

Pathways for a Healthier You



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# Community Partners participating in the Health Needs Assessment/Health Improvement Plan

**ASCOG** 

Bray-Doyle Public Schools

Cameron University - Duncan

Central High Public Schools

Town of Central High

City of Comanche

City of Duncan

City of Marlow

Comanche Public Schools

**Duncan Banner** 

**Duncan Chamber of Commerce** 

**Duncan Family Care** 

**Duncan Medical Associates** 

**Duncan Police Department** 

**Duncan Public Schools** 

Duncan Regional Hospital Foundation

**Duncan Regional Hospital** 

Eastern Oklahoma Family Services

**Empire Public Schools** 

Gillispie Counseling Services

Jefferson County Department of Health

Jefferson County Hospital

Jefferson County Rural Health Clinics

Marie Detty Youth and Family Services

Marlow Chamber of Commerce

Marlow Cumberland Presbyterian Church

Marlow Lions Club

Marlow Public Schools

Marlow Review

Oklahoma Family Network

Pathways to Healthy Living

Red River Technology Center

Sooner Success-Stephens/Jefferson

Counties

Stephens County Department of Health

Stephens County Department of Human

Services

**Stephens County Emergency** 

Management

Speedy G's - Velma

Taliaferro-Lawton

The Chickasaw Nation

First Baptist Church - Marlow

The First National Bank of Velma

The Simmons Center

Town of Bray-Doyle

Town of Empire City

Town of Velma

United Way of Stephens County

Velma-Alma Public Schools

Waurika Chamber of Commerce

Wichita Mountain Prevention Network

### **Stephens County Community Health Needs Assessment (CHNA)**

#### **COMMUNITY DESCRIPTION**

Located in Southwest Oklahoma, Stephens County was formed in 1907 in tandem with Oklahoma's official recognition as a state and is named for politician John H. Stephens, who supported Oklahoma's push for statehood. The centrally located town of Duncan is the county seat. Measuring 27 miles from north to south and 33 miles east to west, Stephens County encompasses 891 square miles of land. It lies along the historic Chisholm Trail where cattle were driven from ranches in Texas to railheads in Kansas during the late 19th century. Early on, Duncan prospered with cotton as the main crop. The oil industry quickly brought greater prosperity to Duncan during the 1920s. Stephens County1s oil fields became and remained Oklahoma1s highest-producing area until the 1980s.

Although rich in history and oil, Stephens County has not been rich in health. In recent years, local partners have identified a need for change. During the spring of 2012, the Stephens County Health Department and Duncan Regional Hospital collaboratively engaged community partners and advocates to assess the health of Stephens County through a comprehensive study.

A committee of individuals who encompassed the diversity Stephens County was formed. The Pathways to Healthy Living was comprised of business and industry, local government, coalitions, education, community and civic organizations, public health, healthcare, and other entities working together. Committee members represented the communities of Bray, Central High, Comanche, Duncan, Empire, Marlow, and Velma. With the addition of Jefferson County hospital under the Duncan Regional Hospital umbrella, the communities of Waurika, Ryan, and Ringling participated in the most recent Community Health Needs Assessment and Health Improvement Plan.

The committee works with common goals and a vision statement to reflect the real progress and personal accountability they hope residents and the counties as a whole will embrace. This vision will steer future efforts to build richness in health.

During the first quarter of 2019, representatives from Stephens and Jefferson Counties met to identify strategic issues from the data compiled during the 2018 Community Health Needs Assessment. Items were prioritized and ranked by community leaders, stakeholders, lay members, and the general public. Those in attendance embraced the vision to move Stephens County forward toward a healthier community.

#### PATHWAYS TO HEALTHY LIVING MISSION

Develop a region where citizens are inspired to live a safe and healthy life while maximizing resources and partnerships that promote the advancement of physical, mental and spiritual health.

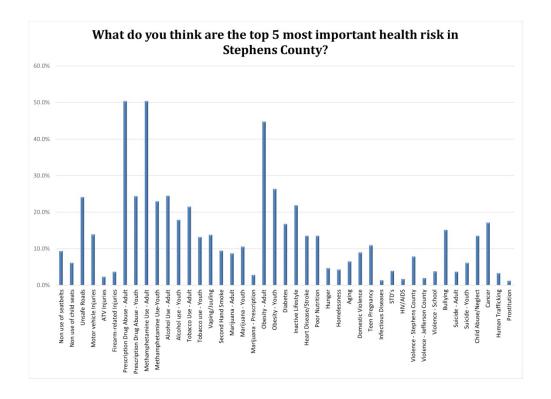
#### PATHWAYS TO HEALTHY LIVING VISION

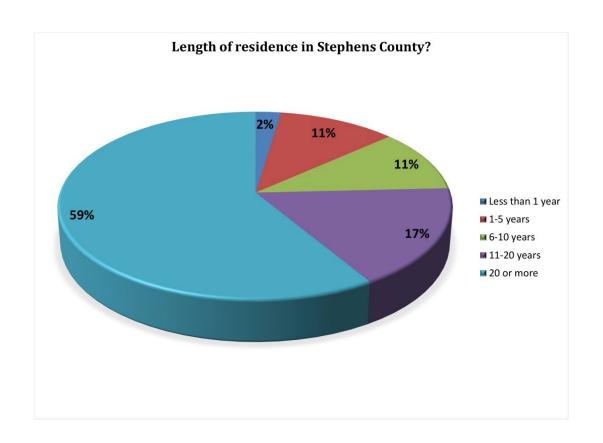
Evoke, Engage, Encourage ... better health in everyone.

