

# 2022-2024

## Community Health Needs Implementation Strategy



**SSM Health St. Anthony Hospital - Midwest**

2825 Parklawn Drive, Midwest City, OK 73110

# A message to our community

St. Anthony Hospital, a member of SSM Health, has delivered exceptional, compassionate care to Oklahoma County for over 100 years. Last year, we were excited to gain a new ministry in Midwest City, proudly named SSM Health St. Anthony Hospital - Midwest.

At SSM Health St. Anthony Hospital - Midwest, we are inspired by our founding Franciscan Sisters of Mary and guided by our Mission – *Through our exceptional health care services, we reveal the healing presence of God.* We cherish the sacredness and dignity of each person as demonstrated through our Values of compassion, respect, excellence, stewardship, and community.

Our sustained community commitment can be seen through our collaborative partnerships with residents and organizations. We rely on these relationships to help us identify and develop plans to address high-priority community health needs. We are grateful for the opportunity to partner with the following organizations: INTEGRIS Health, Mercy Hospital, OU Health, and the Oklahoma City-County Health Department (OCCHD).

Over the last 12 months, in collaboration with the Central Oklahoma Health Impact Team (COHIT) and our community partners, we have conducted a community health needs assessment (CHNA) by gathering health-related information from Oklahoma City-County Health Department's 2021 Wellness Score, regarding Oklahoma County. We also conducted stakeholder meetings, community surveys, community chats, and key informant interviews to identify concerns about the health of Oklahoma County. These discussions identified needs that were prioritized based on the level of importance to community members and the hospital's ability to truly make an impact.

The primary priorities our health ministry will address over the next three years are:

- **Access to Care**
- **Access to Healthy Food**

Our CHNA also identified **education** and **employment** as health-related needs in Oklahoma County. SSM Health St. Anthony Hospital - Midwest plans to do our part to address these important social determinants of health through our work with the Health Anchor Network, which you will see described in this implementation strategy.

During this time, SSM Health St. Anthony Hospital - Midwest will continue to develop our community partnerships and deliver an exceptional experience through high-quality, accessible, and affordable care to all residents. Please visit our website at [ssmhealth.com](http://ssmhealth.com) to learn more about how we will continue to make a difference in our community.

I welcome your thoughts on how we can create a healthier Oklahoma.

Sincerely,

Dr. Kevin L. Lewis, MD

President, SSM Health St. Anthony Hospital - Midwest  
Regional President, SSM Health Medical Group Oklahoma

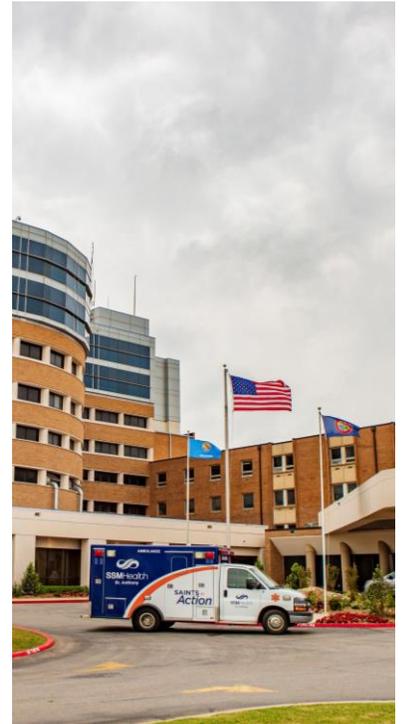


# Executive Summary

## Background

SSM Health St. Anthony, Mercy Hospital Oklahoma City, OU Health, INTEGRIS Health, and the Oklahoma City-County Health Department engaged in joint community health needs assessment (CHNA) in 2021. The CHNA involved reviewing both quantitative and qualitative data to attain the full scope of the community's needs related to health with a focus on the economically poor and underserved populations.

