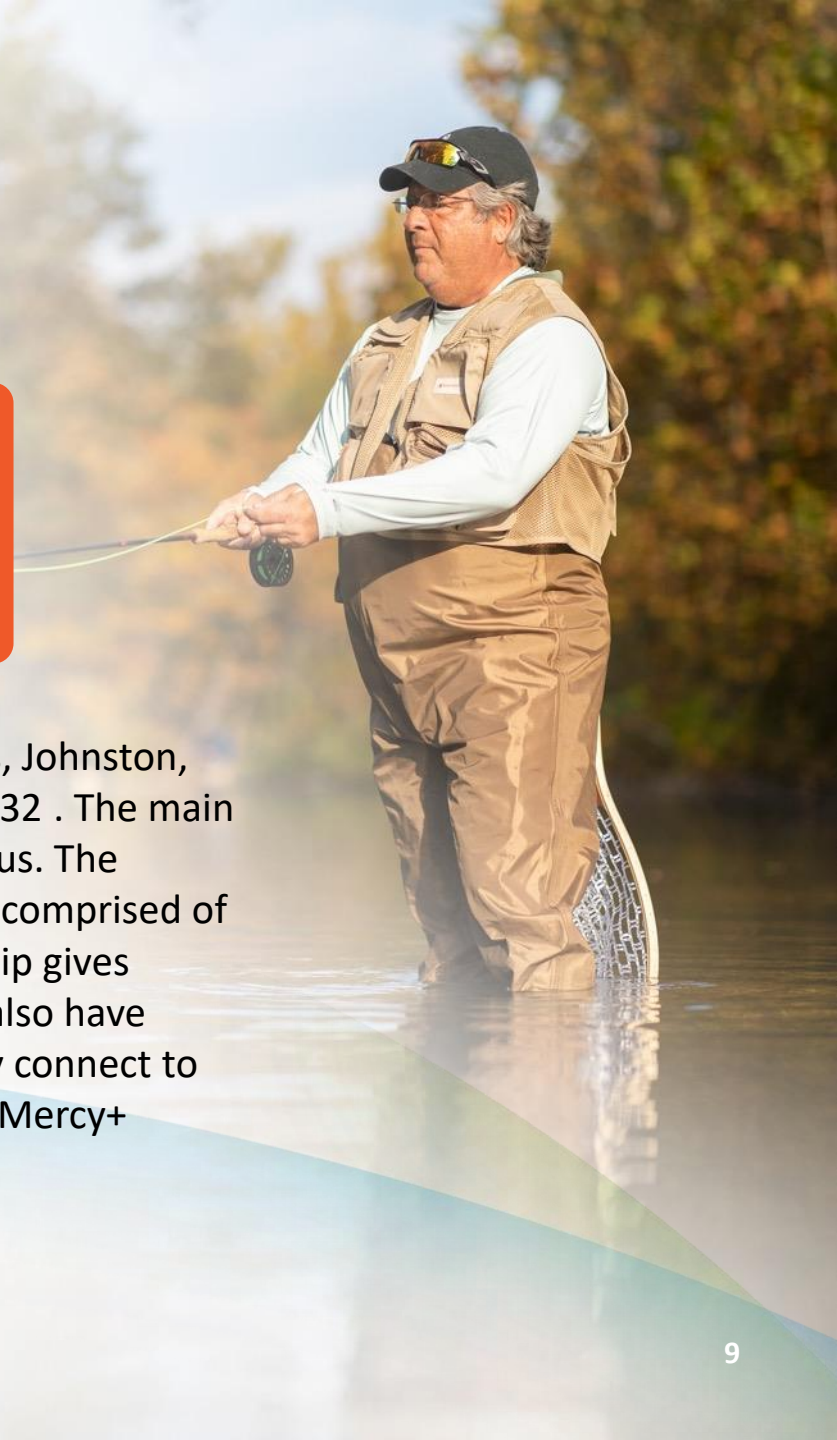
SDoH are the conditions in which people are born, grow, live, work and age that shape health. This CHNA process was designed to use data to identify those who may not be thriving; use information provided from Community focus groups and surveys, to help community members and organizations identify systems that perpetuate inequity; recognize potentially replicable bright spots; and test policy and programmatic changes that have the potential to disrupt systems perpetuating inequity. This summary is documentation that Mercy Hospital Ada is in compliance with IRS requirements for conducting a community health needs assessment. The Affordable Care Act (ACA) requires 501(c)3, tax-exempt hospitals to conduct a CHNA every three tax years and adopt a strategic implementation plan for addressing identified needs. Identified priorities for the next three tax years include: **behavioral health, access to care and food insecurity**. Many of the initiatives identified and implemented in the previous Community Health Needs Assessment will be continued along with new programs.