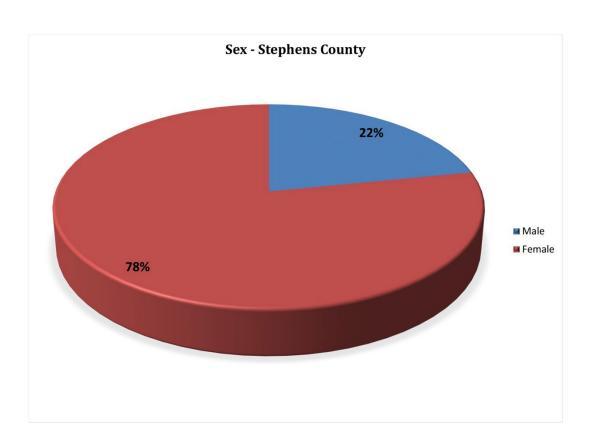
#### **METHODOLOGY**

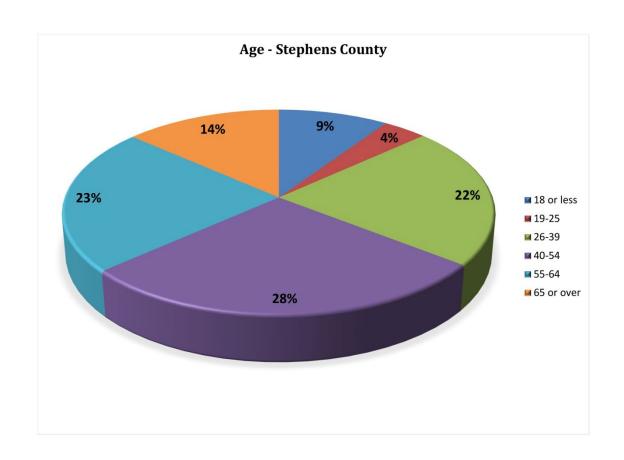
The community MAPP (Mobilizing for Action through Planning and Partnerships) Coalition was formed in partnership with the Stephens County Health Department and Pathways to Healthy Living board along with other key stakeholders in the community. This collaborative effort began in April 2012. Multiple agencies started to meet monthly with the goals of creating a community needs assessment and formulating a community health improvement plan. Data was identified through state and existing local sources, focus groups, surveys, and asking key stakeholders. Healthy Communities Institute, State of the State Health Reports, and County Health Profiles were also used. City officials, citizens, county commissioners, and other key individuals in the community were invited to listening sessions to identify perspectives and needs.

