

Executive Summary

Saint Alphonsus Medical Center Ontario (SAMC-O) completed a comprehensive Community Health Needs Assessment that was adopted by their Board of Directors on June 5, 2023. The assessment analyzed both secondary data on patient outcomes and community health status, as well as primary data collected from community representatives and organizations.

The CHNA identified three priority health needs for Malheur County, Oregon:

1. **Safe, affordable housing and homelessness** - The community faces significant challenges with housing costs, increased crowded housing, and rising homelessness.
2. **Access to affordable healthcare, including oral and vision health** - Barriers include cost of services, insurance challenges, lack of culturally appropriate services, and long wait times.
3. **Safe, reliable transportation** - Transportation remains a concern, particularly for the aging population.

For each priority area, SAMC-O has developed specific implementation strategies with measurable goals:

- For housing: Increase attainable housing units by at least 30 units by June 2025 through the BUILD Payette partnership.
- For healthcare access: Provide healthcare and social care services for at least 150 uninsured or underinsured individuals via mobile clinics by June 2025.
- For transportation: Provide non-medical rides for at least 100 individuals to/from healthcare appointments by June 2025 through a Rides to Wellness program.

The implementation strategy was approved by the Saint Alphonsus Health System Board on September 19, 2023, with a focus on serving Malheur County, Oregon, which has a diverse population with nearly 40% of residents being a race or ethnicity other than non-Hispanic white, and a higher percentage of Hispanic and Latino residents than the state average.

Biggest Gaps in Service

1. **Affordability barriers** - Cost of services was most frequently reported as a barrier to accessing needed health services.
2. **Insurance challenges** - Many residents face issues with lack of coverage or insufficient coverage.
3. **Cultural and linguistic barriers** - There's a significant lack of linguistically and culturally appropriate services and providers. This particularly affects immigrant populations and non-native English speakers, who report difficulties accessing services due to language barriers (Malheur County has twice the rate of limited English proficiency compared to the state average at 5.3%).
4. **Long wait times for appointments** - This was specifically mentioned as a barrier for both general healthcare and for veterans trying to access VA services.
5. **Dental care access** - Although the dentist-to-population ratio matches the state average, there are barriers including lack of providers accepting Medicaid/Medicare, long wait times, and costs including co-pays.
6. **Transportation-related barriers** - While not explicitly stated as a healthcare gap, transportation was identified as a significant barrier to accessing healthcare, particularly for the aging population who have less comfort driving, especially in bad weather.

7. **LGBTQIA+ inclusive care** - The report notes concerns from this community about access to inclusive care and privacy concerns in a small community when in clinical spaces.

Greatest Barriers to Care

1. **Cost of services** - This was most frequently reported by CHNA respondents as a primary barrier to accessing needed health or social services.
2. **Insurance challenges** - Many residents lack insurance coverage completely or don't have sufficient coverage for their needs.
3. **Lack of culturally and linguistically appropriate services** - With nearly 40% of residents being a race or ethnicity other than non-Hispanic white and a higher Hispanic/Latino population than the state average, this is a significant barrier. Malheur County has twice the rate of limited English proficiency compared to the state average (5.3% vs 2.6%).
4. **Long wait times for appointments** - This affects access to timely care for many residents.
5. **Transportation issues** - While the county has lower average travel times than the state overall, transportation remains a significant barrier, particularly for the aging population who have less comfort with driving, especially in bad weather.
6. **Lack of awareness of available resources** - This especially impacts immigrant populations and non-native English speakers.
7. **Fear related to immigration status** - Some individuals avoid seeking healthcare due to concerns about their immigration status.

The Unique Needs of the Community

1. **Demographic characteristics:**
 - Nearly 40% of residents are of a race or ethnicity other than non-Hispanic white
 - Higher number of Hispanic and Latino residents compared to the state average, with the fastest Hispanic and Latino population growth in Oregon
 - More youth (ages 17 and under) than the Oregon average
 - Nearly one in five residents is a senior citizen
 - Higher percentage of veterans (8.4%) compared to the state average (7.9%)
 - Higher rate of people with disabilities (15.4%) compared to the state average (14.4%)
 - Twice the rate of limited English proficiency (5.3%) compared to the state average (2.6%)
2. **Population and migration patterns:**
 - Experienced a 10.6% population increase, with the greatest growth between 2019-2021
 - Previously saw steady population decrease followed by an influx of new residents
 - Most new growth is likely due to migration within Oregon rather than international migration
 - Higher births per capita than the state average
3. **Community-specific concerns:**
 - Housing challenges including rising costs, decreased quality of housing stock, increased crowded housing
 - Increased cost of living
 - Concerns about crime and safety
 - Need for more translation services for Hispanic and Latino residents
 - Need for more representation of Hispanic and Latinos in public fields
 - Healthcare access challenges for veterans navigating VA services

- Privacy concerns for LGBTQIA+ residents seeking healthcare in a small community setting
- Transportation challenges, particularly for the aging population

What the Hospital or CCO is Doing Well

1. **Comprehensive medical services** through the Saint Alphonsus Medical Group (SAMG), including women's health, pediatrics, family practice, urgent care, physical therapy, and orthopedics.
2. **The Saint Alphonsus Health Alliance (SAHA)** - A physician-led clinically integrated network designed to align physicians, hospitals, and payers to improve care access, quality, and control costs.
3. **Community Health and Well-being (CHWB) department** which provides:
 - Community Health Worker Hub
 - Mobile clinical services
 - Faith Community Nurses
 - Catholic School nurses
 - Language access resources
 - Tobacco treatment specialists
 - Family Centers for new parents
 - Community outreach addressing social determinants of health

Priorities

Priority 1: Safe, affordable housing and homelessness

- **Goal:** Improve the availability of attainable housing for residents of Malheur County regardless of income status
- **Target:** Increase the number of attainable housing units by at least 30 units by June 30, 2025
- **Strategy:** Serve as the lead healthcare partner in BUILD Payette
- **Focus Population:** Individuals making 60% or less of the area median income and residents of Payette County

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 and social care services for at least 150 uninsured or underinsured individuals via mobile clinics by June 30, 2025
- **Strategy:** Provide mobile clinical services across Malheur, Payette, and Washington Counties
- **Focus Population:** Uninsured and underinsured individuals

Priority 3: Safe, reliable transportation

- **Goal:** Improve access to non-medical transportation for community members regardless of income and insurance status
- **Target:** Provide non-medical rides for at least 100 individuals to/from healthcare appointments by June 30, 2025
- **Strategy:** Establish a Rides to Wellness program for Ontario
- **Focus Population:** Individuals with socioeconomic limitations needing non-medical rides to healthcare appointments