Community Profile

Population

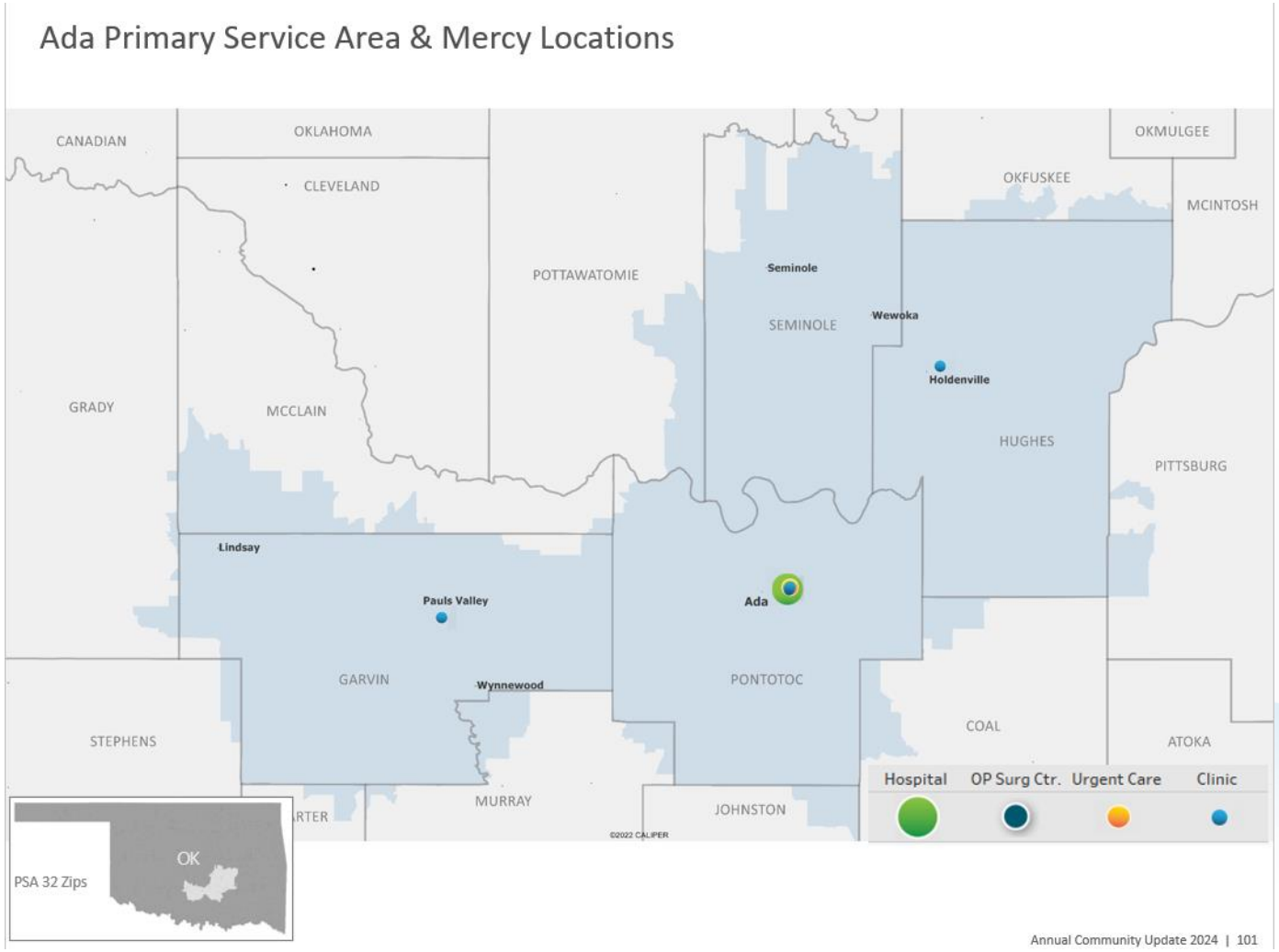
Demographics

Socioeconomic Status



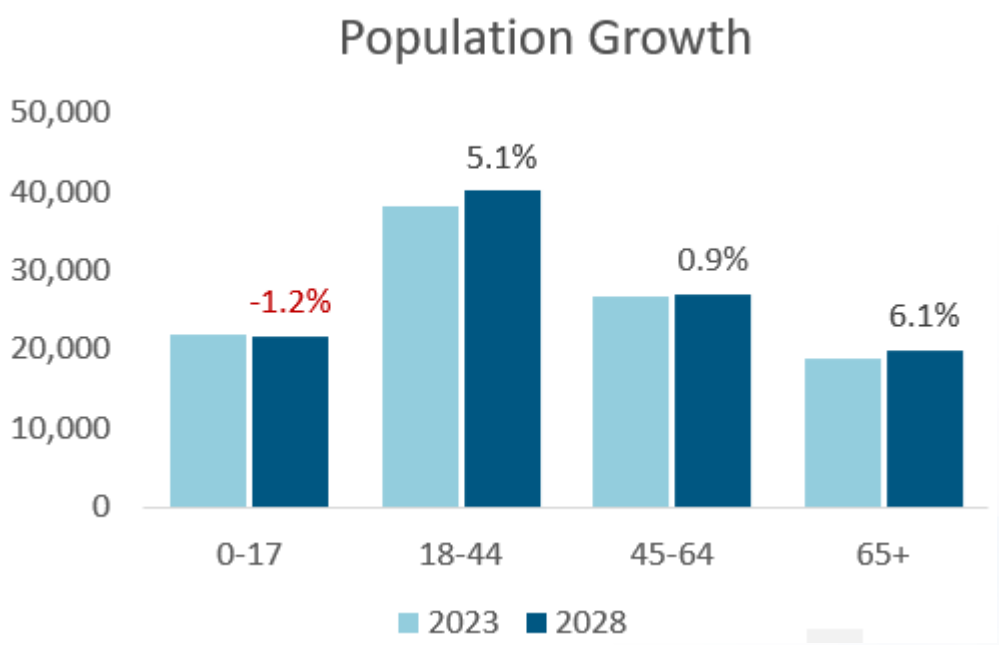
For purposes of this CHNA, Mercy defines its community served as five counties (Garvin, Hughes, Johnston, Pontotoc, and Seminole) with a population of 120,223, with a projected growth in 2025 to 120,732 . The main campus includes the hospital and several medical buildings within one mile of the hospital campus. The hospital is a full-service tertiary hospital and Mercy Clinic is a physician-governed group practice comprised of primary care physicians, including specialists and mid-level practitioners. This provider partnership gives patients access to an expanded health care team and advanced services. Mercy clinic providers also have access to an electronic health record that is shared at Mercy facilities in four states. Patients may connect to their health record and health teams anywhere they have access to the internet through the MyMercy+ patient portal.