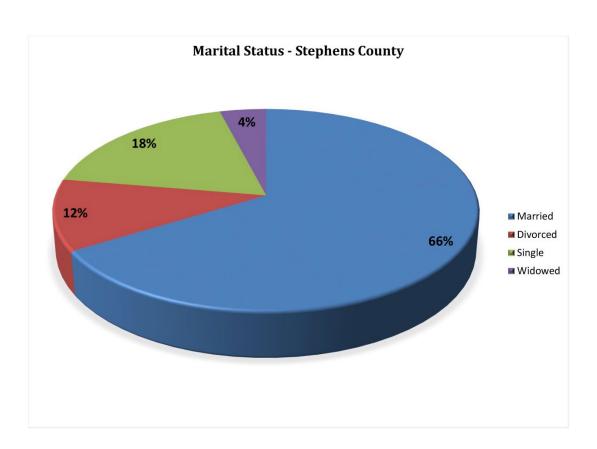
#### **ASSESSMENT**

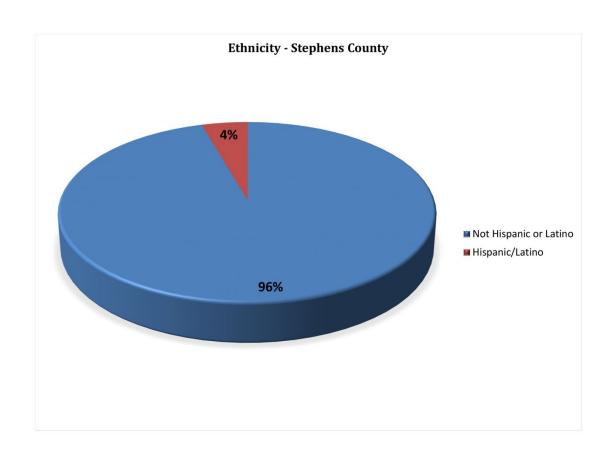


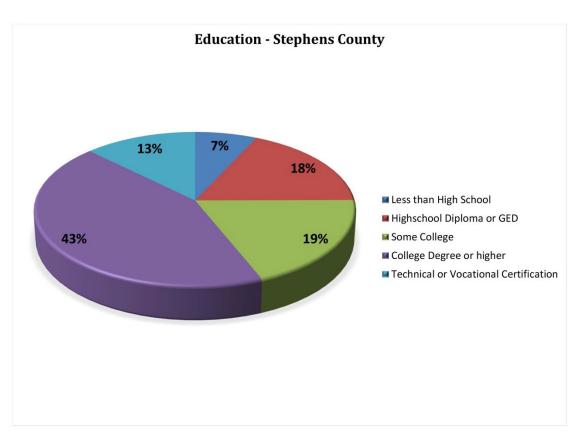


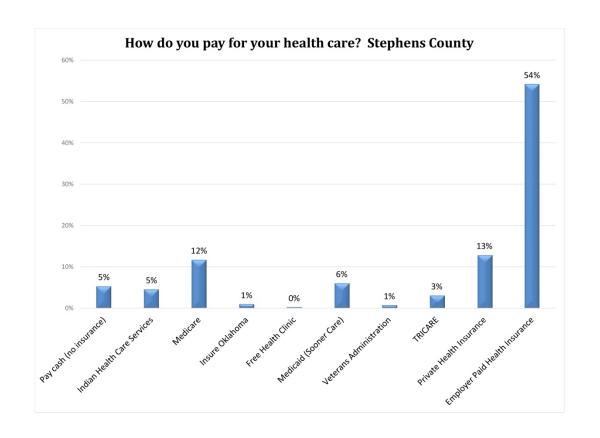


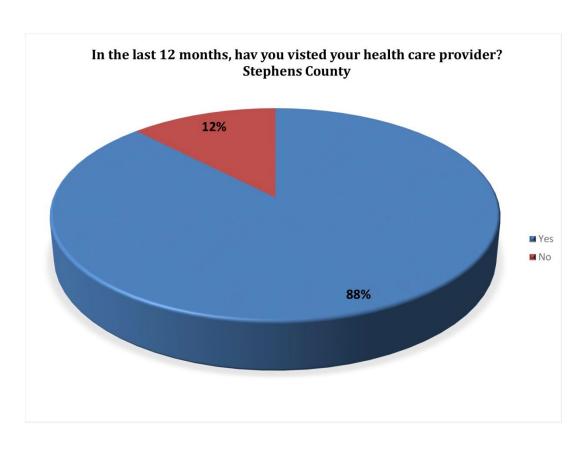


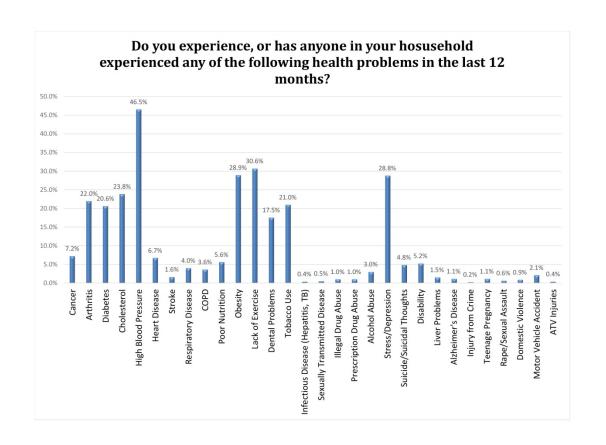


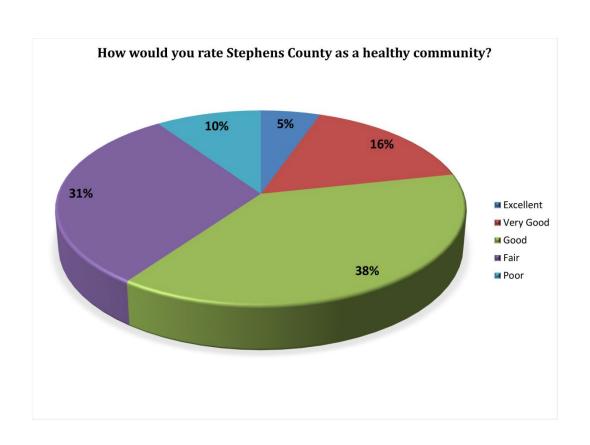


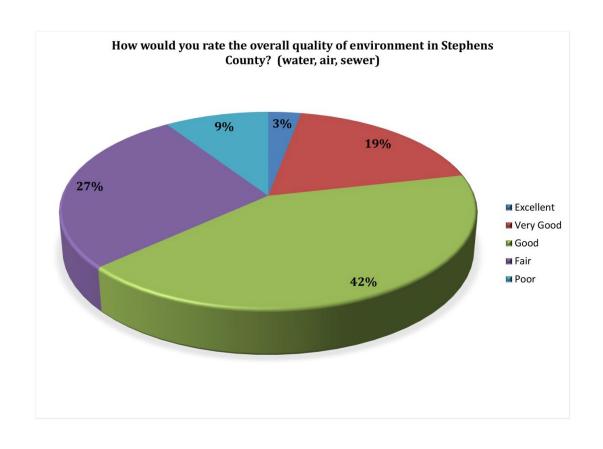


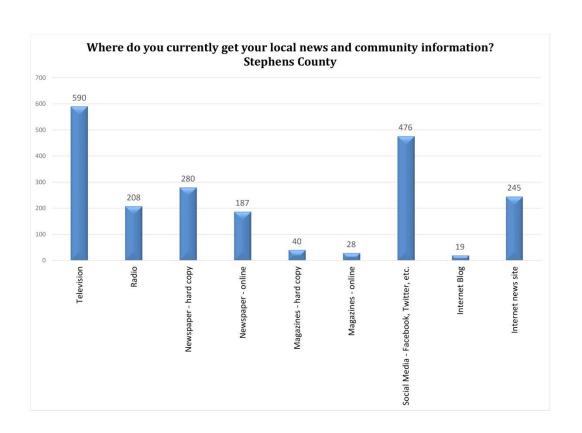


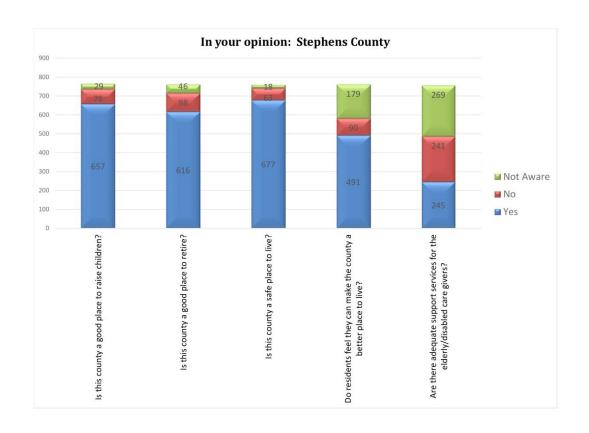


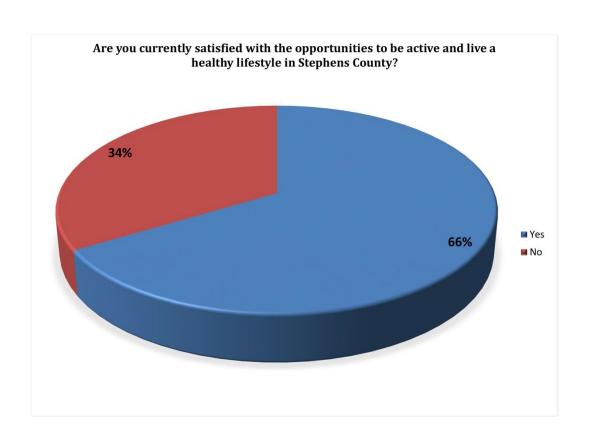


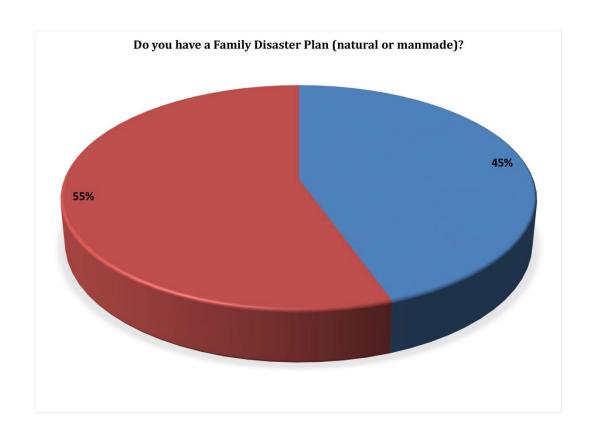


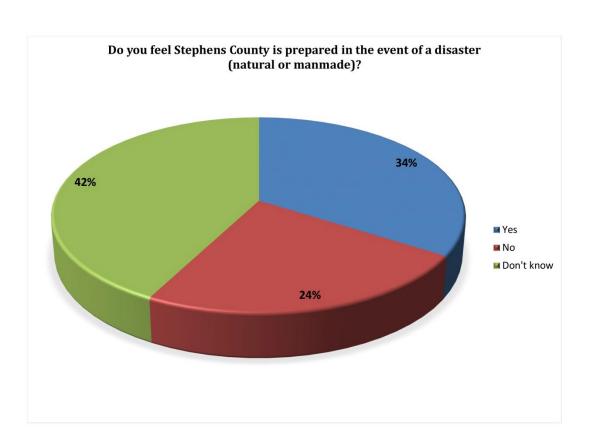












### **Jefferson County Community Health Needs Assessment (CHNA)**

#### **COMMUNITY DESCRIPTION**

Jefferson County is located in SW Oklahoma, and according to the 2010 census, the population was 6,472 In 1912 Waurika was elected to be the county seat. The county was created at statehood and named in honor of President Thomas Jefferson. The county has a total area of 774 square miles.

