

Executive Summary

Saint Alphonsus Medical Center Baker City completed a comprehensive Community Health Needs Assessment that was adopted by their Board of Directors on June 5, 2023. The assessment analyzed patient outcomes, community health status, social influencers of health, and gathered input from community representatives and organizations.

After identifying and prioritizing community needs, SAMC-BC developed an implementation strategy for fiscal years 2024-2026 focusing on three key priority areas:

1. **Safe, affordable housing and homelessness**
 - Goal: Improve availability of attainable housing regardless of income
 - Target: Create at least 25 attainable housing units by June 2025
 - Strategy: Explore affordable housing development with partners like Northwest Housing Alternatives, GST Development, and LEAP Housing
2. **Access to affordable healthcare, including oral and vision health**
 - Goal: Improve healthcare access regardless of income and insurance status
 - Target: Provide healthcare access via transportation/mobile clinics to 225 uninsured/underinsured individuals by June 2025
 - Strategies: Support non-medical transportation services and explore expanding mobile clinic services
3. **Caregiver supports, including childcare and assistance for older adults**
 - Goal: Improve access to caregiver services regardless of income
 - Target: Provide early childhood education and childcare for at least 100 children/families by June 2025
 - Strategies: Support Baker YMCA for childcare services and explore Community Connections of Northeast Oregon services for older adults

The implementation strategy was approved by the Board of Directors on September 19, 2023, along with the related budget. It addresses the identified community needs while maintaining flexibility to adapt to changing circumstances.

Biggest Gaps in Service

1. **Provider shortages:** Baker County is designated as a health provider shortage area with approximately 65 primary care physicians per 100,000 individuals, which is much lower than the statewide average of 109 physicians.
2. **Mental health and substance use services:** CHNA respondents specifically reported insufficient mental health and substance use services in the area.
3. **Specialty care services:** The report indicates insufficient general and specialty health care services as reported by Baker County CHNA respondents.
4. **Oral health care:** Many residents lack adequate access to oral health care, and the region is considered a dental health professional shortage area.
5. **Preventative care access:** Baker County is below the state average for individuals reporting routine checkups with medical providers, and seniors receive fewer core preventative services compared to the state average.
6. **Transportation to medical appointments:** This was highlighted as a particular concern for older adults, who make up a higher percentage of the population in Baker County compared to the state average.

Greatest Barriers to Care

1. **Provider shortages:** Baker County is designated as a health provider shortage area with only about 65 primary care physicians per 100,000 people (compared to Oregon's 109 physicians per 100,000).
2. **Transportation challenges:** Lack of transportation to medical, dental, and vision appointments was repeatedly identified as a significant barrier, especially for older adults.
3. **Affordability:** Access to affordable healthcare was identified as one of the top three priority needs in the community assessment.
4. **Specialist availability:** Insufficient specialty healthcare services in the area force residents to travel for specialized care.
5. **Caregiver availability:** The report notes limited availability of caregivers, which particularly impacts older adults who need assistance accessing healthcare.
6. **Geographic challenges:** Being in a rural area (Baker City and surrounding Baker County) creates inherent access difficulties.
7. **Demographic factors:** The county has a higher percentage of seniors and people with disabilities (22.3% versus 14.4% statewide), creating additional demands on the healthcare system.
8. **Limited dental care access:** The region is considered a dental health professional shortage area.

The Unique Needs of the Community

1. **Demographics:**
 - Higher percentage of seniors (65+) compared to the state average
 - Lower percentage of young adults (18-39) than the state average
 - Higher percentage of residents with disabilities (22.3% compared to the state average of 14.4%)
 - Higher percentage of veterans (13.2% compared to Oregon's 7.9%)
 - Higher than state average Indigenous/Native American population, though still low overall
 - Much smaller Hispanic/Latino population compared to state average and neighboring counties
2. **Population changes:**
 - Recent growth due to domestic migration during the COVID-19 pandemic (2019-2021)
 - Minimal international migration (20 or fewer per year over the past decade)
 - Slightly decreased births per capita compared to statewide average
3. **Vulnerable populations with specific needs:**
 - Older adults: Transportation to appointments, healthcare availability, and caregiver access
 - Veterans: Navigation challenges with healthcare systems
 - People with disabilities: Higher poverty rates and specific accessibility needs
 - LGBTQIA+ community: Concerns about stigma, privacy in a small community, lack of support, and safe places (especially for youth)
4. **Housing challenges:**
 - Increasing home values affecting economically marginalized groups
 - Increased rent burden (more than 30% of income spent on housing)
 - Rising homelessness among both adults and students, with limited shelter capacity
5. **Caregiver needs:**

- Childcare that has become less affordable (increased expenses as percentage of household income)
- Limited availability of caregivers for the aging population

What the Hospital or CCO is Doing Well

1. **Community partnerships:** The hospital appears to have established relationships with various community organizations like Community Connections of Northeast Oregon, Baker YMCA, Baker School District, and potential housing developers.
2. **Community-based services:** Saint Alphonsus provides community services through the Saint Alphonsus Medical Group (SAMG) with specialties including women's health, pediatrics, family practice, urgent care, physical therapy, and orthopedics.
3. **Community health initiatives:** The hospital maintains a Community Health and Well-Being (CHWB) department that provides services like:
 - Community Health Worker Hub
 - Mobile clinical services
 - Faith Community Nurses
 - Catholic School nurses
 - Language access resources
 - Tobacco treatment specialists
 - Family Centers for new parents and families
 - Community outreach addressing social influencers of health
4. **Commitment to community investment:** The implementation strategy demonstrates the hospital's willingness to commit financial resources to address community needs (\$20-35k/year for each priority area).
5. **Health equity focus:** The hospital has adopted a health equity approach based on Robert Wood Johnson Foundation's definition, focusing on removing obstacles to health like poverty and discrimination.

Priorities

Priority 1: Safe, affordable housing and homelessness

Goal: Improve the availability of attainable housing for Baker County residents regardless of income status.

- **Target:** Increase the number of attainable housing units by at least 25 units by June 30, 2025.
- **Strategy:** Explore developing affordable housing with integrated social influencers of health (food, transportation, healthcare services)
- **Resources:** Up to \$20,000/year toward housing, plus in-kind support from CHWB Director
- **Focus Population:** People making 30-80% of the Baker County Area Median Income

Priority 2: Access to affordable healthcare, including oral and vision health

Goal: Improve access to affordable healthcare services for community members regardless of income and insurance status.

- **Target:** Provide healthcare access via transportation and/or mobile health clinics for at least 225 uninsured or underinsured individuals by June 30, 2025.
- **Strategies:**
 1. Support Community Connections of Northeast Oregon in providing non-medical transportation to healthcare appointments
 2. Explore extending the Ontario mobile clinic to serve Baker County

- **Resources:** \$20-30,000/year for transportation services, ~\$3,500/clinic for mobile services
- **Focus Population:** Uninsured/underinsured individuals, people with limited income, older adults, and those with disabilities

Priority 3: Caregiver supports, including childcare and assistance for older adults

Goal: Improve access to caregiver services for community members regardless of income.

- **Target:** Provide early childhood education and childcare for at least 100 children/families by June 30, 2025.
- **Strategies:**
 1. Support Baker YMCA in providing early childhood education and childcare
 2. Explore community services for older adults through Community Connections of Northeast Oregon
- **Resources:** \$35,000/year for YMCA operations, up to \$10,000/year for older adult caregiver supports
- **Focus Populations:** Families needing childcare and older adults, particularly those with limited incomes