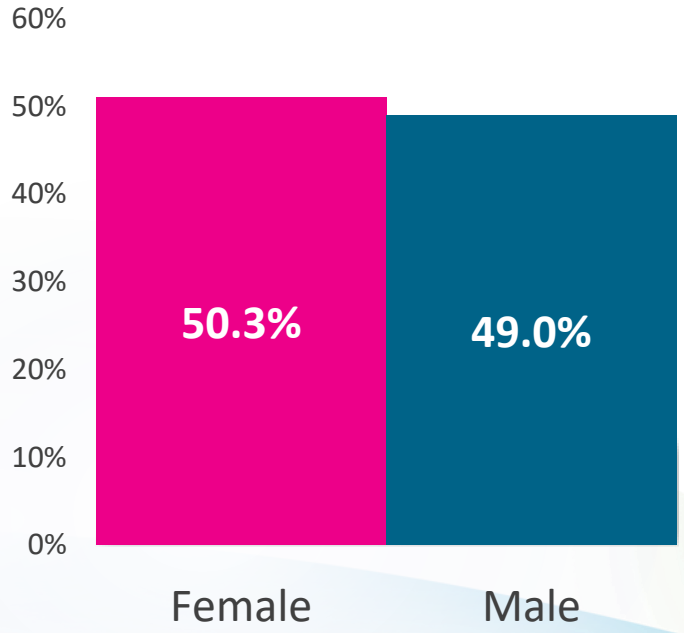
Community Profile



Community Profile

Demographics- Gender & Age



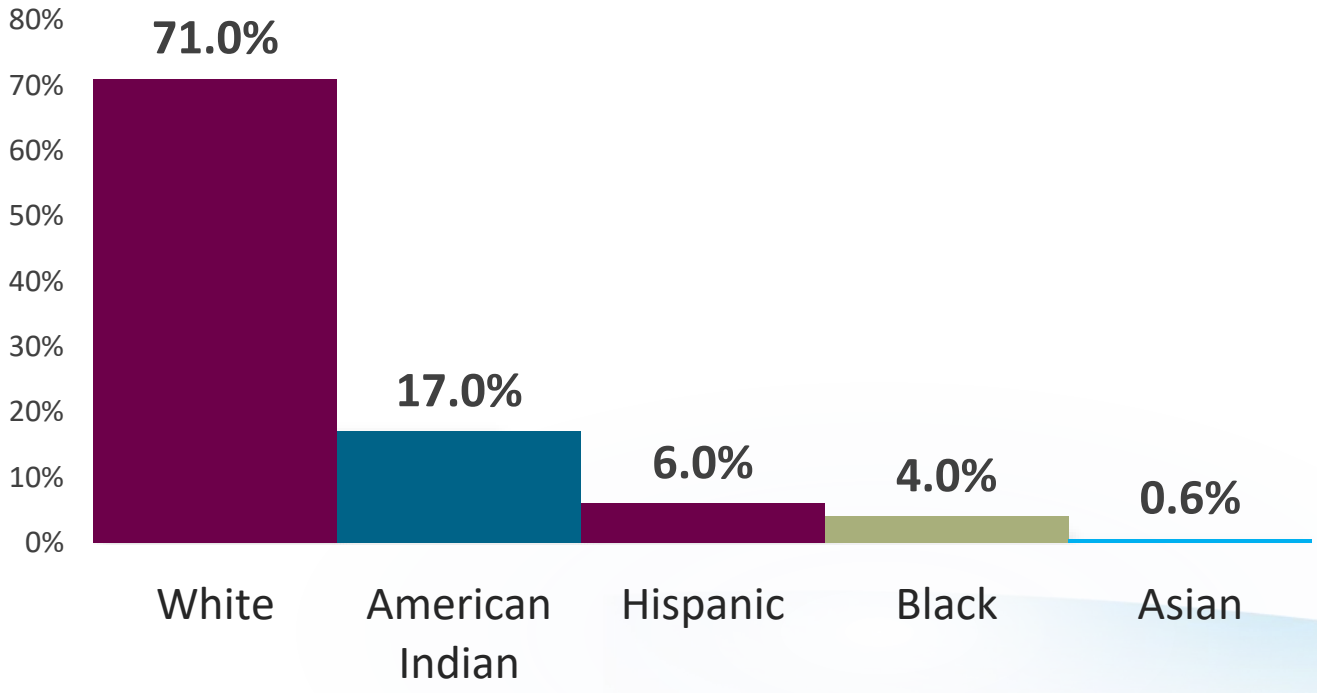


Source: US Census Bureau, 2016-2020;