The Waurika vicinity is home to all of the county's properties that are in the National Register of Historic Places, except for the Twin Villages site. These are the First Presbyterian Church (NR 02000175), the Jefferson County Courthouse (NR 84003065), the Rock Island Passenger Station (NR 02000173), and the State Highway 79 Bridge (NR 96001518) across the Red River. From 1906 to 1912 the Hastings Baptist College operated in the town of Hastings. The school relocated to Mangum as the Southwest Baptist College. Waurika's Chisholm Trail Historical Museum, which disseminates the trail's regional and local history and Waurika Lake are county attractions.

As of the census of 2000, there were 2,716 households out of which 29.20% had children under the age of 18 living with them, 55.60% were married couples living together, 9.20% had a female householder with no husband present, and 31.40% were non-families. 28.80% of all households were made up of individuals, and 15.40% had someone living alone who was 65 years of age or older. The average household size was 2.38, and the average family size was 2.92.

In the county, the population was spread out with 24.00% under the age of 18, 7.20% from 18 to 24, 25.40% from 25 to 44, 23.30% from 45 to 64, and 20.10% who were 65 years of age or older. The median age was 40 years. For every 100 females, there were 94.70 males. For every 100 females age 18 and over, there were 93.80 males.

The median income for a household in the county was \$23,674, and the median income for a family was \$30,563. Males had a median income of \$25,195 versus \$16,589 for females. The per capita income for the county was \$12,899. About 16.30% of families and 19.20% of the population were below the poverty line, including 23.30% of those under age 18 and 18.40% of those age 65 or over.

While rich with history, Jefferson County has much opportunity to improve its overall health. Jefferson County ranks among the lowest in the state for mortality, heart disease, diabetes and fruit, and vegetable consumption. Through the process of a community health needs assessment and in collaboration with the Jefferson county health department, local public schools, and community leaders, Pathways has developed a community health improvement plan to prioritize and address these and other health priorities.

#### **METHODOLOGY**

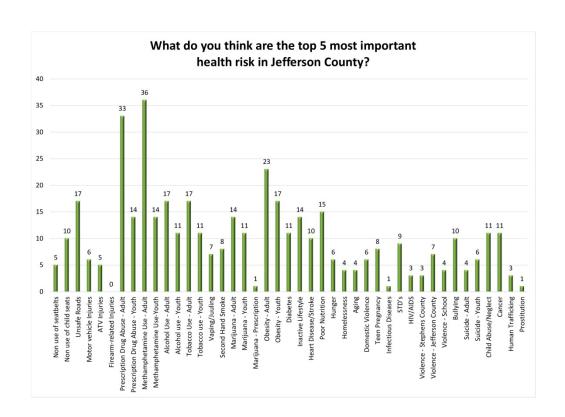
Jefferson County Hospital hosted four community meetings between May 12, 2015, and June 16, 2015. The Oklahoma Office of Rural Health facilitated these meetings. Summaries of the information presented at each meeting are included below in chronological order.

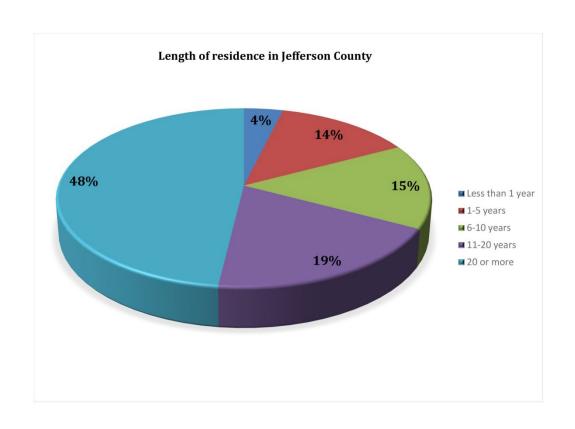
Community members in attendance at these meetings included:

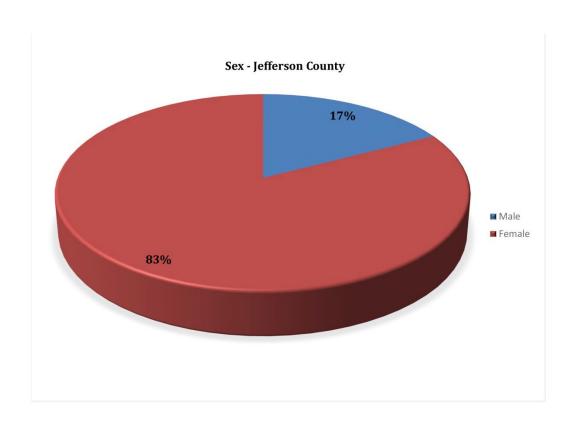
Jefferson County Health Department
Waurika Public Schools
Local bankers
Local business owners
Retired individuals
Waurika newspaper
Local pastor
Waurika Chamber of Commerce

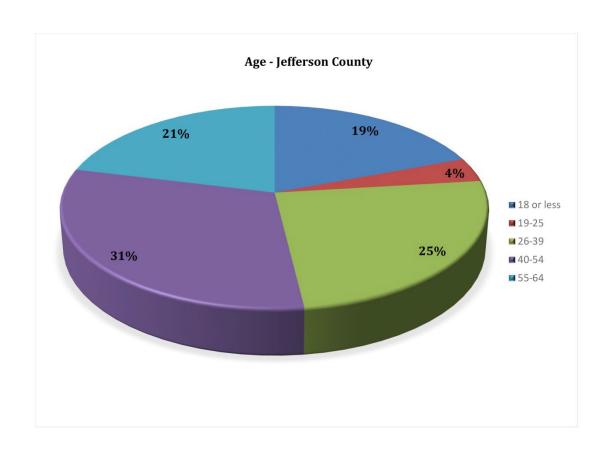
Average attendance at the community meetings was 15-20 community members. Two community meetings were incorporated as part of the local Chamber of Commerce meeting. Community members were sought for their deep understanding and overall concern of their local community. Representatives from the public health sector were included to provide insight into what they see from a public health perspective of community needs.