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



## Priorities

As a result of the 2021 CHNA, SSM Health St. Anthony Hospital - Midwest determined two primary priorities and two secondary priorities for the 2022-2024 Community Health Needs Implementation Strategy:

Primary Priorities:

- Access to Healthcare
- Access to Healthy Food

Secondary Priorities:

- Education and Employment

## Strategies

**Access to Care:** We will collaborate with community partners to improve access to health care services by offering a new health education program, partnering with the Health Alliance for the Uninsured to provide care and resources to our most vulnerable neighbors, and increasing access to tobacco cessation resources for our patients. Regular and reliable access to health services improves health outcomes and overall quality of life.

**Access to Healthy Food:** We will work with community partners to expand access to healthy food by establishing a Food Pharmacy Program in our hospital, sponsoring a Backpack for Kids program, and supporting a Meals on Wheels route in our community. Access to healthy food will help residents in eastern Oklahoma County achieve and maintain a healthy weight and live longer.

**Education & Employment:** We will develop a strategy to support equitable employment opportunities and job training in our local community through our work with the Healthcare Anchor Network.

# Table of contents

<b>Introduction</b>	<b>5</b>
SSM Health Mission	
Who we are	
About our community hospital	
<b>Community partners and roles</b>	<b>6</b>
<b>The health needs of our community</b>	<b>7</b>
<b>Prioritized needs</b>	<b>8</b>
Priority 1: Access to Care	
Priority 2: Access to Healthy Food	
Secondary priorities: Education & Employment	
<b>Community assets</b>	<b>9</b>
<b>Improvement strategies – priorities</b>	<b>10</b>
Priority 1: Access to Care	<b>11-12</b>
Priority 2: Access to Healthy Food	<b>13-14</b>
Secondary priorities: Education & Employment	<b>15</b>
Overarching priorities	<b>16</b>

# About SSM Health and St. Anthony Hospital - Midwest

## SSM Health

SSM Health is a Catholic not-for-profit health system serving the comprehensive health needs of communities across the Midwest through a robust and fully integrated health care delivery system. Headquartered in St. Louis, SSM Health has care delivery sites in Missouri,

Illinois, Oklahoma, and Wisconsin. The health system includes 24 hospitals, more than 300 physician offices and other outpatient care sites, 10 post-acute facilities, comprehensive home care and hospice services, a pharmacy benefit company, an insurance company, a technology company and

an Accountable Care Organization.

With more than 10,000 providers and 40,000 employees in four states, SSM Health is one of the largest employers in every community it serves. An early adopter of the electronic health record (EHR), SSM Health is a national leader for the depth of its EHR integration.

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Through our exceptional health care services, we reveal the healing presence of God.

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## St. Anthony Hospital - Midwest

### Highlight of services

We offer a comprehensive array of medical specialty services, such as:

- Cardiology
- Primary Care
- Obstetrics & Gynecology
- Neurology
- Dermatology
- Orthopedics
- General Surgery
- Urology

### Additional affiliations and partnerships

Central Oklahoma Health Impact Team  
Oklahoma City-County Health Department  
Health Alliance for the Uninsured  
Oklahoma Hospital Association

### Community partnerships

We are proud to be part of community projects that work to improve health outcomes in the areas we serve:

- Mid-Del School District
- Leah's Hope
- OK to Quit
- Mid Del Tech Center
- Rose State Foundation
- Rotary Club of Midwest City
- Rotary Club of East OK County
- Midwest City Chamber of Commerce
- Del City Chamber of Commerce
- Choctaw Chamber of Commerce

As the newest member of SSM Health, St. Anthony Hospital Midwest looks forward to contributing to this community benefit work across our region in the years ahead.

# CHNA community partners and roles

## Stakeholder Meeting Participants

Alliance for Economic Development of Oklahoma City  
Areawide Aging Agency  
Butterfield Foundation  
Centennial Health  
City Councilwoman, Ward 7  
City of Oklahoma City  
County Commissioner, District 1  
Crossings Community Clinic  
Dentists for the Disabled and Elderly in Need of Treatment (D-Dent)  
El Latino News  
Embark OKC (transportation)  
Goodwill Industries of Central Oklahoma  
Greater Oklahoma City Chamber of Commerce  
Greater OKC Hispanic Chamber of Commerce  
Homeless Alliance  
Health Alliance for the Uninsured  
Hunger Free Oklahoma  
Inasmuch Foundation  
Langston University  
Latino Community Development  
Lynn Institute  
Metafund (CDFI)  
MetroTech  
Millwood Public Schools  
OKC Black Eats  
Oklahoma Center for Nonprofits  
Oklahoma Children's Hospital at OU Health  
Oklahoma City Black Chamber  
Oklahoma City-County Health Department  
Oklahoma City Indian Clinic  
Oklahoma City Innovation District