West Region Annual Community Update- Ada community 2021

Community Profile

Demographics(*continued*): Race and Ethnicity



Source: US Census Bureau, 2020

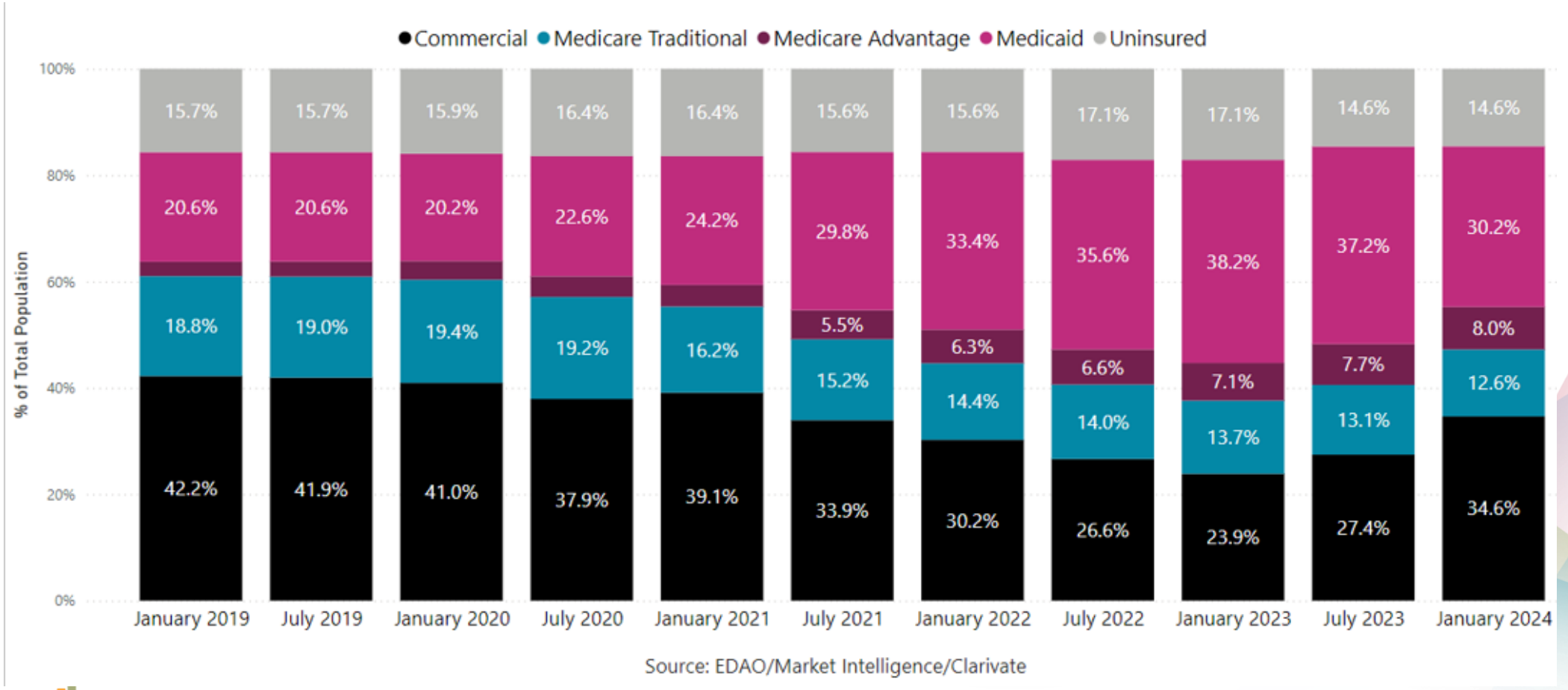
Community Profile

	Community	OK	US
5-Year Population Growth	2.9%	6.3%	4.0%
Median Age	40	36	35
Median HH Income	$50k	$52k	$61k
High School Grad or Greater	87%	89%	90%

Source: Advisory Board Demographic Estimates, 2023-2028

Community Profile

Insurance Status



Source: EDAO/Market Intelligence/Clarivate

Community Profile

Access to Care

- Clinic and Outpatient Locations 15
- Staffed Beds 86
- Total Providers 52
- ER visits 24,199
- Births 343
- Acute Inpatient Discharges 4,896

Source: https://www.mercy.net/newsroom/mercy-hospital-ada-quick-facts/ (FY2024)