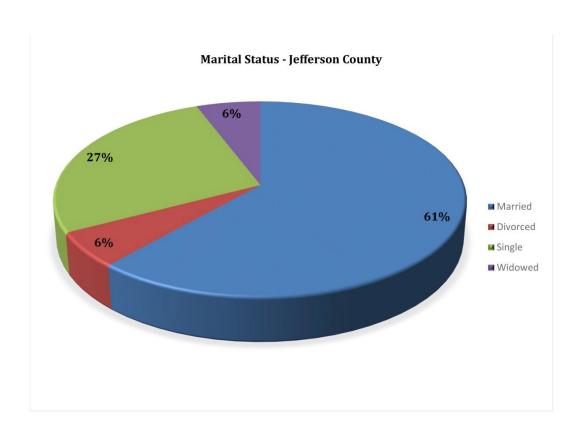
#### **ASSESSMENT**

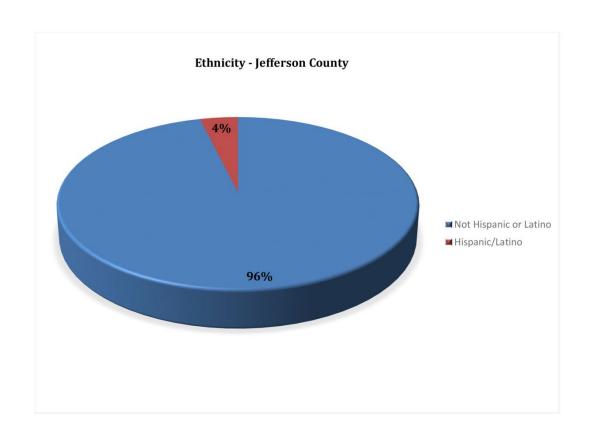


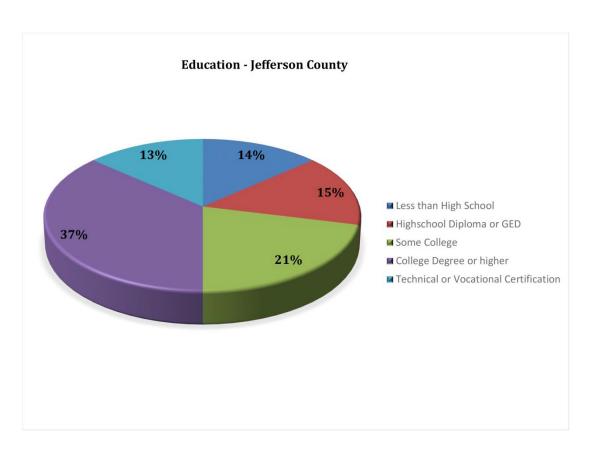


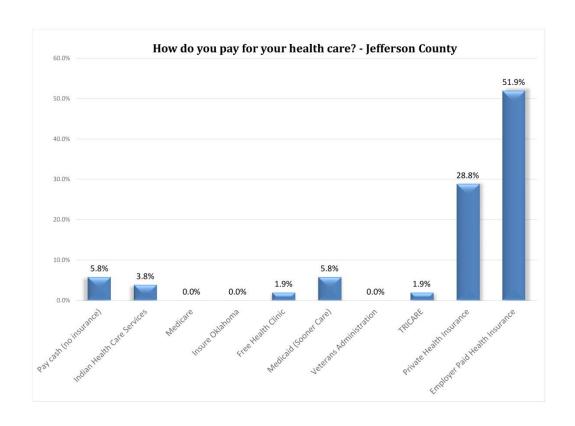


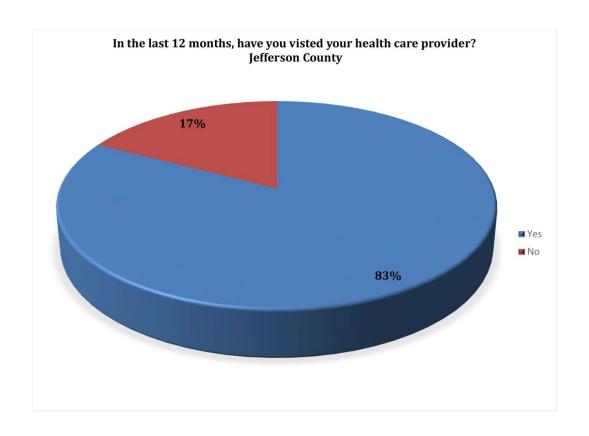


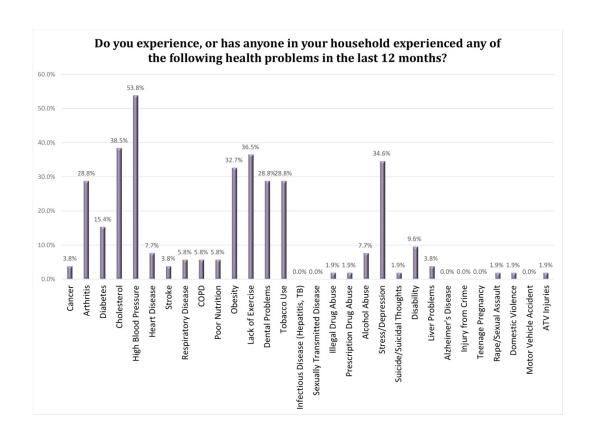


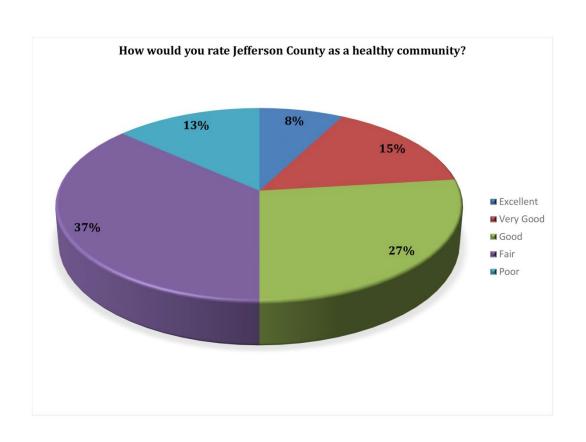


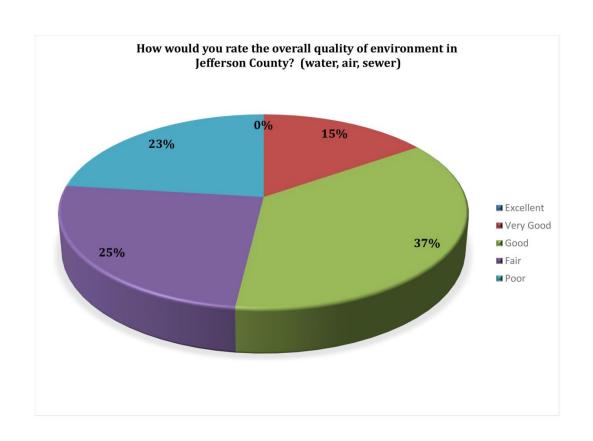


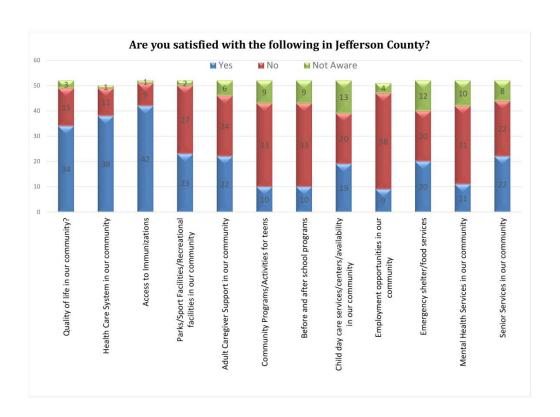


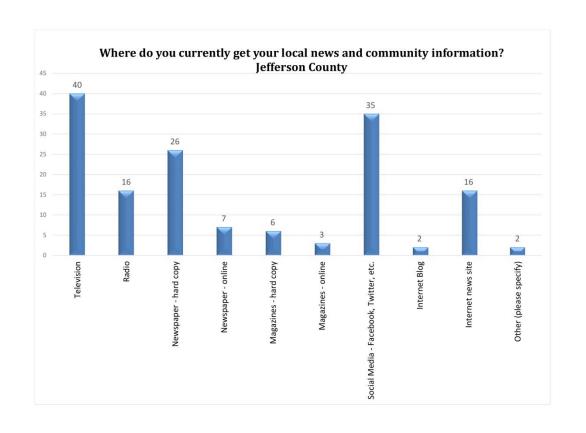


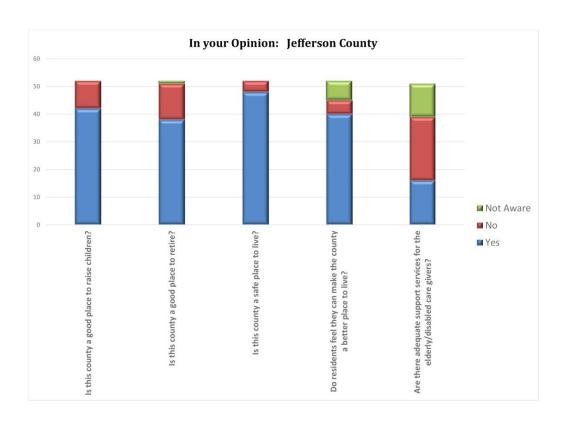


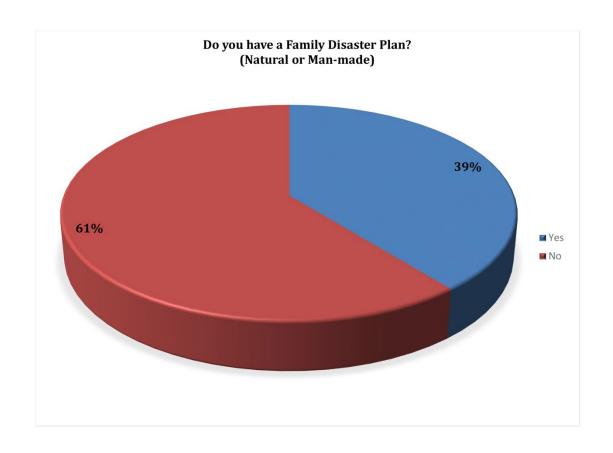


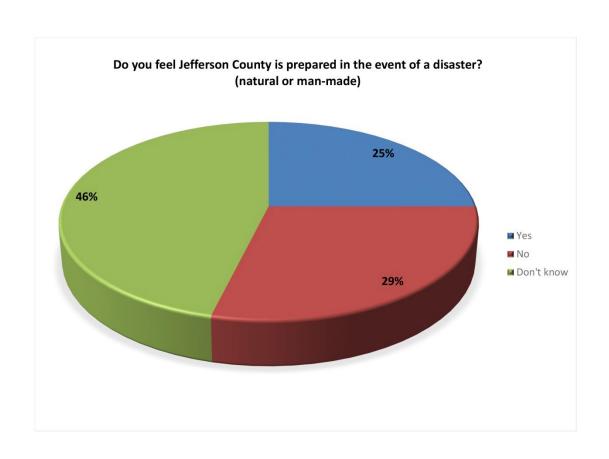












# STEPHENS COUNTY AND JEFFERSON COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

#### **Overview of CHIP Purpose and Process**

A CHIP is intended to serve as a vision for the health of the community and a framework for organizations to use in leveraging resources, engaging partners, and identifying their own priorities and strategies for community health improvement. The goal is that with constant and focused effort, a wide range of public health partners and stakeholders engaged in assessment, planning, and action will be able to document measurable improvements in the selected health priorities in the upcoming years. This CHIP is in no way meant to detail all of the health issues of our counties, nor is it able to offer information on all of the excellent programs and initiatives that are taking in our communities. This