

# IMPLEMENTATION PLAN

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*Addressing Community Health Needs*



*Circle, Montana*

*2020-2023*

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## The Implementation Planning Process

The implementation planning committee – comprised of McCone County Health Center’s (MCHC) leadership team– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The CHSD community health needs assessment was performed in the Spring of 2020 to determine the most important health needs and opportunities for McCone County, Montana. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 11 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website [www.mcconehealth.org](http://www.mcconehealth.org).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise (see page 9 for additional information regarding input received from community representatives).

The implementation planning committee reviewed the priority recommendations provided by the community steering committee and determined which needs or opportunities could be addressed considering MCHC’s parameters of resources and limitations. The committee then prioritized the needs/opportunities using the additional parameters of the organizational vision, mission, and values, as well as existing and potential community partners. Participants then created a goal to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e. staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures).

The prioritized health needs as determined through the assessment process and which the facility will be addressing relates to the following healthcare issues:

- **Mental and behavioral health**
- **Access to healthcare services**
- **Health, wellness, and prevention**

In addressing the aforementioned issues, MCHC seeks to:

- a) Improve access to healthcare services
- b) Enhance the health of the community
- c) Advance medical or health knowledge



**Mission:** McCone County Health Center is dedicated to providing our residents and patients with optimal and achievable health care services, implementing programs and services that will provide for the overall health and well-being of its service area, and centralize health care services.

**Implementation Planning Committee Members:**

- Nancy Rosaaen, Chief Executive Officer - McCone County Health Center (MCHC)
- Jacque Gardner, Office Manager – MCHC
- LaToya Gardner, RN, Director of Nursing - MCHC
- Bridget Schmidt, Activities Coordinator - MCHC
- Tami Gunsch, Dietary Manager - MCHC

## Prioritizing the Community Health Needs

The steering and implementation planning committees completed the following to prioritize the community health needs:

- Reviewed the facility's presence in the community (i.e. activities already being done to address community need)
- Considered organizations outside of the facility which may serve as collaborators in executing the facility's implementation plan
- Assessed the health indicators of the community through available secondary data
- Evaluated the feedback received from consultations with those representing the community's interests, including public health

### MCHC's Existing Presence in the Community

- MCHC provides lab services for the annual health fair which is hosted by McCone County Public Health Department.
- MCHC offers school physicals at a reduced cost each August in Circle and Richey.
- MCHC organizes and sponsors some community events. MCHC, McCone County Volunteer Fire Department and Redwater Valley Ambulance Service host a free community breakfast during Town & Country Day on an annual basis.
- MCHC staff members conduct presentations on healthcare topics at the Senior Center.
- MCHC provides opportunities for continuing community and profession education via the telemedicine network.
- MCHC loans out medical equipment at no cost to community members.
- MCHC may sponsor high school students for certain Area Health Education Center (AHEC) activities to build interest in healthcare professions.
- MCHC has developed programs that bring students into the facility: special needs students are able to volunteer at the facility and local students spend time with the Long-Term Care residents during the school year.
- MCHC may provide an annual scholarship to any high school graduate that has worked at MCHC and additional scholarship opportunities are available for community members and staff interested in pursuing or furthering their healthcare careers.
- MCHC is contracted through McCone County to provide meals through the Meals on Wheels program.