Oklahoma Dental Foundation  
Oklahoma Department of Human Services  
Oklahoma Department of Human Services, Aging Services  
Oklahoma Health Care Authority (Medicaid)  
Oklahoma Hospital Association  
Oklahoma State University  
Oklahoma Tobacco Settlement Endowment Trust (TSET)  
Potts Family Foundation  
Regional Food Bank  
Restore OKC  
St. Luke's United Methodist Church (Meals on Wheels)  
State Representative, District 99  
Sunbeam Family Services  
United Way of Central Oklahoma  
University of Oklahoma College of Nursing  
VarietyCare (FQHC)

## Community Chat Hosts & Partners

Crossings Community Clinic  
Good Shepherd Clinic  
Goodwill Industries of Central Oklahoma  
Health Alliance for the Uninsured  
Hilltop Clinic  
Lynn Institute  
Mary Mahoney Memorial Health Center (FQHC)  
Millwood Public Schools  
Skyline Urban Ministry  
Stanley Hupfeld Academy

## Informational Interview Participants

Choctaw Chamber of Commerce  
Greater OKC Hispanic Chamber of Commerce  
Health Alliance for the Uninsured  
Latino Community Development Agency  
Lynn Institute

**We look forward to working with many of these partners to address the prioritized health needs in our 2022-2024 strategy for Eastern Oklahoma County.**



# The health needs of our community

The 2022 COHIT CHNA includes both qualitative and quantitative data to provide insights into the biggest and most pressing health needs affecting people in Oklahoma County. We began the CHNA process with a review of the collaborative's previous CHNA report and gathered feedback from internal and external stakeholders.

## **Stakeholder Meeting**

We assembled a group of 65 community stakeholders representing 45 organizations. We presented a comprehensive overview of health indicator findings for Oklahoma County. We used a “real-time” survey process to engage stakeholders and assess their views on the greatest factors for poor health outcomes in Oklahoma County. Four main health topics emerged from this process: access to meaningful employment, access to education, access to healthy food, and access to healthcare. We divided the stakeholders into discussion groups for each problem area. Each group further defined the problem using the “five whys exercise” in order to determine the root causes of each problem.

## **Convenience Sample Survey**

We used the findings from the stakeholder meeting to create a community survey to collect information from Oklahoma County residents. To create the community survey, we contacted the Robert Wood Johnson Foundation for examples of surveys from other states that were successful in gathering information related to social determinants of health. Through our partnership with the Oklahoma City-County Health Department, we utilized COVID-19 vaccination events to collect surveys. In addition, we enlisted the help of our stakeholders to send targeted emails to specific population groups. Surveys were made available in English and Spanish. To make the results more generalizable to Oklahoma County, we used post-stratification weighting.

## **Community Chats**

Each hospital was responsible for Community Chats related to one of the following priority areas: Education, Employment, Food Access, Health Care Access. Each Community Chat was moderated by a staff member from one of the partner hospitals and recorded for transcription. Between May 23 and June 30, 2021, 111 participants engaged in 16 Community Chats: 4 on Health Care Access, 4 on Food Access, 3 on Education and 5 on Employment. All sessions were recorded, and audio files were anonymously transcribed into text documents. Text documents were uploaded to the qualitative data analysis software tool “Dedoose” for coding. Dedoose is a web-based program that allowed the researchers to organize and analyze research data into text formats for quantitative and qualitative data and facilitated mixed methods research output.