Our Assessment Process

A list of community partners involved in the CHNA data collection process is provided below:

- Oklahoma State Department of Health District 8- Pontotoc County HD
- Mercy Hospital Ada
- The Clinic
- Ada Homeless Services
- Lighthouse Behavioral Wellness Centers

Our Assessment Process

Community Coalitions and Stakeholders *(continued)*

- Pontotoc County Community Coalition
- Pontotoc County Drug Free Coalition
- Joint Call-A-Ride Committee
- City of Ada
- Ada Public Schools
- The Chickasaw Nation
- East Central University

Our Assessment Process

Community Input

Community Health Survey

Mercy in collaboration with Region 8 of the Oklahoma State Department of Health, and The Clinic, worked to conduct a comprehensive community health survey in 2024. The survey was developed to build on the 2021 Mercy Hospital Ada Community Health Survey and to incorporate input and specific needs of community partners in the area. The final survey was made of 29 questions focused on health issues and needs most important to the respondents, wellness, mental health, as well as barriers to care. The survey was translated into Spanish by a certified medical interpreter.

The Health Department hosted the survey on their platform from June through September 2024 in both languages. The survey was promoted on social media and sent to all partner agencies to share among their coworkers and clients or patients.

Our Assessment Process

Ada Community Input *(continued)*

Flyers with QR codes for the survey in each language were produced by OSDH Region 8's Communications Team and distributed to community partners. Surveys were also made available in paper format in both English and Spanish for participants that preferred to complete it manually or didn't have access to a smart phone or computer. In-person community promotions were done at multiple events.

348 responses were included in the final analytic sample. Responses were obtained from 23 unique zip codes from the Ada Community Area counties. 76% of respondents were White, 20% were Native American, 1% were Black/African American, 1% were other races, 1% were Native Hawaiian or Pacific Islander, and 1% were Asian. Complete results of the Ada Community Health Needs Survey are included in Appendix A.

A listening session was also conducted where qualitative data was obtained on the needs of the community from their perspective.

Our Assessment Process

Resources

The following external sources of published data are examples of those utilized in the data collection process.

- Ada Community Update- Annual Community Update 2024. (2024). [online] Mercy Market Analytics. Available at: https://baggotstreet.mercy.net/baggotstreet/cmis/download?id=workspace%3A//SpacesStore/4e2a3ee4-abcf-4f30-aaa9-b00c218d16c8.
- *Explore Census Data*. (n.d.). Data.census.gov. : https://data.census.gov/cedsci/all?q=Oklahoma
- www.cms.gov. (n.d.). *Behavioral Health | CMS*. [online] Available at: https://www.cms.gov/outreach-education/american-indianalaska-native/behavioral-health.
- health.gov. (n.d.). *Food Insecurity - Healthy People 2030 | health.gov*. [online] Available at: https://health.gov/healthypeople/objectives-and-data/social-determinants-health/literature-summaries/food-insecurity.
- www.ok.gov. (n.d.). *Oklahoma Department of Mental Health and Substance Abuse Services*. [online] Available at: https://www.ok.gov/triton/_temp/odmhsas/faqs.html#:~:text=In%20Oklahoma%2C%20drug%20and%20alcohol [Accessed 3 Apr. 2022].
- U.S. Department of Health and Human Services (2020). *Health Care Access and Quality - Healthy People 2030 | health.gov*. [online] health.gov. Available at: https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality.

Prioritized Needs

Prioritized Needs

Access to Care

According to Healthy People 2030, “People without insurance are less likely to have a primary care provider, and they may not be able to afford the health care services and medications they need. Strategies to increase insurance coverage rates are critical for making sure more people get important health care services, like preventive care and treatment for chronic illnesses”.

Respondents to the 2024 Community Health Survey, as well as focus group participants ranked Access to Affordable Care as one of the most important issue to them. This included the need for lower costs in health services.

Source: U.S. Department of Health and Human Services (2020). *Health Care Access and Quality - Healthy People 2030 | health.gov*. [online] health.gov. Available at: https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality.

Prioritized Needs

Behavioral Health

Behavioral health includes the emotions and behaviors that affect your overall well-being. Behavioral health is sometimes called mental health and often includes substance use.