### List of Available Community Partnerships and Facility Resources to Address Needs

- The Montana Hospital Association (MHA) is a nonprofit organization whose members provide the full spectrum of healthcare services, including hospital inpatient and outpatient, skilled nursing facility, home health, hospice, physician, assisted living, senior housing and insurance services. Members range from the smallest critical access hospitals providing primary care services in Montana’s rural communities to the largest tertiary care hospitals in the state. MCHC is a MHA member.
- Billings Clinic and St. Vincent Healthcare deliver compassionate, quality care to the people of Montana and Northern Wyoming and Dakotas. In addition to primary care clinics in and around the Billings area, they offer several progressive specialty services.
- The Montana Rural Health Initiative (RHI) is managed through the Montana Office of Rural Health and Area Health Education Center (AHEC). RHI provides health wellness resources to rural and frontier communities through tool kits, program profiles and webinars.
- Healthy Lifestyles is a program available at Holy Rosary Healthcare in Miles City that utilizes a registered dietician and a certified athletic trainer to offer coaching support for individuals interested in losing weight, increasing physical activity, and decreasing risk factors for diabetes and cardiovascular disease
- The McCone County Public Health Department provides health and prevention services to the area.
- Billings Clinic provides educational resources and support services to MCHC.
- Holy Rosary Healthcare provides educational resources and support services to MCHC.
- Glendive Medical Center provides support services to MCHC.
- Montana State University Extension provides unbiased research-based education and information that integrates learning, discovery, and engagement to strengthen the social, economic, and environmental well-being of individuals, families, and communities.
- The Montana Office of Rural Health is dedicated to improving access to quality health care for rural Montana by providing collaborative leadership and resources to healthcare and community organizations.
- The McCone County Senior Center wishes to enhance the lives of senior citizens living in the community and serves as a gathering place for community members of all ages.
- McCone County has an Assisted Living facility.
- The Circle Chamber of Commerce & Agriculture organizes the annual Town and Country Day event in the community, as well as other events throughout the year such as Christmas in July, Garage Sale Day in June and July 4th fireworks. MCHC is a member.
- The Circle Chamber of Commerce & Agriculture and Economic Development Authority is a voluntary organization created to meet and advance the civic needs of the community.

- The Montana Health Network (MHN) is a consortium of healthcare organizations collaborating to develop products and services needed to make healthcare more stable, efficient and cost effective. MCHC is a MHN shareholder.
- The Eastern Montana Telemedicine Network (EMTN) is a consortium of not-for-profit medical and mental health facilities linking health care providers and their patients throughout Montana and Wyoming.
- The Great Northern Development Corporation (GNDC) provides grant and business development support and services to empower the Northeast Montana region to reach their economic goals.
- The Economic Development Administration (EDA) provides funding for local economic development planning, infrastructure for economic development projects, and capitalization of local and regional revolving loan funds for businesses.
- The Centers for Medicare and Medicaid Services (CMS) administers the Medicare, Medicaid and CHIP programs and is committed to strengthening and modernizing the nation’s health care system to provide access to high quality care and improved health at lower cost.
- The Eastern Montana Area Health Education Center (AHEC) is a part of a statewide network of Area Health Education Centers created to train, recruit and retain healthcare professionals in rural/frontier Montana. AHEC also provides pipeline programs for high school students to spark interest in pursuing medical careers and staying locally.
- MCHC collaborates with Rocky Mountain Health Network to provide billing and budget services.
- Big Sky Care Connect is designated by the State of Montana to develop and operate a statewide Health Information Exchange to provide a single on-ramp to various organizations that wish to share Electronic Protected Health Information. MCHC is a participant as of September 10, 2020.

## McCone County Indicators

### Population Demographics

- 97.2% of McCone County’s population white, .07% is American Indian or Alaska Native and 2.1% are other ethnicities
- 18.4% of McCone County’s population has disability status
- 22.5% of McCone County’s population is 65 years and older
- 11.4% of McCone County’s population has Veteran status
- 6.7% of McCone County’s population have not attended high school, 45.9% have high school degrees, 47.4% have a higher education degree

### Size of County and Remoteness

- 1,734 people in McCone County
- 0.7 people per square mile

### Socioeconomic Measures

- 2.0% of children live in poverty
- 7.7% of persons are below the federal poverty level
- 15% of adults (age<65) are uninsured; 15% of children less than age 18, are uninsured
- 4.2% of the population is enrolled in Medicaid