## **Analysis Techniques**

The first stage in the research process was initial coding. A team of two primary and two secondary coders was established to generate codes and read through each transcript to draw relationships and identify keywords. We created a codebook with definitions for each code through an iterative process of testing codes and reconciling coding differences until an acceptable level of coding agreement was reached.<sup>11</sup> We calculated intercoder reliability by having multiple coders code random excerpts of text representing about 10% of the data. A second round of interrater reliability tests was administered to Community Chat facilitators to establish clarity on coding applications across administrative levels of the qualitative research efforts.<sup>12</sup>

The second stage of analysis involved focus coding in eliminating, combining, and subdividing coding categories identified in the first step. The process yielded quantitative results that drew comparisons across each Community Chat topic area. The content analysis enabled us to systematically code data by organizing the statements into categories allowing us to discover patterns that could be undetectable with listening and reading alone.

# Prioritized Health Needs

## Priority 1: Access to Care

932.6

deaths per 100,000

Overall mortality rate in Oklahoma City-County from 2016-2018.

(Wellness Score, 2021)

- High rates of hypertension and heart disease were prevalent across Oklahoma County (CHNA, page 50)
- Cardiovascular disease was the leading cause of death in Oklahoma County from 2016-to 2018 (CHNA, page 49)
- In the CHNA Community Chats, Oklahoma County residents stated that their most significant barriers to accessing healthcare include:
  - Lack of knowledge on how to access care
  - Affordability

(CHNA, pages 69-70)

## Priority 2: Access to Healthy Food

14%

of Oklahoma county residents struggle with Food insecurity. (Regional Food Bank of Oklahoma)

In the CHNA Community Survey, the top reasons why Oklahoma County residents stated they struggle to access healthy food include:

- Healthy food is too expensive in my community
- I don't have time to buy or prepare healthy food
- I don't know how to find food pantries and other sources of free food

(CHNA, page 79)

### Secondary Priorities: Education and Employment

Stakeholders and Community Chat participants identified the need for interventions that close gaps in educational outcomes and the quality of employment in low-income or racial and ethnic minority populations (CHNA, pages 11-12). Education and employment significantly impact people's health, well-being, and quality of life.

# Community assets

## Potentially Available Resources

On August 11, 2021, COHIT reconvened with the original stakeholder group. We reviewed progress on the CHNA, presented data, and asked for input on community assets that could help address identified needs.

Community Assets discussed at 2<sup>nd</sup> Stakeholder meeting included:

### Access to Education

- Langston University is using some of its COVID relief dollars toward loan forgiveness.
- Metro Tech and career techs are continuing to expand and are experiencing higher enrollment. Career techs are a valuable resource for people who are seeking to change careers or obtain more education to further their careers.
- Education about how to navigate insurance and health care needs to happen during middle and high school, in addition to traditional nutrition, health education, etc.

### Access to Health Care

- Collaborations among healthcare organizations and community non-profits are a tremendous asset in Oklahoma County, including COHIT's partnership and the collaborations that formed in response to the COVID-19 pandemic.
- The group discussed interventions related to COHIT's desire to take a health equity approach to the CHNA and implementation plans

### Access to Employment and Quality Jobs

- Career techs were mentioned as an asset to the community to reach those who need to enhance their job skills and employment opportunities.
- The group acknowledged that people receive information differently, whether via radio, text, social media, or other avenues.
- The group also discussed reaching out to adolescents to explore careers.

### Access to Healthy Food

- The Regional Food Bank is trying to work to end hunger by addressing the root causes, through partnerships, which relates back to the COHIT focus on the social determinants of health, including access to education, transportation, employment, etc.
- Recommendations for interventions included collaborations among organizations to avoid overlap or duplication, to identify and address gaps and resources, and to eliminate territorial thinking.

# Strategic implementation plan

Using the data collected in the CHNA, the Community Health team worked with community partners and hospital leadership to identify the health priorities for the implementation strategy. This process included an evaluation of the assets and programs already present in the community, a determination of which needs SSM is best equipped to address, the selection of evidence-based interventions that SSM can support to make a measurable impact in the chosen health priorities.