Community Health Improvement Plan (CHIP) is, however, an action-oriented strategic plan that outlines the priority health issues recognized for Jefferson and Stephens Counties from the 2018 Community Health Needs Assessment. Its main intention is to provide an overview of how these issues will be addressed in the next three years.

#### **Prioritized Needs**

#### The top four priorities were identified as:

- 1. Behavioral Health/Substance Abuse
- 2. Healthy Living (Heart disease, Physical Activity, Healthy foods)
- 3. Safety/Injury Prevention
- 4. Cancer Awareness/Education

## **Priority Areas Detailed Plan**

#### BEHAVIORAL HEALTH/SUBSTANCE ABUSE

#### **Indicator 1: Community Involvement/Awareness**

- Increase level of community involvement and awareness to address behavioral/mental health and substance use/abuse in Stephens and Jefferson Counties.
  - # of partners involved to address behavioral/mental health and substance use/abuse.
  - Increase number of partners collaborating with Pathways BHC.
- Medication Disposal
  - # of pounds of disposed medication collected from drop boxes
  - Decrease number of Rx Drug incidents or deaths related to improper use.
  - Increase educational opportunities to communities by 3 per year
- Quarterly provide education to the public via social media, newspaper, and/or community events.
  - # of events held / # of media spots
  - 4 media spots per year or events held.