### Select Health Measures

- 30.4% of children (2-5 years of age) are considered overweight or obese
- 21% of the adult population report excessive drinking
- All Sites Cancer rate (per 100,000 population) is 308 compared to 441.6 for Montana and 444 nationally
- Unintentional Injury Death rate (per 100,000 population) is 57.1 compared to 41.3 for Montana and nationally
- 41% of adults living in frontier Montana report two or more chronic conditions
- Montana's suicide rate (per 100,000 population) is 22.5 compared to 13.9 nationally

### Nearest Major Hospital

- Billings Clinic in Billings, MT – 241 miles from McCone County Health Center

## **Public Health and Underserved Populations Consultation Summaries**

### Public Health

Sue Good – Director, McCone County Public Health Department  
Nancy Rosaaen – Chief Executive Officer, McCone County Health Center  
Kim Bradley – President & EMT, Redwater Valley Ambulance Services  
Tami Gunsch – Dietary Manager, McCone County Health Center  
Alan Stempel – Commissioner, McCone County & EMT, Redwater Valley Ambulance Service  
Keri Taylor – Lab Manager, McCone County Health Center & DES Coordinator, McCone County

March 3, 2020

- Physical inactivity rate may go down since we opened the fitness center.
- Our unsafe drivers in the community are scary. There are a lot of people that drive with their kids on their laps.
- Four-wheeler safety is an issue as well. I see lots of young kids riding without protection or supervision.
- Farm accidents are big. We are agriculturally based community, and it is a dangerous job. Since we have a high rate of people that drive without a seatbelt, that adds to it. The county has had a lot of vehicle ejections lately.
- Many people in the community only want to see our long-term provider, who has a long wait time to get an appointment. Typically, the other provider has same-day availability. It is also hard to keep new providers if they don't get to see anyone. That is not incentive for anyone to build a practice here. It is really an issue.
- Some of the providers that I see in Billings won't do telemedicine. It makes it a challenge when I have to drive to Billings for an appointment. It is frustrating when we are not able to utilize what we have here in the community.
- It wouldn't be a bad idea for the hospital to list of all the services in our community and advertise that in the community.
- Overall, we have too much drinking, not much exercising, and we eat the wrong things.
- Mental health is always a health concern, everywhere.
- There is a mental health provider that comes to school. But there isn't anything specifically for other community members around mental health. Our long-term PA does a lot, but it would be nice if there was another provider with a focus on mental health.
- We have nothing in the event of a crisis. We are not prepared for that.

Population: Low-Income, Under-Insured

Keri Taylor – Lab Manager, McCone County Health Center & DES Coordinator, McCone County  
 Alan Stempel – Commissioner, McCone County & EMT, Redwater Valley Ambulance Service

March 3, 2020

- Our unemployment rate is low, and we have job openings everywhere.
- One third of our students are on free and reduced lunches, so the higher income level is surprising to me.

Population: Seniors

Keri Taylor – Lab Manager, McCone County Health Center & DES Coordinator, McCone County  
 Nancy Rosaaen – Chief Executive Officer, McCone County Health Center  
 Patti Schipman – Director, McCone County Senior Center  
 Sue Good – Director, McCone County Public Health Department

March 3, 2020

- The interest in Meals on Wheels has decreased from three years ago. The interest ebbs and flows.
- Access to a pharmacy is a big concern in our community, especially among our seniors. Some of their prescriptions cannot be mailed and that is an issue. I often get asked to pick up prescriptions for other people.
- We have tried to meet all the goals to have hospice care here, sponsored by Glendive Medical Center. We have people that are performing the hospice care in the community, but it is not a designated hospice, so the medications aren't covered. This is a huge need in our community, and we are working on it.
- Our community is great. The public health home care for our seniors allows people to stay at home longer.
- A CNA goes into homes for blood pressure checks and things like that. Not skilled nursing, but just to help.