## Priority 1

Access to Health care



## Priority 2

Access to Healthy Food



## Secondary Priorities

Education

Employment

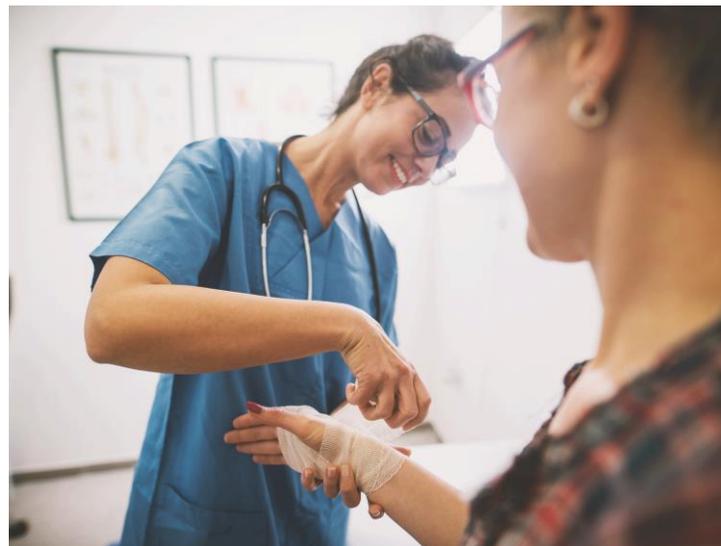


# Priority 1:

## Access to Care

### Background

Financial barriers and lack of insurance were the most significant barriers to accessing care identified during the CHNA. In Oklahoma County, the hypertension mortality rate was above the national age-adjusted death rate, as was the percentage of people who use tobacco products. Regular and reliable access to health services can increase quality of life and detect and treat preventable health conditions.



### Action plan

- Increase **access to specialty services for the uninsured** by donating in-kind services in collaboration with the Health Alliance for the Uninsured
- Utilize the Health Alliance for the Uninsured's **Care Navigation** program to provide successful referrals to community organizations for vulnerable patients. This program is a central hub for basic health, vision, dental, and social services to improve individual health outcomes.
  - Provide training for the hospital Case Management team on how to utilize the program
  - Track the number of monthly referrals
- Increase **access to tobacco cessation resources** for hospital inpatients
  - Partner with the Oklahoma Hospital Association to train relevant hospital staff on effective techniques for counseling patients who use tobacco products
  - Train respiratory therapists to place electronic referrals to the Oklahoma Tobacco Quitline and track the number of monthly referrals
- Launch **Health Coaches for Hypertension** classes in eastern Oklahoma County. This is an eight-week course designed to improve hypertension self-management through group educational sessions and support offered by a trained health coach.
  - Conduct one cohort per quarter
  - Report quarterly program outcomes
- Provide community-based organizations with financial support for their work in addressing access to care in Midwest City and the larger eastern Oklahoma County area

# Priority 1: Access to Care

## Community partners

- Health Alliance for the Uninsured
- Oklahoma Hospital Association

## Supporting resources

- Clemson University's Health Coaches for Hypertension curriculum
- Oklahoma Tobacco Quitline

## Evidence-based interventions

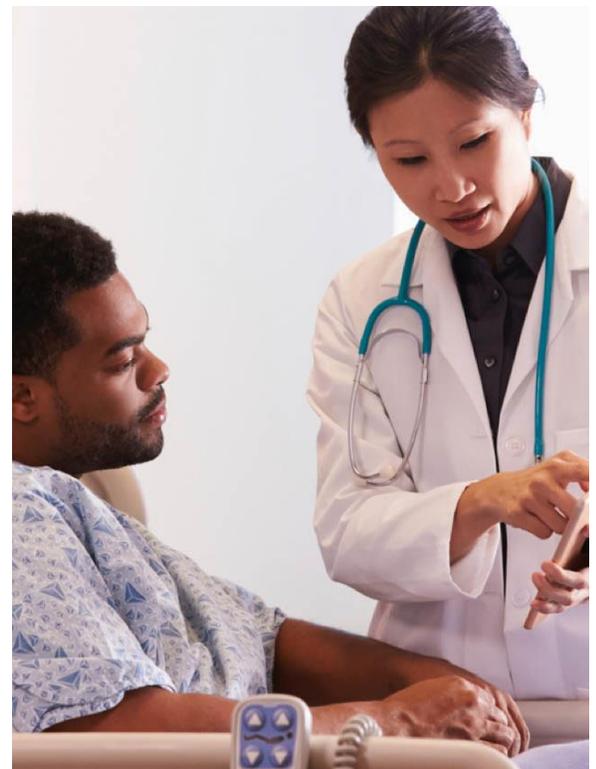
- Health Coaches for Hypertension is [named as an evidence-based program](#) by the National Council on Aging's Center for Healthy Aging
- HAU's Care Navigation program aligns County Health Rankings' [recommendations for patient navigator strategies](#)
- Tobacco Quitlines are a practice [recommended](#) by the U.S. Department of Health and Human Services