#### Indicator 2: Youth MH/Substance Abuse

- Continue to increase community based referral systems in Stephens County through various local mental health providers
  - # of youth referrals
- Continue to increase access of mental health services to youth in Stephens County through various providers
  - Update BH Resource Directory by end of first year of CHIP
- Continue developmental guidance programs to address MH and substance abuse
  - # of schools services provided
  - Increase the # of Lives touched

- Provide (QPR) suicide prevention training to health care providers, schools, and other lay members of the community.
  - # of individuals trained
  - Increase awareness of suicide prevention in Stephens County.
- Reduce number of offsite alcohol sales to minors from 22% to 20%.
  - # of Compliance Checks
  - Decrease number of youth who report the consumption and purchase of alcohol before age 21.
  - WMPN-Resume OPNA Fall 2019

### **Indicator 3: Physician Engagement**

Host 101 training to local physicians and health care providers on prescription drug abuse and strategies to prevent.

- # of providers trained
- Increase awareness and educate on Mental Illness and support interventions.

#### Indicator 4: Adult/Youth MH First Aid

MH Nurse to conduct MH First Aid classes to community partners including physician offices, schools, other behavioral health specialists and the public.

- # of people trained
- Increase awareness and educate on Mental Illness and support interventions.

#### Indicator 5: Tobacco/ENDS/Marijuana Use Prevention

Address and provide education regarding illegal use of marijuana and prevention of youth access

- # of educational opportunities
- Decrease illegal use of marijuana by youth.

Promote the use of the Oklahoma tobacco quit line in health care settings.

- # of Promotional materials distributed
- Increase number of callers to the Oklahoma Tobacco Quit line.

Tobacco Treatment Education to Solutions Physician Practice Management and DRH partners providers.

- # of providers trained
- Increase number of callers to the Oklahoma Tobacco Quit line

#### **HEALTHY LIVING**

#### **Indicator 1: Obesity**

Increase the number of certified healthy businesses, campuses, communities, congregations, early childhood centers, restaurants, and schools from 30 to 40, in any combination of sectors, by 2021.

**Measure:** Certified Healthy List

Outcome: Increased number of organizations who encourage healthy lifestyles within the

workplace

#### **Indicator 2: Physical Activity**

Partner with multiple organizations to promote and sponsor family friendly activities that promote physical activity.

Measure: BRFSS Data; State of the County Health Reports

Outcome: Increase the number of Stephens County and Jefferson County residents who are

physically active

- Partner with DRH Health Foundation and The Simmons Center to incorporate a Kid's Marathon to the annual Stampede the Trail 5k/Half Marathon event.
- Sponsor and volunteer at 5k events in both Stephens and Jefferson Counties.
- Through social media avenues, provide education regarding the importance of daily physical activity.
- Provide educational material regarding physical activity to schools when conducting cooking classes etc.

#### **Indicator 3: Fruit and Vegetable Consumption**

Actively promote in Stephens county and Jefferson county the importance of fruit and vegetable intake and educate where to find such food and how to prepare.

Measure: BRFSS, State of the County Health Report

**Outcome:** Increase awareness and consumption of fruits and vegetables among residents in Stephens and Jefferson Counties

■ Increase the number of "healthy eating" events in elementary schools from 2 to 4 a year.

Measure: Event attendance

Outcome: Increase awareness and consumption of fruits and vegetables among residents in

Stephens County

Promote Farmers Markets in Stephens County and Jefferson County

**Measure:** Continuation of markets

**Outcomes:** Increase access of fresh fruits and vegetables and increase fruit and vegetable consumption among school age children.

■ Partner with a minimum of three schools in Stephens and Jefferson counties to have a "container" garden.

#### **Indicator 4: Child Health**

Work with community partners to educate communities about the importance of immunizations and well child health checks

Measure: Immunizations provided

**Outcome:** Increased opportunities for people to receive immunizations

Partner with Stephens County Health Department to educate communities about the availability of immunizations.

Measure: Increase of well child checks

Outcome: Increase awareness of the importance of well child checks

Partner with Stephens County Health Department and healthcare providers to establish a campaign highlighting the importance of annual well child checks.

#### Cardiovascular Health

- Partner with DRH Health Foundation to be a part of their 3 community health fairs (DRH campus (September); Douglas Senior Center (January); Jefferson County (April)).
- Increase CPR training in Stephens and Jefferson counties.

#### SAFETY/INJURY PREVENTION

The leading causes of death in Stephens County were heart disease, cancer, and unintentional injury. Unintentional injuries increased from 64.4% to 77.5% which gives Stephens County a grade of F. Stephens County emergency preparedness teams partner with the Injury Prevention Services through the OSDH to educate the public on preparing for and how to avoid unintentional injuries. The mission of the Injury Prevention is to improve the health of Oklahomans by working in collaboration with communities and stakeholders to identify injury problems, then developing, implementing, and evaluating environmental modifications, policy, and educational interventions.

# Goal 1: Define the problem for Stephens and Jefferson Counties among the top injury prevention topics.

- Partner with the Oklahoma State Department of Health Injury Prevention Service for baseline data.
- Research Injury Prevention needs for key public sectors. (Hospital/Fire/Police/Schools/etc.)

# Goal 2: Investigate the criteria and details/responsibilities of becoming aligned with SafeKids Oklahoma.

Establish Pathways SafeKids coalition by June 2020.

#### Goal 3: Increase public awareness of injury concerns and prevention topics.

- Produce a health promotion plan highlighting stats and prevention messages on topics monthly.
- Conduct health education presentations to civic organizations, churches, businesses, and schools. 10 per year.

#### Goal 4: Prevent injury related deaths in Jefferson and Stephens Counties.

- Childhood injuries:
- Conduct at least three car seat events yearly
- Conduct one bicycle rodeo in per county per year
- Conduct smoke alarm canvassing per county per year
- Unintentional injuries:
- Collaborate with partners to host one farm safety event per year
- Intentional injuries:
- Partner with other Pathways committees to help highlight injury impact (suicide, domestic violence, elder abuse, etc.)