Population: Youth

Keri Taylor – Lab Manager, McCone County Health Center & DES Coordinator, McCone County  
 Kim Bradley – President & EMT, Redwater Valley Ambulance Services  
 Sue Good – Director, McCone County Public Health Department

March 3, 2020

- I am impressed with our high school degree completion rate.
- I didn't realize that our immunization rate is so low.
- Vaping has really dropped at the school over the last year. It was an epidemic, but the media coverage really helped to drop that. It was really good information for the kids to receive.
- We have kids in the 4th grade that are starting snus.
- Vaping in the junior high/ high school property has been a problem.
- We have a decent number of people in the community that don't vaccinate their children.

## Needs Identified and Prioritized

### *Prioritized Needs to Address*

1. Mental and behavioral health services and resources were discussed as a need in the community by the focus group participants.
2. 12% of respondents indicated they felt depressed on most days for 3 consecutive months.
3. Top health concerns included “Alcohol/substance abuse” (26.8%), “Depression/anxiety” (14.7%), and “Mental health issues” (9.6%).
4. Respondents indicated “Access to healthcare services” (57.7%) is the leading component of a healthy community.
5. 27% of respondents rated their health knowledge as fair or poor.
6. Top suggestions to improve the community’s access to health care included “Walk-In Clinic/Urgent Care (weekend hours)” (48.5%), “More primary care providers” (41.5%), “Telemedicine” (24.3%), and “More information about available services” (22.8%).
7. 31% of respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “Could not get an appointment” (32.5%), “Could not get an appointment with my provider of choice” (31.2%), and “Too long to wait for an appointment” (28.6%).
8. Focus group respondents discussed a need for additional senior services in the community. Specifically, transportation services, access to prescriptions, and home health services to help seniors with their medication.
9. Focus group participants indicated that pharmacy access is a significant concern.
10. Top desired local health service was pharmacy at 65.4%
11. 25% of respondents indicated that in the last year they had difficulty getting a prescription or taking their medication regularly. Top reasons included: “Mail-order prescriptions took too long” (40%), “Pharmacy did not have prescription when I arrived” (32.3%), and “It was too far to go” (21.5%).
12. Focus group respondents expressed a need for expanded telehealth services available locally to reduce travel burden.
13. 41% of respondents rated the general health of the community as “Somewhat healthy”.
14. Focus group participants indicated a desire for better access to year-round, low cost fitness opportunities.
15. Survey respondents indicated interest in the following classes or programs: “Weight loss” (30.9%), “Women’s health” (27.6%), and “Fitness” (27.6%).
16. Top health concerns in the community included “Overweight/obesity” (25.7%), “Heart disease” (24.6%), and “Diabetes” (21.3%)

***Needs Unable to Address***

*(See page 25 for additional information)*

1. Top additional senior services that survey respondents would like to see locally were: “Assisted living”, “Home health” and “In home personal assistance.”
2. Cancer was the top health concern at 41.2%.
3. Survey respondents felt that “More visiting specialists” (44.5%) would improve the community’s access to healthcare.

**Executive Summary**

The following summary briefly represents the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 11). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 15.

**Goal 1: Increase mental & behavioral health services in McCone County**

**Strategy 1.1: Expand/sustain available mental health services at MCHC**

- Continue to offer new onsite mental health services.
- Continue to offer pain management services and try to reduce travel for area residents by utilizing telehealth.
- Continue Integrated Behavioral Health (IBH) grant with Montana Health Network. IBH grant works to enhance patient access to mental health services utilizing mobile telemedicine and other resources.
  - Create a new social media outreach presence detailing IBH program. Continue to connect with other grantee partners on best practices and marketing resources.
- Explore opportunities to partner with local youth/schools to provide mental health programming (mental health 1st aid: <http://healthinfo.montana.edu/bhwet/trainings.html> )

**Goal 2: Improve access healthcare services in McCone County****Strategy 2.1: Improve knowledge of available primary care services at MCHC**

- Expand clinical rotation capacity to bring on physician assistant students.
- Create new provider (PA/PA student) welcome/outreach to introduce providers to community -continually utilizing Facebook and local newspaper.
- Expand clinic availability to include Urgent Care services two days a week.
- Create outreach and improve community knowledge of new Urgent Care services.