## Health goals

- Decrease the cardiovascular disease mortality rate in Oklahoma County from 281 per 100,000 (2016-2018 average, see page 8 of CHNA)
- Decrease the hypertension mortality rate in Oklahoma County from 53 per 100,000 (2016-2018 average, see page 50 of CHNA)
- Decrease the percentage of adults in Oklahoma who smoke from 18.9% (2019, see page 47 of CHNA)

## Objectives with performance measures

- Baselines and performance measures to be identified in 2022



# Priority 2: Access to Healthy Food



## Background

14% of Oklahoma County residents are food insecure. Food insecurity has an impact on a community's socioeconomic and health status. A healthy diet is difficult without access to nutritious food.

## Action plan

- Establish a **Food Pharmacy** to serve hospital inpatients. The Food Pharmacy program is a partnership with Regional Food Bank of Oklahoma, where the hospital provides a food box with enough nonperishable food to prepare 16 meals for patients who are identified as food insecure.
- Support a **Backpacks for Kids program** for a public school located in a vulnerable area of eastern Oklahoma County. Regional Food Bank of Oklahoma's Backpacks for Kids program provides children with food access issues food for the weekends when the schools cannot feed them.
- Support a **Meals on Wheels** route in Midwest City or Choctaw by providing food prep and volunteers. This program provides homebound seniors in eastern Oklahoma County with nutritious meals daily. The hospital will track monthly number of meals delivered, staff time, and misc. expenses.
- Provide community-based organizations with financial support for their work in addressing food insecurity in Midwest City and the larger eastern Oklahoma County area

# Priority 2: Access to Healthy Food

## Community partners

- Oklahoma Regional Food Bank of Oklahoma
- Meals on Wheels
- Mid-Del School District

## Supporting resources

- Sodexo
- Mission Action Team
- Inpatient Case Management
- SSM Health St. Anthony Foundation

## Evidence-based interventions

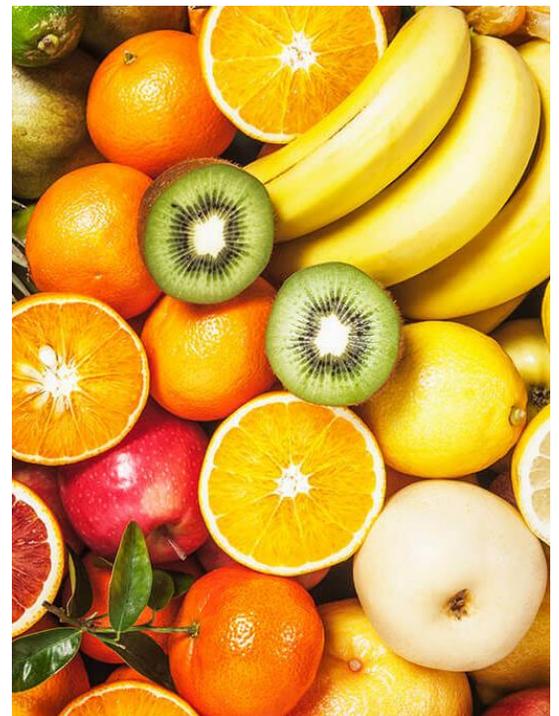
- Food Pharmacies help patients achieve and maintain a [healthy weight and help them live longer](#), as indicated by the United States Departments of Agriculture and Health and Human Services.
- Programs such as Meals on Wheels [positively impact](#) the health, well-being, and social connectedness of home-bound seniors, as stated in a study by Brown University.