Secondary data on mental and behavioral health is challenging to obtain at the county level. As a nation, however, data is clear that mental health is a very significant health issue. Only 17% of U.S. adults are considered to be in a state of optimal mental health.[2] Suicide rates have increased 24% over the past decade, from 11.3 to 14.0 per 100,000 population (age adjusted) from 2007 to 2017.

Mercy Health System is planning to implement several virtual behavioral health services across its ministry over the next several years, benefitting the Mercy Ada community, and Mercy remains committed to finding solutions to meet this significant health need.

Source: www.cms.gov. (n.d.). *Behavioral Health | CMS*. [online] Available at: https://www.cms.gov/outreach-education/american-indianalaska-native/behavioral-health.

Prioritized Needs

Food Insecurity

Food insecurity is defined as the disruption of food intake or eating patterns because of lack of money and other resources.

Food insecurity may be long term or temporary. It may be influenced by a number of factors including income, employment, race/ethnicity, and disability. The risk for food insecurity increases when money to buy food is limited or not available

Based on CHNA data, the community identified access to affordable, healthy food as needed to improve an individual's health and well-being.

Source- https://health.gov/healthypeople/objectives-and-data/social-determinants-health/literature-summaries/food-insecurity

Resources

Mercy Ada collaborates with many local community agencies and organizations that have similar missions and personnel dedicated to improving the health and quality of life for individuals within the Mercy Ada region. Some of these partners include:

- Ada Public Schools
- Pontotoc County Health Department
- Compassion Outreach Center
- Mamma T's
- Ada Homeless Services
- Irving Community Center
- Abba's Table
- The Chickasaw Nation
- East Central University

Appendices

- Appendix A: Mercy Ada Community Health Survey and Focus Group Results
- Appendix B: Identified Health Needs

Appendix A

11/04/2024

Pontotoc CHNA Data

(~1%) 348 Total Respondents / 38,116
Census-estimated population

OKLAHOMA
State Department of Health

1. What is the biggest health problem in your community?
   - Lots of surgeries hindering mobility (knee, hip, cataract)
   - Cancer or chronic illness and navigating life changing diagnosis
   - Heart health issues
   - Substance abuse (personal note from CHW)
2. What prevents you from achieving a healthy community?
   - Cost of health care
   - Insurance (cost, finding providers locally that accept, understanding how insurance works)
   - Outstanding bill (idea that you cannot be seen without paying bill)
   - Preventative measures such as education on disease prevention
3. What do you see as a priority need in your community?
   - Ease of transfer from facility to facility; if cannot be treated locally
   - Access to specialty providers/ offices locally instead of being referred out of town
   - Change of provider/specialist due to lack of PCP retention (new location or out of network)
   - Consistency of care (smooth transition from one facility to another within the same network, ease of access to medical records, accountability for doctors to review charts/records upon seeing a patient in office to ensure no "missed" health issues or care.)
   - Patient advocacy for those who need more "hands on" assistance. Information given on verbally or on paper is less retained than a "hands on approach"
4. What resources are needed to meet your priority needs within your community?
   - Transportation specifically for the elderly; medical and non-medical (many rely on friends or family for rides and may have to wait in public for them to get off work etc... to get home, socialize run errands or get to/from medical appointments) many live on other peoples time or schedules and have to work around/with to get by (availability to those out of city limits)
   - Access to vison care (glasses/exams)
   - Programs to assist with the financial strains of everyday life
   - No cold calling or texts with links (many think these are spam or scams)
   - Information is best given by mail, paper handouts or word of mouth
   - Diabetic education/chronic condition management assistance for those who utilize public facilities such as Walmart to monitor blood pressure or free/low-cost public health events to monitor/manage conditions such as hypertension, CHF or diabetes. (access to DME)
   - Chronic condition education/care navigation
5. How can your community achieve overall good mental health?
   - Access to therapy/therapists
   - Social workers being more involved in care/obtaining assistance

Appendix B

Community Health Needs Assessment Identified Needs

Mercy Hospital Ada
2025


Mercy
Your life is our life's work.