**Strategy 2.2: Improve community awareness of community transportation & pharmacy resources**

- Reach out to Senior center to learn of new transportation program. Work with partners to improve knowledge available services.
- Provide training to providers and nursing staff on available transportation/pharmacy resources in community.
- Continue working with CEOs from Eastern Montana CAHs and Montana Health Network to bring pharmacy services to our rural communities.

**Strategy 2.3: Improve community knowledge of available services via telehealth and other resources available through MCHC**

- Continue a dissemination/communication plan (include mental health, emergency mental health, all telehealth options).
- Continually develop community education regarding use and benefits of telehealth.
  - Develop a patient resources: i.e. how to see their specialists via telehealth at MCHC.

**Goal 3: Enhance health, wellness and prevention outreach in McCone County**

**Strategy 3.1: Grow MCHC’s presence in community as a source for health education, programs and resources**

- Implement a quarterly educational health topic (with providers or student PA) via newsletters, local newspaper, and/or MCHC Facebook Page (Might utilize CHNA report/infographic for ideas).
- Sponsor or co-host Studio U class/program for area residents.
- Develop a fitness challenge for area residents and MCHC staff by offering subsidized membership fee or month membership as prize.

**Implementation Plan Grid**

<b>Goal 1: Increase mental &amp; behavioral health services in McCone County</b>					
<b>Strategy 1.1: Expand/sustain available mental health services at MCHC</b>					
<b>Activities</b>	<b>Responsibility</b>	<b>Timeline</b>	<b>Final Approval</b>	<b>Partners</b>	<b>Potential Barriers</b>
Continue to offer new onsite mental health services.	Clinic, CAH, DON	Ongoing	CEO, Providers	EMTN, Fronter, Psychiatry, MHN	Resource limitations Financial limitations IT-technology
Continue to offer pain management services and try to reduce travel for area residents by utilizing telehealth.	CEO, Providers, management	Ongoing	CEO, Providers	MHN	Credentialing requirements
Continue Integrated Behavioral Health (IBH) grant with Montana Health Network. IBH grant works to enhance patient access to mental health services utilizing mobile telemedicine and other resources. <ul style="list-style-type: none"> <li>▪ Create a new social media outreach presence detailing IBH program. Continue</li> </ul>	CEO, Providers, DON, clinic, billing	ongoing	CEO Providers	IBH-MHN, Frontier, Psychiatry	Sustainability after grant ends, staff availability

to connect with other grantee partners on best practices and marketing resources.					
Explore opportunities to partner with local youth/schools to provide mental health programming (mental health 1st aid: <a href="http://healthinfo.montana.edu/bhwet/trainings.html">http://healthinfo.montana.edu/bhwet/trainings.html</a> )	School counselor, Office Manager, DON, providers	2021	CEO Providers, school	MORH/AHEC, Frontier, Psychiatry-MHN, EMMH	Resource limitations Financial limitations Scheduling conflicts
<p><b>Needs Being Addressed by this Strategy:</b></p> <ul style="list-style-type: none"> <li>▪ 1. Mental and behavioral health services and resources were discussed as a need in the community by the focus group participants.</li> <li>▪ 2. 12% of respondents indicated they felt depressed on most days for 3 consecutive months.</li> <li>▪ 3. Top health concerns included “Alcohol/substance abuse” (26.8%), “Depression/anxiety” (14.7%), and “Mental health issues” (9.6%).</li> </ul>					
<p><b>Anticipated Impact(s) of these Activities:</b></p> <ul style="list-style-type: none"> <li>▪ Increase access to mental health services</li> <li>▪ Decrease societal stigma associated with mental illness and substance use disorders</li> <li>▪ Build community capacity in addressing mental and behavioral health</li> <li>▪ Service, policy, and resource development</li> <li>▪ Increased community knowledge of resources</li> </ul>					
<p><b>Plan to Evaluate Anticipated Impact(s) of these Activities:</b></p> <ul style="list-style-type: none"> <li>▪ Monitor completion of tasks</li> <li>▪ Monitor number of behavioral health visits</li> <li>▪ Track volume of pain specialist patients</li> <li>▪ Track number of mental health trainings and educational opportunities held</li> <li>▪ Track implementation of new IBH model in clinic</li> </ul>					
<p><b>Measure of Success:</b> MCHC expands access to mental and behavioral health services through use of an Integrated behavioral Health program by 6/23</p>					