## Health goals

- Decrease the heart disease mortality rate in Oklahoma County from 22.9 deaths per 100,00 (2016-2018, see page 50 of the CHNA)
- Increase the percentage of Oklahoma County residents who have access to healthy food for their family (see page 78 of CHNA)

## Objectives with performance measures

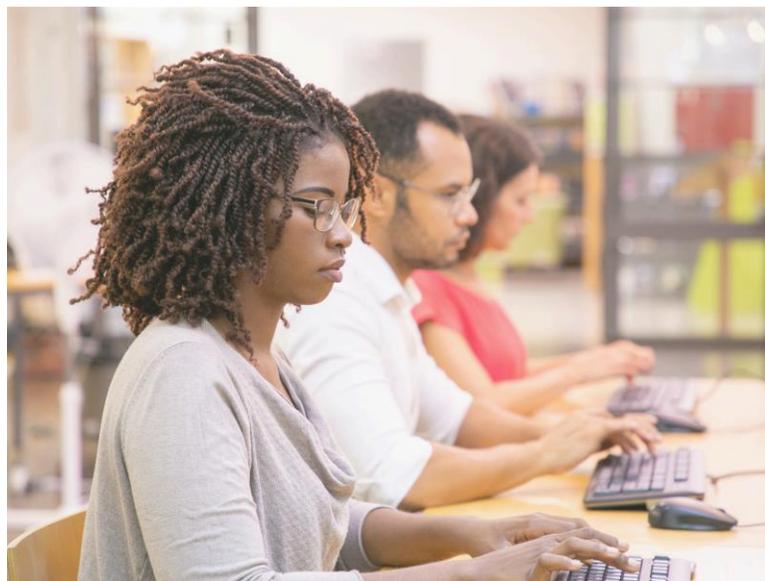
- Baselines and performance measures to be identified in 2022



# Secondary Priorities: Education & Employment

SSM Health is a proud member of the Healthcare Anchor Network. Members of the Healthcare Anchor Network commit to use their role as an “Anchor Institution” in their community to address the structural disparities that affect equitable health outcomes.

In 2022 the entire SSM Health system, including St. Anthony Hospital - Midwest, will begin to formulate a strategy to support the creation of equitable employment opportunities for marginalized community members. Local health ministries will determine whether to begin with a strategy focused on supply chain practices (making strategic purchasing decisions that support local and minority-owned/operated businesses) or job-training and hiring practices that increase access to meaningful employment in historically underserved segments of our local community. St. Anthony Hospital - Midwest looks forward to participating in the Anchor Network strategy and believes that it presents an opportunity for a systemic response to the education and employment priorities identified in the Oklahoma County CHNA.



# Overarching priorities

## Social determinants of health (SDoH)

The social determinants of health are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. Examples of these factors include safe and affordable housing, access to quality education, public safety, availability of healthy foods, accessible health care services, and positive social support systems.

Research shows that the SDoH can be more important than healthcare or lifestyle choices in influencing health. For example, numerous studies suggest that SDoH accounts for between 30-55% of health outcomes. In addition, estimates show that the contribution of sectors outside health to community health outcomes exceeds the contribution from the healthcare sector. By applying what we know about SDoH, we can not only improve individual and community health but also advance health equity.

The primary data collection tools used in the CHNA were rooted in questions regarding SDoH. This health equity lens was used when prioritizing health needs and informed the development of this implementation strategy.

## Health equity

Equity is defined as “the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically” (World Health Organization, 2016). As a Catholic health ministry, we believe healthcare is a fundamental human right. Interventions to address health disparities need to be effective and sustainable, focused on empowering those experiencing inequities.

A characteristic common to groups that experience health inequities – such as poor and marginalized persons, racial and ethnic minorities, and women – is a lack of political, social, or economic power. Research indicates a strong relationship between self-reported racism and discrimination with negative mental health outcomes and negative health-related behaviors.

Research also indicates that chronic stress from experiencing discrimination, such as racism, throughout the lifespan can lead to negative health outcomes. Those outcomes are seen even after controlling for differences such as socioeconomic status and access to adequate healthcare. The effects can include:

- Higher blood pressure
- Lower immune function
- Lower rates of exercise and social support
- Higher rates of infant mortality