#### Goal 5: Policy Review: Survey of relevant city /county injury related ordinances.

#### Cancer

Cancer was identified as the 6th major risk affecting Stephens County (18.6% of survey respondents). Cancer is the second leading cause of death across all age groups in Stephens County, earning the county grade of "D" for cancer deaths. Certain behaviors also increase risk, such as smoking, eating an unhealthy diet, or not being physically active. Breast, lung, colorectal and skin cancers are the leading cancer types in Stephens County. Increasing access to fruits and vegetables, providing opportunities for physical activity and helping smokers quit, as well as, educating about using adequate SPF protection when out in the sun are all areas of opportunity Pathways and our partners are working towards.

#### **Indicator 1: Cancer Screening and Education**

Partner with Cancer Centers of Southwest Oklahoma to promote early detection (billboards, media, promotional materials, events, etc.)

**Measure:** Number of media placements regarding prevention of cancer

Outcome: Increase early detection

Provide free cancer screenings through partnerships with Cancer Centers of Southwest Oklahoma and Duncan Regional Hospital

**Measure:** Number of participants attending events **Outcome:** Provide education and early detection of cancer diagnosis

# **Stephens County**

#### Summary Grade County

	Alzheimer's Disease Deaths	2005 B	2010 C	2015 B	2016 B	2017 B
	Cerebrovascular Disease Deaths		F	F	F	
	Chronic Lower Respiratory Disease Deaths	D	F			
	Diabetes Deaths	D	C	F	F	F
5	Heart Disease Deaths		F			
מ	Influenza/Pneumonia Deaths	C		C	С	В
Causes of Death						
	Intentional Injury Deaths	С			D	С
3	Malignant Neoplasm Deaths	D				D
	Nephritis Deaths	C	D	В	В	В
	Suicides	C		<b>F</b>	5	D
	Unintentional Injury Deaths	D	F	E	F	f
	Unintentional Poisoning Deaths	C	F	D	С	С
	Asthma Prevalence			E	D	F
	Colon Cancer Incidence (excluding rectum)	В	F	D		
2	Depression (Ever)			D	D	D
	Diabetes Prevalence			F	F	<b>(</b>
	High Blood Pressure (Ever)			D		F
	High Cholesterol Diagnosis (Ever)	450		В		D
-	Invasive Breast Cancer Incidence (female only)	D	В	В		
	Lung Cancer Incidence	D	D	F		
	Prostate Cancer Incidence	A	В	C		
Morranty	Infant Mortality	C	(F)	F	(F)	•
	Life Expectancy at Birth	NA	NA	NA	NA	
	Total Mortality	(F)	(F)	F	(F)	F
	Adverse Childhood Experiences (3 or more)				NA	
	Binge Drinking			В	A	A
	Current Smoking Prevalence (Adults)			E		
	Dental Visits (Adults)				F	
	First Trimester Prenatal Care	D		C	D	C
	Frequent Poor Health Days (≥14 days in the past			D	D	D
	30 days) that Limited Usual Activities Frequent Poor Mental Health Days (≥14 days in			C	C	D
	the past 30 days) Frequent Poor Physical Health Days (≥14 days in				F	
	the past 30 days) Good or Better Health Rating			F		
eha	Heavy Drinkers			A	A	
	Low Birth Weight	C	C	C	C	D
Risk Factors & Behav						
	Minimal Fruit Consumption (<1/day)					D
	Minimal Fruit Consumption (<1/day) (Historical)			D		
	Minimal Vegetable Consumption (<1/day) Minimal Vegetable Consumption (<1/day)					D
	(Historical)			С		
	No Physical Activity			<b>E</b>	•	
	Obesity (Adults)			D	D	
	Seniors Influenza Vaccination			A	A	A
	Seniors Pneumococcal Vaccination			A	A	A
	Teen Births	C	D	F	F	(F)
	Usual Source of Care			C	С	C
Socio				C	D	D
:	No Insurance Coverage					

## **Jefferson County**

#### Summary Grade County

	Alzheimer's Disease Deaths	2005 B	2010 C	2015 D	2016	2017
	Cerebrovascular Disease Deaths		В		X	X
					X	8
	Chronic Lower Respiratory Disease Deaths					
5	Diabetes Deaths		D	С		
כפ	Heart Disease Deaths					
Causes of Death	Influenza/Pneumonia Deaths	D	F	NA	NA	NA
	Intentional Injury Deaths	NA	NA	NA	NA	D
	Malignant Neoplasm Deaths	F	F			
	Nephritis Deaths	C	D	NA	NA	NA
	Suicides	NA	NA	NA	NA	F
	Unintentional Injury Deaths	F	F	F	F	F
	Unintentional Poisoning Deaths	NA	NA	F	NA	NA
	Asthma Prevalence			(F)	D	D
	Colon Cancer Incidence (excluding rectum)	NA	D	NA		
1	Depression (Ever)			(F)	F	F
	Diabetes Prevalence			D	D	D
	High Blood Pressure (Ever)			(E)		
	High Cholesterol Diagnosis (Ever)			E		
Ė	Invasive Breast Cancer Incidence (female only)	C	A	c		
	Lung Cancer Incidence			C		
	Prostate Cancer Incidence		A	c		
	Infant Mortality	NA	NA	NA	NA	NA
HOLIGIELY	Life Expectancy at Birth	NA	NA	NA	NA	
	Total Mortality					
	Adverse Childhood Experiences (3 or more)				NA	-
					INA	
	Binge Drinking			A		A
	Current Smoking Prevalence (Adults)				X	
	Dental Visits (Adults)					
	First Trimester Prenatal Care  Frequent Poor Health Days (≥14 days in the past	F				D
	30 days) that Limited Usual Activities				F	F
	Frequent Poor Mental Health Days (≥14 days in the past 30 days)			F	F	<b>F</b>
aviors	Frequent Poor Physical Health Days (≥14 days in the past 30 days)			(E)	•	F
	Good or Better Health Rating				F	•
Be	Heavy Drinkers			A	A	A
	Low Birth Weight	С	D	F	С	F
Risk Factors & Bel	Minimal Fruit Consumption (<1/day)					F
	Minimal Fruit Consumption (<1/day) (Historical)			F		
	Minimal Vegetable Consumption (<1/day)					С
	Minimal Vegetable Consumption (<1/day) (Historical)			D		
	No Physical Activity			F	F	F
	Obesity (Adults)			F	F	
	Seniors Influenza Vaccination			В	С	В
	Seniors Pneumococcal Vaccination			В	В	В
	Teen Births				D	
	Usual Source of Care			D	D	С
Socio	No Insurance Coverage					