**Goal 2: Improve access healthcare services in McCone County**

**Strategy 2.1: Improve knowledge of available primary care services at MCHC**

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Expand clinical rotation capacity to bring on physician assistant students.	CEO	09/2020	CEO	University of Washington	Availability of Preceptors COVID-19
Create new provider (PA/PA student) welcome/outreach to introduce providers to community - continually utilizing Facebook and local newspaper.	CEO, Providers	Ongoing	CEO	Social media and local paper	Availability of Preceptors COVID-19
Expand clinic availability to include Walk-In Clinic services two days a week; and maybe Saturday mornings.	CEO, Office Manager, clinic, billing	2021	CEO and Board	N/A	Workforce limitations Financial Limitations Started Walk-In Clinic (2 days/week) on 11/1/2019 but ended 4/2/2020 due to COVID-19
Restart outreach and improve community knowledge of Walk-In Clinic services.	CEO, Office Manager, clinic, billing	2021	CEO	MCHC Facebook local newspaper	COVID-19

**Needs Being Addressed by this Strategy:**

- 4. Respondents indicated “Access to healthcare services” (57.7%) is the leading component of a healthy community.
- 5. 27% of respondents rated their health knowledge as fair or poor.
- 6. Top suggestions to improve the community’s access to health care included “Walk-In Clinic/Urgent Care (weekend hours)” (48.5%), “More primary care providers” (41.5%), “Telemedicine” (24.3%), and “More information about available services” (22.8%).
- 7. 31% of respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “Could not get an appointment” (32.5%), “Could not get an appointment with my provider of choice” (31.2%), and “Too long to wait for an appointment” (28.6%).

<p><b>Anticipated Impact(s) of these Activities:</b></p> <ul style="list-style-type: none"> <li>▪ Increase access to healthcare services</li> <li>▪ Increased community knowledge of services</li> <li>▪ Improved health outcomes</li> <li>▪ Service, and resource development</li> </ul>
<p><b>Plan to Evaluate Anticipated Impact(s) of these Activities:</b></p> <ul style="list-style-type: none"> <li>▪ Track access and access measures in subsequent CHNA</li> <li>▪ Monitor volume of primary and urgent care visits</li> <li>▪ New marketing materials are developed, and dissemination plan determined</li> </ul>
<p><b>Measure of Success:</b> MCHC healthcare access to include Walk-In Clinic hours again in 2021</p>

**Goal 2: Improve access healthcare services in McCone County**

**Strategy 2.2: Improve community awareness of community transportation & pharmacy resources**

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Reach out to Senior center to learn of new transportation program. Work with partners to improve knowledge of available services.	Activities, DON	Completed-ongoing	CEO	Senior Center	Bad roads, cost, non-handicap van, COVID-19
Provide training to providers and nursing staff on available transportation/pharmacy resources in community.	CEO, DON, Office Manager	Ongoing	CEO	Senior center and TBD	Cost, communication
Continue working with CEOs from Eastern Montana CAHs and Montana Health Network to bring pharmacy services to our rural communities.	CEO	Ongoing	CEO	Eastern Montana CAHs and Montana Health Network	Resource limitations Financial limitations

**Needs Being Addressed by this Strategy:**

- 4. Respondents indicated “Access to healthcare services” (57.7%) is the leading component of a healthy community.
- 5. 27% of respondents rated their health knowledge as fair or poor.

- 6. Top suggestions to improve the community’s access to health care included “Walk-In Clinic/Urgent Care (weekend hours)” (48.5%), “More primary care providers” (41.5%), “Telemedicine” (24.3%), and “More information about available services” (22.8%).
- 8. Focus group respondents discussed a need for additional senior services in the community. Specifically, transportation services, access to prescriptions, and home health services to help seniors with their medication.
- 9. Focus group participants indicated that pharmacy access is a significant concern.
- 10. Top desired local health service was pharmacy at 65.4%
- 11. 25% of respondents indicated that in the last year they had difficulty getting a prescription or taking their medication regularly. Top reasons included: “Mail-order prescriptions took too long” (40%), “Pharmacy did not have prescription when I arrived” (32.3%), and “It was too far to go” (21.5%).

**Anticipated Impact(s) of these Activities:**

- Increase access to healthcare and pharmacy services
- Increased community knowledge of services
- Improved health outcomes

**Plan to Evaluate Anticipated Impact(s) of these Activities:**

- Monitor transportation utilization
- Track pharmacy access measures in subsequent CHNA
- Outreach resources developed to educate community and MCHC staff of new transportation service

**Measure of Success:** McCone County residents and MCHC maintain access to a retail pharmacy through the Senior Center transportation program.

**Goal 2: Improve access healthcare services in McCone County**

**Strategy 2.3: Improve community knowledge of available services via telehealth and other resources available through MCHC**

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue a dissemination/communication plan (include mental health, emergency mental health, all telehealth options).	CEO, Providers, DON, Office	Started 09/1/2020	CEO	SCL Health and Frontier Psychiatry-MHN, MCHC providers	Resource limitations Workforce limitations, staff training, and communication/education

	Manager, nurses, clinic staff				of these services to all locums
Continually develop community education regarding use and benefits of telehealth. <ul style="list-style-type: none"> <li>Develop a patient resources: i.e. how to see their specialists via telehealth at MCHC.</li> </ul>	CEO, Providers, DON, Office Manager, nurses, clinic staff	Ongoing	CEO	SCL Health and Frontier Psychiatry-MHN, MCHC providers	Resource limitations Workforce limitations, staff training, and communication/education of these services to all locums, credentialing
<b>Needs Being Addressed by this Strategy:</b> <ul style="list-style-type: none"> <li>4. Respondents indicated “Access to healthcare services” (57.7%) is the leading component of a healthy community.</li> <li>5. 27% of respondents rated their health knowledge as fair or poor.</li> <li>6. Top suggestions to improve the community’s access to health care included “Walk-In Clinic/Urgent Care (weekend hours)” (48.5%), “More primary care providers” (41.5%), “Telemedicine” (24.3%), and “More information about available services” (22.8%).</li> <li>7. 31% of respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “Could not get an appointment” (32.5%), “Could not get an appointment with my provider of choice” (31.2%), and “Too long to wait for an appointment” (28.6%).</li> <li>12. Focus group respondents expressed a need for expanded telehealth services available locally to reduce travel burden.</li> </ul>					
<b>Anticipated Impact(s) of these Activities:</b> <ul style="list-style-type: none"> <li>Increase access to healthcare services</li> <li>Improved health outcomes</li> </ul>					
<b>Plan to Evaluate Anticipated Impact(s) of these Activities:</b> <ul style="list-style-type: none"> <li>Track telehealth service utilization before and after new communication plan</li> <li>Monitor reach of education materials to inform community about telehealth services</li> </ul>					
<b>Measure of Success:</b> MCHC sees more patients onsite through telehealth services by 2023					

**Goal 3: Enhance health, wellness and prevention outreach in McCone County**

**Strategy 3.1: Grow MCHC’s presence in community as a source for health education, programs and resources**

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Implement a quarterly educational health topic (with providers or student PA) via newsletters, local newspaper, and/or MCHC Facebook Page (Might utilize CHNA report/infographic for ideas).	CEO, Providers, nurses	started and ongoing	CEO	Social media	Resource limitations Workforce limitations
Sponsor or co-host Studio U class/program for area residents. Promotion via clinic and drawings at “All Staff Meetings”.	CEO, DON, Office Manager	2021	CEO	Studio U, social media	Resource limitations, Financial limitations
Develop a fitness challenge for area residents and MCHC staff by offering subsidized membership fee or month membership as a prize.	CEO, Office Manager, DON, Activities	2021	CEO	Studio U	Financial limitations

**Needs Being Addressed by this Strategy:**

- 13. 41% of respondents rated the general health of the community as “Somewhat healthy”.
- 14. Focus group participants indicated a desire for better access to year-round, low cost fitness opportunities.
- 15. Survey respondents indicated interest in the following classes or programs: “Weight loss” (30.9%), “Women’s health” (27.6%), and “Fitness” (27.6%).
- 16. Top health concerns in the community included “Overweight/obesity” (25.7%), “Heart disease” (24.6%), and “Diabetes” (21.3%)

**Anticipated Impact(s) of these Activities:**

- Increased community engagement in wellness activities
- Increased participation in health education offerings
- Empower community to make healthful lifestyle choices
- Improved health outcomes

**Plan to Evaluate Anticipated Impact(s) of these Activities:**

- Monitor current health and wellness programs in the community
- Track number and reach of the “quarterly health” outreach topics
- Track number of wellness/prevention educational opportunities offered to community members (in person and virtual)

**Measure of Success:** MCHC hosts community-wide fitness challenge at least once a year.

*Needs Not Addressed and Justification*

Identified health needs unable to address by MCHC	Rationale
1. Top additional senior services that survey respondents would like to see locally were: “Assisted living”, “Home health” and “In home personal assistance.”	<ul style="list-style-type: none"> <li>• A family in Circle has established an Assisted Living facility.</li> <li>• Glendive Medical Center provides home health services in McCone County.</li> <li>• McCone County Public Health Department and McCone County Senior Center provides “in home personal assistance”.</li> </ul>
2. Cancer was the top health concern at 41.2%.	<ul style="list-style-type: none"> <li>• Cancer services are not feasible due to limited workforce, population size served and cost of equipment at this time.</li> </ul>
3. Survey respondents felt that “More visiting specialists” (44.5%) would improve the community’s access to healthcare.	<ul style="list-style-type: none"> <li>• No space available for visiting specialists except via telehealth which is utilized.</li> </ul>

## Dissemination of Needs Assessment

McCone County Health Center “MCHC” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website ([www.mcconehealth.org](http://www.mcconehealth.org)) as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

The Steering Committee, which was formed specifically as a result of the CHSD [Community Health Services Development] process to introduce the community to the assessment process, will be informed of the implementation plan to see the value of their input and time in the CHSD process as well as how MCHC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in McCone County as MCHC seeks to address the healthcare needs of their community.

Furthermore, the board members of MCHC will be directed to the hospital’s website, [www.mcconehealth.org](http://www.mcconehealth.org), to view the complete assessment results and the implementation plan. MCHC board members approved and adopted the plan on **November 17, 2020**. Board members are encouraged to familiarize themselves with the need’s assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

Written comments on this 2020-2023 McCone County Health Center Community Benefit Strategic Plan can be submitted to:

Administration  
McCone County Health Center  
PO Box 48  
Circle, Montana 59215

Please contact MCHC’s CEO Nancy Rosaaen at (406)485-9981 or [nrosaaen@mcconehealth.org](mailto:nrosaaen@mcconehealth.org) with questions.